Information Memorandum Transmittal
Aging and People with Disabilities

DHS | Oregon Department of Human Services

Mike McCormick
Authorized signature

Number: APD-IM-19-083
Issue date: 10/29/2019

Topic: Other

Due date:

Subject: Additional APD-Specific Information about Authorized Representatives and Alternate Payees

Applies to (*check all that apply*):

- [ ] All DHS employees
- [x] Area Agencies on Aging: Type B
- [x] Aging and People with Disabilities
- [ ] Self Sufficiency Programs
- [x] County DD program managers
- [x] Support Service Brokerage Directors
- [x] ODDS Children's Residential Services
- [ ] Child Welfare Programs

- [x] County Mental Health Directors
- [ ] Health Services
- [x] Office of Developmental Disabilities Services (ODDS)
- [x] ODDS Children's Intensive In Home Services
- [ ] Stabilization and Crisis Unit (SACU)
- [ ] Other (*please specify*):

Message:

This transmittal is intended to expand on, and in some cases, correct the information found in APD-PT-19-009, APD-AR-19-026, and APD-IM-19-055. Please note that the Authorized Representative sections of the OSIPM and MSP manuals have been updated with the most current information, including the FAQ document. The Authorized Representative and Alternate Payee Coding document has also been updated and a copy is attached.

Q&A related to the mass-mailing of letters and MSC231 forms described in APD-IM-19-055

Q: What should APD/AAA branches do when they are notified by IRMS that an MSC231 was received and scanned into EDMS?

A: Treat them as if they arrived by mail to your office – make sure the MSC231s are completed and signed by both parties (which may include printing it out and

completing the client's portion if we designated the auth rep or alternate payee), make sure the auth rep/payee is coded in ACCESS/FSMIS/UCMS correctly per the coding guidelines, and narrating.

- Remember for alternate payees on medical cash-pay cases, this means making sure they are coded on UCMS correctly.
- For SNAP:
  - The auth rep must be coded on FSMIS
  - Alternate payees should be added to the EBT case and the payee issued their own EBT card – they should not be added to the FSMIS case

Note: Be sure to view all pages of the document, as IRMS will include additional notes or forms they receive with the MSC231.

Q: What if the form is only completed by the authorized representative because the Department (APD/AAA branch) designated the individual?

A: If the authorized representative designation is still appropriate, print out the MSC231, complete the client portion, check the box next to **Check here if department designated** (below the mailing address field), scan it back to the **Supporting Document** folder in EDMS, make sure the systems are coded appropriately per the coding guidelines, and narrate.

Q: Why are there other documents in the **Authorized Representative** folder in EDMS besides 231 forms?

A: IRMS will process all documents they receive as part of this process. If they receive the letter, one page of the form, anything – they scan and process that document.

Q: There is an MSC231 in the **Authorized Representative** folder in EDMS, but our branch office has not received an email from IRMS.

A: IRMS is currently working through a backlog. They received many of the forms at the beginning of the mailout and are trying to catch up as quickly as they can. They are holding off on emails notifying that the document has been processed until a full day of documents leave their system (for tracking purposes); however, this also results in a delay in feedback when the form is received. They will eventually send emails for all the forms they process.

Q: I received an MSC231 from my client but I'm not able to scan it into the **Authorized**

Representative EDMS location.

A: Documents can only be added to that location by IRMS and only during this mass mailing project, you should use the normal process for scanning MSC231 forms that are sent to or received from the APD/AAA directly (scan into **Supporting Document**).

Q: Do I have to notify IRMS if the form was sent to the branch instead of the address on the return envelopes?

A: No, just be sure to narrate in ACCESS that it was received and scan it into **Supporting Document** so that the authorized representative will not be removed prior to conversion. Also, make sure the MSC231 is completed and signed by both parties (which may include printing it out, completing the client's portion, and checking the **Check here if department designated** box if we designated the auth rep or alternate payee), make sure the auth rep/payee is coded in ACCESS/FSMIS/UCMS correctly per the coding guidelines, scan it to the **Supporting Document** folder in EDMS, and narrate.

- Remember for alternate payees on medical cash-pay cases, this means making sure they are coded on UCMS correctly.
- For SNAP:
  - The auth rep must be coded on FSMIS
  - Alternate payees should be added to the EBT case and the payee issued their own EBT card – they should not be added to the FSMIS case

Because it wasn't returned to IRMS, they will not notify any other associated branches, so you must check to see if there are other benefits administered by another branch (such as SNAP that may be with SSP or MAGI with 5503). If a case needs to be updated and there is no one in your office with access and training in the applicable system, send a copy of the MSC0231 to the appropriate branch or processing center using the following methods:

- Email SSP and APD/AAA offices at their case transfer email address
- To update records for APD/AAA clients who are also MAGI recipients, fax the MSC231 to branch 5503 at (503) 378-5628 along with a completed MEDC form

*Note: These instructions can be found in the **Authorized Representative** sections of the OSIPM and MSP manuals (OSIPM B.6 and MSP B.6)*

Q: Will IRMS narrate in Oregon ACCESS when they receive an MSC231?

A: No, they will only narrate if a letter is returned in the mail as undeliverable and they cannot locate an alternate address.

Q: Do I need an MSC231 for Oregon Project Independence (OPI) an/or Older American Act (OAA) benefits?

A: No, neither the term nor the definition of "authorized representative" is used in these programs, so the form is not needed.

Q: Many Community Developmental Disabilities Programs, Brokerages, and Children's Intensive In-Home Services case management entities are receiving calls about these letters and then calling the APD/AAA branch offices wondering what to do with them. What should we tell them?

A: It depends on who the APD/AAA eligibility worker works with to maintain OSIPM eligibility and/or who receives cash or SNAP benefits on the person's behalf. If there is an existing MSC231 on file, and no changes are requested to the authorized representative or alternate payee (if applicable), then the form should be completed by the same individuals who completed the previous form. It could be that the APD/AAA branch office designated the brokerage or the provider, in which case the brokerage/provider completes the representative portion and the branch office completes the client's portion and checks the **Check here if department designated** box when it is returned. If the individual has a legal guardian (not including a parent of a minor child, see below), and the guardian is the authorized representative, then the APD/AAA branch office must complete the client portion and the guardian completes the representative/payee section(s). If the guardian has appointed someone else, then the guardian completes the client section and the designee completes the representative/payee section(s).

Q: Many of the DD clients to whom the letters are addressed are children, some of whom are represented by a parent. Do they need to complete the MSC231?

A: First, a child cannot designate his/her own authorized representative, so a child should not complete the MSC231 under any circumstances. Second, the MSC231 form is only required when someone besides a natural or adoptive parent represents a minor child as the authorized representative. Many forms were mailed to children whose parents applied for them because staff have been trained to put the case in the child's name and list the parent as the authorized representative in ACCESS so the parent's information is retained. Also, forms were sent to providers of children receiving Children Room and Board payments (CRB) because the mailing address on the case must be the provider so that the room and board checks are mailed directly to them. Due to current system constraints, there is no way to have the checks mailed to

the provider and all other case-related paperwork mailed automatically to the parent or other authorized representative, which is why so many letters and forms were sent to providers. Once Integrated ONE is implemented, there will be a separate alternate payee module where a second mailing address can be captured for medical-related cash payments and everything else can be sent to the parent or authorized representative.

A child who is not represented by a natural or adoptive parent must have an authorized representative appointed for them by either a legal guardian (if the guardian will not be the authorized representative) or by the APD/AAA branch office (if the representative will be the guardian or other third party).   Again, in these cases, an older version of the MSC231 should have been completed previously and available to view for comparison.

If you have any questions about this information, contact:

Contact(s): APD Medicaid Policy	
Phone:	Fax:
Email: apd.medicaidpolicy@dhsoha.state.or.us	

Authorized Representative and Alternate Payee Coding Guidance
Updated 10/15/19

Table of Contents

Authorized Representatives for Individuals with Medical Benefits in ACCESS

Effective immediately:

- All authorized representative information for non-MAGI medical cases should be recorded in Oregon ACCESS on the **Contacts** tab. Specific instructions on how the information should be entered can be found under the System Coding section below.
- It is no longer necessary to remove authorized representative information from the UCMS screen in the **Auth Repr** field when integrating, especially for individuals receiving OSIPM on an open card
- If there is information in that field at the time of conversion to Integrated ONE, and the case in in non-cash-pay status (NCP), it will not be converted over to Integrated ONE, which is why it is very important to code authorized representatives in Oregon ACCESS

  *Important: Authorized representatives listed on **UCMS** for _1, _3, _4,and _5 cases in cash-pay status (CPA) will be brought over to the Alternate Payee module in integrated ONE at conversion.*

Alternate Payees for Individuals with Medical-Related Cash Benefits in ACCESS

Effective immediately:

- Alternate payees should be coded in the **Auth Repr** field on the **UCMS** screen for APD cases with medical-related cash payments (Program _1, _3, _4 cases with CPA case descriptor).
- If the individual receiving cash benefits does not have an alternate payee but has an authorized representative, <u>do not</u> code the authorized representative in the **Auth Repr** field on the **UCMS** screen, or the cash benefit check will be printed with the authorized representative's name
- Alternate payee information should also be entered on the **Contacts** tab in Oregon ACCESS as show below; however, alternate payees <u>must</u> also be added to the **UCMS** screen prior to the launch of the integrated ONE system or else the alternate payee will not be converted into the new ONE case. This could result in lost or misused benefits in instances where the individual is not able to manage his/her benefits. Information about how the information should be entered can be found under the System Coding section below.

Reminder: *Authorized representatives still listed on **UCMS** for _1, _3, _4, and _5, and cases will be brought over to the Alternate Payee module in integrated ONE at conversion.*

Application for NEW TEST / Case Nmbr: NX4221

| UCMS | CMUP/PCMS |

View: ● ACCESS ○ CMS

Auth Rep: R JOHNSON SANDERSON, MARTHA

Case Name: TEST, NEW
Res Str: 123 Address Street City: Salem St: OR Zip: 97301
Fips Cnty: 047 Tele: 000 000-0000 Send Mailing Address: ✔
Mail Str: City: St: Zip:
Prog: 4 Br: 3013 Case: NX4221 WCMI Case Stat: SCD: 8 Last Chg: 00/00/0000
Incm: NEW Req Date: 05/13/2019 Lang: EN Tot Rsrc: .00 Pre Pay: .00
Eff Date: 05/13/2019 # Hse: 01 # OHP: 00 Med prg/# OSP 01
Load: TR Serv Wkr:
Reas: Ntce: # ERDC: 00 Prnt: 943 Print: N
CC Wrk Hrs: 000 Pay Prf: Sch Hrs Actual/GC Hrs:
Ovp: .00 Prev Ovp: .00
Act Prov: TANF Sit End: 00/00/0000
APR: 00/00/0000 OHP Updt: Prem Stat: Waiv: Disq: Deny: End: 00-0000
Rvw: 05-2020 Pkt #: Medl Rvw: 99-9999 DD:
☐ NRD ☒ NFM

CASE UPDATED TODAY - SUSPENSE RECORD SHOWN

[Delete Transaction]

Authorized Representatives for Individuals Receiving SNAP, TANF, ERDC, REF(M)
Effective immediately:
- Only authorized representative information should be coded in the **Auth Repr** field on **FSMIS** or **UCMS**.
- Remove any alternate payees from **FSMIS** or **UCMS** the next time the case is updated.

  Important: Any alternate payees listed in the mainframe for these case types at the time of data conversion will be brought over to the authorized representative field in integrated ONE.

Alternate Payees for Individuals Receiving SNAP, TANF, or REF
Alternate payees should be added to the individual's EBT screen and issued their own EBT cards. They should not be added to **FSMIS** or **UCMS**. *Note: The ERDC program does not use alternate payees.*

Authorized Representatives for Individuals with Medical Benefits in ONE
Effective immediately:
- Adding a new Authorized Representative: Verification Date should be coded with the date the Authorized Representative verification was received. This data will be critical during Data Conversion.

- Confirming an existing Authorized Representative: When a new MSC231 is received naming an Authorized Representative who already exists on the case in ONE, add/update the Verification Date and remove middle initial and suffix (if present).
- See the **Authorized Representative Screens in ONE at Intake, Report a Change, and Non-Eligibility Update** on page 12 for more information

CODING INSTRUCTIONS AND EXAMPLES ARE SHOWN BELOW

System Coding - How to Enter Authorized Representative Name

Authorized Representative information must be entered <u>exactly the same</u> in every system (FSMIS, UCMS, ACCESS, and ONE) in order to be matched during Data Conversion. For individuals or organizations with names longer than the allowed character limit, the name must be truncated. The truncated name must be entered <u>exactly the same</u> in all systems.

<u>Individual Authorized Representative</u>
For all systems – FSMIS, UCMS, ACCESS, and ONE
- Maximum of 23 characters split between first and last name
- The 23-character limit does <u>not</u> count the comma and the space required in FSMIS and UCMS
- Special characters are not allowed (hyphens, apostrophes, periods)
- Do <u>not</u> include middle initial or suffix

For FSMIS and UCMS
- Enter a comma and space between the last name and first name. This will help distinguish the first and last names for data conversion

FSMIS: **Johnson Sanderson, Martha**

```
FSUP                         FastPath        EB         Next Code:
Case No:              Name: TEST, NEW                Br:        Reg: 3 Agy: AFS
Trans: adj              D-Eff: 050119                      Wrk Id:
Start Cert: 000000 Expr Cert: 000000 Reason:    Option:   Categ:    Lang:
Mand Rpt: N Form: N Rept: N Ben Per:     Rpt Exp:        Fil Dt: 000000 Pror
Rel ATP:    N/C Dollar Amount:        Ben MO-YR:      Cat El:      Prnt:
Tot Rsrc      .00 Authorization #        # To Be Replaced
 FilGrp 01 BenGrp: 00   Shelt:     .00 Util:    .00   Print Id:    Hold Cd:
Bypass:       Prg:    Meals:    Cnty:     HH Types:
Home Addr:                         City St:               Zip:
Mail Addr:                         City St:               Zip:
Auth Rep Cd: a Name:   Johnson Sanderson, Martha  Area Cd:    Phone:
Setup Date: 04/10/19 Orig Cert:   00/00/00 # Certs:    00              DD: N
HH Stat: PE Stat Reas:     Excp Reas: CRT Lst Actn: 04/10/19
Last Eff: 00/00/00          Last Oper Id:        Ovp Bal:
Pro Rata Amt:        Supp Amt:
Max Allot:     .00 30% NFSI:     .00 Ovp Recov:       Net Allot:     .00
Per    Tot EML Tot Oth Tot Comb Std D  EML Dis Net CC  Adj Inc SH Off N.F.S.I.
       .00      .00      .00     .00     .00     .00     .00     .00     .00
       .00      .00      .00     .00     .00     .00     .00     .00     .00
```

- UCMS: **Johnson Sanderson, Martha**
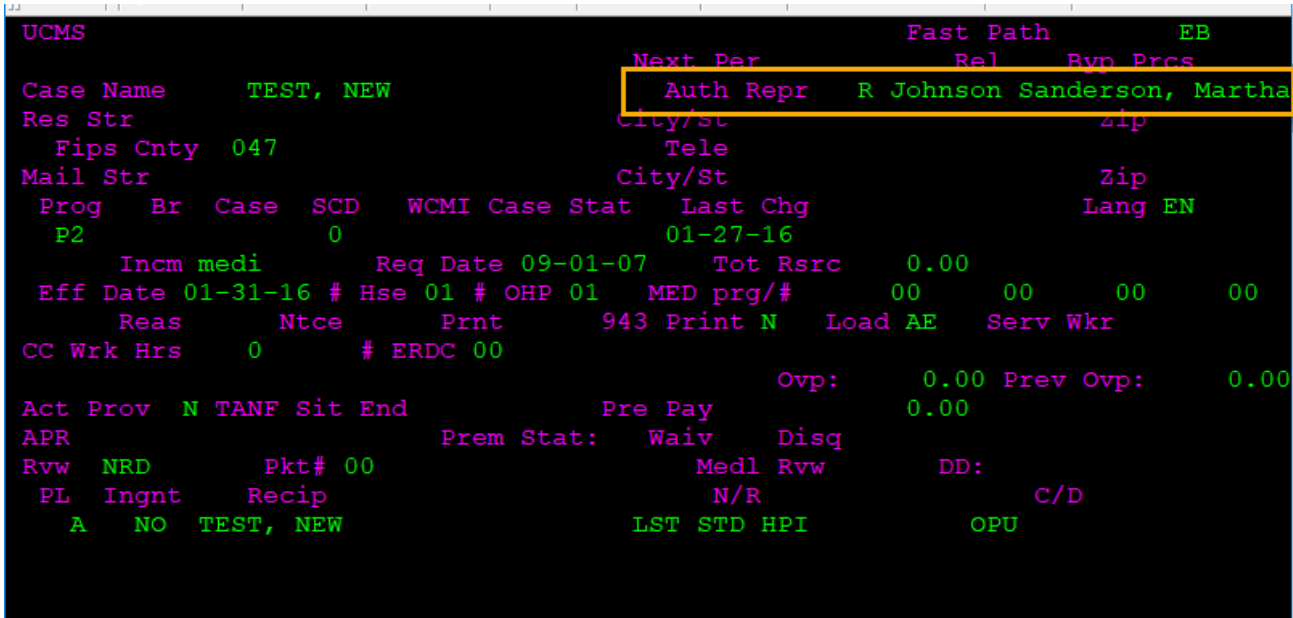
- Oregon ACCESS:
  - Last name: **Johnson Sanderson**
  - First name: **Martha**

- ONE:
  - First: **Martha**
  - Last: **Johnson Sanderson**

## Organization Authorized Representative

An organization authorized representative is a business, partner agency, facility, or non-profit that acts as an Authorized Representative. Sometimes employees of an organization will provide their name; however, the agreement to represent the client is made between the organization and the client, and liability may fall upon the organization in the event of an overpayment. Some examples of organization authorized representatives include drug and alcohol facilities, assisted living facilities, adult foster homes, contracted partners, private businesses, churches, etc.

FSMIS and UCMS:
- Maximum 20 characters to be coded as a first name
- Must start with "**Org**" to identity it as an organization for data conversion
- Special characters are not allowed (hyphens, apostrophes, periods)
- Examples
  - FSMIS: **Org, N Sunnyside Adult FH**

```
FSUP   FastPath   EB   Next Code:
Case No: Name: TEST, NEW   Br: Reg: 3 Aqy: AFS
Trans: adj   D-Eff: 050119   Wrk Id:
Start Cert: 000000 Expr Cert: 000000 Reason: Option: Categ: Lang:
Mand Rpt: N Form: N Rept: N Ben Per: Rpt Exp: Fil Dt: 000000 Pror
Rel ATP: N/C Dollar Amount: Ben MO-YR: Cat El: Prnt:
Tot Rsrc   .00 Authorization #   # To Be Replaced
 FilGrp 01 BenGrp: 00   Shelt: .00 Util: .00   Print Id: Hold Cd:
Bypass: Prg: Meals: Cnty: HH Types:
Home Addr: City St: Zip:
Mail Addr: City St: Zip:
Auth Rep Cd: a Name: Org, N Sunnyside Adult FH Area Cd: Phone:
Setup Date: 04/10/19 Orig Cert: 00/00/00 # Certs: 00   DD: N
HH Stat: PE Stat Reas: Excp Reas: CRT Lst Actn: 04/10/19
Last Eff: 00/00/00   Last Oper Id: Ovp Bal:
Pro Rata Amt: Supp Amt:
Max Allot: .00 30% NFSI: .00 Ovp Recov: Net Allot: .00
Per   Tot EML Tot Oth Tot Comb Std D EML Dis Net CC Adj Inc SH Off N.F.S.I.
         .00   .00   .00   .00   .00   .00   .00   .00   .00
         .00   .00   .00   .00   .00   .00   .00   .00   .00
```

o UCMS: **Org, N Sunnyside Adult FH**
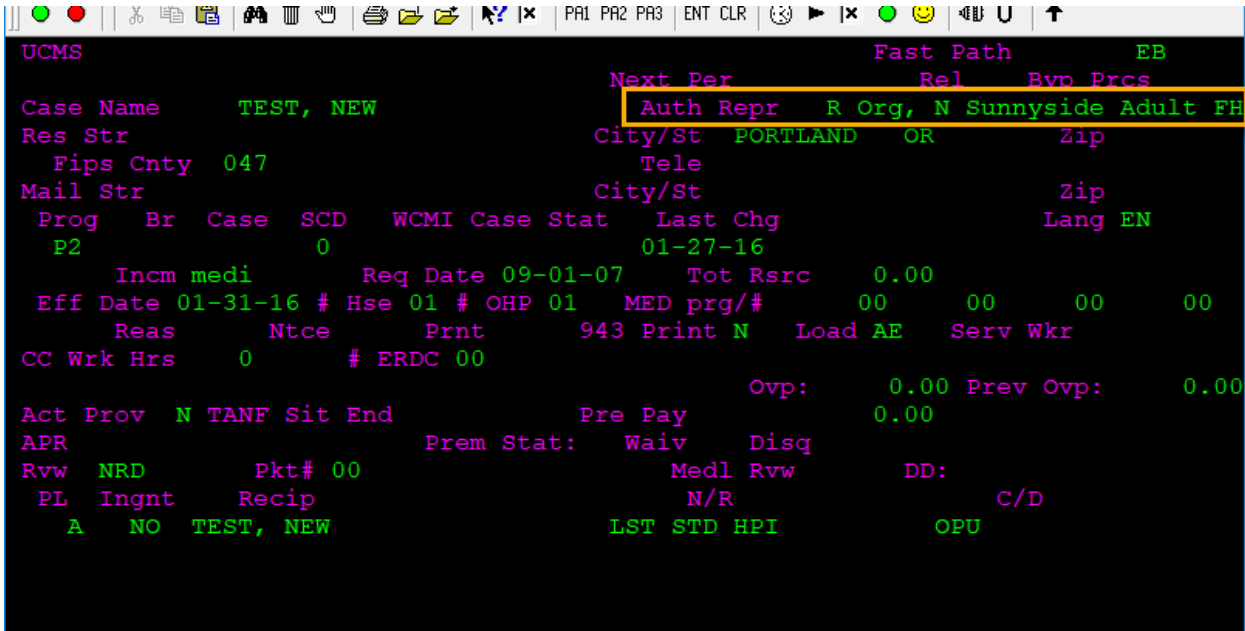


Oregon ACCESS
- Maximum 20 characters in **First Name** field
- **Last Name** must be "**Org**" to identify it as an organization for data conversion
- Special characters are not allowed (hyphens, apostrophes, periods)
- Example:
  o Last name: **Org**
  o First name: **N Sunnyside Adult FH**
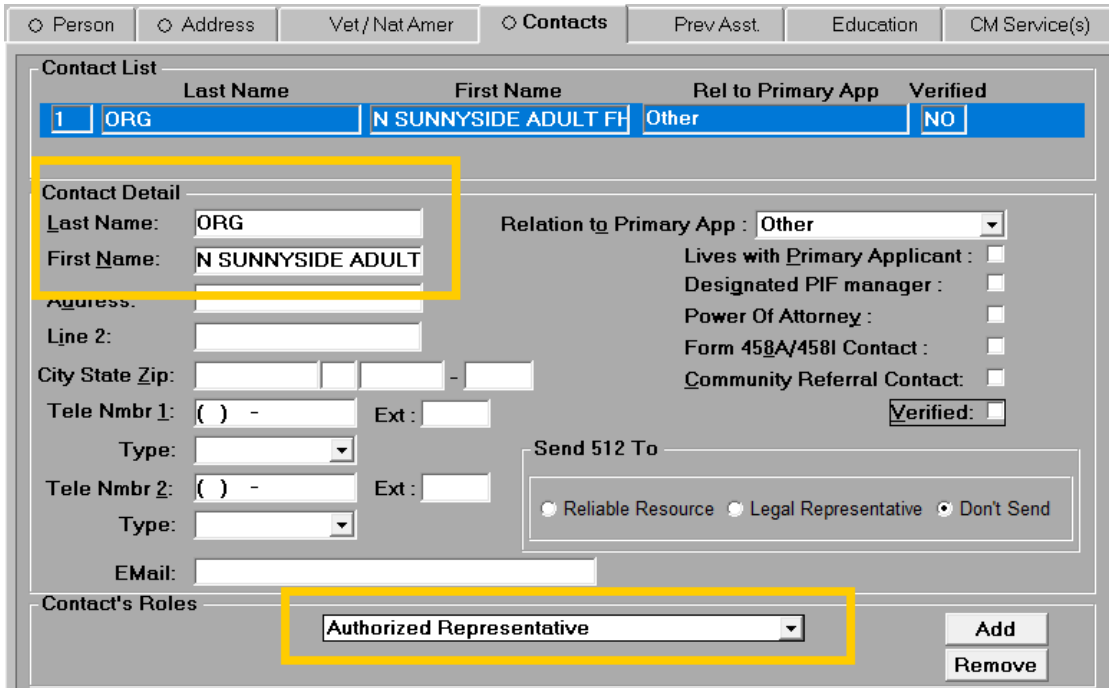
ONE
- Maximum 20 characters in **Organization Name** field
- No special characters (hyphens, apostrophes, periods)
- Example:
  - Organization name: **N Sunnyside Adult FH**

## System Coding - Coding the *Auth Repr* Field on UCMS and FSMIS

Non-MAGI (UCMS)
- Auth Rep code: NOT IN UCMS, CODE ON CONTACTS TAB IN ACCESS
- Alt Payee codes will result in the benefit check printing as follows:

| Code/Type | Check prints as follows |
|---|---|
| **G** Guardian | payee name FOR client name |
| **R** Representative payee | payee name REP client name |
| **F** All other payees | payee name FOR client name |
| **D** Dual Payee | DO NOT USE FOR MEDICAL CASES |

MAGI and MAGI/non-MAGI combo (UCMS)
- Auth Rep code: **R**
- Alt payee code: N/A

TANF (UCMS)
- Auth Rep code: **R**
- Alt payee code: N/A, stored in EBT

REF CASH V2(UCMS)
V2 will not be converted

ERDC (UCMS)
Auth Rep code: **R**
Alt Payee code: N/A

SNAP (FSMIS)
Auth Rep code: Any
Alt Payee code: N/A, stored in EBT

## Authorized Representative Screens in ONE at Intake, Report a Change, and Non-Eligibility Update

### *At Intake*

*When a signed MSC0231 form is received with an initial application or at the time of intake, the authorized representative can be added to Worker Portal starting in Application Registration.

1. Application Registration > Application Registration screen:
    a. Upon beginning an application, the following questions are asked:
        i. "Would the client like to name an authorized representative or a person to consent to release?" ---- answer Yes
        ii. "Would the client like to name an authorized representative or a person to consent to release now?" ---- answer Yes

2. Application Registration > Application Registration Screen:
    a. Upon clicking 'Next', the Representatives screen will display.
        i. Complete the fields
        ii. Click 'Next'

3. Data Collection > Representative Screen:
   a. The Representative screen will be displayed again during Data Collection with pre-populated data based on what was entered during Application Registration. Edits can be made on this page, but four additional questions are asked on this screen which were not asked in the initial Representative screens:
      i. Verification (Client Statement, Court Documents, Power of Attorney Document, Not Verified, 2099 Verified, 231 Verified) – The Verification Type should be left as 'Client Statement' until the signed MSC0231 is received. *Do not use '2099 Verified' value on the Representatives screen.*
      ii. Verification Date (mm/dd/yyyy format) – enter the latter of the Client Signature or Authorized Representative Signature, it will be assumed that the new version of the MSC0231 is on file for any dates after 5/15/19.
      iii. 2099 Received (Same as Individual, Another Individual) – *answer Yes if signed MSC3010 (formerly DHS2099) has been received, but add the name and contact details in case notes*
      iv. Received Date (mm/dd/yyyy format) – can be entered to track an MSC3010 received, but name and contact details need to be captured in case notes only

## Non-Eligibility Update

*An Authorized Representative can be added in Worker Portal via Non-Eligibility Update.

1. Case Updates > Application Information screen:
   a. Upon performing a non-eligibility update, the following questions are asked:
      i. "Would the client like to name an authorized representative or a person to consent to release?" ---- answer Yes
      ii. "Would the client like to name an authorized representative or a person to consent to release now?" ---- answer Yes

Terms of Use | Privacy and Security | External Links | Welcome, Robert | Sign Out

Home   Application/Case   Inbox   Inquiry   Correspondence   Tools   Quick Search

Version : 1.0.0.0

< Back to Case Summary

**Case Updates**

- Application Information ✓
- Representatives
- Community Partner
- Racial/Ethnic Identity and Language ✓
- Contact Information ✓
- Address Match Associated Cases
- Non Custodial Parent Information
- Non Custodial Parent Relationship Information
- Voter Registration ✓
- Veteran Status ✓
- Enrollment Manager ✓
- Confirm Updates ✓

## Application Information 🖨 📄 ❓

| Applicant | |
|---|---|
| Would the client like to name an authorized representative or a person for* consent to release? | Yes ▾ |
| Would the client like to name an authorized representative or a person for* consent to release now? | Yes ▾ |
| Would the client like to name a Community Partner?* | No ▾ |

**Case:** 870603281

Case Program Status

| | |
|---|---|
| | Approved |
| | Active |
| Date | 4/26/2018 |
| Renewal Date | 3/31/2019 |

Household Members

| SARA SMITH | Primary |
|---|---|
| Age 39 | Sex Female |
| Individual # 560702067 | |
| SSN | |

| JOHN SMITH | Son |
|---|---|
| Age 39 | Sex Male |
| Individual # 560702068 | |
| SSN | |

Address
1234 ALDER
SALEM, OR, 97301

Contact Info
Phone 5033333333
E-Mail SARASHITH@YAHOO.COM

Next >

2. Case Updates > Representatives Screen:
   a. Upon clicking 'Next', the Representatives screen will display.
      i. Complete the fields

## *Report a Change*

1. Data Collection > Application Information screen:
   a. Upon clicking Report a Change, a user will be taken to the Application Information screen under the Data Collection tab. The following questions are asked:
      i. "Would the client like to name an authorized representative or a person to consent to release?" ---- answer Yes
      ii. "Would the client like to name an authorized representative or a person to consent to release now?" ---- answer Yes

2. Data Collection > Representatives Screen:
    a. Upon clicking 'Next', the Representatives screen will display. Complete the required fields, including the 'Verification Date'
        i. Verification (Client Statement, Court Documents, Power of Attorney Document, Not Verified, 2099 Verified, 231 Verified) – The Verification Type should be left as 'Client Statement' until the signed MSC0231 is received. *Do not use '2099 Verified' value on the Representatives screen.*
        ii. Verification Date (mm/dd/yyyy format) – enter the latter of the Client Signature or Authorized Representative Signature, it will be assumed that the new version of the MSC0231 is on file for any dates after 5/15/19.
        iii. 2099 Received (Same as Individual, Another Individual) – *answer Yes if signed MSC3010 (formerly DHS2099) has been received, but add the name and contact details in case notes*
        iv. Received Date (mm/dd/yyyy format) – can be entered to track an MSC3010 received, but name and contact details need to be captured in case notes only

< Back to Case Summary

**Case Updates**

- Application Information ✓
- Representatives ✓
- Community Partner
- Racial/Ethnic Identity and Language ✓
- Contact Information
- Address Match Assoc Cases
- Non Custodial Parent Information
- Non Custodial Parent Relationship Information
- Voter Registration ✓
- Veteran Status ✓
- Enrollment Manager ✓
- Confirm Updates

## Representatives 🖨 📄 ❓

### Authorized Representative/Authorized Person to Release Information

| | | | |
|---|---|---|---|
| First* | CLAY | Middle Initial | |
| Last* | SMITH | Suffix | ▼ |
| Relationship to Individual* | family membe ▼ | Organization Name | |
| Organization Identification # | | Level of Permission* | Standard (appl ▼ |
| Verification* | 231 Verified ▼ | Verification Date | 05/15/2019 📅 |
| 2099 Received? | ▼ | Received Date | <mm/dd/yyyy> 📅 |

### Address Information

| | |
|---|---|
| Attention/Care of | |
| Address Line 1* | 123 4TH ST |
| Address Line 2 | |
| City* | SALEM |
| State* | OREGON ▼ |
| ZIP Code* | 97302 - |
| County* | MARION ▼ |

### Contact Information

| | Contact Method | | Phone Type | Voicemail | Texting |
|---|---|---|---|---|---|
| Primary Phone# | (503) 555-5555 | Ext. | Home ▼ | ☑ | ☐ |
| Secondary Phone# | <(xxx) xxx-xxxx> | Ext. | ▼ | ☐ | ☐ |
| Email | | | | | |

Preferred delivery method for correspondences — Paper ▼

Individual's Preferred Language* — English ▼

< Previous    Next >

Case: 870603281

Case Program Status
OHP — Approved
Case Mode — Active
Application Date — 4/26/2018
Renewal Date — 3/31/2019

Household Members

SARA SMITH — Primary
Age 39  Sex Female
Individual # 560702067
SSN

JOHN SMITH — Son
Age 39  Sex Male
Individual # 560702068
SSN

Address
1234 ALDER
SALEM, OR, 97301

Contact Info
Phone 5033333333
E-Mail SARASMITH@YAHOO.COM

### *Not naming an Authorized Representative NOW*

*While it's possible to answer questions as described below prior to collecting a signed MSC0231, it's not necessary to do so, nor is it needed for any specific system functionality. It's most advisable not to answer, "Would the client like to name an authorized representative or a person for consent to release now?" as "Yes" until the signed MSC0231 is received and you're ready to add the authorized representative to the case.

1. Data Collection > Application Information screen:
    a. Upon clicking Report a Change, you are brought into the Data Collection tab and on the Application information screen. The following questions are asked:
        i. "Would the client like to name an authorized representative or a person to consent to release?" ---- answer Yes
        ii. "Would the client like to name an authorized representative or a person to consent to release now?" ---- answer No

If you don't choose to name an Authorized Representative now, the authorized representative dropdown on the case summary page will be blank and can be completed later by navigating back to the Application Information page via Non-eligibility Update or Report A Change.