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TEMPORARY ADMINISTRATIVE ORDER
INCLUDING STATEMENT OF NEED & JUSTIFICATION

DMAP 2-2019

CHAPTER 410
OREGON HEALTH AUTHORITY
HEALTH SYSTEMS DIVISION: MEDICAL ASSISTANCE PROGRAMS

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ARCHIVES DIVISION
SECRETARY OF STATE
& LEGISLATIVE COUNSEL

FILING CAPTION: Aligning OAR 410-200-0111 re: Authorized Representatives with DHS OAR 461-115-0090

EFFECTIVE DATE: 03/01/2019 THROUGH 08/26/2019

AGENCY APPROVED DATE: 02/28/2019

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NEED FOR THE RULE(S):

The Integrated Eligibility (IE) ONE system, which is scheduled to begin roll-out in April, 2020, will only support one Authorized Representative per case. Because multiple DHS/OHA programs can exist on an IE ONE case, DHS is updating the Authorized Representative and Alternate Payee form (231) to ensure that proper permissions are obtained on the new version of the form as DHS cases are renewed each month over the course of the next year. If this is not completed, authorized representatives that are currently named to act on behalf of DHS/OHA clients cannot convert into the IE ONE system and be applied to multiple programs. DHS and OHA have coordinated efforts to update pertinent Authorized Representative rules which must be in place by 3/1/19 in order to ensure that there is time to complete a full year of renewals prior to IE ONE system implementation in order to update cases with proper Authorized Representative forms and permissions.

JUSTIFICATION OF TEMPORARY FILING:

The Authority finds that failure to act promptly will result in serious prejudice to the public interest, the Authority, and the Department of Human Services. Clients of DHS/OHA who require an authorized representative in order to interact with the agency could be impacted.

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE:

Integrated Eligibility ONE system decision and design documents, Integrated Eligibility ONE Project Management Center (PMC) item # 521567. This is available by contacting the Authority.

AMEND: 410-200-0111

RULE TITLE: Authorized Representatives

RULE SUMMARY: The Integrated Eligibility (IE) ONE system, which is scheduled to begin roll-out in April, 2020, will only support one Authorized Representative per case. Because multiple DHS/OHA programs can exist on an IE ONE case, DHS is updating the Authorized Representative and Alternate Payee form (231) to allow DHS/OHA to obtain updated permissions as cases are renewed each month over the course of the next year. If this is not completed,

authorized representatives that are currently named to act on behalf of DHS/OHA clients cannot convert into the IE ONE system and be applied to multiple programs. DHS and OHA have coordinated efforts to update rules pertaining to Authorized Representatives and Alternate Payees which must be consistent across agencies and programs and be in place by 3/1/19 in order to begin using the new 231 form for a full year of case renewals.

RULE TEXT:

(1) With the exception of individuals who are included in the household group solely because they are part of a tax-filers tax group (see OAR 410-200-0305), the following individuals may appoint an authorized representative on a form designated by the Agency:

- (a) The primary contact;
- (b) An individual age 18 or older who is included in the household group with the primary contact, head of household (see OAR 461-001-0015), or primary person (see OAR 461-001-0000), for all programs with which the primary contact, head of household, or primary person participates;
- (c) An individual given legal guardianship or power of attorney for an individual age 18 and older;
- (d) If the Agency has determined that an authorized representative is needed based on the individual's physical and mental ability to handle their own affairs, and an authorized representative has not been designated by the individual, the Agency may appoint one.

(2) The Agency shall accept an applicant or beneficiary's designation of an authorized representative via any of the following methods which must include either a handwritten or electronic signature of both the applicant or beneficiary and designated authorized representative:

- (a) The Internet;
- (b) E-mail;
- (c) Mail;
- (d) Telephonic recording;
- (e) In person; or
- (f) Other electronic means.

(3) Unless limited elsewhere in this rule, the authorized representative may do any of the following:

- (a) Serve as the authorized representative for all programs and benefits of the primary contact, head of household (see OAR 461-001-0015), or primary person (see OAR 461-001-0000), excluding Temporary Assistance for Domestic Violence Survivors (see OAR 461-135-1200) and long-term care services (see OAR 461-001-0000).
- (b) With the exception of the Authorized Representative designation form, complete, sign, and submit an application, renewal, or documents on the applicant's or beneficiary's behalf; and
- (c) Receive copies of the applicant or beneficiary's notices and other communications from the Agency.

(4) The following may not serve as an authorized representative:

- (a) An individual serving an Intentional Program Violation (see OAR 461-195-0601), unless the Agency determines no one else is available to serve as the authorized representative;
- (b) Homeless meal providers for homeless SNAP recipients;
- (c) An individual who presents a risk of harm to case individuals;
- (d) An individual who presents a conflict of interest;
- (e) An agency employee or an employee of a contractor who are involved in the certification or issuance processes for Agency program benefits may not act as an authorized representative without the specific written approval of a designated Agency official, and only if that official determines that no one else is available to serve as an authorized representative.
- (f) Retailers who are authorized to accept Department Electronic Benefit Transfer (EBT) cards may not act as an authorized representative without the specific written approval of a designated Agency official, and only if that official determines that no one else is available to serve as an authorized representative.

(5) An individual's long-term care services provider cannot serve as the individual's authorized representative for the administration of and application for long-term care services (see OAR 461-001-0015).

(6) The authorized representative must maintain the confidentiality of any information provided by the Agency regarding the represented individual(s).

(7) An individual ceases to be an authorized representative when:

(a) The represented individual notifies the Agency that the designation is terminated;

(b) The represented individual appoints a different authorized representative;

(c) The authorized representative informs the Agency that the designation is terminated;

(d) The Agency determines the authorized representative is no longer permitted to be the authorized representative; or

(e) There is a change in the legal authority upon which the individual or organization's authority was based.

(8) An authorized representative who knowingly misrepresents information provided to the Agency may be subject to overpayments (see OARs 461-195-0501 and 461-195-0541) in addition to other penalties:

(a) In group living (see OAR 461-001-0015) arrangements or substance use disorder (SUD) treatment centers, the facility may be prosecuted under applicable federal or state law.

(b) For other authorized representatives not covered by subsection (a) of this part, the Agency may prohibit the person from serving as a representative for one year.

(9) Conditions and requirements related to the designation and administration of authorized representatives described in OAR 461-115-0090 also apply to OCCS Medical Programs.

STATUTORY/OTHER AUTHORITY: ORS 411.402, 411.404, 413.042, 414.534

STATUTES/OTHER IMPLEMENTED: ORS 411.402, 411.404, 414.534, ORS 411.400, 411.406, 411.439, 411.443, 413.032, 413.038, 414.025, 414.231, 414.447, 414.536, 414.706