

**Information Memorandum Transmittal
Office of Self-Sufficiency Programs**



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Authorized signature

Number: SS-IM-10-010
Issue date: 08/21/2019
Due Date: 07/01/2019
Correction: 09/06/2019

Topic: Authorized Representatives

Subject: Mass mailing to individuals with an authorized representative

Applies to (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Area Agencies on Aging: Type B | <input type="checkbox"/> Health Services |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental
Disabilities Services (ODDS) |
| <input checked="" type="checkbox"/> Self-Sufficiency Programs | <input type="checkbox"/> ODDS Children’s Intensive In
Home Services |
| <input type="checkbox"/> County DD program managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input type="checkbox"/> Support Service Brokerage Directors | <input type="checkbox"/> Other (<i>please specify</i>): |
| <input type="checkbox"/> ODDS Children’s Residential Services | |
| <input type="checkbox"/> Child Welfare Programs | |

Message:

On March 1, 2019, the administrative rules for authorized representatives were changed for APD and SSP benefits. An individual designated as an authorized representative for one program is the authorized representative for all programs and benefits of the *head of household, primary person, or primary contact*, excluding the TA-DVS program and Long-Term Services and Supports eligibility and decision-making.

As individuals with designated authorized representatives or the authorized representatives renew or make contact with DHS or AAA offices, it is expected that they are being asked to complete the new [MSC0231](#) – *Authorized Representative and Alternate Payee* form – and that all cases held by those individuals are updated accordingly. Because not all cases will renew or have office contact before cases are converted into the integrated ONE system next year, active steps are also being taken to contact individuals about this change.

During the last week of September 2019, DHS will mail letters to all heads of household who have an authorized representative listed on one or more cases. For any individuals who have medical benefits in ONE, letters will be sent to both the individual and the authorized representative if we don't already have an updated [MSC0231](#) on file with a ONE verification date of 5/15/19 or later. For all other cases, letters will be sent to the mailing address on file. A copy of the [letter](#) is attached to this transmittal for reference.

Why did these rules/policies change? PLEASE NOTE THE MAILING AND DUE DATES HAVE CHANGED

As the Agency gets ready to roll out integrated ONE, data will need to be converted from current systems into the new system. To help create the smoothest transition possible, we need to align the authorized representative field and reaffirm that individuals understand how this decision may impact them and the benefits they receive.

What will the mailing include?

- A letter explaining the policy change and the need for the individual to complete an updated [MSC0231](#) form if they want to maintain their current authorized representative or name a new one.
- The [MSC0231](#) form and a self-addressed, postage-paid, pink return envelope.
- Instructions to complete and return the new [MSC0231](#) form by a due date of October 31, 2019 if they want to maintain the current or name a new authorized representative.
- Branch contact information will be included in the letters for individuals to call if they have questions. The phone number listed on each letter will be determined as follows:
 - If the individual receives benefits in an APD office, the APD branch number will be listed;
 - If the individual has a 5503 case only, the SSP Processing Center's number will be listed;
 - For all other cases the SSP branch number will be listed.

What happens when an individual responds to the letter?

As new [MSC0231](#) forms are received, Imaging and Records Management Services (IRMS) will save them to a unique location in the Electronic Document Management System (EDMS). They will be viewable within the “Authorized Representative” document query that has been placed within the “Case Information” sections of EDMS.

IRMS will also send an email from the Help.EDMS address to the branch Case Transfer address for each branch associated with the individual. The email will include instructions on how to locate and process the [MSC0231](#). When an [MSC0231](#) is received for an individual who receives medical benefits in ONE, a Miscellaneous Document task will be created.

What if an individual does not respond to the letter?

If the agency does not receive a new [MSC0231](#) by October 31, 2019, a centralized team of staff will remove the authorized representative(s) an individual has on their case(s) and contact the associated branches. **Note:** Authorized representatives will not be removed for SNAP individuals whose authorized representative is a Facility or Group Living Arrangement. See the *SNAP recipients living in a Facility or Group Living Arrangement* section of this transmittal for more information.

Before removing an authorized representative, the team will look in the following systems to see if a new form was received after 5/15/19:

- TRACS
- ACCESS
- ONE
- EDMS

What is the process for undeliverable mail?

Returned mail (undeliverable) for these letters will go to IRMS. IRMS will research systems to see if the agency has record of an updated address. If a new address is found, IRMS will re-mail the letter to the individual.

If no new address is found, IRMS will narrate in TRACS/Oregon Access that the [MSC0231](#) was returned as undeliverable and a new address could not be located. IRMS will also send an email to the associated APD and SSP branch offices' case transfer email address. For individuals who only receive medical benefits in ONE, an Undelivered Correspondence task will be created.

*This special process only applies to undeliverable mail from this mailing.

What should staff do?

- Review the following transmittals distributed earlier this year. These transmittals provide important information and instructions on how and when to ask for an updated [MSC0231](#) and what to do when a new form is received:
 - [APD-PT-19-009](#) and [SS-PT-19-003](#)
 - [APD-AR-19-026](#) and [SS-AR-19-009](#)
- Upon receiving a notification or task from IRMS based on a direct response from this mailing, **only add the authorized representatives to cases held in your office.** No notification to other offices is needed. However, it is very important to continue to notify and coordinate with other offices for all authorized representative changes that are received outside of this mailing process based on the previous transmittal guidance.
- Be prepared to answer questions about this change if an individual, or their authorized representative, contacts you about this mailing.
- Watch for email notifications to branch case transfer email addresses and for tasks in ONE and process them in a timely manner.
- Process undeliverable mail notifications according to the rules for the program the individual is receiving. Rules may differ between programs.

Remember: The authorized representative name must exist on all cases shared by the same head of household and be spelled exactly the same on each case in order to successfully convert over to the integrated ONE system next year. If all systems aren't in sync with a single name, the authorized representative will not appear on the integrated ONE case.

SNAP recipients living in a Facility or Group Living Arrangement

Form [DHS 222](#) is still the correct form for Facilities and Group Living Arrangements acting as an authorized representative for SNAP benefits. If an [MSC0231](#) is submitted by one of these organizations, please check to see if there is an updated [DHS 222](#) on file. If there is not a [DHS 222](#) signed by the organization's current representative, send them forms [DHS 210A](#) and [DHS 222](#), requesting completion of the [DHS 222](#).

If you have any questions about this information, contact:

Contact(s):

APD: apd.medicaidpolicy@dhsoha.state.or.us

Child Care: childcare.policy@dhsoha.state.or.us

Medical: occs.medicalpolicy@dhsoha.state.or.us

Refugee: refugee.policy@dhsoha.state.or.us

SNAP: snap.policy@dhsoha.state.or.us

TA-DVS: tadvs.policy@dhsoha.state.or.us

TANF: tanf.policy@dhsoha.state.or.us

Phone:

Fax:

Email: