

**County of Orange Social Services Agency  
Family Self-Sufficiency/Adult Services Division**

**Program/Area:** In-Home Supportive Services  
**Title:** **IHSS Authorized Representative**  
**Number:** 1003 Replaces SH 40.2.2  
**Effective Date:** 08/01/09  
**Approved:** Signature on File

**Status:** Final  
**Revision Date:** 1/10/2019

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**POLICY**

County IHSS program staff will use the IHSS [Designation of Authorized Representative SOC839 form](#), which is a required form, with no substitutes permitted. The form is available in three translated languages: Armenian, Chinese, and Spanish.

**Authorized Representative (AR)**

An applicant or recipient may designate an individual who is at least 18 years of age to serve as his or her IHSS AR. However, an individual determined ineligible to serve as an IHSS provider due to a criminal conviction as per WIC sections [12305.81](#) and [12305.87](#) may not be appointed or serve as the AR.

An AR is defined as an individual who is designated in writing, by an applicant or recipient to accompany, assist, and represent an applicant or recipient for specified purposes related to the program.

AR(s) are to act in the applicant or recipient's best interest as per and will not have any other power to act on behalf of the applicant or recipient, except as specified in writing on the [SOC839](#) and will not act in lieu of the applicant or recipient.

County IHSS program staff are required to have access to the applicant or recipient to obtain necessary information during assessments and meetings even in the presence of an AR. The county will not be prohibited from directly communicating with the applicant or recipient.

The applicant or recipient may cancel all IHSS functions that an AR may perform on his/her behalf by completing the [IHSS Cancellation of Authorized Representative SOC839A form](#) and submitting it to IHSS staff. The applicant or recipient may contact the IHSS office and verbally request an AR to be added or removed from his or her case, but the change in AR status will not be valid until the [SOC839](#) or [SOC839A](#) has been completed and received in by IHSS.

AR's that will not serve as the applicant or recipient's IHSS provider, will not be required to be fingerprinted for a background check, but will be required to acknowledge on the [SOC839](#) that he/she has not been convicted of any crime as stated in WIC section [12305.86](#).

If the AR is also the applicant or recipient's IHSS provider, he/she would be required to complete a criminal background check, and this AR provider may not sign his or

her own timesheet on behalf of the recipient unless the AR he/she is the applicant or recipient's legal representative.

[WIC section 12300.3\(c\)](#) states the [SOC839](#) form does not authorize an individual to represent an IHSS applicant or recipient for the purposes of a state administrative hearing. To designate an AR to act on an IHSS applicant or recipient's behalf at a state administrative hearing, the applicant or recipient is to complete and submit the [Authorized Representative DPA 19 form](#) in compliance with [WIC section 10950](#) regarding Hearings.

### **Legal Representative**

(WIC) section [12300.3\(e\)](#) defines a legal representative as an individual "with the legal authority to act on behalf of the applicant or recipient that includes decision making authority for purposes reasonably believed to be related to the program." The legal representative is a court appointed guardian or conservator, or for an applicant or recipient who is a minor, a parent or other individual determined by the county to be the legally authorized decision maker for the applicant or recipient and may also designate an authorized representative on the applicant or recipient's behalf.

The statute does not require verification of the legal representative's status to be presented to the county; however, the legal representative will indicate the basis for his/her status on the [SOC839](#) and by signing the form, acknowledges that the information presented is true and correct.

The applicant or recipient's legal representative is not required to complete a [Designation of Authorized Representative SOC839 form](#) except to sign timesheets and/or other provider related documents on the applicant or recipient's behalf.

A legal representative with a criminal conviction is not prohibited from serving as an applicant or recipient's AR, but he or she cannot be a paid provider unless [SOC862 Recipient Request for Provider Waiver](#) is submitted to and processed by IHSS/Public Authority.

### **Timesheet and/or Other Provider-Related Documents Signatory**

The [SOC839](#) includes a section in which the applicant or recipient may designate a separate AR for the purposes of signing timesheets and/or other provider-related documents.

If an applicant or recipient's legal representative is authorized to sign any provider-related documents, the legal representative must also complete Part C of the [SOC839](#). Provider related documents that the AR may sign include, but are not limited to the [IHSS Program Recipient Designation of Provider SOC426A](#), [IHSS Recipient Request for Provider Waiver SOC862](#), and the [IHSS Program Recipient and Provider Workweek Agreement SOC2256](#).

In addition to a Legal Representative, the [SOC862](#) waiver may also be signed by the applicant or recipient's spouse or registered domestic partner in some instances. This is applicable even if this individual is also the care provider, and/or the individual deemed ineligible to be a provider due to a Tier 1 or 2 criminal conviction or incarceration as specified in WIC section 12305.87.

In Orange County, the [SOC862](#) waiver form is processed by the Public Authority. By completing the waiver, the applicant, recipient, or Legal Representative acknowledges that he/she understands that the requested provider has been denied eligibility to be paid by the IHSS program due to a felony criminal conviction. However, despite this, the applicant or recipient accepts responsibility for his/her decision in hiring this provider and the possible risks involved in allowing the individual to work in his or her home as an IHSS provider.