

## **APPOINTING A REPRESENTATIVE**

### **What is an appointed representative?**

You, your prescribing physician, or someone you name may act for you to request a coverage determination or file a grievance or appeal. The person you name would be your "appointed representative." You may name a relative, friend, lawyer, doctor, or anyone else to act on your behalf. Other persons may already be authorized under State law to act for you.

If you want someone to act for you who is not already authorized under State law, then you and that person must sign and date a statement that gives the person legal permission to be your appointed representative.

You may use CMS' Appointment of Representative form (Form CMS-1696), which can be obtained by contacting Customer Service or you may download Form CMS-1696 from CMS' website <https://www.cms.gov/Medicare/CMSForms/CMS-Forms/downloads/cms1696.pdf> . You may also use an equivalent notice that satisfies the requirements of Form CMS-1696.

By signing the form, the representative shows his/her acceptance of being appointed as your representative. If any information is missing from the form, we will contact the individual attempting to act as your representative and provide a description of the missing information. Unless the missing information is provided, the representative does not have the authority to act on your behalf and is not allowed to receive any information related to your coverage determination, grievance or appeal, including the decision.