

## Chon Mwumwuta Authorized Representative

Emon Chon Mwumwuta epwe wisen kapas ika finata fan itomw nupwen ka apply ren aninis me ewe Department of Social and Health Services (DSHS) ika Health Care Authority (HCA). Ena aramas ika organization e tongeni wisen angang fanitomw non atun omw kopwe tungoren ika sossot ne angei tufichum. Ke tongeni finata ika pwe ka mochen emon chon mwumwuta, ika pwe kosap; iwe DSHS ika HCA rese pinei senuk omw kana aninis ika kose mochen sainei ei taropwe.

<b>Porausen ewe Chon Amasoua Ei Taropwe (Client)</b>			
ITOMW	NAMPAN OMW ACES ID		
<b>Porausen ewe Chon Mwumwuta</b>			
ITAN	ITEN ORGANIZATION ME DEPATMEN (IKA MEI WOR)	NAMPAN FON (AREA CODE)	
AN ADDRESS	SOPW	STATE	ZIP CODE
<b>Porausen ewe Program me Ukukun Tamen omw Nounoun Aninis</b>			
<p>Meeni me nein ekkei prokram (me fan) ke kan mochen noum na chon mwumwuta epwe anisuk ren ika kapas fanitomw won? Cheki meinisn ke kan mochen.</p> <p><input type="checkbox"/> Cash Benefits    <input type="checkbox"/> Basic Food Benefits    <input type="checkbox"/> Health Care Coverage    <input type="checkbox"/> Long-term Care Coverage</p> <p>Ika ka mochen ewe chon mwumwuta epwe wisen angang me kapas fanitomw, epwe ifa ukukun tamen?</p> <p><input type="checkbox"/> Ukukun 90 raan    <input type="checkbox"/> Tori omw certification epwe kauno (non 1 ier)</p> <p>Ika kose chiwen mochen an noum we chon mwumwuta epwe angang fanitomw, ke tongeni mwutauu, siwini, ika attaieno omw mwumwuta inet chok ka mochen, iwe rese tongeni pinei senuk met ekkewe aninis kekan peen angei seniir.</p>			
<b>Porausen Met Noum We Chon Mwumwuta Epwe Kuna/Resiif</b>			
<p>Kose mochen cheki met porausom ke mochen noum we chon mwumwuta epwe kuna ika resiif seni ewe depatmen.</p> <p><b><u>Ren Cash, Basic Food, Health Care Coverage ika Long-Term Care</u></b> <b><u>(cheki ew chok me nein ekkei ruanu pwor:)</u></b></p> <p><input type="checkbox"/> Uwa mochen epwe poporaus fengen me ekkewe chon angangen non DSHS/HCA, nge esapw chok kuna ekkoch kapin nei kewe taropwe seniir.....</p> <p><input type="checkbox"/> Uwa mochen epwe kuna nei kewe taropwe seni DSHS/HCA, o epwe pwan poporaus fengen me ekkewe chon angang faniten ai tufich ne angei aninis. ....</p> <p><input type="checkbox"/> Uwa mochen epwe kuna nei kewe taropwe me taropwen mina-sefani seni DSHS/HCA, o epwe pwan ..... poporaus fengen me ekkewe chon angang faniten ai tufich ne angei aninis .....</p> <p><input type="checkbox"/> Uwa mochen epwe kuna nei kewe taropwe, taropwen mina-sefani, taropwen momo, me ProviderOne cards seni DSHS/HCA, o epwe pwan poporaus fengen me ekkewe chon angang faniten ai tufich ne angei aninis .....</p> <p><b><u>Faniten Insurance ika Health Care Coverage (cheki meeni ka mochen, me fan:)</u></b></p> <p><input type="checkbox"/> Chon mwumwuta non Pioing – epwe kuna nei kewe taropwe me poporaus won ai tufich ngeni aninis</p> <p><input type="checkbox"/> “Sponsor” ika momoni ai kewe premiums. Iten me addressen ewe Sponsor e no ngeni ewe Office of Financial Recovery .....</p>			<p><b>FOR DEPARTMENT USE ONLY (AEAN DEPARTMENT CHOK)</b></p> <p><b>Rep Type</b></p> <p>NC</p> <p>NO</p> <p>AD</p> <p>NA</p> <p>HO</p> <p>SB</p>
<b>Mwumwutan ewe Chon Amasou</b>			
<b>SAINEN EWE CHON AMASOU (AN CLIENT SIKNACHER) PWININ MARAM</b>	MAKKEI ITOMW	NAMPAN FON (AREA CODE)	

**NENGENI:** Fan annukun HIPAA, ewe depatmen ese tongeni aea fengeni porausom me ekkoch ika kose mwo mwutata ngeniir, are ika kose mwo sainei ewe [DSHS 14-012, Consent form](#). Mei pwan pachanong porausen mental health, pwungun testen HIV/AIDS me STD, ika porausen och aninisn/treatment ren chemical dependency ika osukosuken sakau/drug.

### FOR DEPARTMENT USE ONLY (AEAN DEPARTMENT CHOK) INSTRUCTIONS

**Rep Type – ACES does not limit the Rep Type selections to the codes listed above. If a program requires a Rep Type not listed above or if one of the above codes is selected but is not appropriate for the situation (such as for a group home, protective payee, etc.) enter the appropriate program specific Rep Type on the AREP screen.**

