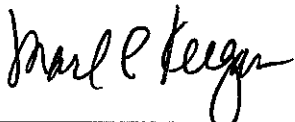


<b>Catholic Charities Disabilities Services</b>
<b>Agency Standard and Procedure</b>

<b>Standard Category</b>	<b>Residential</b>
<b>Standard Title</b>	<b>Determination of Representative Payee</b>
<b>Regulations</b>	<b>MHL 33.07 14 NYCRR 633.9 14 NYCRR 633.15 ADM 18-01</b>
<b>Original Issue Date</b>	<b>March 9, 2018</b>
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<b>Attachments</b>	
<b>Approved by:</b> <b>Mark Keegan, Interim Executive Director</b>	

**Standard:** Catholic Charities Disabilities Services (CCDS) will periodically make determinations of the need of an individual who resides in a CCDS residence to have a representative payee.

**Procedure:**

1. Service provision must not be contingent on the executive director becoming the individual's representative payee.
2. A determination of an individual's need for a representative payee must be made under the following circumstances:
  - a. When an individual moves into a facility;
  - b. When there is a significant change in the individual's physical or mental condition;
  - c. In response to a circumstance that affects the individual's ability to manage his or her benefits;

- d. Upon request of the individual or a party making a request on behalf of the beneficiary;
  - e. When an individual transfers from one certified residence to another.
3. If a determination needs to be made, the executive director in consultation with the individual's treatment team must conduct a review to determine whether the appointment of a representative payee to manage the individual's benefits is advisable.
  4. This determination must be made within ten (10) business days of the event that requires a determination be made.

#### **The Individual Does Not Have a Representative Payee**

1. If the individual does not have a representative payee, and the executive director and the treatment team question whether the individual is able to manage his or her benefits, then the individual must be evaluated by a health care professional,<sup>1</sup> who will determine whether the individual needs a representative payee.
2. If it is determined that the individual needs a representative payee, the executive director may apply to become the individual's representative payee.
3. If the health care professional determines that the individual can manage his or her benefits, then the executive director may not apply to become the individual's representative payee.

#### **The Individual Does Have a Representative Payee**

1. If the individual does have a representative payee, the executive director, in consultation with the individual's planning team, must conduct a review to determine whether there is a continuing need for the appointment of a representative payee for the individual.
2. If it is determined that the individual continues to need a representative payee, no further action is necessary.
3. If the executive director and/or the planning team determine that an individual may no longer require a representative payee, or are unsure, then the individual must be evaluated by a health care professional.
4. If the health care professional determines that the individual cannot manage his or her benefits, then the executive director should report this determination to the benefit-paying agency. The executive director may not apply to become the individual's representative payee.

5. The executive director must notify the benefit-paying agency of any change in representative payee status.
6. The basis for the determination must be documented in the individual's record.

**Notification**

Mental Hygiene Law § 33.07 requires the executive director, when applying to become representative payee to notify qualified parties including:

- a. The individual
- b. A guardian appointed under 17A of the surrogate's court procedure act, or a committee appointed under MHL
- c. The parent of a child, or guardian of a child, appointed under article 17 of the surrogate court procedure act or other legally appointed guardian of a child
- d. A parent, spouse, adult child, or adult sibling of an individual when the family member would otherwise be entitled to clinical records.
- e. Although not required by statute, notification will be given to a guardian appointed under Article 81.

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<sup>1</sup> Health care professional means physician, psychologist, or other qualified medical practitioner whose statement are acceptable to the benefit paying agencies for the purposes of determining the beneficiary's ability to handle his or her benefits.