



Many members like to have their spouse, child, or friend file an appeal or grievance or request prior authorization. We know that it is convenient to be able to rely on a trusted friend or relative for this type of assistance. If you would like to provide a friend or relative with permission to call and speak on your behalf, please complete the Appointment of Representative form.

Completing the attached Appointment of Representative form does not impact your ability to make your own healthcare decisions. It simply allows your representative to act on your behalf when filing an appeal or grievance or requesting prior authorization.

Below is a SAMPLE to help you complete the form on the next page.

TOP OF FORM

Name of Party: Please print your name.

Medicare Number or National Provider Number: Please enter your Aspire Health Plan member ID. This ID will start with a G.

SECTION 1: Appointment of Representative

To be completed by the party seeking representation (i.e., the Medicare beneficiary, the provider or the supplier):
I appoint this individual, SAMPLE , to act as my representative in connection with my claim or asserted

Enter **your** full address, including city, state, and zip. Enter **your** phone number with area code.

SECTION 2: Acceptance of Appointment

To be completed by the representative:
I, SAMPLE , hereby accept the above appointment. I certify that I have not been disqualified,

Authorized representative (friend/relative/spouse) enters his/her full address including city, state, and zip. he/she enters their phone number with area code.

SECTIONS 3 AND 4:

These sections do not need to be completed. These sections are used if a healthcare provider is acting as your representative.

Note: The Appointment of Representative is valid for 1 year from the signature date.
Set a reminder to request and complete a new form next year.

If you have questions or need help completing this form, call Member Services, toll free, at **(855) 570-1600**.

Aspire Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. We are open 8 a.m.–8 p.m. PT Monday through Friday from April 1 through September 30 and 8 a.m.–8 p.m. PT seven days a week from October 1 through March 31 (except certain holidays). H8764_MBR_AORCover_0320_C