

California Children's Services Grievance, Appeal, and State Hearing Fact Sheet

Do you have a concern or disagree with a decision made by the Department of Health Care Services' (DHCS) California Children's Services (CCS) program?
You have the right to file a CCS program grievance, appeal, or request a state hearing.

Grievance

You may file a grievance any time for concerns such as:

- » Coordination of your or your child's care, services, equipment, or appointments
- » Poor customer service
- » Discrimination against you or your child
- » Health information privacy
- » Quality of your or your child's care
- » Referrals for services
- » Scheduling appointments
- » Timeliness of service authorizations or CCS program eligibility decisions

Grievances are resolved within **30 calendar days**. If your grievance involves serious threat of harm, such as severe pain, or potential loss of life, limb, or major bodily function, they are resolved within **3 business days**.

Ways to File a Grievance

 Email		 Mail	
 Phone		 In Person	

Appeal

You may file an appeal with DHCS and/or the CCS program within **30 calendar days** from the date you receive written notice of a decision with which you disagree. You can file an appeal about:

- » A reduction or change of services
- » Requested services not being covered
- » A decision to end your or your child's CCS program eligibility
- » An increase in the amount to be paid to the CCS program

If the county CCS program needs additional information to make a decision, it must respond within **21 calendar days** of receiving the additional information. Appeal decisions will be sent to you within **21 calendar days** via a Notice of Action (NOA). This document is known as a First Level Appeal Response NOA and includes information about the denial (including the basis for the decision, related facts, and supporting law) as well as information for filing for a state hearing.

Continuation of Services: Families have the right to continue receiving previously approved CCS services during the appeal process. Continuation of services is not available for pending CCS program applicants, as they have not previously received CCS services. If families are interested in continuing their CCS services, they must include the request in their written appeal. If services are denied, reduced, or modified, members can receive the services previously approved for the duration of the appeal process or until there is a final decision in the matter. To continue your CCS services, submit a written or phone request to the county CCS program. This can be done by phone, email, mail, or in person. The county CCS program must acknowledge receipt of the request for continuation of services in the same manner it was submitted.

Note: A state hearing may be requested at any point in the denial process. A First Level Appeal is not required to file a state hearing request.

If you have Medi-Cal, you may ask the CCS program or Medi-Cal to continue your benefits or services until your appeal is resolved or you receive a decision after your state hearing. If you withdraw your request for an appeal, services will stop at that time. Your right to a state hearing is described below.

Ways to File an Appeal



State Hearing

If your appeal is denied and you disagree with the decision, you may request a state hearing within **120 calendar days** of receiving written notice of your appeal. State hearings are administrative hearings to resolve disputes between you and the agency denying the services in an impartial, independent, fair, and timely manner, ensuring that due process is met in accordance with federal and state laws. Families can choose how the hearing will be conducted when making the request. State hearings may be conducted by phone, video, or in person. At least two days before the hearing, the county, or DHCS, will provide the family with a statement of position document explaining the reason for the decision. At the hearing, the administrative law judge will allow both sides to explain their position, and the family will have an opportunity to present evidence, including testimony or letters from treating doctors.





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DHCS received a federal waiver to extend the timeframe for members to request a state hearing, allowing up to 120 days from the date when the NOA was mailed. This benefit will expire on October 31, 2024. In addition, the waiver provides for the continuation of CCS services to all members who request a state hearing within 120 days of the NOA. This benefit will end on March 31, 2025.

If you have Medi-Cal, you may ask the CCS program or Medi-Cal to continue your benefits or services until your appeal is resolved or you receive a decision after your State Hearing. If you withdraw your request for a state hearing or if there is a final hearing decision against you, services will be stopped at that time. Your right to a state hearing is described below. State hearing decisions will be sent to you **following the hearing**.

Ways to Request a State Hearing



 Phone	(800) 743-8525 (Voice) (800) 952-8349 (TDD)	 Mail	California Department of Social Services State Hearings Division P.O. Box 944243, MS 21-37 Sacramento, California 94244-2430
 Fax	(833) 281-0905	 Online	https://www.cdss.ca.gov/hearing-requests



CCS program, benefits, and other information is available on the DHCS website at <https://www.dhcs.ca.gov/services/ccs/Pages/default.aspx>.