```
California Code Of Regulations
|->
Title 22@ Social Security
|->
Division 3@ Health Care Services
|->
Subdivision 1@ California Medical Assistance Program
|->
Chapter 3@ Health Care Services
|->
Article 1.3@ General Provisions
```

CA

Section 51015.2@ Providers of Personal Care Services Grievance and Complaints

# 51015.2 Providers of Personal Care Services Grievance and Complaints

Notwithstanding Section 51015, when a provider of personalcare services has a grievance or complaint concerning the processing or payment of money for services rendered, the following procedures must be met:

## (a)

The provider shall initiate an appeal, by submitting a grievance or complaint in writing within 90 days of the action precipitating the grievance or complaint, to the designated county department identifying the claims involved and specifically describing the disputed action or inaction regarding such claims.

### (b)

The designated county department shall acknowledge the written grievance or complaint within 15 days of its receipt.

#### (c)

The designated county department shall review the merits of the grievance or complaint and send a written decision of its conclusion and reasons to the provider within 30 days of the acknowledgement of the receipt of the grievance or complaint.

### (d)

After following this procedure, a provider who is not satisfied with the decision by the designated county department may seek appropriate judicial remedies in compliance with Section 14104.5 of the Welfare and Institutions Code, no later than one year after receiving notice of the decision.