



California Children's Services Due Process Toolkit

IV. Appeals & Hearings

- A. Should a CCS Beneficiary Without Medi-Cal File an Appeal
- B. CCS Appeal Process for Beneficiaries Without Medi-Cal

IV. Appeals & Hearings

A CCS beneficiary should consider filing an appeal when they receive a denial of a request for a new CCS service or supply, a denial or reduction in CCS services or supplies they are currently receiving, or a delay in processing an approved service. A CCS beneficiary can also appeal a denial of a CCS application or a termination from the CCS program if they think the decision is incorrect.

The CCS appeal process is different for CCS beneficiaries *without* Medi-Cal and CCS beneficiaries *with* Medi-Cal. As previously mentioned, federal Medicaid rules provide stronger protections to CCS beneficiaries *with* Medi-Cal. So, if a CCS beneficiary has both CCS and Medi-Cal, then Medi-Cal rules must apply instead of CCS rules. For example, if there is a longer appeal timeline under Medi-Cal, the CCS beneficiary with Medi-Cal is entitled to the longer Medi-Cal timeline instead of the shorter CCS timeline.

Generally, CCS beneficiaries without Medi-Cal follow the CCS appeal process in Section IV(B) below. CCS beneficiaries with Medi-Cal have all the appeal rights in Section IV(B), as well as all of the Medi-Cal appeal rights in Section IV(C).

A. Should a CCS Beneficiary Without Medi-Cal File an Appeal?

A CCS beneficiary without Medi-Cal should consider filing an appeal when the CCS program terminates or changes their enrollment in the program or takes a negative action against certain CCS services or supplies.

There are limited situations when a CCS beneficiary *cannot* file a CCS appeal.²⁷ If the beneficiary's CCS physician decides that in their professional judgment the CCS beneficiary's treatment should end or change, the CCS beneficiary cannot file an appeal through the CCS program. In this situation, CCS must provide the beneficiary and their family with an independent evaluation at no cost to them. The CCS program must send the beneficiary a list of three expert physicians to choose from to evaluate the beneficiary. The decision of the independent evaluation is final.²⁸ This does not apply if a CCS beneficiary is also enrolled in Medi-Cal.



Advocacy Tip: If you receive a written notice that the CCS program is taking an action that you disagree with, keep it for your records. The information in the notice will help you with your appeal, even if the information in the notice is incorrect. If the CCS program fails to send a notice, you can still file an appeal.

B. CCS Appeal Process for Beneficiaries Without Medi-Cal

CCS beneficiaries should be aware of the different stages of the CCS appeals process. The appeal rights discussed in this section apply to CCS beneficiaries without Medi-Cal. The first level appeal is an optional step for beneficiaries who elect to use it, but it is not required. **Note:** CCS beneficiaries with Medi-Cal who are not in a Whole Child Model county can also use this appeals process or can go directly to the State Fair Hearing process described in Section IV(C) below.

²⁶ 22 CCR § 42140.

²⁷ 22 CCR § 42140(b) explaining that the CCS program does not need to grant an appeal if the sole issue is one of federal or state law requiring an automatic change that impacts all, or some, CCS beneficiaries.

^{28 22} CCR § 42140(a).

i. First Level Appeal

Once the CCS beneficiary receives a written notice that denies a CCS application, denies or reduces a CCS service, or delays access to a CCS service or supply, the CCS beneficiary has **thirty (30) calendar days** from the date of the Notice of Action (NOA) to request an appeal. This is called the First Level Appeal.²⁹ This provides an opportunity for the CCS beneficiary to share additional information to the county CCS program so that the county may reconsider its decision before moving forward with a State Fair Hearing. The CCS program must send a written First Level Appeal decision **within twenty-one (21) days** of receiving the First Level Appeal.³⁰ The appeal decision must include the reason for the decision, the facts the decision was based on, and supporting laws and rules.³¹



Advocacy Tip: A First Level Appeal does not need to be filed before requesting a State Fair Hearing. CCS beneficiaries can skip the First Level Appeal and file a State Fair Hearing if they prefer.³² Some families may try to resolve a CCS issue informally before going to a hearing. Other families may want to request a State Fair Hearing before an Administrative Law Judge (ALJ) instead.

ii. How to Ask for a First Level Appeal

To ask for a First Level Appeal, the CCS beneficiary must send a written appeal to the CCS office. If the CCS beneficiary is in an independent county, the First Level Appeal goes to the local CCS office. If the CCS beneficiary is in a dependent county, the First Level Appeal goes to the State CCS Regional office. The written appeal should include the reason the CCS beneficiary is appealing, information that supports the reason for the appeal, and what result the CCS beneficiary is seeking.³³ The First Level Appeal should include all relevant documents that support the appeal, such as letters of support from treating doctors, medical records, and nursing notes. If a CCS beneficiary asks the CCS agency for help with an appeal, the CCS agency is required to provide assistance to complete the request.³⁴



Advocacy Tip: Although the regulations require that a CCS beneficiary receives a First Level Appeal decision **within twenty-one (21) days**, this does not always happen on time. If the CCS beneficiary does not receive a response **within twenty-one (21) days**, they do not have to wait for the decision and can file a State Fair Hearing. (See Section IV(C)(iv) below on CCS State Fair Hearings).

²⁹ 22 CCR § 42160(a).

^{30 22} CCR § 42160(e).

³¹ 22 CCR § 42160(e).

³² 42 CFR § 431.220; Cal. Welf. & Inst. Code § 10950; See also Dep't of Health Care Srvs, CCS Numbered Letter 04-0424, CCS Program Appeals and State Hearing Process (June 3, 2024), https://www.dhcs.ca.gov/services/ccs/Documents/CCS-NL-04-0424.pdf p.4.

³³ 22 CCR § 42160(a), (b) & (c); see also Dep't of Health Care Services, CCS Numbered Letter 04-0424, (June 3, 2024), https://www.dhcs.ca.gov/services/ccs/Documents/CCS-NL-04-0424.pdf.

^{34 22} CCR § 42160(d).

iii. Requesting Aid Paid Pending

A CCS beneficiary can ask for CCS services to continue while the appeal is ongoing. This is called Aid Paid Pending (APP) and ensures that CCS beneficiaries can keep their CCS benefits and services while they go through the appeals process. In order to request APP, the CCS beneficiary must send an email to the Department of Health Care Services' (DHCS) Integrated Systems of Care Division (ISCD), Hearing and Appeals Unit (HAU) at ISCDHAU@dhcs.ca.gov and request "aid paid pending" or "continuation of services" and provide the beneficiary's name and CCS case number.



Advocacy Tip: If APP is granted during the First Level Appeal but the issue is not resolved during the First Level Appeal, the CCS beneficiary does not have to ask for APP a second time while they prepare for a State Fair Hearing. However, it is advisable to reach out to DHCS to confirm the request for APP.

iv. CCS State Fair Hearing

A CCS beneficiary has a right to request a State Fair Hearing if the First Level Appeal is denied or they do not agree with the First Level Appeal decision.³⁵ A State Fair Hearing is an informal hearing in front of an ALJ. At the hearing, a CCS beneficiary can explain why they disagree with a decision that the CCS program made and provide evidence to support their position. State Fair Hearings are administered by the California Department of Social Services (CDSS) State Hearings Division (SHD). A CCS beneficiary who does not have Medi-Cal has **fourteen (14) calendar days** from the date of the written First Level Appeal decision to request a State Fair Hearing.³⁶ The request must be submitted with a copy of the First Level Appeal decision.³⁷ A late request for a State Fair Hearing may be denied. If a CCS beneficiary misses the deadline to request a State Fair Hearing, they can still file for the hearing if they can show that there is good cause for late filing, such as because of severe illness or disability.³⁸



Advocacy Tip: The CCS appeals timeline for beneficiaries who do not have Medi-Cal is very fast. It is very important to pay attention to the deadline to request a State Fair Hearing and request it immediately; otherwise a late request may be denied. If a CCS beneficiary misses the deadline to request a CCS State Fair Hearing, they should argue that there is good cause for late filing. Examples of situations that may be considered good cause include hospitalization of the CCS beneficiary or a family member, a family emergency, or that CCS failed to send a written notice prior to the effective date of the negative action.

³⁵ 22 CCR § 42180.

^{36 22} CCR § 42180(a)(1).

^{37 22} CCR § 42180(a)(1).

^{38 22} CCR § 42180(b).

After the CCS program may still require more information. If this is the case, the CCS program must notify the CCS beneficiary **within fourteen (14) calendar days** from the date of the request. The CCS beneficiary will be given **fourteen (14) calendar days** after the date of the request to submit the additional information for the hearing.³⁹ If a State Fair Hearing request is accepted, State Hearings Division (SHD) must send written notice of the time and place of the hearing to each party **at least thirty (30) calendar days** before the hearing.⁴⁰



Advocacy Tip: If the CCS beneficiary did not receive a written notice or they receive it in less than ten (10) days when the change to their CCS benefits begins, the CCS beneficiary can still ask for an appeal and Aid Paid Pending (APP). Also, an appeal can still be requested if a notice was late, never sent, or the notice was faulty, for example, if it was missing required information. When the CCS beneficiary asks for the appeal, they will need to explain that they did not receive a written notice or that they received the written notice late. 41



Advocacy Tip: *All* CCS beneficiaries currently have a temporary extension to request a State Fair Hearing within 120 days. DHCS has not set a date when this temporary extension will end. Check any written notices for specific details on when the CCS beneficiary need to request an appeal.

v. How to Ask for a State Fair Hearing

As mentioned above, all CCS appeals are handled by the CDSS SHD. An appeal can be requested online, by phone, FAX, or in writing through the mail.⁴² As mentioned in Section IV(B)(i), CCS beneficiaries have the option to either file a CCS First Level Appeal or immediately file a request for a State Fair Hearing with the State Hearings Division.

Below are the different ways to file a State Fair Hearing:

Online: Create an ACMS account or submit an appeal without an account at https://acms.dss.ca.gov/acms/login.request.do or go to https://www.cdss.ca.gov/hearing-requests

By phone: Call State Hearings Division at 1-800-743-8525 or TDD 1-800-952-8349

By FAX: (833) 281-0905

By mail: California Department of Social Services

State Hearings Division P.O. Box 944243, Mail Station 9-17-442 Sacramento, CA 94244-2430

³⁹ 22 CCR § 42180(a)(2).

⁴⁰ 22 CCR § 42305.

⁴¹ 22 CCR § 42321.

⁴² See also cdss.ca.gov/hearing-requests.

Once the State Fair Hearing request is received, the CCS beneficiary has the right to request a telephone hearing, video hearing, or in-person hearing.⁴³ For more information about the CCS appeals process, see NHeLP's publication, *Helping Families Obtain Durable Medical Equipment and Supplies Through the California Children's Services (CCS) Program* and NHeLP's *Know Your Appeal Rights for the California Children's Services Program* fact sheet.

⁴³ Cal. Gov't. Code § 100506.4(h)(2); Cal. Dep't of Social Srvs, Manual of Policies and Procedures 22-045.1.