

**County of San Diego, Health and Human Services Agency (HHS)**  
**Eligibility Policy and Procedures Guide**

**State Hearing Rights and Procedures**

**Page**

**1 of 6**

**Effective Date:**

October 1, 2022

**Background:**

State regulations protect customer's rights to dispute any program requirements or case actions they believe to be in violation of, or inconsistent with, laws and regulations governing Self-Sufficiency Services (SSS) programs including CalWORKs, Refugee Cash Assistance (RCA), Trafficking and Crime Victims Assistance Program (TCVAP), CalFresh, Medi-Cal, and Cash Assistance Program for Immigrants (CAPI). Local programs such as General Relief (GR) and County Medical Services (CMS) have their own appeals process for issues not under the jurisdiction of the California Department of Social Services State Hearings Division (CDSS SHD).

**Purpose:**

The purpose of this material is to provide guidance and information regarding state hearing rights and procedures. This section has been created to consolidate all state and federally funded programs' hearing rights sections into one document. As a result, CalWORKs Program Guide (CPG) Section 10-030 *Participant's Rights*, CalFresh Program Guide (CFPG) Section 63-000 *Customer Service Complaints and State Hearings*, CAPI Program Guide 99-110 *Hearing and Appeal Rights*, and Medi-Cal Program Guide Article 18 are now obsolete. For policies related to GR, CMS, and Employment Services refer to GR Program Guide Section 90-900 *Hearings*, CMS Program Guide Article 12 *County Administrative Hearing Process*, CPG 10-030.H1 *Employment Services Grievances*, and CalWORKs Processing Guide 10-030.H1.

**Policy:**

A state hearing is a form of administrative hearing mandated by federal and state law where a dissatisfied customer may dispute an action or inaction and receive an impartial review of the county action. Once a request has been filed with the state, the process continues until the hearing has been decided or until the customer withdraws or abandons their hearing request, and all related compliance actions have been completed.

Whenever possible, disputes are to be handled at the lowest level. When disputes cannot be resolved by staff at the Family Resource Center (FRC), customers will be informed of their right to file for a state hearing as well as their other rights and responsibilities.

Customers have the right to:

- Receive adequate timely notice
- Ask for a state hearing
- Have their aid continue at the same level when the hearing is filed timely, unless prohibited by regulation or policy
- Have an Authorized Representative (AR) or legal representation present at the hearing.  
Customers may designate an AR with form DPA 19
- Request their aid to be reduced before the hearing determination to avoid a potential overpayment/overissuance
- Receive an underpayment/underissuance when determined during a hearing

**County of San Diego, Health and Human Services Agency (HHSa)  
Eligibility Policy and Procedures Guide**

**State Hearing Rights and Procedures**

**Page**

**2 of 6**

- Request a rehearing when they want to appeal a CDSS SHD decision

Customers are responsible for:

- Repaying any additional aid that they received during the hearing process
- Requesting a state hearing timely, within 90 days after the date of action or inaction with which the customer disagrees; the 90 days starts from the date the Notice of Action (NOA) regarding the county action was sent. Hearing requests received outside of the 90-day time frame

**Note:** Customer service complaints are not subject to the state hearing process. Refer to Eligibility Policy and Procedure Guide - Eligibility Customer Service Expectations Process and Survey.

**Procedure:**

**Filing Requests for State Hearing**

Eligibility staff have the responsibility to assist the customer in filing the request for a hearing when asked. Staff will attempt to answer any questions the customer may have about their case and explain the reason for the actions that are in question. Even when the actions taken by staff appear correct, based on the regulations, staff will not discourage the customer from seeking a review of the action through a state hearing.

Customers may ask for a hearing verbally or in writing by:

- Calling 1-800-952-5253 or for Telecommunication Devices for the Deaf (TDD) 1-800-952-8349
- Faxing the request to the county at 619-237-8465 or to the state at 1-833-281-0905
- Submitting an online request at: <https://acms.dss.ca.gov>
- Completing the back of the NOA and mailing it to the address on the back of the NOA or to any Self-Sufficiency Services Office

Note: If a hearing request is received at an address other than the appeals mailing address, staff are required to image the document into CalWIN Electronic Records Management (CERMs) and send the original document to the appeals mailstop W-402

**Pre-Hearing**

After the hearing is filed and before the state hearing, a representative from the county will be assigned as the Appeals Representative. They will review the case and notify the responsible FRC of required corrections for any errors discovered. The case will be reviewed by the staff as soon as possible, but no later than 10 days from the date of receipt of the pre-hearing review and notate their findings in Rushmore. See Appendix A for the appeals process workflow.

When a hearing has been requested, aid can still be increased, reduced, or terminated for reasons other than those under appeal. Current program regulations should be followed to adhere to Semi-Annual Reporting/Annual Reporting-Child Only (AR/CO) regulations, and adequate and timely notice rules. Any questions should be directed to the Appeals Representative.

**County of San Diego, Health and Human Services Agency (HHSa)  
Eligibility Policy and Procedures Guide**

**State Hearing Rights and Procedures**

**Page  
3 of 6**

Aid Paid Pending (APP)

When a customer files a request for a hearing, they may be entitled to receive a suspension of the county's proposed action until a state hearing is completed. APP will be determined by the Appeals Representative and may be approved when at least one of the following situations apply:

- A hearing request is filed before the effective date of the proposed action
- A hearing request is filed within 10 days of an adequate but untimely notice when timely notice was not required
- A hearing request is filed before the next date on which the proposed action could become effective if timely notice had been provided
- The agency provided an inadequate or no notice of the proposed action (when adequate notice was required)

APP issuances are processed by Service Desk staff and Quality & Eligibility Support Department (QESD) staff. APP terminations are to be processed by the office assigned the Out of Hearing Resolution (OHR). APP may not be initiated or discontinued without instructions from the Appeals Representative.

Conditional Withdrawal/OHR

Appeals Representatives have the authority to negotiate agreements to resolve the dispute without the need for a hearing. If the customer agrees to allow the County to take corrective action to resolve the disputed issue, they can enter into a conditional withdrawal (CWD). Once a CWD has been agreed to by both the customer and the County, the Appeals Representative will issue an OHR through Rushmore. The OHR are the compliance instructions for the CWD.

The OHR will outline:

- The issue(s) being disputed
- The action required for compliance and due date for the actions
- Why the action cannot be supported at hearing
- The state and county policies involved

Staff will take immediate action to comply with the OHR by the due date listed in Rushmore. Eligibility staff assigned to complete the OHR must ensure case comments are entered and all necessary documentation is in CERMS. If eligibility staff are unable to comply within the time allowed, the FRC appeals liaison must contact the Appeals Representative.

If the FRC disagrees with the directed action, the FRC appeals liaison will contact the assigned Appeals Representative to discuss and resolve the issue.

Responsible Office:

For a prehearing review/OHR/Final Decision, the appeals representative will determine the office responsible via the following criteria:

**County of San Diego, Health and Human Services Agency (HHS) Eligibility Policy and Procedures Guide**

**State Hearing Rights and Procedures**

<b>If the case status is</b>	<b>The responsible office will be</b>
Active	The current case carrying FRC (regardless of where the issue requiring attention originated)
Closed and the case needs to be reopened	The FRC to which the case was last assigned
Closed and the activity needed is calculation of overpayment/overissuance	Prehearing: Office who created the claim(s) Compliance: QESD

State Hearing

The Appeals Representative will present the county’s position during the state hearing and cross examine county witnesses. An ALJ is a representative of the state who is responsible for conducting the hearing. The ALJ will ensure that a customer who has filed an appeal receives an impartial hearing and will issue the final decision.

If the Appeals Representative determines that a Human Services Specialist’s (HSS’s) testimony is needed at the hearing, they will notify the appropriate departments requesting the HSS’s presence at the hearing providing the date, time, and place of the hearing. If the HSS believes that other HSSs were involved in the specific case action and are better qualified to testify at the hearing, the HSS will immediately notify their supervisor and the Appeals Representative.

State Hearing Decisions

A written decision will be received for all hearings. The decision prepared and adopted by the ALJ is not subject to review prior to issuance. Decisions are not precedent setting and will relate only to the issues raised with the specific case. The final decision may result in the following:

<b>Decision</b>	<b>Outcome</b>
Grant the claim	Rule in favor of the customer
Deny the claim	Rule in favor of the county
Grant in part and deny in part	Some issues found in favor of customer and some issues found in favor of the county
Dismiss the claim	No ruling made on disputed issue(s)

State Decision Compliance

When a hearing decision is received, the Appeals Representative will update Rushmore with the hearing decision and any follow up actions required. For instructions on where to access compliance instructions in Rushmore and to mark actions as complete refer to the Appeals Rushmore Desk Aid.

- For dismissed or denied claims, the follow up action may be to terminate APP if it was issued
- For granted or granted in part claims, compliance instructions including the due date will be issued. The compliance instructions are available in the Decision tab in Rushmore as well as in the Hearing Decision in CERMs.

If the FRC encounters any issues with meeting the due date on the compliance instructions, they must notify the Appeals Representative immediately.

**County of San Diego, Health and Human Services Agency (HHSa)  
Eligibility Policy and Procedures Guide**

**State Hearing Rights and Procedures**

**Page**

**5 of 6**

Abandonment of the Claim

When a customer fails to appear for the hearing, they are considered to have abandoned their claim. If they contact FRC/Access staff to request a reopening of their hearing, they must be referred to the State Hearing Division by any of the options below:

- Phone: 866-388-4427
- Fax: 833-281-0902
- Email: SHDCentralSupport@dss.ca.gov
- Online Appeals Account: <https://acms.dss.ca.gov/acms/>
- Mail: State Hearings Division  
338 Via Vera Cruz, Suite 280  
San Marcos, CA 92078

Re-Hearing

If a customer disagrees with CDSS SHD's decision, they can request a re-hearing by submitting a written request to State Hearings Division within 30 days of receiving the decision. Instructions for requesting a rehearing are included with their CDSS SHD decision. To assist the customer, staff can refer to the decision in CERMs to view the rehearing information.

**References:**

MPP 22-000

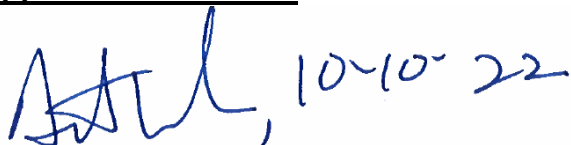
All County Letter No. 13-40, 14-14

Appeals Rushmore Desk Aid

**Sunset Date:**

This policy will be reviewed for continuance by October 31, 2025.

**Approval for Release:**



Rick Wanne, Director  
Self-Sufficiency Services

## Appendix A - Appeals Process Workflow

### PRE-HEARING REVIEW

Appeals Representative reviews for APP and notifies the FRC via Rushmore to conduct a pre-hearing review. Errors are to be corrected by FRC staff. Once the FRC has completed their pre-hearing review, they mark it as complete in Rushmore.

### PRE-HEARING CUSTOMER CONTACT

Appeals Representative contacts the customer to identify the disputed issue(s), reviews the case actions, evidence, and reviews applicable state and federal regulations and policies. Appeals Representative will explain the case actions and whether their findings indicate that the county actions were correct or not to the customer.

If the customer agrees with the Appeal Representative's findings, they may withdraw\* their appeal request or pursue their appeal request and attend a State Hearing

### STATE HEARING

Appeals Representative will attend the hearing and represent the county's position to the ALJ. The ALJ will hear the evidence from the customer and the appeals representative to reach a final decision.

### STATE HEARING DECISION

Appeals representative will receive the final decision from the state and will image the decision into the case record. If the claim is granted fully or in part, the appeals representative will enter the compliance instructions and/or other required actions into Rushmore and will designate a due date. The FRC will be notified via Rushmore when the compliance instructions have been issued.

If the claim is denied or dismissed the Appeals Representative will instruct the assigned office to stop APP

### COMPLIANCE

Once FRC staff have completed the action required by the compliance instructions, they are to mark the OHR or Decision (whichever is applicable for that case) tab in Rushmore as complete. The Appeals Representative will review the case action to ensure all requirements have been completed. If any further action is needed, the appeals representative will notify the appeals liaison at the FRC.

Once the Appeals Representative confirms all required action have been taken, they will mark the compliance as completed in Rushmore

\*If the customer accepts the conditional withdrawal offer, the appeals representative will enter the compliance instructions or OHR into Rushmore and will designate a due date. The FRC will be notified via Rushmore when the OHR has been issued.