The New Grievance Process

DDS Department of Developmental Services

Fall 2026



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Welcome

Understanding the New Grievance Process



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Overview

- New Grievance Process



- ✓ Why is the current complaint process changing?
- ✓ What is the current process?
- ✓ What is changing?
- ✓ What is not changing?
- ✓ What is the new process?
- ✓ Takeaways
- ✓ Questions?

Why is the current complaint process changing?



Why a New Grievance Process

- In 2024, the Centers for Medicare & Medicaid Services (CMS) published the final Ensuring Access to Medicaid Services Final Rule (Access Rule)
- The Access Rule requires states to establish a complaint HCBS grievance process by July 2026, to be enforced by CMS in December 2027
- The Access Rule requires states to oversee a 90-day grievance process and provide second level review of Regional Centers or a State Operated facility's resolutions upon request of the grievant



What is the Current Process?



What Is The Current Process?

4731 & Citizen Complaints

- Confusing when to use which form for which process
- Convoluted complaint process with several steps for RCs and the Department
- Resolutions focus on violations
- The Department focuses on formal response letters
- Records are released through a separate process
- No complaint process for individuals going through intake and eligibility
- No complaint process for issues with Home & Community Based Waiver compliance
- No complaint process for families, friends and community members with concerns







What is Changing?



What is changing?

NEW GRIEVANCE PROCESS

- ✓ No Wrong Door
- ✓ Available to individuals going through intake and eligibility
- ✓ Available to address issues with Home & Community-Based Services issues
- ✓ Resolutions focus on individual outcomes
- ✓ State level review is available for individuals who are not happy with the regional center or state operated facility resolution
- ✓ During state level review, the Department focuses on the regional center or state operated facility process and individual resolution
- ✓ Records are automatically provided to the grievant

What the New Process Changes

DDS is combining into one process:

- 4731 Individual Rights complaints
- Citizen complaints
- General complaints

What is Not Changing?

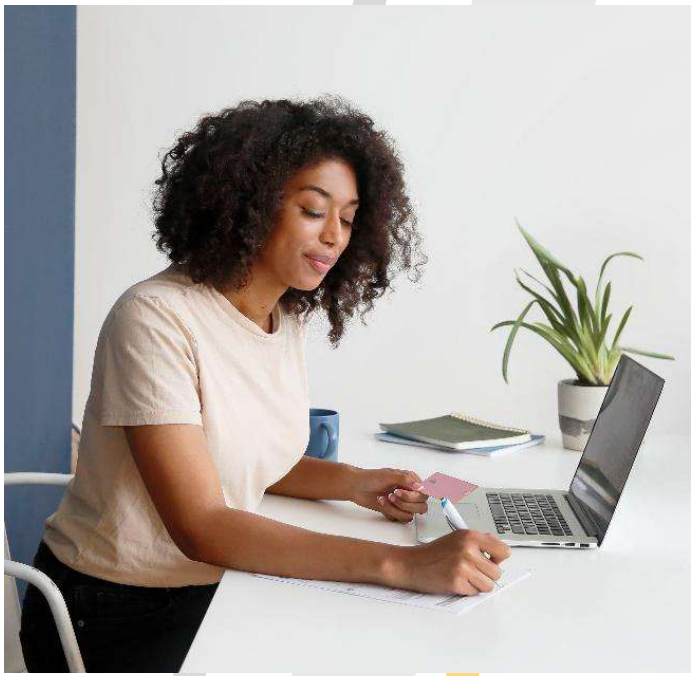


What Is Not Included?

It does not replace:

- Early Start State Complaint Process, Mediation, and Due Process
- Lanterman Service and Eligibility Appeals
- Whistleblower Complaints

What is the new process?



What Is the New Grievance Process?

- Streamlined process for all complaint types
- One form/One-Step complaint process
- Resolutions focus on individual outcomes
- The Department focuses on systemic issues and providing technical assistance
- Records are automatically provided
- Process is available for individuals going through intake and eligibility
- Process is available to address issues with Home & Community Based Waiver compliance
- Process is available to families, friends and community members with concerns



What Does the Grievance Process Cover?

Grievances may involve concerns or dissatisfaction with actions taken by a regional center, service provider, or state-operated facility related to:

- Individual rights,
- Person-centered planning, or
- whether residential settings meet Home and Community-Based Services program requirements



Who Can File a Grievance?

As of February 1, 2027, grievances may be submitted by:

- Individuals applying for or receiving services from a Regional Center or State-Operated facility
- Authorized representatives
- A person with written consent to file a grievance on behalf of an individual applying for or receiving services from a Regional Center or State-Operated facility
- A community member or concerned citizen



How to File a Grievance

- The Department has developed an online grievance portal that will allow individuals to submit grievances electronically.

- If an individual or their authorized representative submit a grievance directly to the regional center or state-operated facility, the Regional Center or State-Operated facility must input the grievance into the portal.

- The Department will enter all grievances it receives verbally, by mail, email or fax.

Timeline

DAY 1

Grievance submitted

DAYS 1-5

The Department reviews the grievance and gives it to the Regional Center.

DAY 5-65

The Regional Center assigns a reviewer and collects information from the grievant.

DAYS 5-8

The Regional Center gives records to the grievant.

Timeline

DAY 5-65

The Regional Center resolves the grievance and sends the resolution form to the grievant and the Department.

DAYS 65-95*

The Regional Center implements any agreed upon actions.

Timeline

DAYS 65 - 80

The grievant may request a state level review by the Department.

DAYS 80 - 90

The Department reviews the grievance and issues a written response.

Department Triage Responsibilities

- Within five days, the Department checks the submission to see if it is a grievance. If it is, they send it to the right regional center or state-operated facility to review and resolve it

- If the grievance shows serious harm or risk of serious harm—physical, emotional, or financial—the Department reports it to the right safety agencies and quickly sends it to the regional center or facility for action

- If the submission is not a grievance, the Department helps direct it to the right place. For example, if it's about eligibility or services, it goes to the Lanterman Appeals Unit, and the person who submitted it will be told about the transfer

Regional Center Responsibilities

When a Regional Center receives a grievance from the Department:

- The Regional Center or State-Operated facility assigns a grievance reviewer—an independent subject-matter expert not involved in the situation—to investigate and coordinate the resolution

- Within three business days, the grievant receives access to the case file at no cost

- Before issuing a resolution plan, the grievant must be given a chance to share evidence, information, or Testimony—in person, virtually, or in writing

- Within 60 Calendar Days, the grievance reviewer issues a written, signed resolution plan to the grievant, the Department, and any named service provider

Regional Center Responsibilities

- The resolution must fix the problem and help prevent it from happening again. All actions must be Person-Centered

- Possible resolution actions include:
  - Bringing together the planning team
  - Meeting with service providers
  - Sharing information or resources
  - Assigning a new service coordinator
  - Setting up regular communication or meetings with the Regional Center or facility

- If the resolution requires the regional center or facility to take action, they must start the actions as soon as possible, and no later than 30 days after the resolution is sent out

State-Level Review Responsibilities

- If the person who filed the grievance is not satisfied with the resolution, they can ask the Department for a State-Level review within 15 calendar days
- The request can be made in many ways: online, email, mail, fax, or phone
- The Department reviews the resolution plan to make sure all required federal parts are included
- For individual (case-specific) grievances, the Department checks that the resolution fits the person's unique situation
- For Systemic grievances, the Department checks that the resolution includes steps to prevent the problem from happening again

State-Level Review Responsibilities

- The Department does not re-investigate the grievance or accept new evidence during the State-Level review

- Within 21 days of the review request, the Department sends a decision to the grievant, the Regional Center or facility, and any named service provider

- The Department's decision May:
  - Approve the resolution plan
  - Send it back for revisions
  - Require corrective actions

Takeaways



Process Takeaway

The Department will:

- Review Data
- Provide technical assistance
- Consultation to the regional center
- Post Data on the Departments website Regularly



Questions

