



Michelle Baass | Director

February 2, 2026

VIA EMAIL ONLY

Joyita Garg  
Program Director & Vice President  
AltaMed PACE  
5425 E. Pomona Blvd.  
Los Angeles, CA 90022

RE: PACE program complaint

Dear Joyita Garg:

The Department of Health Care Services (DHCS) investigated Altamed Program of All-Inclusive Care for the Elderly (PACE) based upon a complaint DHCS received on August 8, 2025, regarding participant Maria Isabel Salazar. The alleged complaints include the following:

- Delay in services – tertiary care.
- Lack of adherence to PACE policies and procedures.

As a result of this investigation, DHCS has identified PACE programmatic deficiencies which have been noted on the enclosed Corrective Action Plan (CAP). These deficiencies require prompt remediation by Altamed PACE.

Pursuant to 42 Code of Federal Regulations §460.42, a CAP addressing the deficiencies must be reviewed and approved by DHCS. Please submit a completed CAP to [PACECompliance@dhcs.ca.gov](mailto:PACECompliance@dhcs.ca.gov) within 30 days of the date of this letter.

DHCS would like to thank you for your cooperation during this investigation. We acknowledge your continued efforts towards building relationships with PACE participants and ensuring appropriate care is provided.



Joyita Garg  
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If you have any questions or concerns, please contact Seema Massey, Nurse Evaluator, at [PACECompliance@dhcs.ca.gov](mailto:PACECompliance@dhcs.ca.gov).

Sincerely,

**ELECTRONICALLY SIGNED BY**

Kevin Phomthevy, Chief  
PACE Monitoring and Oversight Unit  
Office of Medicare Innovation and Integration  
Department of Health Care Services

Enclosure: Corrective Action Plan (CAP)

CC: Elva Alatorre, Chief  
PACE Branch  
Office of Medicare Innovation and Integration  
Department of Health Care Services

Nageena Khan, Chief  
PACE Section  
Office of Medicare Innovation and Integration  
Department of Health Care Services

Erika Origel, Chief  
PACE Contracts Management & Processing Unit  
Office of Medicare Innovation and Integration  
Department of Health Care Services

La Donna Christensen, Contract Manager  
PACE Contracts Management and Processing Unit  
Office of Medicare Innovation and Integration  
Department of Health Care Services

# ALTAMED PACE

## Corrective Action Plan (CAP)

Program Assurance	Findings	Provider's Plan of Correction
<p><b>§ 460.98 Service delivery.</b></p> <p>(c) Timeframes for arranging and providing services</p> <p>2) All other services. The PACE organization must arrange or schedule the delivery of interdisciplinary team approved services, other than medications, as identified in <a href="#">paragraph (c)(2)(i)</a> of this section, as expeditiously as the participant's health condition requires, but no later than 7 calendar days after the date the interdisciplinary team or member of the interdisciplinary team first approves the service, except as identified in <a href="#">paragraph (c)(3)</a> of this section.</p>	<p>PO failed to effectuate MD order, specialist treatment, consultation, and/or referral expeditiously for the participant.</p> <ol style="list-style-type: none"><li>1. Emergency department doctor's recommendation during post fall assessment on 5-8-25.</li><li>2. Stat CT head without IV contrast.</li></ol>	

Program Assurance	Findings	Provider's Plan of Correction
<p><b>§ 460.102</b> <b>Interdisciplinary team.</b></p> <p>(d) <b>Responsibilities of interdisciplinary team.</b></p> <p>(1) The interdisciplinary team is responsible for the following for each participant:</p> <p>(ii) <b>Coordination of care.</b> Coordination and implementation of 24-hour care delivery that meets participant needs across all care settings, including but not limited to the following:</p> <p>(B) Communicating all necessary care and relevant instructions for care.</p>	<p>PO failed to communicate with the participant or the daughter regarding:</p> <ol style="list-style-type: none"> <li>1. Delay in repair of broken motorized wheelchair.</li> <li>2. Delay in implementation of the home care hours.</li> </ol>	

Program Assurance	Findings	Provider's Plan of Correction
<p><b>§ 460.102</b></p> <p><b>Interdisciplinary team.</b></p> <p><b>(f)</b> Exchange of information between team members.</p> <p>The PACE organization must establish, implement, and maintain documented internal procedures governing the exchange of information between team members, contractors, and participants and their caregivers consistent with the requirements for confidentiality in § 460.200(e)</p>	<p>PO failed to follow its own policy for scheduling Stat CT head without IV contrast in a timely manner.</p>	



Michelle Baass | Director

February 24, 2026

VIA EMAIL ONLY

Joyita Garg,  
Program Director & Vice President  
AltaMed PACE  
5425 E. Pomona Blvd.  
Los Angeles, CA 90022

Dear Joyita Garg:

The Department of Health Care Services (DHCS) concluded its review of the Corrective Action Plan (CAP) submitted by AltaMed PACE on January 18, 2026. DHCS determined that the submitted document(s) addresses the deficiencies identified in the CAP and satisfies the Program of All-Inclusive Care for the Elderly (PACE) requirements. The CAP is attached to this letter for ease and allows AltaMed PACE to use as a reference document.

DHCS appreciates your assistance and commitment in providing quality care and oversight to our PACE participants.

If you have any questions or concerns regarding this letter, please contact Seema Massey, Nurse Evaluator, via [PACECompliance@dhcs.ca.gov](mailto:PACECompliance@dhcs.ca.gov).

Sincerely,

**ELECTRONICALLY SIGNED BY**

Kevin Phomthevy, Chief  
PACE Monitoring and Oversight Unit  
Office of Medicare Innovation & Integration  
Department of Health Care Services

Enclosure: CAP Grid

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cc: Elva Alatorre, Chief  
PACE Branch  
Office of Medicare Innovation & Integration  
Department of Health Care Services

Nageena Khan, Chief  
PACE Section  
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Leith Lombas, Specialist  
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