

**State of California  
Office of Administrative Law**

**In re:**  
Department of Health Care Services

**Regulatory Action:**

**Title 22, California Code of Regulations**

**Adopt sections:**

**Amend sections: 53626(a)**

**Repeal sections:**

**NOTICE OF APPROVAL OF CHANGES  
WITHOUT REGULATORY EFFECT**

**California Code of Regulations, Title 1,  
Section 100**

**OAL Matter Number: 2016-0407-01**

**OAL Matter Type: Nonsubstantive (N)**

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This change without regulatory effect by the Department of Health Care Services amends Section 53626(a) in Title 9 of the California Code of Regulations. The purpose of this action is to modify the name of the Department and the mailing address for the filing of documents related to Emergency Services Claims.

OAL approves this change without regulatory effect as meeting the requirements of California Code of Regulations, title 1, section 100.

Date: April 27, 2016

**Original Signed**

Nicole C. Carrillo  
Attorney

For: Debra M. Cornez  
Director

Original: Jennifer Kent  
Copy: Greg Rodriguez

**NONSUBSTANTIVE**

(See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-2013)

<b>OAL FILE NUMBERS</b>	NOTICE FILE NUMBER <b>Z-</b>	REGULATORY ACTION NUMBER <b>2016-0407-01N</b>	EMERGENCY NUMBER
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For use by Office of Administrative Law (OAL) only

2016 APR -7 A 8:56

OFFICE OF ADMINISTRATIVE LAW

**ENDORSED - FILED**  
 in the office of the Secretary of State  
 of the State of California

APR 27 2016

1:44 PM

NOTICE

REGULATIONS

**AGENCY WITH RULEMAKING AUTHORITY**  
 Department of Health Care Services

AGENCY FILE NUMBER (if any)  
 DHCS-15-021

**A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)**

1. SUBJECT OF NOTICE		TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE <input type="checkbox"/> Notice re Proposed <input type="checkbox"/> Regulatory Action <input type="checkbox"/> Other		4. AGENCY CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER (Optional)
<b>OAL USE ONLY</b>	ACTION ON PROPOSED NOTICE <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn		NOTICE REGISTER NUMBER	PUBLICATION DATE

**B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)**

1a. SUBJECT OF REGULATION(S) Emergency Services Claims	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
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2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)				
<table border="1"> <tr> <td rowspan="3"><b>SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)</b></td> <td>ADOPT</td> </tr> <tr> <td>AMEND Section 53626(a)</td> </tr> <tr> <td>REPEAL</td> </tr> </table>	<b>SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)</b>	ADOPT	AMEND Section 53626(a)	REPEAL
<b>SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)</b>		ADOPT		
		AMEND Section 53626(a)		
	REPEAL			
TITLE(S) Title 22				

3. TYPE OF FILING			
<input type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))	<input checked="" type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<input type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))		<input type="checkbox"/> Other (Specify) _____	

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)			
<input type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))	<input type="checkbox"/> Effective on filing with Secretary of State	<input checked="" type="checkbox"/> \$100 Changes Without Regulatory Effect	<input type="checkbox"/> Effective other (Specify) _____

6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY			
<input type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal	
<input type="checkbox"/> Other (Specify) _____			

7. CONTACT PERSON Greg Rodriguez	TELEPHONE NUMBER (916) 440-7766	FAX NUMBER (Optional)	E-MAIL ADDRESS (Optional) greg.rodriguez@dhcs.ca.gov
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8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE Original Signed	DATE 4/1/16
TYPED NAME AND TITLE OF SIGNATORY Jennifer Kent, Director	

For use by Office of Administrative Law (OAL) only.

**ENDORSED APPROVED**

APR 27 2016

Office of Administrative Law

(1) Amend Section 53626 to read as follows:

§ 53626. Filing and Service.

(a) All papers shall be filed at the State Department of Health Care Services, Office of Legal Services, 714 P Street Administrative Hearings and Appeals, 1029 J Street, Suite 200 Sacramento, CA 95814, and shall be deemed filed as of the postmark date, or receipt by the Department, if no legible postmark is provided.

*Note: There are no changes to Subsections (b) through (d)*

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Note: Authority cited: Sections 14312 and 14454, Welfare and Institutions Code; and Section 20, Health and Safety Code. Reference: Section 14454, Welfare and Institutions Code.