Home and Community-Based Alternatives (HCBA) Waiver Grievance Fact Sheet

If you are dissatisfied with your HCBA Care Management Team or the HCBA services you receive, you may submit a grievance.

When Should I Submit a HCBA Grievance?

» Incorrect or untimely coordination of your services
» Poor customer service
» Discrimination

» Health information privacy concerns
» Poor quality of care
» Untimely referrals for services

» Untimely scheduling of appointments
» Any violation of your rights
» Complaints regarding your plan of treatment

What Information Should I Include in My HCBA Grievance?

» Your full name and contact information (phone number, email address, etc.)
» Date(s) and time(s) of the incident(s) that resulted in your grievance
» The names of your Care Management Team

» The name(s) of any HCBA provider(s) relevant to your grievance
» A brief description of your complaint(s)/concern(s)
» Documentation relevant to your complaint(s)/concern(s)

How Do I Submit My HCBA Grievance?

» ***Grievances regarding the quality or receipt of HCBA services*** must be submitted to your Waiver Agency via email, mail, or telephone. Your Waiver Agency is assigned based on the county you live in. Contact information can be found [here](#).
If you reside in *Alpine, Imperial, Inyo, Marin, Mendocino, Mono, or Napa counties*, your grievance must be submitted to the Department of Health Care Services (DHCS) via email at: ISCDCompliance@dhcs.ca.gov.
» ***Grievances regarding the coordination of care by your Waiver Agency*** must be submitted to DHCS via email at: ISCDCompliance@dhcs.ca.gov.
» ***Grievances regarding your Congregate Living Health Facility*** must be submitted to DHCS via email at: ISCDCompliance@dhcs.ca.gov.

HCBA program, benefits, and other information is available on the DHCS website at:
https://www.dhcs.ca.gov/services/ltc/Pages/Home-and-Community-Based-(HCB)-Alternatives-Waiver.aspx.

DHCS
CALIFORNIA DEPARTMENT OF
HEALTH CARE SERVICES