



Michelle Baass | Director

December 19, 2025

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 14, 2025, regarding participant [REDACTED]. The alleged complaints include the following:

Services not delivered.

- Participants' wheelchair was damaged on May 12, 2024, and has not been repaired.
- AltaMed PACE approved an additional 13 hours of homecare services for the participant. Approved homecare hours were not provided for 3 months.

Lack of communication.

- No response to concerns expressed via "my chart" on 8/14/25.

Lack of assessment & follow-up.

- Not assessed after Emergency Department visit for fall on 5/5/25 and no follow-up on facial laceration.

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 within 30 days of the date of this letter.



Joyita Garg
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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.

If you have any questions or concerns, please contact Seema Massey, Nurse Evaluator, at PACECompliance@dhcs.ca.gov.

Sincerely,

ELECTRONICALLY SIGNED BY

Kevin Phomthevy, Chief
PACE Monitoring and Oversight Unit
Integrated Systems of Care Division
Department of Health Care Services

Enclosure: Corrective Action Plan (CAP)

CC: Elva Alatorre, Chief
PACE Branch
Integrated Systems of Care Division
Department of Health Care Services

Nageena Khan, Chief
PACE Section
Integrated Systems of Care Division
Department of Health Care Services

Erika Origel, Chief
PACE Contracts Management & Processing Unit
Integrated Systems of Care Division
Department of Health Care Services

La Donna Christensen, Contract Manager
PACE Contracts Management and Processing Unit
Integrated Systems of Care Division
Department of Health Care Services

ALTAMED PACE

Corrective Action Plan (CAP)

Program Assurance	Findings	Provider's Plan of Correction
<p>§ 460.98 Service delivery.</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 paragraph (c)(2)(i) 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 paragraph (c)(3) of this section.</p>	<p>PACE Organization (PO) failed to effectuate medical doctor (MD) order, specialist treatment, consultation, and/or referral expeditiously for the participant.</p> <ol style="list-style-type: none">1. Emergency department doctor's recommendation during post fall assessment on 5-8-25.2. Stat CT head without IV contrast.	

Program Assurance	Findings	Provider's Plan of Correction
<p>§ 460.102 Interdisciplinary team.</p> <p>(d) Responsibilities of interdisciplinary team.</p> <p>(1) The interdisciplinary team is responsible for the following for each participant:</p> <p>(ii) Coordination of care. 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"> 1. Delay in repair of broken motorized wheelchair. 2. Delay in implementation of the home care hours. 	

Program Assurance	Findings	Provider's Plan of Correction
<p>§ 460.102</p> <p>Interdisciplinary team.</p> <p>(f) 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.

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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