

4764.0060 APPEALS.

Subpart 1. **Denial of certification or recertification and time for appeal.** The commissioner must notify an eligible provider or health care home in writing of the reasons for denial of an application for certification or recertification. An eligible provider or health care home has 30 days from the date of receiving notice of the decision to appeal the decision.

Subp. 2. **How to appeal.** The eligible provider or health care home may appeal by submitting either item A or B, or both:

A. a written statement of the eligible provider's or health care home's grounds for disputing the commissioner's decision; or

B. a corrective action plan that describes the following specific actions for improvement:

(1) the corrective steps that have been taken by the eligible provider or health care home;

(2) a plan for continued improvement; and

(3) if applicable, any reasons that the eligible provider or health care home is unable to comply.

Subp. 3. **Request for meeting.** Upon request, an eligible provider or health care home is entitled to a meeting with the commissioner's designee to discuss disputed facts and findings, present the eligible provider's or health care home's corrective action plan, or both.

Subp. 4. **Notice of decision and timeline.** The commissioner must grant or deny the appeal and notify the eligible provider or health care home of the decision within 60 days after receipt of a completed appeal, or, if the eligible provider or health care home meets with the commissioner's designee, within 60 days after the meeting.

Statutory Authority: *MS s 62U.03; 256B.0751; 256B.0752; 256B.0753*

History: *34 SR 591; 47 SR 338*

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