

WASHINGTON STATE
OFFICE OF ADMINISTRATIVE HEARINGS

In the matter of:

Name of the Appellant,

Appellant.

Docket No. **Case Number**

NOTICE OF Hearing Type

Agency: Health Care Authority

Program: **Program Name**

Agency No.

The Health Care Authority (Agency) or the Office of Administrative Hearings (OAH) received the attached hearing request on **DATE**.

YOUR HEARING WILL BE HELD:

DATE: **Date of the hearing**

TIME: **Time of the hearing** Pacific Time or as soon after that time as an administrative law judge is available

LOCATION: Telephone Conference Call (see instructions below)

JUDGE: **Name of the judge**

If you or a witness needs an INTERPRETER, we will provide one at no cost. Please call OAH at 1-800-583-8271 to request an interpreter.

Unless ordered differently by an ALJ, you should submit all documents or exhibits that you want the Agency Representative and the Administrative Law Judge to see at least five business days before the hearing. **Please read the attachment for information about the types of exhibits that can be submitted and size limitations for exhibits.** You may ask the Agency Representative to help you copy and provide documents to other parties, and to the Administrative Law Judge at OAH. WAC 182-526-0370.

How to participate in the **Hearing**:

1. Before your **Hearing** begins, call OAH at 1-800-583-8271 and provide a telephone number where you can be reached for the **Hearing**.
2. At the time set for the **Hearing**, wait for the judge or agency representative to call you at the telephone number you provided.
3. Make sure your phone has reception, is fully charged, and has enough minutes to last at least an hour.

This is an example that provides general information to help you compare it with the documents you received.

4. Make sure you are in a quiet place where you can hear and be heard clearly.
5. If you have problems receiving the judge's call, or if the judge does not call you within ten minutes after the **Hearing** start time, immediately call OAH at 1-800-583-8271.

If you cannot be reached or if you do not provide a telephone number where you may be reached at the time of the **Hearing**, the administrative law judge may hold you in default and dismiss your appeal. This means **you may lose your right to a hearing**. WAC 182-526-0284.

You have the right to an in-person hearing with the judge. To make this request, call OAH at the number listed below.

Call the Agency Representative as soon as possible if you **need** to change the time or date of your hearing. The Administrative Law Judge will determine if you have good cause to change the time or date.

You may represent yourself at the hearing or choose an attorney or any other person to represent you. You are responsible for any fees charged by your attorney.

Tell the Office of Administrative Hearings IMMEDIATELY if your address or phone number changes. We may need to send you notices and other mail about the hearing.

If you have a disability or sensory impairment and need accommodation when using our facilities or services, we may be able to help. Please contact us at 1-800-583-8271.

Please read the attached Hearing Rights Summary to learn about your rights, what to bring, and how hearings work. Firearms and other dangerous weapons are prohibited at hearings and in all OAH offices. WAC 10-20-010. If you have a safety concern about the hearing, please contact OAH.

SERVED on the date of mailing.

Attached: Hearing Request
 Hearing Rights Summary

HOW TO CONTACT OAH: Office of Administrative Hearings PO Box 42489 Olympia, WA 98504 Phone: 1-800-583-8271 Fax:	HOW TO CONTACT AGENCY REPRESENTATIVE: Name of Agency Representative Address of Agency Representative Phone:
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DECLARATION OF SERVICE

I declare under penalty of perjury under the laws of the State of Washington that today I served this document on each of the parties listed below. I sent a copy to the parties at their addresses of record using Consolidated Mail Services, U.S. Mail, or secure email.

[DATA LIST]

Dated **The date when the Notice of... was mailed** at **City**, Washington.
(DATE OF MAILING)

Representative
Office of Administrative Hearings
PO Box 42489
Olympia, WA 98504