

**State of California
Office of Administrative Law**

In re:
Department of Health Care Access and
Information

Regulatory Action:

Title 22, California Code of Regulations

Adopt sections: 95000, 95001, 95002,
95003, 95004, 95005,
95006, 95007, 95008,
95009, 95010, 95011,
95012, 95013, 95014

**NOTICE OF APPROVAL OF REGULATORY
ACTION**

Government Code Section 11349.3

OAL Matter Number: 2022-0714-01

OAL Matter Type: Regular Resubmittal (SR)

This action by the Department of Health Care Access and Information adopts notice and reporting requirements concerning hospital supplier diversity in accordance with Assembly Bill 962 (Stats. 2019, ch. 815).

OAL approves this regulatory action pursuant to section 11349.3 of the Government Code. This regulatory action becomes effective on October 1, 2022.

Date: August 22, 2022



Nicole C. Carrillo
Senior Attorney

For: Kenneth J. Pogue
Director

Original: Elizabeth Landsberg, Director
Copy: Sharon Takhar

RESUBMITTAL

STATE OF CALIFORNIA--OFFICE OF ADMINISTRATIVE LAW

NOTICE PUBLICATION/REGULATIONS SUBMISSION

STD. 400 (REV. 10/2019)

For use by Secretary of State only

OAL FILE NUMBERS	NOTICE FILE NUMBER Z-2022-0111-02	REGULATORY ACTION NUMBER 2022-0714-01	EMERGENCY NUMBER SR
------------------	---	---	-------------------------------

For use by Office of Administrative Law (OAL) only

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

AUG 22 2022

1:44 pm

OFFICE OF ADMIN. LAW
2022 JUL 14 AM 8:35

NOTICE	REGULATIONS
--------	-------------

AGENCY WITH RULEMAKING AUTHORITY
Department of Health Care Access and Information

AGENCY FILE NUMBER (if any)

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 Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER (Optional)
OAL USE ONLY	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 Disapproved/Withdrawn	NOTICE REGISTER NUMBER	PUBLICATION DATE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) Hospital Supplier Diversity Reporting Program	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S) 2022-0414-02 <i>per agency request</i>
2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (including title 26, if toxics related)	
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	ADOPT 95000,95001,95002,95003,95004,95005,95006,95007,95008,95009,95010,95011,95012,95013,95014
TITLE(S) 22	AMEND REPEAL

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 type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input checked="" 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)
15-Day Comment Period: June 15-June 30, 2022

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)			
<input checked="" 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 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 checked="" 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 Sharon Takhar	TELEPHONE NUMBER (916) 326-3975	FAX NUMBER (Optional)	E-MAIL ADDRESS (Optional) sharon.takhar@hcai.ca.gov
---	---	-----------------------	---

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 <i>Elizabeth A Landsberg</i>	DATE 7/12/2022
TYPED NAME AND TITLE OF SIGNATORY Elizabeth A Landsberg ; Director	<i>per agency request</i>

For use by Office of Administrative Law (OAL) only

ENDORSED APPROVED

AUG 22 2022

Office of Administrative Law

PROPOSED REGULATIONS
CALIFORNIA CODE OF REGULATIONS

Title 22, Division 7, Chapter 8. ~~Clinic Renovation (Construction) Grant and Loan Program [Repealed]~~ Hospital Community Reports (New Chapter 8 is Added)

Article 1. Hospital Supplier Diversity Reporting

§ 95000 Definitions

For the purposes of this chapter, the following definitions apply:

- (a) "Director" means the Director of the Department of Health Care Access and Information, as described in Health and Safety Code section 127005.
- (b) "Department" means the Department of Health Care Access and Information.
- (c) "Operating expenses" means total patient-related operating expenses for the most recent fiscal year reported to the Department on the Hospital Annual Financial Disclosure Report CHC 7041 d-1, column 1, line 200, submitted as specified in Title 22, California Code of Regulations, Section 97040.
- (d) "Disabled Veteran Business Enterprise" has the same meaning as defined in subparagraph (A) of paragraph (7) of subdivision (b) of Section 999 of the Military and Veterans Code or any successor provision. Disabled veteran business enterprise certification eligibility requirements shall be consistent with the requirements imposed by the Department of General Services, and this chapter shall only apply to a disabled veteran business enterprise certified by the Department of General Services.
- (e) "LGBT business enterprise" means (1) a business enterprise (a) that is at least 51 percent owned by a lesbian, gay, bisexual, or transgender person or persons or (b) if a publicly owned business, at least 51 percent of the stock of which is owned by one or more lesbian, gay, bisexual, or transgender persons; and (2) whose management and daily business operations are controlled by one or more of those individuals.
- (f) "Minority business enterprise" means (1) a business enterprise (a) that is at least 51 percent owned by a minority individual or group(s) or (b) that is, if a publicly owned business, physically located in the United States or its trust territories, at least 51 percent of the stock of which is owned by one or more minority groups, and (2) whose management and daily business operations are controlled by one or more of those individuals. The contracting hospital shall presume that minority includes, but is not limited to, African Americans, Hispanic Americans, Native Americans, and Asian Pacific Americans.
 - (1) African Americans: Black Americans-persons having origins in any black racial groups of Africa.
 - (2) Hispanic Americans: Hispanic Americans-all persons of Mexican, Puerto Rican, Cuban, South or Central American, Caribbean, and other Spanish culture or origin.
 - (3) Native Americans: Native Americans-persons having origin in any of the original peoples of North America or the Hawaiian Islands, in particular, American Indians, Eskimos, Aleuts, and Native Hawaiians.
 - (4) Asian Pacific Americans: Asian Pacific Americans-persons having origins in Asia or the Indian subcontinent, including, but not limited to, persons from Japan, China, the Philippines, Vietnam, Korea, Samoa, Guam, the U.S. Trust Territories of the Pacific, Northern Marianas, Laos, Cambodia, Taiwan, India, Pakistan, and Bangladesh.
- (g) "Women business enterprise" means a business enterprise physically located in the United States or its trust territories, that is at least 51 percent owned by a woman or women, or, in the case of any publicly owned business at least 51 percent of the stock of which is owned by one or more women.

- (h) "WMDVLGBTBE" means a women-owned, minority-owned, disabled veteran-owned and/or LGBT-owned business enterprise.
- (i) "Procurement" means the purchase or lease of supplies, services, equipment, and capital expenditures related to buildings and fixed equipment during the previous calendar year. Procurement does not include items such as employee salaries and wages, fixed asset depreciation, amortization, or taxes.
- (j) "Tier I procurement" means the procurement by direct contract between a hospital and a supplier directly to provide goods and services that support the operations of the hospital.
- (k) "Tier II procurement" means procurement by any agreement or arrangement between a contractor and any third party.
- (l) "Hospital" means any facility that is required to be licensed under subdivision (a), (b), or (f) of Health and Safety Code section 1250, with operating expenses of fifty million dollars (\$50,000,000) or more, and each licensed hospital with operating expenses of twenty-five million dollars (\$25,000,000) or more that is part of either a hospital system or regional network.
- (m) "Hospital system/regional network" means two or more hospitals owned, sponsored, or managed by the same organization.

Note: Section 127010, Health and Safety Code. Reference: Sections 1339.86 and 1339.87, Health and Safety Code

§ 95001 Contact Registration

- (a) Each hospital or hospital system/regional network must designate a primary contact person and must register with the Department for the purpose of receiving advanced notice of report due dates and to submit the required report.
- (b) A primary contact person must register on the Department's website using the registration portal at <https://hcai.ca.gov/data-and-reports/cost-transparency/hospital-supplier-diversity/>. A contact person must provide the following information:
 - (1) The legal name of the hospital or hospital system.
 - (2) The name of a contact person designated to receive notices.
 - (3) The business title of the designated contact person.
 - (4) A business address.
 - (5) A business email address.
 - (6) A business phone number.
- (c) Each hospital shall update, through the online portal, within 15 days after any change in the person designated as the primary contact person, or in the primary contact person's name, mailing address, business phone number, or email address.

Note: Section 127010, Health and Safety Code. Reference: Sections 1339.86 and 1339.87, Health and Safety Code

§ 95002 Individual Hospital Supplier Diversity Report

- (a) A hospital as defined in Section 95000 shall file a report with the Department.
- (b) Data elements for individual hospital-level reports shall include:
 - (1) Hospital name

- (2) Hospital HCAI ID
- (3) Reporting organization
- (4) Report period start date [January 1 of prior calendar year]
- (5) Report period end date [December 31 of prior calendar year]
- (6) The hospital's Supplier Diversity Policy Statement
- (7) The hospital's outreach and communications to WMDVLGBTE enterprises.
- (8) Does the hospital require certification?
- (9) Does the hospital accept self-certification?
- (10) Other relevant information.
- (11) The hospital's outreach and communications to WMDVLGBTE to become potential suppliers, including:
 - (A) How the hospital encourages and seeks out WMDVLGBTE to become potential suppliers.
 - (B) How the hospital encourages its employees involved in procurement to seek out WMDVLGBTE to become potential suppliers.
 - (C) How the hospital conducts outreach and communication to WMDVLGBTE.
- (12) How the hospital supports organizations that promote or certify WMDVLGBTE.
- (13) The hospital's Tier I procurements that are made from WMDVLGBTE with at least a majority of the enterprise's workforce in California, with each category aggregated separately, to the extent that information is readily accessible, as determined by each hospital. For the purpose of this requirement, reports shall include total dollar amount for each category, to the extent that information is readily accessible, as determined by each hospital. If \$0 were spent on procurement for a category, you may enter \$0. If the procurement data is not readily accessible, you may leave the category blank.
 - (A) Tier I Total Minority Business Enterprises
 - (B) Tier I African American Business Enterprise
 - (C) Tier I Hispanic American Business Enterprise
 - (D) Tier I Native American Business Enterprise
 - (E) Tier I Asian Pacific American Business Enterprise
 - (F) Tier I Unknown Minority Business Enterprise (if unable to identify which qualified minority category).
 - (G) Tier I Women Business Enterprises
 - (H) Tier I LGBT Business Enterprises
 - (I) Tier I Disabled Veteran Business Enterprises
 - (J) Tier I Less duplicated amount (if amounts have been included in multiple categories, enter the duplicated amounts and subtract it when calculating the combined total).
 - (K) Combined Tier I total
- (14) The hospital's Tier II procurements that are made from WMDVLGBTE with at least a majority of the enterprise's workforce in California, with each category aggregated separately, to the extent that information is readily accessible, as determined by each hospital. For the purpose of this requirement, reports shall include total dollar amount for each category, to the extent that information is readily accessible, as determined by each hospital. If \$0 were spent on procurement for a category, you may enter \$0. If the procurement data is not readily accessible, you may leave the category blank.
 - (A) Tier II Total Minority Business Enterprise
 - (B) Tier II African American Business Enterprise
 - (C) Tier II Hispanic American Business Enterprise

- (D) Tier II Native American Business Enterprise
 - (E) Tier II Asian Pacific American Business Enterprise
 - (F) Tier II Unknown Minority Business Enterprise (if unable to identify which qualified minority category).
 - (G) Tier II Women Business Enterprises
 - (H) Tier II LGBT Business Enterprises
 - (I) Tier II Disabled Veteran Business Enterprises
 - (J) Tier II Less duplicated amount (if amounts have been included in multiple categories, enter the duplicated amounts and subtract it when calculating the combined total).
 - (K) Combined Tier II total
- (15) The hospital's combined Tier I and Tier II procurements that are made from WMDVLGBTE with at least a majority of the enterprise's workforce in California, with each category aggregated separately, to the extent that information is readily accessible, as determined by each hospital. For the purpose of this requirement, reports shall include total dollar amount for each category, to the extent that information is readily accessible, as determined by each hospital. If \$0 were spent on procurement for a category, you may enter \$0. If the procurement data is not readily accessible, you may leave the category blank.
- (A) Combined Total Minority Business Enterprise
 - (B) Combined African American Business Enterprise
 - (C) Combined Hispanic American Business Enterprise
 - (D) Combined Native American Business Enterprise
 - (E) Combined Asian Pacific American Business Enterprise
 - (F) Combined Unknown Minority Business Enterprise (if unable to identify which qualified minority category)
 - (G) Combined Women Business Enterprises
 - (H) Combined LGBT Business Enterprises
 - (I) Combined Disabled Veteran Business Enterprises
 - (J) Combined Less duplicated amount (if amounts have been included in multiple categories, enter the duplicated amounts and subtract it when calculating the combined total).
 - (K) Combined Tier I and Tier II total
- (16) How much your hospital has spent on procurement in total during the reporting period (prior calendar year).
- (17) Indicate if your hospital also has procurement through a hospital system or regional network within a hospital system, which was reported by the health system.
- (A) If yes, please list the entity(s) this procurement is reported by.
- (18) Information regarding appropriate contacts at the hospital for interested business enterprises. Include relevant information as it pertains to your facility.
- (A) Name of contact person(s) who will be involved with hospital procurement.
 - (B) Email of contact person(s) or general email where hospital procurement questions/inquiries may be answered.
 - (C) Phone number of contact person(s) or general phone number where hospital procurement questions/inquiries may be answered.
 - (D) Website for hospital procurement where information, instructions, requirements, and/or other information will be available.
 - (E) Third party procurement organization information.
 - (F) Other helpful website links.
 - (G) Other relevant information.

Note: Section 127010, Health and Safety Code. Reference: Sections 1339.86 and 1339.87, Health and Safety Code

§ 95003 System/Regional-Level Hospital Supplier Diversity Report (optional)

- (a) A hospital that is part of a hospital system or is organized within a regional network within a hospital system may report the diversity of its procurement in compliance with this subparagraph from a systemwide or regional network level if there are suppliers that provide services or goods to all hospitals within the hospital system or regional network. A hospital shall report the diversity of the remainder of its procurement, including the suppliers that do not resource the entire hospital system or regional network, as an individual hospital.
- (1) When submitting a system/regional-level report, the report will only apply to the procurements purchased at a system/regional-level. A hospital system may use diverse suppliers for the hospitals within their own networks that would apply in this report.
 - (2) Individual hospital-level reports will highlight procurement data purchased on an individual level.
- (b) The system/regional-level report is optional to submit in addition to the individual report, not as a substitution. The individual hospital, as defined above, must be submitted.
- (c) A hospital that is part of a hospital system or is organized within a regional network within a hospital system may report the diversity of its procurement from a systemwide or regional network level if there are suppliers that provide services or goods to all hospitals within the hospital system or regional network. Data elements for system/regional-level reports include:
- (1) Reporting organization
 - (2) System or regional network description
 - (3) Report period start date [January 1 of prior calendar year]
 - (4) Report period end date [December 31 of prior calendar year]
 - (5) The hospital system or regional network Tier I procurements that are made from WMDVLGBTE with at least a majority of the enterprise's workforce in California, with each category aggregated separately, to the extent that information is readily accessible, as determined by each hospital system/regional network. For the purpose of this requirement, reports shall include total dollar amount for each category, to the extent that information is readily accessible, as determined by each hospital system/regional network. If \$0 were spent on procurement for a category, you may enter \$0. If the procurement data is not readily accessible, you may leave the category blank.
 - (A) Tier I Total Minority Business Enterprises
 - (B) Tier I African American Business Enterprise
 - (C) Tier I Hispanic American Business Enterprise
 - (D) Tier I Native American Business Enterprise
 - (E) Tier I Asian Pacific American Business Enterprise
 - (F) Tier I Unknown Minority Business Enterprise (if unable to identify which qualified minority category).
 - (G) Tier I Women Business Enterprises
 - (H) Tier I LGBT Business Enterprises
 - (I) Tier I Disabled Veteran Business Enterprises
 - (J) Tier I Less duplicated amount (if amounts have been included in multiple categories, enter the duplicated amounts and subtract it when calculating the combined total).
 - (K) Combined Tier I total

- (6) The hospital system or regional network Tier II procurements that are made from WMDVLGBTE with at least a majority of the enterprise's workforce in California, with each category aggregated separately, to the extent that information is readily accessible, as determined by each hospital system/regional network. For the purpose of this requirement, reports shall include total dollar amount for each category, to the extent that information is readily accessible, as determined by each hospital system/regional network. If \$0 were spent on procurement for a category, you may enter \$0. If the procurement data is not readily accessible, you may leave the category blank.
- (A) Tier II Total Minority Business Enterprise
 - (B) Tier II African American Business Enterprise
 - (C) Tier II Hispanic American Business Enterprise
 - (D) Tier II Native American Business Enterprise
 - (E) Tier II Asian Pacific American Business Enterprise
 - (F) Tier II Unknown Minority Business Enterprise (if unable to identify which qualified minority category).
 - (G) Tier II Women Business Enterprises
 - (H) Tier II LGBT Business Enterprises
 - (I) Tier II Disabled Veteran Business Enterprises
 - (J) Tier II Less duplicated amount (if amounts have been included in multiple categories, enter the duplicated amounts and subtract it when calculating the combined total).
 - (K) Combined Tier II total
- (7) The hospital system or regional network combined Tier I and Tier II procurements that are made from WMDVLGBTE with at least a majority of the enterprise's workforce in California, with each category aggregated separately, to the extent that information is readily accessible, as determined by each hospital system/regional network. For the purpose of this requirement, reports shall include total dollar amount for each category, to the extent that information is readily accessible, as determined by each hospital system/regional network.
- (A) Combined Total Minority Business Enterprise
 - (B) Combined African American
 - (C) Combined Hispanic American
 - (D) Combined Native American
 - (E) Combined Asian Pacific American
 - (F) Combined Unknown Minority (if unable to identify which qualified minority category)
 - (G) Combined Women Business Enterprises
 - (H) Combined LGBT Business Enterprises
 - (I) Combined Disabled Veteran Business Enterprises
 - (J) Combined Less duplicated amount (if amounts have been included in multiple categories, enter the duplicated amounts and subtract it when calculating the combined total).
 - (K) Combined Tier I and Tier II total
- (8) How much your hospital system/regional network has spent on procurement in total during the reporting period (prior calendar year)?
- (9) Does the hospital system/regional network require certification?
- (10) Does the hospital system/regional network accept self-certification?
- (11) Other relevant information.

Note: Section 127010, Health and Safety Code. Reference: Sections 1339.86 and 1339.87, Health and Safety Code.

§ 95004 Report Due Dates

- (a) Each hospital shall annually update its supplier diversity report and submit the new report to the office no later than July 1 of that year.

Note: Section 127010, Health and Safety Code. Reference: Sections 1339.86 and 1339.87, Health and Safety Code

§ 95005 Extension Request

- (a) A hospital may request, and the Department may grant, a 30-day extension to file the report if needed due to unintended or unforeseen delays.
- (b) The registered contact person(s) of the hospital may file with the Department a request for an extension of time to file for this required report. A request for extension shall be filed on or before the required due date, prescribed in Section 95004, by using the extension request screen available through the Department's website using the report submission portal at <https://hcai.ca.gov/data-and-reports/cost-transparency/hospital-supplier-diversity/>. Notices regarding the use of extension days, and new due dates, as well as notices of approval and rejection, will be e-mailed to the registered contact person(s) provided.
- (c) The Department shall respond to an extension request with an email confirmation to the requestor that their 30-day extension has been granted.

Note: Section 127010, Health and Safety Code. Reference: Sections 1339.86 and 1339.87, Health and Safety Code

§ 95006 Method of Submission

- (a) A report required under Section 95002 shall be submitted to the Department through the Department's website using the report submission portal at <https://hcai.ca.gov/data-and-reports/cost-transparency/hospital-supplier-diversity/>.
- (b) Reports must be submitted using one of the following methods:
 - (1) Uploading comma separated value (.csv) files including all of the required information for one or more reports. Such files shall comply with the Department's Format and File Specifications for Submission of Hospital Supplier Diversity Reports Version 1.0, dated December 31, 2021, and hereby incorporated by reference; or
 - (2) Entering the required information for reports online.

Note: Section 127010, Health and Safety Code. Reference: Sections 1339.86 and 1339.87, Health and Safety Code

§ 95007 Penalties for Late Filing of Reports

- (a) A hospital that fails to file a required report by the due date established by Section 95004 is liable for a civil penalty of one hundred dollars (\$100) for each day after the due date that the required report is not filed.
- (b) If the report is delinquent at the time the next report is due, the Department, on an annual basis, shall determine a maximum civil penalty of no more than thirty-six thousand, five hundred dollars (\$36,500) for failure to file a required report.

Note: Authority cited: Section 127010, Health and Safety Code and Section 1339.87, Health and Safety Code. Reference: Section 1339.87, Health and Safety Code.

§ 95008 Penalty Assessment

- (a) When a report required by Section 95002 is filed after the due date specified in Section 95004, the Department will notify the hospital of the accrued penalty. The notice shall be provided by email to the authorized individual identified by the hospital under subdivision (b)(2) of Section 95001.
- (b) The Department will calculate the accrued penalty pursuant to Section 95007.

Note: Authority cited: Section 127010, Health and Safety Code and Section 1339.87, Health and Safety Code. Reference: Section 1339.87, Health and Safety Code.

§ 95009 Filing an Appeal

- (a) A hospital that has received notice of an accrued penalty under Section 95008 may appeal the penalty assessment by filing, as explained in Section 95010, a written request for hearing no later than 30 days from the date of the notice. The request shall be filed with the Department's hearing officer.
- (b) The request for hearing shall include the following:
 - (1) The name of the hospital.
 - (2) The name of the authorized representative of the hospital and contact information for that representative.
 - (3) The date of the penalty assessment notice.
 - (4) A statement of the basis for the appeal.
 - (5) A copy of the penalty notice.

Note: Authority cited: Section 127010, Health and Safety Code and Section 1339.87, Health and Safety Code. Reference: Section 1339.87, Health and Safety Code.