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WELFARE AND INSTITUTIONS CODE - WIC

DIVISION 4.5. SERVICES FOR THE DEVELOPMENTALLY DISABLED [4500 - 4885] (*Division 4.5 added by Stats. 1977, Ch. 1252.*)

CHAPTER 1.6. General Provisions [4507 - 4519.11] (*Chapter 1.6 heading added by Stats. 2014, Ch. 178, Sec. 4.*)

4507. Developmental disabilities alone shall not constitute sufficient justification for judicial commitment. Instead, persons with developmental disabilities shall receive services pursuant to this division. Persons who constitute a danger to themselves or others may be judicially committed pursuant to Article 2 (commencing with Section 6500) of Chapter 2 of Part 2 of Division 6 if evidence of such danger is proven in court.

(Amended by Stats. 2012, Ch. 25, Sec. 7. (AB 1472) Effective June 27, 2012.)

4508. Persons with developmental disabilities may be released from developmental centers for provisional placement, with parental consent in the case of a minor or with the consent of an adult person with developmental disabilities or with the consent of the guardian or conservator of the person with developmental disabilities, not to exceed twelve months, and shall be referred to a regional center for services pursuant to this division. Any person placed pursuant to this section shall have an automatic right of return to the developmental center during the period of provisional placement.

(Amended by Stats. 1997, Ch. 414, Sec. 6. Effective September 22, 1997.)

4510. The State Department of Developmental Services, the State Department of Health Care Services, and the State Department of State Hospitals shall jointly develop and implement a statewide program for encouraging the establishment of sufficient numbers and types of living arrangements, both in communities and state hospitals, as necessary to meet the needs of persons served by those departments. The departments shall consult with the following organizations in the development of procedures pursuant to this section:

- (a) The League of California Cities, the County Supervisors Association of California, and representatives of other local agencies.
- (b) Organizations or advocates for clients receiving services in residential care services.
- (c) Providers of residential care services.

(Amended by Stats. 2012, Ch. 438, Sec. 9. (AB 1468) Effective September 22, 2012.)

4511. (a) The Legislature finds and declares that meeting the needs and honoring the choices of persons with developmental disabilities and their families requires information, skills and coordination and collaboration between consumers, families, regional centers, advocates and service and support providers.

(b) The Legislature further finds and declares that innovative and ongoing training opportunities can enhance the information and skills necessary and foster improved coordination and cooperation between system participants.

(c) The department shall be responsible, subject to the availability of fiscal and personnel resources, for securing, providing, and coordinating training to assist consumers and their families, regional centers, and services and support providers in acquiring the skills, knowledge, and competencies to achieve the purposes of this division.

(d) This training may include health and safety issues; person-centered planning; consumer and family rights; building circles of support; training and review protocols for the use of psychotropic and other medications; crime prevention; life quality assessment and outcomes; maximizing inclusive opportunities in the community; how to communicate effectively with consumers; and developing opportunities for decisionmaking.

(e) Whenever possible, the department shall utilize existing training tools and expertise.

(f) Each training module shall include an evaluation component.

(g) The department shall establish an advisory group, consisting of consumers, family members, regional centers, service providers, advocates and legislative representatives. The advisory group shall make recommendations for training subjects, review the design of training modules, and assess training outcomes.

(Added by Stats. 1998, Ch. 310, Sec. 31. Effective August 19, 1998.)

4511.1. (a) The Legislature finds and declares the following:

(1) Supporting service access and equity for persons with developmental disabilities and their families requires awareness, skill development, and training for regional center personnel.

(2) Ongoing implicit bias training enhances service access and equity in the developmental disabilities system.

(b) The department shall require regional centers to implement implicit bias training through its contracts pursuant to Section 4640.6 and shall establish course content and training frequency requirements for that training.

(c) All the regional center personnel shall comply with the implicit bias training requirements of paragraph (9) of subdivision (g) of Section 4640.6 and this section. This section shall additionally apply to regional center contractors involved in intake and assessment and eligibility determinations. The department shall specify the timelines by which training must be completed. Training shall be prioritized for regional center employees and contractors who are involved in eligibility determination or directly assist individuals and their families, or both, during the regional center intake and assessment processes, service coordination, and regional center employees who are involved in developing and implementing purchase of service policies and other policies, guidelines, instructions, or training materials utilized by regional centers when determining the service needs of consumers.

(d) The training described by this section may be procured either by the department or by a regional center that has obtained prior approval by the department. Each regional center and its contractors shall retain the training record of employees in their respective personnel files. Regional centers shall annually inform the department of the percentage of its contractors and regional center personnel, identified by job classification, who successfully have completed the training. A list and description of trainings procured by the department, or a regional center with approval by the department, shall be posted on the department's internet website.

(e) The department or regional center shall make reasonable efforts to procure training that considers all of the following:

(1) Trainers who are representative of the diversity of persons served by regional centers.

(2) Academic training in implicit bias or experience educating public benefit programs about implicit bias and its effects on people accessing and interacting with public benefit programs.

(3) The impact of implicit bias, explicit bias, and systemic bias on public benefit programs and the effect this can have on individuals seeking eligibility for and services through public benefit programs.

(4) Actionable steps trainees can take to recognize and address their own implicit biases.

(f) The training provided by the department and required by this section shall only be implemented subject to an appropriation by the Legislature for those purposes. It is the intent of the Legislature that regional centers continue to implement implicit bias training to the extent they are able to, in the absence of a state appropriation.

(Amended by Stats. 2025, Ch. 12, Sec. 1. (AB 143) Effective June 27, 2025.)

4511.5. (a) The Legislature finds and declares both of the following:

(1) Direct service professionals are critical to the provision of services and supports to individuals with intellectual and developmental disabilities.

(2) In recognition of the value of the services provided by direct service professionals, additional training and development will enhance the services they provide and foster a more sustainable workforce.

(b) (1) With input from stakeholders pursuant to subdivision (c), the department shall develop or utilize existing curriculum to implement enhanced direct service professional training that promotes services that are person centered and culturally and linguistically sensitive, and that improve outcomes for individuals with intellectual and developmental disabilities.

(2) It is the intent of the Legislature to enhance the quality of services that consumers receive from their direct service professionals, including, but not limited to, improving direct service professional knowledge about general health and safety issues, employing principles of self-determination in order to promote dignity of the recipient and the provider, and working to improve quality of services and quality of life, including advancing health equity for consumers of regional center services.

(3) The training described in paragraph (1) in shall include, but is not limited to, all of the following elements:

- (A) Competency based.
- (B) Tiered training and certification.
- (C) Continuing education.
- (D) Outcome measures, as defined by the department, with input from stakeholders pursuant to subdivision (c).

(c) (1) The department shall consult with stakeholders throughout the implementation of this section. This consultation shall include facilitation of a process for providing input and comments on implementation.

(2) Stakeholders may include, but are not limited to, the following:

- (A) Consumers and families across different geographic regions of the state and from diverse racial and ethnic backgrounds, diverse consumer age groups and disabilities.
- (B) Regional center representatives.
- (C) Service providers representing a diverse range of service types and models.

(d) Implementation of this section is subject to an appropriation of funds for this purpose in the annual Budget Act.

(Added by Stats. 2021, Ch. 76, Sec. 19. (AB 136) Effective July 16, 2021.)

4511.6. (a) The department shall develop a pilot project to test the feasibility of remote consumer services and supports that use technology solutions.

(b) It is the intent of the Legislature to test whether remote services and supports could provide an effective option for consumers to lead more independent lives, increase their access to bilingual services, and, when chosen and safe, reduce system reliance on one-to-one in-person direct support.

(c) The department shall pilot remote services and supports as specified in subdivision (d).

(d) In choosing consumers to pilot remote services and supports, the department shall consider consumer preference, the type and amount of services or supports and staffing needed to meet the consumer's individual program plan, and the consumer's individualized choices and their unique health, safety, and other needs. Consumers chosen for the pilot project shall represent diverse cultural and ethnic backgrounds, ages, and urban and rural regions of the state.

(e) The department shall work with an external entity with relevant program evaluation experience to both design and evaluate the pilot project.

(f) Providers shall be selected to participate in the pilot project by no later than March 1, 2023.

(g) The department shall report to the Legislature at quarterly briefings for legislative staff about the progress of the pilot project. Reporting shall include summaries of the relevant data collected by service providers and regional centers.

(h) The department shall submit a final evaluation report of the pilot project to the Legislature, in accordance with Section 9795 of the Government Code, no later than January 10, 2026.

(i) Contracts to procure services to implement this section shall be exempt from the requirements contained in the Public Contract Code and the State Administrative Manual and from approval by the Department of General Services.

(j) Implementation of this section shall be subject to an appropriation by the Legislature for the purpose of this section.

(k) This section shall remain in effect only until January 1, 2030, and as of that date is repealed.

(Added by Stats. 2022, Ch. 49, Sec. 14. (SB 188) Effective June 30, 2022. Repealed as of January 1, 2030, by its own provisions.)

4512. As used in this division:

(a) (1) "Developmental disability" means a disability that originates before an individual attains 18 years of age, continues, or can be expected to continue, indefinitely, and constitutes a substantial disability for that individual. As defined by the Director of Developmental Services, in consultation with the Superintendent of Public Instruction, this term shall include intellectual disability, cerebral palsy, epilepsy, and autism. This term shall also include disabling conditions found to be closely related to intellectual disability or to require treatment similar to that required for individuals with an intellectual disability, but shall not include other handicapping conditions that are solely physical in nature.

(2) (A) A child who is under five years of age shall be provisionally eligible for regional center services if the child has a disability that is not solely physical in nature and has significant functional limitations in at least two of the following areas of major life activity, as determined by a regional center and as appropriate to the age of the child:

- (i) Self-care.
- (ii) Receptive and expressive language.
- (iii) Learning.
- (iv) Mobility.
- (v) Self-direction.

(B) To be provisionally eligible, a child is not required to have one of the developmental disabilities listed in paragraph (1).

(3) (A) An infant or toddler referred for early intervention services from the regional center pursuant to the California Early Intervention Services Act (Title 14 (commencing with Section 95000) of the Government Code) may be concurrently assessed, if appropriate, to determine whether the infant or toddler is provisionally eligible for regional center services under paragraph (2) or eligible for regional center services under paragraph (1).

(B) If the regional center determines that the infant or toddler qualifies for early intervention services from the regional center pursuant to the California Early Intervention Services Act (Title 14 (commencing with Section 95000) of the Government Code) but has not been found to have a developmental disability as defined in paragraph (1) or to be provisionally eligible as defined in paragraph (2), the regional center shall assess the child at least 90 days prior to the date that they turn three years of age for purposes of determining their eligibility for regional center services under this section. If the regional center determines the child is not eligible, the regional center shall give adequate notice pursuant to Section 4701.

(4) A child who is provisionally eligible pursuant to paragraph (2) shall be reassessed at least 90 days before turning five years of age. The child shall meet the definition set forth in paragraph (1) to continue to be eligible for regional center services at five years of age.

(5) Regional center services for a child who was provisionally eligible pursuant to paragraph (2) and who does not meet the definition in paragraph (1) shall end when the child is five years of age unless an appeal was filed pursuant to Section 4715.

(b) "Services and supports for persons with developmental disabilities" means specialized services and supports or special adaptations of generic services and supports directed toward the alleviation of a developmental disability or toward the social, personal, physical, or economic habilitation or rehabilitation of an individual with a developmental disability, or toward the achievement and maintenance of an independent, productive, and normal life. The determination of which services and supports are necessary for each consumer shall be made through the individual program plan process. The determination shall be made on the basis of the needs and preferences of the consumer or, when appropriate, the consumer's family, and shall include consideration of a range of service options proposed by individual program plan participants, the effectiveness of each option in meeting the goals stated in the individual program plan, and the cost-effectiveness of each option. Services and supports listed in the individual program plan may include, but are not limited to, diagnosis, evaluation, treatment, personal care, daycare, domiciliary care, special living arrangements, physical, occupational, and speech therapy, training, education, supported and sheltered employment, mental health services, recreation, counseling of the individual with a developmental disability and of the individual's family, protective and other social and sociolegal services, information and referral services, follow-along services, adaptive equipment and supplies, advocacy assistance, including self-advocacy training, facilitation and peer advocates, assessment, assistance in locating a home, childcare, behavior training and behavior modification programs, camping, community integration services, community support, daily living skills training, emergency and crisis intervention, facilitating circles of support, habilitation, homemaker services, infant stimulation programs, paid roommates, paid neighbors, respite, short-term out-of-home care, social skills training, specialized medical and dental care, telehealth services and supports, as described in Section 2290.5 of the Business and Professions Code, supported living arrangements, technical and financial assistance, travel training, training for parents of children with developmental disabilities, training for parents with developmental disabilities, vouchers, and transportation services necessary to ensure delivery of services to persons with developmental disabilities. This subdivision does not expand or authorize a new or different service or support for any consumer unless that service or support is contained in the consumer's individual program plan.

(c) Notwithstanding subdivisions (a) and (b), for any organization or agency receiving federal financial participation under the federal Developmental Disabilities Assistance and Bill of Rights Act of 2000, Chapter 144 (commencing with Section 15001) of Title 42 of the United States Code, as amended, "developmental disability" and "services for persons with developmental disabilities" mean the terms as defined in the federal act to the extent required by federal law.

(d) "Consumer" means a person who has a disability that meets the definition of developmental disability set forth in subdivision (a).

(e) "Natural supports" means personal associations and relationships typically developed in the community that enhance the quality and security of life for people, including, but not limited to, family relationships, friendships reflecting the diversity of the neighborhood and the community, associations with fellow students or employees in regular classrooms and workplaces, and associations developed through participation in clubs, organizations, and other civic activities.

(f) "Circle of support" means a committed group of community members, who may include family members, meeting regularly with an individual with developmental disabilities in order to share experiences, promote autonomy and community involvement, and assist the individual in establishing and maintaining natural supports. A circle of support generally includes a plurality of members who neither provide nor receive services or supports for persons with developmental disabilities and who do not receive payment for participation in the circle of support.

(g) "Facilitation" means the use of modified or adapted materials, special instructions, equipment, or personal assistance by an individual, such as assistance with communications, that will enable a consumer to understand and participate to the maximum extent possible in the decisions and choices that affect the individual's life.

(h) "Family support services" means services and supports that are provided to a child with developmental disabilities or the child's family and that contribute to the ability of the family to reside together.

(i) "Voucher" means any authorized alternative form of service delivery in which the consumer or family member is provided with a payment, coupon, chit, or other form of authorization that enables the consumer or family member to choose a particular service provider.

(j) "Planning team" means the individual with developmental disabilities, the parents or legally appointed guardian of a minor consumer or the legally appointed conservator of an adult consumer, the authorized representative, including those appointed pursuant to subdivision (a) of Section 4541, one or more regional center representatives, including the designated regional center service coordinator pursuant to subdivision (b) of Section 4640.7, any individual, including a service provider, invited by the consumer, the parents or legally appointed guardian of a minor consumer or the legally appointed conservator of an adult consumer, or the authorized representative, including those appointed pursuant to subdivision (a) of Section 4541, and including a minor's, dependent's, or ward's court-appointed developmental services decisionmaker appointed pursuant to Section 319, 361, or 726.

(k) "Stakeholder organizations" means statewide organizations representing the interests of consumers, family members, service providers, and statewide advocacy organizations.

(l) (1) "Substantial disability" means the existence of significant functional limitations in three or more of the following areas of major life activity, as determined by a regional center, and as appropriate to the age of the person:

(A) Self-care.

(B) Receptive and expressive language.

(C) Learning.

(D) Mobility.

(E) Self-direction.

(F) Capacity for independent living.

(G) Economic self-sufficiency.

(2) A reassessment of substantial disability for purposes of continuing eligibility shall utilize the same criteria under which the individual was originally made eligible.

(m) "Native language" means the language normally used or the preferred language identified by the individual and, when appropriate, the individual's parent, legal guardian or conservator, or authorized representative.

(n) "Authorized representative" means an individual appointed by the State Council on Developmental Disabilities pursuant to subdivision (a) of Section 4541 or who is an authorized representative, as defined in Section 4701.

(Amended by Stats. 2024, Ch. 47, Sec. 3. (AB 162) Effective July 2, 2024.)

4513. (a) Whenever the department allocates funds to a regional center through a request for proposal process to implement special projects funded through the Budget Act, the department shall require that the regional center demonstrate community support for the proposal.

(b) In awarding funds to regional centers to implement such proposals, the department shall consider, among other indicators, the following:

(1) The demonstrated commitment of the regional center in establishing or expanding the service or support.

(2) The demonstrated ability of the regional center to implement the proposal.

(3) The success or failure of previous efforts to establish or expand the service or support.

(4) The need for the establishment or expansion of the service and support in the regional center catchment area as compared to other geographic areas.

(c) The department may require periodic progress reports from the regional center in implementing a proposal.

(d) The department shall ensure that each funded and implemented proposal be evaluated and that the evaluation process include the input of consumers, families, providers and advocates, as appropriate.

(e) The department shall make these evaluations available to the public, upon request.

(f) The department shall develop and implement strategies for fostering the duplication of successful projects.

(Added by Stats. 1998, Ch. 310, Sec. 32. Effective August 19, 1998.)

4514. All information and records obtained in the course of providing intake, assessment, and services under Division 4.1 (commencing with Section 4400), Division 4.5 (commencing with Section 4500), Division 6 (commencing with Section 6000), or Division 7 (commencing with Section 7100) to persons with developmental disabilities shall be confidential. Information and records obtained in the course of providing similar services to either voluntary or involuntary recipients before 1969 shall also be confidential. Information and records shall be disclosed only in any of the following cases:

(a) In communications between qualified professional persons, whether employed by a regional center or state developmental center, or not, in the provision of intake, assessment, and services or appropriate referrals. The consent of the person with a developmental disability, or the person's guardian or conservator, shall be obtained before information or records may be disclosed by regional center or state developmental center personnel to a professional not employed by the regional center or state developmental center, or a program not vendored by a regional center or state developmental center.

(b) When the person with a developmental disability, who has the capacity to give informed consent, designates individuals to whom information or records may be released. This chapter does not compel a physician and surgeon, psychologist, social worker, marriage and family therapist, professional clinical counselor, nurse, attorney, or other professional to reveal information that has been given to the person in confidence by a family member of the person unless a valid release has been executed by that family member.

(c) To the extent necessary for a claim, or for a claim or application to be made on behalf of a person with a developmental disability for aid, insurance, government benefit, or medical assistance to which the person may be entitled.

(d) If the person with a developmental disability is a minor, dependent ward, or conservatee, and the person's parent, guardian, conservator, limited conservator with access to confidential records, or authorized representative, designates, in writing, persons to whom records or information may be disclosed. This chapter does not compel a physician and surgeon, psychologist, social worker, marriage and family therapist, professional clinical counselor, nurse, attorney, or other professional to reveal information that has been given to the person in confidence by a family member of the person unless a valid release has been executed by that family member.

(e) For research, if the Director of Developmental Services designates, by regulation, rules for the conduct of research and requires the research to be first reviewed by the appropriate institutional review board or boards. These rules shall include, but need not be limited to, the requirement that all researchers shall sign an oath of confidentiality as follows:

	"
	Date

As a condition of doing research concerning persons with developmental disabilities who have received services from ____ (fill in the facility, agency, or person), I, ____, agree to obtain the prior informed consent of persons who have received services to the maximum degree possible as determined by the appropriate institutional review board or boards for protection of human subjects reviewing my research, or the person's parent, guardian, or conservator, and I further agree not to divulge any information obtained in the course of the research to unauthorized persons, and not to publish or otherwise make public any information regarding persons who have received services so those persons who received services are identifiable.

I recognize that the unauthorized release of confidential information may make me subject to a civil action under provisions of the Welfare and Institutions Code.

	"
	Signed

(f) To the courts, as necessary to the administration of justice.

(g) To governmental law enforcement agencies as needed for the protection of federal and state elective constitutional officers and their families.

(h) To the Senate Committee on Rules or the Assembly Committee on Rules for the purposes of legislative investigation authorized by the committee.

(i) To the courts and designated parties as part of a regional center report or assessment in compliance with a statutory or regulatory requirement, including, but not limited to, Section 1827.5 of the Probate Code, Sections 1001.22 and 1370.1 of the Penal Code, and Section 6502 of this code.

(j) To the attorney for the person who was sterilized or alleges they have been sterilized, or to the attorney of an individual with a developmental disability in any and all proceedings upon presentation of a release of information signed by the person, except that when the person lacks the capacity to give informed consent, the regional center or state developmental center director or designee, upon satisfying themselves of the identity of the attorney, and of the fact that the attorney represents the person, shall release all information and records relating to the person. This article does not compel a physician and surgeon, psychologist, social worker, marriage and family therapist, professional clinical counselor, nurse, attorney, or other professional to reveal information that has been given to the person in confidence by a family member of the person unless a valid release has been executed by that family member.

(k) Upon written consent by a person with a developmental disability previously or presently receiving services from a regional center or state developmental center, the director of the regional center or state developmental center, or the director's designee, may release any information, except information that has been given in confidence by members of the family of the person with a developmental disability, requested by a probation officer charged with the evaluation of the person after the person's conviction of a crime if the regional center or state developmental center director or designee determines that the information is relevant to the evaluation. The consent shall only be operative until sentence is passed on the crime for which the person was convicted. The confidential information released pursuant to this subdivision shall be transmitted to the court separately from the probation report and shall not be placed in the probation report. The confidential information shall remain confidential except for purposes of sentencing. After sentencing, the confidential information shall be sealed.

(l) Between persons who are trained and qualified to serve on multidisciplinary personnel teams, as defined in subdivision (d) of Section 18951. The information and records sought to be disclosed shall be relevant to the prevention, identification, management, or treatment of an abused child and the child's parents pursuant to Chapter 11 (commencing with Section 18950) of Part 6 of Division 9.

(m) When a person with a developmental disability dies from any cause, natural or otherwise, while hospitalized in a state developmental center, the State Department of Developmental Services, the physician and surgeon in charge of the client, or the professional in charge of the facility or the professional's designee, shall release the patient's medical record to a medical examiner, forensic pathologist, or coroner, upon request. Except for the purposes included in paragraph (8) of subdivision (b) of Section 56.10 of the Civil Code, a medical examiner, forensic pathologist, or coroner shall not disclose any information contained in the medical record obtained pursuant to this subdivision without a court order or authorization pursuant to paragraph (4) of subdivision (c) of Section 56.11 of the Civil Code.

(n) To authorized licensing personnel who are employed by, or who are authorized representatives of, the State Department of Public Health, and who are licensed or registered health professionals, and to authorized legal staff or special investigators who are peace officers who are employed by, or who are authorized representatives of, the State Department of Social Services, as necessary to the performance of their duties to inspect, license, and investigate health facilities and community care facilities, and to ensure that the standards of care and services provided in these facilities are adequate and appropriate and to ascertain compliance with the rules and regulations to which the facility is subject. The confidential information shall remain confidential except for purposes of inspection, licensing, or investigation pursuant to Chapter 2 (commencing with Section 1250) and Chapter 3 (commencing with Section 1500) of Division 2 of the Health and Safety Code, or a criminal, civil, or administrative proceeding in relation thereto. The confidential information may be used by the State Department of Public Health or the State Department of Social Services in a criminal, civil, or administrative proceeding. The confidential information shall be available only to the judge or hearing officer and to the parties to the case. Names that are confidential shall be listed in attachments separate to the general pleadings. The confidential information shall be sealed after the conclusion of the criminal, civil, or administrative hearings, and shall not subsequently be released except in accordance with this subdivision. If the confidential information does not result in a criminal, civil, or administrative proceeding, it shall be sealed after the State Department of Public Health or the State Department of Social Services decides that no further action will be taken in the matter of suspected licensing violations. Except as otherwise provided in this subdivision, confidential information in the possession of the State Department of Public Health or the State Department of Social Services shall not contain the name of the person with a developmental disability.

(o) To a board that licenses and certifies professionals in the fields of mental health and developmental disabilities pursuant to state law, when the Director of Developmental Services has reasonable cause to believe that there has occurred a violation of a law subject to the jurisdiction of a board and the records are relevant to the violation. The information shall be sealed after a decision is

reached in the matter of the suspected violation, and shall not subsequently be released except in accordance with this subdivision. Confidential information in the possession of the board shall not contain the name of the person with a developmental disability.

(p) (1) To governmental law enforcement agencies by the director of a regional center or state developmental center, or the director's designee, when (A) the person with a developmental disability has been reported lost or missing or (B) there is probable cause to believe that a person with a developmental disability has committed, or has been the victim of, murder, manslaughter, mayhem, aggravated mayhem, kidnapping, robbery, carjacking, assault with the intent to commit a felony, arson, extortion, rape, forcible sodomy, forcible oral copulation, assault or battery, or unlawful possession of a weapon, as provided in any provision listed in Section 16590 of the Penal Code.

(2) This subdivision shall be limited solely to information directly relating to the factual circumstances of the commission of the enumerated offenses and shall not include information relating to the mental state of the patient or the circumstances of the patient's treatment unless relevant to the crime involved.

(3) This subdivision is not an exception to, and does not in any other way affect, the provisions of Article 7 (commencing with Section 1010) of Chapter 4 of Division 8 of the Evidence Code, or Chapter 11 (commencing with Section 15600) and Chapter 13 (commencing with Section 15750) of Part 3 of Division 9.

(q) To the Division of Juvenile Facilities and Department of Corrections and Rehabilitation or any component thereof, as necessary to the administration of justice.

(r) To an agency mandated to investigate a report of abuse filed pursuant to either Section 11164 of the Penal Code or Section 15630 of this code for the purposes of either a mandated or voluntary report or when those agencies request information in the course of conducting their investigation.

(s) When a person with a developmental disability, or the parent, guardian, or conservator of a person with a developmental disability who lacks capacity to consent, fails to grant or deny a request by a regional center or state developmental center to release information or records relating to the person with a developmental disability within a reasonable period of time, the director of the regional or developmental center, or the director's designee, may release information or records on behalf of that person if both of the following conditions are met:

(1) Release of the information or records is deemed necessary to protect the person's health, safety, or welfare.

(2) The person, or the person's parent, guardian, or conservator, has been advised annually in writing of the policy of the regional center or state developmental center for release of confidential client information or records when the person with developmental disabilities, or the person's parent, guardian, or conservator, fails to respond to a request for release of the information or records within a reasonable period of time. A statement of policy contained in the client's individual program plan shall be deemed to comply with the notice requirement of this paragraph.

(t) (1) When an employee is served with a notice of adverse action, as defined in Section 19570 of the Government Code, the following information and records may be released:

(A) All information and records that the appointing authority relied upon in issuing the notice of adverse action.

(B) All other information and records that are relevant to the adverse action, or that would constitute relevant evidence as defined in Section 210 of the Evidence Code.

(C) The information described in subparagraphs (A) and (B) may be released only if both of the following conditions are met:

(i) The appointing authority has provided written notice to the consumer and the consumer's legal representative or, if the consumer has no legal representative or if the legal representative is a state agency, to the clients' rights advocate, and the consumer, the consumer's legal representative, or the clients' rights advocate has not objected in writing to the appointing authority within five business days of receipt of the notice, or the appointing authority, upon review of the objection has determined that the circumstances on which the adverse action is based are egregious or threaten the health, safety, or life of the consumer or other consumers and without the information the adverse action could not be taken.

(ii) The appointing authority, the person against whom the adverse action has been taken, and the person's representative, if any, have entered into a stipulation that does all of the following:

(I) Prohibits the parties from disclosing or using the information or records for any purpose other than the proceedings for which the information or records were requested or provided.

(II) Requires the employee and the employee's legal representative to return to the appointing authority all records provided to them under this subdivision, including, but not limited to, all records and documents or copies thereof that are no longer in the possession of the employee or the employee's legal representative because they were from a source containing confidential information protected by this section, and all copies of those records and documents,

within 10 days of the date that the adverse action becomes final, except for the actual records and documents submitted to the administrative tribunal as a component of an appeal from the adverse action.

(III) Requires the parties to submit the stipulation to the administrative tribunal with jurisdiction over the adverse action at the earliest possible opportunity.

(2) For the purposes of this subdivision, the State Personnel Board may issue, before an appeal from adverse action being filed with it, a protective order, upon application by the appointing authority, for the limited purpose of prohibiting the parties from disclosing or using information or records for any purpose other than the proceeding for which the information or records were requested or provided, and to require the employee or the employee's legal representative to return to the appointing authority all records provided to them under this subdivision, including, but not limited to, all records and documents from any source containing confidential information protected by this section, and all copies of those records and documents, within 10 days of the date that the adverse action becomes final, except for the actual records and documents that are no longer in the possession of the employee or the employee's legal representatives because they were submitted to the administrative tribunal as a component of an appeal from the adverse action.

(3) Individual identifiers, including, but not limited to, names, social security numbers, and hospital numbers, that are not necessary for the prosecution or defense of the adverse action, shall not be disclosed.

(4) All records, documents, or other materials containing confidential information protected by this section that have been submitted or otherwise disclosed to the administrative agency or other person as a component of an appeal from an adverse action shall, upon proper motion by the appointing authority to the administrative tribunal, be placed under administrative seal and shall not, thereafter, be subject to disclosure to any person or entity except upon the issuance of an order of a court of competent jurisdiction.

(5) For purposes of this subdivision, an adverse action becomes final when the employee fails to answer within the time specified in Section 19575 of the Government Code, or, after filing an answer, withdraws the appeal, or, upon exhaustion of the administrative appeal or of the judicial review remedies as otherwise provided by law.

(u) To the person appointed as the developmental services decisionmaker for a minor, dependent, or ward pursuant to Section 319, 361, or 726.

(v) To a protection and advocacy agency established pursuant to Section 4901, to the extent that the information is incorporated within any of the following:

(1) An unredacted facility evaluation report form or an unredacted complaint investigation report form of the State Department of Social Services. This information shall remain confidential and subject to the confidentiality requirements of subdivision (f) of Section 4903.

(2) An unredacted citation report, unredacted licensing report, unredacted survey report, unredacted plan of correction, or unredacted statement of deficiency of the State Department of Public Health, prepared by authorized licensing personnel or authorized representatives described in subdivision (n). This information shall remain confidential and subject to the confidentiality requirements of subdivision (f) of Section 4903.

(w) To the regional center clients' rights advocate who provides service pursuant to Section 4433, unless the consumer objects on the consumer's own behalf, for the purpose of providing authorized clients' rights advocacy services pursuant to Section 4418.25 or 4418.7, subparagraph (B) or (C) of paragraph (9) of subdivision (a) of Section 4648, Sections 4684.80 to 4684.87, inclusive, or Section 4698 or 7502.5 of this code, or Section 1267.75 or 1531.15 of the Health and Safety Code.

(x) For purposes of this section, a reference to a "medical examiner, forensic pathologist, or coroner" means a coroner or deputy coroner, as described in subdivision (c) of Section 830.35 of the Penal Code, or a licensed physician who currently performs official autopsies on behalf of a county coroner's office or a medical examiner's office, whether as a government employee or under contract to that office.

(y) To authorized personnel who are employed by the Employment Development Department as necessary to enable the Employment Development Department to provide the information required to be disclosed to the State Department of Developmental Services pursuant to subdivision (ak) of Section 1095 of the Unemployment Insurance Code. The Employment Development Department shall maintain the confidentiality of information provided to it by the State Department of Developmental Services to the same extent as if the Employment Development Department had acquired the information directly.

(z) To authorized personnel who are employed by the State Department of Social Services as necessary to enable the department to provide the information required to be disclosed to the State Department of Developmental Services pursuant to Section 10850.6. The State Department of Social Services shall maintain the confidentiality of any information provided to it by the State Department of Developmental Services to the same extent as if the State Department of Social Services had directly acquired that information.

(aa) To authorized personnel who are employed by the California Victim Compensation Board for the purposes of verifying the identity and eligibility of individuals claiming compensation pursuant to the Forced or Involuntary Sterilization Compensation Program described in Chapter 1.6 (commencing with Section 24210) of Division 20 of the Health and Safety Code. The California Victim Compensation Board shall maintain the confidentiality of any information or records received from the department in accordance with Part 160 (commencing with Section 160.101) and Part 164 (commencing with Section 164.102) of Subchapter C of Subtitle A of Title 45 of the Code of Federal Regulations and this section. Public disclosure of aggregated claimant information or the annual report required under subdivision (b) of Section 24211 of the Health and Safety Code is not a violation of this section.

(Amended by Stats. 2021, Ch. 77, Sec. 32. (AB 137) Effective July 16, 2021.)

4514.3. (a) Notwithstanding Section 4514, information and records shall be disclosed to the protection and advocacy agency designated by the Governor in this state to fulfill the requirements and assurances of the federal Developmental Disabilities Assistance and Bill of Rights Act of 2000, contained in Chapter 144 (commencing with Section 15001) of Title 42 of the United States Code, for the protection and advocacy of the rights of persons with developmental disabilities, as defined in Section 15002(8) of Title 42 of the United States Code.

(b) Access to information and records to which subdivision (a) applies shall be in accord with Division 4.7 (commencing with Section 4900).

(Amended by Stats. 2003, Ch. 878, Sec. 3. Effective January 1, 2004.)

4514.5. Upon request of a family member of a resident of a state hospital, community care facility, or health facility, or other person designated by the resident, the facility shall give such family member or the designee notification of the resident's presence in the facility, the transfer, the diagnosis, the prognosis, the medications prescribed, the side effects of medications prescribed, if any, the progress of the resident, and the serious illness of the resident, if, after notification of the resident that such information is requested, the resident authorizes such disclosure. If, when initially informed of the request for notification, the resident is unable to authorize the release of such information, notation of the attempt shall be made into the resident's treatment record, and daily efforts shall be made to secure the resident's consent or refusal of such authorization. However, if a request for information is made by the spouse, parent, child, or sibling of the resident and the resident is unable to authorize the release of such information, such requester shall be given notification of the resident's presence in the facility, except to the extent prohibited by federal law. Upon request of a family member of a resident or the designee, the facility shall notify such family member or designee of the release or death of the resident. Nothing in this section shall be construed to require photocopying of the resident's medical records in order to satisfy its provisions.

(Added by Stats. 1982, Ch. 1141, Sec. 2.)

4515. Signed consent forms by a person with a developmental disability or, where appropriate, the parent, guardian, or conservator, for release of any information to which such person consents under the provision of Sections 11878 or 11879 of the Health and Safety Code, or subdivision (a) or (d) of Section 4514 shall be obtained for each separate use with the use specified, the information to be released, the name of the agency or individual to whom information will be released indicated on the form and the name of the responsible individual who has authorization to release information specified. Any use of this form shall be noted in the file of the person with developmental disabilities. Persons who sign consent forms shall be given a copy of the consent forms signed.

(Added by Stats. 1982, Ch. 1141, Sec. 3.)

4516. When any disclosure of information or records is made as authorized by the provisions of subdivision (a), (d), or (q) of Section 4514 or Section 4514.5, the physician in charge of the person with a developmental disability or the professional in charge of the facility shall promptly cause to be entered into the person's medical record the date and circumstances under which such disclosure was made, the names and relationships to the person, if any, of individuals or agencies to whom such disclosure was made, and the specific information disclosed.

(Added by Stats. 1982, Ch. 1141, Sec. 4.)

4517. Nothing in this chapter shall be construed to prohibit the compilation and publication of statistical data for use by government or researchers and standards set by the Director of Developmental Services.

(Added by Stats. 1982, Ch. 1141, Sec. 5.)

4518. Any person may bring an action against an individual who has willfully and knowingly released confidential information or records concerning him or her in violation of the provisions of this chapter, or of Chapter 1 (commencing with Section 11860) of Part 3 of Division 10.5 of the Health and Safety Code, for the greater of the following amounts:

(1) Five hundred dollars (\$500).

(2) Three times the amount of actual damages, if any, sustained by the plaintiff.

Any person may, in accordance with the provisions of Chapter 3 (commencing with Section 525) of Title 7 of Part 2 of the Code of Civil Procedure, bring an action to enjoin the release of confidential information or records in violation of the provisions of this chapter, and may in the same action seek damages as provided in this section.

It is not a prerequisite to an action under this section that the plaintiff suffer or be threatened with actual damages.

(Added by Stats. 1982, Ch. 1141, Sec. 6.)

4519. (a) The department shall not expend funds, and a regional center shall not expend funds allocated to it by the department, for the purchase of any service outside the state unless the Director of Developmental Services or the director's designee has received, reviewed, and approved a plan for out-of-state service in the consumer's individual program plan developed pursuant to Sections 4646 to 4648, inclusive. Prior to submitting a request for out-of-state services, the regional center shall conduct a comprehensive assessment and convene an individual program plan meeting to determine the services and supports needed for the consumer to receive services in California and shall request assistance from the department's statewide specialized resource service in identifying options to serve the consumer in California. The request shall include details regarding all options considered and an explanation of why these options cannot meet the consumer's needs. The department shall authorize for no more than six months the purchase of out-of-state services when the director determines the proposed service or an appropriate alternative, as determined by the director, is not available from resources and facilities within the state. Any extension beyond six months shall be based on a new and complete comprehensive assessment of the consumer's needs, review of available options, and determination that the consumer's needs cannot be met in California. An extension shall not exceed six months. For the purposes of this section, the department shall be considered a service agency under Chapter 7 (commencing with Section 4700).

(b) Funds shall not be expended for the cost of interstate travel or transportation by regional center staff in connection with the purchase of any service outside the state unless authorized by the director or the director's designee.

(c) If a regional center places a consumer out of state pursuant to subdivision (a), it shall prepare a report for inclusion in the consumer's individual program plan. This report shall summarize the regional center's efforts to locate, develop, or adapt an appropriate program for the consumer within the state. This report shall be reviewed and updated every three months, and a copy shall be sent to the director. Each comprehensive assessment and report shall include identification of the services and supports needed and the timeline for identifying or developing those services needed to transition the consumer back to California.

(d) Notwithstanding subdivisions (a), (b), and (c), the State Department of Developmental Services or a regional center may expend funds allocated to it for the purchase of services for residents of this state and administrative costs incurred in providing services in the border areas of a state adjacent to California when the purchase is approved by the regional center director.

(e) Each regional center shall submit to the department by December 31, 2012, a transition plan for all consumers residing out of state as of June 30, 2012, for whom the regional center is purchasing services.

(f) This section shall become operative January 1, 2022.

(Repealed (in Sec. 21) and added by Stats. 2021, Ch. 76, Sec. 22. (AB 136) Effective July 16, 2021. Operative January 1, 2022, by its own provisions.)

4519.2. (a) Through the Developmental Services Task Force, the department shall identify key indicators to track the regional center system's delivery of services. These indicators shall include both local and statewide measures and shall include a recommendation for analysis and followup of any concerning trends, as well as a plan for reporting of best practices for use statewide. The department, with stakeholder input, shall also identify recommendations for measuring outcomes and improving outcomes for consumers. Goals for system improvement include enhancement of customer services for consumers and their families, facilitation of enhanced communication between regional centers and the state, and identification and dissemination of best practices for developmental services providers. The department shall report these recommended indicators, best practices, and recommendations for analysis to the Legislature no later than January 10, 2021.

(b) (1) Each regional center shall post the following information on its internet website in a format determined by the department no later than April 1, 2020, and shall update the information no less frequently than every six months until the department determines that statewide compliance with the federal Home and Community-Based Services (HCBS) Final Rule has been met, or January 1, 2025, whichever is earlier:

(A) The number of providers identified as needing assessment for HCBS compliance, broken down by provider type, as defined by the department.

(B) The number of providers within each provider type that have been inspected or reviewed for HCBS compliance.

(C) The number of providers within each provider type that have been determined to be HCBS compliant.

(D) The number of providers within each provider type that have been determined not to be HCBS compliant and the reason for lack of compliance.

(E) The number of providers, broken down by provider type, that have been identified as presumed to have the qualities of an institutional setting, as described in Sections 441.301(c)(5)(v) and 441.710(a)(2)(v) of Title 42 of the Code of Federal Regulations.

(2) The department shall provide this information to the Legislature as statewide data and for each regional center, no later than May 1, 2020, and shall post that summary on its internet website.

(c) (1) The department shall update the Legislature annually, beginning on January 10, 2020, with the number of complaints filed at each regional center pursuant to Section 4731 for the prior fiscal year, and include the following information:

(A) The subject matter of complaints filed.

(B) How complaints were resolved.

(C) The timeframe within which resolutions to those complaints were provided by the regional center.

(D) The number of complaints that were appealed to the department, their resolution, and the timeframe within which a written administrative decision was issued.

(E) Demographic information, as identified by the department, about consumers on whose behalf the complaint was filed, including the ethnicity of the consumer.

(2) The update shall include data for the prior two fiscal years, as available.

(3) The department shall also post this data on its internet website.

(d) The department and each regional center shall include on their internet websites a link to the protection and advocacy agency designated pursuant to Division 4.7 (commencing with Section 4900) and the clients' rights advocate contracted with pursuant to Section 4433. This link shall be posted on the home page of their internet websites, or in another standard location determined by the department.

(e) On and after October 1, 2019, the department shall post all new directives that it issues to regional centers on its internet website.

(f) Any reports submitted by the department to the Legislature pursuant to this section shall be submitted in compliance with Section 9795 of the Government Code.

(Amended by Stats. 2022, Ch. 49, Sec. 15. (SB 188) Effective June 30, 2022.)

4519.4. (a) Beginning in the summer of 2019, the State Department of Developmental Services shall consult with a broad and balanced group of stakeholders, including, but not limited to, representatives of the Developmental Services Task Force, the Rates Workgroup of the Developmental Services Task Force, legislative staff from the fiscal and relevant policy committees of the Legislature, the Legislative Analyst's Office, the Association of Regional Center Agencies, the State Council on Developmental Disabilities, the Department of Rehabilitation, and Disability Rights California to discuss system reforms, including fiscal reforms, to better serve consumers with developmental disabilities. The focus of this discussion shall be on how to create a sustainable, innovative, cost-effective, consumer-focused, and outcomes-based service delivery system.

(b) For purposes of implementing subdivision (a), the State Department of Developmental Services shall do all of the following:

(1) Consider a wide variety of perspectives of consumers, families, and service providers to discuss the potential outcomes associated with different approaches to system reform.

(2) Engage with consumers, families, and service providers across different geographic regions of the state, including urban and rural areas, and from diverse racial and ethnic backgrounds, consumer age groups, consumer diagnoses, and service categories.

(3) Identify key consumer outcomes and measurable targets to be achieved through these reforms, as informed by the stakeholder process.

(4) Evaluate compliance with federal rules relating to home- and community-based services, and how the department plans to redesign services that are not compliant with these rules.

(5) Discuss how feedback may be collected about the reforms, and how this information may be used to make changes to, and adapt, the system over time.

(c) The State Department of Developmental Services shall report on the progress of these efforts during the 2020–21 budget hearing process.

(d) By October 1, 2019, the State Department of Developmental Services shall post to its internet website a summary of public comments, departmental responses to those comments, and any appropriate and necessary changes to the rate models contained in the rate study, submitted pursuant to Section 4519.8.

(Added by Stats. 2019, Ch. 28, Sec. 9. (SB 81) Effective June 27, 2019.)

4519.5. (a) The department and the regional centers shall annually collaborate to compile and report, consistent with applicable federal and state privacy laws, data, including deidentified data in accordance with subdivision (m), in a uniform manner relating to purchase of service authorization, utilization, and expenditure by each regional center with respect to all of the following:

(1) The age of the consumer, categorized by the following:

(A) Birth to two years of age, inclusive.

(B) Three to 21 years of age, inclusive.

(C) Twenty-two years of age and older.

(2) Race or ethnicity of the consumer.

(3) Preferred language spoken by the consumer, and other related details, as feasible.

(4) Disability detail, in accordance with the categories established by subdivision (a) of Section 4512, and, if applicable, a category specifying that the disability is unknown.

(5) Residence type, subcategorized by age, race or ethnicity, and preferred language.

(6) Number of instances when the written copy of the individual program plan was provided at the request of the consumer and, when appropriate, the consumer's parents, legal guardian or conservator, or authorized representative, in a language other than a threshold language, as defined by paragraph (3) of subdivision (a) of Section 1810.410 of Title 9 of the California Code of Regulations, if that written copy was provided more than 60 days after the request.

(7) Number of instances when the written copy of the individual program plan was provided at the request of the consumer and, when appropriate, the consumer's parents, legal guardian or conservator, or authorized representative, in a threshold language, as defined by paragraph (3) of subdivision (a) of Section 1810.410 of Title 9 of the California Code of Regulations, if that written copy was provided more than 45 days after the request, in violation of paragraph (5) of subdivision (a) of Section 4646.5.

(8) Beginning with data for the fiscal year of 2023–24, the numbers, percentages, and total and per capita expenditure and authorization amounts, by age, as applicable, according to race or ethnicity and preferred language, for all combined residence types and for consumers living in the family home, regarding the following service types:

(A) Camping and associated travel expenses.

(B) Social recreation activities.

(C) Educational services.

(D) Nonmedical therapies, including, but not limited to, specialized recreation, art, dance, and music.

(b) The data reported pursuant to subdivision (a) shall also include the number and percentage of individuals, categorized by age, race or ethnicity, and disability, and by residence type, as set forth in paragraph (5) of subdivision (a), who have been determined to be eligible for regional center services, but are not receiving purchase of service funds.

(c) (1) (A) By March 31, 2013, each regional center shall post the data described in this section that are specific to the regional center on its website. Commencing on December 31, 2013, each regional center shall annually post these data by December 31. Each regional center shall maintain all previous years' data on its website.

(B) Commencing December 31, 2023, each regional center shall post its data uniformly with all other regional centers, using the same criteria, format, and organization.

(2) Notwithstanding the requirement pursuant to paragraph (1), if the information required to be posted pursuant to this section is produced and posted by the department for each regional center, each regional center instead may link to that information from its

internet website.

(d) By March 31, 2013, the department shall post the information described in this section on a statewide basis on its website. Commencing December 31, 2013, the department shall annually post this information by December 31. The department shall maintain all previous years' data on its website. The department shall also post notice of any regional center stakeholder meetings on its website.

(e) In addition to maintaining hyperlinks to each regional center's reports on its internet website, commencing December 1, 2024, the department shall also post the data compiled pursuant to subdivisions (a) and (b), and the data compiled pursuant to Section 4519.6, in the same uniform manner as reported by the regional centers, as follows:

(1) On a statewide aggregate basis.

(2) On an aggregate basis according to particular geographical areas, as determined by the department in consultation with stakeholders.

(3) The department shall provide trend analysis on the changes observed in data over time, including increasing and decreasing utilization of services by any of the characteristics cited in subdivision (a).

(f) After December 1, 2024, the department and regional centers shall post information required to be posted pursuant to this section in machine-readable format.

(g) Within three months of compiling the data with the department, and annually thereafter, each regional center shall meet with stakeholders in one or more public meetings regarding the data. The meeting or meetings shall be held separately from any meetings held pursuant to Section 4660. The regional center shall provide participants of these meetings with the data and any associated information related to improvements in the provision of developmental services to underserved communities and shall conduct a discussion of the data and the associated information in a manner that is culturally and linguistically appropriate for that community, including providing alternative communication services, as required by Sections 11135 to 11139.7, inclusive, of the Government Code and implementing regulations. Regional centers shall inform the department of the scheduling of those public meetings 30 days prior to the meeting. Notice of the meetings shall also be posted on the regional center's website 30 days prior to the meeting and shall be sent to individual stakeholders and groups representing underserved communities in a timely manner. Each regional center shall, in holding the meetings required by this subdivision, consider the language needs of the community and shall schedule the meetings at times and locations designed to result in a high turnout by the public and underserved communities.

(h) (1) Consistent with subdivision (h) of Section 4648, regional centers shall annually provide each individual with their purchase of services data and any associated information related to improvements in the provision of developmental services to them. If requested, regional centers shall conduct a discussion of the data and the associated information in a manner that is culturally and linguistically appropriate for that individual, including providing alternative communication services, as required by Sections 11135 to 11139.7, inclusive, of the Government Code and implementing regulations.

(2) When implemented in the statewide case management system, the information described in paragraph (1) shall be available to individuals through the consumer portal. If requested, regional centers shall conduct a discussion of the data and the associated information in a manner that is culturally and linguistically appropriate for that individual, including providing alternative communication services, as required by Sections 11135 to 11139.7, inclusive, of the Government Code and implementing regulations.

(i) (1) Each regional center shall annually report to the department regarding its implementation of the requirements of this section. The report shall include, but shall not be limited to, all of the following:

(A) Actions the regional center took to improve public attendance and participation at stakeholder meetings, including, but not limited to, attendance and participation by underserved communities.

(B) Copies of minutes from the meeting and attendee comments.

(C) Whether the data described in this section, including data deidentified pursuant to subdivision (m) of this section, indicate a need to reduce disparities in the purchase of services among consumers in the regional center's catchment area. If the data do indicate that need, the regional center's recommendations and plan to promote equity, and reduce disparities, in the purchase of services.

(2) Each regional center and the department shall annually post the reports required by paragraph (1) on its website by August 31.

(j) (1) The department shall, on a twice-a-year basis, consult with stakeholders, including consumers and families that reflect the ethnic and language diversity of regional center consumers, regional centers, advocates, providers, family resource centers, the protection and advocacy agency described in Section 4901, and those entities designated as University Centers for Excellence in Developmental Disabilities Education, Research, and Service pursuant to Section 15061 of Title 42 of the United States Code, to achieve the following objectives:

(A) Review the data compiled pursuant to subdivisions (a) and (b).

(B) Identify barriers to equitable access to services and supports among consumers, including consumers whose purchase of services data have been deidentified pursuant to subdivision (m), and develop recommendations to help reduce disparities in purchase of service expenditures.

(C) Identify gaps in, and encourage the development and expansion of, culturally appropriate services, service delivery, and service coordination.

(D) Identify best practices to reduce disparity and promote equity.

(E) Maximize transparency whenever possible, including aggregation by region or display as percentages, as necessary.

(2) The department shall notify the Legislature when information is posted on its internet website pursuant to this section.

(k) (1) Subject to available funding, the department shall allocate funding to regional centers or community-based organizations with department oversight to assist with implementation of the recommendations and plans developed pursuant to subdivisions (i) and (j). Activities funded through these allocations may include, but are not limited to, pay differentials supporting direct care bilingual staff of community-based service providers, parent or caregiver education programs, cultural competency training for regional center staff, outreach to underserved populations, or additional culturally appropriate service types or service delivery models.

(2) Each regional center shall consult with stakeholders regarding activities that may be effective in addressing disparities in the receipt of regional center services and the regional center's proposed requests for the funding specified in paragraph (1). Each regional center shall identify the stakeholders it consulted with, including groups whose purchase of services data have been deidentified, and include information on how it incorporated the input of stakeholders into its requests.

(3) A community-based organization may submit a request for grant funding pursuant to this subdivision. In order to protect confidential data, the department or a regional center may waive a grant application requirement to provide data supporting that application, if that data would be subject to deidentification pursuant to applicable federal or state privacy laws. The organization shall submit the request concurrently to the regional center of the jurisdiction in which the organization is located and to the department. The regional center shall provide the department with input regarding the request prior to the department's final determination on the request.

(4) The department shall review requests for funding within 45 days from the deadline specified in the department's guidance to regional centers and community-based organizations.

(5) Each regional center and community-based organization receiving funding shall report annually to the department, in a manner determined by the department, on how the funding allocations were used and shall include recommendations of priorities for activities that may be effective in addressing disparities, based on the consultation with stakeholders.

(6) The department shall post the following information on its website:

(A) By September 1 of any year in which grant funding is available and has not been allocated, a structure for the grant program, including all of the following information:

(i) How community-based organizations reflecting groups that are disadvantaged by disparities in the purchase of services will be invited to participate in the grant program, including groups whose purchase of services data have been deidentified.

(ii) How statewide strategies were considered.

(iii) How the department will ensure grant funds are not used for activities that regional centers are otherwise required by statute or regulation to conduct.

(iv) How funded activities will be evaluated.

(v) How community-based organizations reflecting groups that are impacted by disparities can receive a waiver for the submission of data supporting that application, if that data would be subject to deidentification pursuant to applicable federal or state privacy laws.

(B) By October 1 of any year in which grant funding is available and has not been allocated, the final invitation for requests for funding or another mechanism through which requests for funding are solicited.

(C) By January 1 of any year in which grant funding has been allocated, a list of grant recipients, funding level per grant, and a description of the funded project.

(D) By May 1 of any year in which the information is available, evaluation results from prior grants. To ensure the department complies with this subparagraph, regional centers and community-based organizations receiving funding shall provide the department, by March 1 of the same year, with an evaluation of funded activities and the effectiveness of those activities in reducing disparities in the purchase of services, to the extent information is available. The provision of data by community-based organizations reflecting groups that are impacted by disparities whose purchase of services data otherwise would have to be deidentified pursuant to applicable federal or state privacy laws may be waived for the purpose of reporting grant outcomes pursuant to this subdivision.

(I) On or before December 31, 2021, the department shall contract with an entity or entities with demonstrated experience in quantitative and qualitative data evaluation to design and conduct an independent evaluation of the efforts to promote equity and reduce disparities pursuant to subdivision (k).

(m) (1) The data compiled pursuant to subdivisions (a) and (b) shall be deidentified in accordance with Section 164.514 of Title 45 of the Code of Federal Regulations or with updated regulations regarding the deidentification of data in accordance with the federal Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191) prior to that data being disclosed publicly to third parties, including, but not limited to, stakeholders, or posted on internet websites.

(2) The department shall deidentify purchase of services data pertaining to any regional center in a manner that maximizes transparency.

(Amended by Stats. 2023, Ch. 44, Sec. 15. (AB 121) Effective July 10, 2023.)

4519.6. The department and the regional centers shall annually collaborate to determine the most appropriate methods to collect and compile meaningful data in a uniform manner, as specified in Section 4519.5, related to the payment of copayments, coinsurance, and deductibles by each regional center.

(Amended by Stats. 2014, Ch. 30, Sec. 14. (SB 856) Effective June 20, 2014.)

4519.7. (a) Any regional center employee shall not be liable for civil damages on account of an injury or death resulting from an employee's act or omission where the act or omission was the result of the exercise of the discretion vested in him or her, in good faith, in carrying out the intent of this division, except for acts or omissions of gross negligence or acts or omissions giving rise to a claim under Section 3294 of the Civil Code. This section shall not be applied to provide immunity from liability for any criminal act.

(b) This section is not intended to change, alter, or affect the liability of regional centers, including, but not limited to, the vicarious liability of a regional center due to a negligent employee.

(c) A regional center employee, when participating in filing a complaint or providing information as required by law regarding a consumer's health, safety, or well-being, or participating in a judicial proceeding resulting therefrom, shall be presumed to be acting in good faith, and unless the presumption is rebutted, shall be immune from any liability, civil or criminal, and shall be immune from any penalty, sanction, or restriction that might be incurred or imposed. The presumption established by this subdivision is a presumption affecting the burden of producing evidence.

(d) This section shall apply only to acts or omissions that occur on or after January 1, 2001.

(Amended by Stats. 2008, Ch. 51, Sec. 1. Effective January 1, 2009.)

4519.8. On or before March 1, 2019, the department shall submit a rate study to the appropriate fiscal and policy committees of the Legislature addressing the sustainability, quality, and transparency of community-based services for individuals with developmental disabilities. The department shall consult with stakeholders, through the developmental services task force process, in developing the study. The study shall include, but not be limited to, all of the following:

(a) An assessment of the effectiveness of the methods used to pay each category of community service provider. This assessment shall include consideration of the following factors for each category of service provider:

(1) Whether the current method of ratesetting for a service category provides an adequate supply of providers in that category, including, but not limited to, whether there is a sufficient supply of providers to enable consumers throughout the state to have a choice of providers, depending upon the nature of the service.

(2) A comparison of the estimated fiscal effects of alternative rate methodologies for each service provider category.

(3) How different rate methodologies can incentivize outcomes for consumers.

(b) An evaluation of the number and type of service codes for regional center services, including, but not limited to, recommendations for simplifying and making service codes more reflective of the level and types of services provided.

(Added by Stats. 2016, 2nd Ex. Sess., Ch. 3, Sec. 2. (AB 1 2x) Effective June 9, 2016.)

4519.9. (a) The department shall establish a community navigator program to promote the utilization of generic and regional center services by using community leaders, family members, or self-advocates to provide information and guidance to consumers and their families who could benefit from added support to navigate available resources.

(1) The program shall be structured to utilize individuals and families who are receiving or have received regional center services to provide education to those individuals who are or may be eligible for regional center services regarding the developmental disabilities services system, agencies available to assist them, and other available resources.

(2) The program shall focus on cultural and linguistic competency in supporting individuals and families to improve equitable access to regional center services.

(b) The department shall engage stakeholders to obtain input on key elements for the community navigator program by August 31, 2021.

(c) The department shall allocate funding to family resource centers to administer community navigator programs.

(1) To the extent possible, each funded program shall share a culture or ethnicity, or both, community, and language with the individuals and families they support when offering assistance and education to reduce barriers in accessing services.

(2) Each program funded pursuant to this subdivision shall assist individuals and families in accessing and utilizing generic and regional center services in their communities, including, but not limited to, assistance in building trust with regional center staff, education on available services, guidance on how to request needed services, and support from peers in the community who have experience with the regional center system.

(d) The department shall issue funding guidelines regarding the selection of community navigator programs and the conditions under which the funding shall be used consistent with the requirements of this section. The guidelines shall be exempt from the rulemaking process of Chapter 3.5 (commencing with Section 11340) of Part 1 Division 3 of Title 2 of the Government Code.

(e) A family resource center receiving funding for the purpose of the community navigator program shall report to the department in a manner and within a time period determined and outlined in guidance by the department on how the funding allocations were used and shall include recommendations of priorities for activities that may be effective in addressing disparities, including removing barriers to accessing and utilizing generic and regional center services. The department shall post these reports on its internet website by November 1, 2022.

(Added by Stats. 2021, Ch. 76, Sec. 24. (AB 136) Effective July 16, 2021.)

4519.10. (a) The Legislature finds and declares all of the following:

(1) The current service provider rate structure in the system administered by the State Department of Developmental Services lacks transparency, remains complex, is not tied to person-centered outcomes, and varies across providers who provide the same service in the same region.

(2) In 2016, the Legislature funded a rate study to address the sustainability, quality, and transparency of community-based services for individuals with developmental disabilities.

(3) The department, with the help of a consultant, completed the rate study in 2019 and subsequently submitted the study's findings and recommendations to the Legislature. Among other things, the study recommended all of the following:

(A) Within each service category, rate models that include components that may be regularly updated.

(B) Regional differentials to account for regional variance in the cost of living and doing business.

(C) Enhanced rates for services delivered in other languages, including American Sign Language.

(D) An optional add-on for direct service professional levels and wage differentials based on training and demonstrated competency.

(E) The consolidation of certain service codes.

(4) The rate study's fiscal impact analysis indicated that full implementation of these rate models would cost an additional one billion one hundred million dollars (\$1,100,000,000) from the General Fund, or one billion eight hundred million dollars (\$1,800,000,000) of total funds, in the 2019–20 fiscal year.

(5) The recommendations from the rate study and the associated rate models have not been implemented, even as rate study findings informed supplemental rate increases for many service categories in the 2019–20 fiscal year and three additional service categories in the 2020–21 fiscal year.

(6) For Medi-Cal eligible consumers, the department receives federal Medicaid reimbursements to support home- and community-based services provided to those consumers.

(7) Direct service professionals employed by service providers are critical to the quality and provision of services and supports to individuals with intellectual and developmental disabilities.

(8) A prevailing need and challenge within the developmental services system is moving from a compliance-based system to an outcomes-based system. Outcome measures must reinforce the system's core values of meeting individual needs based on person-centered planning. The implementation of rates, pursuant to this section, should support this person-centered transformation through consideration of incentive payments, alternative payment models, alternative service delivery, lessons learned from the COVID-19 pandemic period, person-centered and culturally and linguistically sensitive and competent approaches, training of direct service professionals, compliance with the federal home- and community-based services rule set to take effect on March 17, 2023, and methods for assessing and reporting outcomes.

(9) To improve consumer outcomes and experiences and measure overall system performance, four goals should guide rate reform:

(A) Consumer experience.

(B) Equity.

(C) Quality and outcomes.

(D) System efficiencies.

(b) Therefore, it is the intent of the Legislature to phase in funding and policies beginning in the 2021–22 fiscal year to implement rate reform, which shall include a quality incentive program, create an enhanced person-centered, outcomes-based system, and complete this transformation by July 1, 2025.

(c) (1) (A) Commencing April 1, 2022, the department shall implement a rate increase for service providers that equals one-quarter of the difference between current rates and the fully funded rate model for each provider.

(B) Commencing January 1, 2023, and continuing through December 31, 2024, the department shall adjust rates to equal one-half of the difference between rates in effect March 31, 2022, and the fully funded rate model for each provider, and additional funding shall be available for the quality incentive program described in subdivision (e).

(i) Notwithstanding any other law or regulation, it is the intent of the Legislature that the majority of the rate increase described in this subparagraph for the 2022–23 fiscal year be used for the purpose of enhancing wages and benefits for staff who spend a minimum of 75 percent of their time providing direct services to consumers.

(ii) Commencing January 1, 2023, a provider shall not spend a smaller percentage of the rate increase on direct care staff wages and benefit costs than the corresponding percentage included for direct care staff wages and benefit costs in the rate models for each specific service.

(iii) A provider granted a rate increase pursuant to this section shall maintain documentation, subject to audit by the department or regional center, that the portion of the rate increase identified in this subparagraph was used to increase wages, salaries, or benefits of eligible staff members spending a minimum of 75 percent of their time providing direct services to consumers at least at the same percentage as provided in the rate models.

(iv) For the purpose of this subparagraph, "direct services" are services, supports, care, supervision, or assistance provided by staff directly to a consumer to address the consumer's needs, as identified in the individual program plan, and includes staff's participation in training and other activities directly related to providing services to consumers, as well as program preparation functions as defined in Section 54302 of Title 17 of the California Code of Regulations.

(v) Commencing July 1, 2023, a vendor shall be in compliance with the home- and community-based final rule, effective March 17, 2014, or implementing a corrective action plan, to be eligible for the quality incentive program described in subdivision (e).

(C) (i) Commencing January 1, 2025, the department shall implement the fully funded rate models. The fully funded rate models shall be implemented using two payment components, a base rate equaling 90 percent of the rate model, and a quality

incentive payment, equaling up to 10 percent of the rate model, to be implemented through the quality incentive program described in subdivision (e).

(ii) Notwithstanding any other law, commencing July 1, 2024, the rate models shall be updated to account for the current and any subsequent changes to the statewide minimum wage, as established by Section 1182.12 of the Labor Code, or other relevant statute.

(2) (A) Effective January 1, 2025, it is the intent of the Legislature that rates be uniform within service categories and adjusted for geographic cost differentials, including differentials in wages, the cost of travel, and the cost of real estate.

(B) Providers who were not identified as requiring a rate increase in the rate study are not eligible for rate adjustments pursuant to paragraph (1).

(d) (1) Beginning in the 2021–22 fiscal year, the department shall implement a hold harmless policy for providers whose rates exceed rate model recommendations. The policy shall freeze a provider's existing rates until February 28, 2026, after which time the provider's rates shall be adjusted to equal the rates for other providers in the provider's service category and region.

(2) Beginning January 1, 2025, the department shall also implement a hold harmless policy for providers whose rates in effect on January 1, 2023, exceed 90 percent of the rate model. The policy shall freeze a provider's base rate at the rate in effect on January 1, 2023, until February 28, 2026, after which time the provider's base rates shall be adjusted to equal the base rates for other providers in the provider's service category and region. The provider shall be eligible for a quality incentive payment that, when added to their base rate, equals the fully funded rate model.

(3) Notwithstanding paragraphs (1) and (2), the department may adjust rates as a result of reviews or audits.

(e) In conjunction with implementing rate reform, the department shall implement a quality incentive program in order to improve consumer outcomes, service provider performance, and the quality of services.

(1) (A) The department shall, with input from stakeholders, develop quality measures or benchmarks, or both, for consumer outcomes and regional center and service provider performance. Given the time necessary to identify and develop the measures or benchmarks described in this paragraph, the department may establish quality measures or benchmarks, or both, in the initial years of the quality incentive program that focus on building capacity, developing reporting systems, gathering baseline data, and similar activities while working towards meaningful outcome measures at the individual consumer level for all services. Measures or benchmarks, or both, shall initially include process- and performance-related measures for service providers and, by the conclusion of the 2025–26 fiscal year, shall also evolve to include outcome measures at the individual consumer level. In developing the proposed measures or benchmarks, or both, the department shall do all of the following:

(i) Gather public input through regularly held public meetings that are accessible both virtually and by telephone. Public meeting agendas and meeting materials shall be posted at least three days in advance of any meeting and shared by various means, including internet website updates, focus groups, and other communication.

(ii) Provide documents, which may include, but are not limited to, updates, concept papers, interim reports, proposals, and performance and quality measures and benchmarks, and revisions to these materials, to the Legislature and post these materials on an internet website for public comment at least 30 days, as required by the Centers for Medicare and Medicaid Services, prior to submitting a request for federal funding.

(iii) Seek input from subject matter experts to understand options for outcomes-based system structures using person-centered planning and alternative payment models.

(B) (i) On or before April 1, 2022, proposed quality measures or benchmarks, or both, shall be provided to the Legislature and posted for public comment, as described in subparagraph (A). After the department has considered public comments and modified the proposed quality measures or benchmarks, or both, as needed, the measures or benchmarks, or both, shall be finalized and implemented in the 2022–23 fiscal year.

(ii) On or before April 1 of any subsequent year in which the department proposes new or revised quality measures or benchmarks, or both, the proposed measures or benchmarks, or both, shall be provided to the Legislature and posted for public comment, as described in subparagraph (A). After the department has considered public comments and modified the proposed quality measures or benchmarks, or both, as needed, the measures or benchmarks, or both, shall be finalized and implemented in the upcoming fiscal year.

(C) Beginning in the 2024–25 fiscal year, there will be opportunity for eligible providers to earn full quality incentive payments through one or more measures.

(D) Beginning in the 2026–27 fiscal year, a provider shall be compliant with electronic visit verification, home- and community-based services rules, and applicable annual fiscal reviews and audit requirements as a condition of eligibility for the quality

incentive program.

(2) (A) The department shall develop a quality incentive payment structure for providers meeting the quality measures or benchmarks, or both, developed pursuant to paragraph (1). The department shall issue written directives to define the way quality incentive payments will be made to service providers based on quality measures or benchmarks, or both, developed and implemented under this subdivision.

(B) The department shall determine each provider's quality incentive payment percentage prior to the start of the fiscal year, with the exception of the 2024–25 fiscal year, by measuring the provider's performance against the quality measures or benchmarks for the most recently available reporting period. The department shall provide a written communication to the fiscal and policy committees of the Legislature that reports on the total amount of quality incentive payments estimated to be paid to providers pursuant to this section. This written communication shall be made as soon as is practicable, but no later than 60 days after the quality incentive payment percentages are determined and the providers are informed of their payments.

(f) On or before March 1, 2024, the department shall provide a status update to the Legislature regarding progress toward implementing rate reform and creating an enhanced person-centered, outcomes-based system. The status update may include, but is not limited to, information about all of the following:

(1) Additional changes that may be necessary to effectively implement rate reform, including adding and amending statutes, regulations, and other departmental policies.

(2) Compliance with rules of the federal Medicaid program, including the home- and community-based services final rule effective on March 17, 2014, and state compliance consistent with the current federal guidance, including all of the following:

(A) A definition of what it means to be compliant with the rules of the federal Medicaid program.

(B) Whether there are certain service categories that are unlikely to achieve compliance due to the structure of the service, and, if so, which categories this includes.

(C) Data about the total number of providers within each service category and the estimated number of providers that have not yet achieved compliance.

(3) Program and system improvement efforts made as a result of the state's home- and community-based services additional federal funding, including the one-time investment implemented beginning in the 2021–22 state fiscal year, including a description of how the department will build on the investments.

(g) For purposes of this section, "rate model" means a rate model included in the rate study submitted to the Legislature pursuant to Section 4519.8.

(h) Notwithstanding the rulemaking provisions of the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code), the department may implement, interpret, or make specific this section by means of written directives or similar instructions until regulations are adopted, which shall occur no later than June 30, 2028.

(i) Implementation of this section is contingent upon the approval of federal funding.

(Amended by Stats. 2025, Ch. 12, Sec. 2. (AB 143) Effective June 27, 2025.)

4519.11. (a) Commencing on July 1, 2025, and every other year thereafter, the department shall review and update the rate models per the cost inputs available at the time of the review and shall post the updated rate models on its internet website no later than January 1 of the following year.

(b) An adjustment to a provider rate pursuant to the updated rate models shall be contingent upon the appropriation of funds by the Legislature in the annual Budget Act and approval of federal funding.

(c) For purposes of this section, "rate model" means a rate model included in the rate study submitted to the Legislature pursuant to Section 4519.8.

(Added by Stats. 2024, Ch. 904, Sec. 1. (AB 2423) Effective January 1, 2025.)