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SB-188 Developmental services omnibus. (2021-2022)

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Senate Bill No. 188

CHAPTER 49

An act to amend Sections 95007, 95008, 95012, 95014, 95018, 95020, 95024, 95026, and 95028 of, and to add Section 14670.31 to, the Government Code, to amend Section 1095 of the Unemployment Insurance Code, to amend Sections 4418.25, 4474.16, 4519.2, 4519.10, 4571, 4640.6, 4646, 4646.4, 4659.2, 4685.8, 4688.21, 4706, 4725, 4726, 4728, 4729, 4731, 4783, 4785, 4851, 4863, 7505, and 11464 of, to amend and repeal Sections 4690.6 and 4712.7 of, to amend, repeal, and add Sections 4705, 4707, 4710, 4710.5, 4710.6, 4710.7, 4710.8, 4710.9, 4711, 4711.5, 4711.7, 4712, 4712.2, 4712.5, 4713, 4714, and 4715, of, to add Sections 4685.10, 4688.06, 4690.7, 4705.5, 4708, 4713.5, 4717, 4785.1, and 4870.2 to, to add Chapter 6.5 (commencing with Section 4699) to Division 4.5 of, to add and repeal Section 4511.6 of, and to repeal and add Article 1 (commencing with Section 4700) of Chapter 7 of Division 4.5 of, the Welfare and Institutions Code, relating to developmental services, and making an appropriation therefor, to take effect immediately, bill related to the budget.

[Approved by Governor June 30, 2022. Filed with Secretary of State June 30, 2022.]

LEGISLATIVE COUNSEL'S DIGEST

SB 188, Committee on Budget and Fiscal Review. Developmental services omnibus.

(1) Existing law requires each state agency to make a review of all proprietary state lands over which it has jurisdiction, except as specified, on or before December 31 of each year to determine what, if any, land is in excess of its foreseeable needs and report on those properties in writing to the Department of General Services (DGS). Existing law requires DGS to determine whether the excess land is needed by any other state agency and authorizes the transfer of the excess land to a state agency, as specified. Existing law, if land within the grounds of the Fairview Developmental Center is reported as excess and DGS determines that the land is needed by more than one state agency, authorizes DGS to conduct a public hearing and receive public input regarding the use of the land before transferring it to a state agency. Existing law also authorizes the Director of General Services, with the consent of the State Department of Developmental Services (the department), to let to a nonprofit corporation, for a period not to exceed 55 years, up to 20 acres of real property located within the grounds of the Fairview Developmental Center, for specified purposes and subject to certain conditions.

This bill would authorize the department to enter into an agreement with the City of Costa Mesa for the city to develop a specific plan for the Fairview Developmental Center property, and to manage the land use planning process integrated with a disposition process for the property, to be carried out by DGS. The bill would require the agreement to require that housing be a priority in the planning process, and would require any housing proposal for the property to include affordable housing. The bill would authorize the department to enter into additional agreements to provide for the management, operations, and maintenance of the property, upon terms and conditions that it determines to be in the best interests of the state. The bill would authorize the Director of the Department of General Services to dispose of the property, as the director deems to be in the best interests of the state, if they

determine that the transfer, sale, or final disposition of the property has been unduly delayed. The bill would require that, following CEQA review, the agreement and specified related actions would only be subject to approval by the Director of the Department of General Services and the city council. The bill would require the city to provide quarterly reports to the department, including expenditures, contracts, and an update describing the progress of the expedited planning process for the property. The bill would appropriate \$3,500,000 from the General Fund to the State Department of Developmental Services for allocation to the city to facilitate the disposition of the property, as specified.

(2) Existing federal law, known as Part C of the federal Individuals with Disabilities Education Act (Part C), generally provides funding for states for the purpose of operating a comprehensive statewide program of early intervention services for infants and toddlers with disabilities, from birth through 2 years of age, and their families. Part B of that federal act generally provides funding to states to provide public education available to children from 3 to 5 years of age, inclusive, who have disabilities. Existing state law, the California Early Intervention Services Act, provides a statewide system of coordinated, comprehensive, family-centered, multidisciplinary, and interagency programs that are responsible for providing appropriate early intervention services and supports to all eligible infants and toddlers and their families. Under existing law, direct services for eligible infants and toddlers and their families are provided by regional centers and local educational agencies.

Existing law defines the term “eligible infant or toddler” for purposes of the act to mean infants and toddlers from birth through 2 years of age for whom a need for early intervention services is documented by means of assessment and evaluation and who meet specified criteria. These criteria include having a developmental delay in one or more of 5 specified areas, including communication development, meaning they are determined to have a significant difference between the expected level of development for their age and their current level of functioning. Existing law defines significant difference for this purpose as a 33% delay in one or more developmental areas. The criteria also include infants and toddlers with established risk conditions, including conditions of known etiology or conditions with established harmful developmental consequences.

This bill would add a 6th specified area for an eligible infant or toddler to have a developmental delay by bifurcating communication development to include both expressive and receptive communication development and would change the definition of significant difference to require a 25% delay in one or more of those developmental areas. The bill would also clarify that fetal alcohol syndrome is a condition with established harmful developmental consequences for purposes of the eligibility criteria described above. By imposing a higher level of service on local educational agencies, the bill would impose a state-mandated local program.

Existing law requires the department, in collaboration with the State Department of Education, to plan, develop, implement, and monitor the statewide system of early intervention services, as specified. Existing law requires the department to serve as the lead agency responsible for the administration and coordination of the statewide system and makes the department responsible for various duties, including, among others, establishing a single point of contact with the federal Office of Special Education Programs for the administration of Part C and establishing interagency procedures, to share agency information and to coordinate policymaking activities. Existing law requires the department and the State Department of Education to develop, approve, and implement regulations, as necessary to implement the act, as specified.

This bill would require the department, in establishing those interagency procedures, to make efforts to schedule meetings with, and engage, parents and legal guardians in transition-related activities and to require each regional center to designate a main point of contact for coordinating and completing, with other agencies and persons, the transition of a child and family from Part C to Part B. The bill would require those regulations to be updated, on or before October 1, 2024, to include a process for Part C programs to incorporate family feedback to help update and improve the transition process, training, and family satisfaction.

Existing law requires the State Department of Education to be responsible for administering services and programs for infants with solely visual, hearing, and severe orthopedic impairments, as specified.

This bill would, among other things, require the State Department of Education to require each local educational agency to designate a main point of contact for coordinating and completing with other agencies and persons the transition of a child and family from Part C to Part B. By imposing new duties on a local educational agency, the bill would constitute a state-mandated local program.

Under existing law, direct services for eligible infants and toddlers and their families are provided by regional centers and local educational agencies. Existing law requires an eligible infant or toddler receiving services under the act to have an individualized family service plan and be provided a service coordinator, as specified. Existing law requires parents to be fully informed of their rights, including the right to invite another person, including a family member or an advocate or peer parent, to accompany them to any or all individualized family service plan meetings. Existing law requires a referral to be made to the local family resource center or network and conditions this referral on parent or guardian consent.

This bill would require a service coordinator to conduct at least quarterly reviews of the individualized family service plan. The bill would require a request for consent for the above-described referral to be offered to the parents or the legal guardian at the initial

individualized family service plan meeting and at any subsequent individualized family service plan meeting, if consent was not previously obtained.

Existing law requires that any increased costs to a local educational agency or to a regional center due to the implementation of the California Early Intervention Services Act be funded from specified federal funds. Existing law authorizes the department, in consultation with the State Department of Education, to allocate funds to support family resource services, including, but not limited to, parent-to-parent support, information dissemination and referral, public awareness, family-professional collaboration activities, and transition assistance for families.

This bill would authorize the department, in consultation with the State Department of Education, to provide additional resources to families with information on specified areas, including, among others, options for services for families after their child reaches three years of age.

(3) Under existing law, the information obtained in the administration of the Unemployment Insurance Code is for the exclusive use and information of the Director of Employment Development in the discharge of the director's duties and is not open to the public. Existing law makes it a crime for a person to knowingly access, use, or disclose this confidential information without authorization. Existing law requires the Director of Employment Development to permit the use of information in the director's possession for, among other purposes, enabling the State Department of Developmental Services to obtain quarterly wage data of consumers served by that department for the purposes of monitoring and evaluating employment outcomes to determine the effectiveness of the Employment First Policy.

This bill would additionally authorize the director to permit the use of that information to enable the State Department of Developmental Services to obtain unemployment insurance claim data of consumers served by that department, and would expand the purposes for that information obtained to include monitoring program operation and evaluations of the Employment First Policy. By allowing for additional distribution of this information, and thereby expanding the number of persons subject to the access, use, and confidentiality restrictions, this bill would expand the scope of a crime and impose a state-mandated local program.

(4) Existing law, the Lanterman Developmental Disabilities Services Act, requires the department to contract with regional centers for the provision of community services and supports for persons with developmental disabilities and their families. Existing law also vests in the department jurisdiction over various state developmental centers for the provision of care to persons with developmental disabilities.

Existing law requires the department, when closing a developmental center, to comply with procedural requirements, including the submission of a detailed safety net plan to the Legislature. Existing law required the department, on or before January 10, 2020, to submit an update of a safety net plan regarding how the department will provide access to crisis services after the closure of a developmental center and how the state will maintain its role in providing residential services to those whom private sector vendors cannot or will not serve.

This bill would require the department to submit an update of that plan to the Legislature on or before January 10, 2023. The bill would require the updated plan to include specified additional information, including the department's strategic planning process. The bill would require the department, between July 1, 2023, and December 31, 2026, to provide quarterly updates to the appropriate policy and fiscal committees of the Legislature on the steps foreseen, planned, and completed in the development of services under the updated plan.

(5) Under existing law, the regional centers purchase needed services and supports for individuals with developmental disabilities through approved service providers, or arrange for their provision through other publicly funded agencies. The services and supports to be provided to a regional center consumer are contained in an individual program plan (IPP), developed in accordance with prescribed requirements. Existing law requires the department to establish guidelines and oversee a program to increase paid internship opportunities for individuals with developmental disabilities that produce outcomes consistent with the IPP.

This bill would require, in addition to that program and subject to an appropriation in the Annual Budget Act for this purpose, the department to establish a 3-year pilot program that focuses on competitive integrated employment, postsecondary education, and career readiness for individuals with developmental disabilities exiting work activity programs or secondary education. The bill would require the pilot program to satisfy specified requirements, including that it be developed in consultation with stakeholders.

Existing law authorizes a consumer of developmental services to choose a tailored day service or vouchered community-based training service, in lieu of any other regional center vendored day program, look-alike day program, supported employment program, or work activity program.

This bill would authorize a consumer to choose a tailored day service or vouchered community-based training services in lieu of, or in conjunction with, those other programs, based on a daily rate of 6 hours per day, as specified. The bill would require a

consumer's individualized service design requirements for tailored day service to be developed using a person-centered planning process, as specified. The bill would delete existing regional center requirements for negotiating vendor rates for the tailored day service option for both currently vendored and new programs, and instead would require the regional center to vendor those services, commencing July 1, 2022, at an hourly rate calculated pursuant to specified provisions. The bill would prohibit delivery of tailored day services on the same day as any other regional center vendored day program, look-alike day program, supported employment program, or work activity program, except under prescribed circumstances. The bill would prohibit the total monthly hours of tailored day services from exceeding the number of days in the month tailored day services are authorized, multiplied by 4. The bill would require the rate for vouchersed community-based training service to be the most recent rate posted on the department's public internet website.

Existing law requires activity centers, adult development centers, behavior management programs, and other look-alike day programs with a daily rate to bill regional centers for services provided to consumers in terms of half days of service and full days of service. Existing law defines a full day of service as a day in which the consumer's attendance is at least 65% of the declared and approved program day, and a half day of service as a day in which the consumer's attendance does not meet the criteria for billing for a full day of service.

This bill would repeal the requirement to bill in terms of full days and half days, effective July 1, 2022. The bill would make related conforming changes.

Existing law, for purposes of developmental services, defines "nonresidential services" to include all services provided by any vendor other than a residential facility.

This bill would authorize a provider of nonresidential services to utilize Alternative Nonresidential Services, as authorized in a specified directive of the department, if needed, to meet a consumer's service needs, until December 31, 2022. The bill would require these services to be responsive to each consumer's current needs and be mindful of the importance of safety during the COVID-19 pandemic, including compliance with applicable state and local health orders and licensing requirements.

Existing law requires the department to establish and implement a statewide Self-Determination Program to provide participants and their families, within an individual budget, increased flexibility and choice, and greater control over decisions, resources, and needed and desired services and supports to implement their IPP, in accordance with prescribed requirements. Existing law provides participants with a choice of financial management services providers who assist the participant to manage and direct the distribution of funds contained in the individual budget, and ensure that the participant has the financial resources to implement their IPP throughout the year. Existing law requires the costs of the financial management services to be paid by the participant out of the participant's individual budget, except as specified. Existing law requires the State Council on Developmental Disabilities to issue a report to the Legislature by December 31, 2022, on specified topics related to the program.

This bill would instead require the regional center to pay the full costs of the participant's financial management services provider. The bill would also require the council to issue the report by June 30, 2023.

Existing law requires all regional center vendors that provide crisis or residential services or supported living services, long-term health care facilities, and acute psychiatric hospitals to report on a monthly basis, among other things, the number of incidents of seclusion and the duration of time spent per incident in seclusion, to a designated agency.

This bill would require the regional center vendors to also report to the department, the regional center providing service to the consumer, and the vendoring regional center, if different.

Existing law required the department, on or before March 1, 2019, to submit a rate study to specified committees of the Legislature regarding community-based services for individuals with developmental disabilities. Existing law requires the department to implement rate increases between April 1, 2022, and July 1, 2025, to raise service providers' rates based on a formula that takes into account the fully funded rate reflected in the rate models that were included in the rate study. Existing law requires the department, commencing April 1, 2022, and continuing through the 2022–23 fiscal year, to implement a rate increase for service providers that equals $\frac{1}{4}$ of the difference between the current rates and the fully funded rate model for each provider. Existing law requires the department, commencing July 1, 2023, and continuing through the 2024–25 fiscal year, to adjust rates to equal $\frac{1}{2}$ of the difference between rates in effect March 31, 2022, and the fully funded rate model for each provider. Existing law requires the department, commencing July 1, 2025, to implement the fully funded rate models, as specified.

This bill would accelerate the timeline for those rate increases so that, commencing January 1, 2023, and continuing through the 2023–24 fiscal year, rates would be adjusted to equal $\frac{1}{2}$ of the difference between rates in effect March 31, 2022, and the fully funded rate model for each provider. The bill would require the department, commencing July 1, 2024, to implement the fully funded rate models, as specified. The bill would prohibit a provider, commencing January 1, 2023, from spending 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. The bill would require a provider granted a rate

increase to maintain documentation that the portion of the rate increase was used to increase wages, salaries, or benefits of eligible staff members spending a minimum of 75% of their time providing direct services to consumers at least at the same percentage as provided in the rate models. The bill would require a vendor to be in compliance with the home- and community-based final rule, as specified, or implementing a corrective action plan, to be eligible for a certain quality incentive program.

Under existing law, regional center contracts require certain specified staffing levels and expertise, including service coordinator-to-consumer ratios.

This bill would require those regional center contracts to require caseloads for all consumers 5 years of age or younger to be an average coordinator-to-consumer ratio of 1 to 40. The bill would also provide a process of enhanced service coordination, including a service coordinator-to-consumer ratio of 1 to 40 and routine contact, as prescribed, to consumers identified as having low or no purchase-of-service expenditures, as defined, until one of a set of specified criteria are met, including the family or consumer no longer being interested in receiving enhanced service coordination or when the family or consumer feels confident they can continue and be successful without receiving enhanced service coordination.

Existing law requires the department to contract with an independent agency or organization to implement a quality assurance instrument that assesses consumer and family satisfaction, provision of services in a linguistically and culturally competent manner, and personal outcomes.

This bill would, until there is more than one available assessment that meets the statutory requirements, exempt the quality assurance instrument contract from the state personal services contracting requirements, the Public Contract Code, the State Contracting Manual, the State Administration Manual, the approval of the Department of General Services, and the approval of the Department of Technology.

Existing law sets forth various provisions for regional center worker retention and for training of direct care staff employed in community care facilities that receive regional center funding, as specified.

This bill would require, subject to an appropriation, the department to establish, and regional centers to administer, prescribed programs relating to developmental services workforce stabilization, including a program to provide training stipends to direct support professionals, an entry-level training and internship program with retention stipends for individuals interested in becoming direct support professionals, and a tuition reimbursement program for regional center employees who seek a degree or certification in a health or human services-related field. The bill would set forth the eligibility requirements, monetary ranges, and requirements for data reporting to the department. The bill would require the department to report to the Legislature, as specified, evaluating the success of the above-described programs.

This bill would require, subject to an appropriation, the department to develop a pilot project to test the feasibility of remote consumer services and supports that use technology solutions. The bill would require the department to pilot remote services and supports based on certain factors. The bill would require the department to report to the Legislature at quarterly briefings, and to submit a final evaluation report no later than January 10, 2026.

Existing law, until June 30, 2022, requires a meeting regarding the provision of services and supports by the regional center, including a meeting to develop or revise a consumer's IPP, to be held by remote electronic communications if requested by the consumer or, if appropriate, if requested by the consumer's parents, legal guardian, conservator, or authorized representative.

This bill would extend that requirement until June 30, 2023.

(6) Existing law establishes the Family Cost Participation Program, which requires the department to develop and establish a sliding scale for families with an annual gross income of not less than 400% of the federal poverty guideline, as specified, to be used by regional centers to assess the parents' cost participation for providing respite, daycare, and camping services to their children under 18 years of age who have developmental disabilities and who are not eligible for Medi-Cal, among other eligibility criteria. Existing law also requires a regional center to assess an annual family program fee, as specified, from parents whose adjusted gross family income is at or above 400% of the federal poverty level and who have a child meeting prescribed requirements, including receiving specified services from a regional center.

This bill, from July 1, 2022, to June 30, 2023, inclusive, would require regional centers to suspend existing and new assessments and reassessments of the cost participation and existing and new assessments, reassessments, and collections of the annual family program fee described above. The bill would also require the department to submit to the Legislature, on or before January 10, 2023, and as part of the annual budget process, a plan to revise the Family Cost Participation Program and the annual family program fee, including consideration of changes that include, but are not limited to, those that promote administrative efficiency and program compliance.

(7) Existing law establishes skilled nursing centers designated as institutions for mental disease. Existing law requires each institution for mental disease that has admitted a regional center consumer in the preceding year to report annually on February 1

to the contractor for regional center clients' rights advocacy services the total number and age of consumers placed in that facility, among other things.

This bill would require each institution for mental disease that in the preceding year has admitted a regional center consumer, including consumers whose placements are not funded by a regional center, to submit quarterly reports to the department, the regional center providing services to the consumer, and the contractor for regional center clients' rights advocacy services, that include specified information, including the total number and age, race, and ethnicity of consumers placed in that facility.

Existing law establishes requirements for family homes that provide services and supports for adults with developmental disabilities who do not require continuous skilled nursing care. Existing federal regulations require home and community-based settings to meet specified standards.

This bill would recognize the right of adults with disabilities to reside in the family home and that adults with developmental disabilities, and their families, may need coordinated family support services that are tailored to their unique needs. The bill would require the department to establish a Coordinated Family Support Services Pilot Program, as specified, for adults who live with their families. The bill would authorize the department to issue administrative program directives for coordinated family support services, subject to various requirements, including that any administrative program directive or regulation include key elements of the pilot program.

(8) Existing law refers to regional centers and developmental centers, collectively, as service agencies and requires every service agency, as a condition of continued receipt of state funds, to have an agency fair hearing procedure for resolving conflicts between the service agency and recipients of, or applicants for, service. Existing law also requires the department to implement a mediation process for resolving conflicts between regional centers and recipients of services, and establishes a process for a voluntary informal meeting to resolve conflicts. Existing law requires adequate notice, as defined, to be given to an applicant for, or recipient of, services prior to specified actions being taken by the service agency, including a decision to reduce, terminate, or change services set forth in an IPP, and requires adequate notice to be sent no more than 5 working days after the agency makes a decision to deny the initiation of a service or support requested for inclusion in the IPP.

This bill, commencing March 1, 2023, would revise and recast those provisions and, instead, would require every regional center or state-operated facility, as a condition of continued receipt of state funds, to have an appeals procedure for resolving conflicts between the regional center or state-operated facility and recipients of, or applicants for, services. The bill would require the appeals process to include options for an informal meeting, mediation, and a fair hearing and would prescribe requirements governing those options, including notice, timeline, and procedural requirements, and the rights and duties of the parties.

The bill would require the department to create, with input from stakeholders, standard appeals process information packets. The bill would require one information packet to be related to appeals under the California Early Intervention Services Act and another information packet to be related to appeals under the Lanterman Developmental Disabilities Services Act. The bill would require the hearing office, in collaboration with the department, to establish and maintain an advisory committee composed of various stakeholders, including recipients and family members, on at least a semiannual basis to assist the hearing office by providing nonbinding recommendations for improvements to fair hearing and mediation operations.

(9) Existing law prohibits the department from admitting anyone to a developmental center unless the person meets certain requirements. Existing law authorizes commitment to the Canyon Springs Community Facility prior to June 30, 2022, as specified, and prohibits admission to certain facilities, including the Canyon Springs Community Facility and the Porterville Developmental Center, to extend beyond a certain date. Existing law requires quarterly updates to legislative staff, as specified.

This bill would extend the date by which an admission is permitted to the Canyon Springs facility to June 30, 2023, and would also extend the date after which a commitment to the Canyon Springs facility and the Porterville facility would be required to end. The bill would require a person admitted to the Canyon Springs Community Facility to be subject to enhanced monitoring, as provided, and would require the quarterly update for persons admitted to the Canyon Springs facility to include all alternative placement options examined prior to admission.

(10) Existing law, the Aid to Families with Dependent Children-Foster Care (AFDC-FC) program, requires foster care providers to be paid a per-child per-month rate, established by the State Department of Social Services, for the care and supervision of the child placed with the provider. Existing law establishes the Approved Relative Caregiver Funding Program (ARC), in counties that choose to participate, for the purpose of making the amount paid to relative caregivers for the in-home care of children placed with them who are ineligible for AFDC-FC payments equal to the amount paid on behalf of children who are eligible for AFDC-FC payments. Existing law establishes the state-funded Kinship Guardianship Assistance Payment Program (Kin-GAP), which provides aid on behalf of eligible children who are placed in the home of a relative guardian. Existing law requires specified rates for children who are both regional center consumers and recipients of AFDC-FC, ARC, or Kin-GAP benefits. Existing law requires the State Department of Social Services and the State Department of Developmental Services to provide specified data related to the provision of those services to the Joint Legislative Budget Committee on a semiannual basis.

This bill would instead require that data to be provided on an annual basis. The bill would additionally require the State Department of Social Services and the State Department of Developmental Services to provide public transparency regarding the implementation of those provisions relating to the services provided to children who are both regional center consumers and recipients of AFDC-FC, ARC, or Kin-GAP benefits through the annual posting of that data on their respective internet websites.

(11) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that with regard to certain mandates no reimbursement is required by this act for a specified reason.

With regard to any other mandates, this bill would provide that, if the Commission on State Mandates determines that the bill contains costs so mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above.

This bill would declare that it is to take effect immediately as a bill providing for appropriations related to the Budget Bill.

Vote: majority Appropriation: yes Fiscal Committee: yes Local Program: yes

THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

SECTION 1. Section 14670.31 is added to the Government Code, to read:

14670.31. (a) The Legislature finds and declares all of the following:

- (1) The Fairview Developmental Center is located in the City of Costa Mesa, in the County of Orange, and is composed of a developed campus covering approximately 102 acres adjacent to Costa Mesa Country Club.
- (2) The Fairview Developmental Center opened in 1959 and is a state-run residential care facility dedicated to serving individuals with developmental disabilities.
- (3) The State Department of Developmental Services announced the warm shutdown of the facility and acknowledged that it was not the intent of the state to follow the traditional state surplus property process.
- (4) The State Department of Developmental Services is relocating all Fairview Developmental Center residents to homes in the community, and may use former active units for short-term needs.
- (5) California is experiencing an acute affordable housing crisis. The cost of land significantly limits the development of affordable housing. It is the intent of the Legislature that priority be given to affordable housing in the disposition of the Fairview Developmental Center state real property.
- (6) It is the intent of the Legislature to establish a partnership among the Department of General Services, the State Department of Developmental Services, and the City of Costa Mesa that provides for an expedited land use planning process. During this process, the City of Costa Mesa will manage the planning process. The planning and disposition process is expected to be less than three years in duration.
- (7) It is the intent of the Legislature that the Fairview Developmental Center property be utilized for a mixed-use development, including mixed-income housing. The development would include and prioritize affordable housing, including at least 200 units of permanent supportive housing, and open space.
- (8) It is further the intent of the Legislature that priority be given to redevelopment concepts that include housing that is deed restricted to provide housing for individuals with developmental disabilities.

(b) The following definitions apply for purposes of this section:

- (1) "Agreement" means the formal agreement between the State Department of Developmental Services and the City of Costa Mesa to implement a disposition and land use planning process.
- (2) "City" means the City of Costa Mesa.
- (3) "Council" means the City Council of the City of Costa Mesa.
- (4) "Director" means the Director of the Department of General Services.
- (5) "Department" means the State Department of Developmental Services.

(6) "Property" means all state-owned real property comprising the Fairview Developmental Center, less any acreage transferred to other state agencies by the Department of General Services.

(7) "Specific plan" means a comprehensive planning and zoning document for the Fairview Developmental Center property.

(c) (1) The department, upon those terms and conditions that it deems to be in the best interests of the state, may enter into an agreement with the city for the city to develop a specific plan for the property, and to manage the land use planning process integrated with a disposition process for the property, to be carried out by the Department of General Services. The disposition may include the sale or lease of the property, or property interest, the director deems to be in the best interests of the state. From funds appropriated by the Legislature for this purpose, the department shall allocate three million five hundred thousand dollars (\$3,500,000) to the city to facilitate the disposition of the property by amending the general plan of the city and any appropriate planning documents and zoning ordinances, completing any environmental review, and addressing the economic feasibility of future development for the purposes intended by the Legislature.

(2) In carrying out the land use planning and disposition process pursuant to the agreement, the department, the director, and the city shall provide for the expeditious planning of future land uses for the site and an opportunity for community input, with the intent to provide certainty for the community and a potential developer, expedite marketing, and maximize interested third-party potential purchasers.

(3) The disposition of the property or property interests shall provide for affordable housing to the greatest extent feasible, and shall be upon terms and conditions the director deems to be in the best interests of the state.

(4) The agreement shall require that housing be a priority in the planning process and that any housing proposal determined to be appropriate for the property shall include affordable housing. The agreement and the development plan shall provide for housing and affordable housing at a level consistent with the January 2020 council-adopted strategy of 1,500 units and the housing assessment in the Department of General Services' 2021 Infrastructure Assessment of up to 2,500 units for the site.

(d) (1) The department may enter into any additional agreements, upon terms and conditions that the department determines to be in the best interests of the state, to provide for the management, operations, and maintenance of the property.

(2) The intent of the Legislature is for expeditious planning and disposition for affordable and permanent supportive housing at the property. The agreement, any necessary land use approvals, including modifying the general plan, rezoning the property, approving a specific plan or plans, and any other action necessary for the implementation of the development plan or the disposition of the property, following CEQA review, shall only be subject to approval by the director and the council. Should the director determine that the transfer, sale, or final disposition of the property has been unduly delayed, the director may dispose of the property as deemed to be in the best interests of the state.

(e) The city shall provide quarterly reports to the department that shall include expenditures, contracts, and an update describing the progress of the expedited planning process.

SEC. 2. Section 95007 of the Government Code is amended to read:

95007. The State Department of Developmental Services shall serve as the lead agency responsible for administration and coordination of the statewide system. The specific duties and responsibilities of the State Department of Developmental Services shall include, but are not limited to, all of the following:

(a) Establishing a single point of contact with the federal Office of Special Education Programs for the administration of Part C of the federal Individuals with Disabilities Education Act.

(b) Administering the state early intervention system in accordance with Part C of the federal Individuals with Disabilities Education Act (20 U.S.C. Sec. 1431 et seq.), applicable regulations, and an approved state application.

(c) Administering mandatory and discretionary components as specified in Sections 95022 and 95024.

(d) Administering fiscal arrangements and interagency agreements with participating agencies and community-based organizations to implement this title.

(e) (1) Establishing interagency procedures, including the designation of local coordinating structures, as are necessary to share agency information and to coordinate policymaking activities. In developing these procedures, efforts shall be made to schedule meetings with, and engage parents and legal guardians in, transition-related activities.

(2) Require each regional center to designate a main point of contact for coordinating and completing, with other agencies and persons, the transition of a child and family from Part C to Part B of the federal Individuals with Disabilities Education Act, including establishing practices to educate and support families during transition.

(f) Adopting written procedures for receiving and resolving complaints regarding violations of Part C of the federal Individuals with Disabilities Education Act by public agencies covered under this title, as specified in Section 1435(a)(10) of Title 20 of the United States Code and appropriate federal regulations.

(g) Establishing, adopting, and implementing procedural safeguards that comply with the requirements of Part C of the federal Individuals with Disabilities Education Act, as specified in Section 1439 of Title 20 of the United States Code and appropriate federal regulations.

(h) (1) Monitoring of agencies, institutions, and organizations receiving assistance under this title.

(2) Monitoring shall be conducted by interagency teams that are sufficiently trained to ensure compliance. Interagency teams shall consist of, but not be limited to, representatives from the State Department of Developmental Services, the State Department of Education, the interagency coordinating council, or a local family resource center or network, parent, direct service provider, or any other agency responsible for providing early intervention services.

(3) All members of an interagency team shall have access to all information that is subject to review. Members of each interagency team shall maintain the confidentiality of the information, and each member of the interagency team shall sign a written agreement of confidentiality.

(4) A summary of monitoring issues and findings shall be forwarded biannually to the interagency coordinating council for review.

(i) Establishing innovative approaches to information distribution, family support services, and interagency coordination at the local level. This shall include the posting of information for parents specific to transition requirements along with other parent training opportunities on the lead agency's internet website, the regional centers' websites, and other appropriate internet websites.

(j) Ensuring the provision of appropriate early intervention services to all infants eligible under Part C of the federal Individuals with Disabilities Education Act (20 U.S.C. Sec. 1431 et seq.) and under Section 95014, except for those infants who have solely a low incidence disability as defined in Section 56026.5 of the Education Code and who are not eligible for services under the Lanterman Developmental Disabilities Services Act (Division 4.5 (commencing with Section 4500) of the Welfare and Institutions Code).

The development and implementation of subdivisions (e) to (h), inclusive, shall be a collaborative effort between the State Department of Developmental Services and the State Department of Education. In establishing the written procedures for receiving and resolving complaints as specified in subdivision (f) and in establishing and implementing procedural safeguards as specified in subdivision (g), it is the intent of the Legislature that these procedures be identical for all infants served under this act and shall be in accordance with Sections 303.400 and 303.420(b) of Title 34 of the Code of Federal Regulations. The procedural safeguards and due process requirements established under this title shall replace and be used in lieu of due process procedures contained in Chapter 1 (commencing with Section 4500) of Division 4.5 of the Welfare and Institutions Code and Part 30 (commencing with Section 56500) of the Education Code for infants and their families eligible under this title.

SEC. 3. Section 95008 of the Government Code is amended to read:

95008. (a) The State Department of Education shall be responsible for administering services and programs for infants with solely visual, hearing, and severe orthopedic impairments, and any combination thereof, who meet the criteria in Sections 56026 and 56026.5 of the Education Code, and in Section 3030(a), (b), (d), or (e) of, and Section 3031 of, Title 5 of the California Code of Regulations and Part C of the federal Individuals with Disabilities Education Act (20 U.S.C. Sec. 1431 et seq.) and who are not eligible for services under the Lanterman Developmental Disabilities Services Act (Division 4.5 (commencing with Section 4500) of the Welfare and Institutions Code).

(b) The State Department of Education shall require each local educational agency to designate a main point of contact for coordinating and completing, with other agencies and persons, the transition of a child and family from Part C to Part B of the federal Individuals with Disabilities Education Act, including establishing practices to educate and support families during transition.

SEC. 4. Section 95012 of the Government Code is amended to read:

95012. (a) The following departments shall cooperate and coordinate their early intervention services for eligible infants and their families under this title, and need to collaborate with families and communities, to provide a family-centered, comprehensive, multidisciplinary, interagency, community-based early intervention system:

(1) State Department of Developmental Services.

(2) State Department of Education.

(3) State Department of Health Care Services.

(4) State Department of Social Services.

(b) Each participating department shall enter into an interagency agreement with the State Department of Developmental Services. Each interagency agreement shall specify, at a minimum, the agency's current and continuing level of financial participation in providing services to infants and toddlers with disabilities and their families. Each interagency agreement shall also specify procedures for resolving disputes in a timely manner. Interagency agreements shall also contain provisions for ensuring effective cooperation and coordination among agencies concerning policymaking activities associated with the implementation of this title, including legislative proposals, regulation development, and fiscal planning. All interagency agreements shall be reviewed annually and revised as necessary.

(c) In addition to the provisions specified in subdivision (b), the interagency agreement with the State Department of Education shall include provisions related to the joint development and dissemination of educational information about transitioning from Part C of the federal Individuals with Disabilities Education Act.

SEC. 5. Section 95014 of the Government Code is amended to read:

95014. (a) The term "eligible infant or toddler" for the purposes of this title means infants and toddlers from birth through two years of age, for whom a need for early intervention services, as specified in the federal Individuals with Disabilities Education Act (20 U.S.C. Sec. 1431 et seq.) and applicable regulations, is documented by means of assessment and evaluation as required in Sections 95016 and 95018 and who meet one of the following criteria:

(1) Infants and toddlers with a developmental delay in one or more of the following six areas: cognitive development; physical and motor development, including vision and hearing; expressive communication development; receptive communication development; social or emotional development; or adaptive development. Developmentally delayed infants and toddlers are those who are determined to have a significant difference between the expected level of development for their age and their current level of functioning. This determination shall be made by qualified personnel who are recognized by, or part of, a multidisciplinary team, including the parents. A significant difference is defined as a 25-percent delay in one or more developmental areas.

(2) Infants and toddlers with established risk conditions, who are infants and toddlers with conditions of known etiology or conditions, including fetal alcohol syndrome, with established harmful developmental consequences. The conditions shall be diagnosed by qualified personnel recognized by, or part of, a multidisciplinary team, including the parents. The condition shall be certified as having a high probability of leading to developmental delay if the delay is not evident at the time of diagnosis.

(3) Infants and toddlers who are at high risk of having substantial developmental disability due to a combination of biomedical risk factors, the presence of which are diagnosed by qualified personnel recognized by, or part of, a multidisciplinary team, including the parents.

(b) Regional centers and local educational agencies shall be responsible for ensuring that eligible infants and toddlers are served as follows:

(1) The State Department of Developmental Services and regional centers shall be responsible for the provision of appropriate early intervention services that are required for California's participation in Part C of the federal Individuals with Disabilities Education Act (20 U.S.C. Sec. 1431 et seq.) for all infants eligible under this section, except for those infants with solely a visual, hearing, or severe orthopedic impairment, or any combination of those impairments, who meet the criteria in Sections 56026 and 56026.5 of the Education Code, and in Section 3030(a) or (b) of, and Section 3031 of, Title 5 of the California Code of Regulations.

(2) The State Department of Education and local educational agencies shall be responsible for the provision of appropriate early intervention services in accordance with Part C of the federal Individuals with Disabilities Education Act (20 U.S.C. Sec. 1431 et seq.) for infants with solely a visual, hearing, or severe orthopedic impairment, or any combination of those impairments, who meet the criteria in Sections 56026 and 56026.5 of the Education Code, and in Section 3030(a) or (b) of, and Section 3031 of, Title 5 of the California Code of Regulations, and who are not eligible for services under the Lanterman Developmental Disabilities Services Act (Division 4.5 (commencing with Section 4500) of the Welfare and Institutions Code).

(3) The transfer procedures and timelines, as provided under subdivision (d) of Section 4643.5 of the Welfare and Institutions Code, shall apply if the circumstances pertaining to an eligible infant or toddler are that the child (A) has an order for foster care placement, is awaiting foster care placement, or is placed in out-of-home care through voluntary placement as defined in subdivision (o) of Section 11400 of the Welfare and Institutions Code, and (B) transfers between regional centers.

(c) For infants and toddlers and their families who are eligible to receive services from both a regional center and a local educational agency, the regional center shall be the agency responsible for providing or purchasing appropriate early intervention services that are beyond the mandated responsibilities of local educational agencies and that are required for California's participation in Part C of the federal Individuals with Disabilities Education Act (20 U.S.C. Sec. 1431 et seq.). The local educational agency shall provide special education services up to its funded program capacity as established annually by the State Department of Education in consultation with the State Department of Developmental Services and the Department of Finance.

(d) An agency or multidisciplinary team, including any agency listed in Section 95012, shall not presume or determine eligibility, including eligibility for medical services, for any other agency. However, regional centers and local educational agencies shall coordinate intake, evaluation, assessment, and individualized family service plans for infants and toddlers and their families who are served by an agency.

(e) Upon termination of the program pursuant to Section 95003, the State Department of Developmental Services shall be responsible for the payment of services pursuant to this title.

(f) This section shall become operative on January 1, 2015.

SEC. 6. Section 95018 of the Government Code is amended to read:

95018. Each eligible infant or toddler and their family shall be provided a service coordinator who will be responsible for facilitating the implementation of the individualized family service plan and for coordinating with other agencies and persons providing services to the family. The qualifications, responsibilities, and functions of service coordinators shall be consistent with the statutes and regulations under Part C and this title, and shall be specified in regulations adopted pursuant to Section 95028. The State Department of Developmental Services shall ensure that service coordinators, as defined in federal law, meet federal and state regulation requirements, are trained to work with infants and their families, and meet competency requirements set forth in Section 52122 of Title 17 of the California Code of Regulations. Service coordinator caseloads shall be as specified in subdivision (c) of Section 4640.6 of the Welfare and Institutions Code. A service coordinator for each eligible infant or toddler and their family shall conduct at least quarterly reviews of the individualized family service plan. Pursuant to Section 303.521 of Title 34 of the Code of Federal Regulations, service coordination is not subject to any fees that might be established for any other federal or state program.

SEC. 7. Section 95020 of the Government Code is amended to read:

95020. (a) An eligible infant or toddler shall have an individualized family service plan. The individualized family service plan shall be used in place of an individual program plan required pursuant to Sections 4646 and 4646.5 of the Welfare and Institutions Code, the individualized education program required pursuant to Section 56340 of the Education Code, or any other applicable service plan.

(b) For an infant or toddler who has been evaluated for the first time, a meeting to share the results of the evaluation, to determine eligibility and, for children who are eligible, to develop the initial individualized family service plan shall be conducted within 45 calendar days of receipt of the written referral. Evaluation results and determination of eligibility may be shared in a meeting with the family prior to the individualized family service plan. Written parent consent, or consent by a legal guardian, to evaluate and assess shall be obtained within the 45-day timeline. A regional center, local educational agency, or the designee of one of those entities shall initiate and conduct this meeting. Families shall be afforded the opportunity to participate in all decisions regarding eligibility and services. During intake and assessment, but no later than the individualized family service plan meeting, the parents, legal guardian, or conservator shall provide copies of any health benefit cards under which the consumer is eligible to receive health benefits, including, but not limited to, private health insurance, a health care service plan, Medi-Cal, Medicare, and TRICARE. If the individual, or, if appropriate, the parents, legal guardians, or conservators, do not have any benefits, the regional center shall not use that fact to negatively impact the services that the individual may or may not receive from the regional center.

(c) (1) Parents and legal guardians shall be fully informed of their rights, including the right to invite another person, including a family member or an advocate or peer parent, or any or all of them, to accompany them to any or all individualized family service plan meetings. Notwithstanding any other law, until June 30, 2023, and at the request of the parent or legal guardian, an individualized family service plan meeting shall be held by remote electronic communications.

(2) With parental consent, or consent by a legal guardian, a referral shall be made to the local family resource center or network. A request for consent shall be offered to the parents or the legal guardian at the initial individualized family service plan meeting and at any subsequent individualized family service plan meeting, if consent was not previously obtained.

(d) The individualized family service plan shall be in writing and shall address all of the following:

(1) A statement of the infant's or toddler's present levels of physical development including vision, hearing, and health status, cognitive development, communication development, social and emotional development, and adaptive developments.

(2) With the concurrence of the family, a statement of the family's concerns, priorities, and resources related to meeting the special developmental needs of the eligible infant or toddler.

(3) A statement of the major outcomes expected to be achieved for the infant or toddler and family where services for the family are related to meeting the special developmental needs of the eligible infant or toddler.

(4) The criteria, procedures, and timelines used to determine the degree to which progress toward achieving the outcomes is being made and whether modifications or revisions are necessary.

(5) (A) A statement of the specific early intervention services necessary to meet the unique needs of the infant or toddler as identified in paragraph (3), including, but not limited to, the frequency, intensity, location, duration, and method of delivering the services, including by remote electronic communications, and ways of providing services in natural generic environments, including group training for parents and legal guardians on behavioral intervention techniques in lieu of some or all of the in-home parent and legal guardian training component of the behavior intervention services, and purchase of neighborhood preschool services and needed qualified personnel in lieu of infant development programs.

(B) Effective July 1, 2009, at the time of development, review, or modification of an infant's or toddler's individualized family service plan, the regional center shall consider both of the following:

(i) The use of group training for parents and legal guardians on behavior intervention techniques, in lieu of some or all of the in-home parent and legal guardian training component of the behavior intervention services.

(ii) The purchase of neighborhood preschool services and needed qualified personnel, in lieu of infant development programs.

(6) A statement of the agency responsible for providing the identified services.

(7) The name of the service coordinator who shall be responsible for facilitating implementation of the plan and coordinating with other agencies and persons.

(8) The steps to be taken to ensure transition of the infant or toddler upon reaching three years of age to other appropriate services. These may include, as appropriate, special education or other services offered in natural environments.

(9) The projected dates for the initiation of services in paragraph (5) and the anticipated duration of those services.

(e) Each service identified in the individualized family service plan shall be designated as one of three types:

(1) An early intervention service, as defined in subsection (4) of Section 1432 of Title 20 of the United States Code, and applicable regulations, that is provided or purchased through the regional center, local educational agency, or other participating agency. The State Department of Health Care Services and the State Department of Social Services shall provide services in accordance with state and federal law and applicable regulations, and up to the level of funding as appropriated by the Legislature. Early intervention services identified in an individualized family service plan that exceed the funding, statutory, and regulatory requirements of these departments shall be provided or purchased by regional centers or local educational agencies under subdivisions (b) and (c) of Section 95014. The State Department of Health Care Services and the State Department of Social Services shall not be required to provide early intervention services over their existing funding, statutory, and regulatory requirements.

(2) Another service, other than those specified in paragraph (1), that the eligible infant or toddler or their family may receive from other state programs, subject to the eligibility standards of those programs.

(3) A referral to a nonrequired service that may be provided to an eligible infant or toddler or their family. Nonrequired services are those services that are not defined as early intervention services or do not relate to meeting the special developmental needs of an eligible infant or toddler related to the disability, but that may be helpful to the family. The granting or denial of nonrequired services by a public or private agency is not subject to appeal under this title. Notwithstanding any other law or regulation to the contrary, effective July 1, 2009, with the exception of durable medical equipment, regional centers shall not purchase nonrequired services, but may refer a family to a nonrequired service that may be available to an eligible infant or toddler or their family.

(f) An annual review, and other periodic reviews, of the individualized family service plan for an infant or toddler and the infant's or toddler's family shall be conducted to determine the degree of progress that is being made in achieving the outcomes specified in the plan and whether modification or revision of the outcomes or services is necessary. The frequency, participants, purpose, and

required processes for annual and periodic reviews shall be consistent with the statutes and regulations under Part C of the federal Individuals with Disabilities Education Act (20 U.S.C. Sec. 1400 et seq.) and this title, and shall be specified in regulations adopted pursuant to Section 95028. At the time of the review, the parents, legal guardian, or conservator shall provide copies of any health benefit cards under which the consumer is eligible to receive health benefits, including, but not limited to, private health insurance, a health care service plan, Medi-Cal, Medicare, and TRICARE. If the parents, legal guardian, or conservator have no such benefit cards, the regional center shall not use that fact to negatively impact the services that the individual may or may not receive from the regional center.

(g) (1) A regional center shall communicate and provide written materials in the family's native language during the assessment, evaluation, and planning process for the individualized family service plan, as required by Part C of the federal Individuals with Disabilities Education Act (20 U.S.C. Sec. 1400 et seq.) and implementing regulations, and as required by Sections 11135 to 11139, inclusive, and implementing regulations, including providing alternative communication services pursuant to Sections 11161 and 11162 of Title 2 of the California Code of Regulations.

(2) The family's native language shall be documented in the individualized family service plan.

SEC. 8. Section 95024 of the Government Code is amended to read:

95024. (a) Any increased cost to local educational agencies due to the implementation of this title shall be funded from the Part C federal funds provided for the purposes of this title.

(b) Any increased costs to regional centers due to the implementation of this title shall be funded from the Part C federal funds provided for the purposes of this title.

(c) The annual Budget Act shall specify the amount of federal Part C funds allocated for local assistance and for state operations individually, for the State Department of Developmental Services, and for the State Department of Education.

(d) If federal funds are available after mandatory components and increased costs in subdivisions (a) and (b), if any, are funded, the lead agency, in consultation with the State Department of Education, may do the following:

(1) Designate local interagency coordination areas throughout the state and allocate available Part C federal funds to fund interagency coordination activities, including, but not limited to, outreach and public awareness, and interagency approaches to service planning and delivery. If the lead agency chooses to designate and fund local interagency coordination areas, the lead agency shall first offer to enter into a contract with the regional center or a local educational agency. If the regional center or any of the local educational agencies do not accept the offer, the lead agency, in consultation with the State Department of Education and the approval of the regional center and local educational agencies in the area, directly may enter into a contract with a private, nonprofit organization. Nothing in this section shall preclude a regional center or local educational agency that enters into a contract with the lead agency from subcontracting with a private, nonprofit organization.

(2) Allocate funds to support family resource services, including, but not limited to, parent-to-parent support, information dissemination and referral, public awareness, family-professional collaboration activities, and transition assistance for families. In providing these services, resources shall be made available to families with information on the following areas:

(A) The difference between Part B and Part C services.

(B) Information about local Part B programs and other services in a family's community.

(C) Options for services for families after their child reaches three years of age.

(D) An overview of the process and timelines for a child's transition at three years of age.

(e) If an expenditure plan is developed under subdivision (d), the lead agency, in consultation with the State Department of Education, shall give high priority to funding family resource services.

(f) Nothing in this section shall be construed to limit the lead agency's authority, in consultation with the State Department of Education, to allocate discretionary Part C federal funds for any legitimate purpose consistent with the statutes and regulations under Part C (20 U.S.C. Secs. 1431 to 1444, inclusive) and this title.

SEC. 9. Section 95026 of the Government Code is amended to read:

95026. (a) The lead agency shall maintain a system for compiling data required by the federal Office of Special Education Programs, through Part C of the federal Individuals with Disabilities Education Act, including the number of eligible infants and toddlers and their families in need of appropriate early intervention services, the number of eligible infants and toddlers and their families served, the types of services provided, and other information required by the federal Office of Special Education

Programs. All participating agencies listed in Section 95012 shall assist in the development of the system and shall cooperate with the lead agency in meeting federal data requirements. The feasibility of using existing systems and including social security numbers shall be explored to facilitate data collection.

(b) Data collected pursuant to this section shall be used to improve service delivery and the quality of transition from Part C to Part B of the federal Individuals with Disabilities Education Act for children and families to the extent it is possible to do so.

SEC. 10. Section 95028 of the Government Code is amended to read:

95028. (a) On or before October 1, 1995, the State Department of Developmental Services, on behalf of the Secretary of the Health and Human Services Agency, and the State Department of Education, on behalf of the Superintendent of Public Instruction, jointly shall develop, approve, and implement regulations, as necessary, to comply with the requirements of this title and Part C, as specified in federal statutes and regulations.

(b) The regulations developed pursuant to this section shall include, but are not limited to, the following requirements:

- (1) The administrative structure for planning and implementation of the requirements of this title and Part C.
- (2) Eligibility for Part C services.
- (3) Evaluation and assessment.
- (4) Individualized family service plans.
- (5) Service coordination.
- (6) The program and service components of the statewide system for early intervention services.
- (7) The duties and responsibilities of the lead agency as specified in Section 95006, including procedural safeguards and the process for resolving complaints against a public agency for violation of the requirements of Part C.

(c) The State Department of Developmental Services shall adopt regulations to implement this title in accordance with Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2. Initial regulations to implement this title shall be adopted as emergency regulations. The adoption of these initial emergency regulations shall be considered by the Office of Administrative Law to be an emergency and necessary for the immediate preservation of the public peace, health and safety, or general welfare. The initial emergency regulations shall remain in effect for no more than 180 days. These regulations shall be jointly developed by the State Department of Developmental Services and the State Department of Education by July 1, 1994. The Department of Finance shall review and comment upon the emergency regulations prior to their adoption.

(d) On or before October 1, 2024, the regulations developed pursuant to this section shall be updated to include a process for Part C programs to incorporate family feedback to help update and improve the transition process from Part C, training, and family satisfaction.

SEC. 11. Section 1095 of the Unemployment Insurance Code is amended to read:

1095. The director shall permit the use of any information in the director's possession to the extent necessary for any of the following purposes, and may require reimbursement for all direct costs incurred in providing any and all information specified in this section, except information specified in subdivisions (a) to (e), inclusive:

- (a) To enable the director or the director's representative to carry out their responsibilities under this code.
- (b) To properly present a claim for benefits.
- (c) To acquaint a worker or their authorized agent with the worker's existing or prospective right to benefits.
- (d) To furnish an employer or their authorized agent with information to enable the employer to fully discharge their obligations or safeguard their rights under this division or Division 3 (commencing with Section 9000).
- (e) To enable an employer to receive a reduction in contribution rate.
- (f) To enable federal, state, or local governmental departments or agencies, subject to federal law, to verify or determine the eligibility or entitlement of an applicant for, or a recipient of, public social services provided pursuant to Division 9 (commencing with Section 10000) of the Welfare and Institutions Code, or Part A of Subchapter IV of the federal Social Security Act (42 U.S.C. Sec. 601 et seq.), when the verification or determination is directly connected with, and limited to, the administration of public social services.

(g) To enable county administrators of general relief or assistance, or their representatives, to determine entitlement to locally provided general relief or assistance, when the determination is directly connected with, and limited to, the administration of general relief or assistance.

(h) To enable state or local governmental departments or agencies to seek criminal, civil, or administrative remedies in connection with the unlawful application for, or receipt of, relief provided under Division 9 (commencing with Section 10000) of the Welfare and Institutions Code or to enable the collection of expenditures for medical assistance services pursuant to Part 5 (commencing with Section 17000) of Division 9 of the Welfare and Institutions Code.

(i) To provide any law enforcement agency with the name, address, telephone number, birth date, social security number, physical description, and names and addresses of present and past employers, of any victim, suspect, missing person, potential witness, or person for whom a felony arrest warrant has been issued, when a request for this information is made by any investigator or peace officer as defined by Sections 830.1 and 830.2 of the Penal Code, or by any federal law enforcement officer to whom the Attorney General has delegated authority to enforce federal search warrants, as defined under Sections 60.2 and 60.3 of Title 28 of the Code of Federal Regulations, as amended, and when the requesting officer has been designated by the head of the law enforcement agency and requests this information in the course of and as a part of an investigation into the commission of a crime when there is a reasonable suspicion that the crime is a felony and that the information would lead to relevant evidence. The information provided pursuant to this subdivision shall be provided to the extent permitted by federal law and regulations, and to the extent the information is available and accessible within the constraints and configurations of existing department records. Any person who receives any information under this subdivision shall make a written report of the information to the law enforcement agency that employs the person, for filing under the normal procedures of that agency.

(1) This subdivision shall not be construed to authorize the release to any law enforcement agency of a general list identifying individuals applying for or receiving benefits.

(2) The department shall maintain records pursuant to this subdivision only for periods required under regulations or statutes enacted for the administration of its programs.

(3) This subdivision shall not be construed as limiting the information provided to law enforcement agencies to that pertaining only to applicants for, or recipients of, benefits.

(4) The department shall notify all applicants for benefits that release of confidential information from their records will not be protected should there be a felony arrest warrant issued against the applicant or in the event of an investigation by a law enforcement agency into the commission of a felony.

(j) To provide public employee retirement systems in California with information relating to the earnings of any person who has applied for or is receiving a disability income, disability allowance, or disability retirement allowance, from a public employee retirement system. The earnings information shall be released only upon written request from the governing board specifying that the person has applied for or is receiving a disability allowance or disability retirement allowance from its retirement system. The request may be made by the chief executive officer of the system or by an employee of the system so authorized and identified by name and title by the chief executive officer in writing.

(k) To enable the Division of Labor Standards Enforcement in the Department of Industrial Relations to seek criminal, civil, or administrative remedies in connection with the failure to pay, or the unlawful payment of, wages pursuant to Chapter 1 (commencing with Section 200) of Part 1 of Division 2 of, and Chapter 1 (commencing with Section 1720) of Part 7 of Division 2 of, the Labor Code.

(l) To enable federal, state, or local governmental departments or agencies to administer child support enforcement programs under Part D of Title IV of the federal Social Security Act (42 U.S.C. Sec. 651 et seq.).

(m) To provide federal, state, or local governmental departments or agencies with wage and claim information in its possession that will assist those departments and agencies in the administration of the Victims of Crime Program or in the location of victims of crime who, by state mandate or court order, are entitled to restitution that has been or can be recovered.

(n) To provide federal, state, or local governmental departments or agencies with information concerning any individuals who are or have been:

(1) Directed by state mandate or court order to pay restitution, fines, penalties, assessments, or fees as a result of a violation of law.

(2) Delinquent or in default on guaranteed student loans or who owe repayment of funds received through other financial assistance programs administered by those agencies. The information released by the director for the purposes of this paragraph shall not include unemployment insurance benefit information.

(o) To provide an authorized governmental agency with any and all relevant information that relates to any specific workers' compensation insurance fraud investigation. The information shall be provided to the extent permitted by federal law and regulations. For purposes of this subdivision, "authorized governmental agency" means the district attorney of any county, the office of the Attorney General, the Contractors State License Board, the Department of Industrial Relations, and the Department of Insurance. An authorized governmental agency may disclose this information to the State Bar of California, the Medical Board of California, or any other licensing board or department whose licensee is the subject of a workers' compensation insurance fraud investigation. This subdivision shall not prevent any authorized governmental agency from reporting to any board or department the suspected misconduct of any licensee of that body.

(p) To enable the Director of Consumer Affairs, or the director's representative, to access unemployment insurance quarterly wage data on a case-by-case basis to verify information on school administrators, school staff, and students provided by those schools who are being investigated for possible violations of Chapter 8 (commencing with Section 94800) of Part 59 of Division 10 of Title 3 of the Education Code.

(q) To provide employment tax information to the tax officials of Mexico, if a reciprocal agreement exists. For purposes of this subdivision, "reciprocal agreement" means a formal agreement to exchange information between national taxing officials of Mexico and taxing authorities of the State Board of Equalization, the Franchise Tax Board, and the Employment Development Department. Furthermore, the reciprocal agreement shall be limited to the exchange of information that is essential for tax administration purposes only. Taxing authorities of the State of California shall be granted tax information only on California residents. Taxing authorities of Mexico shall be granted tax information only on Mexican nationals.

(r) To enable city and county planning agencies to develop economic forecasts for planning purposes. The information shall be limited to businesses within the jurisdiction of the city or county whose planning agency is requesting the information, and shall not include information regarding individual employees.

(s) To provide the State Department of Developmental Services with wage and employer information that will assist in the collection of moneys owed by the recipient, parent, or any other legally liable individual for services and supports provided pursuant to Chapter 9 (commencing with Section 4775) of Division 4.5 of, and Chapter 2 (commencing with Section 7200) and Chapter 3 (commencing with Section 7500) of Division 7 of, the Welfare and Institutions Code.

(t) To provide the State Board of Equalization with employment tax information that will assist in the administration of tax programs. The information shall be limited to the exchange of employment tax information essential for tax administration purposes to the extent permitted by federal law and regulations.

(u) This section shall not be construed to authorize or permit the use of information obtained in the administration of this code by any private collection agency.

(v) The disclosure of the name and address of an individual or business entity that was issued an assessment that included penalties under Section 1128 or 1128.1 shall not be in violation of Section 1094 if the assessment is final. The disclosure may also include any of the following:

- (1) The total amount of the assessment.
- (2) The amount of the penalty imposed under Section 1128 or 1128.1 that is included in the assessment.
- (3) The facts that resulted in the charging of the penalty under Section 1128 or 1128.1.

(w) To enable the Contractors State License Board to verify the employment history of an individual applying for licensure pursuant to Section 7068 of the Business and Professions Code.

(x) To provide any peace officer with the Division of Investigation in the Department of Consumer Affairs information pursuant to subdivision (i) when the requesting peace officer has been designated by the chief of the Division of Investigation and requests this information in the course of and as part of an investigation into the commission of a crime or other unlawful act when there is reasonable suspicion to believe that the crime or act may be connected to the information requested and would lead to relevant information regarding the crime or unlawful act.

(y) To enable the Labor Commissioner of the Division of Labor Standards Enforcement in the Department of Industrial Relations to identify, pursuant to Section 90.3 of the Labor Code, unlawfully uninsured employers. The information shall be provided to the extent permitted by federal law and regulations.

(z) To enable the Chancellor of the California Community Colleges, in accordance with the requirements of Section 84754.5 of the Education Code, to obtain quarterly wage data, commencing January 1, 1993, on students who have attended one or more community colleges, to assess the impact of education on the employment and earnings of students, to conduct the annual evaluation of district-level and individual college performance in achieving priority educational outcomes, and to submit the

required reports to the Legislature and the Governor. The information shall be provided to the extent permitted by federal statutes and regulations.

(aa) To enable the Public Employees' Retirement System to seek criminal, civil, or administrative remedies in connection with the unlawful application for, or receipt of, benefits provided under Part 3 (commencing with Section 20000) of Division 5 of Title 2 of the Government Code.

(ab) To enable the State Department of Education, the University of California, the California State University, and the Chancellor of the California Community Colleges, pursuant to the requirements prescribed by the federal American Recovery and Reinvestment Act of 2009 (Public Law 111-5), to obtain quarterly wage data, commencing July 1, 2010, on students who have attended their respective systems to assess the impact of education on the employment and earnings of those students, to conduct the annual analysis of district-level and individual district or postsecondary education system performance in achieving priority educational outcomes, and to submit the required reports to the Legislature and the Governor. The information shall be provided to the extent permitted by federal statutes and regulations.

(ac) To provide the Agricultural Labor Relations Board with employee, wage, and employer information, for use in the investigation or enforcement of the Alatorre-Zenovich-Dunlap-Berman Agricultural Labor Relations Act of 1975 (Part 3.5 (commencing with Section 1140) of Division 2 of the Labor Code). The information shall be provided to the extent permitted by federal statutes and regulations.

(ad) (1) To enable the State Department of Health Care Services, the California Health Benefit Exchange, the Managed Risk Medical Insurance Board, and county departments and agencies to obtain information regarding employee wages, California employer names and account numbers, employer reports of wages and number of employees, and disability insurance and unemployment insurance claim information, for the purpose of:

(A) Verifying or determining the eligibility of an applicant for, or a recipient of, state health subsidy programs, limited to the Medi-Cal program provided pursuant to Chapter 7 (commencing with Section 14000) of Part 3 of Division 9 of the Welfare and Institutions Code, and the Medi-Cal Access Program provided pursuant to Chapter 2 (commencing with Section 15810) of Part 3.3 of Division 9 of the Welfare and Institutions Code, when the verification or determination is directly connected with, and limited to, the administration of the state health subsidy programs referenced in this subparagraph.

(B) Verifying or determining the eligibility of an applicant for, or a recipient of, federal subsidies offered through the California Health Benefit Exchange, provided pursuant to Title 22 (commencing with Section 100500) of the Government Code, including federal tax credits and cost-sharing assistance pursuant to the federal Patient Protection and Affordable Care Act (Public Law 111-148), as amended by the federal Health Care and Education Reconciliation Act of 2010 (Public Law 111-152), when the verification or determination is directly connected with, and limited to, the administration of the California Health Benefit Exchange.

(C) Verifying or determining the eligibility of employees and employers for health coverage through the Small Business Health Options Program, provided pursuant to Section 100502 of the Government Code, when the verification or determination is directly connected with, and limited to, the administration of the Small Business Health Options Program.

(2) The information provided under this subdivision shall be subject to the requirements of, and provided to the extent permitted by, federal law and regulations, including Part 603 of Title 20 of the Code of Federal Regulations.

(ae) To provide any peace officer with the Investigations Division of the Department of Motor Vehicles with information pursuant to subdivision (i), when the requesting peace officer has been designated by the Chief of the Investigations Division and requests this information in the course of, and as part of, an investigation into identity theft, counterfeiting, document fraud, or consumer fraud, and there is reasonable suspicion that the crime is a felony and that the information would lead to relevant evidence regarding the identity theft, counterfeiting, document fraud, or consumer fraud. The information provided pursuant to this subdivision shall be provided to the extent permitted by federal law and regulations, and to the extent the information is available and accessible within the constraints and configurations of existing department records. Any person who receives any information under this subdivision shall make a written report of the information to the Investigations Division of the Department of Motor Vehicles, for filing under the normal procedures of that division.

(af) Until January 1, 2020, to enable the Department of Finance to prepare and submit the report required by Section 13084 of the Government Code that identifies all employers in California that employ 100 or more employees who receive benefits from the Medi-Cal program (Chapter 7 (commencing with Section 14000) of Part 3 of Division 9 of the Welfare and Institutions Code). The information used for this purpose shall be limited to information obtained pursuant to Section 11026.5 of the Welfare and Institutions Code and from the administration of personal income tax wage withholding pursuant to Division 6 (commencing with Section 13000) and the disability insurance program and may be disclosed to the Department of Finance only for the purpose of preparing and submitting the report and only to the extent not prohibited by federal law.

(ag) To provide, to the extent permitted by federal law and regulations, the Student Aid Commission with wage information in order to verify the employment status of an individual applying for a Cal Grant C award pursuant to subdivision (c) of Section 69439 of the Education Code.

(ah) To enable the Department of Corrections and Rehabilitation to obtain quarterly wage data of former inmates who have been incarcerated within the prison system in order to assess the impact of rehabilitation services or the lack of these services on the employment and earnings of these former inmates. Quarterly data for a former inmate's employment status and wage history shall be provided for a period of one year, three years, and five years following release. The data shall only be used for the purpose of tracking outcomes for former inmates in order to assess the effectiveness of rehabilitation strategies on the wages and employment histories of those formerly incarcerated. The information shall be provided to the department to the extent not prohibited by federal law.

(ai) To enable federal, state, or local government departments or agencies, or their contracted agencies, subject to federal law, including the confidentiality, disclosure, and other requirements set forth in Part 603 of Title 20 of the Code of Federal Regulations, to evaluate, research, or forecast the effectiveness of public social services programs administered pursuant to Division 9 (commencing with Section 10000) of the Welfare and Institutions Code, or Part A of Subchapter IV of Chapter 7 of the federal Social Security Act (42 U.S.C. Sec. 601 et seq.), when the evaluation, research, or forecast is directly connected with, and limited to, the administration of the public social services programs.

(aj) (1) To enable the California Workforce Development Board, the Chancellor of the California Community Colleges, the Superintendent of Public Instruction, the Department of Rehabilitation, the State Department of Social Services, the Bureau for Private Postsecondary Education, the Department of Industrial Relations, the Division of Apprenticeship Standards, the Department of Corrections and Rehabilitation, the Prison Industry Authority, the Employment Training Panel, and a chief elected official, as that term is defined in Section 3102(9) of Title 29 of the United States Code, to access any relevant quarterly wage data necessary for the evaluation and reporting of their respective program performance outcomes as required and permitted by various local, state, and federal laws pertaining to performance measurement and program evaluation, including responsibilities arising under Sections 14013, 14033, and 14042 of this code and Sections 2032 and 2038 of the Streets and Highways Code; the federal Workforce Innovation and Opportunity Act (Public Law 113-128); the workforce metrics dashboard pursuant to paragraph (1) of subdivision (i) of Section 14013; the Adult Education Block Grant Program consortia performance metrics pursuant to Section 84920 of the Education Code; the economic and workforce development program performance measures pursuant to Section 88650 of the Education Code; and the California Community Colleges Economic and Workforce Development Program performance measures established in Part 52.5 (commencing with Section 88600) of Division 7 of Title 3 of the Education Code. Disclosures under this subdivision shall comply with federal and state privacy laws that require the informed consent from program participants of city and county departments or agencies that administer public workforce development programs for the evaluation, research, or forecast of their programs regardless of local, state, or federal funding source.

(2) The department shall do all of the following:

(A) Consistent with this subdivision, develop the minimum requirements for granting a request for disclosure of information authorized by this subdivision regardless of local, state, or federal funding source.

(B) Develop a standard application for submitting a request for disclosure of information authorized by this subdivision.

(C) Approve or deny a request for disclosure of information authorized by this subdivision, or request additional information, within 20 business days of receiving the standard application. The entity submitting the application shall respond to any request by the department for additional information within 20 business days of receipt of the department's request. Within 30 calendar days of receiving any additional information, the department shall provide a final approval or denial of the request for disclosure of information authorized by this subdivision. Any approval, denial, or request for additional information shall be in writing. Denials shall identify the reason or category of reasons for the denial.

(D) Make publicly available on the department's internet website all of the following:

(i) The minimum requirements for granting a request for disclosure of information authorized by this subdivision, as developed pursuant to subparagraph (A).

(ii) The standard application developed pursuant to subparagraph (B).

(iii) The timeframe for information request determinations by the department, as specified in subparagraph (C).

(iv) Contact information for assistance with requests for disclosures of information authorized by this subdivision.

(v) Any denials for requests of disclosure of information authorized by this subdivision, including the reason or category of reasons for the denial.

(ak) (1) To provide any peace officer with the Enforcement Branch of the Department of Insurance with both of the following:

(A) Information provided pursuant to subdivision (i) that relates to a specific insurance fraud investigation involving automobile insurance fraud, life insurance and annuity fraud, property and casualty insurance fraud, and organized automobile insurance fraud. That information shall be provided when the requesting peace officer has been designated by the Chief of the Fraud Division of the Department of Insurance and requests the information in the course of, and as part of, an investigation into the commission of a crime or other unlawful act when there is reasonable suspicion to believe that the crime or act may be connected to the information requested and would lead to relevant information regarding the crime or unlawful act.

(B) Employee, wage, employer, and state disability insurance claim information that relates to a specific insurance fraud investigation involving health or disability insurance fraud when the requesting peace officer has been designated by the Chief of the Fraud Division of the Department of Insurance and requests the information in the course of, and as part of, an investigation into the commission of a crime or other unlawful act when there is reasonable suspicion to believe that the crime or act may be connected to the information requested and would lead to relevant information regarding the crime or unlawful act.

(2) To enable the State Department of Developmental Services to obtain quarterly wage data and unemployment insurance claim data of consumers served by that department for the purposes of monitoring, program operation and evaluation, and evaluating employment outcomes, of the Employment First Policy, established pursuant to Section 4869 of the Welfare and Institutions Code.

(3) The information provided pursuant to this subdivision shall be provided to the extent permitted by federal statutes and regulations.

(al) To provide the CalSavers Retirement Savings Board with employer tax information for use in the administration of, and to facilitate compliance with, the CalSavers Retirement Savings Trust Act (Title 21 (commencing with Section 100000) of the Government Code). The information should be limited to the tax information the director deems appropriate, and shall be provided to the extent permitted by federal laws and regulations.

(am) (1) To enable the Joint Enforcement Strike Force as established by Section 329, and the Labor Enforcement Task Force, as established pursuant to Assembly Bill 1464 of the 2011–12 Regular Session (Chapter 21 of the Statutes of 2012), to carry out their duties.

(2) To provide an agency listed in subdivision (a) of Section 329 intelligence, data, including confidential tax and fee information, documents, information, complaints, or lead referrals pursuant to Section 15925 of the Government Code.

(an) To enable the Bureau for Private Postsecondary Education to access and use any relevant quarterly wage data necessary to perform the labor market outcome reporting data match pursuant to Section 94892.6 of the Education Code. The information provided pursuant to this subdivision shall be provided to the extent permitted by state and federal laws and regulations.

(ao) To enable the Department of Fair Employment and Housing to carry out its duties, including ensuring compliance with Section 12999 of the Government Code. Conduct related to information provided pursuant to this subdivision shall not be subject to the criminal sanctions set forth in subdivision (f) of Section 1094.

(ap) To enable the Cradle-to-Career Data System, as established by Article 2 (commencing with Section 10860) of Chapter 8.5 of Part 7 of Division 1 of Title 1 of the Education Code, to receive employment and earnings data and, as required of the director pursuant to Section 10871 of the Education Code, to provide information to the data system, to the extent permissible by federal laws and regulations.

(aq) (1) To enable the State Air Resources Board to receive unpaid final tax assessment information issued to a port drayage motor carrier or short-haul trucking service for misclassification of a commercial driver, for use in the administration of, and to facilitate compliance with, Chapter 3.6 (commencing with Section 39680) of Part 2 of Division 26 of the Health and Safety Code. The information shall be limited to the tax information the director deems appropriate for disclosure and shall be provided only to the extent permitted by federal laws and regulations.

(2) For purposes of this subdivision, the following definitions apply:

(A) "Commercial driver" has the same meaning as defined in Section 2810.4 of the Labor Code.

(B) "Port drayage motor carrier" has the same meaning as defined in Section 2810.4 of the Labor Code.

(C) "Short-haul trucking service" has the same meaning as defined in Section 39682 of the Health and Safety Code.

SEC. 12. Section 4418.25 of the Welfare and Institutions Code is amended to read:

4418.25. (a) (1) The department shall establish policies and procedures for the development of an annual community placement plan by regional centers. The community placement plan shall be based upon an individual program plan process as referred to in subdivision (a) of Section 4418.3 and shall be linked to the development of the annual State Budget. The department's policies shall address statewide priorities, plan requirements, and the statutory roles of regional centers, developmental centers, and regional resource development projects in the process of assessing consumers for community living and in the development of community resources.

(2) (A) In addition to the existing priorities to support the closure of the developmental centers and the development of services and supports to transition individuals from restrictive settings, including institutions for mental disease, the department also shall establish guidelines by which community placement plan funds appropriated through the budget process may be utilized for community resource development to address the needs for services and supports of consumers living in the community in accordance with Section 4679.

(B) The department may allocate funds to regional centers for purposes of community resource development as provided in this paragraph when the department determines that sufficient funding has been appropriated and reserved for a fiscal year for development of the resources that are necessary to address the needs of persons moving from a developmental center pursuant to Section 4474.11, and no sooner than 30 days after the department has provided notice of this determination to the Joint Legislative Budget Committee and the appropriate policy and fiscal committees of the Legislature.

(b) (1) To reduce reliance on developmental centers and mental health facilities, including institutions for mental disease as described in Part 5 (commencing with Section 5900) of Division 5, for which federal funding is not available, and out-of-state placements, the department shall establish a statewide specialized resource service that does all of the following:

(A) Tracks the availability of specialty residential beds and services.

(B) Tracks the availability of specialty clinical services.

(C) Coordinates the need for specialty services and supports in conjunction with regional centers.

(D) Identifies, subject to federal reimbursement, developmental center services and supports that can be made available to consumers residing in the community, when no other community resource has been identified.

(2) By September 1, 2012, regional centers shall provide the department with information about all specialty resources developed with the use of community placement plan funds and shall make these resources available to other regional centers.

(3) When allocating funding for community placement plans, priority shall be given to the development of needed statewide specialty services and supports, including regional community crisis homes.

(4) If approved by the director, funding may be allocated to facilities that meet the criteria of Sections 1267.75 and 1531.15 of the Health and Safety Code.

(5) The department shall not provide community placement plan funds to develop programs that are ineligible for federal funding participation unless approved by the director.

(c) (1) The community placement plan shall provide for dedicated funding for comprehensive assessments of developmental center residents, for identified costs of moving individuals from developmental centers to the community, and for deflection of individuals from developmental center admission. The plans shall, where appropriate, include budget requests for regional center operations, assessments, resource development, and ongoing placement costs. These budget requests are intended to provide supplemental funding to regional centers. The plan is not intended to limit the department's or regional centers' responsibility to otherwise conduct assessments and individualized program planning, and to provide needed services and supports in the least restrictive, most integrated setting in accord with the Lanterman Developmental Disabilities Services Act (Division 4.5 (commencing with Section 4500)).

(2) (A) Regional centers shall complete a comprehensive assessment of a consumer residing in a developmental center on July 1, 2012, who meets both of the following criteria:

(i) The consumer is not committed pursuant to Section 1370.1 of the Penal Code.

(ii) The consumer has not had such an assessment in the prior two years.

(B) The assessment shall include input from the regional center, the consumer, and, if appropriate, the consumer's family, legal guardian, conservator, or authorized representative, and shall identify the types of community-based services and supports available to the consumer that would enable the consumer to move to a community setting. Necessary services and supports not currently available in the community setting shall be considered for development pursuant to community placement planning and funding.

(C) Regional centers shall specify in the annual community placement plan how they will complete the required assessment and the timeframe for completing the assessment for each consumer. Initial assessments pursuant to this paragraph for individuals residing in a developmental center on July 1, 2012, shall be completed by December 31, 2015, unless a regional center demonstrates to the department that an extension of time is necessary and the department grants such an extension.

(D) The assessment completed in the prior two years, or the assessment completed pursuant to the requirements of this section, including any updates pursuant to subparagraph (E), shall be provided to both of the following:

(i) The individual program planning team and clients' rights advocate for the regional center in order to assist the planning team in determining the least restrictive environment for the consumer.

(ii) The superior court with jurisdiction over the consumer's placement at the developmental center, including the consumer's attorney of record and other parties known to the regional center. For judicial proceedings pursuant to Article 2 (commencing with Section 6500) of Chapter 2 of Part 2 of Division 6, the comprehensive assessment shall be included in the regional center's written report required by Section 6504.5. For all other proceedings, the regional center shall provide the comprehensive assessment to the court and parties to the case at least 14 days in advance of regularly scheduled judicial review. This clause shall not apply to consumers committed pursuant to Section 1370.1 of the Penal Code.

(E) The assessments described in subparagraph (D) shall be updated annually as part of the individual program planning process for as long as the consumer resides in the developmental center. To the extent appropriate, the regional center shall also provide relevant information from the statewide specialized resource service. The regional center shall notify the clients' rights advocate for the regional center of the time, date, and location of each individual program plan meeting that includes discussion of the results of the comprehensive assessment and updates to that assessment. The regional center shall provide this notice as soon as practicable following the completion of the comprehensive assessment or update and not less than 30 calendar days before the meeting. The clients' rights advocate may participate in the meeting unless the consumer objects on their own behalf.

(d) The department shall review, negotiate, and approve regional center community placement plans for feasibility and reasonableness, including recognition of each regional centers' current developmental center population and their corresponding placement level, as well as each regional centers' need to develop new and innovative service models. The department shall hold regional centers accountable for the development and implementation of their approved plans. The regional centers shall report, as required by the department, on the outcomes of their plans. The department shall make aggregate performance data for each regional center available, upon request, as well as data on admissions to, and placements from, each developmental center.

(e) Funds allocated by the department to a regional center for a community placement plan developed under this section shall be controlled through the regional center contract to ensure that the funds are expended for the purposes allocated. Funds allocated for community placement plans that are not used for that purpose may be transferred to Item 4300-003-0001 for expenditure in the state developmental centers if their population exceeds the budgeted level. Any unspent funds shall revert to the General Fund.

(f) Commencing May 1, 2013, and then on April 1, 2014, and on April 1 annually thereafter, the department shall provide to the fiscal and appropriate policy committees of the Legislature, and to the contractor for regional center clients' rights advocacy services under Section 4433, information on efforts to serve consumers with challenging service needs, including, but not limited to, all of the following:

(1) For each regional center, the number of consumers admitted to each developmental center, including the legal basis for the admissions.

(2) For each regional center, the number of consumers described in paragraph (2) of subdivision (a) of Section 7505 who were admitted to Fairview Developmental Center by court order pursuant to Article 2 (commencing with Section 6500) of Chapter 2 of Part 2 of Division 6, and the number and lengths of stay of consumers, including those who have transitioned back to a community living arrangement.

(3) Outcome data related to the assessment process set forth in Section 4418.7, including the number of consumers who received assessments pursuant to Section 4418.7 and the outcomes of the assessments. Each regional center, commencing

March 1, 2013, and then on February 1, 2014, and on February 1 annually thereafter, shall provide the department with information on alternative community services and supports provided to those consumers who were able to remain in the community following the assessments, and the unmet service needs that resulted in any consumers being admitted to Fairview Developmental Center.

(4) Progress in the development of needed statewide specialty services and supports, including regional community crisis options, as provided in paragraph (3) of subdivision (b). Each regional center shall provide the department with a report containing the information described in this paragraph commencing March 1, 2013, and then on February 1, 2014, and on February 1 annually thereafter.

(5) Progress in reducing reliance on mental health facilities ineligible for federal Medicaid funding, and out-of-state placements, including information on the utilization of those facilities, which shall include, by regional center, all of the following:

(A) The total number and age range of consumers placed in those facilities.

(B) The number of admissions.

(C) The reasons for admissions by category, including, but not limited to, incompetent-to-stand-trial (IST) commitment, Section 6500 commitment, crisis stabilization, and lack of appropriate community placement.

(D) The lengths of stay of consumers.

(E) The type of facility.

(6) Information on the utilization of facilities serving consumers with challenging service needs that utilize delayed egress devices and secured perimeters, pursuant to Section 1267.75 or 1531.15 of the Health and Safety Code, including the number of admissions, reasons for admissions, and lengths of stay of consumers, including those who have transitioned to less restrictive living arrangements.

(7) If applicable, any recommendations regarding additional rate exceptions or modifications beyond those allowed for under existing law that the department identifies as necessary to meet the needs of consumers with challenging service needs.

(g) Each regional center, commencing March 1, 2013, and then on February 1, 2014, and on February 1 annually thereafter, shall provide information to the department regarding the facilities described in paragraph (6) of subdivision (f), including, but not limited to, the number of admissions, reasons for admissions, and lengths of stay of consumers, including those who have transitioned to less restrictive living arrangements.

(h) Each institution for mental disease that, in the preceding year, has admitted a regional center consumer, including consumers whose placements are not funded by a regional center, shall report quarterly on February 1, May 1, August 1, and November 1, to the department, the regional center providing services to the consumer, and the contractor for regional center clients' rights advocacy services under Section 4433, all of the following in a format prescribed by the department:

(1) The total number and age, race, and ethnicity of consumers placed in that facility.

(2) The number of admissions.

(3) The reasons for admissions by category.

(4) The lengths of stay of consumers.

(5) The funding source.

SEC. 13. Section 4474.16 of the Welfare and Institutions Code is amended to read:

4474.16. (a) (1) On or before January 10, 2023, and in conjunction with the Governor's proposed 2023–24 budget, the State Department of Developmental Services shall submit to the Legislature an updated version of the safety net plan that was originally submitted pursuant to subdivision (a) of Section 4474.15.

(2) The updated plan shall be developed in consultation with stakeholders and shall do all of the following:

(A) Evaluate the progress made to create a safety net, including services or residences intended to facilitate transitions or diversions from institutions for mental disease, the Canyon Springs Community Facility, the secure treatment program at Porterville Developmental Center, carceral settings such as prisons or jails, or other restrictive settings. This evaluation shall include data on the number of consumers who transitioned from those facilities since 2019, and to which setting type or living option.

(B) Identify areas the stakeholder community suggests evaluating and recommendations from the stakeholder community, which may include, but is not limited to, best practices for supporting individuals at risk of placement in restrictive settings, expanding or refining existing service or models of care, and developing new models of care for individuals whom private sector vendors cannot or will not serve.

(C) Provide data on the number of adolescents and adults with complex needs, statewide and by regional center, the number of special incidents involving restraints, as described in subparagraph (B) of paragraph (1) of subdivision (b) of Section 54327 of Title 17 of the California Code of Regulations, and the number of admissions to institutions for mental diseases funded by regional centers and to the Canyon Springs Community Facility between January 1, 2020, and December 31, 2021.

(D) The department's strategic planning process, including how the department identifies service gaps, and how the department plans to address future needs in the community.

(b) Commencing July 1, 2023, and until December 31, 2026, the department shall provide quarterly updates to the appropriate policy and fiscal committees of the Legislature on the steps foreseen, planned, and completed in the development of services under the department's update to the Legislature pursuant to subdivision (a).

(c) Commencing July 1, 2023, and until December 31, 2026, the department shall make quarterly updates to the plan available on its internet website.

(d) A report to be submitted pursuant to subdivision (a) shall be submitted in compliance with Section 9795 of the Government Code.

(e) For purposes of this section, "adolescents and adults with complex needs" has the same meaning as a "consumer with complex needs," as defined in subparagraph (C) of paragraph (4) of subdivision (c) of Section 4640.6.

SEC. 14. Section 4511.6 is added to the Welfare and Institutions Code, to read:

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.

SEC. 15. Section 4519.2 of the Welfare and Institutions Code is amended to read:

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.

SEC. 16. Section 4519.10 of the Welfare and Institutions Code is amended to read:

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 the 2023–24 fiscal year, 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) Commencing July 1, 2024, 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).

(2) (A) Effective July 1, 2024, 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 June 30, 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) Notwithstanding paragraph 1, 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. 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.

(2) 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.

(f) On or before March 1, 2022, 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 through July 1, 2025.

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

SEC. 17. Section 4571 of the Welfare and Institutions Code is amended to read:

4571. (a) It is the intent of the Legislature to ensure the well-being of consumers, taking into account their informed and expressed choices. It is further the intent of the Legislature to support the satisfaction and success of consumers through the delivery of quality services and supports. Evaluation of the services that consumers receive is a key aspect to the service system. Utilizing the information that consumers and their families provide about those services in a reliable and meaningful way is also critical to enable the department to assess the performance of the state's developmental services system and to improve services for consumers in the future. To that end, the State Department of Developmental Services, on or before January 1, 2010, shall implement an improved, unified quality assessment system, in accordance with this section.

(b) The department, in consultation with stakeholders, shall identify a valid and reliable quality assurance instrument that assesses consumer and family satisfaction, provision of services in a linguistically and culturally competent manner, and personal outcomes. The instrument shall do all of the following:

(1) Provide nationally validated, benchmarked, consistent, reliable, and measurable data for the department's Quality Management System.

(2) Enable the department and regional centers to compare the performance of California's developmental services system against other states' developmental services systems and to assess quality and performance among all of the regional centers.

(3) Include outcome-based measures such as health, safety, well-being, relationships, interactions with people who do not have a disability, employment, quality of life, integration, choice, service, and consumer satisfaction.

(4) Include outcome-based measures to evaluate the linguistic and cultural competency of regional center services that are provided to consumers across their lifetimes.

(c) To the extent that funding is available, the instrument identified in subdivision (b) may be expanded to collect additional data requested by the State Council on Developmental Disabilities.

(d) (1) The department shall contract with an independent agency or organization to implement, by January 1, 2010, the quality assurance instrument described in subdivision (b). The contractor shall be experienced in all of the following:

(A) Designing valid quality assurance instruments for developmental service systems.

(B) Tracking outcome-based measures such as health, safety, well-being, relationships, interactions with people who do not have a disability, employment, quality of life, integration, choice, service, and consumer satisfaction.

(C) Developing data systems.

(D) Data analysis and report preparation.

(E) Assessments of the services received by consumers who are moved from developmental centers to the community, given the Legislature's historic recognition of a special obligation to ensure the well-being of these persons.

(F) Issues related to linguistic and cultural competency.

(2) Notwithstanding any other law, the contract and any amendments pursuant to this section shall be exempt from all of the following:

(A) The personal services contracting requirements of Article 4 (commencing with Section 19130) of Chapter 5 of Part 2 of Division 5 of Title 2 of the Government Code.

(B) The Public Contract Code, the State Contracting Manual, and the State Administration Manual.

(C) The approval of the Department of General Services.

(D) The approval of the Department of Technology.

(3) The exemptions specified in paragraph (2) shall remain in effect until there is more than one available assessment that meets the criteria in subdivision (b) from an organization that also meets the criteria in this subdivision.

(e) The department, in consultation with the contractor described in subdivision (d), shall establish the methodology by which the quality assurance instrument shall be administered, including, but not limited to, how often and to whom the quality assurance will be administered, and the design of a stratified, random sample among the entire population of consumers served by regional centers. The contractor shall provide aggregate information for all regional centers and the state as a whole. At the request of a consumer or the family member of a consumer, the survey shall be conducted in the primary language of the consumer or family member surveyed.

(f) The department shall contract with the state council to collect data for the quality assurance instrument described in subdivision (b). If, during the data collection process, the state council identifies any suspected violation of the legal, civil, or service rights of a consumer, or if it determines that the health and welfare of a consumer is at risk, that information shall be provided immediately to the regional center providing case management services to the consumer. At the request of the consumer or family, when appropriate, a copy of the completed survey shall be provided to the regional center providing case management services to improve the consumer's quality of services through the individual planning process.

(g) The department, in consultation with stakeholders, shall annually review the data collected from and the findings of the quality assurance instrument described in subdivision (b) and accept recommendations regarding additional or different criteria for the quality assurance instrument in order to assess the performance of the state's developmental services system and improve services for consumers.

(h) (1) Each regional center shall annually present data collected from, and the findings of, the quality assurance instrument described in subdivision (b) for that regional center, at a public meeting of its governing board in order to assess the comparative performance of the regional center and identify needed improvements in services for consumers, including, but not limited to, case management services. Notice of this meeting shall also be posted on the regional center's internet website at least 30 days prior to the meeting and shall be sent to regional center consumers and families and individual stakeholders at least 30 days prior to the meeting. The governing board shall provide a sufficient public comment period so members of the public may provide comments. Each regional center, in holding the meeting required by this subdivision, shall ensure that the meeting and meeting materials provide language access, as required by state and federal law.

(2) All regional center-specific reports generated by the department pursuant to this subdivision shall be made publicly available on the regional center's internet website in a machine-readable format, but shall not contain any personal identifying

information about any person assessed.

(3) Within 60 days following its annual presentation, each regional center shall submit a report to the department regarding its implementation of the requirements of this section. The report shall include, but shall not be limited to, both of the following:

(A) Copies of the presentation described in paragraph (1), minutes from the meeting, and attendee comments.

(B) The regional center's recommendations and plans to use the information to address regional center priorities, strategic directions to improve specific areas of performance, or both.

(i) All reports generated pursuant to this section shall be made publicly available, but shall not contain any personal identifying information about any person assessed.

(j) All data collected pursuant to subdivision (c) shall be provided to the state council, but shall not contain personal identifying information about the persons being surveyed.

(k) Implementation of this section shall be subject to an annual appropriation of funds in the Budget Act for this purpose.

SEC. 18. Section 4640.6 of the Welfare and Institutions Code is amended to read:

4640.6. (a) In approving regional center contracts, the department shall ensure that regional center staffing patterns demonstrate that direct service coordination are the highest priority.

(b) Contracts between the department and regional centers shall require that regional centers implement an emergency response system that ensures that a regional center staff person will respond to a consumer, or individual acting on behalf of a consumer, within two hours of the time an emergency call is placed. This emergency response system shall be operational 24 hours per day, 365 days per year.

(c) Contracts between the department and regional centers shall require regional centers to have service coordinator-to-consumer ratios, as follows:

(1) An average service coordinator-to-consumer ratio of 1 to 62 for all consumers who have not moved from the developmental centers to the community since April 14, 1993. In no case shall a service coordinator for these consumers have an assigned caseload in excess of 79 consumers for more than 60 days.

(2) An average service coordinator-to-consumer ratio of 1 to 45 for all consumers who have moved from a developmental center to the community since April 14, 1993. In no case shall a service coordinator for these consumers have an assigned caseload in excess of 59 consumers for more than 60 days.

(3) The following coordinator-to-consumer ratios shall apply:

(A) All consumers enrolled in the Home and Community-based Services Waiver program for persons with developmental disabilities, an average service coordinator-to-consumer ratio of 1 to 62.

(B) All consumers who have moved from a developmental center to the community since April 14, 1993, and have lived continuously in the community for at least 12 months, an average service coordinator-to-consumer ratio of 1 to 62.

(C) All consumers who have not moved from the developmental centers to the community since April 14, 1993, and who are not described in subparagraph (A), an average service coordinator-to-consumer ratio of 1 to 66.

(4) Notwithstanding paragraphs (1) to (3), inclusive, an average service coordinator-to-consumer ratio of 1 to 40 for all consumers five years of age and younger.

(5) (A) Notwithstanding paragraphs (1) to (3), inclusive, enhanced service coordination, including a service coordinator-to-consumer ratio of 1 to 40, shall be available to consumers identified as having low or no purchase-of-service expenditures, as identified in the annual Budget Act.

(B) Enhanced service coordination, including the coordinator-to-consumer ratio specified in this paragraph shall be available to specified consumers until one of the following criteria are met:

(i) The family or consumer is no longer interested in receiving enhanced service coordination.

(ii) All of the consumer's identified service needs have been thoroughly explored and offered.

(iii) All information and training were provided to the family and consumer and the consumer's focused support goals were completed.

(iv) The family or consumer feels confident that they can continue to receive the assistance they need to be successful without receiving enhanced service coordination.

(C) For the purposes of this paragraph, "enhanced service coordination" may include, but is not limited to, all of the following:

(i) Regular contact, via telephone or video, with consumers or their families.

(ii) Maintaining no less than quarterly contact with consumers or their families.

(iii) Having annual individual program plan or individual family service plan meetings.

(6) (A) Notwithstanding paragraphs (1) to (3), inclusive, an average service coordinator-to-consumer ratio of 1 to 25 for all consumers with complex needs.

(B) The coordinator-to-consumer ratio specified in this paragraph shall not be authorized for a consumer for more than 12 months after the consumer is no longer receiving the services described in clause (i) or (ii) of subparagraph (C), after the consumer is no longer placed in a facility described in clause (iii), (iv), (v), (vi), (vii), or (viii) of subparagraph (C), or after the department has made the determination described in clause (ix) of subparagraph (C), unless an extension is granted. An extension shall be based on a new and complete comprehensive assessment of the consumer's needs. An extension may be granted one time, and shall not exceed six months.

(C) For the purposes of this paragraph, a "consumer with complex needs" means a consumer who is any of the following:

(i) Receiving regional center-funded mobile crisis services by a department-approved vendor, or has received those services within the past six months.

(ii) Receiving state-operated crisis assessment stabilization team services, or has received those services within the past six months.

(iii) Placed in a community crisis home, as defined in Section 4698.

(iv) Placed in an acute crisis home operated by the department, pursuant to Section 4418.7.

(v) Placed in a locked psychiatric setting or has been placed in a locked psychiatric setting in the past six months.

(vi) Placed in an institution for mental disease, as described in Part 5 (commencing with Section 5900) of Division 5.

(vii) Placed out of state as a result of appropriate services being unavailable within the state, pursuant to Section 4519.

(viii) Placed in a county jail and eligible for diversion pursuant to Chapter 2.8 (commencing with Section 1001.20) of Title 6 of Part 2 of the Penal Code or found incompetent to stand trial as described in Section 1370.1 of the Penal Code.

(ix) A person the department has determined cannot be safely served in a developmental center, as described in Section 6510.5.

(7) For purposes of paragraph (3), service coordinators may have a mixed caseload of consumers three years of age and younger, consumers enrolled in the Home and Community-based Services Waiver program for persons with developmental disabilities, and other consumers if the overall average caseload is weighted proportionately to ensure that overall regional center average service coordinator-to-consumer ratios as specified in paragraph (3) are met. For purposes of paragraph (3), in no case shall a service coordinator have an assigned caseload in excess of 84 for more than 60 days.

(d) For purposes of this section, "service coordinator" means a regional center employee whose primary responsibility includes preparing, implementing, and monitoring consumers' individual program plans, securing and coordinating consumer services and supports, and providing placement and monitoring activities.

(e) In order to ensure that caseload ratios are maintained pursuant to this section, each regional center shall provide service coordinator caseload data to the department, annually for each fiscal year. The data shall be submitted in the format, including the content, prescribed by the department. Within 30 days of receipt of data submitted pursuant to this subdivision, the department shall make a summary of the data available to the public upon request. The department shall verify the accuracy of the data when conducting regional center fiscal audits. Data submitted by regional centers pursuant to this subdivision shall:

(1) Only include data on service coordinator positions as defined in subdivision (d). Regional centers shall identify the number of positions that perform service coordinator duties on less than a full-time basis. Staffing ratios reported pursuant to this subdivision shall reflect the appropriate proportionality of these staff to consumers served.

(2) Be reported separately for service coordinators whose caseload includes any of the following:

(A) Consumers who are three years of age and older and who have not moved from the developmental center to the community since April 14, 1993.

(B) Consumers who have moved from a developmental center to the community since April 14, 1993.

(C) Consumers who are younger than three years of age.

(D) Consumers enrolled in the Home and Community-based Services Waiver program.

(3) Not include positions that are vacant for more than 60 days or new positions established within 60 days of the reporting month that are still vacant.

(4) For purposes of calculating caseload ratios for consumers enrolled in the Home and Community-based Services Waiver program, vacancies shall not be included in the calculations.

(f) The department shall provide technical assistance and require a plan of correction for any regional center that, for two consecutive reporting periods, fails to maintain service coordinator caseload ratios required by this section or otherwise demonstrates an inability to maintain appropriate staffing patterns pursuant to this section. Plans of correction shall be developed following input from the state council, local organizations representing consumers, family members, regional center employees, including recognized labor organizations, and service providers, and other interested parties.

(g) Each time that new funds are appropriated in the annual Budget Act to the department for allocation to regional centers with the stated purpose of reducing caseload ratios, both of the following shall occur:

(1) Each regional center shall hold at least one public meeting during that year to receive stakeholder input to help inform the way the regional center allocates new positions funded through the allocation to that regional center. Stakeholders may include the state council, local organizations representing consumers, family members, community-based organizations that represent the ethnic and language diversity of the regional center catchment area, regional center employees, including recognized labor organizations and service providers, and other interested parties. The public meeting required by this paragraph fulfills a regional center's requirement under subdivision (f) to gather input regarding its plan of correction if the plan of correction is discussed during the meeting.

(2) On or before October 10 of the year of the appropriation of funds, and again by March 10 of that fiscal year, and in a format prescribed by the department, each regional center shall report the following information to the department:

(A) The number of new service coordinator positions created with the funds allocated to reduce caseload ratios.

(B) Data on current caseload ratios as of March 1 and October 1, respectively.

(C) Any other information determined by the department.

(3) The department shall post the information required to be reported by a regional center pursuant to paragraph (2) on its internet website.

(h) Contracts between the department and regional center shall require the regional center to have, or contract for, all of the following areas:

(1) Criminal justice expertise to assist the regional center in providing services and supports to consumers involved in the criminal justice system as a victim, defendant, inmate, or parolee.

(2) Special education expertise to assist the regional center in providing advocacy and support to families seeking appropriate educational services from a school district.

(3) Family support expertise to assist the regional center in maximizing the effectiveness of support and services provided to families.

(4) Housing expertise to assist the regional center in accessing affordable housing for consumers in independent or supportive living arrangements.

(5) Community integration expertise to assist consumers and families in accessing integrated services and supports and improved opportunities to participate in community life.

(6) Quality assurance expertise, to assist the regional center to provide the necessary coordination and cooperation with the state council, in conducting quality-of-life assessments and coordinating the regional center quality assurance efforts.

(7) Each regional center shall employ at least one consumer advocate who is a person with developmental disabilities.

(8) Other staffing arrangements related to the delivery of services that the department determines are necessary to ensure maximum cost-effectiveness and to ensure that the service needs of consumers and families are met.

(9) Implicit bias training, pursuant to Section 4511.1, to increase service access and equity in the developmental services system.

(10) Language access and cultural competency services and support, pursuant to Section 4620.4, to allow consistent access to information and services and to advance person-centered health and human services equity outcomes toward the diminishment of racial, ethnic, and other disparities.

(i) Any regional center proposing a staffing arrangement that substantially deviates from the requirements of this section shall request a waiver from the department. Prior to granting a waiver, the department shall require a detailed staffing proposal, including, but not limited to, how the proposed staffing arrangement will benefit consumers and families served, and shall demonstrate clear and convincing support for the proposed staffing arrangement from constituencies served and impacted, that include, but are not limited to, consumers, families, providers, advocates, and recognized labor organizations. In addition, the regional center shall submit to the department any written opposition to the proposal from organizations or individuals, including, but not limited to, consumers, families, providers, and advocates, including recognized labor organizations. The department may grant waivers to regional centers that sufficiently demonstrate that the proposed staffing arrangement is in the best interest of consumers and families served, complies with the requirements of this chapter, and does not violate any contractual requirements. A waiver shall be approved by the department for up to 12 months, at which time a regional center may submit a new request pursuant to this subdivision.

(j) From February 1, 2009, to June 30, 2010, inclusive, the following shall not apply:

(1) The service coordinator-to-consumer ratio requirements of paragraph (1), and subparagraph (C) of paragraph (3), of subdivision (c).

(2) The requirements of subdivision (e). The regional centers shall, instead, maintain sufficient service coordinator caseload data to document compliance with the service coordinator-to-consumer ratio requirements in effect pursuant to this section.

(3) The requirements of paragraphs (1) to (6), inclusive, of subdivision (h).

(k) From July 1, 2010, until June 30, 2013, the following shall not apply:

(1) The service coordinator-to-consumer ratio requirements of paragraph (1), and subparagraph (C) of paragraph (3), of subdivision (c).

(2) The requirements of paragraphs (1) to (6), inclusive, of subdivision (h).

(l) (1) Any contract between the department and a regional center entered into on and after January 1, 2003, shall require that all employment contracts entered into with regional center staff or contractors be available to the public for review, upon request. For purposes of this subdivision, an employment contract or portion thereof may not be deemed confidential nor unavailable for public review.

(2) Notwithstanding paragraph (1), the social security number of the contracting party may not be disclosed.

(3) The term of the employment contract between the regional center and an employee or contractor shall not exceed the term of the state's contract with the regional center.

SEC. 19. Section 4646 of the Welfare and Institutions Code is amended to read:

4646. (a) It is the intent of the Legislature to ensure that the individual program plan and provision of services and supports by the regional center system is centered on the individual and the family of the individual with developmental disabilities and takes into account the needs and preferences of the individual and the family, if appropriate, as well as promoting community integration, independent, productive, and normal lives, and stable and healthy environments. It is the further intent of the Legislature to ensure that the provision of services to consumers and their families be effective in meeting the goals stated in the individual program plan, reflect the preferences and choices of the consumer, and reflect the cost-effective use of public resources.

(b) The individual program plan is developed through a process of individualized needs determination. The individual with developmental disabilities and, if appropriate, the individual's parents, legal guardian or conservator, or authorized representative, shall have the opportunity to actively participate in the development of the plan.

(c) An individual program plan shall be developed for any person who, following intake and assessment, is found to be eligible for regional center services. These plans shall be completed within 60 days of the completion of the assessment. At the time of intake, the regional center shall inform the consumer and, if appropriate, the consumer's parents, legal guardian or conservator, or authorized representative, of the services available through the state council and the protection and advocacy agency designated by the Governor pursuant to federal law, and shall provide the address and telephone numbers of those agencies.

(d) Individual program plans shall be prepared jointly by the planning team. Decisions concerning the consumer's goals, objectives, and services and supports that will be included in the consumer's individual program plan and purchased by the regional center or obtained from generic agencies shall be made by agreement between the regional center representative and the consumer or, if appropriate, the parents, legal guardian, conservator, or authorized representative at the program plan meeting.

(e) Regional centers shall comply with the request of a consumer or, if appropriate, the request of the consumer's parents, legal guardian, conservator, or authorized representative, that a designated representative receive written notice of all meetings to develop or revise the individual program plan and of all notices sent to the consumer pursuant to Section 4710. The designated representative may be a parent or family member.

(f) Notwithstanding any other law, until June 30, 2023, a meeting regarding the provision of services and supports by the regional center, including a meeting to develop or revise the individual program plan, shall be held by remote electronic communications if requested by the consumer or, if appropriate, if requested by the consumer's parents, legal guardian, conservator, or authorized representative.

(g) At the conclusion of an individual program plan meeting, an authorized representative of the regional center shall provide to the consumer, in written or electronic format, a list of the agreed-upon services and supports, and, if known, the projected start date, the frequency and duration of the services and supports, and the provider. The authorized representative of the regional center shall sign the list of agreed-upon services and supports at that time. The consumer, or if appropriate, the consumer's parent, legal guardian, conservator, or authorized representative shall sign the list of agreed-upon services and supports prior to its implementation. The consumer, or if appropriate, the consumer's parent, legal guardian, conservator, or authorized representative, may elect to delay receipt of the list of agreed-upon services and supports pending final agreement, as described in subdivision (h). If the consumer, or if appropriate, the consumer's parent, legal guardian, conservator, or authorized representative, elects to delay the receipt of the list of agreed-upon services and supports for 15 days, the list shall be provided in the preferred language of the consumer, or of the consumer's parent, legal guardian, or authorized representative.

(h) If a final agreement regarding the services and supports to be provided to the consumer cannot be reached at a program plan meeting, then a subsequent program plan meeting shall be convened within 15 days, or later at the request of the consumer or, if appropriate, the parents, legal guardian, conservator, or authorized representative or if agreed to by the planning team. The list of the agreed-upon services and supports described in subdivision (g) and signed by the authorized representative of the regional center shall be provided, in writing or electronically, at the conclusion of the subsequent program plan meeting, and shall be provided in the preferred language of the consumer, or of the consumer's parent, legal guardian, conservator, or authorized representative. Additional program plan meetings may be held with the agreement of the regional center representative and the consumer or, if appropriate, the parents, legal guardian, conservator, or authorized representative.

(i) An authorized representative of the regional center and the consumer or, if appropriate, the consumer's parent, legal guardian, conservator, or authorized representative shall sign the individual program plan and the list of the agreed-upon services and supports prior to its implementation. If the consumer or, if appropriate, the consumer's parent, legal guardian, conservator, or authorized representative, does not agree with all components of the individual program plan, the consumer may indicate that disagreement on the plan. Disagreement with specific plan components shall not prohibit the implementation of services and supports agreed to by the consumer or, if appropriate, the consumer's parent, legal guardian, conservator, or authorized representative. If the consumer or, if appropriate, the consumer's parent, legal guardian, conservator, or authorized representative, does not agree with the plan in whole or in part, the consumer shall be sent written notice of their appeal rights, as required by Sections 4701 and 4710.

(j) (1) A regional center shall communicate in the consumer's preferred language, or, if appropriate, the preferred language of the consumer's family, legal guardian, conservator, or authorized representative, during the planning process for the individual program plan, including during the program plan meeting, and including providing alternative communication services, as required by Sections 11135 to 11139.8, inclusive, of the Government Code and implementing regulations.

(2) A regional center shall provide alternative communication services, including providing copies of the list of services and supports, and the individual program plan in the preferred language of the consumer or the consumer's family, legal guardian, conservator, or authorized representative, or both, as required by Sections 11135 to 11139.8, inclusive, of the Government Code and implementing regulations.

(3) The preferred language of the consumer or the consumer's family, legal guardian, conservator, or authorized representative, or both, shall be documented in the individual program plan.

SEC. 20. Section 4646.4 of the Welfare and Institutions Code is amended to read:

4646.4. (a) Regional centers shall ensure, at the time of development, scheduled review, or modification of a consumer's individual program plan developed pursuant to Sections 4646 and 4646.5, or of an individualized family service plan pursuant to Section 95020 of the Government Code, the establishment of an internal process. This internal process shall ensure adherence with federal and state law and regulation, and if purchasing services and supports, shall ensure all of the following:

(1) Conformance with the regional center's purchase of service policies, as approved by the department pursuant to subdivision (d) of Section 4434.

(2) Utilization of generic services and supports if appropriate. The individualized family service planning team for infants and toddlers eligible under Section 95014 of the Government Code may determine that a medical service identified in the individualized family service plan is not available through the family's private health insurance policy or health care service plan and therefore, in compliance with the timely provision of service requirements contained in Part 303 (commencing with Section 303.1) of Title 34 of the Code of Federal Regulations, will be funded by the regional center.

(3) Utilization of other services and sources of funding as contained in Section 4659.

(4) Consideration of the family's responsibility for providing similar services and supports for a minor child without disabilities in identifying the consumer's service and support needs as provided in the least restrictive and most appropriate setting. In this determination, regional centers shall take into account the consumer's need for extraordinary care, services, supports and supervision, and the need for timely access to this care.

(5) Commencing October 1, 2022, consideration of information obtained from the consumer and, if appropriate, the parents, legal guardian, conservator, or authorized representative about the consumer's need for the services, barriers to service access, and other information.

(b) At the time of development, scheduled review, or modification of a consumer's individual program plan developed pursuant to Sections 4646 and 4646.5, or of an individualized family service plan pursuant to Section 95020 of the Government Code, the consumer, or, if appropriate, the parents, legal guardian, or conservator, shall provide copies of their health benefit cards under which the consumer is eligible to receive health benefits, including, but not limited to, private health insurance, a health care service plan, Medi-Cal, Medicare, and TRICARE. If the individual, or, if appropriate, the parents, legal guardians, or conservators, do not have health benefits, the regional center shall not use that fact to negatively impact the services that the individual may or may not receive from the regional center.

(c) Final decisions regarding the consumer's individual program plan shall be made pursuant to Section 4646.

(d) Final decisions regarding the individualized family service plan shall be made pursuant to Section 95020 of the Government Code.

SEC. 21. Section 4659.2 of the Welfare and Institutions Code is amended to read:

4659.2. (a) For the purposes of this section, the following definitions apply:

(1) "Physical restraint" means any behavioral or mechanical restraint, as defined in Section 1180.1 of the Health and Safety Code.

(2) "Chemical restraint" means a drug that is used to control behavior and that is used in a manner not required to treat the patient's medical conditions.

(3) "Seclusion" means involuntary confinement of a person alone in a room or an area as defined in subdivision (e) of Section 1180.1 of the Health and Safety Code.

(4) "Long-term health care facility" means a facility, as defined in Section 1418 of the Health and Safety Code, that is required to report to a regional center pursuant to Section 54327 of Title 17 of the California Code of Regulations.

(5) "Acute psychiatric hospital" means a facility, as defined in subdivision (b) of Section 1250 of the Health and Safety Code, including an institution for mental disease, that is a regional center vendor.

(6) "Regional center vendor" means an agency, individual, or service provider that a regional center has approved to provide vendored or contracted services or supports pursuant to paragraph (3) of subdivision (a) of Section 4648.

(7) "Community crisis home" means a facility, as defined in Section 4698, that is a regional center vendor.

(8) "Mental health rehabilitation center" means a residential facility that is licensed by the State Department of Health Care Services and is a regional center vendor.

(b) (1) All regional center vendors that provide crisis or residential services or supported living services, including community crisis homes and mental health rehabilitation centers, long-term health care facilities, and acute psychiatric hospitals shall report to the agency designated pursuant to subdivision (i) of Section 4900 all of the following:

(A) Each death or serious injury of a person occurring during, or related to, the use of seclusion, physical restraint, or chemical restraint, or any combination thereof.

(B) Any unexpected or suspicious death, regardless of whether the cause is immediately known.

(C) Any allegation of sexual assault, as defined in Section 15610.63, in which the alleged perpetrator is a staff member, service provider, or facility employee or contractor.

(D) Any report made to the local law enforcement agency in the jurisdiction in which the facility is located that involves physical abuse, as defined in Section 15610.63, in which a staff member, service provider, or facility employee or contractor is implicated.

(2) The reports described in paragraph (1) shall be made no later than the close of the business day following the death or serious injury. The report shall include the encrypted identifier of the person involved, and the name, street address, and telephone number of the facility.

(c) (1) On a monthly basis, all regional center vendors that provide crisis or residential services or supported living services, long-term health care facilities, and acute psychiatric hospitals shall report to the State Department of Developmental Services, the regional center providing services to the consumer, the vendoring regional center, if different, and the agency designated pursuant to subdivision (i) of Section 4900 all of the following:

(A) The number of incidents of seclusion and the duration of time spent per incident in seclusion.

(B) The number of incidents of the use of behavioral restraints and the duration of time spent per incident of restraint.

(C) The number of times an involuntary emergency medication is used to control behavior.

(2) The reports required pursuant to paragraph (1) shall include the name, street address, and telephone number of the facility.

SEC. 22. Section 4685.8 of the Welfare and Institutions Code is amended to read:

4685.8. (a) The department shall implement a statewide Self-Determination Program. The Self-Determination Program shall be available in every regional center catchment area to provide participants and their families, within an individual budget, increased flexibility and choice, and greater control over decisions, resources, and needed and desired services and supports to implement their IPP. As of July 1, 2021, the program shall begin to be available on a voluntary basis to all regional center consumers who are eligible for the Self-Determination Program.

(b) The department, in establishing the statewide program, shall do both of the following:

(1) Set targets and benchmarks as set forth in paragraph (1) of subdivision (r).

(2) Address all of the following:

(A) Oversight of expenditure of self-determined funds and the achievement of participant outcomes over time.

(B) Increased participant control over which services and supports best meet the participant's needs and the IPP objectives. A participant's unique support system may include the purchase of existing service offerings from service providers or local businesses, hiring their own support workers, or negotiating unique service arrangements with local community resources.

(C) Comprehensive person-centered planning, including an individual budget and services that are outcome based.

(D) Consumer and family training to ensure understanding of the principles of self-determination, the planning process, and the management of budgets, services, and staff.

(E) Choice of independent facilitators, who meet standards and certification requirements established by the department, and who can assist with the functions specified in paragraph (2) of subdivision (c).

(F) Choice of financial management services providers who meet standards and certification requirements established by the department, and who can carry out the functions specified in paragraph (1) of subdivision (c).

(G) Innovation that will more effectively allow participants to achieve their goals.

(H) Long-term sustainability of the Self-Determination Program by doing all of the following:

(i) Requiring IPP teams, when developing the individual budget, to determine the services, supports and goods necessary for each consumer based on the needs and preferences of the consumer, and when appropriate the consumer's family, and the effectiveness of each option in meeting the goals specified in the IPP, and the cost effectiveness of each option, as specified in subparagraph (D) of paragraph (6) of subdivision (a) of Section 4648.

(ii) The department may review final individual budgets that are at or above a spending threshold determined by the department of all individual budgets and use information from its review in the aggregate to develop additional program guidance and verify compliance with federal and state laws and other requirements.

(c) For purposes of this section, the following definitions apply:

(1) "Financial management services" means services or functions that assist the participant to manage and direct the distribution of funds contained in the individual budget, and ensure that the participant has the financial resources to implement their IPP throughout the year. These may include bill paying services and activities that facilitate the employment of service and support workers by the participant, including, but not limited to, fiscal accounting, tax withholding, compliance with relevant state and federal employment laws, assisting the participant in verifying provider qualifications, including criminal background checks, and expenditure reports. The financial management services provider shall meet the applicable requirements of Title 17 of the California Code of Regulations and other specific qualifications or certifications established by the department.

(2) "Independent facilitator" means a person, selected and directed by the participant, who is not otherwise providing services to the participant pursuant to their IPP and is not employed by a person providing services to the participant. The independent facilitator may assist the participant in making informed decisions about the individual budget, and in locating, accessing, and coordinating services and supports consistent with the participant's IPP. The independent facilitator is available to assist in identifying immediate and long-term needs, developing options to meet those needs, leading, participating, or advocating on behalf of the participant in the person-centered planning process and development of the IPP, and obtaining identified services and supports. The cost of the independent facilitator, if any, shall be paid by the participant out of the participant's individual budget. An independent facilitator shall receive training in the principles of self-determination, the person-centered planning process, and the other responsibilities described in this paragraph at the independent facilitator's own cost. The independent facilitator shall meet standards and certification requirements established by the department.

(3) "Individual budget" means the amount of regional center purchase of service funding available to the participant for the purchase of services and supports necessary to implement the IPP. The individual budget shall be determined using a fair, equitable, and transparent methodology.

(4) "IPP" means individual program plan, as described in Section 4646.

(5) "Participant" means an individual, and when appropriate, the participant's parents, legal guardian or conservator, or authorized representative, who has been deemed eligible for, and has voluntarily agreed to participate in, the Self-Determination Program.

(6) "Self-determination" means a voluntary delivery system consisting of a defined and comprehensive mix of services and supports, selected and directed by a participant through person-centered planning, in order to meet the objectives in their IPP. Self-determination services and supports are designed to assist the participant to achieve personally defined outcomes in community settings that promote inclusion. The Self-Determination Program shall only fund services and supports provided pursuant to this division that the federal Centers for Medicare and Medicaid Services determines are eligible for federal financial participation.

(7) "Spending Plan" means the plan the participant develops to use their available individual budget funds to purchase goods, services, and supports necessary to implement their individual program plan (IPP). The spending plan shall identify the cost of each good, service, and support that will be purchased with regional center funds. The total amount of the spending plan cannot exceed the amount of the individual budget. A copy of the spending plan shall be attached to the participant's IPP.

(d) Participation in the Self-Determination Program is fully voluntary. A participant may choose to participate in, and may choose to leave, the Self-Determination Program at any time. A regional center shall not require or prohibit participation in the Self-Determination Program as a condition of eligibility for, or the delivery of, services and supports otherwise available under this

division. Participation in the Self-Determination Program shall be available to any regional center consumer who meets the following eligibility requirements:

(1) The participant has a developmental disability, as defined in Section 4512, and is receiving services pursuant to this division.

(2) The consumer does not live in a licensed long-term health care facility, as defined in paragraph (44) of subdivision (a) of Section 54302 of Title 17 of the California Code of Regulations. An individual, and when appropriate the individual's parent, legal guardian or conservator, or authorized representative, who is not eligible to participate in the Self-Determination Program pursuant to this paragraph may request that the regional center provide person-centered planning services in order to make arrangements for transition to the Self-Determination Program, provided that the individual is reasonably expected to transition to the community within 90 days. In that case, the regional center shall initiate person-centered planning services within 60 days of that request.

(3) The participant agrees to all of the following terms and conditions:

(A) The participant shall receive an orientation that meets the standards set or developed by the department to the Self-Determination Program prior to enrollment, which includes the principles of self-determination, the role of the independent facilitator and the financial management services provider, person-centered planning, and development of a budget.

(B) The participant shall utilize the services and supports available within the Self-Determination Program only when generic services and supports are not available.

(C) The participant shall only purchase services and supports necessary to implement their IPP and shall comply with any and all other terms and conditions for participation in the Self-Determination Program described in this section.

(D) The participant shall manage Self-Determination Program services and supports within the participant's individual budget.

(E) The participant shall utilize the services of a financial management services provider of their own choosing and who is vendored by a regional center and who meets the qualifications in paragraph (1) of subdivision (c).

(F) The participant may utilize the services of an independent facilitator of their own choosing for the purpose of providing services and functions as described in paragraph (2) of subdivision (c). If the participant elects not to use an independent facilitator, the participant may use their regional center service coordinator to provide the services and functions described in paragraph (2) of subdivision (c).

(G) If eligible, with the assistance of the regional center, if needed, timely apply for Medi-Cal in order to maximize federal funding. The participant may consider institutional deeming in order to qualify for Medi-Cal services.

(e) A participant who is not Medi-Cal eligible may participate in the Self-Determination Program and receive self-determination services and supports if all other program eligibility requirements are met and the services and supports are otherwise eligible for federal financial participation.

(f) The additional federal financial participation funds generated by the former participants of the self-determination pilot projects authorized pursuant to Section 13 of Chapter 1043 of the Statutes of 1998, as amended, or pursuant to Article 4 (commencing with Section 4669.2) of Chapter 5, shall be used to maximize the ability of Self-Determination Program participants to direct their own lives and to ensure the department and regional centers successfully implement the program as follows:

(1) First, to offset the cost to the department for the criminal background check conducted pursuant to subdivision (v) and other administrative costs incurred by the department in implementing the Self-Determination Program.

(2) With the remaining funds, the department, in consultation with stakeholders, including a statewide self-determination advisory workgroup, shall prioritize the use of the funds to meet the needs of participants, increase service access and equity, and reduce disparities, and to implement the program, including costs associated with all of the following:

(A) Independent facilitators to assist with a participant's initial person-centered planning meeting.

(B) Development of the participant's initial individual budget.

(C) Joint training of consumers, family members, regional center staff, and members of the local volunteer advisory committee established pursuant to paragraph (1) of subdivision (w).

(D) Regional center operations to increase support for transition to the Self-Determination Program or for caseload ratio enhancement.

(E) To offset the costs to the regional centers in implementing the Self-Determination Program.

(F) To support the Statewide Self-Determination Advisory Committee established pursuant to paragraph (2) of subdivision (w).

(g) If at any time during participation in the Self-Determination Program a regional center determines that a participant is no longer eligible to continue in, or a participant voluntarily chooses to exit, the Self-Determination Program, the regional center shall provide for the participant's transition from the Self-Determination Program to other services and supports. This transition shall include the development of a new IPP that reflects the services and supports necessary to meet the individual's needs. The regional center shall ensure that there is no gap in services and supports during the transition period.

(h) An individual determined to be ineligible for or who voluntarily exits the Self-Determination Program shall be permitted to return to the Self-Determination Program upon meeting all applicable eligibility criteria and upon approval of the participant's planning team, as described in subdivision (j) of Section 4512. An individual who has voluntarily exited the Self-Determination Program shall not return to the program for at least 12 months.

(i) An individual who participates in the Self-Determination Program may elect to continue to receive self-determination services and supports if the individual transfers to another regional center catchment area, provided that the individual remains eligible for the Self-Determination Program pursuant to subdivision (d). The balance of the participant's individual budget shall be reallocated to the regional center to which the participant transfers.

(j) The IPP team shall utilize the person-centered planning process to develop the IPP for a participant. The IPP shall detail the goals and objectives of the participant that are to be met through the purchase of participant-selected services and supports. The IPP team shall determine the individual budget to ensure the budget assists the participant to achieve the outcomes set forth in the participant's IPP and ensures their health and safety. The completed individual budget shall be attached to the IPP.

(k) The participant shall implement their IPP, including choosing and purchasing the services and supports allowable under this section necessary to implement the plan. A participant is exempt from the cost control restrictions regarding the purchases of services and supports pursuant to Section 4648.5. A regional center shall not prohibit the purchase of any service or support that is otherwise allowable under this section.

(l) A participant shall have all the rights established in Sections 4646 to 4646.6, inclusive, and Chapter 7 (commencing with Section 4700).

(m) (1) Except as provided in paragraph (4), the IPP team shall determine the initial and any revised individual budget for the participant using the following methodology:

(A) (i) Except as specified in clause (ii), for a participant who is a current consumer of the regional center, their individual budget shall be the total amount of the most recently available 12 months of purchase of service expenditures for the participant.

(ii) An adjustment may be made to the amount specified in clause (i) if both of the following occur:

(I) The IPP team determines that an adjustment to this amount is necessary due to a change in the participant's circumstances, needs, or resources that would result in an increase or decrease in purchase of service expenditures, or the IPP team identifies prior needs or resources that were unaddressed in the IPP, which would have resulted in an increase or decrease in purchase of service expenditures. When adjusting the budget, the IPP team shall document the specific reason for the adjustment in the IPP.

(II) The regional center certifies on the individual budget document that regional center expenditures for the individual budget, including any adjustment, would have occurred regardless of the individual's participation in the Self-Determination Program.

(iii) For purposes of clauses (i) and (ii), the amount of the individual budget shall not be increased to cover the cost of the independent facilitator.

(B) For a participant who is either newly eligible for regional center services or who does not have 12 months of purchase service expenditures, the participant's individual budget shall be calculated as follows:

(i) The IPP team shall identify the services and supports needed by the participant and available resources, as required by Section 4646.

(ii) The regional center shall calculate the cost of providing the services and supports to be purchased by the regional center by using the average cost paid by the regional center for each service or support unless the regional center

determines that the consumer has a unique need that requires a higher or lower cost. The IPP team also shall document the specific reason for the adjustment in the IPP. The regional center shall certify on the individual budget document that this amount would have been expended using regional center purchase of service funds regardless of the individual's participation in the Self-Determination Program.

(iii) For purposes of clauses (i) and (ii), the amount of the individual budget shall not be increased to cover the cost of the independent facilitator.

(2) The amount of the individual budget shall be available to the participant each year for the purchase of program services and supports. An individual budget shall be calculated no more than once in a 12-month period, unless revised to reflect a change in circumstances, needs, or resources of the participant using the process specified in clause (ii) of subparagraph (A) of paragraph (1).

(3) The spending plan shall be assigned to uniform budget categories developed by the department in consultation with stakeholders and distributed according to the timing of the anticipated expenditures in the IPP and in a manner that ensures that the participant has the financial resources to implement the IPP throughout the year.

(4) The department, in consultation with stakeholders, may develop alternative methodologies for individual budgets that are computed in a fair, transparent, and equitable manner and are based on consumer characteristics and needs, and that include a method for adjusting individual budgets to address a participant's change in circumstances or needs.

(n) Annually, participants may transfer up to 10 percent of the funds originally distributed to any budget category set forth in paragraph (3) of subdivision (m) to another budget category or categories. Transfers in excess of 10 percent of the original amount allocated to any budget category may be made upon the approval of the regional center or the participant's IPP team.

(o) Consistent with the implementation date of the IPP, the IPP team shall annually ascertain from the participant whether there are any circumstances or needs that require a change to the annual individual budget. Based on that review, the IPP team shall calculate a new individual budget consistent with the methodology identified in subdivision (m).

(p) (1) The department, as it determines necessary, may adopt regulations to implement the procedures set forth in this section. Any regulations shall be adopted in accordance with the requirements of Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code.

(2) Notwithstanding paragraph (1) and Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, and only to the extent that all necessary federal approvals are obtained, the department, without taking any further regulatory action, shall implement, interpret, or make specific this section by means of program directives or similar instructions until the time regulations are adopted. It is the intent of the Legislature that the department be allowed this temporary authority as necessary to implement program changes only until completion of the regulatory process.

(q) The department, in consultation with stakeholders, shall develop informational materials about the Self-Determination Program. The department shall ensure that regional centers are trained in the principles of self-determination, the mechanics of the Self-Determination Program, and the rights of consumers and families as candidates for, and participants in, the Self-Determination Program.

(r) Each regional center shall be responsible for implementing the Self-Determination Program as a term of its contract under Section 4629. As part of implementing the program, the regional center shall do all of the following:

(1) Meet the Self-Determination targets approved by the department, meet benchmarks established by the department in areas including timely enrollment, diversity of consumers served, and reduction of disparities in the individual budget of participants from racial and ethnic communities, and be eligible for incentives for exceeding these targets and benchmarks once the department has established a performance incentives program.

(2) Develop and implement an outreach and training plan about the Self-Determination program for the diverse communities served by the regional center, including in congregate settings. Information shall be provided in plain language, in alternative formats and alternative modes of communication and provide language access as required by state and federal law. Obtain input from stakeholders, including consumers and families that reflect the ethnic and language diversity of the regional center's consumers, about the effectiveness of this outreach and training and other activities that may be effective in reducing disparities in these programs.

(3) Annually report the enrollment, individual budget data, and purchase of service expenditure data for the Self-Determination Program consistent with the criteria in subdivisions (a) to (c), inclusive, of Section 4519.5.

(4) Assist eligible participants and their families in applying for Medi-Cal, in order to maximize federal funding and assist interested participants who wish to pursue institutional deeming in order to qualify for Medi-Cal services.

(5) At least annually, in addition to annual certification, conduct an additional review of all final individual budgets for participants at the regional center which are at or above a spending threshold that is specified by the department through directive consistent with federal and state requirements. This information may be used in the aggregate to provide training, program guidance, and verify compliance with state and federal requirements.

(6) Review the spending plan to verify that goods and services eligible for federal financial participation are not used to fund goods or services available through generic agencies.

(7) Contract with local consumer or family-run organizations and consult with the local volunteer advisory committee established pursuant to paragraph (1) of subdivision (w) to conduct outreach through local meetings or forums to consumers and their families to provide information about the Self-Determination Program and to help ensure that the program is available to a diverse group of participants, with special outreach to underserved communities.

(8) Collaborate with the local consumer or family-run organizations identified in paragraph (1) to jointly conduct training about the Self-Determination Program. The regional center shall consult with the local volunteer advisory committee established pursuant to paragraph (1) of subdivision (w) in planning for the training, and the local volunteer advisory committee may designate members to represent the advisory committee at the training.

(9) Train all service coordinators and fair hearing specialists in the principles of self-determination, the mechanics of the Self-Determination Program, and the rights of consumers and families. The training shall be conducted in collaboration with the local volunteer advisory committee.

(10) Provide payment to the financial management services provider for spending plan expenses through a not less than semi-monthly pay schedule.

(s) The financial management services provider shall provide the participant and the regional center service coordinator with a monthly individual budget statement that describes the amount of funds allocated by budget category, the amount spent in the previous 30-day period, and the amount of funding that remains available under the participant's individual budget.

(t) Only the financial management services provider is required to apply for vendorization in accordance with Subchapter 2 (commencing with Section 54300) of Chapter 3 of Division 2 of Title 17 of the California Code of Regulations for the Self-Determination Program. All other service and support providers shall not be on the federal debarment list and shall have applicable state licenses, certifications, or other state required documentation, including documentation of any other qualifications required by the department, but are exempt from the vendorization requirements set forth in Title 17 of the California Code of Regulations when serving participants in the Self-Determination Program.

(u) The regional center shall pay the full costs of the participant's financial management services provider.

(v) To protect the health and safety of participants in the Self-Determination Program, the department shall require a criminal background check in accordance with all of the following:

(1) The department shall issue a program directive that identifies nonvendored providers of services and supports who shall obtain a criminal background check pursuant to this subdivision. At a minimum, these staff shall include both of the following:

(A) Individuals who provide direct personal care services to a participant.

(B) Other nonvendored providers of services and supports for whom a criminal background check is requested by a participant or the participant's financial management service.

(2) Subject to the procedures and requirements of this subdivision, the department shall administer criminal background checks consistent with the department's authority and the process described in Sections 4689.2 to 4689.6, inclusive.

(3) The department shall electronically submit to the Department of Justice fingerprint images and related information required by the Department of Justice of nonvendored providers of services and supports, as specified in paragraph (1), for purposes of obtaining information as to the existence and content of a record of state or federal convictions and state or federal arrests and also information as to the existence and content of a record of state or federal arrests for which the Department of Justice establishes that the person is free on bail or on their own recognizance pending trial or appeal.

(4) When received, the Department of Justice shall forward to the Federal Bureau of Investigation requests for federal summary criminal history information received pursuant to this section. The Department of Justice shall review the information returned from the Federal Bureau of Investigation and compile and disseminate a response to the department.

(5) The Department of Justice shall provide a state or federal response to the department pursuant to paragraph (1) of subdivision (p) of Section 11105 of the Penal Code.

(6) The department shall request from the Department of Justice subsequent notification service, as provided pursuant to Section 11105.2 of the Penal Code, for persons described in paragraph (1).

(7) The Department of Justice shall charge a fee sufficient to cover the cost of processing the request described in this subdivision.

(8) The fingerprints of any provider of services and supports who is required to obtain a criminal background check shall be submitted to the Department of Justice prior to employment. The costs of the fingerprints and the financial management service's administrative cost authorized by the department shall be paid by the services and supports provider or the provider's employing agency. Any administrative costs incurred by the department pursuant to this subdivision shall be offset by the funds specified in subdivision (g).

(9) If the criminal record information report shows a criminal history, the department shall take the steps specified in Section 4689.2. The department may prohibit a provider of services and supports from becoming employed, or continuing to be employed, based on the criminal background check, as authorized in Section 4689.6. The provider of services and supports who has been denied employment shall have the rights set forth in Section 4689.6.

(10) The department may utilize a current department-issued criminal record clearance to enable a provider to serve more than one participant, as long as the criminal record clearance has been processed through the department and no subsequent arrest notifications have been received relative to the cleared applicant.

(11) Consistent with subdivision (h) of Section 4689.2, the participant or financial management service that denies or terminates employment based on written notification from the department shall not incur civil liability or unemployment insurance liability.

(w) To ensure the effective implementation of the Self-Determination Program and facilitate the sharing of best practices and training materials commencing with the implementation of the Self-Determination Program, local and statewide advisory committees shall be established as follows:

(1) Each regional center shall establish a local volunteer advisory committee to provide oversight of the Self-Determination Program and identify a regional center liaison to the committee. The regional center and the State Council on Developmental Disabilities shall each appoint one-half of the membership of the committee. The committee shall consist of the regional center clients' rights advocate, consumers, family members, and other advocates, and community leaders, including a representative from a family resource center. A majority of the committee shall be consumers and their family members. The committee shall reflect the multicultural diversity and geographic profile of the catchment area. The committee shall review the development and ongoing progress of the Self-Determination Program, including whether the program advances the principles of self-determination and is operating consistent with the requirements of this section, and may make ongoing recommendations for improvement to the regional center and the department. Annually, the regional center shall confirm, in writing, that the committee meets the requirements specified in this paragraph and provide the department with the name of the staff liaison and the names of the committee members, the positions they fill on the committee, and which entity appointed them to the committee.

(2) The State Council on Developmental Disabilities shall form a volunteer committee, to be known as the Statewide Self-Determination Advisory Committee, comprised of the chairs of the 21 local advisory committees or their designees. The council shall convene the Statewide Self-Determination Advisory Committee twice annually, or more frequently in the sole discretion of the council. The Statewide Self-Determination Advisory Committee shall meet by teleconference or other means established by the council to identify self-determination best practices, effective consumer and family training materials, implementation concerns, systemic issues, ways to enhance the program, and recommendations regarding the most effective method for participants to learn of individuals who are available to provide services and supports. The council shall synthesize information received from the Statewide Self-Determination Advisory Committee, local advisory committees, and other sources, share the information with consumers, families, regional centers, and the department, and make recommendations, as appropriate, to increase the program's effectiveness in furthering the principles of self-determination.

(x) The department shall annually provide the following information to the appropriate policy and fiscal committees of the Legislature:

(1) Number and characteristics of participants, by regional center, including the number of participants who entered the program upon movement from a developmental center.

(2) Types and amount of services and supports purchased under the Self-Determination Program, by regional center.

(3) Range and average of individual budgets, by regional center, including adjustments to the budget to address the adjustments permitted in clause (ii) of subparagraph (A) of paragraph (1) of subdivision (m).

(4) The number and outcome of appeals concerning individual budgets, by regional center.

(5) The number and outcome of fair hearing appeals, by regional center.

(6) The number of participants who voluntarily withdraw from the Self-Determination Program and a summary of the reasons why, by regional center.

(7) The number of participants who are subsequently determined to no longer be eligible for the Self-Determination Program and a summary of the reasons why, by regional center.

(y) (1) The State Council on Developmental Disabilities shall issue an interim report to the Legislature, in compliance with Section 9795 of the Government Code, no later than June 30, 2021, on the status of the Self-Determination Program authorized by this section, barriers to its implementation, and recommendations to enhance the effectiveness of the program. The interim report shall provide an update to the program's status, each regional center's cap on participation and progress toward that cap, the most recent statewide and per-regional-center participant count, and the historical trend in the statewide participation count since the start of the program. The department shall assist in providing available information to the council in order to facilitate the timely issuance of the report.

(2) The council, in collaboration with the protection and advocacy agency identified in Section 4900 and the federally funded University Centers for Excellence in Developmental Disabilities Education, Research, and Service, may work with regional centers to survey participants regarding participant satisfaction under the Self-Determination Program and, when data is available, the traditional service delivery system, including the proportion of participants who report that their choices and decisions are respected and supported and who report that they are able to recruit and hire qualified service providers, and to identify barriers to participation and recommendations for improvement.

(3) The council, in collaboration with the protection and advocacy agency identified in Section 4900 and the federally funded University Centers for Excellence in Developmental Disabilities Education, Research, and Service, shall issue a report to the Legislature, in compliance with Section 9795 of the Government Code, by June 30, 2023, on the status of the Self-Determination Program authorized by this section, and provide recommendations to enhance the effectiveness of the program. This review shall include the program's effectiveness in furthering the principles of self-determination, including all of the following:

(A) Freedom, which includes the ability of adults with developmental disabilities to exercise the same rights as all citizens to establish, with freely chosen supporters, family and friends, where they want to live, with whom they want to live, how their time will be occupied, and who supports them; and for families to have the freedom to receive unbiased assistance of their own choosing when developing a plan and to select all personnel and supports to further the life goals of a minor child.

(B) Authority, which includes the ability of a person with a disability, or family, to control a certain sum of dollars in order to purchase services and supports of their choosing.

(C) Support, which includes the ability to arrange resources and personnel, both formal and informal, that will assist a person with a disability to live a life in the community that is rich in community participation and contributions.

(D) Responsibility, which includes the ability of participants to take responsibility for decisions in their own lives and to be accountable for the use of public dollars, and to accept a valued role in their community through, for example, competitive employment, organizational affiliations, spiritual development, and general caring of others in their community.

(E) Confirmation, which includes confirmation of the critical role of participants and their families in making decisions in their own lives and designing and operating the system that they rely on.

SEC. 23. Section 4685.10 is added to the Welfare and Institutions Code, to read:

4685.10. (a) The department may adopt regulations to implement and comply with home and community-based settings requirements in Section 441.530(a)(1) of Title 42 of the Code of Federal Regulations. Any regulations shall be adopted in accordance with the requirements of Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code.

(b) Notwithstanding subdivision (a) and Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the department may issue administrative program directives to ensure compliance with Section 441.530(a)(1) of Title 42 of the Code of Federal Regulations until the time regulations are adopted. It is the intent of the Legislature that the department be allowed this temporary authority as necessary to implement compliance with the federal requirements only until completion of the regulatory process.

SEC. 24. Section 4688.06 is added to the Welfare and Institutions Code, to read:

4688.06. (a) Consistent with state and federal law, the Legislature recognizes the right of adults with disabilities to reside in the family home. The Legislature further recognizes that adults with developmental disabilities, and their families, may need coordinated family support services that are tailored to the unique needs of the consumer and that are respectful of the language, ethnicity, and culture of the family home.

(b) The department shall establish a Coordinated Family Support Services Pilot Program for adults who live with their families. The pilot program may focus on improving equitable access to services and supports and reducing ethnic and racial disparities in purchases of services.

(c) The services provided by the Coordinated Family Support Services Pilot Program shall be flexible and tailored to assist the consumer to remain in the home of their family for as long as that remains the preferred living option for the consumer and their family.

(d) (1) Notwithstanding Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the department may issue administrative program directives to ensure compliance with this section until the time regulations are adopted. It is the intent of the Legislature that the department be allowed this temporary authority as necessary to implement program changes only until completion of the regulatory process.

(2) Any regulation or administrative program directive issued pursuant to this subdivision shall include key elements of the Coordinated Family Support Services Program, including eligibility criteria, service design, and standards for vendors.

(3) The department shall collaborate with stakeholders to obtain input about key elements prior to the issuance of regulations or administrative program directives. Stakeholders shall include, but not be limited to, consumers and family members, including those from ethnically and racially diverse backgrounds, regional centers, the protection and advocacy agency described in subdivision (i) of Section 4900, the Office of Clients' Rights as described in Section 4433, the State Council on Developmental Disabilities, providers who deliver supported living services described in Section 4689, and providers with experience delivering services to adults living in the home of a parent or a family member, including independent living skills services described in Section 4688.05.

SEC. 25. Section 4688.21 of the Welfare and Institutions Code is amended to read:

4688.21. (a) The Legislature places a high priority on opportunities for adults with developmental disabilities to choose and customize day services to meet their individualized needs; have opportunities to further the development and support of employment and volunteer activities; direct their services; pursue postsecondary education; establish and support paid internship program opportunities; and increase their ability to lead integrated and inclusive lives. To further these goals, a consumer may choose a tailored day service or vouchered community-based training service, in lieu of, or in conjunction with, any other regional center vendored day program, look-alike day program, supported employment program, or work activity program.

(b) (1) A tailored day service shall include an individualized service design, as determined through the individual program plan (IPP), and developed through a person-centered planning process that reflects and maximizes individual preferences and goals, and approved by the regional center. This service design may include, but may not be limited to, the following:

(A) Fewer days or hours than in the program's approved day program, look-alike day program, supported employment program, or work activity program design.

(B) Flexibility in the duration, location, including by remote electronic communications, and intensity of services to meet the consumer's individualized needs.

(C) Prioritize the development or support of competitive, integrated employment, volunteer activities, or pursuit of postsecondary education; establish and support paid internship program opportunities; maximize consumer direction of the service; and increase the consumer's ability to lead an integrated and inclusive life.

(2) The type and amount of tailored day service shall be determined through the IPP process, pursuant to Section 4646. The IPP shall contain, but not be limited to, the following:

(A) A detailed description of the consumer's individualized choices and needs and how these choices and needs will be met.

(B) The type and amount of services and staffing needed to meet the consumer's individualized choices and needs, and unique health and safety and other needs.

(3) The staffing requirements set forth in Section 55756 of Title 17 of the California Code of Regulations and subdivision (r) of Section 4851 of this code shall not apply to a tailored day service.

(4) Commencing July 1, 2022, for vendored programs wishing to offer a tailored day service option, the hourly rate for the tailored day service option shall be calculated using a base rate, defined as twice the amount of the rate model or models for "Community-Based Day, Community Only, 1:2." The calculation of the rate shall be as follows:

(A) Effective July 1, 2022, the hourly rate shall equal 80 percent of the base rate.

(B) The rate established in subparagraph (A) shall remain in effect pending the department's review, in coordination with stakeholders, of implementation of this section, as amended by the act that added this paragraph. The review, to be completed by June 30, 2024, shall include development of recommendations that may include, but not be limited to, modifying the scope of the service or establishing a rate model specific to the service. The department shall provide an update to the Legislature on the status of the review no later than January 10, 2024.

(5) The hold harmless policy defined in subdivision (d) of Section 4519.10 shall apply for vendored programs offering a tailored day service as of June 30, 2022, with an hourly rate that exceeds the rate calculated in paragraph (4).

(6) Tailored day services shall not be delivered on the same day as any other regional center vendored day program, look-alike day program, supported employment program, or work activity program unless all of the following apply:

(A) A consumer has a plan identified in their individual program plan for transitioning from a work activity program to competitive integrated employment, paid internship, or postsecondary education.

(B) The transition plan is developed through a person-centered planning process that reflects and maximizes individual preferences and goals.

(C) The duration of the delivery of tailored day services on the same day or days as a work activity program or supported employment services is no longer than six months.

(7) The total monthly hours of tailored day services shall not exceed the number of days in the month tailored day services are authorized, multiplied by four.

(8) The regional center shall ensure that the vendor is capable of complying with, and will comply with, the consumer's IPP, individual choice, and health and safety needs.

(9) Effective July 1, 2011, and prior to the time of development, review, or modification of a consumer's IPP, regional centers shall provide information about tailored day service to eligible adult consumers. A consumer may request information about tailored day services from the regional center at any time and may request an IPP meeting to secure those services.

(c) (1) A vouchered community-based training service is defined as a consumer-directed service that assists the consumer in the development of skills required for competitive integrated employment, the paid internship program, participation in volunteer activities, or any combination of these, and the assistance necessary for the consumer to secure employment, a paid internship, or volunteer positions or pursue secondary education.

(2) Implementation of vouchered community-based training service is contingent upon the approval of the federal Centers for Medicare and Medicaid Services.

(3) Vouchered community-based training service shall be provided in natural environments in the community, separate from the consumer's residence.

(4) A consumer, parent, or conservator vendored as a vouchered community-based training service shall utilize the services of a financial management services (FMS) entity. The regional center shall provide information about available financial management services and shall assist the consumer in selecting a FMS vendor to act as coemployer.

(5) A parent or conservator shall not be the direct support worker employed by the vouchered community-based training service vendor.

(6) If the direct support worker is required to transport the consumer, the vouchered community-based training service vendor shall verify that the direct support worker can transport the consumer safely and has a valid California driver's license and proof of insurance.

(7) The rate for vouchered community-based training service shall be the most recent rate posted on the department's public internet website. The rate includes employer-related taxes and all transportation needed to implement the service, except as described in paragraph (8). The rate does not include the cost of the FMS.

(8) A consumer vendored as a vouchered community-based training service shall also be eligible for a regional center-funded bus pass, if appropriate and needed.

(9) Vouchered community-based training service shall be limited to a maximum of 150 hours per quarter. The services to be provided and the service hours shall be documented in the consumer's IPP.

(10) A direct support worker of vouchers community-based training service shall be an adult who possesses the skill, training, and experience necessary to provide services in accordance with the IPP.

(11) Effective July 1, 2011, and prior to the time of development, review, or modification of a consumer's IPP, regional centers shall provide information about vouchers community-based training service to eligible adult consumers.

(12) The type and amount of vouchers community-based training service shall be determined through the IPP process pursuant to Section 4646. The IPP shall contain, but not be limited to, the following:

(A) A detailed description of the consumer's individualized choices and needs and how these choices and needs will be met.

(B) The type and amount of services and staffing needed to meet the consumer's individualized choices and unique health and safety and other needs.

(d) The department may adopt emergency regulations for tailored day service or vouchers community-based training service. The adoption, amendment, repeal, or readoption of a regulation authorized by this subdivision is deemed to be necessary for the immediate preservation of the public peace, health and safety, or general welfare, for purposes of Sections 11346.1 and 11349.6 of the Government Code, and the department is hereby exempted from the requirement that it describe specific facts showing the need for immediate action. A certificate of compliance for these implementing regulations shall be filed within 24 months following the adoption of the first emergency regulations filed pursuant to this subdivision.

SEC. 26. Section 4690.6 of the Welfare and Institutions Code is amended to read:

4690.6. (a) Activity centers, adult development centers, behavior management programs, and other look-alike day programs with a daily rate shall bill regional centers for services provided to consumers in terms of half days of service and full days of service.

(b) For purposes of this section, the following definitions apply:

(1) "Full day of service" means a day in which the consumer's attendance is at least 65 percent of the declared and approved program day.

(2) "Half day of service" means any day in which the consumer's attendance does not meet the criteria for billing for a full day of service.

(c) A regional center may change the length of the declared and approved program day for a specific consumer in order to meet the needs of that consumer, upon the recommendation of the individual program planning team. The regional center shall set forth in the individual program plan the length of the consumer's program day and the reasons for the change in the length of the declared and approved program day.

(d) The definitions set forth in this section shall not apply to vendors of tailored day program service.

(e) This section shall remain in effect only until July 1, 2022, and as of that date is repealed.

SEC. 27. Section 4690.7 is added to the Welfare and Institutions Code, to read:

4690.7. A provider of nonresidential services, as defined in paragraph (49) of subdivision (a) of Section 54302 of Title 17 of the California Code of Regulations, may utilize Alternative Nonresidential Services, as authorized in the department's Directive 01-083120 (August 31, 2020), if needed, to meet a consumer's service needs, until December 31, 2022. When providing services to consumers, providers shall be creative, resourceful, and make modifications as needed to how existing services are delivered. Any Alternative Nonresidential Services used shall be responsive to each consumer's current needs, and be mindful of the importance of safety during the COVID-19 pandemic, including compliance with applicable state and local health orders and licensing requirements.

SEC. 28. Chapter 6.5 (commencing with Section 4699) is added to Division 4.5 of the Welfare and Institutions Code, to read:

CHAPTER 6.5. Developmental Services Workforce Stabilization

4699. The Legislature finds and declares all of the following:

(a) The State Department of Developmental Services estimates that about 120,000 direct support professionals and about 5,500 regional center service coordinators served approximately 370,000 consumers in fiscal year 2021–22.

(b) Workforce capacity among direct support professionals and regional center service coordinators is a growing concern in the developmental services system.

(c) Based on annual projected regional center caseload growth and assumptions about direct support professional turnover, the developmental services system is projected to need approximately 33,000 direct support professionals and 2,700 regional center service coordinators over the next five years.

(d) To be responsive to California's changing demographics, the department should support regional centers and service providers in undertaking a purposeful approach to recruiting and hiring workers from diverse communities and explore technological advancements as a complement to workers who provide direct services.

4699.1. Implementation of this chapter shall be subject to an appropriation by the Legislature for the purpose of this chapter.

4699.2. (a) The department shall establish, and regional centers shall administer in coordination with service providers, a program to provide training stipends to direct support professionals.

(b) It is the intent of the Legislature to enhance the quality of services received by consumers, improve direct support professional retention, and increase interest among direct support professionals in skills development and continuous learning opportunities by offering stipends for the completion of training courses.

(c) A regional center shall provide up to two five-hundred-dollar (\$500) training stipends to a direct support professional who completes training and development courses as specified by the department.

(d) Each training stipend shall be paid no later than three months after the conclusion of a training requirement.

(e) A portion of the program funding shall be used to compensate service providers an amount, in the form of a fee, as necessary to cover the reasonable costs to administer the program in coordination with regional centers, as determined by the department.

(f) Service providers and regional centers shall track participation and shall report to the department on a quarterly basis, commencing on January 31, 2023, on cumulative and reporting-period data about the number of participants, the administration of the fee pursuant to subdivision (e), the selection of training and development courses, and turnover information among participants.

(g) Training and development courses shall commence no later than November 1, 2022. A program participant may enroll in a training and development course on a later date.

4699.3. (a) The department shall establish, and regional centers shall administer, an entry-level training and internship program for individuals interested in becoming direct support professionals.

(b) It is the intent of the Legislature to enhance the quality of services received by consumers and increase the hiring and retention of direct support professionals through the creation of a training and internship program that demonstrates the career opportunities available to individuals interested in becoming direct support professionals, while providing them with the skills that they need to deliver high-quality services to consumers.

(c) The training and internship program shall do all of the following:

(1) Contract with outside agencies for recruitment outreach.

(2) Offer three-month internships that provide entry-level training and practical work experience for participants.

(3) Outline the wage and employment costs for paid internships up to 30 hours per week, to collectively cover participant wages and service provider costs.

(4) Focus on populations that reflect the state's diverse population and that do not traditionally have a pathway toward jobs in the developmental services field.

(5) Establish an entry point to the continuum of developmental services workforce development, including the training described in Section 4511.5.

(6) Create opportunities for postinternship permanent employment with service providers and allow for a five-hundred-dollar (\$500) retention stipend after six months of continuous employment and another five-hundred-dollar (\$500) stipend after one year of continuous employment.

(d) Regional centers shall track participation and report to the department on a quarterly basis on cumulative and reporting-period data about the number of participants, the number of participants hired, and the number of six-month and one-year employment

stipends provided.

(e) Internships shall be available no later than June 1, 2023. A program participant may enroll in an internship on a later date.

4699.4. (a) The department shall establish, and regional centers shall administer, a tuition reimbursement program for regional center employees who seek a degree or certification in a health or human services-related field.

(b) It is the intent of the Legislature to enhance regional center services received by consumers, increase subject matter expertise and career advancement options at regional centers, and improve employee retention rates at regional centers by offering tuition reimbursement for eligible regional center employees.

(c) Each qualifying participant shall be eligible to receive up to ten thousand dollars (\$10,000) annually for up to three years.

(d) In exchange for tuition reimbursement, participants shall be required to work at the regional center for no less than one year for each year of tuition reimbursement following completion of their degree or certification. An employee may transfer to another regional center to complete this requirement. The funding regional center shall notify the department within 30 days after a request from an employee to transfer to another regional center to complete this requirement. The receiving regional center is responsible for reporting the information required in subdivision (g).

(e) By September 1, 2022, the department shall publish eligibility requirements for regional center staff participation. These requirements shall include information about which regional center staff are eligible, which academic programs or types of academic programs are eligible, minimum application requirements, concurrent regional center work requirements, and postgraduation regional center work requirements. In addition, the department shall describe the terms of the program, including repayment or partial repayment requirements for individuals who do not complete their degree or certification or do not complete the concurrent or postgraduation work requirements.

(f) Tuition reimbursement shall be available for the 2022–23 through 2024–25 fiscal years.

(g) Regional centers shall report to the department on an annual basis, commencing on April 1, 2023, and thereafter on January 1 of each year until January 1, 2026, on data about the program, including number and demographics of applicants and participants and their regional center position, degree and field sought, and how long they were employed by the regional center after completing their degree or certification.

4699.5. (a) The department shall seek input from stakeholders throughout the implementation of this chapter.

(b) Stakeholders may include, but are not limited to, any of the following:

(1) Consumers and families across different geographic regions of the state and from diverse racial and ethnic backgrounds, and diverse consumer age groups and disabilities.

(2) Regional center representatives, including executive-level staff, administrative staff, and service coordinators.

(3) Service providers representing a diverse range of service types and models and including executive staff and direct support professionals.

(c) The department may utilize one of its existing stakeholder groups if it meets the criteria described in this section to conduct this consultation.

4699.6. (a) The department shall report to the Legislature at quarterly briefings for legislative staff about the progress on the programs described in this chapter. Reporting shall include summaries of the relevant data collected by service providers and regional centers.

(b) The department shall submit a report to the Legislature, in accordance with Section 9795 of the Government Code, no later than January 10, 2026, evaluating the success of the programs described in this chapter. As applicable, the report shall include, but not be limited to, information about all of the following:

(1) Summary information about each program, including statistics on participation and program completion, participant demographics, and participation by regional center and type of service provider.

(2) Number of new hires at service providers and regional centers.

(3) Employee retention and turnover rates at service providers and regional centers overall and among the program participant population, including available baseline rates prior to implementation of the programs and rates following completion of the programs.

(4) Consumer and family satisfaction and other measures of consumer outcomes.

4699.7. (a) 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, the provisions of this chapter by means of written directives or similar instructions through June 30, 2025.

(b) Contracts to procure services to implement this chapter 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.

SEC. 29. Article 1 (commencing with Section 4700) of Chapter 7 of Division 4.5 of the Welfare and Institutions Code is repealed.

SEC. 30. Article 1 (commencing with Section 4700) is added to Chapter 7 of Division 4.5 of the Welfare and Institutions Code, to read:

Article 1. Definitions

4700. Unless the context otherwise requires, the definitions set forth in this article govern the construction of this chapter.

4701. (a) "Adequate notice" means a written notice using the form prescribed by the department. The notice shall be in plain, clear, and nontechnical language. The notice shall be provided in the language preferred by the recipient or applicant receiving the notice, and, if appropriate, the authorized representative. The notice shall be sent to the recipient or applicant and, if appropriate, their authorized representative, as specified in Section 4710. The notice shall provide the following information:

(1) The action that the regional center or state-operated facility proposes to take, including a statement of the facts upon which the regional center or state-operated facility is relying.

(2) The reason or reasons for that action.

(3) The effective date of that action.

(4) The specific provision or provisions of law, regulation, or policy supporting the action.

(5) Information on availability of advocacy assistance, including referral to the clients' rights advocates specified in Sections 4433 and 4433.5, the State Council on Developmental Disabilities, publicly funded legal services organizations, and other advocacy organizations, including the agency designated as the protection and advocacy system as required under the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. Sec. 6000 et seq.) and as provided in Division 4.7 (commencing with Section 4900).

(6) A statement indicating whether the recipient is a participant in the Medicaid home and community-based services waiver.

(7) Information about how to file an appeal with the department, unless the department has designated another agency to receive appeal requests, and the contact information for the department.

(8) Information about the following rights that are available at all steps in the appeals process:

(A) To have an interpreter provide interpretation in the preferred language of the applicant or recipient and, if appropriate, the preferred language of the authorized representative.

(B) Access to records, including all records maintained in the individual's regional center or state-operated facility file, pursuant to Article 5 (commencing with Section 4725).

(9) Information about the following rights if a fair hearing is requested:

(A) The opportunity to attend and participate in all proceedings and to present written and oral evidence.

(B) The opportunity to examine and cross-examine witnesses.

(C) The right to appear in person with counsel or other representatives of their own choosing.

(D) The fair hearing shall be completed and a final administrative decision rendered within 90 days of the date the hearing request form is received by the department unless the fair hearing request has been withdrawn or the time period has been extended in accordance with this chapter.

(E) The right to request the disqualification of the hearing officer by filing an affidavit or making an objection on the record as specified in subdivision (g) of Section 4712. The information required by this subparagraph shall be included in the notice required by this paragraph no later than October 1, 2022.

(10) Information about the appeals process and timelines, including when current services are continued during the appeals process, and when a claimant can request a continuance.

(11) (A) Whether or not the individual is eligible for an exemption or exception to the action the regional center proposes to take as specified in subparagraph (D) of paragraph (6) of subdivision (a) of Section 4648, subdivision (d) of Section 4648.35, subdivision (d) of Section 4659, subdivision (i) of Section 4689, and subdivisions (a) and (d) of Section 4689.05, subdivision (b) of Section 95004 of the Government Code, and paragraph (3) of subdivision (e) of Section 95020 of the Government Code.

(B) The specific law supporting any of the above-specified exemptions or exceptions.

(b) "Appeal request form" means a form prescribed by the department that includes the name, address, contact information, and birth date of the claimant, date of the appeal request, the name of the regional center that provides services to the claimant or where an applicant has applied for services, the reason an appeal is requested, and the name, address, and relationship to the claimant of the authorized representative, if any. The appeal request form shall also indicate whether the claimant or their authorized representative is requesting an informal meeting, a mediation, or a fair hearing, or any combination of these options. A copy of the appointment of the authorized representative, by the claimant or the State Council on Developmental Disabilities if any, shall also be included. The form shall provide information about how to file an appeal and contact information for filing the appeal request form with the department unless the department has designated a different agency to receive the form.

(c) "Applicant" means a person who has applied for services from a regional center, or on whose behalf services have been applied for.

(d) (1) "Authorized representative" means any conservator, or legal guardian, parent, or person having legal custody of a minor claimant, who acts for or represents the claimant or a person or agency appointed pursuant to subdivision (a) of Section 4541 or subdivision (d) of Section 4705 and authorized in writing by the claimant or by the legal guardian, conservator, or parent or person having legal custody of a minor claimant to act for or represent the claimant under this chapter.

(2) "Authorized representative" also means any responsible adult appointed by a court order made pursuant to subdivision (j) of Section 319, subdivision (a) of Section 361, or subdivision (b) of Section 726 who the court determines is an appropriate representative for the minor, and who does not have a conflict of interest, as defined in subdivision (i) of Section 7579.5 of the Government Code, including, but not limited to, a foster parent, caregiver, or court-appointed special advocate.

(e) "Business days" means any day other than a Saturday, Sunday, or any other day that is an observed state or federal holiday.

(f) "Claimant" means an applicant for or recipient of services who has filed an appeal.

(g) "Days" means calendar days.

(h) "Hearing office" means the state agency that the department has designated to provide mediation and administrative hearing services.

(i) "Interpreter" means an individual who is able to interpret effectively, accurately, and impartially, both receptively and expressively.

(j) "Medicaid home and community-based services waiver participant" means an individual deemed eligible and receiving services through a Medicaid home and community-based services waiver program.

(k) "Mutual consent" means that the recipient or, if appropriate, their authorized representative, agrees with a regional center's or state operated facility's proposal to reduce, terminate, or change the services specified in an individual program plan or to deny the initiation of a service or support requested for inclusion in the individual program plan and that agreement is affirmatively documented, subsequent to the regional center's proposal or denial, in a signed individual program plan, a signed list of services pursuant to subdivision (g) of Section 4646, or other written communication from a recipient or authorized representative affirmatively agreeing to all or part of the regional center's or state-approved facility's proposal or denial.

(1) In the absence of written documentation, if the regional center or state-operated facility has a good faith belief that an agreement exists, it shall, within five business days of the agreement, send a letter confirming the agreement to the recipient and, if appropriate, their authorized representative, if any, by standard mail, certified mail, or email at their preference as indicated in their individual program plan. The letter shall include at least all of the following:

(A) The factual basis for the regional center's or state-operated facility's good faith belief that an agreement exists to reduce, terminate, or change the services specified in an individual program plan or to deny the initiation of a service or support requested for inclusion in the individual program plan.

(B) The action the service agency intends to take.

(C) The reason or reasons for that action.

(D) The availability of an appeals process if the applicant, recipient, or authorized representative disagrees with the decision and a link to the department's internet website with information about the appeals process.

(E) Information about how to express disagreement with the decision and how to obtain additional information about the appeals process.

(F) An appeal request form as described in subdivision (b).

(2) If the regional center is informed that the recipient or, if appropriate, their authorized representative, disagrees with its decision, the regional center shall immediately send adequate notice as defined in subdivision (a).

(3) This subdivision shall become operative on March 1, 2023.

(l) "Persons who have the right to request an appeal" means an applicant, recipient, and those individuals defined in subdivision (d).

(m) "Preferred language" means the language chosen by the applicant or recipient, and if applicable, the authorized representative.

(n) "Recipient" means a person with a developmental disability who receives services from a regional center or a state-operated facility.

(o) "Services" means the type and amount of services and services components set forth in the recipient's individual program plan pursuant to Section 4646, and provided by a regional center or by the department at a state-operated facility.

4702. Each regional center and each vendor that contracts with a regional center to provide services to recipients shall conspicuously post on its internet web, if any, links to the department's internet website page that provides a description of the appeals process set forth in this chapter and department contact information for providing information and education to recipients and applicants about the appeals process, including the notice of proposed action, timelines, options for resolving disagreements, and rights during the appeals process.

SEC. 31. Section 4705 of the Welfare and Institutions Code is amended to read:

4705. (a) (1) Every regional center or state-operated facility shall, as a condition of continued receipt of state funds, have an appeals procedure for resolving conflicts between the regional center or state-operated facility and recipients of, or applicants for, service. The State Department of Developmental Services shall promulgate regulations to implement this chapter, which shall be binding on every regional center and state-operated facility.

(2) Any public or private agency receiving state funds for the purpose of serving persons with developmental disabilities not otherwise subject to the provisions of this chapter shall, as a condition of continued receipt of state funds, adopt and periodically review a written internal grievance procedure.

(b) An agency that employs an appeals procedure mandated by any other statute shall be considered to have an approved procedure for purposes of this chapter.

(c) (1) The regional center's and the state-operated facility's mediation and fair hearing procedure shall be stated in writing, in English and any other language that may be appropriate to the needs of the consumers of the regional center or the state-operated facility. A copy of the procedure and a copy of the provisions of this chapter shall be prominently displayed on the premises of the regional center and the state-operated facility.

(2) All recipients and applicants, and persons having legal responsibility for recipients or applicants, shall be informed verbally of, and shall be notified in writing in a language that they comprehend of, the regional center's or the state-operated facility's mediation and fair hearing procedure when they apply for service, when they are denied service, when notice of service modification is given pursuant to Section 4710, and upon request.

(d) If, in the opinion of any person, the rights or interests of a claimant who has not personally authorized a representative will not be properly protected or advocated, the State Council on Developmental Disabilities and the clients' right advocate assigned to the regional center or state-operated facility shall be notified, and the State Council on Developmental Disabilities may appoint a person or agency as representative, pursuant to subdivision (a) of Section 4541, to assist the claimant in the mediation and fair hearing procedure. The appointment shall be in writing to the authorized representative and a copy of the appointment shall be immediately provided to the regional center director or the state-operated facility director.

(e) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 32. Section 4705 is added to the Welfare and Institutions Code, to read:

4705. Every regional center or state-operated facility shall, as a condition of continued receipt of state funds, have an appeals procedure for resolving conflicts between the regional center or state-operated facility and recipients of, or applicants for, service. The State Department of Developmental Services shall promulgate regulations to implement this chapter, which shall be binding on every regional center or state-operated facility.

(a) (1) Any public or private agency receiving state funds for the purpose of serving persons with developmental disabilities not otherwise subject to the provisions of this chapter shall, as a condition of continued receipt of state funds, adopt and periodically review a written internal grievance procedure.

(b) An agency that employs an appeals procedure mandated by any other statute shall be considered to have an approved procedure for purposes of this chapter.

(c) (1) The regional center's and the state-operated facility's appeals procedures for informal meetings, mediations, and fair hearings shall be stated in writing, in English and any other language that may be appropriate to the preferred language of the applicants and recipients served by the regional center or the state-operated facility.

(2) All recipients and applicants, and persons having legal responsibility for recipients or applicants, shall be informed verbally of, and shall be notified in writing in their preferred language of, the regional center's or the state-operated facility's appeals procedures for informal meetings, mediations, and fair hearings when they apply for service, when they are denied service, when notice of service modification is given pursuant to Section 4710, and upon request.

(d) If, in the opinion of any person, the rights or interests of a claimant who has not personally authorized a representative will not be properly protected or advocated, the State Council on Developmental Disabilities and the clients' right advocate assigned to the regional center or state-operated facility shall be notified, and the State Council on Developmental Disabilities may appoint a person or agency as representative, pursuant to subdivision (a) of Section 4541, to assist the claimant in the mediation and fair hearing procedure. The appointment shall be in writing to the authorized representative and a copy of the appointment shall be immediately mailed to the regional center director or the state-operated facility director.

(e) This section shall become operative on March 1, 2023.

SEC. 33. Section 4705.5 is added to the Welfare and Institutions Code, to read:

4705.5. (a) Unless the claimant is themselves an attorney licensed to practice law in California, or unless the claimant will have an attorney licensed to practice law in California in attendance, a regional center attorney or department attorney shall not attend an informal meeting, mediation, or fair hearing described in this chapter. The claimant shall notify the regional center and the hearing office at least 5 days prior to mediation, and 15 days prior to a fair hearing, that the claimant will have an attorney in attendance. However, the hearing officer may notify the parties in advance of a hearing that the hearing officer is allowing the attendance of an attorney in the interest of justice.

(b) This section shall become operative on October 1, 2022.

SEC. 34. Section 4706 of the Welfare and Institutions Code is amended to read:

4706. (a) Except as provided in subdivision (b) to the extent permitted by federal law, all issues concerning the rights of persons with developmental disabilities to receive services under this division shall be decided under this chapter, including those issues related to fair hearings, granted by the Medicaid home and community-services waiver to the State Department of Health Care Services.

(b) Whenever a fair hearing under this chapter involves services provided under the Medicaid home and community-based services waiver, the State Department of Health Care Services shall retain the right, as provided in Section 4712.5, to review and modify any decision reached under this chapter.

SEC. 35. Section 4707 of the Welfare and Institutions Code is amended to read:

4707. (a) By July 1, 1999, the State Department of Developmental Services shall implement a mediation process for resolving conflicts between regional centers and recipients of services specified in this chapter. Regulations implementing the mediation process shall be adopted by July 1, 2000.

(b) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 36. Section 4707 is added to the Welfare and Institutions Code, to read:

4707. (a) The following appeals processes shall be available for resolving conflicts between regional centers or state-operated facilities and recipients of, or applicants for, services under this chapter.

(1) An informal meeting held by the regional center or state-operated facility to resolve the issue or issues as provided for in Sections 4710.6 to 4710.9, inclusive.

(2) Mediation as provided for in Section 4711.5.

(3) A fair hearing as provided for in Sections 4711 and 4712.

(b) When filing an appeal, a claimant may initially request one or more parts of the appeals processes identified in subdivision (a). The claimant may subsequently amend their request to select parts of the appeals process not previously selected. However, that request shall constitute a waiver of the rights of a Medicaid home and community-based services waiver participant to receive a fair hearing decision within 90 days of the date that the appeal request form is received by the department or the agency it designates to receive the appeal request form.

(c) If a recipient's request for an appeal is postmarked or received by the department, or by another agency designated by the department to receive the appeal request, no later than 30 days after receipt of the notice of the proposed action and no later than the effective date of the action sent pursuant to subdivision (a) of Section 4710, current services shall continue for the length of time specified in Section 4715, and the recipient shall be afforded an opportunity for an informal meeting, a mediation, and a fair hearing.

(d) If a recipient or applicant's request for appeal is postmarked or received by the department, or by another agency designated by the department to receive the appeal request, 60 days after receipt of the notice of proposed action pursuant to subdivisions (a), (b), and (d) of Section 4710, they shall be afforded an opportunity for an informal meeting, a mediation, and a fair hearing.

(e) A claimant may request a continuance of any part of the appeals process. If granted, the continuance shall constitute a waiver of the Medicaid home and community-based services waiver participant's right to receive a fair hearing decision within 90 days of the date the appeal request form is received by the department or by the agency designated by the department to receive the appeal request form. The extension of time for the final decision resulting from the continuance shall be only as long as the time period of the continuance.

(f) This section shall become operative on March 1, 2023.

SEC. 37. Section 4708 is added to the Welfare and Institutions Code, to read:

4708. (a) (1) The department shall create, with input from stakeholders, standard appeals process information packets. There shall be one information packet related to appeals under the California Early Intervention Services Act (Title 14 (commencing with Section 95000) of the Government Code) and another information packet related to appeals under the Lanterman Developmental Disabilities Services Act (Division 4.5 (commencing with Section 4500)). The appeals process information packets shall include all information required by this chapter and by Section 52161 and Sections 52170 to 52174, inclusive, of Title 17 of the California Code of Regulations, and shall include the appeal request form.

(2) The appeals process information packets shall be translated to provide language access, as required by state and federal law, and shall be available in alternative formats and alternative modes of communication as required by state and federal law.

(3) The appeals process information packets shall be made available by regional centers and state-operated facilities to recipients and applicants at each regularly scheduled planning meeting and with all notices of action required by Section 4710. Upon request, the department and the regional center shall provide the information packet to applicants, recipients, and authorized representatives. The department and regional centers shall post a link to the standard appeals process information packets on their internet websites within 60 days of the department making the information packets available.

(b) The standard appeals process information packets required by this section shall be completed by the department, including translations and alternative formats, and following consultation with stakeholders, on or before March 1, 2023.

SEC. 38. Section 4710 of the Welfare and Institutions Code is amended to read:

4710. (a) Adequate notice shall be sent to the applicant or recipient and the authorized representative, if any, by certified mail at least 30 days prior to any of the following actions:

(1) The agency makes a decision without the mutual consent of the service recipient or authorized representative to reduce, terminate, or change services set forth in an individual program plan.

(2) A recipient is determined to be no longer eligible for agency services.

(b) Adequate notice shall be sent to the recipient and the authorized representative, if any, by certified mail no more than five working days after the agency makes a decision without the mutual consent of the recipient or authorized representative, if any, to deny the initiation of a service or support requested for inclusion in the individual program plan.

(c) If the reason for denial of services or modification of services in a recipient's individual program plan is a lack of funds in the regional center budget, the regional center shall be the service agency responsible for giving adequate notice and participating in the fair hearing procedure under this chapter.

(d) The regional center shall, within 30 days after written notice is mailed to the applicant or client, notify the department in writing of the denial if a lack of funds in the regional center budget is the reason for one of the following:

(1) The denial of services to an applicant.

(2) The denial of services to a current regional center client requesting services not included in the client's individual program plan but determined to be necessary by the interdisciplinary team.

(3) Denial, cutback, or termination of current services to a recipient set forth in the individual program plan.

The notification to the department shall include the nature of the service requested, a request that the department allocate sufficient funds to the regional center within 30 days to provide the service, the projected cost for the service for the balance of the fiscal year, and information substantiating the reason for the lack of funds to purchase the service.

(e) If a person requests regional center services and is found to be ineligible for these services, the regional center shall give adequate notice pursuant to Section 4701. Notice shall be sent within five working days of the time limits set forth in Sections 4642 and 4643.

(f) The advance notice specified in subdivision (a) shall not be required when a reduction, termination, or change in services is determined to be necessary for the health and safety of the recipient. However, adequate notice shall be given within 10 days after the service agency action.

(g) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 39. Section 4710 is added to the Welfare and Institutions Code, to read:

4710. (a) The regional center or state-operated facility shall send adequate notice, as described in subdivision (a) of Section 4701, to the recipient and, if appropriate, the authorized representative, by standard mail, certified mail, or email at their preference as indicated in their individual program plan. This notice shall be sent at least 30 days prior to either of the following actions and shall specify the effective date of the action:

(1) The regional center or state-operated facility makes a decision to reduce, terminate, or change services set forth in an individual program plan, unless there is mutual consent as defined in subdivision (k) of Section 4701.

(2) A recipient is determined to be no longer eligible for regional center services.

(b) The regional center or state-operated facility shall send adequate notice, as described in Section 4701, no more than five business days after it makes a decision to deny the initiation of a service or support requested for inclusion in the individual program plan unless there is mutual consent as defined in subdivision (k) of Section 4701. The notice shall be sent to the recipient and, if appropriate, the authorized representative, in their preferred language, by standard mail, certified mail, or by email at their preference as indicated in the individual program plan.

(c) If the reason for denial of services or modification of services in a recipient's individual program plan is a lack of funds in the regional center budget, the regional center shall be the service agency responsible for giving adequate notice and participating in the appeals procedure under this chapter.

(d) (1) The regional center shall, within 30 days after written notice is sent to the applicant or client, notify the department in writing of the denial if a lack of funds in the regional center budget is the reason for one of the following:

(A) The denial of services to an applicant.

(B) The denial of services to a current regional center client requesting services not included in the client's individual program plan but determined to be necessary by the interdisciplinary team.

(C) Denial, cutback, or termination of current services to a recipient set forth in the individual program plan.

(2) The notification to the department shall include the nature of the service requested, a request that the department allocate sufficient funds to the regional center within 30 days to provide the service, the projected cost for the service for the balance of the fiscal year, and information substantiating the reason for the lack of funds to purchase the service.

(e) If a person requests regional center services and is found to be ineligible for these services, the regional center shall give adequate notice pursuant to Section 4701. Within five business days of the time limits set forth in Sections 4642 and 4643, notice shall be sent to the applicant and, if appropriate, the authorized representative, by standard mail, certified mail, or email at their preference as indicated at the time of intake.

(f) The advance notice specified in subdivision (a) shall not be required when a reduction, termination, or change in services is determined to be necessary for the health and safety of the recipient. However, adequate notice shall be given within 10 days after the regional center or state-operated facility action.

(g) This section shall become operative on March 1, 2023.

SEC. 40. Section 4710.5 of the Welfare and Institutions Code is amended to read:

4710.5. (a) Any applicant for or recipient of services, or authorized representative of the applicant or recipient, who is dissatisfied with any decision of the service agency which they believe to be illegal, discriminatory, or not in the recipient's or applicant's best interests, shall, upon filing a request within 30 days after notification of the decision complained of, be afforded an opportunity for a fair hearing. The opportunity to request a voluntary informal meeting and an opportunity for mutually agreed upon voluntary mediation shall also be offered at this time.

(b) The request for a fair hearing and for mediation, or for a voluntary informal meeting, or any combination thereof, shall be stated in writing on a hearing request form provided by the service agency.

(c) If any person makes a request for mediation or a fair hearing other than on the hearing forms, the employee of the service agency who hears or receives the request shall provide the person with a hearing request form and shall assist the person in filling out the form if the person requires or requests assistance. Any employee who willfully fails to comply with this requirement shall be guilty of a misdemeanor.

(d) The hearing request form shall be directed to the director of the service agency responsible for the action complained of under subdivision (a). The service agency director shall simultaneously facsimile (FAX) a copy of the hearing request form to the department and the director of the responsible state agency or their designee pursuant to Section 4704.5 within five working days of the service agency director's receipt of the request. The department shall keep a file of all hearing request forms.

(e) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 41. Section 4710.5 is added to the Welfare and Institutions Code, to read:

4710.5. (a) Any applicant for or recipient of services, or authorized representative of the applicant or recipient, who is dissatisfied with a decision or action of the regional center or state-operated facility under this division shall, upon filing a request within 60 days after notification of that decision or action, be afforded an opportunity for an informal meeting, a mediation, and a fair hearing.

(b) The request for an informal meeting, mediation, or a fair hearing, or any combination thereof, shall be stated in writing on the appeal request form prescribed by the department.

(c) If any person makes a request for an informal meeting, mediation, or a fair hearing other than on the appeal request form, the employee of the regional center, department, or the state-operated facility who learns of the request shall provide the person with the appeal request form prescribed by the department and shall assist the person in filling out the form if the person requires or requests assistance. Any employee who willfully fails to comply with this requirement shall be guilty of a misdemeanor.

(d) The appeal request form shall be sent to the department unless the department has designated another agency to receive the form. The department or another agency that has been designated to receive the appeal request form shall send an electronic copy of a hearing request to the hearing office and the regional center or state-operated facility responsible for the action described in subdivision (a) within one business day of the department's or designated agency's receipt of the request. The department shall maintain information regarding all hearing request forms.

(e) This section shall become operative on March 1, 2023.

SEC. 42. Section 4710.6 of the Welfare and Institutions Code is amended to read:

4710.6. (a) Upon receipt by the service agency director of the hearing request form requesting a fair hearing, mediation, or a voluntary informal meeting, the service agency director shall immediately provide adequate notice pursuant to Section 4701 to the claimant, the claimant's guardian or conservator, parent of a minor, and authorized representative of the claimant's rights in connection with the fair hearing, mediation, or informal meeting. If an informal meeting is requested by the claimant, the service agency and the claimant shall determine a mutually agreed upon time for the meeting. The service agency shall notify the claimant of the date upon which their hearing request form was received by the service agency.

(b) The written notice shall also confirm the mutually agreed upon date, time, and place for a voluntary informal meeting, if desired by the claimant or their authorized representative, with the service agency director or the director's designee. The written notice shall also state that the claimant or their authorized representative may decline an informal meeting.

(c) The written notification of rights required pursuant to subdivision (a) shall not be required if the service agency includes written notification of those rights with the notice required by Section 4710.

(d) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 43. Section 4710.6 is added to the Welfare and Institutions Code, to read:

4710.6. (a) (1) Upon receipt of an appeal request form requesting an informal meeting, the regional center or state-operated facility and the claimant shall determine a mutually agreed-upon date, time, and place for the meeting to be held, which shall be within 10 days of the date the department, or another agency designated by the department, receives the request, or unless the claimant requests a continuance.

(2) A place pursuant to paragraph (1) may include an agreement of the parties to conduct the informal meeting by telephone, videoconference, or other electronic means.

(b) The regional center or state-operated facility shall notify the claimant and their authorized representative in writing and in their preferred language of the mutually agreed-upon date, time, and place for the informal meeting.

(c) A written notification of rights specified in Section 4701 shall be provided to the claimant unless the regional center or state-operated facility provided the required written notification of those rights with the notice required by Section 4710.

(d) This section shall become operative on March 1, 2023.

SEC. 44. Section 4710.7 of the Welfare and Institutions Code is amended to read:

4710.7. (a) Upon requesting a fair hearing, the claimant has the right to request a voluntary informal meeting with the service agency director or the service agency director's designee. The purpose of the meeting is to attempt to resolve the issue or issues that are the subject of the fair hearing appeal informally prior to the scheduled fair hearing.

(b) If an informal meeting is held, it shall be conducted by the service agency director or their designee. The service agency director or the service agency director's designee shall notify the applicant or recipient and their authorized representative of the decision of the informal meeting in writing within five working days of the meeting.

(c) The written decision of the service agency director or the service agency director's designee shall:

(1) Identify the issues presented by the appeal.

(2) Rule on each issue identified.

(3) State the facts supporting each ruling.

(4) Identify the laws, regulations, and policies upon which each ruling is based.

(d) Prior to the meeting, the claimant or the claimant's authorized representative shall have the right to examine any documents contained in the individual's service agency file. Access to records shall be provided pursuant to Article 5 (commencing with Section 4725).

(e) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 45. Section 4710.7 is added to the Welfare and Institutions Code, to read:

4710.7. (a) The purpose of the informal meeting is to attempt to resolve the issue or issues that are the subject of the appeal request informally prior to a mediation or fair hearing.

(b) The informal meeting shall be conducted by the regional center or state-operated facility director or their designee. The regional center or state-operated facility director or their designee shall notify the applicant or recipient and their authorized representative of the decision from the informal meeting in writing within five days of the meeting.

(c) The written decision of the regional center or state-operated facility director or their designee shall:

- (1) Identify the issues presented by the appeal.
- (2) Rule on each issue identified.
- (3) State the facts supporting each ruling.
- (4) Identify the specific laws, regulations, and policies upon which each ruling is based.
- (5) Be provided in the preferred language of the applicant or recipient, or their authorized representative.

(d) This section shall become operative on March 1, 2023.

SEC. 46. Section 4710.8 of the Welfare and Institutions Code is amended to read:

4710.8. (a) At an informal meeting, the claimant shall have the rights stated pursuant to Section 4701.

(b) An informal meeting shall be held at a time and place reasonably convenient to the claimant and the authorized representative.

(c) An informal meeting shall be conducted in the English language. However, if the claimant, the claimant's guardian or conservator, the parent of a minor claimant, or the authorized representative does not understand English, an interpreter shall be provided who is competent and acceptable to both the person requiring the interpreter and the service agency director or the director's designee. Any cost of an interpreter shall be borne by the service agency.

(d) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 47. Section 4710.8 is added to the Welfare and Institutions Code, to read:

4710.8. (a) At an informal meeting, the claimant shall have the rights stated pursuant to Section 4701.

(b) An informal meeting shall be held consistent with Section 4710.6.

(c) An informal meeting shall be conducted in the English language. However, if the preferred language of the claimant or the authorized representative is not English, an interpreter shall be provided. Any cost of an interpreter shall be borne by the regional center or state-operated facility.

(d) This section shall become operative on March 1, 2023.

SEC. 48. Section 4710.9 of the Welfare and Institutions Code is amended to read:

4710.9. (a) If the claimant or the claimant's authorized representative is satisfied with the decision of the service agency following an informal meeting, they shall withdraw the request for a hearing on the matter decided. The decision of the service agency shall go into effect 10 days after the receipt of the withdrawal of the request for a fair hearing by the service agency. The service agency shall immediately forward a copy of the withdrawal to the department and to the director of the responsible state agency or their designee pursuant to Section 4704.5.

(b) If the claimant or the claimant's authorized representative has declined an informal meeting or is dissatisfied with the decision of the service agency and does not request mediation, the matter shall proceed to a fair hearing. The service agency shall immediately notify the director of the responsible state agency that the fair hearing request has not been withdrawn. A recommendation for consolidation pursuant to Section 4712.2 to the director of the responsible state agency may be made at this time.

(c) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 49. Section 4710.9 is added to the Welfare and Institutions Code, to read:

4710.9. (a) If, after the informal meeting, the claimant or their authorized representative is satisfied with all or part of the decision of the regional center or state-operated facility, they shall withdraw the request for an appeal on the matter or matters that have been decided to their satisfaction. The decision of the regional center or state-operated facility shall go into effect 10 days after

the receipt of the full or partial withdrawal of the request for an appeal on those matters. The regional center or state-operated facility shall immediately forward a copy of the full or partial withdrawal, including a copy of the written decision, to the department and to the hearing office.

(b) If the claimant or their authorized representative is dissatisfied with all or part of the decision of the regional center or state-operated facility, the regional center or state-operated facility shall immediately notify the department and the hearing office that the appeal request has not been withdrawn.

(c) (1) If a claimant or their authorized representative has not advised the regional center or state-operated facility whether they want to proceed to a mediation or fair hearing within three days of receiving the informal meeting decision, they may do so at a later date.

(2) A decision to proceed to a mediation or fair hearing that is made more than three days after receiving the informal meeting decision shall be considered a waiver of their Medicaid home and community-based services right to a hearing decision within 90 days of the date the original request was received by the department.

(3) Services provided pursuant to a recipient's individual program plan during the appeal shall end as specified in Section 4715.

(4) Sixty days after receiving the informal meeting decision, the appeal shall be considered withdrawn if the claimant or their authorized representative has not advised the regional center or state-operated facility of their intent to proceed to a mediation or fair hearing.

(d) A recommendation for consolidation pursuant to Section 4712.2 to the hearing office may be made at this time.

(e) This section shall become operative on March 1, 2023.

SEC. 50. Section 4711 of the Welfare and Institutions Code is amended to read:

4711. (a) Upon receipt of the hearing request form, where a fair hearing has been requested but mediation has not, the responsible state agency director shall immediately notify the claimant, the claimant's legal guardian or conservator, the parent of a minor claimant, the claimant's authorized representative, and the service agency director in writing of all the following information applicable to fair hearings. Where the hearing request form contains a request for a fair hearing and mediation, the notifications shall be made separately, and each notice shall contain only the information applicable to the particular type of proceeding.

(1) The time, place, and date of the fair hearing or mediation, as applicable, if agreed to by the service agency.

(2) The rights of the parties at the fair hearing pursuant to Section 4701 or mediation, as applicable, pursuant to Section 4711.5.

(3) The availability of advocacy assistance pursuant to subdivision (g) of Section 4701 for both mediation and fair hearings.

(4) The name, address, and telephone number of the persons or offices designated by the director of the responsible state agency, as applicable, to conduct fair hearings, mediate disputes, and to receive requests for continuance or consolidation.

(5) The rights and responsibilities of the parties established pursuant to subdivisions (d) to (m), inclusive, of Section 4712.

(b) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 51. Section 4711 is added to the Welfare and Institutions Code, to read:

4711. (a) Upon receipt of an appeal request form requesting mediation or a fair hearing, the hearing office shall immediately notify the claimant and the claimant's authorized representative, in their preferred language, and the regional center or state-operated facility director in writing of all the following information applicable to mediation and fair hearings:

(1) (A) The time, place, and date of the mediation or fair hearing, as applicable.

(B) A place pursuant to paragraph (1) may include an agreement of the parties, or an order by a hearing officer, following a finding of good cause, to conduct the mediation or hearing by telephone, videoconference, or other electronic means.

(2) The rights of the parties at the mediation or fair hearing pursuant to Section 4701 or 4711.5, as applicable.

(3) The availability of advocacy assistance pursuant to paragraph (5) of subdivision (a) of Section 4701.

(4) As applicable, contact information for persons or offices to conduct mediation or fair hearings, and to receive requests for continuance or consolidation.

(5) The rights and responsibilities of the parties established pursuant to Sections 4711.5 and 4712.

(b) This section shall become operative on March 1, 2023.

SEC. 52. Section 4711.5 of the Welfare and Institutions Code is amended to read:

4711.5. (a) Upon receipt of the written request for mediation, the service agency shall be given five working days to accept or decline mediation.

(b) If the service agency declines mediation, the notice of that decision shall be sent immediately to the claimant, the claimant's authorized representative, and the director of the responsible state agency.

(c) (1) If the service agency accepts mediation, the service agency shall immediately send notice of that decision to the claimant, the claimant's authorized representative, and the director of the responsible state agency.

(2) Within five calendar days after the receipt of the notice of the service agency's decision regarding mediation, the responsible state agency or the designee of the responsible state agency shall notify the claimant, the claimant's authorized representative, and the service agency of the information applicable to voluntary mediation specified in Section 4711. The mediation shall be held within 30 days of the date the hearing request form is received by the service agency, unless a continuance is granted to the claimant at the discretion of the mediator.

(3) A continuance granted pursuant to paragraph (2) shall constitute a waiver of medicaid home and community-based services of the participant's right to a decision within 90 days of the date the hearing request form is received by the service agency. The extension of time for the final decision resulting from the continuance shall only be as long as the time period of the continuance.

(d) Mediation shall be conducted in an informal, nonadversarial manner, and shall incorporate the rights of the claimant contained in paragraphs (1), (3), (4), and (5) of subdivision (f) of Section 4701.

(e) The State Department of Developmental Services shall contract with the mediators that meet the following requirements:

(1) Familiarity with the provisions of this division and implementing regulations, familiarity with the process of reconciling differences in a nonadversarial, informal manner.

(2) The person is not in the business of providing or supervising services provided to regional centers or to regional center consumers.

(f) During the course of the mediation, the mediator may meet separately with the participants to the mediation, and may speak with any party or parties confidentially in an attempt to assist the parties to reach a resolution that is acceptable to all parties.

(g) The mediator shall voluntarily disqualify themselves and withdraw from any case in which the mediator cannot be fair and impartial. Any party may request the disqualification of the mediator by filing an affidavit, prior to the voluntary mediation, stating with particularity the grounds upon which it is claimed that a fair and impartial mediation cannot be accorded. The issue shall be decided by the mediator.

(h) Either the service agency or the claimant or the claimant's authorized representative may withdraw at any time from the mediation and proceed to a fair hearing.

(i) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 53. Section 4711.5 is added to the Welfare and Institutions Code, to read:

4711.5. (a) Upon receipt of an appeal request form requesting mediation, the hearing office shall promptly notify the claimant and their authorized representative, in their preferred language, and the regional center or state-operated facility, of the information applicable to mediation.

(b) (1) The mediation shall be held within 30 days of the date the appeal request form is received by the department or by another agency designated by the department to receive the appeal request form, or unless a continuance is requested and granted to the claimant at the discretion of the mediator.

(2) A continuance granted pursuant to paragraph (1) shall constitute a waiver of a Medicaid home and community-based services participant's right to a decision within 90 days of the date the appeal request form is received by the department or by another agency designated by the department to receive the appeal request form. The extension of time for the final decision resulting from the continuance shall be only as long as the time period of the continuance.

(c) Mediation shall be conducted in an informal, nonadversarial manner, and shall incorporate the rights of the claimant contained in paragraph (8) of subdivision (a) of Section 4701.

(d) Mediators shall meet both of the following requirements:

(1) Familiarity with the provisions of this division and implementing regulations, and familiarity with the process of reconciling differences in a nonadversarial, informal manner.

(2) The person is not in the business of providing or supervising services provided to regional centers or to regional center applicants or recipients.

(e) During the course of the mediation, the mediator may meet separately with the participants to the mediation, and may speak with any party or parties confidentially in an attempt to assist the parties to reach a resolution that is acceptable to all parties.

(f) The mediator shall voluntarily disqualify themselves and withdraw from any case in which the mediator cannot be fair and impartial. Any party may request the disqualification of the mediator by filing an affidavit, prior to the mediation, stating the specific grounds upon which it is claimed that a fair and impartial mediation cannot be held. The issue shall be decided by the mediator.

(g) Either the regional center or state-operated facility or the claimant or their authorized representative may withdraw from mediation at any time after the conclusion of the first mediation session, as that time is established by the mediator, and proceed to a fair hearing, if a fair hearing has been requested by the claimant.

(h) This section shall become operative on March 1, 2023.

SEC. 54. Section 4711.7 of the Welfare and Institutions Code is amended to read:

4711.7. (a) If the issue or issues involved in the mediation are resolved to the satisfaction of both parties, the mediator shall prepare a written resolution. Agreement of the claimant or the claimant's authorized representative to the final solution shall be accompanied by a withdrawal, in writing, of the fair hearing request. The final resolution shall go into effect 10 days after receipt of the withdrawal of the request for a fair hearing by the service agency. The mediator shall immediately forward a copy of the withdrawal to the director of the responsible state agency.

(b) If the mediation fails to resolve an issue or issues to the satisfaction of the claimant, or the claimant's authorized representative, the matter shall proceed to fair hearing with respect to the unresolved issue or issues as provided under this chapter, and the mediator shall immediately notify the director of the responsible state agency of the outcome of the mediation.

(c) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 55. Section 4711.7 is added to the Welfare and Institutions Code, to read:

4711.7. (a) If the issue or issues involved in the mediation are resolved or partially resolved to the satisfaction of both parties, the mediator shall prepare a written resolution. Agreement of the claimant or their authorized representative to the written resolution shall be accompanied by a withdrawal or partial withdrawal, in writing, of any fair hearing request. The written resolution shall go into effect 10 days after receipt of the claimant's agreement to the written resolution. The mediator shall promptly forward a copy of the written resolution and any full or partial withdrawal of a fair hearing request to the hearing office.

(b) If the mediation fails to resolve an issue or issues to the satisfaction of the claimant, or their authorized representative, the matter shall, at the claimant's request, proceed to a fair hearing with respect to the unresolved issue or issues as provided under this chapter.

(c) The mediator, after the conclusion of the mediation, shall promptly notify the hearing office, department, claimant and their authorized representative, and regional center of the outcome of the mediation and whether or not the claimant wants to proceed to a fair hearing. If the claimant or their authorized representative has not indicated whether they want to proceed to a fair hearing, the matter shall be taken off the calendar and continued until the time that the claimant requests a hearing or withdraws the hearing request. The continuance shall be considered a waiver of their Medicaid home- and community-based waiver services right to a hearing decision within 90 days of the date the original request was received by the department.

(d) Services provided pursuant to a recipient's individual program plan during the appeal shall end as specified in Section 4715.

(e) Sixty days after the mediator's notice of the outcome of the mediation, the appeal shall be considered withdrawn if the claimant or their authorized representative has not indicated their intent to proceed to a fair hearing.

(f) This section shall become operative on March 1, 2023.

SEC. 56. Section 4712 of the Welfare and Institutions Code is amended to read:

4712. (a) The fair hearing shall be held within 50 days of the date the hearing request form is received by the service agency, unless a continuance based upon a showing of good cause has been granted to the claimant. The service agency may also request a continuance based upon a showing of good cause, provided that the granting of the continuance does not extend the time period for rendering a final administrative decision beyond the 90-day period provided for in this chapter. For purposes of this section, good cause includes, but is not limited to, the following circumstances:

- (1) Death of a spouse, parent, child, brother, sister, grandparent of the claimant or authorized representative, or legal guardian or conservator of the claimant.
- (2) Personal illness or injury of the claimant or authorized representative.
- (3) Sudden and unexpected emergencies, including, but not limited to, court appearances of the claimant or authorized representative, conflicting schedules of the authorized representative if the conflict is beyond the control of the authorized representative.
- (4) Unavailability of a witness or evidence, the absence of which would result in serious prejudice to the claimant.
- (5) An intervening request by the claimant or the claimant's authorized representative for mediation.

(b) Notwithstanding Sections 19130, 19131, and 19132 of the Government Code, the department shall contract for the provision of independent hearing officers. Hearing officers shall have had at least two years of full-time legal training at a California or American Bar Association accredited law school or the equivalent in training and experience as established by regulations to be adopted by the department pursuant to Section 4705. These hearing officers shall receive training in the law and regulations governing services to developmentally disabled individuals and administrative hearings. Training shall include, but not be limited to, the Lanterman Developmental Disabilities Services Act and regulations adopted thereunder, relevant case law, information about services and supports available to persons with developmental disabilities, including innovative services and supports, the standard agreement contract between the department and regional centers and regional center purchase-of-service policies, and information and training on protecting the rights of consumers at administrative hearings, with emphasis on assisting, where appropriate, those consumers represented by themselves or an advocate inexperienced in administrative hearings in fully developing the administrative record. The State Department of Developmental Services shall seek the advice of the State Council on Developmental Disabilities, 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, the Association of Regional Center Agencies, and other state agencies or organizations and consumers and family members as designated by the department in the development of standardized hearing procedures for hearing officers and training materials and the implementation of training procedures by the department. The department shall provide formal training for hearing officers on at least an annual basis. The training shall be developed and presented by the department, however, the department shall invite those agencies and organizations listed in this subdivision to participate.

(c) The hearing officer shall not be an employee, agent, board member, or contractor of the service agency against whose action the appeal has been filed, or a spouse, parent, child, brother, sister, grandparent, legal guardian, or conservator of the claimant, or any person who has a direct financial interest in the outcome of the fair hearing, or any other interest which would preclude a fair and impartial hearing.

(d) The claimant and the service agency shall exchange a list of potential witnesses, the general subject of the testimony of each witness, and copies of all potential documentary evidence at least five calendar days prior to the hearing. The hearing officer may prohibit testimony of a witness that is not disclosed and may prohibit the introduction of documents that have not been disclosed. However, the hearing officer may allow introduction of the testimony or witness in the interest of justice.

(e) (1) The fair hearing shall be held at a time and place reasonably convenient to the claimant and the authorized representative. The claimant or the authorized representative of the claimant and the regional center shall agree on the location of the fair hearing.

- (2) A location pursuant to paragraph (1) may include an agreement to conduct the hearing by telephone, videoconference, or other electronic means.

(f) Merits of a pending fair hearing shall not be discussed between the hearing officer and a party outside the presence of the other party.

(g) The hearing officer shall voluntarily disqualify themselves and withdraw from any case in which the hearing officer cannot accord a fair and impartial hearing or consideration. Any party may request the disqualification of the hearing officer by filing an affidavit, prior to the taking of evidence at a hearing, stating with particularity the grounds upon which it is claimed that a fair and impartial hearing cannot be accorded. The issue shall be decided by the hearing officer.

(h) Both parties to the fair hearing shall have the rights specified in subdivision (f) of Section 4701.

(i) The fair hearing need not be conducted according to the technical rules of evidence and those related to witnesses. Any relevant evidence shall be admitted. Both parties shall be allowed to submit documents into evidence at the beginning of the hearing. No party shall be required to formally authenticate any document unless the hearing officer determines the necessity to do so in the interest of justice. All testimony shall be under oath or affirmation which the hearing officer is empowered to administer.

(j) A service agency shall present its witnesses and all other evidence before the claimant presents the claimant's case unless the parties agree otherwise or the hearing officer determines that there exists good cause for a witness to be heard out of order. This section does not alter the burden of proof.

(k) A recording shall be made of the proceedings before the hearing officer. Any cost of recording shall be borne by the responsible state agency.

(l) The fair hearing shall be conducted in the English language. However, if the claimant, the claimant's guardian or conservator, parent of a minor claimant, or authorized representative does not understand English, an interpreter shall be provided by the responsible state agency.

(m) The fair hearing shall be open to the public except at the request of the claimant or authorized representative or when personnel matters are being reviewed.

(n) The agency awarded the contract for independent hearing officers shall biennially conduct, or cause to be conducted, an evaluation of the hearing officers who conduct hearings under this part. The department shall approve the methodology used to conduct the evaluation. Information and data for this evaluation shall be solicited from consumers who were claimants in an administrative hearing over the past two years, their family members or authorized representative if involved in the hearing, regional centers, and nonattorney advocates, attorneys who represented either party in an administrative hearing over the past two years, and the organizations identified in subdivision (b). Regional centers shall forward copies of administrative decisions reviewed by the superior court to the department. The areas of evaluation shall include, but not be limited to, the hearing officers' demeanor toward parties and witnesses, conduct of the hearing in accord with fairness and standards of due process, ability to fairly develop the record in cases where consumers represent themselves or are represented by an advocate that does not have significant experience in administrative hearings, use of legal authority, clarity of written decisions, and adherence to the requirements of subdivision (b) of Section 4712.5. The department shall be provided with a copy of the evaluation and shall use the evaluation in partial fulfillment of its evaluation of the contract for the provision of independent hearing officers. A summary of the data collected shall be made available to the public upon request, provided that the names of individual hearing officers and consumers shall not be disclosed.

(o) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 57. Section 4712 is added to the Welfare and Institutions Code, to read:

4712. (a) (1) The fair hearing shall be held within 50 days of the date the appeal request form is received by the department or other agency designated by the department to receive appeal request forms, unless a continuance is granted to the claimant. A claimant's first request for a continuance made prior to the commencement of the hearing shall be granted without a showing of good cause. A claimant may request additional continuances based on a showing of good cause. A claimant's request for a continuance shall result in a waiver of the claimant's Medicaid home and community-based services right to a decision within 90 days of the date the appeal request form is received.

(2) The regional center or state-operated facility also may request a continuance based upon a showing of good cause, provided that the granting of the continuance does not extend the time period for rendering a final administrative decision beyond the 90-day period provided for in this chapter. For purposes of this section, good cause for either party includes, but is not limited to, the following circumstances:

(A) Death of a spouse, parent, child, brother, sister, or grandparent of the claimant or authorized representative, or of the regional center or state-operated facility representative.

(B) Personal illness or injury of the claimant or authorized representative, or of the regional center or state-operated facility representative.

(C) Sudden and unexpected emergencies, including, but not limited to, court appearances or conflicting schedules if the conflict is beyond the control of the claimant, authorized representative, or regional center or state-operated facility representative.

(D) Unavailability of a witness or evidence, the absence of which would result in serious prejudice to the claimant or the regional center or state-operated facility.

(E) An intervening request for mediation by the claimant or the claimant's authorized representative.

(b) (1) Notwithstanding Sections 19130, 19131, and 19132 of the Government Code, the department shall contract for the provision of independent hearing officers. Hearing officers shall have had at least two years of full-time legal training at a California or American Bar Association accredited law school or the equivalent in training and experience as established by regulations adopted by the department.

(2) Hearing officers shall receive training and information in the law and regulations governing services to people with intellectual and developmental disabilities and administrative hearings. Training shall include, but not be limited to, the Lanterman Developmental Disabilities Services Act and regulations adopted thereunder, relevant written directives and guidance issued by the department, relevant case law, information about services and supports available to persons with developmental disabilities, including innovative services and supports, the standard agreement contract between the department and regional centers, and regional center purchase-of-service policies. The training shall include methods to create an impartial and informal hearing environment that encourages the free and open exchange of information and engages the parties to bring out relevant facts, protecting the rights of claimants at fair hearings, with emphasis on assisting, if appropriate, an unrepresented claimant, family member, authorized representative, or advocate inexperienced in administrative hearings in fully developing the administrative record. The training also shall include information about disabilities and disability-related supports that may enable participation in a hearing, and reasonable accommodations to reduce barriers.

(3) The department and the hearing office shall seek the advice of stakeholders, including recipients and family members representing diverse disabilities and backgrounds, the State Council on Developmental Disabilities, the protection and advocacy agency identified in Division 4.7 (commencing with Section 4900) and 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, the Association of Regional Center Agencies, advocacy organizations, and other state agencies or organizations in the development of standardized hearing procedures for hearing officers and training materials and the implementation of training procedures by the department. The department shall provide formal training for hearing officers on at least an annual basis.

(c) The hearing officer shall not be an employee, agent, board member, or contractor of the regional center or state-operated facility against whose action the appeal has been filed, or a spouse, parent, child, brother, sister, grandparent, legal guardian, or conservator of the claimant, or any person who has a direct financial interest in the outcome of the fair hearing, or any other interest that would preclude a fair and impartial hearing.

(d) (1) The regional center or state-operated facility shall prepare a position statement and send it electronically to the hearing office and the claimant, unless the claimant has communicated an alternative way to receive the document, at least two business days prior to the hearing. The position statement shall summarize the facts of the case and set forth the justification of the regional center's or state-operated facility's action and shall include a list of witnesses that it intends to call during the hearing, the general subject of the testimony of each witness, and copies of all documentary evidence that it intends to use.

(A) If the preferred language of the claimant or their authorized representative is not English, the regional center also shall provide a copy of the position statement in their preferred language.

(B) If the regional center or state-operated facility cannot provide a copy of the position statement in the preferred language of the claimant or their authorized representative two business days prior to the hearing, the regional center or state-operated facility shall notify the claimant or their authorized representative, provide a copy of the position statement in English, and apply for a continuance of the hearing accompanied by evidence of its efforts to translate the position statement.

(C) The hearing officer shall, unless the claimant or their authorized representative indicates they want to proceed to hearing, continue the hearing for no more than 10 days following a determination that the regional center or state-operated facility has provided satisfactory evidence of its efforts to translate the position statement. The translated position statement shall be provided at least two business days prior to the continued hearing.

(2) At least two business days prior to the hearing, a claimant who is not represented by an attorney licensed to practice law in California shall make available to the regional center or state-operated facility and the hearing office a list of intended witnesses and a brief description of their relationship to the claimant and copies of any professional assessments or reports related to eligibility or services that the claimant intends to use at hearing. At or before the hearing, the claimant also shall make available to the regional center or state-operated facility and the hearing office copies of all other intended documentary evidence.

(3) If the claimant is represented by, or is, an attorney licensed to practice law in California, the claimant's attorney shall prepare a position statement and make it available to the regional center or state-operated facility and the hearing office at least two business days prior to the hearing. The position statement shall summarize the facts of the case and set forth the justification for the claimant's position and shall include a list of intended witnesses, the general subject of the testimony of each witness, and copies of all documentary evidence intended to be used.

(4) (A) The hearing officer may prohibit testimony of a witness or the introduction of documents that have not been disclosed. However, the hearing officer may allow introduction of documents or witness testimony in the interest of justice.

(B) In considering an unrepresented claimant's failure to disclose testimony or documents, the hearing officer also may consider the claimant's understanding of the disclosure requirements, disability factors that made it difficult for the claimant to comply with the rule, and the impact of excluding testimony or documents on the hearing officer's ability to assist the parties in bringing out relevant facts.

(e) (1) The fair hearing shall be held at a time and place reasonably convenient to the claimant and the authorized representative. The claimant or the authorized representative of the claimant and the regional center shall agree on the place of the fair hearing.

(2) A place pursuant to paragraph (1) may include an agreement of the parties, or an order by a hearing officer, following a finding of good cause, to conduct the hearing by telephone, videoconference, or other electronic means.

(f) Merits of a pending fair hearing shall not be discussed between the hearing officer and a party outside the presence of the other party.

(g) The hearing officer shall voluntarily disqualify themselves and withdraw from any case in which the hearing officer cannot accord a fair and impartial hearing or consideration. Any party may request the disqualification of the hearing officer by filing an affidavit or making an objection on the record, prior to the taking of evidence at a hearing, stating with particularity the grounds upon which it is claimed that a fair and impartial hearing cannot be accorded. The issue shall be decided by the hearing officer and may be reviewed as part of the reconsideration process specified in Section 4713.

(h) Both parties to the fair hearing shall have the rights specified in subparagraphs (A) to (C), inclusive, of paragraph (9) of subdivision (a) of Section 4701.

(i) (1) The fair hearing shall be conducted in an impartial and informal manner in order to encourage the presentation of information and the free and open discussion by participants. The hearing officer shall make their best effort to fully and fairly develop the record and create an environment in which all relevant facts, both favorable and unfavorable, are brought out and to engage the parties to bring out the facts.

(2) The fair hearing need not be conducted according to the technical rules of evidence and those related to witnesses. Any relevant evidence shall be admitted. Both parties shall be allowed to submit documents into evidence at the beginning of the hearing. A party shall not be required to formally authenticate any document unless the hearing officer determines the necessity to do so in the interest of justice. All testimony shall be under oath or affirmation which the hearing officer is empowered to administer.

(3) The hearing officer may do any of the following during the hearing to assist in bringing out all relevant facts:

(A) Question a witness on the record.

(B) Call a witness to testify at the hearing.

(C) Hold the record open to allow a party to obtain necessary testimony or documentation identified by the hearing officer during the course of the fair hearing.

(j) A regional center or state-operated facility shall present its witnesses and all other evidence before the claimant presents the claimant's case unless the parties agree otherwise or the hearing officer determines that it is appropriate for a witness to be heard out of order. This section does not alter the burden of proof.

(k) A recording shall be made of the proceedings before the hearing officer. Any cost of recording shall be borne by the hearing office.

(l) The fair hearing shall be conducted in the English language. However, if the preferred language of the claimant or authorized representative is not English, an interpreter shall be provided by the hearing office.

(m) The fair hearing shall be open to the public except at the request of the claimant or authorized representative or when personnel matters are being reviewed.

(n) The hearing office awarded the contract for independent hearing officers shall biennially conduct, or cause to be conducted, an evaluation of the hearing officers who conduct hearings under this part. The department shall approve the methodology used to conduct the evaluation. Information and data for this evaluation shall be solicited from recipients or applicants who participated in a fair hearing over the past two years, their family members or authorized representative if involved in the hearing, regional centers, and nonattorney advocates, attorneys who represented either party in a fair hearing over the past two years, and the organizations identified in paragraph (3) of subdivision (b). Regional centers shall forward copies of fair hearing decisions reviewed by the superior court to the department. The areas of evaluation shall include, but not be limited to, the hearing officers' demeanor toward parties and witnesses, conduct of the hearing in accord with fairness and standards of due process, ability to fairly develop the record in cases in which applicants or recipients represent themselves or are represented by an advocate that does not have significant experience in fair hearings, use of legal authority, clarity of written decisions, and adherence to the requirements of subdivision (c) of Section 4712.5. The department shall be provided with a copy of the evaluation and shall use the evaluation in partial fulfillment of its evaluation of the contract for the provision of independent hearing officers. A summary of the data collected shall be made available to the public upon request, provided that the names of individual hearing officers and the names and other identifiable information about applicants and recipients shall not be disclosed.

(o) This section shall become operative on March 1, 2023.

SEC. 58. Section 4712.2 of the Welfare and Institutions Code is amended to read:

4712.2. (a) Two or more claimants with a common complaint, or their authorized representatives, or a service agency may request the consolidation of appeals involving a common question of law or fact. The hearing officer may grant the request for consolidation if the hearing officer finds that consolidation would not result in prejudice or undue inconvenience to any party, undue delay, or a violation of any claimant's right to confidentiality unless the claimant agrees to have otherwise confidential information revealed to other claimants. Requests for consolidation shall be forwarded to the hearing officer, and postmarked within five working days of the receipt of the notice sent pursuant to Section 4711. The hearing officer shall notify the parties and authorized representatives, if any, of a request for consolidation and shall afford an opportunity for any written objections to be submitted.

(b) In all consolidated hearings, each individual claimant shall have all the rights specified in subdivision (f) of Section 4701. A separate written decision shall be issued to each claimant and respective authorized representatives.

(c) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 59. Section 4712.2 is added to the Welfare and Institutions Code, to read:

4712.2. (a) Two or more claimants with a common complaint, or their authorized representatives, or a regional center or state-operated facility may request the consolidation of appeals involving a common question of law or fact. The hearing officer may grant the request for consolidation if the hearing officer finds that consolidation would not result in prejudice or undue inconvenience to any party, undue delay, or a violation of any claimant's right to confidentiality unless the claimant agrees to have otherwise confidential information revealed to other claimants. Requests for consolidation shall be forwarded to the hearing officer and postmarked within five days of the receipt of the notice sent pursuant to Section 4711. The hearing officer shall notify the parties and authorized representatives, if any, of a request for consolidation and shall afford an opportunity for any written objections to be submitted.

(b) In all consolidated hearings, each individual claimant shall have all the rights specified in Section 4701. A separate written decision shall be issued to each claimant and respective authorized representatives.

(c) This section shall become operative on March 1, 2023.

SEC. 60. Section 4712.5 of the Welfare and Institutions Code, as amended by Section 435 of Chapter 615 of the Statutes of 2021, is amended to read:

4712.5. (a) Except as provided in subdivision (c), within 10 working days of the concluding day of the state hearing, but not later than 80 days following the date the hearing request form was received, the hearing officer shall render a written decision and shall transmit the decision to each party and to the director of the responsible state agency, along with notification that this is the final administrative decision, that each party shall be bound thereby, and that either party may appeal the decision to a court of competent jurisdiction within 90 days of the receiving notice of the final decision.

(b) The hearing officer's decision shall be in ordinary and concise language and shall contain a summary of the facts, a statement of the evidence from the proceedings that was relied upon, a decision on each of the issues presented, and an identification of the statutes, regulations, and policies supporting the decision.

(c) Where the decision involves an issue arising from the federal home- and community-based service waiver program, the hearing officer's decision shall be a proposed decision submitted to the Director of Health Care Services as the single state agency for the Medicaid program. Within 90 days following the date the hearing request form is postmarked or received, whichever is earlier, the director may adopt the decision as written or decide the matter on the record. If the Director of Health Care Services does not act on the proposed decision within 90 days, the decision shall be deemed to be adopted by the Director of Health Care Services. The final decision shall be immediately transmitted to each party, along with the notice described in subdivision (a). If the decision of the Director of Health Care Services differs from the proposed decision of the hearing officer, a copy of that proposed decision shall also be served upon each party.

(d) The department shall collect and maintain, or cause to be collected and maintained, redacted copies of all administrative hearing decisions issued under this division. Hearing decisions shall be categorized by the type of service or support that was the subject of the hearing and by the year of issuance. The department shall make copies of the decisions available to the public upon request at a cost per page not greater than that which it charges for document requests submitted pursuant to Division 10 (commencing with Section 7920.000) of Title 1 of the Government Code. The department shall use this information in partial fulfillment of its obligation to monitor regional centers and in its evaluation of the contract for the provision of independent hearing officers.

(e) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 61. Section 4712.5 is added to the Welfare and Institutions Code, to read:

4712.5. (a) (1) Within 10 business days of the concluding day of the fair hearing, but not later than 80 days following the date the appeal request form was received by the department or by another agency designated by the department to receive the appeal request form, the hearing officer shall render any final written decision delegated by subdivisions (d) and (e) and shall transmit the decision to each party, to the director of the hearing office, and the department, along with notification that this is the final administrative decision, that each party shall be bound thereby, and that either party may request a reconsideration pursuant to subdivision (b) of Section 4713 within 15 days of receiving the decision or appeal the decision to a court of competent jurisdiction within 180 days of receiving the final decision.

(2) Within 10 days of the concluding day of the fair hearing, but not later than 60 days following the date the appeal request form was received by the department or by another agency designated by the department to receive the appeal request form, the hearing officer shall render any proposed written decision as allowed by subdivisions (d) and (e) and shall electronically transmit the decision to the applicable departments identified in subdivisions (d) and (e).

(b) A continuance granted to a claimant shall constitute a waiver of their Medicaid home- and community-based services right to a decision within 90 days of the date the appeal request form is received by the department or by another agency designated by the department to receive the appeal request form. The extension of time for the final decision resulting from the continuance shall be only as long as the time period of the continuance.

(c) (1) The hearing officer's decision shall be in ordinary and concise language and shall contain a summary of the facts, a statement of the evidence from the proceedings that was relied upon, a decision on each of the issues presented, and an identification of the statutes, regulations, and policies supporting the decision.

(2) If the claimant's or their authorized representative's preferred language is not English, the hearing office shall provide the proposed or final written decision in English and in their preferred language.

(d) (1) In addition to any other delegation of authority granted to the Director of Health Care Services, the director may delegate their authority to adopt final decisions under this chapter to the hearing officers described in subdivision (b) of Section 4712 to the extent deemed appropriate by the director. Any delegation shall be stated in writing.

(2) If the decision involves an issue arising from the federal Medicaid home- and community-based services waiver program, the hearing officer's decision shall be a proposed decision submitted to the Director of Health Care Services as the single state agency for the Medicaid program. Within 90 days following the date the appeal request form is received, the director may adopt the decision as written or decide the matter on the record. If the Director of Health Care Services does not act on the proposed decision within 90 days, the decision shall be deemed to be adopted by the Director of Health Care Services. The final decision shall be immediately transmitted to each party, along with the notice described in paragraph (1) of subdivision (a). If the decision of the Director of Health Care Services differs from the proposed decision of the hearing officer, a copy of that proposed decision shall also be served upon each party.

(3) If the claimant's or their authorized representative's preferred language is not English, the final administrative hearing decision of the director and the proposed decision of the hearing officer shall be provided to that person in English and in their preferred language.

(e) (1) The Director of Developmental Services shall have the authority to review a hearing officer's proposed decision or to delegate their authority to adopt final decisions to the hearing officers described in subdivision (b) of Section 4712. The authority for hearing officers to adopt final decisions may be made within specified issues or types of cases to the extent deemed appropriate by the director. Any delegation shall be stated in writing.

(2) Within 30 days following receipt of the proposed decision, the Director of Developmental Services may adopt the proposed decision as written or decide the matter on the record, including the recording, with or without taking additional evidence. If the director does not act on the proposed decision within the 30 days, the proposed decision shall be deemed to be adopted by the director. The State Department of Developmental Services shall promptly transmit a final decision to each party, along with the notice described in paragraph (1) of subdivision (a). If the final decision of the director differs from the proposed decision of the hearing officer, a copy of the proposed decision also shall be served upon each party.

(3) If the claimant's or their authorized representative's preferred language is not English, the final hearing decision of the director and the proposed decision of the hearing officer shall be provided to that person in English and in their preferred language.

(f) The hearing office shall collect and maintain, or cause to be collected and maintained, redacted copies, that do not include any identifiable information concerning the claimant, of all final administrative hearing decisions issued under this chapter. Hearing decisions shall be searchable by the type of service or support that was the subject of the hearing, by the month and year of issuance, and any other categories identified by the State Department of Developmental Services. The hearing office shall make available to the public on the hearing office's internet website searchable and downloadable redacted copies of all final administrative hearing decisions. These decisions shall be available no later than 30 days after the date of the final hearing decision. The State Department of Developmental Services shall use this information in partial fulfillment of its obligation to monitor regional centers and in its evaluation of the contract for the provision of independent hearing officers.

(g) This section shall become operative on March 1, 2023.

SEC. 62. Section 4712.7 of the Welfare and Institutions Code is amended to read:

4712.7. (a) In addition to any other delegation of authority granted to the Director of Health Services, the director may delegate their authority to adopt final decisions under this chapter to hearing officers described in subdivision (b) of Section 4712 to the extent deemed appropriate by the director. The delegation shall be in writing.

(b) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 63. Section 4713 of the Welfare and Institutions Code is amended to read:

4713. (a) If the hearing officer's decision is unfavorable to the claimant, and the claimant has been receiving the services that have been the subject of the appeal, the hearing officer's decision shall not be implemented until 10 days after receipt of certified mailing to the claimant and the authorized representative.

(b) If the claimant, the claimant's guardian or conservator, parent of a minor claimant, or authorized representative cannot understand English, the written decision shall be provided by the responsible state agency to that person in English and in such language which such person comprehends.

(c) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 64. Section 4713 is added to the Welfare and Institutions Code, to read:

4713. (a) If the final decision is unfavorable to the claimant, and the claimant has been receiving the services that have been the subject of the appeal, the decision shall not be implemented until 15 days after receipt of the final hearing decision by the claimant and the authorized representative, unless a reconsideration is requested within 15 days from the date of the final hearing decision. If a reconsideration is requested, any services shall continue as specified in Section 4715.

(b) Within 15 days of the date of the final hearing decision, a party may apply to the hearing office or to the director responsible for issuing the final decision for a correction of a mistake of fact or law, or a clerical error in the decision or in the decision of the hearing officer not to recuse themselves following a request pursuant to subdivision (g) of Section 4712. The party shall state the specific grounds on which the application is made. Notice of the application shall be given to the other parties to the proceeding and to the department. The application is not a prerequisite for seeking judicial review. The other party may file a written statement supporting or opposing the application.

(c) The hearing office shall refer the application to a hearing officer who did not write the decision for which reconsideration is requested.

(d) Within 15 days of receiving the request, the hearing office or the director responsible for issuing the decision may deny the application, grant the application and modify the decision, or grant the application and set the matter for further proceedings. If further proceedings are authorized, they shall be conducted in the same manner and subject to the same time limits as the original hearing. Within one day of its decision on the application, the hearing office shall notify the parties and the department of its decision on the application.

(e) The hearing office or the director responsible for issuing the decision shall, within five business days after correction of a mistake of fact or law or clerical error in the decision, serve a copy of the corrected decision on each party and provide a copy to the State Department of Developmental Services.

(f) This section shall become operative on March 1, 2023.

SEC. 65. Section 4713.5 is added to the Welfare and Institutions Code, to read:

4713.5. (a) The regional center shall implement the final hearing decision as soon as practical and not later than 30 days following the date of the final hearing decision, or, if a reconsideration was granted, the regional center shall implement the final corrected decision 30 days following the reconsideration, unless the regional center notifies the claimant and their authorized representative in writing, with a copy to the department, of the specific exceptional circumstances that make it impossible to implement the decision within that timeframe and provides the date when the decision will be implemented.

(b) The claimant or authorized representative may contact the department if they are dissatisfied with the regional center's or the state-operated facility's compliance with the decision. Upon notification, the department shall take appropriate actions to obtain compliance with the decision.

SEC. 66. Section 4714 of the Welfare and Institutions Code is amended to read:

4714. (a) Commencing July 1, 1999, for each appeal request submitted pursuant to Section 4710.5, regional centers and developmental centers shall submit information to the department including, but not limited to, all of the following:

- (1) Whether the case was resolved through an informal meeting or mediation.
- (2) Whether an informal meeting or mediation was declined, and if so, by which party.
- (3) The issue or issues involved in the case.
- (4) The outcome of the case if a fair hearing was held.

(b) The information collected pursuant to this section shall be compiled by the department and made available to the public upon request.

(c) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 67. Section 4714 is added to the Welfare and Institutions Code, to read:

4714. (a) For each appeal request form submitted pursuant to Section 4710.5, the department shall collect information related to the appeal from regional centers or state-operated facilities in a manner and at times determined by the department. The information collected shall include, but is not limited to, all of the following:

- (1) Whether the case was resolved before an informal meeting or through an informal meeting.
- (2) Whether the case was withdrawn and the reason for the withdrawal.
- (3) Whether an informal meeting was declined.
- (4) The issue or issues involved in the case by issue type, as specified by the department.
- (5) If the case was resolved, the resolution outcome.
- (6) Demographic information, as identified by the department, about the claimants.
- (7) A copy of the written decision of the regional center director or designee or state-operated facility director or designee.

(b) For each appeal request submitted to the hearing office to conduct a mediation or a fair hearing, the department shall collect information relating to the request from the hearing office. The information provided shall include, but is not limited to, all of the following:

(1) Whether the request was resolved before mediation, through mediation, through a fair hearing, through a reconsideration, or through a different means.

(2) Whether the request was withdrawn and the reason for the withdrawal.

(3) The issue or issues involved in the request by issue type, as specified by the department.

(4) If the request was resolved, the outcome.

(5) A copy of the written mediation agreement, the final administrative hearing decision, and the final reconsideration decision, as applicable.

(6) The average length of time between filing and resolution of the request.

(7) Demographic information, as identified by the department, about claimants.

(c) The information collected pursuant to this section shall be compiled by the department. The department shall post aggregate information on its internet website at least annually and shall notify the Legislature when the information has been posted. The names of recipients and applicants and other personally identifiable information shall not be disclosed.

(d) This section shall become operative on March 1, 2023.

SEC. 68. Section 4715 of the Welfare and Institutions Code is amended to read:

4715. (a) Except as otherwise provided in this section, if a request for a hearing is postmarked or received by the service agency no later than 10 days after receipt of the notice of the proposed action mailed pursuant to subdivision (a) of Section 4710, services that are being provided pursuant to a recipient's individual program plan shall be continued during the appeal procedure up to and including the 10th day after receipt of any of the following:

(1) Receipt by the service agency, following an informal meeting, of the withdrawal of the fair hearing request pursuant to Section 4710.9.

(2) Receipt by the service agency, following mediation, of the withdrawal of the fair hearing request pursuant to subdivision (a) of Section 4711.4.

(3) Receipt by the recipient of the final decision of the hearing officer or single stage agency pursuant to subdivisions (a) and (c) of Section 4712.5.

(b) Services continued pursuant to subdivision (a) may be modified by agreement of the parties in accordance with the decision of the interdisciplinary team and the individual program plan.

(c) Any appeal to a court by either party shall not operate as a stay of enforcement of the final administrative decision, provided that either party may seek a stay of enforcement from any court of competent jurisdiction.

(d) This section shall remain in effect only until March 1, 2023, and as of that date is repealed.

SEC. 69. Section 4715 is added to the Welfare and Institutions Code, to read:

4715. (a) Except as provided in this section, if an appeal request is postmarked or received by the department or by another agency designated by the department to receive the appeal request, no later than 30 days after receipt of the notice of the proposed action sent pursuant to subdivision (a) of Section 4710, but no later than the effective date of the action, services that are being provided pursuant to a recipient's individual program plan shall be continued during the appeals process up to and including the 10th day after receipt of any of the following:

(1) Receipt by the regional center or state-operated facility, following an informal meeting, of the withdrawal of the appeal request pursuant to subdivision (a) of Section 4710.9, or the claimant's receipt of the informal meeting decision if the claimant has not made a decision to withdraw the appeal request or proceed to hearing within three days of receipt of the informal meeting decision pursuant to subdivision (c) of Section 4710.9.

(2) Receipt by the regional center or state-operated facility, following mediation, of the withdrawal of the appeal request pursuant to subdivision (a) of Section 4711.7 or the date the hearing office takes the appeal off the calendar if the claimant has not decided to withdraw the appeal request or proceed to the fair hearing pursuant to subdivision (b) of Section 4711.7.

(3) Receipt by the recipient of the final administrative hearing decision of the hearing officer or state agency pursuant to subdivision (a), (d), or (e) of Section 4712.5.

(4) Receipt by the recipient of the final decision of the hearing officer following a rehearing pursuant to Section 4713 if a rehearing was requested within 15 days from the date of the final administrative hearing decision pursuant to subdivision (a) of Section 4713.

(b) Services continued pursuant to subdivision (a) may be modified by agreement of the parties in accordance with the decision of the interdisciplinary team and the individual program plan.

(c) Any appeal to a court by either party shall not operate as a stay of enforcement of the final administrative decision, provided that either party may seek a stay of enforcement from any court of competent jurisdiction.

(d) This section shall become operative on March 1, 2023.

SEC. 70. Section 4717 is added to the Welfare and Institutions Code, to read:

4717. The hearing office, in collaboration with the department, shall establish and maintain an advisory committee composed of stakeholders including recipients and family members, the State Council on Developmental Disabilities, the protection and advocacy agency identified in Section 4900 et. seq and designated by the Governor 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, representatives of regional centers, advocacy organizations, and the Association of Regional Center Agencies. The advisory committee shall meet at least semiannually and assist the hearing office by providing nonbinding recommendations for improvements to fair hearing and mediation operations.

SEC. 71. Section 4725 of the Welfare and Institutions Code is amended to read:

4725. For the purposes of this article:

(a) "Access" means the right to inspect, review, and obtain an accurate copy of any record obtained in the course of providing services under this division. A regional center or state-operated facility may make a reasonable charge in an amount not to exceed the actual cost of reproducing the record, unless the imposition of the cost would prohibit the exercise of the right to obtain a copy. A charge shall not be made to search for or retrieve any record.

(b) "Record" means any item of information directly relating to a person with developmental disabilities or to one who is believed to have a developmental disability that is maintained by a regional center or state-operated facility, whether recorded by handwriting, print, tapes, film, microfilm, or other means.

SEC. 72. Section 4726 of the Welfare and Institutions Code is amended to read:

4726. Notwithstanding Section 5328, access to records shall be provided to an applicant for, or recipient of, services or to their authorized representative, including the person appointed as a developmental services decisionmaker pursuant to Section 319, 361, or 726, for purposes of the appeal process under this chapter.

SEC. 73. Section 4728 of the Welfare and Institutions Code is amended to read:

4728. Each regional center and the department for its state-operated facilities shall adopt procedures for granting of requests by persons authorized under Section 4726 for access to records during regular business hours, provided that access shall be granted no later than three business days following the date of receipt of the oral or written request for access. Procedures shall include notice of the location of all records and the provision of qualified personnel to interpret records if requested.

SEC. 74. Section 4729 of the Welfare and Institutions Code is amended to read:

4729. Whenever access to regional center or state-operated facility records is requested, the regional center or state-operated facility shall provide at least the following information:

(a) The types of records maintained by the service agency.

(b) The position of the official responsible for the maintenance of records.

(c) The right of access to the records, and the policies of the regional center or state-operated facility for obtaining access, including the cost, if any, consistent with subdivision (a) of Section 4725, to be charged for reproducing copies of records.

SEC. 75. Section 4731 of the Welfare and Institutions Code is amended to read:

4731. (a) Each consumer or any representative acting on behalf of any consumer or consumers, who believes that any right to which a consumer is entitled has been abused, punitively withheld, or improperly or unreasonably denied by a regional center, state-operated facility, or service provider, may pursue a complaint as provided in this section.

(b) Initial referral of any complaint taken pursuant to this section shall be to the director of the regional center from which the consumer receives case management services. If the consumer resides in a state-operated facility, the complaint shall be made to the director of the state-operated facility. The director shall, within 20 working days of receiving a complaint, investigate the complaint and send a written proposed resolution to the complainant and, if applicable, to the service provider. The written proposed resolution shall include a telephone number and mailing address for referring the proposed resolution in accordance with subdivision (c).

(c) If the complainant is not satisfied with the proposed resolution, the complainant may refer the complaint, in writing, to the Director of Developmental Services within 15 working days of receipt of the proposed resolution. The director shall, within 45 days of receiving a complaint, issue a written administrative decision and send a copy of the decision to the complainant, the director of the regional center or state-operated facility, and the service provider, if applicable. If there is no referral to the department, the proposed resolution shall become effective on the 20th working day following receipt by the complainant.

(d) The department shall annually compile the number of complaints filed, by each regional center and state-operated facility, the subject matter of each complaint, and a summary of each decision. Copies shall be made available to any person upon request.

(e) This section shall not be used to resolve disputes concerning the nature, scope, or amount of services and supports that should be included in an individual program plan, for which there is an appeals procedure established in this division, or disputes regarding rates or audit appeals for which there is an appeals procedure established in regulations. Those disputes shall be resolved through the appeals procedure established by this division or in regulations.

(f) All consumers or, if appropriate, their authorized representative, shall be notified in writing in their preferred language of the right to file a complaint pursuant to this section when they apply for services from a regional center or a state-operated facility, and at each regularly scheduled planning meeting.

SEC. 76. Section 4783 of the Welfare and Institutions Code is amended to read:

4783. (a) (1) The Family Cost Participation Program is hereby created in the State Department of Developmental Services for the purpose of assessing a cost participation to parents, as defined in Section 50215 of Title 17 of the California Code of Regulations, who have a child to whom all of the following applies:

(A) The child has a developmental disability or is eligible for services under the California Early Intervention Services Act (Title 14 (commencing with Section 95000) of the Government Code).

(B) The child is zero to 17 years of age, inclusive.

(C) The child lives in the parents' home.

(D) The child receives services and supports purchased through the regional center.

(E) The child is not eligible for Medi-Cal.

(2) Notwithstanding any other law, a parent described in subdivision (a) shall participate in the Family Cost Participation Program established pursuant to this section.

(3) Application of this section to children zero to two years of age, inclusive, shall be contingent upon approval by the United States Department of Education.

(b) (1) The department shall develop and establish a Family Cost Participation Schedule that shall be used by regional centers to assess the parents' cost participation. The schedule shall consist of a sliding scale for families with an annual gross income not less than 400 percent of the federal poverty guideline, and be adjusted for the level of annual gross income and the number of persons living in the family home.

(2) The schedule established pursuant to this section shall be exempt from 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).

(c) Family cost participation assessments shall only be applied to respite, daycare, and camping services that are included in the child's individual program plan or individualized family service plan for children zero to two years of age, inclusive.

(d) If there is more than one minor child living in the parents' home and receiving services or supports paid for by the regional center, or living in a 24-hour out-of-home facility, including a developmental center, the assessed amount shall be adjusted as

follows:

(1) A parent that meets the criteria specified in subdivision (b) with two children shall be assessed at 75 percent of the respite, daycare, and camping services in each child's individual program plan or individualized family service plan for each child living at home.

(2) A parent that meets the criteria specified in subdivision (b) with three children shall be assessed at 50 percent of the respite, daycare, and camping services included in each child's individual program plan or individualized family service plan for each child living at home.

(3) A parent that meets the criteria specified in subdivision (b) with four children shall be assessed 25 percent of the respite, daycare, and camping services included in each child's individual program plan or individualized family service plan for each child living at home.

(4) A parent that meets the criteria specified in subdivision (b) with more than four children shall be exempt from participation in the Family Cost Participation Program.

(e) For each child, the amount of cost participation shall be less than the amount of the parental fee that the parent would pay if the child lived in a 24-hour, out-of-home facility.

(f) Commencing January 1, 2005, each regional center shall be responsible for administering the Family Cost Participation Program.

(g) Family cost participation assessments or reassessments shall be conducted as follows:

(1) (A) A regional center shall assess the cost participation for all parents of current consumers who meet the criteria specified in this section. A regional center shall use the most recent individual program plan or individualized family service plan for this purpose.

(B) A regional center shall assess the cost participation for parents of newly identified consumers at the time of the initial individual program plan or the individualized family service plan.

(C) Reassessments for cost participation shall be conducted as part of the individual program plan or individual family service plan review pursuant to subdivision (b) of Section 4646.5 of this code or subdivision (f) of Section 95020 of the Government Code.

(D) The parents are responsible for notifying the regional center when a change in family income occurs that would result in a change in the assessed amount of cost participation.

(2) Parents shall self-certify their gross annual income to the regional center by providing copies of W-2 Wage Earners Statements, payroll stubs, a copy of the prior year's state income tax return, or other documents and proof of other income.

(3) A regional center shall notify parents of the parents' assessed cost participation within 10 working days of receipt of the parents' complete income documentation.

(4) Parents who have not provided copies of income documentation pursuant to paragraph (2) shall be assessed the maximum cost participation based on the highest income level adjusted for family size until the appropriate income documentation is provided. Parents who subsequently provide income documentation that results in a reduction in their cost participation shall be reimbursed for the actual cost difference incurred for services identified in the individual program plan or individualized family service plan for respite, daycare, and camping services, for 90 calendar days preceding the reassessment. The actual cost difference is the difference between the maximum cost participation originally assessed and the reassessed amount using the parents' complete income documentation, that is substantiated with receipts showing that the services have been purchased by the parents.

(5) The executive director of the regional center may grant a cost participation adjustment for parents who incur an unavoidable and uninsured catastrophic loss with direct economic impact on the family or who substantiate, with receipts, significant unreimbursed medical costs associated with care for a child who is a regional center consumer. A redetermination of the cost participation adjustment shall be made at least annually.

(h) A provider of respite, daycare, or camping services shall not charge a rate for the parents' share of cost that is higher than the rate paid by the regional center for its share of cost.

(i) The department shall develop, and regional centers shall use, all forms and documents necessary to administer the program established pursuant to this section. The forms and documents shall be posted on the department's internet website. A regional center shall provide appropriate materials to parents at the initial individual program plan or individualized family service plan

meeting and subsequent individual program plan or individualized family service plan review meetings. These materials shall include a description of the Family Cost Participation Program.

(j) The department shall include an audit of the Family Cost Participation Program during its audit of a regional center.

(k) (1) Parents of children 3 to 17 years of age, inclusive, may appeal an error in the amount of the parents' cost participation to the executive director of the regional center within 30 days of notification of the amount of the assessed cost participation. The parents may appeal to the Director of Developmental Services, or the director's designee, any decision by the executive director made pursuant to this subdivision within 15 days of receipt of the written decision of the executive director.

(2) Parents of children 3 to 17 years of age, inclusive, who dispute the decision of the executive director pursuant to paragraph (5) of subdivision (g) shall have a right to a fair hearing as described in, and the regional center shall provide notice pursuant to, Chapter 7 (commencing with Section 4700). This paragraph shall become inoperative on July 1, 2006.

(3) On and after July 1, 2006, a parent described in paragraph (2) shall have the right to appeal the decision of the executive director to the Director of Developmental Services, or the director's designee, within 15 days of receipt of the written decision of the executive director.

(l) For parents of children zero to two years of age, inclusive, the complaint, mediation, and due process procedures set forth in Sections 52170 to 52174, inclusive, of Title 17 of the California Code of Regulations shall be used to resolve disputes regarding this section.

(m) The department may adopt emergency regulations to implement this section. The adoption, amendment, repeal, or readoption of a regulation authorized by this section is deemed to be necessary for the immediate preservation of the public peace, health and safety, or general welfare, for purposes of Sections 11346.1 and 11349.6 of the Government Code, and the department is exempted from the requirement that it describe specific facts showing the need for immediate action. A certificate of compliance for these implementing regulations shall be filed within 24 months following the adoption of the first emergency regulations filed pursuant to this subdivision.

(n) By April 1, 2005, and annually thereafter, the department shall report to the appropriate fiscal and policy committees of the Legislature on the status of the implementation of the Family Cost Participation Program established under this section. On and after April 1, 2006, the report shall contain all of the following:

- (1) The annual total purchase of services savings attributable to the program per regional center.
- (2) The annual costs to the department and each regional center to administer the program.
- (3) The number of families assessed a cost participation per regional center.
- (4) The number of cost participation adjustments granted pursuant to paragraph (5) of subdivision (g) per regional center.
- (5) The number of appeals filed pursuant to subdivision (k) and the number of those appeals granted, modified, or denied.

(o) Commencing July 1, 2022, to June 30, 2023, inclusive, regional centers shall suspend existing and new assessments and reassessments of the cost participation. The suspensions shall no longer occur on or after July 1, 2023.

SEC. 77. Section 4785 of the Welfare and Institutions Code is amended to read:

4785. (a) (1) A regional center shall assess an annual family program fee, as described in subdivision (b), from parents whose adjusted gross family income is at or above 400 percent of the federal poverty level based upon family size and who have a child to whom all of the following apply:

- (A) The child has a developmental disability or is eligible for services under the California Early Intervention Services Act (Title 14 (commencing with Section 95000) of the Government Code).
- (B) The child is less than 18 years of age.
- (C) The child lives with the child's parent.
- (D) The child or family receives services beyond eligibility determination, needs assessment, and service coordination.
- (E) The child does not receive services through the Medi-Cal program.

(2) An annual family program fee shall not be assessed or collected pursuant to this section if the child receives only respite, daycare, or camping services from the regional center, and a cost for participation is assessed to the parents under the Family Cost Participation Program.

(3) The annual family program fee shall be initially assessed by a regional center at the time of the development, scheduled review, or modification of the individual program plan (IPP) pursuant to Sections 4646 and 4646.5, or the individualized family services plan (IFSP) pursuant to Section 95020 of the Government Code, but no later than June 30, 2012, and annually thereafter.

(4) Application of this section to children zero to two years of age, inclusive, shall be contingent upon necessary approval by the United States Department of Education.

(b) (1) The annual family program fee for parents described in paragraph (1) of subdivision (a) shall be two hundred dollars (\$200) per family, regardless of the number of children in the family with developmental disabilities or who are eligible for services under the California Early Intervention Services Act.

(2) Notwithstanding paragraph (1), parents described in paragraph (1) of subdivision (a) who demonstrate to the regional center that their adjusted gross family income is less than 800 percent of the federal poverty level shall be required to pay an annual family program fee of one hundred fifty dollars (\$150) per family, regardless of the number of children in the family with developmental disabilities or who are eligible for services under the California Early Intervention Services Act.

(c) At the time of intake or at the time of development, scheduled review, or modification of a consumer's IPP or IFSP, but no later than June 30, 2012, the regional center shall provide to parents described in paragraph (1) of subdivision (a) a form and an envelope for the mailing of the annual family program fee to the department. The form, which shall include the name of the children in the family currently being served by a regional center and their unique client identifiers, shall be sent, with the family's annual program fee, to the department.

(d) The department shall notify each regional center at least quarterly of the annual family program fees collected.

(e) The regional center shall, within 30 days after notification from the department pursuant to subdivision (d), provide a written notification to the parents from whom the department has not received the annual family program fees. Regional centers shall notify the department if a family receiving notification pursuant to this section has failed to pay its annual family program fees based on the subsequent notice pursuant to subdivision (d). For these families, the department shall pursue collection pursuant to the Accounts Receivable Management Act (Chapter 4.3 (commencing with Section 16580) of Part 2 of Division 4 of Title 2 of the Government Code).

(f) A regional center may grant an exemption to the assessment of an annual family program fee if the parents demonstrate any of the following:

(1) That the exemption is necessary to maintain the child in the family home.

(2) The existence of an extraordinary event that impacts the parents' ability to pay the fee or the parents' ability to meet the care and supervision needs of the child.

(3) The existence of a catastrophic loss that temporarily limits the ability of the parents to pay and creates a direct economic impact on the family. For purposes of this paragraph, catastrophic loss may include, but is not limited to, natural disasters, accidents involving, or major injuries to, an immediate family member, and extraordinary medical expenses.

(g) Services shall not be delayed or denied for a consumer or child based upon the lack of payment of the annual family program fee.

(h) For purposes of this section, "parents" means the parents, whether natural, adoptive, or both, of a child with developmental disabilities under 18 years of age.

(i) Parents described in paragraph (1) of subdivision (a) shall be jointly and severally responsible for the annual family program fee, unless a court order directs otherwise.

(j) (1) "Total adjusted gross family income" means income acquired, earned, or received by parents as payment for labor or services, support, gift, or inheritance, or parents' return on investments. It also includes the community property interest of a parent in the gross adjusted income of a stepparent.

(2) The total adjusted gross family income shall be determined by adding the gross income of both parents, regardless of whether they are divorced or legally separated, unless a court order directs otherwise, or unless the custodial parent certifies in writing that income information from the noncustodial parent cannot be obtained from the noncustodial parent and in this circumstance only the income of the custodial parent shall be used to determine the annual family program fee.

(k) Commencing July 1, 2022, to June 30, 2023, inclusive, regional centers shall suspend existing and new assessments, reassessments, and collections of the annual family program fee. The suspensions shall no longer occur on or after July 1, 2023.

SEC. 78. Section 4785.1 is added to the Welfare and Institutions Code, to read:

4785.1. On or before January 10, 2023, the State Department of Developmental Services shall submit to the Legislature, as part of the annual budget process, a plan to revise the Family Cost Participation Program, as established pursuant to Section 4783, and the annual family program fee, as established pursuant to Section 4785. The plan shall be developed with input from stakeholders. The plan shall consider changes that include, but are not limited to, those that promote administrative efficiency and program compliance.

SEC. 79. Section 4851 of the Welfare and Institutions Code is amended to read:

4851. The definitions contained in this chapter shall govern the construction of this chapter, with respect to habilitation services provided through the regional center, and unless the context requires otherwise, the following terms shall have the following meanings:

(a) "Habilitation services" means community-based services purchased or provided for adults with developmental disabilities, including services provided under the Work Activity Program and the Supported Employment Program, to prepare and maintain them at their highest level of vocational functioning, or to prepare them for referral to vocational rehabilitation services.

(b) "Individual program plan" means the overall plan developed by a regional center pursuant to Section 4646.

(c) "Individual habilitation service plan" means the service plan developed by the habilitation service vendor to meet employment goals in the individual program plan.

(d) "Department" means the State Department of Developmental Services.

(e) "Work activity program" includes, but is not limited to, sheltered workshops or work activity centers, or community-based work activity programs certified pursuant to subdivision (f) or accredited by CARF, the Rehabilitation Accreditation Commission.

(f) "Certification" means certification procedures developed by the Department of Rehabilitation.

(g) "Work activity program day" means the period of time during which a Work Activity Program provides services to consumers.

(h) "Supported employment program" means a program that meets the requirements of subdivisions (l) to (q), inclusive.

(i) "Consumer" means any adult who receives services purchased under this chapter.

(j) "Accreditation" means a determination of compliance with the set of standards appropriate to the delivery of services by a work activity program or supported employment program, developed by CARF, the Rehabilitation Accreditation Commission, and applied by the commission or the department.

(k) "CARF" means CARF the Rehabilitation Accreditation Commission.

(l) "Supported employment" means paid work that is integrated in the community for individuals with developmental disabilities.

(m) "Integrated work" means the engagement of an employee with a disability in work in a setting typically found in the community in which individuals interact with individuals without disabilities other than those who are providing services to those individuals, to the same extent that individuals without disabilities in comparable positions interact with other persons.

(n) "Supported employment placement" means the employment of an individual with a developmental disability by an employer in the community, directly or through contract with a supported employment program. This includes provision of ongoing support services necessary for the individual to retain employment.

(o) "Allowable supported employment services" means the services approved in the individual program plan and specified in the individual habilitation service plan for the purpose of achieving supported employment as an outcome, and may include any of the following:

(1) Job development, to the extent authorized by the regional center.

(2) Program staff time for conducting job analysis of supported employment opportunities for a specific consumer.

(3) Program staff time for the direct supervision or training of a consumer or consumers while they engage in integrated work unless other arrangements for consumer supervision, including, but not limited to, employer supervision reimbursed by the supported employment program, are approved by the regional center.

(4) Community-based training in adaptive functional and social skills necessary to ensure job adjustment and retention.

(5) Counseling with a consumer's significant other to ensure support of a consumer in job adjustment.

(6) Advocacy or intervention on behalf of a consumer to resolve problems affecting the consumer's work adjustment or retention.

(7) Ongoing support services needed to ensure the consumer's retention of the job.

(p) "Group services" means job coaching in a group supported employment placement at a job coach-to-consumer ratio of not less than one-to-three nor more than one-to-eight where services to a minimum of three consumers are funded by the regional center or the Department of Rehabilitation. For consumers receiving group services, ongoing support services shall be limited to job coaching and shall be provided at the worksite.

(q) "Individualized services" means job coaching and other supported employment services for regional center-funded consumers in a supported employment placement at a job coach-to-consumer ratio of one-to-one, and that decrease over time until stabilization is achieved. Individualized services may be provided on or off the jobsite.

SEC. 80. Section 4863 of the Welfare and Institutions Code is amended to read:

4863. (a) In accordance with regulations adopted by the department, and if agreed upon by the work activity program and the regional center, hourly billing shall be permitted, provided that it does not increase the regional center's costs when used in lieu of full-day billing. A work activity program shall be required to submit a request for the hourly billing option to the regional center not less than 60 days prior to the program's proposed implementation of this billing option.

(b) If a work activity program and the regional center elect to utilize hourly billing, the hourly billing process shall be required to be used for a minimum of one year.

(c) When the hourly billing process is being used, the definitions contained in subdivisions (h) and (i) of Section 4851 shall not apply.

SEC. 81. Section 4870.2 is added to the Welfare and Institutions Code, to read:

4870.2. (a) In addition to the program described in Section 4870, subject to an appropriation in the Budget Act for this purpose, the department shall establish, by December 31, 2022, a three-year pilot program that focuses on competitive integrated employment, postsecondary education, and career readiness for individuals with developmental disabilities exiting work activity programs or secondary education in order to explore inclusive options, including, but not limited to, paid internships, competitive integrated employment, and college-to-career programs.

(b) The pilot program established pursuant to subdivision (a) shall satisfy all of the following requirements:

(1) Be developed in consultation with stakeholders, including, but not limited to, individuals with disabilities, including those who will be served by the program, family members, provider association representatives, consumer advocates, regional centers, the State Council on Developmental Disabilities, the State Department of Education, and the Department of Rehabilitation. The consultation described in this paragraph shall commence no later than August 31, 2022.

(2) Provide person-centered and time-limited services, aligning with each individual's needs and a person-centered approach, focused on preparing individuals for career pathways.

(3) Consider evidence-based or promising practices for reducing or eliminating barriers to competitive integrated employment for people with intellectual and developmental disabilities in the development of innovated service options.

(4) Require service providers participating in the pilot program to report on defined outcome measures, as determined by the department.

(c) 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, without taking any regulatory action.

SEC. 82. Section 7505 of the Welfare and Institutions Code is amended to read:

7505. (a) Notwithstanding any other law, the State Department of Developmental Services shall not admit anyone to a developmental center unless the person has been determined eligible for services under Division 4.5 (commencing with Section 4500) and the person is any of the following:

(1) An adult committed by a court to Porterville Developmental Center, secure treatment program, pursuant to Section 1370.1 of the Penal Code.

(2) Committed by a court to an acute crisis home operated by the department pursuant to Article 2 (commencing with Section 6500) of Chapter 2 of Part 2 of Division 6 due to an acute crisis, pursuant to Section 4418.7.

(3) An adult committed by a court to Porterville Developmental Center, secure treatment program, pursuant to Article 2 (commencing with Section 6500) of Chapter 2 of Part 2 of Division 6 as a result of involvement with the criminal justice system, and the court has determined the person is mentally incompetent to stand trial.

(4) A person committed by a court on or before June 30, 2023, to Canyon Springs Community Facility pursuant to Article 2 (commencing with Section 6500) of Chapter 2 of Part 2 of Division 6 who otherwise meets the criteria for admission described in Section 4418.7 due to an acute crisis, as defined in paragraph (1) of subdivision (d) of Section 4418.7.

(5) (A) A person committed by a court on or before June 30, 2023, to the Canyon Springs Community Facility pursuant to Article 2 (commencing with Section 6500) of Chapter 2 of Part 2 of Division 6, who is currently admitted to either an acute psychiatric hospital or an acute crisis facility pursuant to Article 2 (commencing with Section 6500) of Chapter 2 of Part 2 of Division 6 due to an acute crisis, as defined in paragraph (1) of subdivision (d) of Section 4418.7, but who requires continued treatment to achieve stabilization and successful community transition.

(B) Prior to admission pursuant to this paragraph, the regional center shall prepare an assessment for inclusion in the consumer's file detailing all considered community-based services and supports, including, but not limited to, rate adjustments as provided by law, supplemental services as set forth in subparagraph (F) of paragraph (9) of subdivision (a) of Section 4648, emergency and crisis intervention services as set forth in paragraph (10) of subdivision (a) of Section 4648, community crisis home services pursuant to Article 8 (commencing with Section 4698) of Chapter 6 of Division 4.5, and an explanation of why those options could not meet the consumer's needs. Prior to admission, the Director of Developmental Services or the director's designee shall certify that there are no community-based options that can meet the consumer's needs.

(C) When a person is admitted pursuant to this paragraph, the regional center shall notify the clients' rights advocate, as described in Section 4433, of the admission. A comprehensive assessment shall be completed by the regional center in coordination with Canyon Springs Community Facility staff. The comprehensive assessment shall include the identification of the services and supports needed for stabilization and the timeline for identifying or developing the services and supports needed to transition the consumer back to a community setting. Immediately following the comprehensive assessment, and not later than 30 days following admission, the regional center and staff at the Canyon Springs Community Facility shall jointly convene an individual program plan meeting to determine the services and supports needed for crisis stabilization and to develop a plan to transition the consumer into community living pursuant to Section 4418.3. The clients' rights advocate for the regional center shall be notified of the individual program plan meeting and may participate in the individual program plan meeting unless the consumer objects on their own behalf.

(D) The population of consumers admitted pursuant to this paragraph shall not exceed five. An admission pursuant to this paragraph shall not extend beyond June 30, 2023.

(E) For purposes of this paragraph, "acute psychiatric hospital" means a facility as defined in subdivision (b) of Section 1250 of the Health and Safety Code, including an institution for mental disease.

(6) (A) A person exercising the right of return described in Section 4508 on or before June 30, 2021.

(B) Prior to admission pursuant to this paragraph, the regional center shall prepare an assessment for inclusion in the consumer's file detailing all considered community-based services and supports, including, but not limited to, rate adjustments as provided by law, supplemental services as set forth in subparagraph (F) of paragraph (9) of subdivision (a) of Section 4648, emergency and crisis intervention services as set forth in paragraph (10) of subdivision (a) of Section 4648, community crisis home services pursuant to Article 8 (commencing with Section 4698) of Chapter 6 of Division 4.5, and an explanation of why those options could not meet the consumer's needs. Prior to admission, the Director of Developmental Services or the director's designee shall certify that there are no community-based options that can meet the consumer's needs.

(C) When a person is admitted pursuant to this paragraph, the regional center shall notify the clients' rights advocate, as described in Section 4433, of the admission. A comprehensive assessment shall be completed by the regional center in coordination with developmental center staff. The comprehensive assessment shall include the identification of the services and supports needed for stabilization and the timeline for identifying or developing the services and supports needed to transition the consumer back to a community setting. Immediately following the comprehensive assessment, and not later than 30 days following admission, the regional center and staff at the developmental center shall jointly convene an

individual program plan meeting to determine the services and supports needed for crisis stabilization and to develop a plan to transition the consumer into community living pursuant to Section 4418.3. The clients' rights advocate for the regional center shall be notified of the individual program plan meeting and may participate in the individual program plan meeting unless the consumer objects on their own behalf.

(D) Notwithstanding Section 4508, the population of consumers admitted pursuant to this paragraph shall not exceed five. An admission pursuant to this paragraph shall not extend beyond June 30, 2023.

(7) Committed by a court to Porterville Developmental Center, pursuant to Article 2 (commencing with Section 6500) of Chapter 2 of Part 2 of Division 6 due to an acute crisis, as described in Section 4418.7. The population of consumers admitted pursuant to this paragraph shall not exceed 10. An admission pursuant to this paragraph shall not extend beyond June 30, 2023, or upon the opening of the state-operated community acute crisis homes approved for development in the Budget Act of 2019.

(b) A person admitted to the Canyon Springs Community Facility pursuant to paragraphs (4) and (5) of subdivision (a) shall be subject to enhanced monitoring that includes the following:

(1) Department clinical staff shall make monthly monitoring visits to observe the implementation of treatment plans.

(2) The department shall conduct monthly calls with regional centers to update transition planning and identify available placement options.

(3) The facility shall complete an initial transition plan within 60 days from admission.

(4) The facility shall conduct a transition review meeting 45 days prior to transitioning an individual from the facility.

(c) The State Department of Developmental Services shall not admit a person to a developmental center after July 1, 2012, as a result of a criminal conviction or when the person is competent to stand trial for the criminal offense and the admission is ordered in lieu of trial.

(d) Commencing with the first quarterly update to legislative staff after July 1, 2021, in the information provided pursuant to Section 4474.17, the State Department of Developmental Services shall provide a written update regarding efforts to reduce the reliance on Canyon Springs Community Facility for admissions due to an acute crisis, as defined in paragraph (1) of subdivision (d) of Section 4418.7 and the development of additional community resources, including person-centered efforts. The update shall include data and descriptors of people admitted to Canyon Springs in the previous year, including age and duration of stay to date, the status of transition planning meetings for those individuals, and their discharge status. For persons admitted to Canyon Springs Community-Facility beginning July 1, 2022, the update shall include all alternative placement options examined for each person prior to admission.

SEC. 83. Section 11464 of the Welfare and Institutions Code is amended to read:

11464. (a) The Legislature finds and declares all of the following:

(1) Children who are consumers of regional center services and also receiving Aid to Families with Dependent Children-Foster Care (AFDC-FC), Approved Relative Caregiver Funding Program (ARC) payments, Kinship Guardianship Assistance Payment (Kin-GAP) benefits, or Adoption Assistance Program (AAP) benefits have special needs that can require care and supervision beyond that typically provided to children in foster care. Clarifying the roles of the child welfare and developmental disabilities services systems will ensure that these children receive the services and supports they need in a timely manner and encourage the successful adoption of these children, where appropriate.

(2) To address the extraordinary care and supervision needs of children who are consumers of regional center services and also receiving AFDC-FC, ARC, Kin-GAP, or AAP benefits, it is necessary to provide a rate for care and supervision of these children that is higher than the average rate they would otherwise receive through the foster care system and higher than the rate other children with medical and other significant special needs receive.

(3) Despite the enhanced rate provided in this section, some children who are consumers of regional center services and also receiving AFDC-FC, ARC, Kin-GAP, or AAP benefits may have care and supervision needs that are so extraordinary that they cannot be addressed within that rate. In these limited circumstances, a process should be established whereby a supplement may be provided in addition to the enhanced rate.

(4) Children who receive rates pursuant to this section shall be afforded the same due process rights as all children who apply for AFDC-FC, ARC, Kin-GAP, and AAP benefits pursuant to Section 10950.

(b) Rates for children who are both regional center consumers and recipients of AFDC-FC, ARC, or Kin-GAP benefits under this chapter shall be determined as provided in Section 4684 and this section.

(c) (1) The rate to be paid for 24-hour out-of-home care and supervision provided to children who are both consumers of regional center services pursuant to subdivision (d) of Section 4512 and recipients of AFDC-FC, ARC, or Kin-GAP benefits under this chapter shall be two thousand six dollars (\$2,006) per child per month.

(2) (A) The county, at its sole discretion, may authorize a supplement of up to one thousand dollars (\$1,000) to the rate for children three years of age and older, if it determines the child has the need for extraordinary care and supervision that cannot be met within the rate established pursuant to paragraph (1). The State Department of Social Services and the State Department of Developmental Services, in consultation with stakeholders representing county child welfare agencies, regional centers, and children who are both consumers of regional center services and recipients of AFDC-FC, ARC, Kin-GAP, or AAP benefits, shall develop objective criteria to be used by counties in determining eligibility for and the level of the supplements provided pursuant to this paragraph. The State Department of Social Services shall issue an all-county letter to implement these criteria within 120 days of the effective date of this act. The criteria shall take into account the extent to which the child has any of the following:

(i) Severe impairment in physical coordination and mobility.

(ii) Severe deficits in self-help skills.

(iii) Severely disruptive or self-injurious behavior.

(iv) A severe medical condition.

(B) The caregiver may request the supplement described in subparagraph (A) directly or upon referral by a regional center. Referral by a regional center shall not create the presumption of eligibility for the supplement.

(C) When assessing a request for the supplement, the county shall seek information from the consumer's regional center to assist in the assessment. The county shall issue a determination of eligibility for the supplement within 90 days of receipt of the request. The county shall report to the State Department of Social Services the number and level of rate supplements issued pursuant to this paragraph.

(d) (1) The rate to be paid for 24-hour out-of-home care and supervision provided for children who are receiving services under the California Early Start Intervention Services Act, are not yet determined by their regional center to have a developmental disability, as defined in subdivisions (a) and (l) of Section 4512, and are receiving AFDC-FC, ARC, or Kin-GAP benefits under this chapter, shall be eight hundred ninety-eight dollars (\$898) per child per month. If a regional center subsequently determines that the child is an individual with a developmental disability as that term is defined by subdivisions (a) and (l) of Section 4512, the rate to be paid from the date of that determination shall be consistent with subdivision (c).

(2) The rates to be paid for 24-hour out-of-home nonmedical care and supervision for children who are recipients of AFDC-FC, ARC, or Kin-GAP and consumers of regional center services from a community care facility licensed pursuant to Chapter 3 (commencing with Section 1500) of Division 2 of the Health and Safety Code and vendored by a regional center pursuant to Section 56004 of Title 17 of the California Code of Regulations, shall be the facility rate established by the State Department of Developmental Services.

(e) Rates paid pursuant to this section are subject to all of the following requirements:

(1) The rates paid to the foster care provider under subdivision (c) and paragraph (1) of subdivision (d) are only for the care and supervision of the child, as defined in subdivision (b) of Section 11460 and shall not be applicable to facilities described in paragraph (2) of subdivision (d).

(2) Regional centers shall separately purchase or secure the services that are contained in the child's Individualized Family Service Plan (IFSP) or Individual Program Plan (IPP), pursuant to Section 4684.

(3) Beginning with the 2011–12 fiscal year, the rates in paragraph (1) of subdivision (c) and paragraph (1) of subdivision (d) shall be adjusted annually by the percentage change in the California Necessities Index, as set forth in paragraph (2) of subdivision (g) of Section 11461. No county shall be reimbursed for any increase in this rate that exceeds the adjustments made in accordance with this methodology.

(f) (1) The AFDC-FC rates paid on behalf of a regional center consumer who is a recipient of AFDC-FC prior to July 1, 2007, shall remain in effect unless a change in the placement warrants redetermination of the rate or if the child is no longer AFDC-FC eligible. However, AFDC-FC rates paid on behalf of these children that are lower than the rates specified in paragraph (1) of subdivision (c) or paragraph (1) of subdivision (d), respectively, shall be increased as appropriate to the amount set forth in paragraph (1) of subdivision (c) or paragraph (1) of subdivision (d), effective July 1, 2007, and shall remain in effect unless a change in the placement or a change in AFDC-FC eligibility of the child warrants redetermination of the rate.

(2) For a child who is receiving AFDC-FC benefits or for whom a foster care eligibility determination is pending, and for whom an eligibility determination for regional center services pursuant to subdivision (a) of Section 4512 is pending or approved, and for whom, prior to July 1, 2007, a State Department of Developmental Services facility rate determination request has been made and is pending, the rate shall be the State Department of Developmental Services facility rate determined by the regional center through an individualized assessment, or the rate established in paragraph (1) of subdivision (c), whichever is greater. The rate shall remain in effect until the child is no longer eligible to receive AFDC-FC, or, if still AFDC-FC eligible, is found ineligible for regional center services as an individual described in subdivision (a) of Section 4512. Other than the circumstances described in this section, regional centers shall not establish facility rates for AFDC-FC purposes.

(g) (1) The department shall adopt emergency regulations in accordance with Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, and for the purposes of that chapter, including Section 11349.6 of the Government Code, on or before July 1, 2009.

(2) The adoption of regulations pursuant to paragraph (1) shall be deemed an emergency and necessary for the immediate preservation of the public peace, health, safety, and general welfare. The regulations authorized by this subdivision shall remain in effect for no more than 180 days, by which time final regulations shall be adopted.

(h) (1) The State Department of Social Services and the State Department of Developmental Services shall provide to the Joint Legislative Budget Committee, on an annual basis, the data set forth in paragraph (2) to facilitate legislative review of the outcomes of the changes made by the addition of this section. The first report shall be submitted on October 1, 2007.

(2) The following data shall be provided pursuant to this subdivision:

(A) The number of, and services provided to, children who are consumers of regional center services and who are receiving AAP, ARC, Kin-GAP, or AFDC-FC, broken out by children receiving the amount pursuant to paragraph (1) of subdivision (c), the amount pursuant to paragraph (1) of subdivision (d), and the level of supplement pursuant to subparagraph (A) of paragraph (2) of subdivision (c).

(B) A comparison of services provided to these children and similar children who are regional center consumers who do not receive AFDC-FC, ARC, Kin-GAP, or AAP benefits, broken out by children receiving the amount pursuant to paragraph (1) of subdivision (c), the amount pursuant to paragraph (1) of subdivision (d), and the level of supplement pursuant to subparagraph (A) of paragraph (2) of subdivision (c).

(C) The number and nature of appeals filed regarding services provided or secured by regional centers for these children, consistent with Section 4714, broken out by children receiving the amount pursuant to paragraph (1) of subdivision (c), the amount pursuant to paragraph (1) of subdivision (d), and the level of supplement pursuant to subparagraph (A) of paragraph (2) of subdivision (c).

(D) The number of these children who are adopted before and after the act adding this section, broken out by children receiving the amount pursuant to paragraph (1) of subdivision (c), the amount pursuant to paragraph (1) of subdivision (d), and the level of supplement pursuant to subparagraph (A) of paragraph (2) of subdivision (c).

(E) The number and levels of supplements requested pursuant to subparagraph (B) of paragraph (2) of subdivision (c).

(F) The number of appeals requested of the decision by counties to deny the request for the supplement pursuant to subparagraph (A) of paragraph (2) of subdivision (c).

(G) The total number and levels of supplements authorized pursuant to subparagraph (A) of paragraph (2) of subdivision (c) and the number of these supplements authorized upon appeal.

(i) The State Department of Social Services and the State Department of Developmental Services shall provide public transparency regarding implementation of this section through the annual posting of the data in paragraph (2) of subdivision (h) on their respective internet websites. Each department shall also maintain a link to the other department's data on their respective internet websites.

(j) (1) Commencing January 1, 2012, and prior to July 1, 2017, the rate described in subdivision (c) shall be paid for an eligible nonminor dependent who is under 21 years of age, is receiving AFDC-FC or Kin-GAP benefits pursuant to Section 11403, and is a consumer of regional center services.

(2) Commencing July 1, 2017, the rate described in subdivision (c) shall be paid for an eligible nonminor dependent who is under 21 years of age, is receiving AFDC-FC, ARC, or Kin-GAP benefits pursuant to Section 11403, and is a consumer of regional center services.

SEC. 84. 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 State Department of Developmental Services may

implement, interpret, or make specific the changes made by this act to Sections 4519.2, 4646, 4646.4, 4705, 4706, 4707, 4710, 4710.5, 4710.6, 4710.7, 4710.8, 4710.9, 4711, 4711.5, 4711.7, 4712, 4712.2, 4712.5, 4712.7, 4713, 4714, 4715, 4725, 4726, 4728, 4729, and 4731 of, and Article 1 (commencing with Section 4700) of Chapter 7 of Division 4.5 of, the Welfare and Institutions Code, and may implement, interpret, or make specific Sections 4705.5, 4708, 4713.5, and 4717 of the Welfare and Institutions Code, by means of written directives or similar instructions, until regulations are adopted.

SEC. 85. No reimbursement is required by this act pursuant to Section 6 of Article XIII B of the California Constitution for certain costs that may be incurred by a local agency or school district because, in that regard, this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIII B of the California Constitution.

However, if the Commission on State Mandates determines that this act contains other costs mandated by the state, reimbursement to local agencies and school districts for those costs shall be made pursuant to Part 7 (commencing with Section 17500) of Division 4 of Title 2 of the Government Code.

SEC. 86. Pursuant to paragraph (1) of subdivision (c) of Section 14670.31 of the Government Code, the sum of three million five hundred thousand dollars (\$3,500,000) is hereby appropriated from the General Fund to the State Department of Developmental Services for allocation to the City of Costa Mesa to facilitate the disposition of the Fairview Developmental Center property, by amending the general plan of the city and any appropriate planning documents and zoning ordinances, completing any environmental review, and addressing the economic feasibility of future development for the purposes intended by the Legislature.

SEC. 87. This act is a bill providing for appropriations related to the Budget Bill within the meaning of subdivision (e) of Section 12 of Article IV of the California Constitution, has been identified as related to the budget in the Budget Bill, and shall take effect immediately.