

EXECUTIVE DIRECTOR REPORT

May 6, 2017

I. A. FY 2017-2018 BUDGET UPDATE

- **Attachment #1:** Sacramento Bee Article, January 10, 2017: With Trump Unnamed, Brown Offers Cautious Budget
- **Attachment #2:** FY 2017-2018 Governor's Budget Highlights for Department of Developmental Services
- **Attachment #3:** ARCA Analysis of FY 2017-2018 Governor's Budget Proposal for Regional Centers
- **Attachment #4:** CDCAN Report 1/11/2017: Governor Brown Releases Proposed 2017-2018 State Budget
- **Attachment #5:** CDCAN Report 1/24/2017: List of Assembly And State Senate Committee Chairs and Members for 2017-2018 Session
- **Attachment #6:** ARCA Budget Position Letter to Assembly Budget Subcommittee #1 and Senate Budget Subcommittee #3 on Health and Human Services
- **Attachment #7:** Tri-Counties Regional Center State Legislators For the 2016-2017 Session
- **Attachment #8:** Assembly District 37 – Monique Limon One Page Profile
- **Attachment #9:** Assembly District 35 – Jordan Cunningham One Page Profile
- **Attachment #10:** Annual Budget Process Flow Chart

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Governor Brown unveiled his annual State Budget Proposal on January 10, 2017 reflecting existing state and federal law while pointing out the significant uncertainty that looms ahead in the level of future federal funding provided to the state that may require adjustments to his budget proposal when he releases the May revision to his budget proposal later in the year. Specifically, two of the major risks include reductions to the level of Medicaid (Medi-Cal in California) funding to the State and a partial or complete repeal of the Affordable Care Act without a companion replacement program that could require the state to use General Fund resources if the state chooses to continue to provide Californians with the same or similar health care benefits currently available under the Affordable Care Act. Both of these changes could have significant impact on the level of funding available for developmental services and other types of related services currently provided by the state (**Attachment #1**).

The Governor's FY 2017-2018 State Budget proposal for the regional center system anticipates providing services to approximately 317,000 individuals - an increase of 13,836 individuals (4.56%) over the 303,447 individuals projected for January 31, 2016. The Governor's proposal provides an increase of \$335.6 million (6.3% increase) to the regional center Purchase of Services (POS) budget and an increase of \$23.3 million (3.2% increase) to the regional center Operations (OPS) budget. The majority of this additional proposed funding is slated for caseload and utilization growth estimated at \$291 million in POS and \$26.8 million in OPS. The Governor's budget proposal also includes an increase of \$47.9 million General Fund to reflect the impact on service providers due to the increase in the state minimum wage (**Attachments #2-#4**).

Since the release of the Governor's Budget Proposal, the Legislature has held informational subcommittee hearings to review the Governor's budget proposal but no actions have been taken (**Attachments #5-#6**). Any significant actions

taken will most likely be determined by future decisions made by the new presidential administration and leaders in Congress that affects the level of federal funding provided to the state and after the May Revision to the Governor's Budget Proposal is released in mid-May.

As part of our advocacy initiative, a TCRC delegation comprised of TCRC Executive Director, TCRC management, TCADD Board members, Service Provider representatives, parents of persons with developmental disabilities and persons served by TCRC visited in April two of our newest legislators in the Tri-Counties area. The delegations held successful and productive meetings with Assemblymember Monique Limon in Santa Barbara representing the 37th District and Assemblymember Jordan Cunningham in San Luis Obispo representing the 35th District to help educate them about the developmental disabilities services system and advocate for issues important to our system (**Attachments #7-#9**). TCRC will continue to work with our local stakeholders to advocate on behalf of our system by making additional legislative visits, attending budget hearings in Sacramento and reaching out to our Congressional representatives as needed. TCRC has developed a "Budget Watch" page on the TCRC website (www.tri-counties.org) to monitor the budget process (**Attachment #10**). Current information and resources related to the budget is posted on this page and will be kept updated.

B. DRAFT SURVEY FOR SERVICE PROVIDER RATE INCREASES AS A RESULT OF ENACTMENT OF ASSEMBLY BILL (AB) X2-1 EFFECTIVE JULY 1, 2016

- **Attachment #11:** DDS AB X2-1 Draft Survey Notification Letter to Regional Centers
- **Attachment #12:** CDCAN Report 5/2/2017: DDS Releases Important Draft Survey for Regional Center Funded Providers Who Received Last Year Rate Increases Targeted for Their Workers. . .

The Department of Developmental Services (DDS) released on May 1, 2017 a draft survey for regional center funded service providers who received rate increases effective July 1, 2016 as a result of the enactment of AB X2-1. The rate increases were targeted for the purpose of increasing wages and benefits for employees who spend a minimum of 75% of their time providing direct services and supports to persons with developmental disabilities. Included in ABX 2-1 is a requirement that DDS, with regional center participation, must survey all service providers who received this rate increase. The survey must be returned by October 1, 2017, or service providers will forfeit their rate increase. DDS is seeking public comment on the draft survey for any possible changes and clarifications before a final version is released to service providers by June 1, 2017. DDS has also scheduled two webinars/conference calls to review the draft survey, answer questions and take suggestions and comments. The calls are scheduled for Friday, May 5, 2017 at 2:00 p.m. and Wednesday, May 10, 2017 at 9:00 a.m. Information on how to register for these calls can be found at <http://www.dds.ca.gov/ratechangesJuly2016/index.cfm>. (**Attachments #11-#12**).

II. SELF DETERMINATION PROGRAM

- **Attachment #13:** DDS Self Determination Program – FAQ (revised 9.15)
- **Attachment #14:** Disability Rights California Self Determination Program – FAQ
- **Attachment #15:** Similarities and Differences Between Traditional Regional Center Service Provision and the New Self-Determination Program
- **Attachment #16:** December 2015 Letter from Centers for Medicare and Medicaid Services

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- **Attachment #17:** Self-Determination Enrollment Process
- **Attachment #18:** TCRC Self-Determination Informational Flyer
- **Attachment #19:** TCRC Self-determination Advisory Committee 2017 meeting calendar

In October of 2013, Governor Brown, signed into law SB 468 (Emmerson /Beal /Mitchel /Chesbro) authorizing the implementation of the Statewide Self-Determination Program that offers a voluntary, alternative to the traditional way of providing regional center services. The Self Determination Program is intended to provide individuals served by the regional center and their families more freedom, control, and responsibility in choosing services and supports to help them meet objectives in their Individual Program Plan (**Attachments #13-#15**). It will most likely take several years for the Self Determination Program to be fully in place. Securing federal funding is necessary in order to implement the Self-Determination program.

The Department of Developmental Services (DDS) met the deadline as outlined in SB 468 and submitted the Home and Community Based Services application on December 31, 2014 seeking funding for Self-Determination to the Center for Medicare and Medicaid Services (CMS). Subsequently, CMS asked follow-up questions related to recently enacted federal regulations and policies regarding public input for Waiver applications and federal requirements for Home and Community Based Settings (HCBS). The Department, in conjunction with the Department of Health Care Services, had a number of discussions with CMS and provided the follow-up information CMS requested. The Self-Determination Waiver Application was formally resubmitted to the Centers for Medicare and Medicaid Services (CMS) on September 29, 2015.

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On December 11, 2015, CMS sent a letter to the State asking questions about, and requesting more information on, specific sections in the Self-Determination Waiver Application (**Attachment #16**). The Department of Developmental Services (DDS) continues to work through the Department of Health Care Services to provide written responses to answer questions from CMS and secure approval of the waiver. DDS is in communication with CMS to clarify some of the concepts in the Self-Determination Waiver. Of the 180 questions posed to DDS in December 2015, all but a few have been clarified with CMS. Those remaining mostly relate to the HCBS Final Rules settings requirement, the cost of financial management services (FMS), and response to critical incidents. Once DDS finalizes the remaining questions, the Waiver application will be formally submitted to CMS. Prior to this, DDS will post the latest draft of the application on their website at least 30 days in advance of this submission date for public comment, which would begin the 90 day clock for CMS to approve, deny or request additional information.

The Self-Determination stakeholder workgroup is developing an assessment process for service settings that are selected by the Self Determination Program participants to determine their compliance with the HCBS settings rule. They are working on a tool that would clarify those service settings that do not qualify (i.e., services provided in nursing facilities) and also those service setting that do qualify (i.e., services provided in integrated community settings such as the city library).

Once federal approval of matching funds is authorized, the program will be available in every regional center. For the first three years, the number of participants in the Self- Determination Program is capped at 2,500 individuals throughout the state. Recent legislation allows for an increase of these participants to include people moving from Developmental Centers. After the three year phase-in period, the program will be available to all eligible persons served and families on a voluntary basis with no limit on the number of participants. TCRC will have 114 individuals or families enrolled in the program for the first three years. This includes the 15

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individuals who are currently in our Self-Determination pilot project plus an additional 99 people that TCRC will be able to add under the new program. The process for selecting and enrolling participants in the first three years is described in the Self-Determination Enrollment Process (**Attachment #17**).

Federal approval of the Waiver application is just one of the many steps that must be taken prior to the implementation of the Self-Determination Program. The Self-Determination Program stakeholder advisory group identified the following steps as necessary for a fair and equitable process for enrollment.

Outreach — Those served by the regional center and their families must be made aware of Self-Determination as an option to traditional services. To assist with the provision of widespread outreach and awareness of the Self-Determination Program, the workgroup developed an informational video that features some of the individual's and their families currently in the self-determination pilot project as well as those who are interested in the Self-Determination Program. This video has been posted on the Department of Developmental Services (DDS) website at: <https://www.dds.ca.gov/SDP> . The Self Determination video is now available in additional languages with more to be added. TCRC along with the Self-Determination Advisory chairpersons, developed an information flyer that was included in the POS annual statements mailed out to all persons served by TCRC. This flyer was also given to our Service Coordinators, Family Resource Centers and Peer Advocacy Team to make available to our community (**Attachment # 18**).

Information — Individual's served by the regional center and/or their families must be informed about the Self-Determination Program, including the new opportunities and increased responsibilities. Those interested in the Self-Determination Program will be required to attend and participate in an informational/pre-enrollment meeting covering topics identified by the Department, including, information regarding the principles of self-determination, the role of the financial management services provider and the development of an individual budget. The state workgroup is

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currently developing training materials to be distributed to all Regional Centers that will be used during these informational / orientation meetings. Once TCRC has received training on these materials, we will develop our outreach plan to hold informational nights about Self-Determination.

In the Spring 2016 issue of the TCRC Tri-line newsletter, there was an article on Self Determination that provides an overview of the program. In addition, TCRC's website is set up for anyone to receive an email notification when new information is posted. To receive email notifications go to the Self Determination page of the TCRC website and click on the "Get News, Notices and Announcements by email" link. Click on "Join our email List", provide the information requested and select the box next to Self Determination.

Additionally, anyone interested in obtaining more information about the Self Determination Program and would like to be notified once the Self Determination Pre-Enrollment Information meetings are scheduled can contact TCRC by email: self-determination@tri-counties.org.

Selection for the first three years of the Self-Determination Program— For those who attend one of the informational meetings, they will be given a verification form to complete. At the end of the meeting, they will be asked if want to be considered for enrollment at which time, they will complete the form and submit back to the regional center. This choice can be changed at any time by notifying the regional center. Regional centers will forward to the Department the names of those who have participated in an informational/pre-enrollment meeting and are interested in participating in the Self-Determination Program. The Department will send a confirmation to those who have submitted their names for participation in the program and are currently developing a process for those interested, and/or their families, to verify via the DDS website that their name has been forwarded for consideration. The Department will then randomly select the participants based on the following demographic factors within each regional center: age, gender, ethnicity

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and disability diagnosis. Individual's not initially selected will remain on the interest list for potential future openings.

Local Volunteer Advisory Committees — As required by law, each regional center must establish a Local Volunteer Advisory Committee to ensure effective implementation of the Self-Determination Program and facilitate the sharing of best practices and training materials. In collaboration with the Central Coast office of the State Council, we reviewed the applications from those interested in serving on the committee and selected the membership with a focus on multicultural diversity requirements and geographic area representation.

The primary responsibility of the committee is to provide oversight of the Self-Determination program at Tri-Counties Regional Center. The committee will review the development, implementation and on-going progress of the Self-Determination program and determine if we are meeting the requirements of the law. In addition, the committee will make on-going recommendations for improvements to the program to both Tri-Counties Regional Center and the Department of Developmental Services. Our Self-Determination Advisory Committee is meeting on a quarterly basis and all meetings are open to the public (**Attachment #19**).

TCRC's Self-Determination Advisory Committee has been meeting on a quarterly basis in Santa Barbara. Our next meeting will be on Tuesday, June 27, 2017 and telephone conferencing will be available. For more information, you can visit our website at www.tri-counties.org or email: self-determination@tri-counties.org.

In addition to our local advisory committee, there is a Statewide Advisory committee in which the chair and co-chair of TCRC's advisory committee participates. In these meetings, there is a sharing of what has worked / what has not between regional centers to develop best practices throughout the state.

TCRC is also actively participating on the Self-Determination Committee through the Association of Regional Center Agencies (ARCA) to provide feedback to the

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Department of Developmental Services (DDS) on the waiver and obtain input and direction from DDS on the timing and implementation of the various components of the program.

As we wait for more information, TCRC has formed an internal work group consisting of Omar Noorzad, Executive Director; Lorna Owens, CFO; Diva Johnson, Director of Community Development; Pam Crabaugh, Director of Services and Supports; Eulalia Apolinar, Assistant Director of Services and Supports SB/SLO Counties; Sha Azedi, Assistant Director of Services and Supports Ventura County; Cheryl Wenderoth, Assistant Director of Federal Programs; Mary Beth Lepkowsky, Assistant Director of Training and Organizational Development; and Jennifer Lucas, State Council on Developmental Disabilities Central Coast Office. The group will be working together on a variety of activities in preparation for the Self-Determination Program.

These include:

- Participation in our local advisory committee.
- Guidelines on participant eligibility, selections and enrollment
- Self-Determination services and definitions
- Budget setting and tracking.
- Fiscal Management Services (FMS)
- Training
- Person-Centered Planning
- Community outreach
- Monitoring of the Self-Determination program
- Billing and payment procedures

TCRC continues to post updated information about the Self Determination Program on the TCRC website to keep the community informed about the status of the Self Determination Program.

III. Q&A

EDITORIALS JANUARY 10, 2017 3:44 PM

With Trump unnamed, Brown offers cautious budget

BOOKMARK FOR LATER

MY BOOKMARKS ↻



Gov. Jerry Brown proposes a balanced budget which

eliminates a projected \$2 billion deficit for the upcoming year. **Randy Pench** - rpench@sacbee.com

BY THE EDITORIAL BOARD

Gov. Jerry Brown emphasized frugality in Tuesday's budget proposal, which in any other year would simply be the cautious governor being cautious.

But this is the year of Donald Trump. Although Trump is not named in the documents released Tuesday, he is between the line items, and then some. The governor's proposition to save "some biscuits for a rainy day," isn't just an ode to his dearly departed dog Sutter. Brown also is undoubtedly hedging against whatever might emerge from the new administration.

More immediately, Brown assumes there will be a slight slowdown in job growth and tax collections. That requires prudence, a wise path, although the proposed \$179 billion budget for the 2017-18 fiscal year does represent a slight increase above the current budget.

A governor's January budget proposal is, as always, the most educated guess about how much we collectively will pay in taxes in April. However, this year, more than many, there's reason to worry about what might come out of Washington.

THE INCOMING PRESIDENT-ELECT IS BETWEEN THE

LINE ITEMS, AND THEN SOME.

The governor's proposal relies on more than \$20 billion in federal aid used to provide health care coverage to 5 million Californians who rely on the Affordable Care Act and on the expansion of Medi-Cal, programs Trump and Republicans are contemplating cutting.

The budget makes no reduction, for now, in either program. But Brown and Finance Director Michael Cohen said in news conferences that the state will bird-dog the new administration as its plans become clearer.

Perhaps the biggest threat to California's economy – and thus the budget – is the possibility that Trump might retreat on the nation's commitment to free trade. The budget document notes that \$165 billion worth of goods were exported from California ports in 2015, from farm products and electronics to transportation equipment and chemicals.

California's largest trading partners are Mexico and Canada, the nation's partners in the North American Free Trade Agreement, which Trump denounces, and China, which Trump accuses of unfair trading practices.

“Changes to existing free trade policies could cause prices to spike, and could lead to job losses as the economy adjusts,” the budget states. “This would particularly hurt lower-

income workers, who would face higher prices on the goods they buy.”

Trump aside, there are other reasons for caution.

If policymakers fail to slow down spending, Brown said, there would be a \$1.6 billion deficit because of what he believes will be slowing tax collections and job growth. And so the governor proposes to trim the rate of increase in public school spending by \$1.6 billion, though education still would receive a 3 percent increase to \$73.5 billion. The governor proposes other savings by withholding housing and state building construction funds, and limiting the rate of increase on state-funded child care.

The proposed spending slowdown would come even though voters approved Proposition 55 in November. That will generate as much as \$9 billion annually by taxing the income of individuals who earn \$250,000 or more. However, that measure is not a new tax. Rather, it extends what was supposed to be a temporary tax hike approved in 2012 on high-earners.

The governor allocates another \$1.7 billion from an increased tax approved in November on tobacco and e-cigarettes. That spending was restricted by the initiative. Because of its provisions, the governor is earmarking \$178.5 million for tobacco prevention, the biggest boost ever for the program. It will save

lives.

There's much more in the budget including proposed tax and fee hikes to generate \$4.3 billion for roads and transportation; criminal justice changes to combat recidivism; and improvements to recycling.

It all will play out in months to come as legislators dig through the proposal. But given vagaries of the economy and Donald Trump, Brown is smart to start by urging that legislators keep spending on a tight leash.

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Mac McCauley

16 hours ago

Trump will be blamed for everything.
Pestilence, flood, famine, the Bee cares not.

You people who swallow the Trump fear need your heads examined.

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2 0

HEALTH CARE

State Hospitals continues to work with counties to identify other opportunities for collaboration, identify efficiencies, and reduce the costs for housing and treating IST patients. The Department is also exploring opportunities for joint-use facilities that would provide services to both State Hospital patients and appropriate jail populations.

**TRANSFER OF PSYCHIATRIC PROGRAMS TO THE CALIFORNIA
DEPARTMENT OF CORRECTIONS AND REHABILITATION**

State Hospitals currently operates over 1,100 in-patient, mental-health treatment beds at three California Department of Corrections and Rehabilitation prisons: California Health Care Facility in Stockton, Salinas Valley State Prison in Soledad, and California Medical Facility in Vacaville. State Hospitals provides the in-patient services as part of a broader system of mental health care within Corrections. The Budget proposes to transfer these programs to Corrections effective July 1, 2017, and redirects \$250.4 million and 1,977.6 positions for this purpose. Transfer of these programs will streamline processes and improve timelines for inmate referrals for psychiatric inpatient treatment. Refer to the Public Safety Chapter for additional information.

DEPARTMENT OF DEVELOPMENTAL SERVICES

The Department of Developmental Services provides individuals with developmental disabilities a variety of services that allow them to live and work independently or in supported environments. California is the only state that provides developmental services as an individual entitlement. The state is in the process of closing all state-operated developmental centers, except for the secure treatment area at the Porterville Developmental Center, and the Canyon Springs community facility. By the end of 2017-18, the Department estimates it will be providing services to approximately 317,000 individuals with developmental disabilities in the community. In the developmental centers, the estimated population, as of July 1, 2017, is 760 residents. The population is expected to decrease to 490 residents by June 30, 2018, as additional residents receive services through the regional centers. The Budget includes \$6.9 billion (\$4.2 billion General Fund) for support of developmental services.

DEVELOPMENTAL CENTER CLOSURES

In 2015, the Administration announced the planned closure of the three remaining developmental centers: Sonoma, Fairview and the general treatment area of Porterville. Sonoma is scheduled to close in December 2018 and no longer receives federal funding for its intermediate care facility units. On July 1, 2016, the Department entered into

HEALTH AND HUMAN SERVICES

settlement agreements with the federal Centers for Medicare and Medicaid Services to continue federal funding for individuals residing at Fairview and the general treatment area at Porterville. The Department's ongoing compliance with the provisions of the settlement agreements will allow the continued receipt of federal funding for intermediate care facility units at both centers. The Budget assumes federal funding will continue for both Fairview and Porterville.

The Department continues to work on developing safety-net community services for individuals transitioning from developmental centers, institutions for mental diseases, and other specialized services. New models of care that provide community-based residential and support services to individuals residing in the Porterville secure treatment program and institutions for mental diseases are being developed. The Department is also developing community residential models that will provide intensive supports; accept any individual living in the community who is in crisis and unable to remain in their current living situation; and provide residential options for children and adolescents with significant health or behavioral challenges.

REGIONAL CENTER SERVICES

Regional centers provide intake, assessment, eligibility determination, resource development, and case management services. The centers also work with the thousands of businesses and individuals providing developmental services in the community.

Significant Adjustments:

- **Community Housing Projects**—The Budget includes an increase of \$597,000 (\$554,000 General Fund) and 4 positions to provide increased oversight of community housing projects, funded through the Community Placement Plan, and to maintain focus on the development of community housing to support the developmental center closures. This housing is being developed to meet the residential placement needs of individuals transitioning from a developmental center or those who are at risk of moving to a more restrictive setting. The additional resources will allow analysis of housing proposals from developers, consistent monitoring of housing renovation/construction, and overall project monitoring.
- **Minimum Wage**—The Budget includes an increase of \$47.9 million General Fund to reflect the impact on providers of the increasing state minimum wage.

**ASSOCIATION OF REGIONAL CENTER AGENCIES
ANALYSIS OF THE FY 2017-2018 NOVEMBER ESTIMATE
(GOVERNOR'S BUDGET)
JANUARY 10, 2017**

FY 2016-2017 (Current Year)

1. CASELOAD

The FY 2016-17 May Revision estimated the Regional Center Community Caseload to be 302,610 consumers for January 31, 2017. The November Estimate increases the January 31, 2017 caseload to 303,447, an increase of 837 consumers (a 0.28% increase).

2. PURCHASE OF SERVICE - \$ 38 million decrease (.79% decrease)

- \$ 38 million *decrease* to Purchase of Services due to less than projected POS expenditures.

3. OPERATIONS - \$2 million Increase (0.28% increase)

- \$2.0 million increase to reflect updated caseload which is slightly offset by a decrease in the Intermediate Care Facility-Developmentally Disabled (ICF-DD) Administration Fees and Project costs for the Affordable Housing contract and the extension of Denti-Cal infrastructure for the Regional Center-funded dental contract.

FY 2017-2018 (Budget Year)

The following increases and decreases are in comparison to the revised budget for FY 2016-2017.

1. CASELOAD

The budget anticipates an increase of 13,836 consumers (a 4.56% increase) over the 303,447 consumers projected for January 31, 2016.

2. PURCHASE OF SERVICE - \$335.6 million increase (6.3% increase)

- \$291 million increase over current fiscal year for caseload and utilization growth (a 6.11% increase). \$209 million is due to expenditure increases in the base.
- \$7.5 million increase for full-year funding of the minimum wage increase per AB 10 effective January 1, 2016. Increase reflects current year expenditures multiplied by the growth rate of each POS budget category.
- \$53.1 million *decrease* in Community Placement Plan DC closures reflects removal of targeted, on-time Startup funding for Sonoma, Fairview, and Porterville Developmental Centers. New resources are in development so additional funding is no longer necessary.
- \$14.3 million increase due to funding of community based services reflects the full amount of funds appropriated through ABX2 1.
- \$77.2 million increase for minimum wage increase per SB 3 effective 1/1/2017. Change is due to the wage increases in current year and budget year.
- \$1 million decrease in Best Buddies program due to removal of 2016-2017 one-time funding

3. OPERATIONS – \$23.3 million increase over Current year (3.2% increase)

- \$26.8 million increase in staffing due to the projected increase in caseload.
- \$3.3 million decrease reflects the removal of the \$3 million one-time funding for the community based services rate study and updated reimbursement percentages.
- \$.2 million decrease in rent funds for Compliance with HCBS regulations. Beginning in 2017-2018, the Department will budget regional center rent based on their reported, anticipated expenditures rather than on a formula.

FUTURE FISCAL ISSUES

DDS listed the following fiscal issues

Safety Net Services

In conjunction with the developmental center closures, the Department continues to work on developing safety net community services for individuals transitioning from developmental centers and institutions for mental diseases (IMDs), including new models of care that provide community-based residential and support services to individuals residing in the Porterville secure treatment program and IMDs. This includes developing a community residential model that will provide intensive supports and accept any individual living in the community who is in crisis and unable to remain in their current living situation without immediate support and intervention. Additionally, while supporting children and adolescents in a family setting remains the preferred support option, the Department is also developing residential options for children and adolescents with significant health or behavioral challenges to meet their needs in the instances when a family setting is not available. Through the development of these new models, the Department will identify appropriate statutory and regulatory changes required for implementation, as well as fiscal impacts.

Self-Determination

Senate Bill (SB) 468, Chapter 683, Statutes of 2013, requires the Department to implement a statewide Self-Determination Program (SDP), subject to approval of federal funding. The Department submitted an application for federal funding to the Centers for Medicare & Medicaid Services (CMS) on December 31, 2014. The SDP will allow regional center consumers and their families more freedom, control, and responsibility in choosing services and supports to help meet the objectives in their individual program plans. Participation is limited to 2,500 individuals in the first 3 years of the SDP, including approximately 100 participants in the current State-only funded self-determination pilot project. To ensure the cost neutrality of the SDP, which is required in statute, SB 468 requires General Fund (GF) savings be used to offset administrative costs to the Department, including the required criminal background checks. Any remaining funds can be used to offset regional center costs to implement the SDP.

In response to changes requested by CMS, the Department formally resubmitted the HCBS Waiver application on September 29, 2015. CMS responded, requesting additional information regarding the Waiver application. The Department has complied with all requests for information, and plans to respond to CMS' recent questions by the end of January 2017. The Budget Act of 2016 also includes provisional language to administer the SDP once federal approval has been received.

Enhanced Behavioral Supports Homes and Crises Homes

Enhanced Behavioral Supports Homes, which are a new model of residential care that provide services to consumers with more intensive behavioral needs, are expected to begin operation in 2016-17. Currently, there are 28 homes in development throughout California, with approximately two of these homes opening in 2016-17. While many

individuals will transition into these homes from developmental centers, others will transition out of locked IMDs. The rate structure has been developed in such a way that supports can be layered while being flexible, and also account for enhanced staffing requirements. The rate structures, within the emergency regulations, became effective February 5, 2016.

The Department is developing regulations for Community Crisis Homes, which are an additional new model of care that is needed to serve consumers who are in an acute crisis while in the community. There are currently 13 homes in development throughout California.

Centers for Medicare & Medicaid Services Final Regulations for Home and Community-Based Services

In early 2014, CMS published final regulations affecting 1915(c) Waiver programs, 1915(i) State Plan programs, and 1915(k) Community First Choice State Plans for HCBS provided through Medicaid. The purpose of the regulations is to allow individuals to receive HCBS in settings that are integrated in and support full access to the community. The Department administers both a 1915(c) Waiver (the HCBS Waiver for Persons with Developmental Disabilities) and a 1915(i) State Plan program. These programs enable the State to receive federal funding for services provided to approximately 130,000 consumers. Compliance with these federal regulations is necessary by March 17, 2019 to maintain HCBS funding (estimated at \$1.8 billion for the Department in 2017-18).

On November 23, 2016, the Department of Health Care Services re-submitted the Statewide Transition Plan (STP) for CMS approval. The STP describes, at a high level, California's overall commitment to, and plan for achieving compliance on or before March 17, 2019, including the potential need for changes in statute and/or regulation to comply with federal regulations. Concurrent with the development of the STP, the Department is engaged in the multi-year process of implementing the federal regulations with the guidance of a comprehensive stakeholder group. To enable the Department to complete some of the required activities, the 2016 Budget included funding for regional center staffing to assist with conducting individual provider assessments as well as funding to enable service providers to make modifications to comply with federal regulations.

Developmental Services Task Force

On July 24, 2014, the California Health and Human Services Secretary convened a task force to strengthen developmental services in the community. The task force includes consumers, consumer advocates, regional centers, community service providers, labor organizations, families of developmental center residents, legislative staff, and staff from the Department. Subsequent meetings were convened to focus on service rates, the rate-setting structure and sustainability, and how regional center operations are funded. The task force will develop recommendations in the context of a growing and aging population, resource constraints, and availability of community housing and employment resources to meet the specialized needs of clients.

PROPOSED BUDGET BILL AND TRAILER BILL LANGUAGE

The Governor's Budget includes proposed statutory amendments in the following areas related to the Community Services Program:

- Exemption from Federal Funding Requirements for Enhanced Behavioral Supports Homes and Community Crisis Homes with Secured Perimeters - Allows for the development of enhanced behavioral supports homes and community crisis homes with secured perimeters to meet the needs of individuals with developmental disabilities who have complex service needs;
- Allow Regional Center Consumers Aged 18-22 to Participate in Paid Internships - Allows consumers aged 18-22, who are still receiving educational services, to participate in paid internships for the purpose of gaining experience in competitive, integrated job placement;
- Update Service Rates Set in Statute – Updates service rates for supported employment and vouchered community-based training services that increased under the provisions of ABX2 1;
- HCBS Waiver Authority - Allows the Department to issue policy directives in advance of emergency regulations to align State requirements with new HSBC regulations by March 2019;
- Reporting of Employment Outcomes by Regional Centers - Requires regional centers to include consumer employment outcomes in their annual performance contracts to assist the State in measuring progress towards increasing competitive integrated employment opportunities for individuals with developmental disabilities;
- Broaden the Use of Community Placement Plan (CPP) Funds to Include Additional Community Resources – Allows a designated portion of CPP funds to be utilized to develop services and supports for consumers already living in the community, including those with specialized and complex service needs.

DEVELOPMENTAL CENTERS

FY 2016-17 (Current Year)

The Governor's Budget is proposing a net increase of \$3.9 million for the current fiscal year.

- \$3.6 million increase (\$2.2 million GF increase) consistent with Control Section (CS) 3.60 of the Budget Act, which specifies the employers' retirement contributions for the 2016-17 fiscal year. \$13.0 million increase for employee compensation adjustments.
- \$1.1 million increase (\$0.6 million GF increase) due to 2016-17 employee compensation adjustments, which reflect incremental changes approved through the collective bargaining process and included in Item 9800, Employee Compensation Adjustments \$1.6 million increase for deferred maintenance projects at Porterville Developmental Center.
- \$0.1 million decrease (\$0.0 GF) in funds available to the Department.
- \$0.7 million total and GF decrease due to CS 4.30 for an adjustment to the Lease Revenue Debt Service.
- The Department proposes a \$27.2 million fund shift from reimbursement to General Fund for a reduction in estimated Medi-Cal reimbursements receivable. The reduction in reimbursements is based on an analysis of expenditures by DC and by unit acuity level, the total number of days residents receive eligible services in the fiscal year, and past reimbursement amounts. The Department proposes this request be funded by a transfer from the Local Assistance budget in Item 4300-101-0001, which is currently projecting savings in 2016-17.

FY 17-18 (Budget Year)

The Governor's Budget proposes a net decrease of \$76.2 million for the budget year.

- \$3.6 million increase (\$2.2 million GF increase) consistent with CS 3.60 of the Budget Act, which specifies the employers' retirement contributions for the 2016-17 fiscal year.
- \$1.3 million increase (\$0.8 million GF increase) due to 2016-17 employee compensation adjustments, which reflect incremental changes approved through the collective bargaining process and included in Item 9800, Employee Compensation Adjustments.
- \$1.0 million total and GF decrease due to CS 4.30 for an adjustment to the Lease Revenue Debt Service.
- \$0.1 million decrease (\$0.0 GF) in funds available to the Department
- \$80.8 million decrease (\$11.9 million GF decrease) and 489.2 position reduction resulting from an estimated resident population decrease of 257 residents, and reduction of one-time funding for the Sonoma DC Site Assessment. With the

decrease, the Department will consolidate units, reduce staff, and reduce both resident and staff Operating Expenses and Equipment (OE&E) costs

- Sonoma Closure Activities • \$0.3 million increase (\$0.2 million GF increase) to fund the disposal and/or relocation of physical property and equipment assets in preparation for facility closure.
- Fairview and Porterville GTA Closure Activities • \$0.5 million increase (\$0.4 million GF increase) to inventory, scan, and archive clinical records at both Fairview and Porterville GTA.

PROPOSED BUDGET BILL AND TRAILER BILL LANGUAGE

Clean Up Language Allowing DDS Employees to Become Service Providers Assembly Bill 1606, Chapter 26, Statutes of 2016, also known as the trailer bill to the 2016 Enacted Budget, amended Section 10430 of the Public Contract Code to provide an exemption to DDS employees from terminating state employment before entering into a service provider contract with a regional center. The current language ties the point in time an employee must terminate state employment to vendorization. However, it has been determined that there are different interpretations of when vendorization actually occurs. It can be interpreted that vendorization occurs at the beginning of a start-up contract, since the regional center assigns a service code in order to issue contract payments. Under this interpretation, the intent of the language would be defeated. Therefore, Department proposes to clarify the existing language to remove the reference to vendor or vendorization. The language will be clearer as to the time frame the employee can continue working for the State and not create a conflict of interest. This clarification will protect both the employee and the regional center, and encourage use of the exemption.

HEADQUARTERS

FY 2016-2017 (Current Year)

The Governor's Budget is proposing a net increase of \$.5 million for the current fiscal year. Total Headquarters budget is \$51.2 million.

- \$.5 million increase for Retirement Rate Contribution and Employee Compensation.

FY 2017-2018 (Budget Year)

The Governor's Budget proposes a net increase of \$1.6 million for the budget year.

- Incremental increase for Retirement Rate Contribution and Employee Compensation.
- \$.6 million for 4.0 positions for workload associated with the development and oversight of housing funded through the Community Placement Program (CPP) to meet the residential placement needs of individuals transitioning out of the State's remaining developmental centers, Institutions for Mental Disease (IMDs), out-of-state placements, or who are at risk of moving to more restrictive settings. The proposal specifically requests positions in the Community Development and - 7 - Housing Section (CDHS) to provide increased oversight during housing development, encourage more efficient funding practices, promote greater fiscal accountability, and provide stronger asset management supervision for projects funded through CPP.
- \$.4 million for 3.0 positions to manage and assist with significant increases in workload associated with planning, outreach, training, risk assessment, prevention strategy, policy development, monitoring, and reporting activities related to information security and privacy. With the additional resources, the Department will assist and support DC and regional center security efforts, and conduct activities in compliance with the State Administrative Manual (SAM), the State Information Management Manual (SIMM), and federal requirements.

CAPITAL OUTLAY

There are no changes for 2016-17.

2017-18

The Governor's Budget includes one Capital Outlay Budget Change Proposal (COBCP) requesting \$3.7 million GF to install a nitrate removal system at Porterville. The system will remove excess nitrates from well water to meet state-mandated safe drinking water requirements, thereby providing a safe, reliable, and efficient potable water delivery system.

Omar Noorzad - CDCAN Disability-Senior Rights Report: State Capitol Updates - Governor Brown Releases 2017-2018 State Budget Plan - Update on Proposals Including Those Impacting IHSS and SSI/SSP

From: Marty Omoto <martyomoto@att.net>
To: Marty Omoto <martyomoto@att.net>
Date: 1/11/2017 11:06 AM
Subject: CDCAN Disability-Senior Rights Report: State Capitol Updates - Governor Brown Releases 2017-2018 State Budget Plan - Update on Proposals Including Those Impacting IHSS and SSI/SSP
Bc: Omar Noorzad

CDCAN REPORT

CALIFORNIA DISABILITY-SENIOR COMMUNITY ACTION NETWORK & CALIFORNIA PERSON CENTERED ADVOCACY PARTNERSHIP

January 11, 2017 – Wednesday Early Morning

ADVOCACY WITHOUT BORDERS: ONE COMMUNITY – ACCOUNTABILITY WITH ACTION – PERSON CENTERED ADVOCACY

CDCAN Reports go out to over 65,000 people with disabilities, mental health needs, seniors, people with traumatic brain and other injuries, people with MS, Alzheimer's and other disorders, veterans with disabilities and mental health needs, families, workers, community organizations, facilities and advocacy groups including those in the Asian/Pacific Islander, Latino, American Indian, Indian, African-American communities; policymakers, and others across the State.

Sign up for these free reports by going to the CDCAN website. Website: www.cdcan.us

To reply to THIS Report write:

Marty Omoto (family member and advocate) at martyomoto@att.net (as of June 1, 2016 this new email address REPLACED martyomoto@rcip.com – that email address, as of that date, will no longer accept emails (if you sent one to that old address on or after that date, please resend to new email address_

Twitter: [martyomoto](https://twitter.com/martyomoto)

Office Line: [916-418-4745](tel:916-418-4745) CDCAN Cell Phone: [916-757-9549](tel:916-757-9549)

State Capitol Update:

GOVERNOR BROWN RELEASES PROPOSED 2017-2018 STATE BUDGET

- ***Proposes “Corrective Actions” To Address Current Projected Budget Deficit of \$1.6 Billion and Projected On-Going Deficits***
- ***Will Discontinue Coordinated Care Initiative – But Ending Of Program Will Not Impact Level of Services People Receive Including IHSS Or Wages of IHSS Workers – Proposes to Continue Key Parts of Coordinated Care Initiative***
- ***Largely Maintains Funding For Medi-Cal Programs Including Funding to Cover Caseload Growth***
- ***Proposes Continuing the Temporary 7% Restoration of IHSS Services Through At Least June 30, 2018 and Proposes No Changes To IHSS Overtime Requirements – Proposes Funding Increases To Cover Caseload Growth***

- ***Funds Caseload Growth for Regional Centers and Continues Funding New Programs Including Competitive Integrated Employment (CIE), HCBS (Home and Community Based Services) Transition Funding That Were Part of 2016 State Budget & Special Session Funding Bill – Closures of Developmental Centers Still On Track***
- ***Citing Budget Uncertainties, Proposes Stopping Implementation of Universal Assessment Tool; Proposes Discontinuing New Supplemental Funding Allocated to 3 Independent Living Centers; Proposes Halting Implementation of Special One-time Outreach Effort for SSI/SSP; Proposes Discontinuing Implementation of Universal Assessment Tool***

SACRAMENTO, CA [BY MARTY OMOTO, CDCAN LAST UPDATED 01/11/2017 04:32 AM] – Saying that this year’s budget will be the most difficult California has faced since 2012, Governor Brown released his proposed 2017-2018 State Budget plan yesterday that continues funding existing health and human service programs, but halts implementation of some new programs not yet implemented in order to close a projected \$1.6 billion budget shortfall.

In addition, as previously reported by CDCAN, the Governor announced that the Coordinated Care Initiative demonstration project in seven counties will be discontinued. California Health and Human Services Agency Secretary Diana Dooley, in a stakeholder conference call yesterday, indicated that the Coordinated Care Initiative would end by the end of December 2017.

The Governor cited a possible downturn in the economy combined with the enormous uncertainty on major federally funded programs, especially with the possible repeal of the Affordable Care Act and possible major changes to Medicaid, Medicare and Social Security as President-elect Trump assumes power on January 20th.

However, even with the budget revenue uncertainty, the Governor is still proposing funding caseload growth and other costs for existing health and human service programs.

Funding for developmental services under the Department of Developmental Services was increased to cover caseload growth and related costs, and all of the on-going new programs and initiatives dealing with increasing efforts toward competitive integrated employment (CIE) including paid internships and incentive payments; the transition of providers under the new federal Home and Community Based Services (HCBS) rules, and efforts to reduce cultural disparities, remain funded in the 2017-2018 State Budget. See separate CDCAN Reports today for more details on the Governor’s proposals for developmental services.

Funding for In-Home Supportive Services (IHSS) includes increases to cover caseload growth, and makes no changes to existing requirements dealing with overtime. In addition the Governor is proposing to continue the existing temporary 7% restoration of IHSS services in the 2017-2018 State Budget (meaning the restoration of the 7% in services would continue at least through June 30, 2018).

Funding for Medi-Cal largely remains intact and covers caseload growth, with the exception of some new programs not yet implemented and also the announcement that the Coordinated Care Initiative will be discontinued. See separate CDCAN Report for more details on the Governor’s proposals dealing with Medi-Cal and healthcare.

HOW THE GOVERNOR IS PROPOSING TO ADDRESS DEFICIT

The Governor indicated that immediate steps were necessary to close a projected \$1.6 billion deficit for the current 2016-2017 State Budget, that could mean on-going deficits of \$1 to \$2 billion every year after.

To close the current projected budget deficit and rebuild the State's operating reserve, the Governor is proposing the following actions as part of his proposed 2017-2018 State Budget, that the Governor contends puts an "...emphasis on minimizing any negative effects on California residents. Rather than cut existing program levels, they temper spending growth based on the lower revenue projections".

All of his proposals require approval by the Legislature in the upcoming legislative budget process, that normally begins with budget subcommittee hearings in as early as late February through May:

ADJUST PROPOSITION 98 (\$1.7 billion): Without action, appropriations made in 2015-2016 and 2016-2017 would over appropriate the Proposition 98 minimum guarantee. The Governor proposes adjustments designed to fund K-14 education at the guarantee for 2015-2016 through 2017-2018. With these adjustments, overall K-14 funding still grows by \$2.1 billion for 2017-2018.

RECAPTURE 2016 ALLOCATIONS (\$0.9 billion): The 2016-2017 State Budget contained a large package of one-time spending. The Governor contends that much of that spending remains uncommitted (unspent) at this point in time. The Governor proposes to eliminate the authority to spend those dollars. The two largest components of this proposal are eliminating the \$400 million set-aside for affordable housing that was never allocated and a \$300 million transfer to modernize state office buildings planned for 2017-2018.

CONSTRAIN SPENDING GROWTH (\$0.6 billion): The Governor's proposed 2017-2018 State Budget limits spending proposals to keep spending flat in 2017-2018 compared to 2016-2017, at about \$123 billion. This involves pausing rate increases for child care, not providing Middle Class Scholarships to any new students, and not submitting a variety of spending proposals (including those to implement new legislation) from state departments that otherwise were justified.

TEXT OF LETTER TO LEGISLATURE FROM GOVERNOR

The following is the complete text of a letter the Governor to the California Legislature that was included in the budget summary document released yesterday:

GOVERNOR
Edmund G. Brown Jr.

January 10, 2017

To the members of the Senate and the Assembly of the California Legislature:

This year's budget will be the most difficult that we have faced since 2012. The surging tide of revenue increases that we enjoyed the past few years appears to have turned. Instead, we now face a budget deficit of \$2 billion.

While this amount pales in comparison to the \$27 billion deficit we faced in 2011, it demands our attention. Small deficits can quickly mushroom into large ones if not promptly eliminated. While rolling back some planned spending increases, my proposed budget protects our most important achievements—more money for education, an earned

income tax credit for working families, the rising minimum wage, the extension of health care to millions, and the pay down of our long-term liabilities.

In all likelihood, the coming years will bring even worse financial news—either from the start of the next inevitable recession or from changes at the federal level. This uncertainty about the future makes acting responsibly now even more important.

I look forward to working with you as we solve these challenges together.

With respect,

Edmund G. Brown J

VARIOUS HEALTH AND HUMAN SERVICE PROGRAMS PROPOSED BY GOVERNOR TO BE HALTED

COORDINATED CARE INITIATIVE (CCI): Governor's proposed budget announced that the Coordinated Care Initiative will be discontinued, because the program was not cost effective. The Governor, under current State law that established the Coordinated Care Initiative, already has the authority to discontinue the demonstration project if it was not cost effective and does not require approval from the Legislature. California Health and Human Services Agency Secretary Diana Dooley indicated in a stakeholder conference call on the budget yesterday that the elimination date would be by the end of December 2017. The Governor is proposing to continue some major pieces of the Coordinated Care Initiative (see CDCAN Report dated January 10, 2017).

ELIMINATION OF SUPPLEMENTAL FUNDING TO THREE INDEPENDENT LIVING CENTERS: The Governor is proposing to eliminate the supplemental funding to three centers due to budget uncertainty in revenues. The current 2016-2017 State Budget included supplemental funding for 3 Independent Living Centers. In making this proposal, the Governor's budget contends that "...these centers already receive a larger share of federal Independent Living Discretionary Grant Program funds than other centers."

UNIVERSAL ASSESSMENT TOOL: Governor is proposing to eliminate further development and implementation of this tool in the 2017-2018 State Budget due to discontinuation of the Coordinated Care Initiative. The Universal Assessment Tool was meant to streamline eligibility and level-of-need determinations for home and community-based services for IHSS, Community Based Adult Services and Multipurpose Senior Services Programs (MSSP)

ELIMINATION OF COMMUNITY INFRASTRUCTURE GRANTS : The Governor's proposed budget includes the reversion of the one-time \$67.5 million State general funds augmentation included in the 2016-2017 State Budget for community infrastructure grants to cities and/or counties to promote public safety diversion programs and services by increasing the number of treatment facilities for mental health, substance use disorder, and trauma-related services.

CHILDREN'S MENTAL HEALTH CRISIS SERVICES GRANTS: The Governor's proposed budget includes the reversion of \$17 million State general funds from 2016-2017 State Budget funds intended for grants to local governments to increase the number of facilities providing mental health crisis services for children and youth under the age of 21. Nearly \$11 million in Mental Health Services Act funding remains available for the program.

HOUSING AND DISABILITY ADVOCACY PROGRAM: see SSI/SSP

CALIFORNIA IHSS STATEWIDE AUTHORITY: See IHSS

SSI/SSP (SUPPLEMENTAL SECURITY INCOME/STATE SUPPLEMENTAL PAYMENT) GRANTS

GRANT LEVELS: The Governor, while continuing the SSP cost of living increase that went into effect January 1, 2017, is proposing no additional cost of living increase for the SSP part of the grants for January 2018.

The Governor's budget will pass through, scheduled to go into effect January 1, 2018, an expected federal cost of living increase of 2.6% for the SSI part of the grant.

The current California maximum SSI/SSP grant levels in effect as of January 1, 2017 for individuals is \$895.72 per month and \$1,510.14 per month for couples. That grant level in effect as of January 1, 2017 included a 0.3% increase from the federal government for the SSI part of the grant in addition to the 2.76% cost of living increase from the State for the SSP part of grant, that was authorized as part of the 2016-2017 State Budget last June..

HOUSING AND DISABILITY ADVOCACY PROGRAM: The Governor is proposing to halt implementation of this program and to return the funds allocated for this program back to the State general fund, citing budget uncertainties.

Included in the 2016-2017 State Budget last June as a one-time outreach effort, the Housing and Disability Income Advocacy Program is a county administered program designed to assist people who are homeless to apply for disability benefit programs including the SSI/SSP; the federal Social Security Disability Insurance program; the state funded Cash Assistance Program for Immigrants; and veterans benefits provided under federal law, including disability compensation. The 2016-2017 State Budget included a one-time allocation of \$45 million in State general funds available over three years.

IN-HOME SUPPORTIVE SERVICES (IHSS)

OVERALL: The Governor is proposing funding for the In-Home Supportive Services (IHSS) program for the 2017-2018 State Budget of \$10.6 billion (\$3.2 billion in State general funds) a 6.5% increase over the current 2016-2017 State Budget. The Governor's proposed budget projects an average monthly IHSS caseload in 2017-2018 of 531,000 people, a 8.2% increase from the 2016-2017 State budget year.

7% SERVICE RESTORATION: Governor's is proposing that the temporary 7% restoration in IHSS service hours that was included in the 2016-2017 State Budget, be continued in the 2017-2018 State Budget (meaning the temporary 7% restoration would continue through June 30, 2018.) Note: Technically the 7% reduction in services for all IHSS recipients that went into effect several years ago to help bridge the budget deficits, never was rescinded. The 7% restoration is currently only a temporary measure – one that the Governor is proposing be continued at least through June 30, 2018.

COORDINATED CARE INITIATIVE – DISCONTINUING: Governor will discontinue this demonstration project in seven counties that included IHSS as a Medi-Cal managed care benefit (though the change was largely invisible to most IHSS recipients and providers). The discontinuing of the Coordinated Care Initiative will not have any direct impact on IHSS services or the pay of IHSS workers.

For the counties, the IHSS "maintenance-of-effort" provisions are automatically repealed due to discontinuing the Coordinated Care Initiative and the IHSS program returns to the prior state-county sharing ratios. The Governor's proposed budget estimates that this change will result in a State general fund reduction of \$626.2 million in the 2017-2018 State Budget year. Additionally, responsibility for collective bargaining with the IHSS workers in the seven counties that were part of the Coordinated Care Initiative, will return back to those seven counties

STATEWIDE AUTHORITY: The Governor is proposing elimination of the California IHSS Statewide Authority in the 2017-2018 State Budget due to discontinuing of the Coordinated Care Initiative. The Statewide Authority serves as the employer of record for IHSS providers, for collective bargaining purposes only, in the seven Coordinated Care Initiative demonstration counties.

SB 75 IHSS ELIGIBILITY: The Governor's proposed 2017-2018 State Budget would continue funding for the SB 75 IHSS program. SB 75 (passed in 2015), expanded eligibility for full-scope Medi-Cal (including eligibility for IHSS), to individuals under age 19 who do not have satisfactory immigration status, or who are unable to establish satisfactory immigration status. This went into effect on May 16, 2016. The California Department of Health Care Services estimates that about 250,000 children who are undocumented under 19 years of age in California are eligible for full-scope Medi-Cal benefits, and from that number, about 185 people (up from average monthly caseload of 114 in 2016) will be eligible for IHSS.

IHSS OVERTIME (FAIR LABOR STANDARDS ACT OR FLSA): The Governor is not proposing any changes to the existing State overtime (and travel and wait time) requirements for IHSS and Waiver Personal Care Services workers for the 2017-2018 State Budget. The Governor's proposed budget would also maintain the current two existing exemptions (known as Exemption 1 and Exemption 2) to the overtime rules.

On February 1, 2016, the California Department of Social Services implemented California's overtime law for IHSS and Waiver Personal Care Services workers (as required by SB 855 and SB 873 signed into law in 2014) to comply with the federal Fair Labor Standards Act overtime regulation (issued by the US Department of Labor) that required overtime for previously exempted home care workers, including IHSS providers (including In-Home Operations Waiver Personal Care Services workers, and also regional center funded Supported Living Services, In-Home Respite Services and Personal Assistance Services workers).

SB 855 and SB 873 also included requirements related to paying for travel and wait time – but established limits on the number of authorized hours IHSS or Waiver Personal Care Services workers are permitted to work. Beginning May 1, 2016, two exemptions were established for limited circumstances that allow those maximum overtime hours to be exceeded.

Under State law, IHSS providers with multiple IHSS recipients are not permitted to work over 66 authorized IHSS hours within a work week. Currently, according to the California Department of Social Services, IHSS providers with multiple IHSS recipients working over 40 hours a week represent 9.4% of the total IHSS provider workforce, or approximately 43,629 IHSS providers in the current 2016-2017 State Budget year, and is projected to grow in the 2017-2018 State Budget year to 46,231 providers

Under State law, IHSS providers with a single IHSS recipient may work up to 70.75 authorized hours per week not to exceed the recipient's monthly maximum hours. The California Department of Social Services reports that IHSS providers with a single IHSS recipient working over 40 hours a week represent 14.1% of the IHSS workforce, or about 65,444 IHSS providers in the current 2016-2017 State Budget year, and is projected to grow to about 69,346 IHSS providers in the 2017-2018 State Budget year.

FEDERALLY INELIGIBLE IHSS PROVIDERS: The Governor proposes continuing State funding for this program, with a proposed increase in State general funds due to a projected higher number of ineligible IHSS providers and impacted IHSS recipients, and related costs. The Governor's proposed budget estimates 320 IHSS providers who are

under this program in the current 2016-2017 State Budget year, growing to a projected 338 IHSS providers in the 2017-2018 State Budget year.

State law, in response to the “Beckworth” State court order, authorizes an IHSS recipient to waive certain convictions of an individual in order for that person to work as their provider under this special state and county funded program, who is otherwise not eligible to work as a provider under Medicaid provider requirements. A special state and county funded program, known as the Federally Ineligible Provider program, was created to pay for those providers who are ineligible under federal Medicaid rules. No Medicaid dollars are used to pay for these workers under this special program.

IHSS ADVISORY COMMITTEES: Governor’s proposed 2017-2018 State Budget proposes no changes, including no changes in funding, for the IHSS Advisory Committees.

CHILD WELFARE SERVICES

CONTINUUM OF CARE REFORM: The Governor’s proposed 2017-2018 State Budget includes \$217.3 million (\$163.2 million State general fund) to continue implementation of the “Continuum of Care” reforms outlined in AB 403 (Chapter 773, Statutes of 2015). The reforms, according to the Governor’s proposed budget, emphasize home-based family care, improve access to services without having to change out-of-home placements to get those services, and increase the role of children, youth and families in assessment and case planning. Those served by Child Welfare Services include many children with special needs – including developmental and other disabilities, and mental health needs.

The Governor’s proposed budget notes that “...although significant progress has been made for the transition of foster youth beginning January 1, 2017, assumptions on caseload movement were revised to more accurately reflect the pace of implementation.”

CALWORKS

MAXIMUM FAMILY GRANT (MFG) REPEAL: The Governor proposes \$224.5 million (\$198.2 million State general fund) for the 2017-2018 State Budget to cover a full year of increased CalWORKs grant costs resulting from the repeal of the Maximum Family Grant rule, effective January 1, 2017, that was included in the 2016-2017 State Budget approved last June.

The Maximum Family Grant rule, for the purpose of calculating a household’s maximum aid payment, prohibited cash aid for any child born into a CalWORKs household ten or more months after initially receiving aid. Many children in CalWORKs households (or their parents) are people with special needs including disabilities (including developmental) and mental health needs. CalWORKs is the State’s “welfare to work” program.

DEPARTMENT OF STATE HOSPITALS PSYCHIATRIC PROGRAMS

PSYCHIATRIC PROGRAMS: Governor proposes the transfer of Department of State Hospitals Psychiatric Programs to the California Department of Corrections and Rehabilitation, effective July 1, 2017, and redirects \$250.4 million and 1,977.6 positions for this purpose.

The Department of State Hospitals administers the state mental health hospital system, the Forensic Conditional Release Program, the Sex Offender Commitment Program, and the evaluation and treatment of judicially and civilly committed patients.

The Governor's proposed budget includes \$1.6 billion (\$1.4 billion General Fund) in 2017-18 for support of the Department of State Hospitals. The patient population is expected to reach 6,369 in 2017-2018.

CDCAN - MARTY OMOTO YOUTUBE CHANNEL

A CDCAN (Marty Omoto, family member and advocate) youtube channel was set up and has several videos dealing with current – and previous state budget issues, disability and senior rights, and advocacy.

To see the current videos, including March 2014 San Andreas Regional Center Aptos Legislative Breakfast, January 2014 panel discussion on services for adults with autism spectrum and related disorders in Palo Alto, and older videos including video of April 2003 march of over 3,000 people with developmental disabilities, families, providers, regional centers and others from the Sacramento Convention Center to the State Capitol (to attend and testify at budget hearing on proposed massive permanent cuts to regional center funded services, go to the CDCAN (Marty Omoto) Channel at:

<https://www.youtube.com/channel/UCEySEyhnr9LQRiCe-F7ELhg>

More videos – including new current videos (an interview with longtime advocate Maggie Dee Dowling is planned, among others) – plus archive videos of past events – will be posted soon.



ALERT: PLEASE HELP!!!!!!

JANUARY 11, 2017 – WEDNESDAY

MORNING

PLEASE HELP CDCAN CONTINUE ITS

WORK

CDCAN was founded in 2000 by Marty Omoto, family member and longtime disability/senior rights advocate. The California Person Centered Advocacy Partnership was founded by Marty Omoto and others in November 2016.

CDCAN Reports and Alerts and other activities cannot continue without YOUR help. To continue the CDCAN website and the CDCAN Reports and Alerts sent out and read by over 65,000 people and organizations, policy makers and media across the State, and to continue and resume CDCAN Townhall Telemeetings, trainings and other events, please send your contribution/donation (please make check payable to "CDCAN" or "California Disability Community Action Network" and mail to:

CDCAN – MAILING ADDRESS:

1500 West El Camino Avenue Suite 499

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Office Line: 916-418-4745

CDCAN Cell Phone: 916-757-9549

Email – NEW: martyomoto@att.net [replaced as of June 1, 2016 martyomoto@rcip.com]

Many, many thanks to all the organizations and individuals for their continued support that make these reports and other CDCAN efforts possible!

Omar Noorzad - CDCAN Disability-Senior Rights Report: State Capitol Update - Updated List of Assembly and State Senate Committee Chairs and Members

From: Marty Omoto <martyomoto@att.net>
To: Marty Omoto <martyomoto@att.net>
Date: 1/24/2017 10:40 PM
Subject: CDCAN Disability-Senior Rights Report: State Capitol Update - Updated List of Assembly and State Senate Committee Chairs and Members
Bc: Omar Noorzad

CDCAN REPORT

CALIFORNIA DISABILITY-SENIOR COMMUNITY ACTION NETWORK & CALIFORNIA PERSON CENTERED ADVOCACY PARTNERSHIP

January 24, 2017 – Tuesday Evening

ADVOCACY WITHOUT BORDERS: ONE COMMUNITY – ACCOUNTABILITY WITH ACTION – PERSON CENTERED ADVOCACY

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To reply to THIS Report write:

Marty Omoto (family member and advocate) at martyomoto@att.net (as of June 1, 2016 this new email address REPLACED martyomoto@rcip.com – that email address, as of that date, will no longer accept emails (if you sent one to that old address on or after that date, please resend to new email address_

Twitter: [martyomoto](https://twitter.com/martyomoto)

Office Line: [916-418-4745](tel:916-418-4745) CDCAN Cell Phone: [916-757-9549](tel:916-757-9549)

REMEMBERING THE LIFE, WORK AND WORDS OF MAGGIE "DEE" DOWLING - DISABILITY AND SENIOR RIGHTS ADVOCATE WHO PASSED AWAY SATURDAY MORNING, JANUARY 21, 2017

State Capitol Update:

LIST OF ASSEMBLY AND STATE SENATE COMMITTEE CHAIRS AND MEMBERS FOR 2017-2018 SESSION

SACRAMENTO, CA [BY MARTY OMOTO, CDCAN LAST UPDATED 01/24/2017 09:36 PM] – Both houses of the California Legislature have completed their selections of committee chairs and committee member assignments, clearing the way for the regular legislative hearing process and the budget subcommittee hearing process to get underway in the coming weeks, likely by the end of February or early March.

As of Tuesday evening, January 24th, no budget subcommittee hearings in either house have been scheduled – and none likely until sometime in mid February. CDCAN will issue a full report on the schedule of budget subcommittee hearings when information becomes available.

The Assembly Budget Committee has scheduled an overview hearing on the Governor's 2017-2018 State Budget proposal, on February 2, 2017, Thursday, upon adjournment of the Assembly floor session, at the State Capitol in Room 4202. No actions and no public comments are taken normally at overview hearings. Its

counterpart, the Senate Budget and Fiscal Review Committee, held its overview hearing on the proposed budget plan on January 17th.

Assembly Speaker Anthony Rendon (Democrat – Los Angeles) announced January 20th, assignments of Assemblymembers to all the Assembly standing committee and budget subcommittees. Speaker Rendon previously announced, on December 28th, the chairs of the Assembly standing committees.

Senate President Pro Tem Kevin De Leon (Democrat – Los Angeles, 24TH State Senate District), announced not only committee chairs but also committee memberships on December 21st. Normally committee memberships are announced in mid or late January – sometimes even the first week of February.

CDCAN will be issuing this week full reports on the Governor's proposed budget and specific impact to developmental services, Medi-Cal, mental health, and also other services and supports for people with disabilities, mental health needs, seniors, the blind, and low income families and individuals.

CHANGES IN SOME ASSEMBLY COMMITTEE CHAIRS

As previously reported in December by CDCAN, there were some changes in chairs, though none as significant as earlier in the spring when he first assumed the speakership:

ASSEMBLY BUDGET SUBCOMMITTEE #1 ON HEALTH AND HUMAN SERVICES: Newly elected Assemblymember Joaquin Arambula (Democrat – Fresno) was appointed as the new chair replacing Assemblymember Tony Thurmond (Democrat – Richmond).

ASSEMBLY HUMAN SERVICES COMMITTEE: Newly elected Assemblymember Blanca Rubio (Democrat – West Covina) was appointed as the chair of the Assembly Human Services Committee, replacing termed out Assemblymember Susan Bonilla.

ASSEMBLY AGING AND LONG-TERM CARE COMMITTEE: Newly elected Assemblymember Ash Kalra (Democrat – San Jose) was appointed chair this committee, replacing Assemblymember Cheryl Brown who was defeated for re-election in November.

No changes were made to the chairs of the Assembly Budget Committee, Assembly Health Committee, or the Assembly Education Committee.

SENATE PREVIOUSLY ANNOUNCED CHAIRS AND COMMITTEE MEMBERS

As previously reported by CDCAN, State Senate President Pro Tem De Leon, announced December 21st, his selections for Senate committee chairs and members for the 2017-2018 California legislative session, including some major changes in committee or subcommittee chairs:

SENATE BUDGET AND FISCAL REVIEW COMMITTEE: Senator Holly Mitchell (Democrat – Los Angeles, 30th State Senate District) is the new chair of the Senate Budget and Fiscal Review Committee. She succeeds Senator Mark Leno who was termed out.

SENATE BUDGET SUBCOMMITTEE #3 ON HEALTH AND HUMAN SERVICES: As previously reported, De Leon named Senator Richard Pan (Democrat – Sacramento, 6th State Senate District) to replace Mitchell as the new chair of the Senate Budget Subcommittee #3 on Health and Human Services, which focuses on budget issues impacting services and supports for children and adults with disabilities, including developmental, children and adults with mental health needs, people who are blind, seniors and low income individuals and families.

SENATE BUDGET SUBCOMMITTEE #1 ON EDUCATION: As previously reported, De Leon selected, as new chair of the Senate Budget Subcommittee #1 on Education, Senator Anthony Portantino (Democrat – La Canada-Flintridge) to replace now retired Senator Marty Block, who did not run for re-election in November. Also making in a change on the policy bill side of education, De Leon named Senator Ben Allen (Democrat - Santa Monica) as the new Senate Education Committee chair, replacing termed out Senator Carol Liu.

SENATE HEALTH COMMITTEE: As previously reported, Senator Ed Hernandez (Democrat – Azusa, 22nd State Senate District) remains as chair of the Senate Health Committee. That committee, along with the Senate Budget Subcommittee #3 on Health and Human Services, and their counterparts in the Assembly, will play important roles regarding how California reacts to any changes made to health care, including the Affordable Care Act, Medicaid and Medicare.

SENATE HUMAN SERVICES COMMITTEE: As previously reported, De Leon tapped new incoming Senator Scott Wiener (Democrat - San Francisco, 11th State Senate District), as the new chair of the Senate Human Services Committee, replacing Senator Mike McGuire (Democrat – Healdsburg, 2nd State Senate District). McGuire was named as the new chair of the Senate Governance and Finance Committee (which, in the previous legislative session, combined the old Senate Local Government and the Senate Revenue and Taxation Committees).

KEY COMMITTEE CHAIRS AND MEMBERS

The following are the Assembly and State Senate committee chairs and members for the 2017-2018 California legislative session, grouped by general subject area, that have direct or indirect impact on people with disabilities

(including developmental), people with mental health needs, the blind, seniors, low income families and individuals. This information is current and updated as of January 24, 2017, 09:34 PM.

Following those committees are the other standing committees of the Legislature (those committees also have at least indirect impact on those populations and communities, but normally not a direct impact).

AGING, HEALTH AND HUMAN SERVICES COMMITTEES

MAJOR CHANGES FOR 2017-2018 SESSION: For both the Assembly and State Senate there are new chairs for their Human Services Committees, with Assemblymember Blanca Rubio (Democrat – Baldwin Park) taking over as chair of the Assembly Human Services Committee, replacing termed out Assemblymember Susan Bonilla, and Senator Scott Weiner (Democrat – San Francisco) replacing Mike McGuire (Democrat – Healdsburg) as new chair of the Senate Human Services Committee. Another major change is Assemblymember Ash Kalra (Democrat – San Jose) taking over as chair of the Assembly Aging and Long-Term Care Committee, replacing Assemblymember Cheryl Brown, who was defeated for re-election.

WHY THESE COMMITTEES ARE IMPORTANT: These five committees deal with non-budget bills covering a wide range of health and human services that have direct impact on children and adults with disabilities (including developmental), people with mental health needs, people who are blind, seniors, low income individuals and families, including CalWORKS (State's "welfare to work program"), developmental services (including regional centers and the State owned and operated facilities known as the developmental centers), Medi-Cal, health care, long term services and supports (including In-Home Supportive Services, Community-Based Adult Services, etc). The issues will likely be even more important in 2017 and in the coming years as a result of any changes in federal funding and programs.

ASSEMBLY AGING AND LONG-TERM CARE COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: Primary jurisdiction includes non-budget bills dealing with area agencies on aging, California Department of Aging, long-term supports and services, Older Americans Act, Older Californians Act, senior citizen advocacy activities, the California Senior Legislature, services for seniors in residential and day settings and the California Commission on Aging.

CHAIR (NEW): *Assemblymember Ash Kalra (Democrat - San Jose)*

REPLACED: *Assemblymember Cheryl Brown (defeated for re-election)*

VICE CHAIR (NEW): *Assemblymember Randy Voepel (Republican – Santee)*

REPLACED: *Assemblymember David Hadley (defeated for re-election)*

TOTAL MEMBERS: 7

MEMBERS – DEMOCRATS (5): *Assemblymembers Anna Caballero, Mike Gipson, Todd Gloria, Adam Gray, and Ash Kalra*

MEMBERS – REPUBLICANS (2): *Assemblymember Dante Acosta, and Randy Voepel*

ASSEMBLY HEALTH COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: Primary jurisdictions are non-budget bills dealing with health care, health insurance, Medi-Cal and other public health care programs, mental health licensing of health and health-related professionals, and long-term health care facilities.

CHAIR (NO CHANGE): *Assemblymember Jim Wood (Democrat- Healdsburg)*

VICE CHAIR (NO CHANGE): *Assemblymember Brian Maienschein (Republican – San Diego)*

TOTAL MEMBERS: 15 (3 less than 2015-2016 session)

MEMBERS – DEMOCRATS (11): *Assemblymembers Rob Bonta, Autumn Burke, Monique Limon, Kevin McCarty, Adrin Nazarian, Sharon Quirk-Silva, Sebastian Ridley-Thomas, Freddie Rodriguez, Miguel Santiago, Tony Thurmond, and Jim Wood*

MEMBERS – REPUBLICANS (4): *Assemblymembers James Gallagher, Brian Maienschein, Jim Patterson, and Marie Waldron*

SENATE HEALTH COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: Non-budget bills relating to public health, alcohol and drug abuse, mental health, health insurance and managed care, including Medi-Cal.

CHAIR (NO CHANGE): *Senator Ed Hernandez (Democrat - West Covina)*

VICE CHAIR: *Senator Janet Nguyen (Republican - Garden Grove)*

TOTAL MEMBERS: 9

MEMBERS – DEMOCRATS (7): *Senators Toni Atkins, Ed Hernandez, Connie Leyva, Holly Mitchell, Bill Monning, Josh Newman, and Richard Roth*

MEMBERS – REPUBLICANS (2): *Senator Jim Nielsen, and Janet Nguyen*

ASSEMBLY HUMAN SERVICES COMMITTEE

WILL BILLS THIS COMMITTEE REVIEWS: Includes non-budget bills relating to child welfare services, foster care, child care, adoption assistance, CalWORKs, CalFresh, developmental services (regional centers and State owned and operated developmental centers), In-home Supportive Services (IHSS), community care licensing, adult protective services, and SSI/SSP

CHAIR (NEW): *Assemblymember Blanca Rubio (Democrat - Baldwin Park)*

REPLACED: *Assemblymember Susan Bonilla (termed out)*

VICE CHAIR (NEW): *Assemblymember Steven Choi (Republican – Tustin)*

REPLACED: *Assemblymember Shannon Grove (termed out)*

TOTAL MEMBERS: 7

MEMBERS – DEMOCRATS (5): *Assemblymembers Joaquin Arambula, Lorena Gonzalez Fletcher, Mark Stone, Blanca Rubio, and Tony Thurmond*

MEMBERS – REPUBLICANS (2): *Assemblymembers Steven Choi, and Brian Maienschein*

SENATE HUMAN SERVICES COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: Non-budget bills relating to CalWORKs and other welfare programs; food stamps, now called State Nutrition Assistance Program (SNAP); child welfare and foster care; services and supports to persons with disabilities, including those funded through the 21 regional centers and the state's developmental centers; In-home Supportive Services (IHSS); community care licensing; and, social services and rehabilitative services.

CHAIR (NEW): *Senator Scott Wiener (Democrat - San Francisco)*

REPLACED: *Senator Mike McGuire (named chair of the Senate Governance and Finance Committee)*

VICE CHAIR: *Senator Tom Berryhill (Republican - Stanislaus)*

TOTAL MEMBERS: 5

MEMBERS – DEMOCRATS (3): *Senators Steve Glazer, Josh Newman, and Scott Wiener*

MEMBERS – REPUBLICANS (2): *Senators Tom Berryhill, and Janet Nguyen*

APPROPRIATIONS COMMITTEES

MAJOR CHANGES FOR 2017-2018 SESSION: No major changes for either committees. While any bill having significant financial impact has an uphill battle to get out of Appropriation Committees, the situation next year makes that uphill climb even steeper if not impossible - given the enormous potential federal and State budget uncertainty with the new incoming Trump Administration. Any policy bill that is deemed to have significant impact on the State – especially the State's general fund – will likely have a difficult time passing out of either of these committees – or will be forced to have the issue routed through the legislative budget process instead.

WHY THESE COMMITTEES ARE IMPORTANT: The two appropriation committees deals with hundreds of non-budget bills that pass out of a policy committee and that could have a certain level of financial impact on the State. This includes non-budget bills that cover every issue – health and human services, education, telecommunications, utilities and energy, housing and transportation, judiciary and public safety, and more that have indirect or direct impact on children and adults with disabilities (including developmental), people with mental health needs, people who are blind, seniors, low income individuals and families.

ASSEMBLY APPROPRIATIONS COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Lorena Gonzalez (Democrat - San Diego)*

VICE CHAIR (NO CHANGE): *Assemblymember Frank Bigelow (Republican – O'Neals)*

TOTAL MEMBERS: 17 (3 less than 2015-2016 session)

MEMBERS – DEMOCRATS (12): *Assemblymembers Richard Bloom (Democrat – Santa Monica), Raul Bocanegra (Democrat – San Fernando), Rob Bonta (Democrat – Alameda), Ian Calderon, Ed Chau (Democrat – Monterey Park), Susan Eggman, Laura Friedman, Eduardo Garcia, Lorena Gonzalez Fletcher, Adam Gray, Al Muratsuchi, and Eloise Reyes*

MEMBERS – REPUBLICANS (5): *Assemblymembers Frank Bigelow, Bill Brough, Vince Fong, James Gallagher, and Jay Obernolte*

SENATE APPROPRIATIONS COMMITTEE

CHAIR (NO CHANGE): *Senator Ricardo Lara (Democrat - Bell Gardens)*

VICE CHAIR: *Senator Patricia Bates (Republican - Laguna Niguel)*

TOTAL MEMBERS: 7

MEMBERS – DEMOCRATS (5): *Senators Jim Beall, Steve Bradford, Jerry Hill, Richard Lara, and Scott Wiener*

MEMBERS – REPUBLICANS (2): *Senators Patricia Bates and Jim Nielsen*

BUDGET COMMITTEES AND BUDGET SUBCOMMITTEES

MAJOR CHANGES FOR 2017-2018 SESSION: Biggest change occurred on the Senate side, with the selection of Senator Holly Mitchell as the new chair of the Senate Budget and Fiscal Review Committee, replacing termed

out Senator Mark Leno. That in turn created a vacancy in the chair position of the Senate Budget Subcommittee #3 on Health and Human Services that Mitchell held – and now will be filled by Senator Richard Pan. Senate President Pro Tem De Leon selected, as new chair of the Senate Budget Subcommittee #1 on Education, Senator Anthony Portantino (Democrat – La Canada-Flintridge) to replace now retired Senator Marty Block, who did not run for re-election in November.

On the Assembly side, the most significant change was newly elected Assemblymember Joaquin Arambula (son of a former Assemblymember) appointed as new chair of the Assembly Budget Subcommittee #1 on Health and Human Services, replacing Assemblymember Tony Thurmond.

WHY THESE COMMITTEES & SUBCOMMITTEES ARE IMPORTANT: With major uncertainty regarding federal funding, particularly dealing with federal funding under the Affordable Care Act, and also future of Medicaid (called Medi-Cal in California) and Medicare, the full budget committees and subcommittees will likely play a big role in determining – with the Brown Administration – the State's response in any changes in federal funding. In normal budget times, these two committees (and subcommittees) have an enormous direct impact on children and adults with disabilities (including developmental), people with mental health needs, people who are blind, seniors, low income individuals and families. In 2017 and in the coming years, the impact will likely be even greater.

ASSEMBLY BUDGET COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Phil Ting (Democrat - San Francisco)*

VICE CHAIR (NO CHANGE): *Assemblymember Jay Obernolte (Republican – Big Bear Lake)*

TOTAL MEMBERS: 29 (2 members more than 2015-2016 session)

MEMBERS – DEMOCRATS (18): *Assemblymembers Joaquin Arambula, Richard Bloom, Anna Caballero, David Chiu, Jim Cooper, Christina Garcia, Jacqui Irwin, Reginald Jones-Sawyer, Sr., Monique Limon, Kevin McCarty, Jose Medina, Kevin Mullin, Patrick O'Donnell, Blanca Rubio, Mark Stone, Phil Ting, Shirley Weber, and Jim Wood*

MEMBERS – REPUBLICANS (11): *Assemblymembers Travis Allen, Rocky Chavez, Steven Choi, Vince Fong, Matthew Harper, Tom Lackey, Devon Mathis, Melissa Melendez, Jay Obernolte, Jim Patterson, and Randy Voepel*

ASSEMBLY BUDGET SUBCOMMITTEE #1 ON HEALTH AND HUMAN SERVICES

CHAIR (NEW): *Assemblymember Joaquin Arambula (Democrat - Fresno) [newly elected]*

REPLACED: *Assemblymember Tony Thurmond*

TOTAL MEMBERS: 5

MEMBERS- DEMOCRATS (3): *Assemblymembers Joaquin Arambula, Blanca Rubio, and Jim Wood – Democratic Alternate Member: Phil Ting*

MEMBERS – REPUBLICANS (2): *Assemblymembers Matthew Harper, and Devon Mathis – Republican Alternate Member: Jay Obernolte*

ASSEMBLY BUDGET SUBCOMMITTEE #2 ON EDUCATION FINANCE

CHAIR (NO CHANGE): *Assemblymember Kevin McCarty (Democrat - Sacramento)*

TOTAL MEMBERS: 7

MEMBERS – DEMOCRATS (5): *Assemblymembers Jacqui Irwin, Monique Limon, Kevin McCarty, Jose Medina, and Patrick O'Donnell – Alternate Democratic Member: Phil Ting*

MEMBERS – REPUBLICANS (2): *Assemblymembers Rocky Chavez, and Randy Voepel – Alternate Republican Member: Jay Obernolte*

ASSEMBLY BUDGET SUBCOMMITTEE #3 ON RESOURCES AND TRANSPORTATION

CHAIR (NO CHANGE): *Assemblymember Richard Bloom (Democrat - Santa Monica)*

TOTAL MEMBERS: 5

MEMBERS – DEMOCRATS (3): *Assemblymembers Richard Bloom, Christina Garcia, and Kevin Mullin – Alternate Democratic Member: Phil Ting*

MEMBERS – REPUBLICANS (2): *Assemblymembers Rocky Chavez, and Randy Voepel – Alternate Republican Member: Jay Obernolte*

ASSEMBLY BUDGET SUBCOMMITTEE #4 ON STATE ADMINISTRATION

CHAIR (NEW): *Assemblymember Jim Cooper (Democrat - Elk Grove)*

REPLACED: *Assemblymember Adrin Nazarian*

TOTAL MEMBERS: 5

MEMBERS – DEMOCRATS (3): *Assemblymember Anna Caballero, David Chiu, and Jim Cooper – Alternate Democratic Member: Phil Ting*

MEMBERS – REPUBLICANS (2): *Assemblymembers Travis Allen, and Steven Choi – Alternate Republican Member: Jay Obernolte*

ASSEMBLY BUDGET SUBCOMMITTEE #5 ON PUBLIC SAFETY

CHAIR (NEW): *Assemblymember Shirley Weber (Democrat - San Diego)*

REPLACED: *Assemblymember Nora Campos (termed out)*

TOTAL MEMBERS: 5

MEMBERS – DEMOCRATS (3): *Assemblymembers Reginald Jones-Sawyer, Sr., Mark Stone, and Shirley Weber – Alternate Democratic Member: Phil Ting*

MEMBERS – REPUBLICANS (2): *Assemblymembers Tom Lackey, and Melissa Melendez – Alternate Republican Member: Jay Obernolte*

ASSEMBLY BUDGET SUBCOMMITTEE #6 ON BUDGET PROCESS, OVERSIGHT AND PROGRAM EVALUATION

CHAIR (NO CHANGE): *Assemblymember Phil Ting (Democrat - San Francisco)*

MEMBERS – DEMOCRATS (6): *Assemblymembers Joaquin Armabula, Richard Bloom, Jim Cooper, Kevin McCarty, Phil Ting, and Shirley Weber*

MEMBERS – REPUBLICANS (3): *Assemblymembers Travis Allen, Jay Obernolte, and Jim Patterson*

SENATE BUDGET AND FISCAL REVIEW COMMITTEE

CHAIR (NEW): *Senator Holly Mitchell (Democrat - Los Angeles)*

REPLACED: *Senator Mark Leno (termed out)*

VICE CHAIR (NO CHANGE): *Senator Jim Nielsen (Republican - Tehama)*

TOTAL MEMBERS: 17

MEMBERS – DEMOCRATS (12): *Senators Ben Allen, Jim Beall, Steve Glazer, Mike McGuire, Tony Mendoza, Holly Mitchell, Bill Monning, Richard Pan, Anthony Portantino, Richard Roth, Nancy Skinner, Bob Wieckowski*

MEMBERS – REPUBLICANS (5): *Senators Joel Anderson, John Moorlach, Janet Nguyen, Jim Nielsen, and Jeff Stone*

SENATE BUDGET SUBCOMMITTEE #1 ON EDUCATION

CHAIR (NEW): *Senator Anthony Portantino (Democrat – La Canada-Flintridge)*

REPLACED: *Senator Marty Block (retired)*

TOTAL MEMBERS: 3

MEMBERS – DEMOCRATS (2): *Senators Ben Allen, and Anthony Portantino*

MEMBER – REPUBLICAN (1): *Senator John Moorlach*

SENATE BUDGET SUBCOMMITTEE #2 ON RESOURCES, ENVIRONMENTAL PROTECTION, ENERGY AND TRANSPORTATION

CHAIR (NEW): *Senator Bob Wieckowski (Democrat – Fremont)*

REPLACED: *Senator Lois Wolk (termed out)*

VICE CHAIR: *Senator Jim Nielsen (Republican – Tehama)*

TOTAL MEMBERS: 4

MEMBERS – DEMOCRATS (3): *Senators Mike McGuire, Tony Mendoza, and Bob Wieckowski*

MEMBERS – REPUBLICANS (1): *Senator Jim Nielsen*

SENATE BUDGET SUBCOMMITTEE #3 ON HEALTH AND HUMAN SERVICES

CHAIR (NEW) *Senator Richard Pan (Democrat - Sacramento)*

REPLACED: *Senator Holly Mitchell (named as chair of Senate Budget & Fiscal Review Committee)*

TOTAL MEMBERS: 3

MEMBERS – DEMOCRATS (2): *Senators Bill Monning, and Richard Pan*

MEMBERS – REPUBLICANS (1): *Senator Jeff Stone*

SENATE BUDGET SUBCOMMITTEE #4 ON STATE ADMINISTRATION AND GENERAL GOVERNMENT

CHAIR (NO CHANGE): *Senator Richard Roth (Democrat – Riverside)*

MEMBERS – DEMOCRATS (2): *Senators Steve Glazer, and Richard Roth*

TOTAL MEMBERS: 3

MEMBERS – REPUBLICANS (1): *Senator Janet Nguyen*

SENATE BUDGET SUBCOMMITTEE #5 ON CORRECTIONS, PUBLIC SAFETY AND THE JUDICIARY

CHAIR (NEW): *Senator Nancy Skinner (Democrat - Berkeley)*

REPLACED: *Senator Loni Hancock (termed out)*

TOTAL MEMBERS: 3

MEMBERS – DEMOCRATS (2): *Senators Jim Beall, and Nancy Skinner*

MEMBERS – REPUBLICANS (1): *Senator Joel Anderson*

EDUCATION AND HIGHER EDUCATION COMMITTEES

MAJOR CHANGES FOR 2017-2018 SESSION: Biggest change happened in the Senate, with Senator Ben Allen replacing termed out Senator Carol Liu as chair of the Senate Education Committee.

WHY THESE COMMITTEES ARE IMPORTANT: All education (public and private) non-budget bills are run through these policy committees (including bill focusing on special education), including those having indirect or direct impact on people with disabilities (including developmental), mental health needs, the blind and low income families.

ASSEMBLY EDUCATION COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Patrick O'Donnell (Democrat - Long Beach)*

VICE CHAIR (NEW): *Assemblymember Rocky Chavez (Republican – Oceanside)*

REPLACED: *Assemblymember Kristin Olsen (termed out)*

TOTAL MEMBERS: 7

MEMBERS – DEMOCRATS (5): *Assemblymembers Todd Gloria, Kevin McCarty, Patrick O'Donnell, Tony Thurmond, and Shirley Weber*

MEMBERS – REPUBLICANS (2): *Assemblymembers Rocky Chavez, and Kevin Kiley*

SENATE EDUCATION COMMITTEE

BILLS THIS COMMITTEE REVIEWS: Non-budget bills relating to education, higher education, and certificated educational personnel, including those impacting special education for children with special needs and disabilities (including developmental), children with mental health needs. .

CHAIR (NEW): *Senator Ben Allen (Democrat - Santa Monica)*

REPLACED: *Senator Carol Liu (termed out)*

VICE CHAIR: *Senator Scott Wilk (Republican - Santa Clarita)*

TOTAL MEMBERS: 7

MEMBERS – DEMOCRATS (5): *Senators Ben Allen, Cathleen Galgiani, Connie Leyva, Tony Mendoza, and Richard Pan*

MEMBERS – REPUBLICANS: *Senators Andy Vidak, and Scott Wilk*

ASSEMBLY HIGHER EDUCATION COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Jose Medina (Democrat - Riverside)*

VICE CHAIR (NO CHANGE): *Assemblymember Catharine Baker (Republican – San Ramon)*

TOTAL MEMBERS: 13

MEMBERS – DEMOCRATS (9): *Assemblymembers Joaquin Arambula, Richard Bloom, Jaqui Irwin, Marc Levine, Evan Low, Jose Medina, Sharon Quirk-Silva, Miguel Santiago, and Shirley Weber*

MEMBERS – REPUBLICANS (4): *Assemblymembers, Catharine Baker, Rocky Chavez, Steven Choi, and Kevin Kiley*

HOUSING COMMITTEES

MAJOR CHANGES FOR 2017-2018 SESSION: No major changes to the standing committees.

WHY THESE COMMITTEES ARE IMPORTANT: The issue of affordable and accessible housing – not only for low income families and individuals across California – but low income people with disabilities (including developmental), people with mental health needs, the blind and seniors – have emerged in the last year as high priorities with the Legislature and the Brown Administration. The California Health and Human Services Agency Developmental Services Task Force has a workgroup focused on the issue of housing needs for people with developmental disabilities. The California Department of Housing and Community Development recently issued a notice on a series of stakeholder meetings early next year on the implementation of the "No Place Like Home" housing program for people with mental health needs who are homeless or at risk of chronic homelessness (people with disabilities – including developmental – often are also diagnosed with mental health needs, referred as "dual diagnosis"). That initiative was originally pushed by Senate President Pro Tem Kevin De Leon and backed by a bi-partisan group of Senate Democrats and Republicans. Assembly Democrats (and Republicans) also pushed forward housing initiatives last session.

ASSEMBLY HOUSING AND COMMUNITY DEVELOPMENT COMMITTEE

CHAIR (NO CHANGE): *Assemblymember David Chiu (Democrat - San Francisco)*

VICE CHAIR (NO CHANGE): *Assemblymember Marc Steinorth (Republican – Rancho Cucamonga)*

TOTAL MEMBERS: 7

MEMBERS – DEMOCRATS (5): *Assemblymembers Raul Bocanegra, Ed Chau, David Chiu, Ash Kalra, and Monique Limon*
MEMBERS – REPUBLICANS (2): *Assemblymembers Steven Choi, and Marc Steinorth*

SENATE TRANSPORTATION AND HOUSING COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: Bills relating to the operation, safety, equipment, transfer of ownership, licensing and registration of vehicles, aircraft, and vessels. Legislation affecting the Department of Transportation and the Department of Motor Vehicles. Bills relating to waterways, harbors, highways, public transportation systems, and airports. Bills relating to housing, including those that affect state housing programs for low- and moderate-income families (including people with disabilities and seniors), housing elements and land use approvals for housing developments, housing successor agencies and the housing obligations of infrastructure financing districts, manufactured housing, building codes and standards, and common interest developments.

CHAIR (NO CHANGE): *Senator Jim Beall (Democrat - San Jose)*

VICE CHAIR: *Senator Anthony Cannella (Republican - Ceres)*

TOTAL MEMBERS: 13

MEMBERS – DEMOCRATS (9): *Senators Ben Allen, Toni Atkins, Jim Beall, Mike McGuire, Tony Mendoza, Richard Roth, Nancy Skinner, Bob Wieckowski, and Scott Wiener*

MEMBERS – REPUBLICANS (4): *Senators Patricia Bates, Anthony Cannella, Ted Gaines, and Mike Morrell*

JUDICIARY AND PUBLIC SAFETY COMMITTEES

MAJOR CHANGES FOR 2017-2018 SESSION: Only major change is selection of newly elected Senator Nancy Skinner as chair of the Senate Public Safety Committee, replacing termed out Senator Loni Hancock.

WHY THESE COMMITTEES ARE IMPORTANT: The two Judiciary Committees are the likely policy committee to consider any bills relating to public accommodations access impacting people with disabilities, mental health needs, seniors and businesses. The Public Safety Committees are likely to have bills referred for review that cover crime victims and abuse – including those impacting people with disabilities (including developmental), people with mental health needs, the blind and seniors.

ASSEMBLY JUDICIARY COMMITTEE

WILL BILLS THIS COMMITTEE REVIEWS: Non-budget bills dealing with family law, product liability, tort liability, Civil Code, and Evidence Code (excluding criminal procedure).

CHAIR (NO CHANGE): *Assemblymember Mark Stone (Democrat – Scotts Valley)*

VICE CHAIR (NEW): *Assemblymember Jordan Cunningham (Republican – Templeton)*

TOTAL MEMBERS: 10

MEMBERS – DEMOCRATS (7): *Assemblymembers Ed Chau, Christina Garcia, Chris Holden, Ash Kalra, Eloise Reyes, Mark Stone, and Phil Ting*

MEMBERS – REPUBLICANS (3): *Assemblymembers Jordan Cunningham, Kevin Kiley, and Brian Maienschein*

SENATE JUDICIARY COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: Non-budget bills amending the Civil Code, Code of Civil Procedure, Evidence Code, Family Code, and Probate Code. Bills relating to courts, judges, and court personnel. Bills relating to liens, claims, and unclaimed property. Bills relating to privacy and consumer protection.

CHAIR (NO CHANGE): *Senator Hannah-Beth Jackson (Democrat - Santa Barbara)*

VICE CHAIR: *Senator John Moorlach (Republican - Costa Mesa)*

TOTAL MEMBERS: 7

MEMBERS – DEMOCRATS (5): *Senators Bob Hertzberg, Hannah-Beth Jackson, Bill Monning, Henry Stern, Bob Wieckowski*

MEMBERS – REPUBLICANS (2): *Senators Joel Anderson, and John Moorlach*

ASSEMBLY PUBLIC SAFETY COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Reginald Jones-Sawyer (Democrat - Los Angeles)*

VICE CHAIR (NEW): *Assemblymember Tom Lackey (Republican – Palmdale)*

REPLACED: *Assemblymember Melissa Melendez*

TOTAL MEMBERS: 7

MEMBERS – DEMOCRATS (5): *Assemblymembers Lorena Gonzalez Fletcher, Reginald Jones-Sawyer, Sr., Bill Quirk, Blanca Rubio, and Miguel Santiago*

MEMBERS – REPUBLICANS (2): *Assemblymembers Jordan Cunningham, and Tom Lackey*

SENATE PUBLIC SAFETY COMMITTEE

CHAIR (NEW): *Senator Nancy Skinner (Democrat - Berkeley)*

REPLACED: *Senator Loni Hancock (termed out)*

VICE CHAIR: *Senator Joel Anderson (Republican - San Diego)*

TOTAL MEMBERS: 7

MEMBERS - DEMOCRATS: *Senator Steve Bradford (Democrat - Gardena), Senator Hannah-Beth Jackson (Democrat - Santa Barbara), Senator Holly Mitchell (Democrat - Los Angeles), Senator Scott Wiener (Democrat - San Francisco)*

MEMBERS – REPUBLICANS: *Senator Jeff Stone (Republican - Temecula)*

LABOR, EMPLOYMENT AND ECONOMIC DEVELOPMENT COMMITTEES

MAJOR CHANGES FOR 2017-2018 SESSION: *Senator Steve Bradford (Democrat -Gardena) replaced Senator Tony Mendoza, who was named new chair of Senate Insurance Committee. Assemblymember Sharon Quirk-Silva was appointed as chair of the Assembly Jobs, Economic Developmental and the Economy Committee, replacing Assemblymember Eduardo Garcia.*

WHY THESE COMMITTEES ARE IMPORTANT: While most of the issues these three committees don't have a specific direct impact on people with disabilities, mental health needs, the blind, and seniors – there are direct impacts to low income families and individuals – many who provide services and supports to people with disabilities and others. In addition, there are sometimes bills that have indirect (or direct) impact on community based organizations that provide services and supports to those populations. Last year (SB 3 by Senator Mark Leno) and in 2013 (AB 10 by Assemblymember Luis Alejo), the Labor committees played a pivotal role regarding landmark legislation that increased the State's minimum wage. Those committees also considered previous versions of those bills – all of which have major sweeping impact not only on California – but also community-based organizations and individuals who provide supports and services to people with disabilities (including developmental), people with mental health needs, the blind, seniors, low income families and others.

ASSEMBLY JOBS, ECONOMIC DEVELOPMENT, AND THE ECONOMY COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: Primary jurisdictions are non-budget bills dealing with business advocacy within California and the United States; business advocacy of import/export trade; California-Mexico relations; California overseas trade offices; Governor's Office of Business and Economic Development; development and expansion of new technologies, except energy; development of international high tech markets; economic disaster relief; economic impact reports; effect of balance of trade issues on California; expansion of overseas markets; foreign investments by California; foreign investments in California; impacts of federal budget on high tech projects; impacts of federal budget on international trade; industrial innovation and research; international capital, including capital formation; international trade, research and import/export finance; interstate commerce; seaports and physical infrastructure; sister state agreements and friendship agreements with other nations; small business development and operations; state and local economic development; women and minority business enterprises (WBME).

CHAIR (NEW): *Assemblymember Sharon Quirk-Silva (Democrat - Fullerton)*

REPLACED: *Assemblymember Eduardo Garcia*

VICE CHAIR (NEW): *Assemblymember Travis Allen (Republican – Huntington Beach)*

REPLACED: *Assemblymember Young Kim (defeated for re-election)*

TOTAL MEMBERS: 7 (2 members less than 2015-2016 session)

MEMBERS – DEMOCRATS (5): *Assemblymembers Marc Berman, Sabrina Cervantes, Timothy Grayson, Sharon Quirk-Silva, and Freddie Rodriguez*

MEMBERS – REPUBLICANS (2): *Assemblymembers Travis Allen, and Marc Steinorth*

ASSEMBLY LABOR AND EMPLOYMENT COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: Non-budget bills dealing with wages, hours, employment discrimination, Cal-OSHA, employment development, and public job programs.

CHAIR (NO CHANGE): *Assemblymember Tony Thurmond (Democrat - Richmond)*

VICE CHAIR (NEW): *Assemblymember Heath Flora (Republican – Modesto)*

REPLACED: *Assemblymember Jim Patterson*

TOTAL MEMBERS: 7

MEMBERS – DEMOCRATS (5): *Assemblymembers Jimmy Gomez, Ash Kalra, Kevin McCarty, Eloise Reyes, and Tony Thurmond*

MEMBERS – REPUBLICANS (2): *Assemblymembers Heath Flora, and Matthew Harper*

SENATE LABOR AND INDUSTRIAL RELATIONS COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: Bills (including those impacting workers who provide supports and services to people with disabilities, mental health needs, and seniors) relating to labor, industrial safety, unemployment, workers' compensation and insurance, and noncertificated public school employees.

CHAIR (NEW): *Senator Steve Bradford (Democrat - Gardena)*
REPLACED: *Senator Tony Mendoza (named new chair of Senate Insurance Committee)*
VICE CHAIR: *Senator Jeff Stone (Republican - Temecula)*
TOTAL MEMBERS: 5
MEMBERS – DEMOCRATS (4): *Senators Toni Atkins, Steve Bradford, Hannah-Beth Jackson, and Holly Mitchell*
MEMBERS – REPUBLICANS (1): *Senator Jeff Stone*

TRANSPORTATION COMMITTEES

ASSEMBLY TRANSPORTATION COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: Non-budget bills dealing with Transit Authority, California Highway Patrol, vehicles, aircraft, and vessels; operation, licensing and registration, and drivers licenses.

CHAIR (NO CHANGE): *Assemblymember Jim Frazier (Democrat - Oakley)*

VICE CHAIR (NEW): *Assemblymember Vince Fong (Republican – Bakersfield)*

REPLACED: *Assemblymember Eric Linder (defeated for re-election)*

TOTAL MEMBERS: 14 (2 members less than in 2015-2016 session)

MEMBERS – DEMOCRATS (10): *Assemblymembers Cecilia Aguiar-Curry, Marc Berman, Raul Bocanegra, Kansen Chu, Tom Daly, Jim Frazier, Laura Friedman, Jose Medina, Adrin Nazarian, and Patrick O'Donnell*

MEMBERS – REPUBLICANS (4): *Assemblymembers Catharine Baker, Vince Fong, Matthew Harper, and Devon Mathis*

SENATE TRANSPORTATION AND HOUSING COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: Bills relating to the operation, safety, equipment, transfer of ownership, licensing and registration of vehicles, aircraft, and vessels. Legislation affecting the Department of Transportation and the Department of Motor Vehicles. Bills relating to waterways, harbors, highways, public transportation systems, and airports. Bills relating to housing, including those that affect state housing programs for low- and moderate-income families (including people with disabilities and seniors), housing elements and land use approvals for housing developments, housing successor agencies and the housing obligations of infrastructure financing districts, manufactured housing, building codes and standards, and common interest developments.

CHAIR (NO CHANGE): *Senator Jim Beall (Democrat - San Jose)*

VICE CHAIR: *Senator Anthony Cannella (Republican - Ceres)*

TOTAL MEMBERS: 13

MEMBERS – DEMOCRATS (9): *Senators Ben Allen, Toni Atkins, Jim Beall, Mike McGuire, Tony Mendoza, Richard Roth, Nancy Skinner, Bob Wieckowski, and Scott Wiener*

MEMBERS – REPUBLICANS (4): *Senators Patricia Bates, Anthony Cannella, Ted Gaines, and Mike Morrell*

UTILITIES AND TELECOMMUNICATIONS COMMITTEES

MAJOR CHANGES FOR 2017-2018 SESSION: Assembly split the Assembly Utilities and Commerce Committee into two standing committees – one focusing on telecommunications, broadband, limousine services and related services – and the other focusing on other utilities including gas, electric and other energy related issues.

WHY THESE COMMITTEES ARE IMPORTANT: Many broadband, utility, energy, and telecommunication related bills have impact on people with disabilities, mental health needs and seniors.

ASSEMBLY COMMUNICATIONS AND CONVEYANCE COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: This new committee will review non-budget bills relating to telecommunications, broadband, limousine services, and related services and businesses – all previously issues that were heard in the Assembly Utilities and Commerce Committee (now renamed the Assembly Utilities and Energy Committee).

CHAIR (NEW): *Assemblymember Miguel Santiago (Democrat - Los Angeles)*

REPLACED: *This is a new standing committee - did not exist previously*

VICE CHAIR (NEW): *Assemblymember Jay Obernolte (Republican – Big Bear Lake)*

REPLACED: *This is a new standing committee - did not exist previously*

TOTAL MEMBERS: 13 (new committee)

MEMBERS – DEMOCRATS (9): *Assemblymembers Rob Bonta, Sabrina Cervantes, Matthew Dababneh, Eduardo Garcia, Chris Holden, Evan Low, Freddie Rodriguez, Miguel Santiago, and Jim Wood*

MEMBERS – REPUBLICANS (4): *Assemblymembers Tom Lackey, Brian Maienschein, Jay Obernolte, and Jim Patterson*

ASSEMBLY UTILITIES AND ENERGY COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: Primary jurisdictions are bills dealing with public utilities; the California Public Utilities Commission; the California Energy Commission; the California Independent System Operator; Electricity Oversight Board; energy companies; common carriers; electricity; alternative energy development and conservation; natural gas; wireless, wireline and cable communications; international trade; Women and Minority Business Enterprises; and tourism. CDCAN Note: this overview of the committee's jurisdiction was taken from the committee's webpage as of December 28th, and may not reflect the changes that will occur following the split of the old Assembly Utilities and Commerce Committee into two committees – this one and the new Assembly Communications and Conveyance Committee. Not certain if wireless and cable communications would go to that communication or the Utilities and Energy Committee.

CHAIR (NEW): *Assemblymember Chris Holden (Democrat - Pasadena)*

REPLACED: *Assemblymember Mike Gatto (termed out)*

VICE CHAIR (NO CHANGE): *Assemblymember Jim Patterson (Republican – Fresno)*

TOTAL MEMBERS: 15

MEMBERS – DEMOCRATS (10): *Assemblymembers Autumn Burke, Susan Eggman Christina Garcia, Eduardo Garcia, Chris Holden, Al Muratsuchi, Bill Quirk, Eloise Reyes, Miguel Santiago, and Phil Ting0*

MEMBERS – REPUBLICANS (5): *Assemblymembers Rocky Chavez, Phillip Chen, Brian Dahle, Vince Fong, and Jim Patterson*

SENATE ENERGY, UTILITIES AND COMMUNICATIONS COMMITTEE

WHAT BILLS THIS COMMITTEE REVIEWS: Bills relating to utilities, energy companies, alternative energy development and conservation, and communications development and technology.

CHAIR (NO CHANGE): *Senator Ben Hueso (Democrat - San Diego)*

VICE CHAIR: *Senator Mike Morrell (Republican - Inland Empire)*

TOTAL MEMBERS: 11

MEMBERS – DEMOCRATS (8): *Senators Steve Bradford, Bob Hertzberg, Jerry Hill, Ben Hueso, Mike McGuire, Nancy Skinner, Henry Stern, and Scott Wiener*

MEMBERS – REPUBLICANS (3): *Senators Anthony Cannella, Ted Gaines, and Mike Morrell*

OTHER COMMITTEES:

ACCOUNTABILITY AND AUDIT COMMITTEES

ASSEMBLY ACCOUNTABILITY AND ADMINISTRATIVE REVIEW COMMITTEE

CHAIR (NEW): *Assemblymember Susan Eggman (Democrat - Stockton)*

REPLACED: *Assemblymember Christina Garcia (appointed chair of Assembly Natural Resources Committee)*

VICE CHAIR (NO CHANGE): *Assemblymember Tom Lackey (Republican – Palmdale)*

TOTAL MEMBERS: 7 (2 members less than 2015-2016 session)

MEMBERS: *Assemblymembers Autumn Burke, Susan Eggman, Heath Flora, Jim Frazier, Tom Lackey, Jose Medina, and Sharon Quirk-Silva*

JOINT LEGISLATIVE AUDIT COMMITTEE

CHAIR (NEW): *Assemblymember Al Muratsuchi (Democrat - Torrance)*

REPLACED: *Assemblymember Freddie Rodriguez*

TOTAL MEMBERS: 14 (7 Assemblymembers and 7 State Senators)

MEMBERS – ASSEMBLY: *Assemblymembers Dante Acosta, Catharine Baker, Al Muratsuchi, Adrin Nazarian, Jay Obermolte, Blanca Rubio, and Jim Wood*

MEMBERS – SENATE: *not yet appointed by Senate Rules Committee (as of January 24, 2017)*

AGRICULTURE COMMITTEES

ASSEMBLY AGRICULTURE COMMITTEE

CHAIR (NEW): *Assemblymember Anna Caballero (Democrat - Salinas)*

REPLACED: *Assemblymember Bill Dodd (elected to State Senate)*

MEMBERS: Not yet appointed

SENATE AGRICULTURE COMMITTEE

CHAIR (NO CHANGE): *Senator Cathleen Galgiani (Democrat - Stockton)*

VICE CHAIR: *Senator Scott Wilk (Republican - Santa Clarita)*

MEMBERS: *Senator Tom Berryhill (Republican - Stanislaus), Senator Bill Dodd (Democrat - Napa), Senator Richard Pan (Democrat - Sacramento)*

ARTS, ENTERTAINMENT & INTERNET MEDIA COMMITTEES

ASSEMBLY ARTS, ENTERTAINMENT, SPORTS, TOURISM, AND INTERNET MEDIA COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Kansen Chu (Democrat - San Jose)*

VICE CHAIR (NEW): *Assemblymember Marie Waldron (Republican – Escondido)*

REPLACED: *Assemblymember Jay Obernolte*

TOTAL MEMBERS: 7

MEMBERS: *Assemblymembers Dante Acosta, David Chiu, Kasen Chu, Laura Friedman, Jose Medina, Adrin Nazarian, and Marie Waldron*

BANKING COMMITTEES

ASSEMBLY BANKING AND FINANCE COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Matthew Dababneh (Democrat - Encino)*

VICE CHAIR (NEW): *Assemblymember Phillip Chen (Republican – Brea)*

REPLACED: *Assemblymember Travis Allen*

TOTAL MEMBERS: 11 (1 member less than 2015-2016 session)

MEMBERS: *Assemblymembers Autumn Burke, Sabrina Cervantes, Phillip Chen, Matthew Dababneh, Timothy Grayson, Monique Limon, Melissa Melendez, Sebastian Ridley-Thomas, Marc Steinorth, Mark Stone, and Shirley Weber*

SENATE BANKING AND FINANCIAL INSTITUTIONS COMMITTEE

CHAIR (NEW): *Senator Bill Dodd (Democrat - Napa)*

REPLACED: *Senator Steve Glazer (named chair of Senate Governmental Organization Committee)*

VICE CHAIR: *Senator Andy Vidak (Republican - Hanford)*

TOTAL MEMBERS: 7

MEMBERS: *Senators Bill Dodd, Cathleen Galgiani, Ben Hueso, Ricardo Lara, Anthony Portantino, Mike Morrell, and Andy Vidak*

BUSINESS, PROFESSIONS, CONSUMER PROTECTION AND PRIVACY COMMITTEES

ASSEMBLY BUSINESS AND PROFESSIONS COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Rudy Salas (Democrat - Bakersfield)*

VICE CHAIR (NO CHANGE): *Assemblymember Bill Brough (Republican – Dana Point)*

TOTAL MEMBERS: 16

MEMBERS: *Assemblymembers Joaquin Arambula, Catharine Baker, Richard Bloom, Bill Brough, David Chiu, Jordan Cunningham, Brian Dahle, Susan Eggman, Mike Gipson, Timothy Grayson, Chris Holden, Evan Low, Kevin Mullin, Rudy Salas, Jr., Marc Steinorth, and Phil Ting*

SENATE BUSINESS, PROFESSIONS AND ECONOMIC DEVELOPMENT COMMITTEE

CHAIR (NO CHANGE): *Senator Jerry Hill (Democrat - San Mateo)*

VICE CHAIR: *Senator Patricia Bates (Republican - Laguna Niguel)*

TOTAL MEMBERS: 9

MEMBERS: *Senators Patricia Bates, Bill Dodd, Cathleen Galgiani, Steve Glazer, Ed Hernandez, Jerry Hill, Josh Newman, Richard Pan, Scott Wilk*

ASSEMBLY PRIVACY AND CONSUMER PROTECTION COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Ed Chau (Democrat- Monterey Park)*

VICE CHAIR

TOTAL MEMBERS: 10

MEMBERS: *Not yet appointed*

ELECTIONS, CONSTITUTIONAL AMENDMENTS, AND REDISTRICTING COMMITTEES

ASSEMBLY ELECTIONS AND REDISTRICTING COMMITTEE

CHAIR (NEW): *Assemblymember Evan Low (Democrat - Silicon Valley)*

REPLACED: *Assemblymember Shirley Weber (appointed chair of Assembly Budget Subcommittee #5 on Public Safety)*

VICE CHAIR (NO CHANGE): *Assemblymember Matthew Harper (Republican – Huntington Beach)*

TOTAL MEMBERS: 7

MEMBERS: *Assemblymembers Marc Berman, Ian Calderon, Jordan Cunningham, Matthew Harper, Evan Low, Kevin Mullen, and Shirley Weber*

SENATE ELECTIONS AND CONSTITUTIONAL AMENDMENTS COMMITTEE

CHAIR (NEW): *Senator Henry Stern (D-Canoga Park)*

REPLACED: *Senator Ben Allen (named chair of Senate Education Committee)*

VICE CHAIR: *Senator Joel Anderson (R-San Diego)*

TOTAL MEMBERS: 5

MEMBERS: *Senators Ben Allen, Joel Anderson, Bob Hertzberg, Connie Leyva, and Henry Stern*

ENVIRONMENTAL, NATURAL RESOURCES, WATER, PARKS COMMITTEES

ASSEMBLY ENVIRONMENTAL SAFETY AND TOXIC MATERIALS COMMITTEE

CHAIR (NEW): *Assemblymember Bill Quirk (Democrat - Hayward)*

REPLACED: *Assemblymember Luis Alejo (termed out)*

VICE CHAIR (NO CHANGE): *Assemblymember Brian Dahle (Republican – Bieber)*

TOTAL MEMBERS: 7

MEMBERS: *Assemblymembers Joaquin Arambula, Phillip Chen, Brian Dahle, Christina Garcia, Jimmy Gomez, Chris Holden, and Bill Quirk*

SENATE ENVIRONMENTAL QUALITY COMMITTEE

CHAIR (NO CHANGE): *Senator Bob Wieckowski (D-Fremont)*

VICE CHAIR: *Senator Andy Vidak (R-Hanford)*

TOTAL MEMBERS: 7

MEMBERS: *Senators Patricia Bates, Jerry Hill, Ricardo Lara, Nancy Skinner, Henry Stern, Andy Vidak, and Bob Wieckowski*

ASSEMBLY NATURAL RESOURCES COMMITTEE

CHAIR (NEW): *Assemblymember Cristina Garcia (Democrat - Bell Gardens)*

REPLACED: *Assemblymember Das Williams (termed out)*

VICE CHAIR (NEW): *Assemblymember Dante Acosta (Republican – Valencia)*

REPLACED: *Assemblymember Brian Jones (termed out)*

TOTAL MEMBERS: 10 (1 member more than 2015-2016 session)

MEMBERS: *Assemblymembers Dante Acosta, Travis Allen, Ed Chau, Susan Eggman, Heath Flora, Christina Garcia, Monique Limon, Kevin McCarty, Al Muratsuchi, and Mark Stone*

SENATE NATURAL RESOURCES AND WATER COMMITTEE

CHAIR (NEW): *Senator Bob Hertzberg (D-Los Angeles)*

REPLACED: *Senator Fran Pavley (termed out)*

VICE CHAIR: *Senator Jeff Stone (R-Temecula)*

TOTAL MEMBERS:

MEMBERS: *Senators Ben Allen, Toni Atkins, Bob Hertzberg, Ben Hueso, Hannah-Beth Jackson, Bill Monning, Henry Stern, Jeff Stone, and Andy Vidak*

ASSEMBLY WATER, PARKS, AND WILDLIFE COMMITTEE

CHAIR (NEW): *Assemblymember Eduardo Garcia (Democrat -Coachella)*

REPLACED: *Assemblymember Marc Levine*

VICE CHAIR (NO CHANGE): *Assemblymember James Gallagher (Republican – Yuba City)*

TOTAL MEMBERS: 15

MEMBERS: *Assemblymembers Frank Bigelow, Steven Choi, Kansen Chu, Laura Friedman, James Gallagher, Eduardo Garcia, Todd Gloria, Jimmy Gomez, Matthew Harper, Marc Levine, Devon Mathis, Blanca Rubio, Rudy Salas, Jr., Tony Thurmond, and Jim Wood*

GOVERNANCE AND FINANCE, GOVERNMENTAL ORGNIZATION, LOCAL GOVERNMENT, REVENUE AND TAXATION COMMITTEES

SENATE GOVERNANCE AND FINANCE COMMITTEE

CHAIR (NEW): *Senator Mike McGuire (D-Healdsburg)*

REPLACED: *Senator Bob Hertzberg (named chair of Senate Natural Resources and Water Committee)*

VICE CHAIR: *Senator Janet Nguyen (R-Garden Grove)*

TOTAL MEMBERS: 7

MEMBERS: *Senators Jim Beall, Ed Hernandez, Bob Hertzberg, Ricardo Lara, Mike McGuire, John Moorlach, and Janet Nguyen*

CDCAN NOTE: This standing committee combines (change occurred previous session) the old standing committees on Senate Local Government and Senate Revenue and Taxation.

ASSEMBLY GOVERNMENTAL ORGANIZATION COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Adam Gray (Democrat - Merced)*

VICE CHAIR (NO CHANGE): *Assemblymember Frank Bigelow (Republican – O'Neals)*

TOTAL MEMBERWS: 20 (1 member less than 2015-2016 session)

MEMBERS: *Assemblymembers Dante Acosta, Ceclia Aguiar-Curry, Rob Bonta, Frank Bigelow, Bill Brough, Ken Cooley, Jim Cooper, Tom Daly, James Gallagher, Eduardo Garcia, Mike Gipson, Todd Gloria, Adam Gray, Reginald Jones-Sawyer, Sr., Kevin Kiley, Marc Levine, Evan Low, Blanca Rubio, Rudy Salas, Jr., and Marie Waldron*

SENATE GOVERNMENTAL ORGANIZATION COMMITTEEE

CHAIR (NEW): *Senator Steve Glazer (Democrat - Contra Costa)*

REPLACED: *Senator Isadore Hall*

VICE CHAIR: *Senator Tom Berryhill (Republican - Stanislaus)*

TOTAL MEMBERS: 13

MEMBERS: *Senators Tom Berryhill, Steve Bradford, Anthony Cannella, Bill Dodd, Ted Gaines, Cathleen Gaigiani, Steve Glazer, Jerry Hill, Ben Hueso, Ricardo Lara, Tony Mendoza, Anthony Portantino, Andy Vidak*

ASSEMBLY LOCAL GOVERNMENT COMMITTEE

CHAIR (NEW): *Assemblymember Cecilia Aguiar-Curry (Democrat - Winters)*

REPLACED: *Assemblymember Susan Eggman*

VICE CHAIR (NO CHANGE): *Assemblymember Marie Waldron (Republican – Escondido)*

TOTAL MEMBERS: 9

MEMBERS: *Assemblymembers Ceclia Aguiar-Curry, Richard Bloom, Anna Caballero, Lorena Gonzalez Fletcher, Timothy Grayson, Tom Lackey, Sebastian Ridley-Thomas, Randy Voepel, and Marie Waldron*

ASSEMBLY REVENUE AND TAXATION COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Sebastian Ridley-Thomas (Democrat - Los Angeles)*

VICE CHAIR (NO CHANGE): *Assemblymember Bill Brough (Republican – Dana Point)*

TOTAL MEMBERS: 10 (1 member more than 2015-2016 session)

MEMBERS: *Assemblymembers Travis Allen, Raul Bocanegra, Autumn Burke, Bill Brough, Phillip Chen, Matthew Dababneh, Mike Gipson, Kevin Mullen, Bill Quirk, and Sebastian Ridley-Thomas*

INSURANCE COMMITTEES

ASSEMBLY INSURANCE COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Tom Daly (Democrat - Anaheim)*

VICE CHAIR (NO CHANGE): *Assemblymember Melissa Melendez (Republican – Lake Elsinore)*

TOTAL MEMBERS: 13

MEMBERS: *Assemblymembers Frank Bigelow, Anna Caballero, Ian Calderon, Kansen Chu, Ken Cooley, Jim Cooper, Matthew Dababneh, Brian Dahle Tom Daly, Jim Frazier, Mike Gipson, Melissa Melendez, and Randy Voepel*

SENATE INSURANCE COMMITTEE

CHAIR (NEW): *Senator Tony Mendoza (Democrat - Artesia)*

REPLACED: *Senator Richard Roth*

VICE CHAIR: *Senator Ted Gaines (Republican - El Dorado)*

TOTAL MEMBERS: 9

MEMBERS: *Senators Tom Berryhill, Ted Gaines, Steve Glazer, Ed Hernandez, Tony Mendoza, Holly Mitchell, Josh Newman, Anthony Portantino, and Richard Roth*

LEGISLATIVE ETHICS COMMITTEES

ASSEMBLY LEGISLATIVE ETHICS COMMITTEE

CO-CHAIR (NEW): *Assemblymember Eloise Reyes (Democrat - San Bernardino)*

REPLACED: *Assemblymember Ken Cooley*

CO-CHAIR (NEW): *Assemblymember Jim Patterson (Republican – Fresno)*

REPLACED: *Assemblymember Brian Jones (termed out)*

TOTAL MEMBERS: 6

MEMBERS: *Assemblymembers Marc Berman, Heath Flora, Christina Garcia, Jim Patterson, Eloise Reyes, and Marie Waldron*

SENATE LEGISLATIVE ETHICS COMMITTEE

CHAIR (NEW): *Senator Ed Hernandez (Democrat - West Covina)*

REPLACED: *Senator Bill Monning*

VICE CHAIR: *Senator Mike Morrell (Republican - Inland Empire)*

TOTAL MEMBERS: 6

MEMBERS: *Senators Patricia Bates, Ted Gaines, Ed Hernandez, Bill Monning, Mike Morrell, and Bob Wieckowski*

PUBLIC EMPLOYMENT AND RETIREMENT COMMITTEES

ASSEMBLY PUBLIC EMPLOYEES, RETIREMENT, AND SOCIAL SECURITY COMMITTEE

CHAIR (NEW): *Assemblymember Freddie Rodriguez (Democrat - Pomona)*

REPLACED: *Assemblymember Rob Bonta*

VICE CHAIR (NEW): *Assemblymember Travis Allen (Republican – Huntington Beach)*

TOTAL MEMBERS: 7

MEMBERS: *Assemblymembers Travis Allen, Bill Brough, Sabrina Cervantes, Ken Cooley, Jim Cooper, Patrick O'Donnell, and Freddie Rodriguez*

SENATE PUBLIC EMPLOYMENT AND RETIREMENT COMMITTEE

CHAIR (NO CHANGE): *Senator Richard Pan (Democrat - Sacramento)*

VICE CHAIR: *Senator Mike Morrell (Republican - Inland Empire)*

TOTAL MEMBERS: 5

MEMBERS: *Senators Connie Leyva, John Moorlach, Mike Morrell, Richard Pan, and Anthony Portantino*

RULES COMMITTEES

WHY THESE COMMITTEES ARE IMPORTANT: While the Assembly Rules Committee is mostly an internal administrative committee for the Assembly – the Senate Rules Committee has another role that can have direct impact on people with disabilities (including developmental), people with mental health needs, the blind, seniors, low income families and individuals, with their role in recommending to the Senate floor the confirmation of appointees of the Governor. This includes appointees who fill the positions of the various agencies and departments – including Department of Health Care Services, Department of Developmental Services, Department of Aging, Department of Rehabilitation, Department of Social Services, etc.

Except for confirming appointees by the Governor for state constitutional offices – such as a vacancy in the office of Attorney General that requires approval of both houses – the State Senate has sole authority regarding confirmation of regular appointees of the Governor.

ASSEMBLY RULES COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Ken Cooley (Democrat - Rancho Cordova)*

VICE CHAIR (NEW): *Assemblymember Jordan Cunningham (Republican – Templeton)*

REPLACED: *Assemblymember Ling Ling Chang (ran unsuccessfully for State Senate)*

TOTAL MEMBERS: 11

MEMBERS: *Assemblymembers Marc Berman, Bill Brough, Sabrina Cervantes, Phillip Chen, Ken Cooley, Jordan Cunningham, Laura Friedman, Timothy Grayson, Marc Levine, Adrin Nazarian and Marie Waldron*

Alternate Member – Democratic::Jimmy Gomez

Alternate Member – Republican: Vince Fong

MEMBERS – REPUBLICANS:

SENATE RULES COMMITTEE

CHAIR (NO CHANGE): *Senator Kevin de León (Democrat - Los Angeles)*

VICE CHAIR: *Senator Anthony Cannella (Republican - Ceres)*

TOTAL MEMBERS: 5

MEMBERS: *Senators Toni Atkins, Tom Berryhill, Anthony Cannella, Kevin De Leon, and Connie Leyva*

VETERANS COMMITTEES

ASSEMBLY VETERANS AFFAIRS COMMITTEE

CHAIR (NO CHANGE): *Assemblymember Jacqui Irwin (Democrat - Thousand Oaks)*
VICE CHAIR (NO CHANGE): *Assemblymember Rocky Chavez (Republican – Oceanside)*
TOTAL MEMBERS: 10 (1 member more than 2015-2016 session)
MEMBERS: *Assemblymembers Rocky Chavez, Tom Daly, Jim Frazier, Todd Gloria, Jacqui Irwin, Devon Mathis, Al Muratsuchi, Sharon Quirk-Silva, Rudy Salas, Jr., and Randy Voepel*

SENATE VETERANS AFFAIRS COMMITTEE

CHAIR (NEW): *Senator Josh Newman (Democrat - Fullerton)*
REPLACED: *Senator Jim Nielsen (Republican – Tehama)*
VICE CHAIR: *Senator Jim Nielsen (Republican - Tehama)*
MEMBERS: *Senators Bill Dodd, Ben Hueso, Josh Newman, Jim Nielsen, Janet Nguyen, Richard Roth, and Scott Wilk*

CDCAN - MARTY OMOTO YOUTUBE CHANNEL

A CDCAN (Marty Omoto, family member and advocate) youtube channel was set up and has several videos dealing with current – and previous state budget issues, disability and senior rights, and advocacy.

To see the current videos, including March 2014 San Andreas Regional Center Aptos Legislative Breakfast, January 2014 panel discussion on services for adults with autism spectrum and related disorders in Palo Alto, and older videos including video of April 2003 march of over 3,000 people with developmental disabilities, families, providers, regional centers and others from the Sacramento Convention Center to the State Capitol (to attend and testify at budget hearing on proposed massive permanent cuts to regional center funded services, go to the CDCAN (Marty Omoto) Channel at: <https://www.youtube.com/channel/UCEySEyhnr9LQRiCe-F7ELhg>

More videos – including new current videos (an interview with longtime advocate Maggie Dee Dowling is planned, among others) – plus archive videos of past events – will be posted soon.

ALERT: PLEASE HELP!!!!!!

JANUARY 24, 2017 – TUESDAY EVENING

PLEASE HELP CDCAN CONTINUE ITS WORK

CDCAN Townhall Telemeetings, CDCAN Reports and Alerts and other activities cannot continue without YOUR help. To continue the CDCAN website and the CDCAN Reports and Alerts sent out and read by over 65,000 people and organizations, policy makers and media across the State, and to continue and resume CDCAN Townhall Telemeetings, trainings and other events, please send your contribution/donation (please make check payable to "CDCAN" or "California Disability Community Action Network" and mail to:

CDCAN – MAILING ADDRESS:

1500 West El Camino Avenue Suite 499

Sacramento, CA 95833

Office Line: 916-418-4745

CDCAN Cell Phone: 916-757-9549

Email – NEW: martyomoto@att.net [replaced as of June 1, 2016 martyomoto@rcip.com]

Many, many thanks to all the organizations and individuals for their continued support that make these reports and other CDCAN efforts possible!



980 9th Street, Suite 1450, Sacramento, California 95814 • 916.446.7961 • www.arcanet.org

February 22, 2017

Senator Richard Pan
Chair, Senate Budget Subcommittee #3 on Health and Human Services
State Capitol, Room 5114
Sacramento, CA 95814-4900

Assembly Member Joaquin Arambula
Chair, Assembly Committee on Budget, Subcommittee #1 on Health and Human Services
P.O. Box 942849
Sacramento, CA 94249-0031

RE: Department of Developmental Services - Governor's 2017-18 Proposed Budget

Honorable Senator Pan and Assembly Member Arambula:

The Association of Regional Center Agencies (ARCA) represents the nonprofit regional centers that serve over 300,000 Californian children and adults with developmental disabilities. We thank you for this opportunity to comment on the Governor's proposed Budget for FY 2017-18 for the Department of Developmental Services (DDS).

ARCA appreciates the Administration's decision to develop a budget that is based on current federal funding formulas. It is too early to speculate about the impact of potential changes to the Affordable Care Act or the restructuring of Medicaid.

Lanterman Coalition Priorities

As detailed below, ARCA is pleased to join with the Lanterman Coalition, which represents a broad group of stakeholders from California's developmental services community, in putting forward the following priorities this year:

- Prevent the loss of federal funds that would result from noncompliance with the new federal Home and Community-Based Services rules;
- Restructure state and community-based agency responsibilities by expeditiously completing the closure of the developmental centers, and thus also recapturing federal funding currently suspended due to challenges in the developmental centers through providing timely and sufficient funds to assure community services are available to consumers moving out of the developmental centers and retaining state funds and assets currently devoted to the developmental centers and utilizing them for the community-based system;
- Guarantee funding required for compliance with federal, state and local mandates;

- Save community-based services that otherwise would close and would cost the state more to replace; and,
- Assure that the state selects a consultant for the 2019 rate methodology study who will incorporate the actual costs for delivering quality community services.

Current Year Funding

The January Budget proposes a net \$38M (GF) decrease in community services funding, due to slower-than-projected growth in purchase of service (POS) expenditures. ARCA appreciates the Administration's commitment to not decrease POS funds if the surplus is not realized. The Administration is proposing \$27M of the surplus funds be used to address a shortfall related to the operation of the state's developmental centers' (DCs).

Should there be any surplus POS funds, ARCA requests that instead there be a reappropriation from FY 2016-17 to address unmet community service needs. Underfunding and various funding restrictions have created an environment in which an increasing number of needs are unmet, which has led to the POS surplus. ARCA is compiling recent data from regional centers regarding service provider closures and unmet needs in their areas. Retention of any Current Year POS surplus for start-up costs and median rate relief would jumpstart the development of necessary services for unserved or underserved individuals.

Going forward, ARCA supports the proposed Trailer Bill Language that would allow regional centers to fund program start-up for needed community programs by using Community Placement Plan funds more flexibly. In order to be most effective, these funds should be available for start-up costs and to allow regional centers to pay sufficient rates for these services. As the function of this funding is shifting to enhancing the community at large, it should be renamed "Community Development Funds."

FY 2017-18 – Purchase of Service

California's developmental services system supports approximately 78% of individuals with developmental disabilities to remain living at home with their families, compared to 57% of people served by similar systems nationwide. Part of the key to this success is the provision of family support services. Some family support services, such as camp and social recreation services were eliminated in 2009, while caps were put on respite services regardless of individual need. These were services that families relied heavily on to enable them to maintain individuals at home, but the limitations on these services makes this increasingly difficult to achieve. Reinvestment in family support services is meaningful and cost-effective.

ARCA appreciates the proposed growth in POS in response to increases in the state's minimum wage. Service providers and regional centers are required to follow all state, federal, and local laws. Some additional business costs (i.e., minimum wage ordinances and overtime compensation) are driven by decisions at the local or federal level and create unsustainable unfunded mandates that challenge organizations to remain viable. Systematically addressing the fiscal impact of these challenges,

particularly local minimum wage ordinances, is necessary to keep additional quality programs from failing and to ensure the stability of the community-based developmental services system.

ARCA supports the emphasis on greater employment outcomes for individuals with developmental disabilities, as it helps them to improve their economic situation and to participate in a positive way in their communities. ARCA supports the proposed Trailer Bill Language to allow adults who are still in school to access paid internships and to update the supported employment and vouchered day service rates.

By March 2019 community-based services must adhere to updated standards in order to continue qualifying for the critical federal funding that provides \$2.5 billion annually for service providers and regional centers. ARCA appreciates the Administration's continued commitment to support greater community integration. In some instances, existing state regulations are a barrier to needed transformation. In the interest of efficiency, ARCA supports the proposed Trailer Bill Language that would enable DDS to issue policy directives in advance of emergency regulations on this topic.

Regional centers are developing needed resources to support individuals with complex behavioral needs, such as Enhanced Behavioral Supports Homes and Community Crisis Homes. ARCA supports the proposed Trailer Bill Language that would allow the development of these critical resources without the guarantee of federal funding. ARCA encourages the state to maximize its receipt of federal financial participation, but agrees that indecision at the federal level should not be a roadblock to establishment of these homes.

FY 2017-18 – Operations

ARCA appreciates the leadership of DDS in working with the Department of General Services to address recent funding shortfalls for regional center rent obligations. Underfunding rent has required regional centers to pay a portion of their rent from other operations funds and to divert funding from service coordination, resource development, or clinical staff. Sufficient rent funding allows greater direct regional center support for individuals with developmental disabilities. Regional centers continue to struggle to hire and retain skilled staff, in part because of longstanding underfunding in the form of frozen funding formulas and unallocated reductions.

Essential System Reform

Last year's special session bills, providing nearly \$500M (TF) annually for the service system, remain a deeply-appreciated step towards stabilizing our system, and sets the groundwork for its long-term sustainability.

California must continue to invest needed resources to stabilize the state's developmental services system and enable it to meet the challenge of serving all individuals in inclusive communities. The state has made a commitment to completing a service provider rate study by March 2019 and to addressing regional center Operations funding structures through Secretary Dooley's Developmental Services Task Force. Both processes should incorporate the actual costs for delivering quality community services and supports to individuals with developmental disabilities and their families. These are essential steps to

stabilizing California's community-based service system for individuals with developmental disabilities and their families.

Closure of the state's remaining developmental centers provides several opportunities for the community-based service system. First, the federal government is increasingly willing to fund services in community rather than institutional settings. Additionally, recent investments in community services for former developmental center residents simultaneously enhance community services for others with complex needs. Finally, as developmental centers close, financial resources that become available should be redirected to stabilizing and supporting community services.

Community programs continue to close in large part because of unsustainable provider rates. In many cases, the cost of replacing lost services is significantly higher. ARCA supports the Lanterman Coalition proposal to provide DDS with the flexibility to enhance the rates for quality services that are in danger of closing due to rate inadequacy when doing so would cost less than replacement services.

Close collaboration between the Administration, the Legislature, regional centers, and community service providers will enable the state to meet future challenges and to keep the promise of the Lanterman Act to hundreds of thousands of Californians that rely on it.

Sincerely,
/s/
Eileen Richey
Executive Director

Members, Senate Budget and Fiscal Review Subcommittee #3
Members, Assembly Committee on Budget Subcommittee #1
Peggy Collins, Consultant, Senate Budget and Fiscal Review Subcommittee #3
Renita Polk, Consultant, Senate Budget and Fiscal Review Subcommittee #3
Nicole Vasquez, Consultant, Assembly Committee on Budget Subcommittee #1
Mareva Brown, Chief Consultant, Senate Human Services Committee
Daphne Hunt, Chief Consultant, Assembly Human Services Committee
Kelsy Castillo, Senior Consultant, Assembly Human Services Committee
Jennifer Troia, President Pro Tempore's Consultant, Human Services
Gail Gronert, Policy Consultant, Office of the Speaker
Joe Parra, Principal Consultant on Human Services, Senate Republican Caucus
Kirk Feely, Health Consultant, Senate Republican Fiscal Office
Chantele Denny, Human Services Consultant, Senate Republican Fiscal Office
Peter Anderson, Chief Consultant, Assembly Republican Caucus
Seren Taylor, Assembly Republican Caucus
Mary Bellamy, Consultant on Human Services, Assembly Republican Caucus
Cyndi Hillery, Consultant, Assembly Republican Fiscal Office
Mark Newton, Legislative Analyst's Office
Sonja Petek, Legislative Analyst's Office
Kris Cook, Department of Finance
Teresa Calvert, Department of Finance
Nancy Bargmann, Director, Department of Developmental Services
Diana Dooley, Secretary, California Health and Human Services Agency
Donna Campbell, Deputy Legislative Affairs Secretary, Office of the Governor

Tri-Counties Regional Center

***State And Federal
Legislators***

For the 2017-18 Session

Prepared by Daniel Savino, Legislative Coordinator, Association of Regional Center Agencies

– Notes –

With the passage of Proposition 28 in June, 2012, newly-elected legislators may spend up to twelve years in either the Assembly or the Senate (cf. State Constitution, Article IV, Sec. 2).

Senators have four-year terms. Half of them are up for election every two years, depending on whether or not the district is an even or odd number. In 2016, all odd-numbered districts were up for election. Assembly members have two-year terms, and every seat is contested in the general election.

The top-two election system makes state-level primary elections non-partisan, allowing any registered voter to cast a ballot for any candidate. The top two vote-getters (regardless of party) face off in the general election, even if one of them received >50% of the vote. However, for special elections – to fill a sudden vacancy – if someone gets >50% of the vote in the primary, they are the outright winner, and no general election is held.

To find your particular legislators, go to:

www.findyourrep.ca.gov and <http://www.house.gov/representatives/find/>

For state-level district maps, go to:

[http://www.legislature.ca.gov/legislators and districts/districts/districts.html](http://www.legislature.ca.gov/legislators_and_districts/districts/districts.html)

For Congressional district maps, go to:

<https://www.govtrack.us/congress/members/map>

Updated 2017-02-01



Senate District 17 – Bill Monning

** Member, Senate Budget Subcommittee #3 on Health and Human Services*

Shared with San Andreas Regional Center

Democrat – Terms out in 2020

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Biography (abridged)

Senator William W. Monning was elected in November of 2012 and reelected in 2016 to represent the 17th Senate District, which includes all of San Luis Obispo and Santa Cruz counties, and portions of Monterey and Santa Clara counties. Prior to that, he represented the 27th Assembly District from 2008 to 2012, which included portions of Monterey, Santa Cruz, and Santa Clara counties.

Currently, Senator Monning is the Senate Majority Leader. He also serves as a member of the Senate Committees on Budget; Health; Judiciary; Legislative Ethics; Natural Resources and Water; and the Budget Subcommittee #3 on Health and Human Services.

During his tenure in the state Legislature, the Senator has been a leading advocate of reducing childhood obesity and other preventable chronic illnesses through the reduction of the consumption of sugar sweetened beverages. He has authored legislation that would have established a sugar sweetened beverage tax with the revenues generated dedicated to support childhood obesity prevention programs, and legislation to place a consumer-warning label on sugar-sweetened beverages sold in California.

As a member of the Assembly, he was instrumental in establishing the California Health Benefits Exchange, a key component for California to implement federal health care reform. The primary purpose of the Exchange is to serve as the State of California's "active purchaser" of health care coverage for individuals and small businesses that generally do not have access to affordable health care. He also authored landmark legislation that requires the Ocean Protection Council to establish a statewide standard for the certification of sustainable seafood.



Senate District 19 – Hannah-Beth Jackson

Democrat – Terms out in 2020

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Biography (abridged)

Hannah-Beth Jackson is a former prosecutor and practicing attorney, educator, and small business owner. She was elected to the California State Senate in 2012 to represent the 19th Senate District, which includes all of Santa Barbara County and western Ventura County.

From 1998 to 2004, she represented the 35th Assembly District in the State Assembly, where she worked with Democratic and Republican governors to author more than 60 bills into law.

In the Senate, she is chair of the Senate Judiciary Committee and serves as a member of the Senate Committee on Natural Resources and Water, the Senate Budget and Fiscal Review Committee, the Senate Labor and Industrial Relations Committee and the Senate Public Safety Committee. She is immediate past chair of the California Legislative Women's Caucus.

During her time in the Legislature, Hannah-Beth has become known as an effective advocate for protecting the rights and privacy of Californians, protecting the environment, advancing legislation to reduce gun violence, supporting access to justice for all Californians, championing equality for women, advocating for commuter rail, improving access to early childhood education, and supporting veterans and veterans treatment courts, among other issues. She is the author of Senate Bill 358, the California Fair Pay Act, landmark legislation that established the strongest equal pay law in the country, and was recently named by Huffington Post as one of 11 women around the country "blazing new trails" in American politics.

Hannah-Beth has received Legislator of the Year awards from a wide range of organizations and is the recipient of the prestigious California Women Lawyer's Fay Stender Award, given annually to an attorney committed to affecting positive change with "zest, humanity (and) personal courage" who serves as a role model for women.



Senate District 27 – Henry Stern

*Shared with North LA County Regional Center, Westside Regional Center
Democrat – Terms out in 2028*

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Biography

Senator Henry Stern is a sixth-generation Californian and native of this district. He credits his passion for public service as a family trait, whose diverse history includes farming and ranching, music and film, and a steadfast commitment to helping young people fulfill their potential. Senator Stern was elected to represent the 27th Senate District, which includes parts of Los Angeles and Ventura counties, on November 8, 2016.

Prior to his election, Stern worked as a senior policy advisor to former California State Senator Fran Pavley. As a staff member, he helped Senator Pavley pass common sense policies to improve the quality of life and economic sustainability of California. Together, they advanced bipartisan measures to balance the budget, respond to the drought, revitalize our education system, ensure safer communities, and update California's energy policy for the 21st century.

Senator Stern has also lectured at UCLA and UC Berkeley, enjoys volunteering at his local Boys & Girls Club and is a member of the Santa Monica Mountains Conservancy Advisory Committee, the Jewish Federation, the American Jewish Committee, and the Truman National Security Project.

He is an alumnus of Harvard University and UC Berkeley Law.



Assembly District 35 – Jordan Cunningham

Republican – Terms out in 2028

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Biography (abridged)

Jordan Cunningham is a small business owner, and a proud husband and father of four. He was born in San Luis Obispo, and his family has been on the Central Coast for three generations. Growing up in Atascadero, Jordan learned the values of the working class, including hard work, integrity and community. He developed a passion for public service at a young age while watching his parents work tirelessly to strengthen teen driver safety laws, after his teenage brother was tragically killed in an auto accident. The experience forged his lifelong interest in public service and the lawmaking process.

Jordan is the product of our public school system, graduating from Atascadero High School. He then attended Point Loma Nazarene University, earning a degree in physics. Jordan served as a Senate Fellow in the California Legislature, where he worked for the Senate Minority Leader.

Jordan became Deputy District Attorney in the San Luis Obispo County District Attorney's Office. As a Deputy DA, Jordan prosecuted a wide variety of crimes. He later started his own small firm -- the Cunningham Law Group -- which represents individuals, families, public entities, and local businesses.

Jordan previously served as a trustee on the Board of the Templeton Unified School District, and understands that a quality education is the key to our children's future. He is an advocate for Science, Technology, Engineering and Math (STEM) as well as career and technical education to better prepare our kids for the workforce. Jordan is also the former President of the Central Coast Taxpayers Association, a nonprofit group dedicated to taxpayer education and advocacy for fiscal responsibility in government.

While running for Assembly, Jordan toured 50 local businesses in 50 business days. He asked every business owner the same question – "What could the state do to help your business grow and add jobs?" From these conversations, Jordan crafted his Five Point Plan for Job Growth. These reforms are designed to help small businesses in California grow and thrive.



Assembly District 37 – Monique Limón

Democrat – Terms out in 2028

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Biography (abridged)

Assemblymember Monique Limón was elected to the Assembly in November 2016 and represents the 37th district that includes over half of the County of Santa Barbara, as well as nearly a quarter of the County of Ventura.

Born and raised in the 37th district, Monique has worked continuously to serve her community as an educator, leader, and an advocate for causes advancing the quality of life in her community.

For Monique, education has always been a priority. A UC Berkeley graduate with a Masters degree from Columbia University, Monique served two terms on the Santa Barbara Unified School Board and as Assistant Director for the McNair Scholars Program at the University of California, Santa Barbara prior to serving in the Assembly.

Women’s issues are also a priority for Monique. As former Commissioner on the Santa Barbara County Commission for Women she helped connect private and public resources with women in the community. Monique has a passion for bringing community groups together and building strong coalitions among local nonprofit organizations and civic groups.

Monique’s roots go deep in the 37th district. Her extended network of family and friends include a range of small business owners and important leaders in the community. Her husband, Michael Medel works at Santa Barbara City College as Director of Admissions and Records and serves as President of the 19th District Agricultural Association. Monique and Michael were both raised in the area and currently live in Goleta.



Assembly District 38 – Dante Acosta

*Shared with North LA County Regional Center
Republican – Terms out in 2028*

Contact Information

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Biography

Born and raised in Southern California, Dante lost his father when he was just 11 years old. Shortly after his death, Dante's mother started a family clothing boutique to support the family, instilling a strong work ethic and the spirit of volunteerism in Dante and his siblings.

Dante worked during high school and college, in auto parts shops and car dealerships, eventually rising to General Sales Manager of a San Fernando Valley Chevrolet dealership. His success led him to a career in finance with senior leadership positions at Wells Fargo, Prudential Financial, and ING.

After 20 years advising individuals and businesses and spending countless hours volunteering in his community with Circle of Hope, William S. Hart Museum, Santa Clarita Valley Rotary club, Old Town Newhall Association, and coaching Little League and drama, Dante ran for the Santa Clarita City Council. He serves on the Economic Development Committee, Film and Tourism Committee and as Santa Clarita's representative to the Southern California Association of Governments (SCAG).

Dante & Carolyn Acosta Dante and his wife, Carolyn, moved to Santa Clarita 30 years ago. They chose Santa Clarita as a great place to live and raise a family and have been blessed with three children: Rudy, Alexandra, and Doran.

After his eldest son, Army Specialist Rudy Acosta, was killed in action in Afghanistan in 2011, Dante focused his energy on his family and giving back to his community. Dante is the founder of the Rudy A. Acosta Memorial Foundation and a member of the fundraising committee for the Portraits of the Fallen Memorial, a project that honors California's fallen heroes from the Iraq and Afghanistan wars.



Assembly District 44 – Jacqui Irwin

*Shared with North LA County Regional Center†
Democrat – Terms out in 2026*

Contact Information

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Biography (abridged)

Jacqui Irwin was elected in November 2014 to represent California's 44th Assembly District, which includes the communities of Camarillo, Casa Conejo, Channel Islands Beach, El Rio, Lake Sherwood, Moorpark, Oak Park, Oxnard, Port Hueneme, Santa Rosa Valley, Thousand Oaks, and Westlake Village.

The top vote getter in two of her most recent elections for Thousand Oaks City Council, Jacqui Irwin has a history of working across party lines to help make her community one of the safest places to live and raise a family.

First elected to the City Council in 2004, Irwin served two terms as mayor of Thousand Oaks, where she was a strong advocate for the preservation of open space and responsible development. As a councilmember, Irwin actively served on several boards and committees.

Irwin also serves on the executive board for the Ventura County Chapter American Red Cross, the executive board for Community House of Hope, the advisory board for Women's Economic Ventures, the CSUCI Arts and Sciences Leadership Council, and has volunteered with the Girl Scouts of the Central Coast. Additionally, she is a member of the Thousand Oaks Rotary Club.

Irwin chairs the Veterans Affairs Committee, and serves on the Accountability and Administrative Review, Agriculture, Assembly Budget, and Higher Education and the Jobs, Economic Development, and the Economy Committees.

She has also been appointed by former Assembly Speaker Toni G. Atkins to serve on the Commission on the Status of Women and Girls, State Public Works Board, the Inter-Agency Council on Veterans, and the Interstate Compact on Educational Opportunity for Military Children.



Assembly District 45† – Matthew Dababneh

*Shared with North LA County Regional Center, Westside Regional Center†
Democrat – Terms out in 2024*

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(818) 904-3840

Biography

Matt Dababneh, former Chief of Staff to Congressman Brad Sherman, was elected to the California State Assembly in November 2013. He represents the 45th Assembly District communities of Bell Canyon, Calabasas, Canoga Park, Chatsworth, Encino, Hidden Hills, Northridge, Reseda, Sherman Oaks, Tarzana, West Hills, Winnetka, and Woodland Hills.

A fourth-generation Valley resident, Dababneh was born and raised in the San Fernando Valley. He graduated from the University of California, Los Angeles with a degree in Political Science and History. Upon graduating from UCLA, Dababneh worked on John Kerry's presidential campaign, where he was inspired to pursue a career in public service. For eight years, he served as the District Chief of Staff and Senior Aide to Congressman Brad Sherman where he assisted thousands of Valley residents and businesses with federal and local concerns. Dababneh worked with seniors needing help with their Medicare and Social Security benefits, homeowners struggling to avoid foreclosure on a family home, and businesses trying to resolve disputes with the IRS.

Since being elected to the State Assembly, Dababneh has focused on bringing jobs to the Valley, making it easier for families to purchase a home, improving access to healthcare and expanding educational opportunities for college age students.

In 2014 Dababneh was appointed as an Assistant Majority Whip for the Majority Caucus, and in January of 2015 he began serving as the Chairman of the Banking and Finance Committee. As Chairman he has focused on increasing access to capital in underserved communities, financial literacy in younger generations, increasing consumer protections and combating predatory lending. Dababneh also serves on the Revenue and Taxation, Privacy and Insurance Committees.

Dababneh is also an active community volunteer and has served on the board of several local non-profit organizations, including the Hope of the Valley Rescue Mission, the Valley Cultural Center, Phoenix House Juvenile Drug Rehabilitation Academy and the House of Hope.



Congressional District 24 – Salud Carbajal

Democrat – In office since 2017

Contact Information

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Biography (abridged)

Congressman Salud Carbajal proudly represents the 24th Congressional District of California. Rep. Carbajal will represent the entirety of San Luis Obispo and Santa Barbara Counties, and a portion of Ventura County.

Prior to representing the Central Coast in Congress, Salud served as Santa Barbara County's First District Supervisor for twelve years. As County Supervisor, Salud advocated for health and social service safety net programs for our most vulnerable residents – children, frail and elderly, poor and the homeless that includes co-sponsoring an initiative to provide health insurance for all the County's children and spearheading the creation of a job skills and mentorship program for at-risk youth throughout the County.

Salud has promoted environmental stewardship and sustainability through projects such as working to establish a conversion technology waste to energy facility, reducing the County's use of pesticides through its Integrated Pest Management Program, establishing an energy efficiency financing district, and serving on the National Association of Counties (NACo) Energy, Environment and Land Use Committee (EELU) where he co-authored a Resolution to Reduce Emissions from Marine Vessels - that was adopted by NACo in 2009.

Over the years, Salud's public service has demonstrated a strong commitment to protecting our natural environment and resources, enhancing public safety, and working regionally to address our transportation, housing, and workforce challenges.

In Congress, Salud is focused on creating economic opportunity both for the Central Coast and throughout the country.



Congressional District 25 – Steve Knight

Shared with NLACRC

Republican – In office since 2015

Contact Information

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Simi Valley, CA 93065
(805) 581-7130**

Biography (abridged)

Born at Edwards Air Force Base, Representative Steve Knight has called the Antelope Valley home for most of his life.

He is a veteran of the United States Army and the Los Angeles Police Department, and previously served on the Palmdale City Council as well as in the California State Legislature.

As a member U.S. House of Representatives, Steve sits on the House Armed Services Committee, the House Committee on Science, Space, & Technology, and the House Small Business Committee.

Steve proudly represents the Santa Clarita, Simi, and Antelope Valleys. He currently lives in the Antelope Valley with his wife Lily. They have two sons, Christopher and Michael.



Congressional District 26 – Julia Brownley

Democrat – In office since 2013

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Biography (abridged)

Julia Brownley was elected to Congress in 2012 as the Representative for California's 26th District, which encompasses most of Ventura County and a portion of Los Angeles County, including the cities of Ventura, Oxnard, Ojai, Camarillo, Newbury Park, Moorpark, Thousand Oaks, and Westlake Village.

Brownley was elected as Ranking Member of the House Veterans' Affairs Subcommittee on Health, and she also serves on the House Veterans' Affairs Subcommittee on Disability Assistance and Memorial Affairs. Brownley also sits on the House Committee on Transportation and Infrastructure, where she serves on the Subcommittee on Aviation, the Subcommittee on Coast Guard and Maritime Transportation, and the Subcommittee on Highways and Transit. Since coming to Congress, Brownley has been a steadfast champion of the Port of Hueneme.

Brownley began her career in public service as a School Board member in 1994 where she served three terms. She was elected to the California State Legislature in 2006, where she served as Chairwoman of the Assembly Education Committee for four years. In addition to chairing the California Assembly Education Committee, she served on every educational committee in the Assembly.

Brownley received "Legislator of the Year" awards, the highest honor a legislator can receive, from the California Association for Bilingual Education, the California Council for Adult Education and California Adult Education Administrators Association, the Congress of California Seniors, the California School Boards Association, the National Board for Professional Teaching Standards, the California Federation of Teachers, and by the California League of High Schools. Brownley was honored as one of "12 Remarkable Women" by the National Women's Political Caucus, Los Angeles Westside in 2008 and as the "Woman of the Year" by the YWCA in 2005.



Congressional District 30⁺ – Brad Sherman

** Member, Committee on the Budget*

Shared with LRC, NLACRC

Democrat – In office since 1997

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Biography (abridged)

Congressman Brad Sherman, from Sherman Oaks, was born and raised in southern California and represents California's San Fernando Valley. He has been in the U.S. House of Representatives since 1997, serving his eleventh term in Congress.

Congressman Sherman is a senior member of the House Foreign Affairs Committee. He serves as the ranking Democrat on the Subcommittee on Asia, and the second ranking Democrat on the Subcommittee on Europe and Eurasia. Sherman is a Chairman Emeritus of the Subcommittee on Terrorism, Nonproliferation, and Trade. He is also a senior member of the Financial Services Committee.

During his tenure in Congress, Sherman has developed a reputation as a strong advocate for fiscal responsibility, a balanced budget, federal aid to education, the interests of working families, strong environmental standards, the protection of Social Security and Medicare, and policies to expand U.S. exports. A consumer rights advocate, Sherman was among the leaders behind the formation of the Consumer Financial Protection Agency, which protects consumers from financial institutions issuing credit cards and offering costly overdraft protection.

Congressman Sherman's public service career includes serving on the California State Board of Equalization from 1991 to 1996. He was Chairman of the Board from 1991 to 1995.

Before joining Congress, Sherman was on staff at one of the nation's big-four CPA firms. Sherman is a Tax Law Specialist and a CPA. While at the firm, he audited large businesses and governmental entities, provided tax law counsel on multi-million dollar transactions, advised entrepreneurs and small businesses on tax and investment issues, and helped represent the Government of the Philippines under President Aquino in a successful effort to seize assets of deposed President Marcos. Sherman was also an instructor at Harvard Law School's International Tax Program.



**Tri-Counties
Regional Center**



ASSEMBLY DISTRICT 37 - MONIQUE LIMÓN

PERSONS SERVED IN DISTRICT
3283

TOTAL SB COUNTY POPULATION
435,697

TCRC PROVIDERS IN DISTRICT *752*

TCRC SPENDING IN DISTRICT
\$61,362,438

MAJOR TCRC SERVICE PROVIDERS IN DISTRICT

- UCP WORK INC
- NOVELLES DEVELOPMENTAL SERVICES
- PATHPOINT
- DEVEREUX FOUNDATION
- RESPITE, INC
- ARC OF VENTURA COUNTY
- SERVICE TO ACHIEVE GROWTH & EMPOWER
- CHANNEL ISLANDS SOCIAL
- PEOPLE CREATING SUCCESS
- AMIGO BABY
- 24HR HOMECARE

CONTACT INFORMATION

Capitol Office:
State Capitol
P.O. Box 942849
Sacramento, CA 94249-0037
Tel: (916) 319-2037

District Office:
Santa Barbara County
101 W. Anapamu St., Ste A
Santa Barbara, CA 93101
Tel: (805) 564-1649

District Office:
89 South California St., Ste. F
Ventura, CA 93001
Tel: (805) 641-3700
<https://a37.asmdc.org/>

TRI-COUNTIES REGIONAL CENTER

Tri-Counties Regional Center (TCRC) provides supports and services for individuals with developmental disabilities living in San Luis Obispo, Santa Barbara and Ventura Counties.

SYSTEM SUSTAINABILITY IN QUESTION

Funds and Reform Needed

- Service Provider Rate & Operations Funding Reform
- Addressing Unfunded Mandates and Restoring Suspended Services
- California Committed to Complete Rate Methodology Study by March 2019

TCRC is one of 21
Regional Centers in California

Mission

TCRC provides

person and family centered

planning, services and supports for

individuals with developmental disabilities

to maximize opportunities

QUALIFYING DIAGNOSES

substantially disabling

- Epilepsy
- Cerebral palsy
- Autism Spectrum Disorder
- Intellectual disability
- Conditions closely related to Intellectual disability

SERVICES

Are often life-long, and:

- Start at birth for some
- Or when a person is found eligible

REGIONAL CENTERS PROVIDE

Diagnosis & assessment for eligibility

AND ALSO HELP

- Plan
- Access
- Coordinate
- Monitor *the services and supports that are needed.*

A BROAD SYSTEM

303,447

Individuals are served statewide

13,811

Adults and children are served by TCRC

FUNDING 21 REGIONAL CENTERS

\$3.6 billion



ASSEMBLY DISTRICT 35 - JORDAN CUNNINGHAM

TCRC SPENDING IN DISTRICT
\$63,237,047

MAJOR TCRC SERVICE PROVIDERS IN DISTRICT

- PATHPOINT
- RESPITE, INC
- OPTIONS FAMILY OF SERVICES
- ANKA BEHAVIORAL HEALTH
- NORMAL LIFE OF CALIFORNIA
- NCI AFFILIATES
- CREATIVE ALTERNATIVE FOR LEARNING & LIVING
- CALIFORNIA PSYCHCARE

CONTACT INFORMATION

CAPITOL OFFICE
State Capitol
Sacramento, CA 94249
(916) 319-2035

SAN LUIS OBISPO DISTRICT OFFICE
444 Higuera Sreet, Suite 100
San Luis Obispo, CA 93401
(805) 549-3381
<https://ad35.asmr.org/>

PERSONS SERVED IN DISTRICT

4315

TOTAL SLO COUNTY POPULATION

276,443

TCRC PROVIDERS IN DISTRICT **629**

TRI-COUNTIES REGIONAL CENTER

Tri-Counties Regional Center (TCRC) provides supports and services for individuals with developmental disabilities living in San Luis Obispo, Santa Barbara and Ventura Counties.

SYSTEM SUSTAINABILITY IN QUESTION

Funds and Reform Needed

- Service Provider Rate & Operations Funding Reform
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Individuals are served statewide

13,811

Adults and children are served by TCRC

TCRC is one of 21

Regional Centers in California

Mission

TCRC provides

person and family centered

planning, services and supports for

individuals with developmental disabilities

to maximize **opportunities**

and **choices** for living, working, learning

and recreating within their **community**

PERSON CENTERED PLANNING

...a guided process for learning about a person's wants and needs to live, work, and participate in his or her community

and

developing a plan to help make it happen.

OVERSIGHT

Regional Centers are funded and monitored by the Department of Developmental Services (DDS).

REPRESENTATION

Regional Centers are supported and represented

by ARCA... **ARCA**

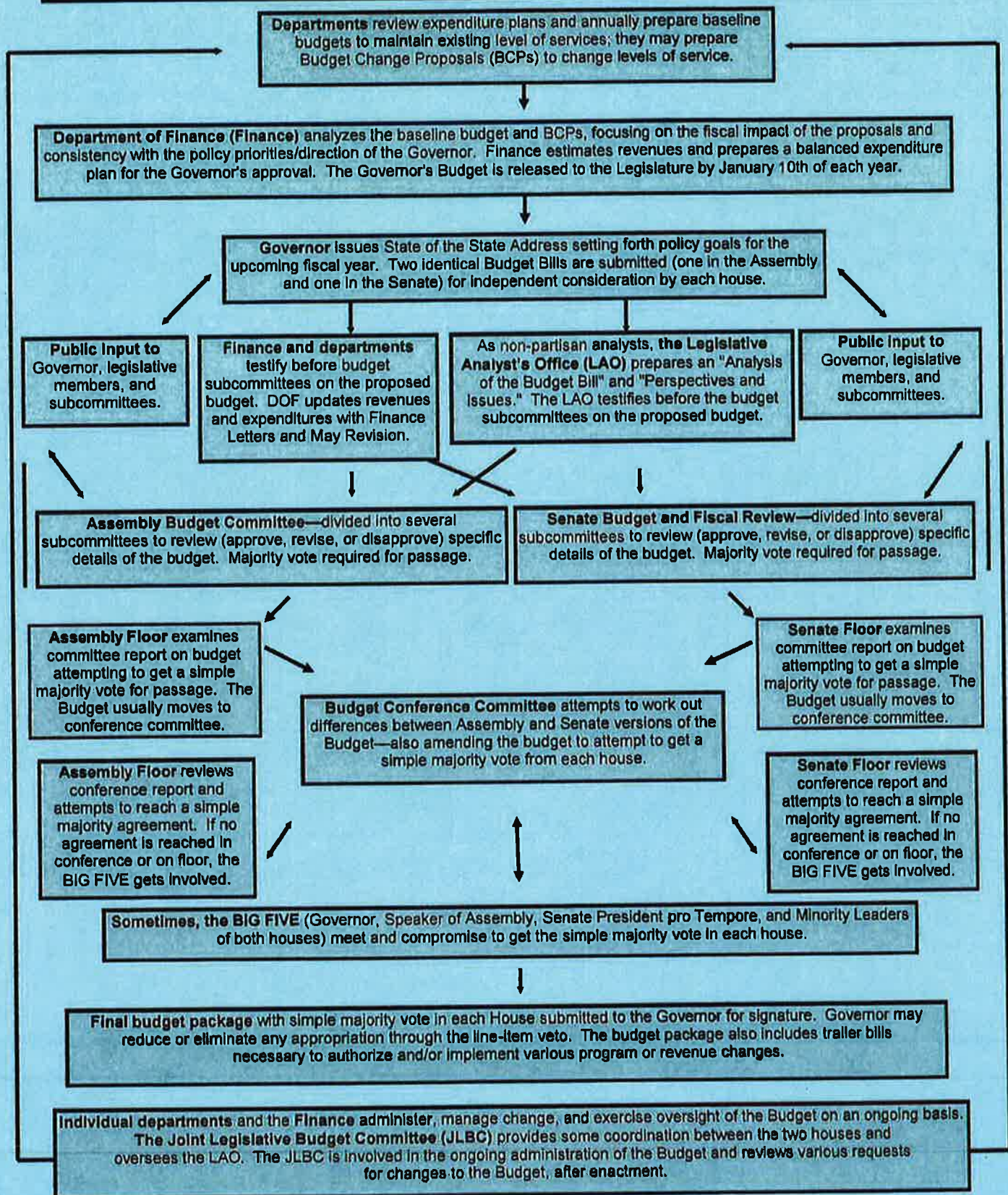
Association of Regional Center Agencies



Our motto

"Person centered in all we do"

THE ANNUAL BUDGET PROCESS



DEPARTMENT OF DEVELOPMENTAL SERVICES

1600 NINTH STREET, Room 320, MS 3-8
 SACRAMENTO, CA 95814
 TTY 654-2054 (For the Hearing Impaired)
 (916) 654-1954



May 1, 2017

TO: REGIONAL CENTER EXECUTIVE DIRECTORS AND BOARD PRESIDENTS

SUBJECT: DRAFT SURVEY FOR PROVIDER RATE INCREASES

As you are aware, with the enactment of Assembly Bill (AB) X2-1 (Chapter 3, Statutes of 2016), many regional center service providers received rate increases effective July 1, 2016. In particular, rate increases were targeted for the purpose of increasing wages and benefits for staff who spend a minimum of 75 percent of their time providing direct services to consumers.

Included in ABX 2-1 is a requirement that the Department of Developmental Services (Department), with regional center participation, must survey all providers who received this rate increase. The survey must be returned by October 1, 2017, or providers will forfeit the rate increase.

Understanding that completing these surveys may present a significant challenge for some providers, the Department is taking the following steps to help facilitate the process:

Draft Survey – May 1-24, 2017

- Enclosed is a draft survey that has also been sent to several provider and advocacy organizations. We ask that you share this with providers in your area for their comments, suggestions and other feedback. It is important that a wide variety of providers have an opportunity to provide input. Comments and questions can be submitted via email to vendorsurvey@dds.ca.gov.
- The Department has scheduled two webinars/conference calls to review the draft survey, answer questions and take suggestions and comments. The calls are scheduled for Friday, May 5, 2017, at 2:00 p.m. and Wednesday May 10, 2017, at 9:00 a.m. Information on how to register for these calls can be found at <http://www.dds.ca.gov/ratechangesJuly2016/index.cfm>.
- Additionally, the Department will coordinate with stakeholders, such as provider organizations and regional center vendor advisory committees, to discuss strategies and process, including alternative methods for distribution and completion of the survey.
- During this time, the Department will continue to work on developing a secure, online option for submitting the survey. It is hoped that this option will lessen the workload for both providers and regional centers.

"Building Partnerships, Supporting Choices"

Regional Center Executive Directors and Board Presidents
May 1, 2017
Page two

May 25-31, 2017

- The Department will schedule a meeting/conference call to review comments and recommendations received. A summary of comments received will also be posted on the Department's website.
- The survey will be finalized during this time, including any needed revisions.

Final Survey – June 1-October 1, 2017

- The Department plans to release the final survey by June 1, 2017.
- Once released, the Department will again schedule multiple webinars/conference calls to provide guidance and answer questions.
- Additionally, we will be available to participate in meetings with provider organizations, vendor advisory committees and others to help answer questions.
- Further, responses to frequently asked questions will be available on the Department's website.

We are hopeful that with regional center and provider assistance and involvement, well in advance of when the survey is due, we can collectively minimize the potential difficulties that people may experience in completing this survey.

We appreciate your assistance with this survey process. For any questions, or to submit comments and suggestions, please contact Greg Nabong, Program Operations Branch Manager, at Greg.Nabong@dds.ca.gov, or at (916) 653-3749.

Sincerely,

Original signed by:

JIM KNIGHT
Assistant Deputy Director
Community Services Division

Enclosure

cc: Regional Center Chief Counselors
Regional Center Administrators
Regional Center Community Services Directors
Association of Regional Center Agencies

FOLLOW UP SURVEY INSTRUCTIONS
DRAFT FOR REVIEW AND COMMENT ONLY

The Department of Developmental Services (DDS) is required to do a survey of all service providers that received a rate increase effective July 1, 2016. As required by law (Welfare and Institutions Code Section 4691.10) the purpose of the rate increase was to enhance wages and benefits for staff who spend a minimum of 75 percent of their time providing direct services¹ to consumers. Eligible service providers also received a rate increase for administrative expenses (see Welfare and Institutions Code Section 4691.11.) Any provider who received rate increases under Welfare and Institutions Code Section 4691.10 who does not complete and return this survey by October 1, 2017, will forfeit the rate increases. **NOTE: this is a preliminary draft of the survey; providers do not need to complete and return this document. The final version, with instructions on how to submit the completed survey, is planned for release on June 1, 2017.**

Providers must complete a separate survey for each combination of Vendor Number and Service Code for which a rate increase was received.

Survey Instructions (Survey questions start on page 3)

Reporting Period: It's recommended that responses apply to January through March, 2017. However, you can use any period of at least one month between July 1, 2016 and June 30, 2017.

1. **Vendor Name** -
2. **Vendor Number**
3. **Service Code**
4. **Vendoring Regional Center:** Select the regional center from which the vendor received the vendorization approval
5. **Name:** Person completing and/or responsible for responding to questions regarding the survey
6. **Email address:**
7. **Business address:**
8. **Phone number:**

¹ "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 include 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.

9. **What types of increases did employees receive?:** Check the boxes next to the increases received by employees who spend at least 75 percent of their time providing direct services to consumers. Select all that apply, even if not all eligible employees received the same types of increases.
10. **Information for each category of staff that received increases in wages and/or benefits:** Fill in the information below for each staff category or classification (e.g. Direct Support Professional, Job Coach, Facilitator, etc.) that received increases. **You are not required to report on individual employees.**
- a. **Position Category or Title:** Fill in the name of the job category or position title for employees who received salary and/or benefit increases.
 - b. **Average percentage of time providing direct service:** Choose the range that reflects the average percentage of time employees who received increases in this category/title spent providing direct services
 - c. **Average number of staff during the review period:** Write in the average number of employees in this job category/title who received increases. This average can be based on the number of employees who work on a typical day, week, or a pay period.
 - d. **Average monthly, per person salary, wage and benefit costs:** Write in the average hourly costs for employees for in this job category/title. Include employment related costs including taxes, social security, Worker's Compensation insurance, and benefits including health, retirement, etc.
 - e. **What types of increases did staff receive?** Check the type(s) of increases employees in this job category received. For each increase, write in the percentage increase received. For example, write in 5% if the salary range for this job category/title was increased by a set percentage due to the rate increase received July 1, 2016. If a bonus or benefit did not exist prior to July 1, 2016, write in 100% for the percentage increase.
11. **How was the portion of the rate increase for administrative costs used?**
Select from the list all areas funded by the administrative costs rate increase that apply. If "other" is selected, please write in a description of what the funds were used for.

Draft Questions for Provider Rate Increase Survey

Reporting Period (identify start and end date) _____

1. Vendor Name
2. Vendor Number
3. Service Code
4. Vending Regional Center (should be drop down or check box menu)

Contact Information

5. Name
6. Email Address
7. Business Address
8. Phone
9. Please choose what types of increases employees received (Choose all that apply)
 - Wages
 - Bonus
 - Health Benefits
 - Dental Benefits
 - Vision Benefits
 - Retirement/Savings Plan Benefit
 - Other (please describe in the box below

10. Complete the information below for each category of staff that received an increase in wages and/or benefits (the option will be given to repeat the questions below for as many types of staff as received increases.)

- a. Position category or title _____
- b. Average percentage of time providing direct service
 - Between 75 and 85%
 - Between 86 and 95%
 - More than 95%
- c. Average number of staff during the reporting period _____
- d. Average monthly, per person salary, wage and benefit costs during the reporting period _____
- e. What types of increases did staff receive? Also include the percentage increase for each type.

<u>Type of increase</u>	<u>Percentage increase</u>
<input type="checkbox"/> Salary	_____
<input type="checkbox"/> Bonus	_____
<input type="checkbox"/> Health Benefits	_____
<input type="checkbox"/> Dental Benefits	_____
<input type="checkbox"/> Vision Benefits	_____
<input type="checkbox"/> Retirement/Savings Plan Benefit	_____
<input type="checkbox"/> Other	_____

11. How was the portion of the rate increase for administrative costs used?
Select all that apply

- Salaries, wages or benefits for managerial personnel whose primary purpose is the administrative management of the vendor. This includes, but is not limited to, directors and chief executive officers
- Salaries, wages or benefits for employees who perform administrative functions, including but not limited to payroll, personnel functions, accounting, budgeting, and facility management.
- Facility/occupancy costs directly associated with administrative functions
- Maintenance and repair
- Data processing and computer support services
- Contract and procurement activities, except those performed by direct service employees
- Training directly associated with administrative functions
- Travel directly associated with administrative functions
- Licenses directly associated with administrative functions
- Taxes
- Interest

- Property insurance**
- Personal liability insurance directly associated with administrative functions**
- Depreciation**
- General expenses, including but not limited to communication costs and supplies directly associated with administrative activities**
- Other (please explain)**

DRAFT

Omar Noorzad - CDCAN Disability-Senior Rights Report: State Capitol Update - Dept of Developmental Services Releases Important Draft Survey for Regional Center Funded Providers Who Received Last Year Rate Increase Targeted for Their Workers Who Spend At Least 75% of Their Time Providing Direct Support and Services for People with Developmental Disabilities - Two Webinars/Conference Calls Scheduled May 5th at 2 PM and May 10th at 09:00 AM

From: Marty Omoto <martyomoto@att.net>
To: Marty Omoto <martyomoto@att.net>
Date: 5/2/2017 12:48 AM
Subject: CDCAN Disability-Senior Rights Report: State Capitol Update - Dept of Developmental Services Releases Important Draft Survey for Regional Center Funded Providers Who Received Last Year Rate Increase Targeted for Their Workers Who Spend At Least 75% of Their Time Providing Direct Support and Services for People with Developmental Disabilities - Two Webinars/Conference Calls Scheduled May 5th at 2 PM and May 10th at 09:00 AM
Bc: Omar Noorzad

CDCAN REPORT

CALIFORNIA DISABILITY-SENIOR COMMUNITY ACTION NETWORK & CALIFORNIA PERSON CENTERED ADVOCACY PARTNERSHIP

ADVOCACY WITHOUT BORDERS: ONE COMMUNITY – ACCOUNTABILITY WITH ACTION – PERSON CENTERED ADVOCACY

MAY 1, 2017 – MONDAY LATE EVENING

CDCAN Reports go out to over 65,000 people with disabilities, mental health needs, seniors, people with traumatic brain and other injuries, people with MS, Alzheimer's and other disorders, veterans with disabilities and mental health needs, families, workers, community organizations, facilities and advocacy groups including those in the Asian/Pacific Islander, Latino, American Indian, Indian, African-American communities; policymakers, and others across the State.

Sign up for these free reports by going to the CDCAN website.

Website: www.cdcan.us

To reply to THIS Report write:

Marty Omoto (family member and advocate) at martyomoto@att.net (as of June 1, 2016 this new email address REPLACED martyomoto@rcip.com – that email address, as of that date, will no longer accept emails (if you sent one to that old address on or after that date, please resend to new email address_

Twitter: [martyomoto](https://twitter.com/martyomoto)

Office Line: [916-418-4745](tel:916-418-4745) CDCAN Cell Phone: [916-757-9549](tel:916-757-9549)

PLEASE CONSIDER HELPING CDCAN WITH A CONTRIBUTION SO IT CAN CONTINUE ITS WORK (SEE BELOW)

State Capitol Update:

DEPARTMENT OF DEVELOPMENTAL SERVICES RELEASES IMPORTANT DRAFT SURVEY FOR REGIONAL CENTER FUNDED PROVIDERS WHO RECEIVED TARGETED INCREASES EFFECTIVE LAST YEAR FOR DIRECT CARE WORKERS

Department Seeks Public Comments on Draft Survey – Will Hold Two Webinars/Conference Calls on May 5 (Friday) at 2 PM and May 10 (Wednesday) at 09:00 AM – Department Expected to Release Final Survey for Providers by June 1, 2017 – Providers Must Complete that Final Survey and Return by October 1, 2017 or Face Forfeiture of the Rate Increase

SACRAMENTO, CA [BY MARTY OMOTO, CDCAN LAST UPDATED 05/01/2017 07:30 PM] – The Department of Developmental Services released late Monday afternoon a draft survey for regional center funded providers who received rate increases effective last year on July 1, 2016, that were targeted for the purpose of increasing wages and benefits for workers who spend a minimum of 75% of their time providing direct services and supports to people with developmental disabilities.

The Department of Developmental Services is seeking public comment on the draft survey for any possible changes and clarifications before a final version is released to providers by June 1, 2017, and has scheduled two webinars/conference calls open to the public to answer questions and to take comments (in addition to people who wish to also send in comments – see below for email address).

The first webinar/conference call is scheduled for May 5, 2017, Friday at 2:00 PM.

The second webinar/conference call is set for May 10, 2017, Wednesday, at 09:00 AM. See below for conference call number – and also how to register for the webinar (for those wishing to participate that way).

LAST YEAR’S SPECIAL SESSION BILL AUTHORIZED TARGETED RATE INCREASES FOR DIRECT CARE WORKERS AND ALSO PROVIDER SURVEY

The special session bill that was enacted last year authorizing the targeted increases for direct care worker wages and benefits, also required that any provider who received those increases must complete and return the survey by October 1, 2017. Providers who fail to return the final survey form by that date will forfeit that rate increase.

The special session bill that authorized that specific targeted rate increase – and also other rate adjustments and increases, was contained in ABx2 1 (“x” stands for special or extraordinary session and the “2” stands for the second special or extraordinary session – there were two different special sessions, one focusing on the managed care organization tax and developmental services funding – and the other on transportation).

The special session bill last year also requires that the Department of Developmental Services to include in the Governor’s budget revisions, to be released in mid-May – known as the “May Revise” or “May Revision” – shall “...describe the implementation of the increases provided” for those direct care workers.

WHO IS IMPACTED

Any regional center funded provider who received a rate increase under ABx2 1 that was targeted for their workers (or staff) who spend a minimum of 75% of their time in direct services and supports to the people with developmental services they provide services to, is required under that special session bill, to complete and return to the Department of Developmental Services by October 1, 2017, a provider survey.

The draft survey that was released for public comment May 1, 2017 is only a draft – providers should not complete that draft survey form. A final version of that survey is expected to be released by the Department of Developmental Services on June 1, 2017 that providers who received those targeted rate increases, must complete and return by October 1, 2017 or be required to forfeit those increases back to the State.

LINKS FOR MORE INFORMATION COMPILED BY CDCAN

LETTER TO REGIONAL CENTER EXECUTIVE DIRECTORS FROM DEPARTMENT OF DEVELOPMENTAL SERVICES (Dated May 1, 2017 – PDF Document Copy – 2 Pages) – this letter explains the draft survey for provider rate increases as authorized by ABx2 1. Letter included attachment of the draft survey:

<http://www.dds.ca.gov/ratechangesJuly2016/docs/LettertoRC-DraftSurvey-May1-2017.pdf>

DRAFT PROVIDER RATE INCREASE SURVEY (Dated May 1, 2017 – PDF Document copy – 5 Pages). This is a draft survey for public comment only. A final survey will be sent out by the Department of Developmental Services on June 1, 2017:

<http://www.dds.ca.gov/ratechangesJuly2016/docs/DRAFT-ProviderRateIncreaseSurvey.pdf>

ABX2 1 (As signed into law by Governor March 1, 2016 – PDF Document Copy - 20 Pages) – This is the special session bill last year that included requirements for the provider survey:

http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_0001-0050/abx2_1_bill_20160301_chaptered.pdf

ABX2 1 (As signed Into law by Governor March 1, 2016 – HTML Version) – This is the special session bill last year that included requirements for the provider survey:

http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_0001-0050/abx2_1_bill_20160301_chaptered.htm

PUBLIC COMMENT AND WEBINAR/CONFERENCE CALL DATES

During the month of May, the Department of Developmental Services will hold at least two public webinars/conference calls to answer questions and receive public comments, in addition to receiving written public comments and questions by email (see below for email address). The issue is also likely to come up in the final round of budget subcommittee hearings that the Assembly and State Senate will hold in late May following the release of the Governor's budget revisions known as the "May Revise".

HOW TO SEND IN QUESTIONS AND/OR COMMENTS ON THE DRAFT SURVEY FOR PROVIDER RATE INCREASES:

Comments and questions can be emailed to the Department of Developmental Services at: VendorSurvey@dds.ca.gov

In addition to that, the Department of Developmental Services has scheduled a series of webinars/conference calls to review the draft survey – and will also schedule a series of webinars/conference calls after June 1, 2017, when the final survey is released.

WEBINAR/CONFERENCE CALL INFORMATION

Webinar/Conference Call:

Date: May 5, 2017 (Friday)

Time: 2:00 PM

Conference Call Number: 800-230-1085

Register for the May 5, 2017 webinar (registration is NOT required if only participating using the conference call number):

<https://attendee.gotowebinar.com/register/4444054858034786305>

Webinar/Conference Call:

Date: May 10, 2017 (Wednesday)

Time: 09:00 AM

Conference Call Number: 800-230-1085

To register for the May 10, 2017 webinar (registration is NOT required if only participating using the conference call number):

<https://attendee.gotowebinar.com/register/898160644782857985>

TEXT OF LETTER TO REGIONAL CENTER EXECUTIVE DIRECTORS FROM THE DEPARTMENT OF DEVELOPMENTAL SERVICES

The following is the complete text of the letter sent by the Department of Developmental Services (DDS) to all 21 regional center executive directors, dated May 1, 2017, regarding the Draft Survey for Provider Rate Increases. A link to the pdf document copy of this letter is above

DEPARTMENT OF DEVELOPMENTAL SERVICES

1600 NINTH STREET, Room 320, MS 3-8

SACRAMENTO, CA 95814

TTY 654-2054 (For the Hearing Impaired)

(916) 654-1954

May 1, 2017

TO: REGIONAL CENTER EXECUTIVE DIRECTORS AND BOARD PRESIDENTS

SUBJECT: DRAFT SURVEY FOR PROVIDER RATE INCREASES

As you are aware, with the enactment of Assembly Bill (AB) X2-1 (Chapter 3, Statues of 2016), many regional center service providers received rate increases effective July 1, 2016. In particular, rate increases were targeted for the purpose of increasing wages and benefits for staff who spend a minimum of 75 percent of their time providing direct services to consumers.

Included in ABX 2-1 is a requirement that the Department of Developmental Services (Department), with regional center participation, must survey all providers who received this rate increase. The survey must be returned by October 1, 2017, or providers will forfeit the rate increase.

Understanding that completing these surveys may present a significant challenge for some providers, the Department is taking the following steps to help facilitate the process:

Draft Survey – May 1-24, 2017

- Enclosed is a draft survey that has also been sent to several provider and advocacy organizations. We ask that you share this with providers in your area for their comments, suggestions and other feedback. It is important that a wide variety of providers have an opportunity to provide input. Comments and questions can be submitted via email to vendorsurvey@dds.ca.gov.
- The Department has scheduled two webinars/conference calls to review the draft survey, answer questions and take suggestions and comments. The calls are scheduled for Friday, May 5, 2017, at 2:00 p.m. and Wednesday May 10, 2017, at 9:00 a.m. Information on how to register for these calls can be found at www.dds.ca.gov/ratechangesJuly2016.
- Additionally, the Department will coordinate with stakeholders, such as provider organizations and regional center vendor advisory committees, to discuss strategies and process, including alternative methods for distribution and completion of the survey.
- During this time, the Department will continue to work on developing a secure, online option for submitting the survey. It is hoped that this option will lessen the workload for both providers and regional centers.

May 25-31, 2017

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- The survey will be finalized during this time, including any needed revisions.

Final Survey – June 1-October 1, 2017

- The Department plans to release the final survey by June 1, 2017.
- Once released, the Department will again schedule multiple webinars/conference calls to provide guidance and answer questions.
- Additionally, we will be available to participate in meetings with provider organizations, vendor advisory committees and others to help answer questions.
- Further, responses to frequently asked questions will be available on the Department's website.

We are hopeful that with regional center and provider assistance and involvement, well in advance of when the survey is due, we can collectively minimize the potential difficulties that people may experience in completing this survey.

We appreciate your assistance with this survey process. For any questions, or to submit comments and suggestions, please contact Greg Nabong, Program Operations Branch Manager, at Greg.Nabong@dds.ca.gov, or at (916) 653-3749.

Sincerely,
Original signed by:

JIM KNIGHT
 Assistant Deputy Director
 Community Services Division

Enclosure

cc: Regional Center Chief Counselors
 Regional Center Administrators
 Regional Center Community Services Directors
 Association of Regional Center Agencies

WHAT CALIFORNIA LAW REQUIRES

CDCAN took the following provision from ABx2 1 that deals specifically with the provider rate increases targeted for workers who spend a minimum of 75% of their time providing direct services and supports to people with developmental disabilities they serve – and the requirement for a provider survey due by October 1, 2017. A link to the special session bill is below:

SEC. 9. Section 4691.10 is added to the Welfare and Institutions Code, to read:

4691.10. (a) (1) Notwithstanding any other law or regulation, and to the extent funds are appropriated in the annual Budget Act for this purpose, the department shall provide a rate increase 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. The department shall not allocate more than one hundred sixty-nine million five hundred thousand dollars (\$169,500,000) of the amount appropriated in the act that added this section for this purpose, plus any associated matching funds. The rate increase shall only apply to services for which rates are set by the department or through negotiations between the regional centers and service providers, and to the rates paid for supported employment services, as specified in subdivisions (a) and (b) of Section 4860, and vouchered community-based services, as specified in paragraph (7) of subdivision (c) of Section 4688.21. This section shall not apply to those services for which rates are determined by other entities, including, but not limited to, the State Department of Health Care Services or the State Department of Social Services, or are usual and customary.

(2) For the purposes of this subdivision, "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 include 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. State employees participating in the Community State Staff Program are ineligible for the wage increase described in this section.

(b) The rate increase specified in subdivision (a) shall be implemented in the following manner:

(1) With regional center participation, the department shall conduct a survey of a random sample of service providers in each service category eligible for the rate increase. The survey shall request information regarding all of the following and shall be returned to the regional center and department by April 15, 2016:

(A) Number of employees who spend a minimum of 75 percent of their time providing direct services to consumers and their total salary, wage, and benefit costs.

(B) Administrative costs as specified in subdivision (b) of Section 4629.7, including the number of employees and total salary, wage, and benefit costs associated with those administrative costs.

(C) Any other staff and their total salary, wage, and benefit costs that are not included in either subparagraph (A) or (B).

(D) Any other costs to the provider, other than the costs described in subparagraphs (A) to (C), inclusive.

(E) Any additional information, as requested by the department, to assist in the determination of rate increases.

(2) The vendoring regional center shall certify that, to the best of its knowledge, the survey results accurately reflect the services provided by each surveyed service provider. The results from the survey shall be used by the department to determine the rate increase to be applied, by service category. The rate increase shall be the same for all eligible providers in each service category and is intended to provide comparable increases across service categories for staff providing direct services as described in subdivision (a).

(3) By July 1, 2016, utilizing the data derived from paragraph (1), the department shall do both of the following:

(A) For those service providers whose rates are set by the department, notify those providers and the associated regional centers of the amount by which the rates are to be increased.

(B) For those service providers whose rates are set by negotiation with the regional center, notify the regional center of the amount by which the rates are to be increased.

(4) With regional center participation, the department shall conduct a survey, in a format determined by the department, of all providers who received the rate increase described in subdivision (a). Providers shall submit the completed survey to the department by October 1, 2017. The survey shall request information on how the rate increase was used by providers and shall include, but is not limited to, the following:

(A) Number of employees and their salary, wage, and benefit costs, and increases provided as a result of this subdivision.

(B) Percentage of time each employee spends providing direct services.

(C) Administrative expenses, consistent with subdivision (b) of Section 4629.7.

(D) Any additional information as determined by the department.

(c) Providers granted a rate increase pursuant to this section shall maintain documentation, subject to audit by the department or regional center, that the rate increase was used solely to increase wages, salaries, and benefits of eligible staff members spending a minimum of 75 percent of their time providing direct services to consumers.

(d) The rate increases calculated by the department pursuant to this section shall be effective July 1, 2016, and implemented as described in subdivision (b).

(e) Any provider that fails to report the information required by paragraph (4) of subdivision (b) to the department by October 1, 2017, shall forfeit the increases described in subdivision (a).

(f) In its 2017–18 May Revision fiscal estimate, the department shall describe the implementation of the increases provided pursuant to this section.

CDCAN - MARTY OMOTO YOUTUBE CHANNEL

A CDCAN (Marty Omoto, family member and advocate) youtube channel was set up and has several videos dealing with current – and previous state budget issues, disability and senior rights, and advocacy.

To see the current videos, including March 2014 San Andreas Regional Center Aptos Legislative Breakfast, January 2014 panel discussion on services for adults with autism spectrum and related disorders in Palo Alto, and older videos including video of April 2003 march of over 3,000 people with developmental disabilities, families, providers, regional centers and others from the Sacramento Convention Center to the State Capitol (to attend and testify at budget hearing on proposed massive permanent cuts to regional center funded services, go to the CDCAN (Marty Omoto) Channel

at: <https://www.youtube.com/channel/UCEySEyhnr9LQRiCe-F7ELhg>

More videos – including new current videos (an interview with longtime advocate Maggie Dee Dowling is planned, among others) – plus archive videos of past events – will be posted soon.

ALERT: PLEASE HELP!!!!!!

MAY 1, 2017 – MONDAY LATE EVENING

PLEASE HELP CDCAN CONTINUE ITS WORK

CDCAN Townhall Telemeetings, CDCAN Reports and Alerts and other activities cannot continue without YOUR help. To continue the CDCAN website and the CDCAN Reports and Alerts sent out and read by over 65,000 people and organizations, policy makers and media across the State, and to continue and resume CDCAN Townhall Telemeetings, trainings and other events, please send your contribution/donation (please make check payable to "CDCAN" or "California Disability Community Action Network" and mail to:

CDCAN – MAILING ADDRESS:

1500 West El Camino Avenue Suite 499

Sacramento, CA 95833

Office Line: 916-418-4745

CDCAN Cell Phone: 916-757-9549

Email – NEW: martyomoto@att.net [replaced as of June 1, 2016 martyomoto@rcip.com]

Many, many thanks to all the organizations and individuals for their continued support that make these reports and other CDCAN efforts possible!

State of California
Department of Developmental Services

Self-Determination Program - Frequently Asked Questions

GENERAL

Q. What is the Self-Determination Program?

A. The Self-Determination Program allows participants the opportunity to have more control in developing their service plans and selecting service providers to better meet their needs.

Q. When does the Self-Determination Program start; can I enroll now?

A. The program will start once it is approved for federal funding. The Department worked with stakeholders to draft a Home and Community-Based Services Waiver application that was submitted for approval to the Centers for Medicare and Medicaid Services on December 31, 2014. Upon approval of the Waiver application, the Self-Determination Program will be implemented for up to 2,500 participants during the first three years. After this three year phase-in period, the program will be available to all consumers.

Q. How can I keep updated on the progress of the Self-Determination Program?

A. Updates will be posted as they become available on the Self-Determination website. If you want to be notified when updates are made, [send us an email](#) and ask to be included on the update notification list.

Q. How can someone learn more about the Self-Determination Program?

A. Interested participants, families, or others are encouraged to visit the [Self-Determination Program website](#) to find out more information about Self-Determination. The site will be updated as more information is available.

CRIMINAL BACKGROUND CHECKS

Q. Who is required to get a background check? Will parents and family members need one also?

A. A criminal background check is required for people providing direct personal care. If family members provide direct personal care, they must obtain background checks and receive clearance.

FINANCIAL MANAGEMENT SERVICES

Q. What are Financial Management Services?

A. Financial Management Services help participants manage their individual budgets by paying bills and managing the payroll for support workers.

Q. In the co-employer model, is it possible for the person receiving services and their family to be part of the interview process and/or pick the interview questions?

A. Yes. The participant and any person selected and directed by the participant can be as involved as they choose to be.

Q. Who can be a Financial Management Services Provider?

A. Any entity or person, except a relative or legal guardian, chosen by the participant and meets the qualifications may be a Financial Management Services provider.

Q. As a Self-Determination Program participant, would I pay my providers directly and get reimbursed by the Financial Management Services entity, or would I submit the expenses to the Financial Management Services entity for payment to my providers?

A. Neither. The Financial Management Services Provider will pay providers directly.

Q. For individuals needing 24-hour supportive services, is overtime pay applicable whether the co-employment model or fiscal employer agent is selected?

A. Each participant will need to work with their Financial Management Services Provider to determine when overtime pay is required.

INDEPENDENT FACILITATOR

Q. What type of certification or licensure should individuals request from independent facilitators?

A. An independent facilitator is required to receive training in the principles of self-determination, the person-centered planning process, and the other responsibilities consistent with coordination of services for consumers' individual program plans.

Q. What if I need help locating services and supports but choose not to work with an independent facilitator?

A. If a participant chooses not to use the services of an independent facilitator, he/she may choose to use a regional center service coordinator to provide the services and functions of the independent facilitator.

Q. Who pays the cost of the independent facilitator and how much does that typically cost?

A. The cost of the independent facilitator is paid through the participant's individual budget and can be negotiated with the facilitator.

INDIVIDUAL BUDGET

Q. What is an individual budget?

A. It is the amount of money a Self-Determination Program participant has available to purchase needed services and supports.

Q. How does the individual budget amount get determined?

A. The individual budget is determined by the individual program plan team, and is based upon the amount of purchase of service funds used by the individual in the most recent 12-months. This amount can be adjusted, up or down, if the individual program plan team determines that the individual's needs, circumstances, or resources have changed. Additionally, the individual program plan team may adjust the budget to support any prior needs or resources that were not addressed in the individual program plan.

Q. How does the individual budget amount get determined for an individual, who is either new to the regional center, or does not have a 12-month history of purchase of service costs?

A. For these individuals, the individual budget amount is determined by the individual program plan team, and is based upon the average purchase of service cost of services and supports, paid by the regional center, that are identified in the individual's individual program plan. The average cost may be adjusted, up or down, by the regional center, if needed to meet the individual's unique needs.

Q. Are there restrictions on what the individual budget can be used for?

A. Yes, a participant can only purchase services and supports as described in the Self-Determination Program Waiver and in the individual program plan. Services funded through other sources (e.g., Medi-Cal, schools) cannot be purchased with Self-Determination Program funds.

Q. Is the Self-Determination Program budget and In-Home Supportive Services [budget] different?

A. Yes. In-Home Supportive Services is a generic resource and is not included or paid for through the Self-Determination Program.

Q. In reality is the program decreasing your budget?

A. The individual budget is determined by the individual program plan team, and is based upon the amount of purchase of service funds used by the individual in the most recent 12-months with the ability to adjust if circumstances require it. The Self-Determination Program expands the options available to a participant; your budget is the same as it would be if you were obtaining services through your Regional Center.

Q. Can I use my budget to pay for recreation activities?

A. The Self-Determination Program allows you to purchase social recreation activities.

Q. What is an unmet need? How do I get that included in my budget?

A. An unmet need is a service identified as needed and not yet provided. You may be able to include services in your

budget by adding them to your individual program plan.

RIGHTS

Q. What if participants are happy with their current service delivery program and do not wish to enroll in the Self-Determination Program?

A. Enrollment in the Self-Determination Program is completely voluntary. Just like any other program offered under the Lanterman Developmental Disabilities Services Act in California, an individual chooses what is best for him or her. An individual may choose to participate in, and may choose to leave, the Self-Determination Program at any time.

Q. How much responsibility will participants or their family have if they choose to participate in the Self-Determination Program?

A. The participant will need to develop a person-centered plan and select individuals or members from their planning team to help implement the plan. The participant will also need to choose a Financial Management Services entity that will work with him or her to monitor an Individual budget.

Q. If I choose to participate in the Self-Determination Program, will I still have the same rights?

A. Yes, participants enrolled in the Self-Determination Program will have the same rights established under the traditional service model (e.g. appeals, eligibility determinations, and all other rights associated with the individual program plan process).

SELECTION PROCESS

Q. What criteria will the regional center use to select participants?

A. The process for selecting and enrolling the 2,500 participants in the first three years is described on the [Self-Determination Program web page](#).

Q. Who is eligible for the Self-Determination Program?

A. An individual must meet the following eligibility requirements:

- Has a developmental disability and currently receives services from a regional center or is a new consumer of a regional center;
- Agrees to specific terms and conditions, which include but are not limited to, participation in an orientation for the Self-Determination Program, working with a Financial Management Services entity, and managing the Self-Determination Program services within an individual budget amount;
- An individual who lives in a licensed long-term health care facility (i.e., a Skilled Nursing Facility or Intermediate Care Facility) is not eligible to participate in the Self-Determination Program. If someone lives in one of these facilities and is interested in the Self-Determination Program, he or she can request that the regional center provide person-centered planning services in order to make arrangements for transition to the Self-Determination Program, provided that he or she is reasonably expected to transition to the community within 90 days.

SERVICES

Q. The Self-Determination Program website has links to a list of proposed services and definitions. Will the individual regional centers be allowed to interpret those differently?

A. The listed services are those that have been proposed in the Self-Determination Program Waiver application. Also included with each service is a description of qualifications for each service provider. This is all subject to approval by the Centers for Medicare & Medicaid Services.

Q. Can a consumer request a camp or trip through an organization that is not familiar to the regional center?

A. Other than Financial Management Services, providers of services in the waiver do not have to be vendored through the regional center.

Last Updated: 9/29/2015

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SB 468 (Emmerson/Beall/Mitchell/Chesbro) Statewide Self-Determination Program

December 2013, Pub. #F077.01

SB 468¹ creates a state-wide Self-Determination Program which is a voluntary, alternative to the traditional way of providing regional center services. It provides consumers and their family with more control over the services and supports they need. Consumers and families for example, may purchase existing services from services providers or local businesses, hire support workers or negotiate unique arrangements with local community resources. Self-determination provides consumers, and their families, with an individual budget², which they can use to purchase the services and supports they need to implement their Individual Program Plan (IPP).

1. When will the statewide Self-Determination Program be up and running?

It will take several years for self-determination to be in place. First, the Department of Developmental Services (DDS) has until December 31, 2014 to apply for federal Medicaid funding to establish and fund the program. Once federal approval is obtained, most likely in 2015, the program will be available statewide but for the first three years is capped

¹ https://www.leginfo.ca.gov/pub/13-14/bill/sen/sh_0451-0500/sb_468_bill_20131009_chaptered.pdf

² See question 6 for an explanation of the individual budget

at 2500 individuals. After the three-year phase-in period, the program is available to all eligible consumers on a voluntary basis.

2. Who is eligible for the Self-Determination Program?

To be eligible for the program, you must:

(1) Have a developmental disability, as defined in the Lanterman Act³, and currently be receiving services under the Lanterman Act. This means that consumers between the ages of birth through two who receive services under the California Early Intervention Services⁴ program are not eligible to participate. However, consumers who are age 3 or older but new to the regional center system are eligible to participate in self-determination.

(2) Not live in a licensed long-term health care facility unless transitioning from that facility⁵.

(3) Agree to do the following:

---Receive an orientation to the Self-Determination Program.

---Utilize self-determination services and supports only when generic services and supports are not available⁶.

---Manage the services and supports within your individual budget.

--Utilize the services of a fiscal manager you choose who is vendored by a regional center.

3. How will the Self-Determination Program be implemented?

Each regional center is required to implement the Self-Determination Program and do the following:

1) Contract with local consumer or family-run organizations to conduct outreach to consumers and families to provide information about the Self-Determination Program and help ensure that the program is available to a diverse group of participants and underserved communities; and

2) Collaborate with the local consumer or family-run organizations to jointly conduct training on the Self-Determination Program for interested consumers and their families.

³ See Welfare and Institutions Code Section 4512

⁴ The early intervention law is found in Government Code Section 95000 et seq.

⁵ These facilities are defined in paragraph (44) of subdivision (a) of Section 64302 of Title 17 of the California Code of Regulations

⁶ This requirement to use generic services is identical to the generic services requirement in the traditional regional center system

4. How will regional centers decide who participates in the program during the three year phase in period?

The Self-Determination Program must be available to individuals who reflect the disability, ethnic and geographic diversity of the state. While SB 468 does not specify how participants will be chosen during the initial phase-in period, regional centers must ensure that the program is available to the diverse group of consumers served in their catchment area.

In the first three years, DDS will determine the number of Self-Determination Program participants in each regional center. This will be based on the relative percentage of total consumers served by the regional centers minus any remaining participants in the self-determination pilot projects.

The bill also recognizes that consumers in traditionally underserved linguistic, cultural, socioeconomic, and ethnic communities have unique challenges in accessing needed regional center services and that the Self-Determination Program offers increased service flexibility, which will help promote access to needed services for these consumers and their families.

5. How is my IPP developed in the Self-Determination Program?

Your IPP team will use a person-centered planning process to develop your IPP. The IPP will include the services and supports, selected and directed by you to achieve the objectives in your IPP. Information about your IPP may be found in our publication "Rights Under the Lanterman Act", Chapter 4: Individual Program Plans:
<http://www.disabilityrightsca.org/pubs/PublicationsRULAEnglish.htm>

6. How is my individual budget determined in the Self-Determination Program?

The individual budget is the amount of regional center funding available to you to purchase the services and supports you need to implement your IPP and ensure your health or safety. The individual budget is calculated once during a 12-month period but may be revised to reflect a change in your circumstances, needs or resources.

For current regional center consumers, the budget will equal 100% of the amount of the total purchase of service expenditures made by the regional center during the past 12 months. This amount can be adjusted by the IPP team, if the team determine an adjustment is needed for one of the following reasons:

---There is a change in your circumstances, needs, or resources that would result in and increase or decrease in your purchase of service expenditures; or

--There are prior needs or resources that were unaddressed in the IPP, which would have resulted in an increase or decrease in your purchase of service expenditures.

For a participant who is new to the regional center system or does not have 12 months of purchase of service expenditures, the IPP team will determine the services and supports needed and available resources. The regional center will use this information to identify the cost of providing the services and supports based on the average cost paid by the regional center unless the regional center determines that you have unique needs that require a higher or lower cost. This amount will be your individual budget unless it is adjusted as described below.

The regional center must certify that regional center expenditures for the individual budget, including any adjustment for current consumers, would have occurred regardless of your participation in the Self-Determination Program.

The budget will not be adjusted to include additional funds for either the independent facilitator or the financial management services.

7. Who can assist me during the person-centered planning process?

You can use an independent facilitator that they select to assist in the person-centered planning and IPP processes. An independent facilitator must be a person who does not provide services to you and is not employed by a person who provides services to you. You may also use a regional center service coordinator to assist with these functions. An

independent facilitator can advocate for you during a person centered planning meeting, assist you in making informed choices about your budget, and help you identify and secure services. The cost of the independent facilitator is paid from your individual budget.

8. Who assists me with managing my budget so that my funds will last throughout the year?

Participants are required to use a fiscal manager, vendored through the regional center, to help manage and direct the distribution of funds contained in your individual budget and ensure you have enough funds to implement your IPP throughout the year. These services can include bill paying, facilitating the employment of service and support workers, accounting, and compliance with applicable laws. The cost of the fiscal manager is paid from your individual budget, except for the costs of any criminal background check. You and your regional center service coordinator will receive a monthly statement from the fiscal manager which shows the budget amount in each category, the amount you have spent and the amount remaining.

9. Can I move money around in my budget?

The bill allows you to annually transfer up to 10% of the funds originally distributed to any budget category to another budget category or categories, and allows transfers of more than 10% provided the transfer is approved by your IPP team or the regional center. DDS will determine the budget categories with input from stakeholders.

10. What services and supports can I get with self-determination?

The Self-Determination Program will fund only those services and supports that are eligible for federal matching funds and only when generic services (for example, other governmental services such as special education, IHSS, Medi-Cal or insurance) are not available. It will also allow the purchase of some services which were suspended

services such as social recreation, camping, non-medical therapies, and respite⁷.

**11. What happens if I move from one regional center to another?
Can I still participate in the Self-Determination Program?**

You will continue to receive self-determination services and supports if you transfer to another regional center catchment area, provided that you remain eligible for the program. The bill requires the balance of your individual budget to be reallocated to the receiving regional center.

12. What happens if I no longer want to participate in self-determination or am no longer eligible for the program?

The bill requires regional centers to provide for your transition from the Self-Determination Program to traditional regional center services and supports if you are no longer eligible for or voluntarily choose to leave the program..

13. If I leave the Self-Determination Program, can I return?

If the regional center finds you ineligible for the Self-Determination Program you can return to the program upon meeting all applicable eligibility requirements, and upon approval of your planning team. If you, leave the program voluntarily you cannot return to the program for at least twelve months. During the first three years of the program, your right to return is also conditioned on your regional center not having reached its limit on the number of participants.

14. Can my regional center require me to participate in self-determination if I don't want to?

The Self-Determination Program is fully voluntary. A regional center cannot require participation in the program.

15. What if I am in a licensed long-term care facility and I want to participate in the In Self-Determination?

⁷ Welfare and Institutions Code Section 4648.5(a) and 4686.5

If you currently live in a licensed long-term care facility you are not eligible for the Self-Determination Program. However, you 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 you are 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 the request. If you are not ready to transition to the community, you may ask that your interest in self-determination be reflected in your IPP and request the regional center help you participate in self-determination as part of the transition process.

16. What if I do not receive Medi-Cal? Can I still participate in self-determination?

The bill authorizes participation in the Self-Determination Program for consumers who are not eligible for Medi-Cal, provided that they meet all other program eligibility requirements and the services and supports they receive are otherwise eligible for federal matching.

17. How does the Self-Determination Program ensure the safety of consumers?

The bill establishes criminal background check requirements for providers of services and supports under the Self-Determination Program. It requires DDS to issue a program directive identifying the non-vendored providers that must submit to a criminal background check, which shall include but not be limited to, individuals who provide direct personal care services to a participant and other non-vendored providers for whom a criminal background check is requested by a participant or his/her financial management service. The criminal background check includes a fingerprint requirement for all prospective providers. The cost of the background check is paid by the provider of services.

18. What happens to the individuals who are participating in the self-determination pilot programs?

Individuals receiving services and supports under the self-determination pilot projects can either continue to receive services and supports under the Self-Determination Program, or transition to the traditional model of providing services and supports within the regional center system.

19. What steps can I take if I disagree with a regional center's decision?

The Lanterman Act due process rights apply to self-determination participants. This means, for example, you will receive notice of the regional center finds you ineligible for self-determination or proposes to changes your budget. It also means that you can request a hearing if you disagree with a regional center decision such as your right to participate in self-determination or the amount of your budget.

20. How does the Self-Determination Program ensure transparency and accountability?

Each regional center is required to have a volunteer advisory committee; the majority of whose members are consumers and family members appointed by the regional center and the local Area Board. The clients' rights advocates are also part of the committee. The state Developmental Disability Council will also convene a statewide advisory committee to identify best practices, design effective training materials, and make recommendations for improvements in the Self-Determination Program. DDS is also required to collect and report outcome data to the Legislature as a means of ensuring transparency and accountability.

21. What can consumers and family members do now to learn more or help implement the statewide Self-Determination Program created by SB 468?

-- The Autism Society of Los Angeles plans to hold trainings and conferences as well as distribute materials so consumers and families can learn more. Check the Autism Society's website at www.autismla.org to learn more.

--If you are part of a self-advocacy group or family member groups, you ask your Clients' Rights Advocate or Area Board to do a training about self-determination for your group.

--Share information about self-determination with other consumers and families.

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--At your next IPP meeting, ask your regional center to note on your IPP that you are interested in participating in self-determination.

--Volunteer to be on your regional center's advisory committee when it is formed, probably in 2015.

--DDS will obtain input from stakeholders in several areas including, informational materials, possible other budget methodologies and uniform budget categories, and may adopt regulations. You may want to look at DDS website, www.dds.ca.gov, to learn about opportunities to provide input.

Disability Rights California is funded by a variety of sources, for a complete list of funders, go to <http://www.disabilityrightsca.org/Documents/ListofGrantsAndContracts.html>.

**Similarities and Differences between
Traditional Regional Center Service Provision
and the New Self-Determination Program**

	Traditional Regional Center Service Provision	Self-Determination Program
Eligibility - Age	All ages	Over age of 3
Eligibility – Living Arrangement	All settings	Must live in community. Can use SDP in licensed long-term health facility if you are expected to move to the community within 90 days
Planning Process	Individual Program Plan (IPP) - Meeting where goals are established and services and supports are decided	Person Centered Plan (PCP) – A group of people focus on an individual and that person's vision of what they would like to do in the future. The IPP team shall use the Person Centered Planning process to develop the IPP
Frequency of planning process	IPP at least every three years, annually at most regional centers, or within 30 days of a request	PCP at least annually but as often as needed
Who decides what services I get?	Regional Center, but you can reject services	You, to meet the objectives in the IPP
Who pays the bills?	Regional Center	Financial Management Service
Do services have to be provided by vendors of the regional center?	Yes, except in very limited circumstances.	No

	Traditional Regional Center Service Provision	Self-Determination Program
Who finds the service providers?	Regional Center	You, Independent Facilitator, Financial Management Services, Friends, and Family
Does regional center monitor the quality of a service provider?	Yes	No
Are services that are available through generic agencies like school or Medi-Cal paid by regional center or thru my budget?	No	No
Can you change service providers?	Yes, if regional center agrees	Yes
Do I have appeal rights?	Yes	Yes

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
San Francisco Regional Office
90 Seventh Street, Suite 5-300 (5W)
San Francisco, CA 94103-6706



DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS

December 11, 2015

Mari Cantwell, Chief Deputy Director
California Department of Health Care Services
P.O. Box 997413, MS 0000
Sacramento, CA 95899-7413

Dear Ms. Cantwell:

The state of California has requested a new Section 1915(c) home and community-based services (HCBS) waiver entitled *California Self-Determination Program Waiver for Individuals with Developmental Disabilities*, CMS control number 1166.00. The proposed waiver seeks to provide home and community-based services to individuals who would otherwise require care at an intermediate care facility (ICF), and to allow participants the opportunity to accept greater control and responsibility regarding the delivery of needed services through enhanced self-direction.

Based on our review of the application and substantive correspondence over the past year between CMS and the state, we have concluded that we need the following additional information and edits made to the proposed waiver before the request can be approved.

CRITICAL RESOLUTION ISSUES

Appendix B: Participant Access and Eligibility

- 1. B-3-f. Selection of Entrants to the waiver** - Please clarify if all eligible individuals are granted entrance into the waiver or indicate the process for the selection of entrants that is based on objective criteria and applied consistently in all geographic areas served by the waiver.

Appendix B: Evaluation/Reevaluation of Level of Care

- 2. B-QIS, Sub-assurance (a)** - The proposed performance measure (PM) addresses only the percentage of enrollees who had a level of care determination before enrolling in the program; whereas the sub-assurance requires that all "applicants" be evaluated who have a reasonable indication that waiver services may be needed. Please revise or add a second PM to fully address the sub-assurance's requirement.
- 3. B-QIS, Sub-assurance (c)** - The second proposed measure states "Number and percent of level of care determinations that were completed accurately" Please define "completed accurately" and revise the performance measure to reflect this.
- 4. B-QIS, Remediation** - Are there any escalating consequences if issues occur repeatedly?

Appendix C-3: Waiver Services

- 5.** For the following services, please add a statement to the service definition specifying that children under age 21 who need these services will receive them through the state plan per EPSDT requirements: home health aide services, Dental Services, Prescription Lens/Frames, Optometric/Optician Services, Psychology Services, Skilled Nursing, Speech, hearing and language, Integrative therapies.
- 6. Waiver service qualifications** - For all provider types please clearly define the qualification. If a specific regulation or code applies, please include pertinent information regarding that particular citation or the areas the citation covers. If there is a license required please be more specific regarding the type of license needed.
- 7. Verification entity** - FMS is not described in Appendix A as a contracted entity. Please explain why the state has specified the FMS as the verifying entity since this appears to be inconsistent with what is in Appendix A for this Medicaid administrative function.
- 8. Frequency of Verification** - Please verify how each entity responsible for verification will do so "ongoing thereafter through the IPP process." Please define "ongoing" under frequency of verification. Please also spell out IPP in this instance.
- 9. Behavioral Intervention Services - Habilitation Services** - This service should be categorized as an "other" service as it provides services outside the scope of Habilitation services.
- 10. Home Health Aide Services** - Specify the additional services that are provided when the state plan benefit is exhausted. Please also specify the state plan service limit.
- 11. Respite** - The state's service definition includes "regularly provided care and supervision of children, for periods of less than 24 hours per day, while the parents/primary non-paid caregiver(s) are out of the home." Please clarify as to how this service will include activities that are beyond the scope of child care, and how this service is necessary to avoid institutionalization. Additionally, the state needs to specify the limits on these services since respite is a temporary service.
- 12. Advocacy Services** - Is generic legal counsel provided in the state and if so by which entities? If the services are specific to legal counsel please indicate how this does not overlap with independent advocacy listed in Appendix E-1-k of the waiver application. If it is not specific to legal counsel please explain how this service is different than case management/service coordination or the Independent Facilitator services and how duplicate billing will not occur.
- 13. Communication Support** - Please indicate how this service is different than technology services and specialized medical equipment and supplies and how duplicate billing will not occur.
- 14. Community Integration and Employment Supports**

- a. Please separate these services into two separate waiver services. Please indicate how the community integration is different than community living supports services and how duplicate billing will not occur.
- b. Please remove “College, including financial assistance with tuition, books, and other related fees” as the state cannot claim FFP for these services, and also subtract any estimated costs associated with this expense from the Factor D cost estimates in Appendix J.

15. Community Living Supports - Please describe how this service is different than other similar services such as homemaker services and community integration services, and what mechanisms the state will put in place to prevent duplicate billing.

16. Crisis intervention and Support

- a. Please describe how these services are different and not duplicative of the behavioral intervention services.
- b. Crisis Facility, Other standard- Please include in this section all types of 24 hour care services and not a reference to another service section.

17. Dental Services - Please describe the extent of the extended coverage of services. Also please include the provider qualifications directly and not by reference to the state plan. Please also specify the state plan service limit.

18. Family Assistance and Supports - Please further define the types of services and supports that would be provided under this service and how this service is different than Training and Counseling Services for Unpaid Caregivers and how duplicate billing will not occur.

19. Financial Management Services

- a. Please indicate why this service is listed as “other” instead of Supports for Participant Direction.
- b. Please define "as appropriate" under the provider qualification, license, business license.
- c. Are individuals who provide FMS allowed to provide any other (additional) waiver services to an individual participant?
- d. How many providers do you expect to enroll for this service and please explain how the state will oversee the performance of the FMS providers?

20. Housing Access Supports - Please indicate how this service will not duplicate case management, community integration, and advocacy services.

21. Independent Facilitator

- a. Please more clearly define this service. Please further explain how this service does not duplicate services provided by the service coordinator, advocacy services, or financial management services.
- b. How will these individuals be trained? How is the training different from that of service providers and/or financial management service coordinators?

- c. 700 participants are estimated to use the service starting WY1, is there a workforce of already trained Independent Facilitators to provide services starting WY1?

22. Individual Training and Education - How will the state ensure this service is not duplicative of other waiver services? For example, employment related training appears duplicative of the employment supports waiver service. In addition, community integration, advocacy, and community living supports all have similar components.

23. Integrative Therapies

- a. Each service will need to be a separate service within the waiver.
- b. Please describe the extent of the extended coverage of services. Also please include the provider qualifications directly and not by reference to the state plan. Please also specify the state plan service limit. For massage therapy, please specify when this service would be needed and necessary for a waiver participant to live in the community.

24. Prescription Lens/Frames - Please describe the extent of the extended coverage of services. Also please include the provider qualifications directly and not by reference to the state plan. Please also specify the state plan service limit.

25. Optometric/Optician Services - Please describe the extent of the extended coverage of services. Also please include the provider qualifications directly and not by reference to the state plan. Please also specify the state plan service limit.

26. Psychology Services - Please describe the extent of the extended coverage of services. Also please include the provider qualifications directly and not by reference to the state plan. Please also specify the state plan service limit.

27. Skilled Nursing - Please describe the extent of the extended coverage of services. Also please include the provider qualifications directly and not by reference to the state plan. Please also specify the state plan service limit.

28. Specialized Therapeutic Services - Please remove this service from the waiver. This service is not available through a 1915(c) waiver.

29. Speech, hearing and language - Please describe the extent of the extended coverage of services. Also please include the provider qualifications directly and not by reference to the state plan. Please also specify the state plan service limit.

30. Technology Services - This service appears to overlap with PERS, communication support, specialized medical equipment and supplies. Please clarify how they are different and how duplicate billing will not occur. The state needs to also remove "but not limited to" from this waiver service definition and specify what can be covered since it is not permissible for the waiver service definition to be open-ended.

31. Training and Counseling Services for Unpaid Caregivers - Please explain how this service is not duplicative of family assistance and supports services.

- 32. C-2-c-i: Types of facilities subject to 1616(e)** - Per the instructions in the Technical Guide please remove the information from this section.
- 33. C-2-f: Open Enrollment of Providers** - Please describe the enrollment process that assures all willing and qualified providers have the opportunity to enroll.
- 34. Qualified Providers, Sub-assurance (a)**
- Please explain why bi-annual reviews by DSS are of sufficient frequency to ensure licensed providers initially meet all required standards prior to furnishing waiver services.
 - Regarding the second proposed PM, Please clarify what the review consists of. How will it help the state to ensure that providers are meeting required licensure and/or certification standards and adhering to other applicable standards?
- 35. Qualified Providers-Sub-assurance (a) and Sub-assurance (b)** - Please clarify what is meant by "Representative Sample – 5."
- 36. Qualified Providers-Sub-assurance (b)**
- The proposed PM only addresses providers who initially meet all required standards; however, the sub-assurance is not limited to initial adherence. Please either revise the proposed PM to indicate how providers continually meet all required standards, or add an additional PM that measures continuous monitoring of providers who do not require licensing or certification.
 - Please explain why bi-annual reviews by DDS are of sufficient frequency to ensure non-licensed providers initially meet all required standards prior to furnishing waiver.
- 37. Qualified Providers-Sub-assurance (c)**
- How does the State monitor the successful completion of 70 hours of competency based training?
 - Are direct support professionals (DSPs) the only providers that must meet a training requirement? If not, please either revise the proposed PM to measure all provider training requirements or add an additional PM.
 - A provider could potentially provide services for an extended period of time without having met training requirements. Please explain why 70 hours of competency based training within two years of hire is sufficient to assure that the provider training is conducted in accordance with state requirements and the approved waiver. How did the state arrive at 70 hours given training can vary for each participant?
- 38. C-5: Home and Community-Based Settings**
- Please include a list of the specific settings where individuals will reside.
 - Please include a list of specific settings where individuals will receive services.
 - Please include a detailed description of the process the state Medicaid agency used to assess and determine that all waiver settings meet the HCB settings requirements.

- d. Please include the process that the state Medicaid agency will use to ensure all settings will continue to meet the HCB settings requirements in the future.

Appendix D: Participant-Centered Planning and Service Delivery

39. D-1-d: Service Plan Development Process

- a. Please describe as part of the planning process how participants are informed of services available under the waiver.
- b. Please describe how responsibilities are assigned for implementing the plan.
- c. Please describe how waiver and other services such as state plan services are coordinated.
- d. Please identify who is assigned the responsibility to monitor and oversee the implementation of the service plan.

40. D-1-g: Process for Making Service Plan Subject to the Approval of the Medicaid Agency

- a. Please provide the basis for the sample size of plans reviewed, how it is representative of the total population, and the review methodology.
- b. Please include the frequency with which DHCS or DDS completes reviews of the plans.

41. D-2-a: Service Plan Implementation and Monitoring

- a. Please clarify how monitoring methods address services furnished in accordance with the service plan, participant access to waiver services is identified in the plan, participants exercise free choice of provider, services meet the participants need, effectiveness of back up plans, participants health and welfare, and participants access to non-wavier services in service plan including health services.
- b. Please clarify the method for prompt follow-up and remediation of identified problems.
- c. Please clarify the methods used to compile systemic collection of information about monitoring results, and how problems identified during monitoring are reported to the state.

42. D-QIS, Service Plan

- a. Please explain why bi-annual reviews by DDS are of sufficient frequency to ensure the service plans address all the participants' assessed needs and personal goals in sub-assurance a,c,d, and e.
- b. Please clarify what is meant by "Representative Sample – 5 for sub-assurance a, c, d, and e.

43. D-QIS, Sub-assurance (a)

- a. For each PM, please add the words "all of" after the word "addressed" in all instances.
- b. How is it determined that the consumers' assessed needs are "adequately" addressed? Who makes this determination?

44. D-QIS, Sub-assurance (c) - Please clarify that the term “required intervals” means that service plans were updated/revised when warranted by changes in the waiver participant’s needs.

45. D-QIS, Sub-assurance (d)

- a. How will the state determine whether participants have received the appropriate type, scope, amount, duration and frequency of services specified in the IPP?
- b. How does the state monitor/ensure that participants with similar needs (similar service plans) do not have drastically different budgets? How will the state monitor whether individual budgets are equitable?

46. D-QIS, Sub-assurance (e) - The proposed PM does not specifically measure whether participants are afforded a choice among services and providers. Please revise this PM to specifically address these issues.

Appendix E: Participant Direction of Services

47. E-1-c: Availability of Participant Direction by Type of Living Arrangement - Please specify/define “community living arrangement” where the state indicated participant direction is supported, including the size of the living arrangement.

48. E-1-f: Participant Direction by a Representative - Please describe the safeguards that ensure a non-legal representative functions in the best interest of the participant.

49. E-1-i-i: Payment for FMS - Please specify how the state will compensate the entities that provide FMS services. Per the HCBS Waiver Technical Guide examples could be a per transaction fee, a monthly fee per participant, a combination of both types of fees, or another method. The state indicates in response to this item in the waiver that FMS costs will be paid from the individual budget but that the individual budget will not be increased to include these costs. This is not permissible. The state may include the FMS waiver service costs in an individual budget but then must reflect and account for this in the individual budget methodology as described in Appendix E-2-b-ii.

50. E-2-b-ii: Participant, Budget Authority - Please specify and define “budget categories.” Are there limits to and/or within budget categories? Per the previous comment, if the state intends to pay for waiver FMS costs from the individual budget, then the state needs to revise the budget methodology.

51. E-2-b-ii: Participant Directed Budget - Please describe how the budget methodology is made available to the public.

52. E-2-a: Participant Employer Status - What mechanism does the state have in place to ensure that individuals maintain authority and control over employees when co-employment is occurring.

53. E-2-b-v: Expenditure Safeguards

- a. Please describe the safeguards to address potential service delivery problems that may be associated with budget underutilization or premature depletion of the participant budget.

- b. What is the state Medicaid agency's role in ensuring that potential budget problems are identified on a timely basis, including over-expenditures or underutilization?

Appendix F: Participant Rights

54. F-1-a: Opportunity to Request a Fair Hearing

- a. Please specify who provides Fair Hearing information to the participant?
- b. Please specify this information is also given to a participant at the time of their entrance into the waiver.
- c. Please specify how notice is made and who is responsible for issuing the notice.
- d. Please clarify what assistance, if any, is provided to the individual pursuing a fair hearing.
- e. Please indicate where notices of adverse action and the opportunity to request fair hearings are kept.

Appendix G: Participant Safeguards

55. G-1-c: Participant Training and Education

- a. What is the frequency of providing training and information?
- b. Do the trainings provided by the regional centers to participants and informal caregivers include how to notify the appropriate authorities when the participant may have experienced abuse, neglect, or exploitation?

56. G-1-d: Responsibility for Review of and Response to Critical Events or Incidents

- a. How do regional centers monitor special incident reporting for non-vendored providers?
- b. Please specify who is responsible for an investigation, how investigations are conducted, and the timeframe for conducting and completing the investigation.
- c. Please also indicate the timeframes for informing the participant, applicable representative, and other relevant parties, such as providers, of the investigation results.
- d. What is the timeframe for reporting for non-vendored providers?
- e. How are non-vendored providers notified of SIR requirements?

57. G-2-a: Safeguards Concerning Restraints: Applicability: Restraints - The state selected that they will not permit the use of restraints but then indicated in the response that there are certain circumstances in which restraints may be used. Therefore, the state needs to revise the selected response that currently indicates that they do not permit the use of restraints, to "the use of restraints is permitted" and complete the required information for this section.

58. G-2-c: Seclusion - The state selected that they will not permit the use of seclusion but then indicated in the response that there are certain circumstances in which seclusion may be used. Therefore, the state needs to revise the selected response that currently indicates that they do not permit the use of seclusion, to "the use of seclusion is permitted" and complete the required information for this section. CMS notes that the use of seclusion must comport with the home and community-based setting requirements at Section 42 CFR 441.301(c)(4)(iii) and (vi)(F), and person-centered service planning and plan requirements at 42 CFR 44.301(c)(1) and (c)(2).

- 59. G-3-b: Medication Management and Follow-up** - Please indicate the methods for conducting monitoring, how monitoring has been designed to detect potentially harmful practices, and follow-up to address such practices?
- 60. G-3-b-ii: State Oversight and Follow-up** - What is the process to communicate information and findings from monitoring to the Medicaid Agency and operating agency regularly? What is the frequency state monitoring is performed?
- 61. G-3-c-iii: Medication Error Reporting** - Please specify the types of medications errors that must be recorded and also those which must be reported.
- 62. G-3-c-iv: State Oversight Responsibility** - Please specify the requested information in this section.
- 63. QIS-G: Health and Welfare, Sub-assurance (a)** - This PM measures the timeliness of special incident reports and does not measure that the state, on an ongoing basis, addresses and seeks to prevent instances of abuse, neglect, exploitation, and unexplained death. The state needs to develop additional PMs to measure all aspects of this sub-assurance. Also, special incident reports are not the only means of determining whether instances of abuse, neglect, etc. have occurred, as it is possible that some of these instances could go unreported. The state must develop other metrics by which to measure that all instances of abuse, neglect, exploitation and unexplained death are being identified, even if a special incident report has not been filed.
- 64. QIS-G, Sub-assurance (b)** - What is the timeframe for appropriate actions to be taken? Please either modify or add PMs to measure that an incident management system is in place that effectively prevents further similar incidents to the extent possible.
- 65. QIS-G, Sub-assurance (d)** - How is it determined that a consumer's special health care requirements or safety needs are met? One or more PMs should be added to measure compliance with the state's overall health care standards. The sub-assurance ties the monitoring of health care standards to the responsibilities of the service provider. Please add one or more PMs to measure provider adherence to the health care standards.
- 66. Appendix H: Quality Improvement Strategy** - Please include how the QIS stratifies information for each respective waiver, include the control numbers of the other waivers, and provide the other long term care services addressed in the QIS.

Appendix I: Financial Accountability

67. I-1: Financial Integrity and Accountability

- a. What are the differences, if any, between the DDS fiscal audits every two years and their follow-up audits in alternate years or more frequently as needed?
- b. What determines if a follow-up audit is needed more frequently than in alternate years?
- c. Are all providers subject to annual onsite audits? If not, what percentage of individual and agency providers are audited on an annual basis and are they chosen by random sample?

- d. Are some providers audited more frequently than others? If yes, why and how often are they audited?
- e. How does the state recognize whether a provider is a certified biller or not?

68. I-2-a: Rate Methodology - Please describe how information about payment rates is made available to waiver participants.

69. I-2-a: Rate Methodology - Regarding the negotiation of rates between the waiver participant and the selected provider:

- a. Please confirm that all waiver service rates are negotiated by participants. If any services are not negotiated by participants, please explain how rates for those services were developed.
 - i. Would rates for expanded state plan services also be negotiated?
- b. Are participants and providers given any guidance as to what an appropriate rate may be?
- c. Is there any limit for what a participant can spend per unit of service?
- d. Please describe state's oversight process of rate determination.
- e. How does the state ensure that the negotiated rates are consistent with economy, efficiency and quality of care?
- f. What role, if any, would the regional center play in setting the rate?
- g. Please describe the parameters that would prevent a participant from varying from a reasonable rate.

70. I-2-d: Billing Validation Process

- a. Does the state use patient surveys to validate post payment billings? If yes, please describe those methods. If not, describe what processes are in place to assure only proper payments are being made and that any payments for inappropriate billings are recouped.
- b. How does DDS ensure that the services were provided?
- c. How does DDS ensure that payments are not made for services when a participant is in a nursing facility?

71. QIS – I: Financial Accountability, Sub-assurance (a)

- a. How does the State ensure that claims are paid only for services rendered?
- b. How does the State ensure that claims are coded correctly?
- c. How does the State ensure that services have been actually rendered before they are paid?
- d. Please explain why bi-annual reviews are of sufficient frequency to assure the service plans address all the participants' assessed needs and personal goals. Please clarify what the sampling approach is, since the state indicated that less than 100% of the claims will be reviewed.

72. QIS-I, Sub-assurance (b)

- a. Please clarify how the approved service rate is assured to be developed consistent with the approved rate methodology.
- b. Please clarify what the sampling approach is, since the state indicated that less than 100% of the claims will be reviewed.

Appendix J: Cost Neutrality Demonstration

73. J-2-c: Development of Factor D

- a. Please describe how the per capita cost, by service, was trended forward to the number of persons who will be served during years 1 through 3.
- b. What is the basis for the estimates of 1,000 and 2,500 for the number of eligible recipients?
- c. Please clarify whether the Average Length of Stay units noted in each waiver year represent months or days. If the units are months, please update the waiver to have the Average Length of Stay measured in days.
- d. Please confirm the source of the data used to create the Factor D estimates.
- e. What analysis was done to ensure that this data was appropriate to use for the projections of this waiver?
- f. Were any adjustments made to the data before developing projections for this waiver?
- g. Please clarify why Therapeutic/Activity-Based Day Services (Hour) rate is \$40 while Therapeutic/Activity-Based Day Services (Month) rate is \$50.
- h. What history led to the estimate for Technology services?

74. J-2-c: Development of Factors D', G and G'

- a. Please confirm that the state has accounted for and removed the costs of prescribed drugs furnished to Medicare/Medicaid dual eligibles under the provisions of Part D.
- b. Please confirm the source of the data used to create the estimates for each of these factors.
- c. What analysis was done to ensure that this data was appropriate to use for the projections of this waiver?
- d. Were any adjustments made to the data before developing projections for this waiver?

ISSUES THAT NEED FURTHER CLARIFICATION OR CORRECTION

1. Overall Questions about the Waiver

- a. What is the anticipated impact of this new waiver on DD waiver enrollment?
- b. A number of services are not available in the current DD waiver; will the DD waiver be updated at renewal or through amendment to mirror services under the SDP?
- c. How will the Waiver Monitoring Process for the SDP waiver be integrated into the existing HCBS Biennial Collaborative Review Process?

2. Main 6-I: Public Input - We note that individuals and organizations made comment during the public input period. Please include in this section all the methods and details of how people were able to make public comment.

3. Appendix A-2-b - When was the Interagency Agreement (IA) between the State Medicaid Agency and DDS last updated? How frequently is the IA updated? Please provide CMS with the link or a copy of the IA.

4. **B-1-b: Additional Criteria** - When selecting the first option in E-1-d: Election of Participant Direction, this section must specify that the waiver is limited to individuals who want to direct some or all of their services.
5. **B-3-f: Selection of Entrants to the waiver**
 - a. How are informational meetings about the SDP being publicized?
 - b. How often will the SDP orientation be offered?
 - c. How does an individual let their regional center know that they are interested in enrollment?
 - d. How is this documented at the regional center?
 - e. If there is going to be an interest list or wait list please describe this process?
6. **B-4-b: Medicaid Eligibility Groups Served in the Waiver** - Since the 1931 group has been separated into three distinct eligibility groups; other caretaker relative specified at 435.110, pregnant women specified at 435.116 and children specified at 435.118, the state should remove the check mark from the 1931 group in Appendix B-4-b. No other changes are necessary, since the state has included all other mandatory and optional groups covered under its state plan under the waiver request.
7. **B-6-i: Procedures to Ensure Timely Re-Evaluations** - Please include all pertinent information regarding the procedures used to ensure that re-evaluation will be performed on a timely basis.

C-1- Waiver services

8. **Taxonomy code-** CMS would encourage the state to use the taxonomy codes for the services section.
9. **Participant- Directed Goods and Services** - Please indicate in the definition that the participant directed goods and services must be documented in the service plan and are purchased from the participant directed budget. Also please include that experimental or prohibited treatments are excluded.
10. **Transition/ Set up Expenses** - Please indicate the amount in the amount section if there is a limit for these services.
11. **Transportation** - How will the state determine when the use of natural supports, such as family, neighbors, friends, have been exhausted and services begin?
12. **Vehicle Modifications** - Please add the assurance in the waiver service definition that the vehicle may be owned by the individual or family member with whom the individual lives or has consistent and ongoing contact, who provides primary long term support to the individual and is not a paid provider of such services.
Please also include any cost limits in the limits sections associated with this service.
13. **C-2-a: Criminal History/Background Investigations**
 - a. Please define "other services and supports" in reference to providers who may need to obtain a criminal background check.

- b. What is the state's process to ensure that mandatory background investigations have been conducted?
- c. Please describe the scope of the investigation.
- d. How will the state ensure that they have been conducted in accordance with the state's policies?

14. C-2-c-ii: Larger Facilities - Please remove N/A and insert "required information is contained in response to C-5."

15. I-2-a: Rate Methodology - Please describe the process used for public input in this section.

Under Section 1915(f)(2) of the Social Security Act, a waiver request must be approved, denied, or additional information requested within 90 days of receipt, or the request will be deemed granted. The 90-day period for this waiver request ends on December 28, 2015. These questions constitute a formal RAI, after which a new 90-day period will begin upon the State's re-submission of a revised waiver application, via the web-based Waiver Management System (<https://wms-mmdl.cdsvdc.com/WMS/faces/portal.jsp>). Please refer to CMS control number CA 1166.00 in all future correspondence regarding this waiver.

In addition to re-submitting the waiver application, the state should also send a formal written response to these questions to Amanda Hill in Central Office with a copy to Adrienne Hall in the San Francisco Regional Office (Amanda.Hill@cms.hhs.gov; Adrienne.Hall@cms.hhs.gov). For assistance or information regarding this RAI, please contact Amanda Hill at (410) 786-2457 or Adrienne Hall at (415) 744-3674. Thank you for your prompt attention. We look forward to continuing to work with the state officials to move towards implementation of this new waiver.

Sincerely,

/s/

Henrietta Sam-Louie
Acting Associate Regional Administrator
Division of Medicaid & Children's Health Operations

cc: Rebecca Schupp, Chief, Long-Term Care Division, DHCS
Jalal Haddad, Long-Term Care Division, DHCS
Amanda Hill, CMS, CMCS

Self-Determination Program Enrollment

During the first three years of the Self-Determination Program, enrollment is limited to 2,500 people. To help ensure the selection of the 2,500 participants is equitable, the following process was developed by the Self-Determination advisory group.

What does someone need to do to be considered for enrollment?

1. **Participate in an informational meeting at your regional center.** It's important to hear, in greater detail, information about the Self-Determination Program. At this meeting, people will learn not only about the opportunities but also the increased responsibilities involved in accepting more control over coordinating their services. Understanding this information will help people decide if the Self-Determination Program might be a good option for them.
2. **After participating in the informational meeting, let the regional center know you're interested in enrolling in the Self-Determination Program.** After you have participated in the informational meeting and you think that Self-Determination is a good option for you or your family member, you must let the regional center know you're interested in enrolling in the Self-Determination Program. As discussed below, this does not guarantee you will be selected as part of the first 2,500 participants.

What happens after someone participates in the informational meeting and lets the regional center know they're interested?

1. **Regional centers send names of those interested to the Department of Developmental Services (DDS).** Only those consumers/ family members who have participated in an informational meeting will be eligible for enrollment in the Self-Determination program.
2. **DDS will send confirmation to those whose names were forwarded by the regional centers.**
3. **DDS will randomly select the first 2,500 enrollees from among those who have attended an informational meeting.** This selection will be done from the names of those received by DDS from the regional centers. The selection takes into consideration the following factors to ensure those selected are representative of the statewide regional center population:
 - Regional Center
 - Ethnicity
 - Age
 - Gender
 - Disability diagnosis
4. **Those selected can enroll in the Self-Determination Program.** The enrollment will be done through the regional centers who will work with each participant to enroll in orientation, establish an individual budget, etc.
5. **If not selected initially, consumers will remain on the interest list for future enrollment opportunities.**



Tri-Counties
Regional Center

WHAT'S HAPPENING WITH SELF-DETERMINATION AT TCRC?

The Five Principles of Self Determination

- **Freedom** to exercise the same rights as all citizens; to establish, with freely chosen supports, family and friends, where they want to live, with whom they want to live, how their time will be occupied, and who supports them;
- **Authority** to control a budget in order to purchase services and supports of their choosing;
- **Support**, including the ability to arrange resources and personnel, which will allow flexibility to live in the community of their choice;
- **Responsibility**, which includes the opportunity to take responsibility for making decisions in their own lives and accept a valued role in their community;
- **Confirmation** in making decisions in their own lives by designing and operating the service that they rely on.

From the Law *Section 4685.8, SB 496*

"The Self-Determination Program (SDP) is a voluntary delivery system consisting of a mix of services and supports, selected and directed by a participant through person-centered planning, in order to meet the objectives in his or her Individual Program Plan (IPP). Self-determination services and supports are designed to assist the participant to achieve personally defined outcomes in community settings that promote inclusion, and allow participants to have more control in developing service plans and selecting service providers."

What is Self-Determination? The Self-Determination Program (SDP) is a voluntary alternative to the traditional way of providing regional center services, including greater control of individualized budget.

Who is Eligible?

People served by TCRC

- Over age 3
- Who live at home or in the community
- Who are in the process of moving into the community *Must be willing to get training and follow the program's rules*

When Will Self-Determination Start?

This program starts when it's approved for Federal Funding.

- 2,500 people across the state can join during the first 3 years.
- Then the program will be available to all those served by the regional center.
- TCRC has been approved to enroll 114 participants during the first three years.

How do I Enroll?

1. Participate in the Pre-Enrollment Informational Meeting
2. Confirm you're still interested
3. TCRC will send your name to the Department of Developmental Services (DDS) to be put through the selection process. DDS will select the initial 114 participants (16 current and 98 new) for TCRC.

Interested?

A Self-Determination Pre-Enrollment Informational Meeting will be held. Get added to our "Interest List". Email self-determination@tricounties.org, call (805) 288-2500 or contact your Service Coordinator. Visit www.tri-counties.org, click on "newsletter" to the right, join our list, check the box next to Self-Determination.

DDS's "Interest List"

To self-identify as an interested party with DDS and receive updates on Self-Determination, email DDS at sdp@dds.ca.gov. Give DDS:

1. Your name
2. Name of the person interested
3. Your regional center

Join our Meeting!

Tri-Counties Self-Determination Advisory Committee meetings are held quarterly. Our next meeting will be on July 26, 2016 in the Santa Barbara Annex at 5:30. If attending the meeting in SB, please RSVP. Telephone conferencing is also available. Visit our website for details. www.tri-counties.org

TCRC SELF DETERMINATION ADVISORY COMMITTEE

2017 CALENDAR

JUNE 27, 2017

Santa Barbara Office Annex Room

5:30 p.m. Light Dinner

6:00 p.m. Self Determination Committee Meeting

JULY 25, 2017

Santa Barbara Office Annex Room

5:30 p.m. Light Dinner

6:00 p.m. Self Determination Committee Meeting

OCTOBER 24, 2017

Santa Barbara Office Annex Room

5:30 p.m. Light Dinner

6:00 p.m. Self Determination Committee Meeting