

TRI-COUNTIES REGIONAL CENTER EXECUTIVE DIRECTOR REPORT July 11, 2015

I. FY 2015-2016 BUDGET UPDATE

- **Attachment #1:** CDCAN Report (June 16, 2015): Budget Deal Reached – Eliminates Nearly All of Rate and Spending Increases by Legislature Except for Child Care, Expansion of Medi-Cal for over 175,000 Children Regardless of Immigration Status and Restoration of 7% Service Hours for All IHSS Receptients for at Least One Year
- **Attachment #2:** CDCAN Report (June 24, 2015): Governor Brown Signs 2015-2016 Budget Package – State Senate and Assembly Set Up Committees for Special Session
- **Attachment #3:** ARCA Update from Senate Special Session Funding Overview Hearing
- **Attachment #4:** The Arc & UCP California Action Alert (July 6, 2015): Big News and More Action Needed Now

Governor Brown signed the 2015-2016 California State Budget on June 24, 2015 including the main budget bill, AB 93, and the revised budget bill, SB 97. The Governor also signed the 17 Trailer Bills that implement the budget bill. A full copy of the FY 2015-2016 enacted budget can be found here: <http://www.ebudget.ca.gov/>.

The main budget bill, AB 93, was passed by the Legislature on June 15, 2015 on a party line vote that contained higher revenue estimates and increased spending proposed by the Legislative Democrats that was opposed by Governor Brown. For Developmental Services AB 93 contained very modest targeted 5% rate increase, effective July 1, 2015 for Supported Living Services, In-Home Respite Services, and Supported Employment Services, and a 2.5% rate increase for Transportation. It also included funding for 1 Dental Coordinator and 1 Forensic Coordinator for each of the 21 regional centers. Effective January 1, 2016 AB 93 contained a 2.5% across the board rate increase for all provider categories not covered by July 1, 2015 increase and a 2.5% increase for the regional center Operations budget. However, upon further negotiations between the Governor and the Senate President Pro Tempore Kevin De Leon and Assembly Speaker

TRI-COUNTIES REGIONAL CENTER EXECUTIVE DIRECTOR REPORT

July 11, 2015

Toni Atkins a revised budget deal was reached, SB 97, that eliminated nearly all of the rate and spending increases approved by the Legislature except for Child Care, Expansion of Medi-Cal for over 175,000 children regardless of immigration status and restoration of 7% service hours for all IHSS recipients for at least one year (**Attachments #1-#2**).

Additionally, the Governor called for the Legislature to convene two extraordinary (special) sessions dealing with Transportation & Infrastructure funding and Health Care funding issues. Developmental Services funding is included in the Health Care special session. The special sessions could continue for several months. Both the Senate and the Assembly announced the formation of committee members of the two special sessions of the Legislature. The committees are in the process of holding their first informational overview hearings. The most exciting news for Developmental Services emerging out of the special session thus far is the announcement by three key senators that they will introduce a bill, SB X 2-1 to give Developmental Services a 10% across the board rate increase, provide necessary funding for the minimum wage increase, and require the Department of Developmental Services (DDS) to develop a financial sustainability plan. The three senators co-authoring SB X 2-1 are Senators Jim Beall, Fran Pavley and Bill Monning. The next step in the process will be additional hearings in both the Senate and the Assembly where members of the public will be able to provide testimony. The Developmental Service community will once again be asked to engage in advocacy efforts to support SB X 2-1 (**Attachments #3-#4**). Tri-Counties Regional Center (TCRC) has developed a "Budget Watch" page on the TCRC website (www.tri-counties.org). Current information and resources related to the budget and the special session of the Legislature is posted on this page and will be kept updated.

TRI-COUNTIES REGIONAL CENTER
EXECUTIVE DIRECTOR REPORT
July 11, 2015

II. SELF-DETERMINATION PROGRAM

- **Attachment #5:** DDS Self Determination Program – FQA

- **Attachment #6:** Disability Rights California Self Determination Program – FQA

- **Attachment #7:** TCRC Self Determination Program – FQA
(Updated)

- **Attachment #8:** Similarities and Differences Between Traditional Regional Center Service Provision and the New Self-Determination Program

- **Attachment #9:** TCRC Self Determination Program Presentation to TCRC Self Determination Advisory Committee

In October of 2013, Governor Brown, signed into law SB 468 (Emmerson /Beall /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 #5-#9**).

It will 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. On December 31, 2014, the Home and Community Based Services application seeking funding for Self-Determination was submitted to the Center for Medicare and Medicaid Services (CMS). CMS has 90 days to take one of three actions on the Waiver application (approve; deny; or request additional information).

TRI-COUNTIES REGIONAL CENTER

EXECUTIVE DIRECTOR REPORT

July 11, 2015

It is very likely that CMS will request additional information for clarification in the Waiver application which will lead to an extended review period beyond the initial 90 days.

Once federal approval of matching funds is authorized, the program must 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. 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 16 individuals who are currently in our Self-Determination pilot project plus an additional 98 people that TCRC will be able to add under the new 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; Judith White, Manager of Resource Development; and Anastasia Bacigalupo, Executive Director, State Council on Developmental Disabilities Central Coast Office. Ms. Bacigalupo has since left her position with the State Council's Central Coast Office, however, TCRC will continue to include her successor in the internal work group. The group will be working together on a variety of activities in preparation for the Self-Determination Program.

These include:

1. Identification and selection of our local advisory committee.

TRI-COUNTIES REGIONAL CENTER

EXECUTIVE DIRECTOR REPORT

July 11, 2015

2. Guidelines on participant eligibility, selections and enrollment
3. Self-Determination services and definitions
4. Budget setting and tracking.
5. Fiscal Management Services (FMS)
6. Training
7. Person-Centered Planning
8. Community outreach
9. Monitoring of the Self-Determination program
10. Billing and payment procedures

TCRC and the Central Coast State Council have selected 12 members that will comprise the Self Determination Advisory Committee, SDAC, (a 13th member will be a Clients Rights Advocate as required by the legislation) and the Committee's first meeting was held on June 30, 2015. The SDAC learned about the Self-Determination Program as well as Person Centered Planning efforts at TCRC. They also received updates on the Self-Determination Program waiver application to the Center for MediCaid and MediCare Services (CMS) to access federal funding which is a requirement for the Self-Determination Program to be implemented in California. The SDAC will meet quarterly and the next meeting is scheduled for October 27, 2015 at the TCRC office in Santa Barbara. The meeting is open to the public.

TCRC has posted information about the Self Determination Program on the TCRC website at www.tri-counties.org . The information will be kept updated to keep the community informed about the status of the Self Determination Program.

TRI-COUNTIES REGIONAL CENTER
EXECUTIVE DIRECTOR REPORT
July 11, 2015

III. Q&A

Omar Noorzad - CDCAN REPORT (JUN 16 2015): BUDGET DEAL REACHED BY GOVERNOR & DEMOCRATIC LEGISLATIVE LEADERS - GOVERNOR PREVAILS ON REVENUE ESTIMATES & SPENDING INCREASES WITH NEARLY ALL NEW SPENDING INCREASES PROPOSED BY LEGISLATURE ELIMINATED

From: "Marty Omoto" <martyomoto@rcip.com>
To: <martyomoto@rcip.com>
Date: 6/16/2015 9:27 PM
Subject: CDCAN REPORT (JUN 16 2015): BUDGET DEAL REACHED BY GOVERNOR & DEMOCRATIC LEGISLATIVE LEADERS - GOVERNOR PREVAILS ON REVENUE ESTIMATES & SPENDING INCREASES WITH NEARLY ALL NEW SPENDING INCREASES PROPOSED BY LEGISLATURE ELIMINATED

**CDCAN DISABILITY RIGHTS REPORT
CALIFORNIA DISABILITY-SENIOR COMMUNITY ACTION NETWORK
JUNE 16, 2015 – TUESDAY LATE AFTERNOON
ADVOCACY WITHOUT BORDERS: ONE COMMUNITY – ACCOUNTABILITY WITH ACTION**

*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@rcip.com or martyomoto@att.net
[new email - will eventually replace current martyomoto@rcip.com address] Twitter: [martyomoto](https://twitter.com/martyomoto)
Office Line: 916-418-4745 CDCAN Cell Phone: 916-757-9549*

BREAKING NEWS:

BUDGET DEAL REACHED – ELIMINATES NEARLY ALL OF RATE AND SPENDING INCREASES BY LEGISLATURE EXCEPT FOR CHILD CARE, EXPANSION OF MEDI-CAL FOR OVER 175,000 CHILDREN REGARDLESS OF IMMIGRATION STATUS AND RESTORATION OF 7% SERVICE HOURS FOR ALL IHSS RECIPIENTS FOR AT LEAST ONE YEAR

Governor Calls Two Special Sessions – One Focusing on Medi-Cal & Health Care Costs Including Provider Rates for Medi-Cal and Developmental Services That Would Need To Be “Sustainable” and Funded Through Either New Managed Care Organization Tax and/or Other Funding Source But Not General Fund- Says State Faces Over \$1 Billion in Cuts to Health and Human Services Next Year If the New Managed Care Organization Tax Is Not Extended – Special Session Will Convene June 19th

SACRAMENTO, CA [CDCAN LAST UPDATED 06/16/2015 3:40 PM] – Prevailing on almost every major revenue and spending issue, Governor Edmund G. “Jerry” Brown Jr. today announced at a press conference at the State Capitol with Democratic legislative leaders

Assembly Speaker Toni Atkins (Democrat – San Diego) and Senate President Pro Tem Kevin de León (Democrat – Los Angeles), a budget deal that largely reflected his proposed spending plan as revised in May, using his estimates of revenues and eliminating nearly all of the rate increases in health and human services and other spending increases, including those impacting Medi-Cal and developmental services. While details are still emerging, it appears that spending increases made by the Legislature impacting CalWORKS, SSI/SSP grants, restoration of Medi-Cal optional benefits eliminated in 2009 were also removed from the budget deal. [CDCAN will issue full report when more details become available].

The announcement of the budget deal stunned advocates and others, coming less than 24 hours after the Assembly and State Senate passed their version of the 2015-2016 State Budget that included significantly higher revenue estimates that the Governor did not agree with and increased spending for health and human services that the Governor opposed, citing limited on-going state resources.

The budget deal did contain some increases, including a rate increase for child care providers and increased spending for child care; expansion of Medi-Cal coverage for over 175,000 children regardless of immigration status; and restoration of a 7% across-the-board cut in service hours for all In-Home Supportive Services (IHSS) recipients for at least one year.

Also remaining in the budget is the Governor's previous proposed funding for overtime for IHSS workers and supported living services, in-home respite services and personal assistance services to be implemented if the US Department of Labor prevails in a federal lawsuit that currently has put on hold federal regulations removing the exemption of overtime requirements for those homecare workers. A resolution in that lawsuit that would allow the federal regulations to go into effect is not expected by policymakers until late summer or early fall – and if appealed to the US Supreme Court (and the court takes the case), the delay could go into next year. Not likely to survive in the budget package that will go to the Governor – at least for now - is trailer bill language that would “remove any barrier” to the implementation of overtime – meaning that California would implement overtime no matter what happens at the federal level. Advocates are reportedly working on alternatives proposals and ideas for the State to implement overtime.

The Governor's proposals for increases, such as adjustments to regional center funded providers for implementation of the new State sick leave policy for providers who don't currently provide that level of sick leave, and implementation of the increase in the State minimum wage in January 2016 – though not covering costs related to exempt staff – also remain in the budget, as does increased funding for caseload growth and additional funding (called an augmentation) to cover a shortfall in the current year (2014-2015 State Budget) in developmental services.

To view the archived video recording of the entire press conference go to this CalChannel link (note: actual press conference doesn't start until 20 minutes into the video):

http://calchannel.granicus.com/MediaPlayer.php?view_id=7&clip_id=2973

In his proclamation for a special session on healthcare funding, the Governor warned that if a revised Managed Care Organization tax is not approved by the federal government and the \$1.1 billion of funding from it does not materialize in the 2016-2017 State Budget year than over \$1 billion in spending cuts – likely to health and human services – would be necessary to offset that lost revenue.

The Legislature will likely later this week or early next week pass a revised budget bill taking out those spending increases and revenue estimates – referred to sometimes as “budget junior” – and budget trailer bills not released or taken up for a vote yesterday covering health and human services, education and other areas reflecting the terms of the budget agreement.

“This is a sound, well thought-out budget,” the Governor said at the press conference today, adding that “yet, the work never ends and in the coming months we'll have to manage our resources with the utmost prudence and find more adequate funding for our roads and health care programs.”

Assembly Speaker Atkins said at the press conference that “this version of the budget

makes some very strong improvements for schools, higher education, child care and Medi-Cal services and creates a state Earned Income Tax Credit. But this is not a return to the bad old days of spending beyond our means..."

Senate President Pro Tem De Leon said that the budget agreement "...strikes a responsible balance between strengthening our long-term fiscal foundation and investing right now in the economy of today and the workforce of tomorrow."

HIGHLIGHTS OF BUDGET AGREEMENT

While details are not yet available on the specifics of the agreement, the following information was released by the Governor's office on the highlights of the budget deal:

SPENDING INCREASES:

Eliminated nearly all of the spending increases included in the budget as passed yesterday (June 15th) by the Legislature, except for child care and the restoration of the 7% across-the-board in service hours for all In-Home Supportive Services recipients for at least one year; and expansion of Medi-Cal for over 175,000 children regardless of immigration status.

EDUCATION:

The agreement includes \$14.3 billion for the K-12 system and community colleges, including \$6 billion to continue to implement the Local Control Funding Formula which targets increased resources to students who face what the Governor and Legislature say are "the greatest challenges".

POVERTY:

The agreement includes, as proposed by the Governor in May, the first-ever California Earned Income Tax Credit (\$380 million) to help the state's poorest working families.

PAYING DOWN DEBT:

The agreement pays down billions in debts, including completely paying off school deferrals (\$1 billion) and debts owed to local governments since 2004 (\$765 million). The agreement also completely retires \$15 billion in Economic Recovery Bonds used to cover budget deficits as far back as 2002, as well as \$3.8 billion in mandate debt owed to K-14 schools.

RAINY DAY FUND:

The agreement saves \$1.9 billion in the state's Rainy Day Fund as required by Proposition 2, bringing the balance to \$3.5 billion.

ADDITIONAL SPENDING INCREASES:

The budget agreement called for some spending increases paid for, according to the Governor's office, "...by redirecting spending and using identified savings, including a reform of the Middle Class Scholarship program and correcting an error in the estimate for Medi-Cal, the budget agreement can afford additional spending..." including:

IN-HOME SUPPORTIVE SERVICES

\$226 million on a one-time basis to restore the 7 percent reduction in service hours for In-Home Supportive Services.

MEDI-CAL EXPANSION FOR CHILDREN

\$40 million to expand Medi-Cal to cover all low-income undocumented children effective May 1, 2016 (\$132 million when fully implemented).

CHILD CARE

\$265 million to fund 7,000 additional preschool slots and 6,800 child care slots, plus a rate increase for all child care providers.

HIGHER EDUCATION

\$97 million over the January budget for the California State University to expand enrollment and focus on increased success.

TEACHER EFFECTIVENESS BLOCK GRANT

\$500 million (funded under Proposition 98) for a one-time teacher effectiveness block grant.

GOVERNOR CALLS TWO SPECIAL SESSIONS INCLUDING ONE OF HEALTH CARE/DEVELOPMENTAL SERVICES/IHSS FUNDING

Governor Brown's also announced that he is calling two separate special sessions of the Legislature, one focusing on health care costs including those impacting developmental services, which will convene on June 19th and the other focusing on California's roads, highways and other transportation related infrastructure issues.

In his proclamation for the special session on health care funding, the Governor warned that the State's General Fund "cannot afford to provide additional rate increases for providers of services for Medi-Cal recipients and consumers with developmental disabilities" and that any such increase would need to be funded from the new Managed Care Organization tax and/or from some other funding source. That may prove to be challenging with the State's revised proposal still not approved by the federal government.

In addition the Governor, in that same proclamation, said that any such increase would also have to "establish mechanisms so that any additional rate increases expand access" and "increase oversight and the effective management of services provided to consumers with developmental disabilities through the regional center system..."

But the Governor also warned that if the necessary funding cannot come from a revised Managed Care Organization tax and/or alternative sources then it would be "necessary to prevent over \$1 billion in program cuts next year".

Since 2005, the state has levied a tax on Medi-Cal managed care plans. The revenues are matched by the federal government and used to both increase payments to Medi-Cal providers and offset health care costs that would otherwise be paid from the General Fund. This funding mechanism has helped the state pay for the increased number of Californians receiving coverage under federal health care reform.

The state's current managed care organization (MCO) tax structure fails to comply with new federal requirements that such a tax be broad-based and not limited narrowly to Medi-Cal plans. The current structure, which expires at the end of fiscal year 2015-16, generates \$1.1 billion.

The Governor's January 2015-2016 budget proposed a revised Managed Care Organization tax that would be levied on a per-enrollee basis and cover most health care plans regulated by the Department of Managed Health Care. That proposal is still being finalized and requires eventual approval from the federal government.

In the special session, the Governor proposes that the Legislature enact "permanent and sustainable funding to provide at least \$1.1 billion annually to stabilize the state's General Fund costs for Medi-Cal, sufficient funding to continue the restoration of the 7 percent of In-Home Supportive Services hours and funding for additional rate increases for providers of Medi-Cal and developmental disability services".

WHAT IS A SPECIAL SESSION?

Officially known as an "Extraordinary Session" but more commonly referred to as a "special session", the State Constitution authorizes a governor to call the Legislature into a "special

session” by proclamation that contains certain subjects. The special session by the Legislature is limited to those subjects in the proclamation, though the Legislature can consider subjects related to those specified in that document.

Legislative deadlines under the “regular session” do not apply and the special session can run at the same time for the entire two year length of the Legislature’s two year regular session (an example of this is the Legislature meeting on June 19th, for a regular floor session but wanting to convene the special session. They have to “adjourn” the regular session, convene the special session, conduct business, then adjourn the special session and reconvene the regular session again. The same applies to additional special sessions).

There are committees – usually the same committees as in the regular session – that can hear special session bills, and people can make comments on those bills as they would for a regular session bill.

Special Session bills passed by the Legislature and signed by the Governor take effect on the 91st day following the adjournment (not recess) of the special session, rather than the following January 1st, which is the effective date for bills passed by the Legislature and signed by the Governor for regular session measures.

ASSEMBLY SPEAKER ATKINS REMARKS AT PRESS CONFERENCE

“Other than the budget the Assembly and Senate passed yesterday, this is the best budget we’ve seen in years. This version of the budget makes some very strong improvements for schools, higher education, child care and Medi-Cal services and creates a state Earned Income Tax Credit. But this is not a return to the bad old days of spending beyond our means. This budget builds total reserves by more than \$4.6 billion and pays down \$1.9 billion in debts. If revenues grow more in line with the LAO projection than with the Department of Finance numbers that this budget is based on, then reserves will grow even higher. But despite this being such a good budget, we know this is just one step and we have more work to do.”

SENATE PRESIDENT PRO TEM DE LEON REMARKS AT PRESS CONFERENCE

Senate President Pro Tem De Leon made the following remarks at the press conference with the Governor and Assembly Speaker Atkins at the State Capitol this afternoon on the budget agreement:

“This has been a true collaboration with the Assembly, Senate and the Governor -- all working together as responsible stewards of the taxpayer dollar focused on the long-term economic growth of California. This budget strikes a responsible balance between strengthening our long-term fiscal foundation and investing right now in the economy of today and the workforce of tomorrow.”

ASSEMBLY REPUBLICAN LEADER KRISTIN OLSEN STATEMENT

The following statement was released this afternoon by Assembly Republican Leader Kristin Olsen (Republican – Modesto):

“The Governor was wise to heed the call of legislative Republicans to base the state budget on realistic revenue projections and reject the Democrat spending spree. State government should always budget like Californians do – based on what we know we will have to spend, not what we hope to earn.

There is still much work to be done to get the majority party to stand with Californians on their top budget priority – water. We must work together to move storage, desalination and recycling projects that will increase water supply out of bureaucracy and into construction.”

LINKS TO PROCLAMATIONS

Health Care Financing Special Session – PDF Document Copy (2 Pages):

http://gov.ca.gov/docs/6.16.15_Health_Care_Special_Session.pdf

Transportation Infrastructure Special Session – PDF Document Copy (2 Pages):

http://gov.ca.gov/docs/6.16.15_Infrastructure_Special_Session.pdf

TEXT OF PROCLAMATION FOR SPECIAL SESSION ON MEDI-CAL AND DEVELOPMENTAL SERVICES PROVIDER RATES & HEALTH CARE COSTS

The following is the complete text (transcribed by CDCAN) of the Governor's proclamation calling a special session, to be convened starting June 19th, Friday, focusing on legislation for "...permanent and sustainable funding" from a new managed care organization tax and/or other sources to provide at least \$1.1 billion to "stabilize" the State's general fund costs to Medi-Cal; provide continued funding of the 7% restoration of IHSS service hours beyond 2015-2016; and to "provide additional rate increases" for providers of Medi-Cal and developmental services.

A PROCLAMATION

BY THE GOVERNOR OF THE STATE OF CALIFORNIA

WHEREAS the state's recent expansion of health care coverage has resulted in more than four million additional Californians receiving coverage through Medi-Cal; and
WHEREAS to date, the managed care organization tax has provided a stable source of funding to help pay for the costs of the health care expansion; and
WHEREAS the federal government has issued guidance to the state that it cannot extend the managed care organization tax in its current format; and
WHEREAS the state will be forced to make more than \$1 billion in program cuts beginning next year if the managed care organization tax is not extended; and
WHEREAS the state's General Fund cannot afford to provide additional rate increases for providers of services for Medi-Cal recipients and consumers with developmental disabilities; and
WHEREAS the state's General Fund cannot afford to permanently maintain a restoration of 7 percent of hours in the In-Home Supportive Services program; and
WHEREAS these extraordinary circumstances require the Legislature of the State of California to be convened in a special session.

NOW, THEREFORE, I, EDMUND G. BROWN, JR., Governor of the State of California, in accordance with Section 3(b) of Article IV of the Constitution of the State of California, hereby convene the Legislature of the State of California to assemble in extraordinary session in Sacramento, California on the 19th day of June 2015, at a time to be determined, for the following purposes:

To consider and act upon legislation necessary to enact permanent sustainable funding for a new managed care organization tax and/or alternative fund sources to provide:

- a. At least \$1.1 billion annually to stabilize the General Fund's costs for Medi-Cal; and*
- b. Sufficient funding to continue the 7 percent restoration of In-Home Supportive Services hours beyond 2015-2016; and*
- c. Sufficient funding to provide additional rate increases for providers of Medi-Cal and developmental disability services.*

To consider and act upon legislation necessary to:

- a. Establish mechanisms so that any additional rate increases expand access to services; and*
- b. Increase oversight and the effective management of services provided to consumers with developmental disabilities through the regional center system; and*

- c. *Improve the efficiency and efficacy of the health care system, reduce the cost of providing health care services, and improve the health of Californians.*

I FURTHER DIRECT that as soon as hereafter possible, this Proclamation be filed in the Office of the Secretary of State and that widespread publicity and notice be given of this Proclamation.

*IN WITNESS WHEREOF, I have hereunto set
My hand and caused the Great Seal of the
State of California to be affixed this 16th day of
June 2015.*

*[SIGNED]
EDMUND G. BROWN, JR.
Governor of California*

*ATTEST:
[SIGNED]
ALEX PADILLA
Secretary of State*

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!!!!!!

JUNE 16, 2015 – TUESDAY LATE AFTERNOON

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 – NEW MAILING ADDRESS:

**1500 West El Camino Avenue Suite 499
Sacramento, CA 95833**

[replaces 1225 8th Street Suite 480, Sacramento, CA 95814]

Office Line: 916-418-4745 CDCAN Cell Phone: 916-757-9549 (replaced 916-212-0237)

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 REPORT (JUNE 24 2015): GOVERNOR SIGNS BUDGET BILLS - LEGISLATURE APPOINTS COMMITTEES FOR THE TWO SPECIAL SESSIONS

From: "Marty Omoto" <martyomoto@rcip.com>
To: <martyomoto@rcip.com>
Date: 6/24/2015 8:03 PM
Subject: CDCAN REPORT (JUNE 24 2015): GOVERNOR SIGNS BUDGET BILLS - LEGISLATURE APPOINTS COMMITTEES FOR THE TWO SPECIAL SESSIONS

CDCAN DISABILITY RIGHTS REPORT CALIFORNIA DISABILITY-SENIOR COMMUNITY ACTION NETWORK JUNE 24, 2015 – WEDNESDAY AFTERNOON ADVOCACY WITHOUT BORDERS: ONE COMMUNITY – ACCOUNTABILITY WITH ACTION

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@rcip.com or martyomoto@att.net [new email - will eventually replace current martyomoto@rcip.com address] Twitter: [martyomoto](https://twitter.com/martyomoto)
Office Line: 916-418-4745 CDCAN Cell Phone: 916-757-9549*

REMEMBERING THE PEOPLE KILLED AT CHARLESTON, SOUTH CAROLINA'S EMANUEL AME CHURCH – THEIR LIVES, THEIR FAMILIES AND THEIR COMMUNITY: HONORABLE REVEREND CLEMNTA PICKNEY, REVEREND DANIEL SIMMONS, REVEREND SHARONDA COLEMAN-SINGLETON, TYWANZA SANDERS, DEPAYNE MIDDLETON DOCTOR, CYNTHIA HURD, MYRA THOMPASON, ETHERL LANCE AND SUE JACKSON.

"When there is violence throughout the land, we will let our light shine in the darkened world..." – Pastor Tyrone Hicks, Sacramento's St Andrews AME Church

State Capitol Update:

GOVERNOR BROWNS SIGNS 2015-2016 BUDGET PACKAGE - STATE SENATE AND ASSEMBLY SET UP COMMITTEES FOR SPECIAL SESSION

SACRAMENTO, CA [CDCAN LAST UPDATED 06/24/2015 05:30 PM] – Governor Edmund G. "Jerry" Brown, Jr., signed the package of bills making up the 2015-2016 State Budget this afternoon at the State Capitol, including the main budget bill, AB 93, and the revised budget bill, SB 97. The Governor also signed, as expected, the 17 budget related bills – called "trailer bills" because they follow or trail the main budget bills – that make changes in State law to implement the budget. The Governor made several line item vetoes before signing AB 93 (see below for details), though none impacted health and human services directly. [CDCAN will issue a more detailed report of what was in the budget as signed by the Governor later tonight].

As reported last week by CDCAN, the main budget bill, AB 93 was passed by the Legislature on June 15th on a party-line vote, that contained higher revenue estimates and increased

spending proposed by Legislative Democrats that was opposed by Governor Brown, That bill was sent to the Governor at 4:30 PM on June 15th, meeting the deadline requirements under the State Constitution. The Legislature also passed on June 15th four non-controversial budget trailer bills that the Brown Administration supported dealing with an augmentation (appropriation) to the current 2014-2105 State Budget; transportation; nursing facility quality assurance fee extension and public works.

The revised budget bill, SB 97 that took out nearly all the spending increases, was passed by the Legislature on June 19th, reflecting the budget deal reached by the Governor and Democratic legislative leaders, by a nearly party-line vote in the Assembly (1 Republican supported it), and a somewhat bi-partisan support in the State Senate, where 5 Senate Republicans, including Senate Republican Leader Bob Huff, supported the revised budget. Among Democrats in either house, only Senator Holly Mitchell (Democrat – Los Angeles), who supported the spending increases in AB 93 and voiced opposition in the agreement that took those increases out, abstained from the vote for SB 97.

The Governor signed the following bills this afternoon:

- AB 93 - Main 2015-2016 State Budget Bill*
- SB 97 - Revised Main 2015-2016 State Budget Bill*
- AB 95 - Transportation Budget Trailer Bill*
- AB 104 - Education Finance: Education Omnibus Budget Trailer Bill*
- AB 114 - Public Works: Building Construction Budget Trailer Bil*
- AB 116 - Budget Act of 2014: Augmentation.*
- AB 117 - Public resources Budget Trailer Bill*
- AB 119 - Public health: Medi-Cal: nursing facilities.*
- SB 75 - Health Budget Trailer Bill*
- SB 78 - Education Finance: Local Control Funding Formula Budget Trailer Bill*
- SB 79 - Human Services Budget Trailer Bill*
- SB 80 - Personal Income Taxes: Earned Income Credit Budget Trailer Bill*
- SB 81 - Postsecondary Education Budget Trailer Bill*
- SB 82 - Developmental Services Budget Trailer Bill*
- SB 83 - Public Resources Budget Trailer Bill*
- SB 84 - State Government Budget Trailer Bill*
- SB 85 - Public Safety Budget Trailer Bill*
- SB 88 - Water Budget Trailer Bill*
- SB 98 - State Government Budget Trailer Bill*

LINE ITEM VETOES

The Governor several line item vetoes from the main budget bill, AB 93, though none have direct impact to health and human services or to people with disabilities, mental health needs, the blind, seniors and low income individuals and families. Those line item vetoes are included on the last page of a 60 page summary of the enacted 2015-2016 State Budget as signed by Governor Brown. The PDF Document copy of the 60 page summary can be downloaded from the Department of Finance webpage at:

<http://www.ebudget.ca.gov/2015-16/pdf/Enacted/BudgetSummary/FullBudgetSummary.pdf>

*State of California
Governor's Office*

*I object to the following appropriations contained in Assembly Bill 93.
Item 0540-001-3212—For support of Secretary of the Natural Resources Agency. I reduce this item from \$2,694,000 to \$2,594,000 by reducing:
(1) 0320-Administration of Natural Resources Agency from \$2,694,000 to \$2,594,000.*

I am deleting the \$100,000 augmentation to establish an advisory council to review and oversee Chapter 289, Statutes of 2012 (AB 1492), forest restoration grant programs. The formal creation of a council is unnecessary because the Natural Resources Agency is already establishing an AB 1492 advisory committee utilizing existing resources that will provide guidance for all aspects of the program, not just the forest restoration grants.

Item 2660-302-0042—For capital outlay, Department of Transportation. I revise this item by deleting Provision 4.

I am deleting Provision 4 because this appropriation to fund the relinquishment of State Route 275, the Tower Bridge, from the State Highway Account is unnecessary. I support efforts to relinquish portions of the State Highway System that no longer serve an interregional purpose and would be better managed by local government entities, including the Tower Bridge. However, provisions contained in the omnibus transportation trailer bill and existing processes already allow for the relinquishment of the Tower Bridge, if an agreement is reached between the State and applicable cities. I am directing the Department of Transportation to discuss relinquishment with the cities and how to best preserve current and future utility of the bridge. I do not support using the budget process to circumvent this negotiation process. :

Item 3125-001-0140—For support of California Tahoe Conservancy. I reduce this item from \$3,582,000 to \$3,482,000 by reducing:

(1) 2340-Tahoe Conservancy from \$4,124,000 to \$4,024,000.

I am reducing the Tahoe Conservancy's California Environmental License Plate Fund appropriation by \$100,000 to address a shortfall in the California Environmental License Plate Fund. While the Budget Act includes several one-time actions to address the shortfall, this action is necessary to support the immediate solvency of the fund until a comprehensive longterm plan is developed.

Item 3480-001-3025—For support of Department of Conservation. I reduce this item from \$950,000 to \$850,000 by reducing:

(1) 2435-Office of Mine Reclamation from \$950,000 to \$850,000, and delete Provision 1.

I am deleting the \$100,000 augmentation for the purchase of mine mapping software. The Office of Mine Reclamation has secured a \$450,000 grant from the Army Corps of Engineers to conduct an analysis on the procurement of a comprehensive data management system that will cover business processes associated with the regulation of Surface Mining and Reclamation Act mines, as well as legacy abandoned mines. It is premature to allocate \$100,000 for the procurement of a data management system prior to an analysis of the need and scope of the project.

I am deleting Provision 1 to conform to this action.

Item 3600-101-0200—For local assistance, Department of Fish and Wildlife. I delete this item.

I am eliminating the \$1,000,000 augmentation which would provide a grant to help restore Clear Lake. The Fish and Game Preservation Fund has a structural deficit and cannot absorb additional expenditures.

There are existing grant programs that are available and appropriate to support the restoration of Clear Lake. I am directing my Administration to provide technical assistance to Lake County to assist them in identifying and applying for ecosystem restoration and drinking water grant funding.

Item 7100-001-0588—For support of Employment Development Department. I revise this item by deleting Provision 2.

I am deleting Provision 2 because the appropriation from the Unemployment Compensation Disability Fund is unnecessary. The Department already performs targeted outreach activities for the Paid Family Leave program and is entering the second year of a \$6.5 million, three-year outreach pilot program.

With the above deletions, revisions, and reductions, I hereby approve Assembly Bill 93.

/s/ Edmund G. Brown Jr

EDMUND G. BROWN JR.

SPECIAL SESSION LEGISLATIVE COMMITTEES APPOINTED

Assembly Speaker Toni Atkins (Democrat – San Diego) and Senate President Pro Tem Kevin De León (Democrat – Los Angeles) announced today the formation of committees and members for the two special sessions of the Legislature dealing with transportation infrastructure funding, and health care funding related issues.

The Legislature convened briefly on Friday, June 19th, to take action to organize both sessions, using the current legislative officers for both sessions. The two special sessions will reconvene upon call of the Senate President Pro Tem De Leon and Assembly Speaker Toni Atkins (Democrat – San Diego).

Both the State Senate and Assembly will have three committees for each of the two special sessions.

FIRST EXTRAORDINARY (SPECIAL) SESSION ON (TRANSPORTATION) INFRASTRUCTURE

FIRST SPECIAL SESSION - SENATE RULES COMMITTEE

FIRST SPECIAL SESSION – SENATE APPROPRIATIONS COMMITTEE

same membership as regular session

FIRST SPECIAL SESSION - SENATE TRANSPORTATION AND INFRASTRUCTURE DEVELOPMENT COMMITTEE

Senator Jim Beall (Democrat - San Jose), Chair

Senator Anthony Cannella (Republican - Ceres), Vice-Chair

Senator Benjamin Allen (Democrat - Santa Monica)

Senator Patricia Bates (Republican - Laguna Niguel)

Senator Tom Berryhill (Republican - Twain Harte)

Senator Ted Gaines (Republican - Roseville)

Senator Robert Hertzberg (Democrat - Van Nuys)

Senator Connie Leyva (Democrat - Chino)

Senator Carol Liu (Democrat - La Cañada/Flintridge)

Senator Mike McGuire (Democrat – Healdsburg)

Senator Tony Mendoza (Democrat - Artesia)

Senator Fran Pavley (Democrat - Agoura Hills)

Senator Bob Wieckowski (Democrat - Fremont)

FIRST SPECIAL SESSION - ASSEMBLY RULES COMMITTEE

same membership as regular session

FIRST SPECIAL SESSION - ASSEMBLY FINANCE COMMITTEE

Assemblymember Jimmy Gomez (D-Northeast Los Angeles), Chair

Assemblymember Frank Bigelow (R-O'Neals), Vice Chair

Assemblymember Richard Bloom (D-Santa Monica)

Assemblymember Reginald Byron Jones-Sawyer (D-South Los Angeles)

Assemblymember Kevin McCarty (D-Sacramento)

Assemblymember Melissa Melendez (R-Lake Elsinore)

Assemblymember Jay Obernolte (R-Big Bear Lake)

Assemblymember Phil Ting (D-San Francisco)

Assemblymember Shirley Weber (D-San Diego)

FIRST SPECIAL SESSION - ASSEMBLY TRANSPORTATION AND INFRASTRUCTURE DEVELOPMENT COMMITTEE

Assemblymember Jim Frazier (Democrat - Oakley), Chair

Assemblymember Katcho Achadjian (Republican - San Luis Obispo), Vice Chair
Assemblymember Luis Alejo (Democrat - Salinas)
Assemblymember Autumn Burke (Democrat - Inglewood)
Assemblymember David Chiu (Democrat - San Francisco)
Assemblymember Bill Dodd (Democrat - Napa)
Assemblymember Susan Talamantes Eggman (Democrat - Stockton)
Assemblymember Mike Gatto (Democrat - Glendale)
Assemblymember David Hadley (Republican - Torrance)
Assemblymember Young Kim (Republican - Fullerton)
Assemblymember Eric Linder (Republican - Corona)
Assemblymember Adrin Nazarian (Democrat - Sherman Oaks)
Assemblymember Patrick O'Donnell (Democrat - Long Beach)

SECOND EXTRAORDINARY (SPECIAL) SESSION ON HEALTH CARE

SECOND SPECIAL SESSION - SENATE RULES COMMITTEE

SECOND SPECIAL SESSION – SENATE APPROPRIATIONS COMMITTEE

same membership as regular session

SECOND SPECIAL SESSION SENATE PUBLIC HEALTH AND DEVELOPMENTAL SERVICES COMMITTEE

Senator Ed Hernandez (Democrat - West Covina), Chair
Senator Mike Morrell (Republican - Rancho Cucamonga), Vice-Chair
Senator Joel Anderson (Republican - Alpine)
Senator Jim Beall (Democrat - San Jose)
Senator Isadore Hall, III (Democrat - South Bay)
Senator Mark Leno (Democrat - San Francisco)
Senator Mike McGuire (Democrat - Healdsburg)
Senator Holly Mitchell (Democrat - Los Angeles)
Senator John Moorlach (Republican - Irvine)
Senator Bill Monning (Democrat - Carmel)
Senator Jim Nielsen (Republican - Gerber)
Senator Richard Pan (Democrat - Sacramento)
Senator Lois Wolk (Democrat - Davis)

SECOND SPECIAL SESSION - ASSEMBLY RULES COMMITTEE

Same membership as regular session.

SECOND SPECIAL SESSION - ASSEMBLY FINANCE COMMITTEE

Assemblymember Shirley Weber (Democrat - San Diego), Chair
Assemblymember Melissa Melendez (Republican - Lake Elsinore), Vice Chair
Assemblymember Frank Bigelow (Republican - O'Neals)
Assemblymember Richard Bloom (Democrat - Santa Monica)
Assemblymember Jimmy Gomez (Democrat - Northeast Los Angeles)
Assemblymember Reginald Byron Jones-Sawyer (Democrat - South Los Angeles)
Assemblymember Kevin McCarty (Democrat - Sacramento)
Assemblymember Jay Obernolte (Republican - Big Bear Lake)
Assemblymember Phil Ting (Democrat - San Francisco)

SECOND SPECIAL SESSION - ASSEMBLY PUBLIC HEALTH AND DEVELOPMENTAL SERVICES COMMITTEE

Assemblymember Rob Bonta (Democrat - Oakland), Chair
Assemblymember Brian Maienschein (Republican - San Diego), Vice Chair

Assemblymember Catherine Baker (Republican - Pleasanton)
Assemblymember Susan Bonilla (Democrat - Concord)
Assemblymember Nora Campos (Democrat - San Jose)
Assemblymember Eduardo Garcia (Democrat - Riverside)
Assemblymember Marc Levine (Democrat - San Rafael)
Assemblymember Chad Mayes (Republican - Yucca Valley)
Assemblymember Miguel Santiago (Democrat - Los Angeles)
Assemblymember Marc Steinorth (Republican - Rancho Cucamonga)
Assemblymember Mark Stone (Democrat - Monterey Bay)
Assemblymember Tony Thurmond (Democrat - Richmond) [also regular session chair of Assembly Budget Subcommittee #1 on Health and Human Services]
Assemblymember Jim Wood (Democrat - Healdsburg)

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!!!!!!

JUNE 24, 2015 – WEDNESDAY

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 – NEW MAILING ADDRESS:

1500 West El Camino Avenue Suite 499
Sacramento, CA 95833

[replaces 1225 8th Street Suite 480, Sacramento, CA 95814]

Office Line: 916-418-4745 CDCAN Cell Phone: 916-757-9549 (replaced 916-212-0237)

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

Omar Noorzad - Update from Senate Hearing

From: Amy Westling <AWestling@arcenet.org>
To: "Felipe Hernandez (fhernand@elarc.org)" <fhernand@elarc.org>, "JanisWhit...
Date: 7/2/2015 6:08 PM
Subject: Update from Senate Hearing
CC: Daniel Savino <Dsavino@arcenet.org>, "rollensconsult@aol.com" <rollensco...>

The Senate Public Health and Developmental Services Committee met today for approximately four hours. All members with the exception of Senator Lois Wolk were in attendance for the hearing, including Senator Ed Hernandez (Chair), Senator Mike Morrell (Vice-Chair), Senator Joel Anderson, Senator Jim Beall, Senator Isadore Hall III, Senator Mark Leno, Senator Mike McGuire, Senator Holly Mitchell, Senator John Moorlach, Senator Bill Monning, Senator Jim Nielsen, and Senator Richard Pan. Key points from the hearing included:

- At the opening of the hearing, members discussed their opinions about whether a tax increase (on managed care plans) is necessary to stabilize the IHSS, Medi-Cal, and developmental services systems.
- Mike Wilkening (CHHS), Jennifer Kent (DHCS), Mari Cantwell (DHCS), and Teresa Calvert (DOF) explained the current Managed Care Organization Tax and the problems with it:
 - Some form of the tax has been in place since 2005. It is now charged only to Medi-Cal Managed Care Plans that get the tax amount reimbursed to them in their rates.
 - The federal government says there must be winners and losers in these type of taxes and there isn't right now. This is why the tax must be expanded to commercial health plans. The state has until August 2016 to address this issue or risk losing federal funding for the tax, which amounts to \$1.1 billion General Fund.
 - DHCS has tried to come up with different models that would be federally acceptable and still generate the needed money. The current proposal would cost commercial plans approximately \$650 million annually. The cost to plans would be between 1% and 4% of their revenues.
 - A few other states have similar taxes but have not yet developed proposals to come into compliance with federal expectations.
- Felix Su (LAO) Noted that if the proposed tax is based on the number of members in a plan rather than its revenue, it will have to be adjusted frequently to meet program needs.
- Shawn Martin (LAO) provided an overview of the community-based developmental services system, including the structure of the system and a history of cuts and freezes over the last ten years. There was discussion of the cost pressures associated with compliance with the HCBS regulations as well as the closure of developmental centers. The Developmental Services Task Force may provided suggestions for long-term funding reforms. The Budget committees approved funding increases that were not ultimately approved. According to DDS, the Lanterman Coalition proposal of 10% increases would have cost of \$418 million (\$216 General Fund) for the POS increases and \$56 million (\$41 General Fund) for the Operations increases.
- Ginni Bella Navarre (LAO) indicated the total IHSS budget is \$8 billion, with \$2.8 billion being General Fund. There was a review of the historical cuts to the program and the settlement agreement in 2013 that committed to restoration of cuts to the program.
- Directors Will Lightbourne (DSS), Santi Rogers (DDS), and Jennifer Kent (DHCS) were invited to the table to answer more detailed questions. Mike Wilkening (CHHS) also joined the discussion.
 - Senator McGuire asked what is meant by "increase oversight and the effective management of services" in the regional center system that appears in the Governor's Proclamation calling this special session. Mike Wilkening responded that this was in response to recent challenges that have occurred at Inland and Kern Regional Centers.

- The Developmental Services Task Force does not need to conclude its work before this Committee can take action.
- DDS will submit its closure plan for Sonoma Developmental Center by October 1, which will include a projected closure date. The needs of the residents will be paramount in making this decision.
- There are still talks underway with the federal government that may extend funding for services at Sonoma if the state is in “substantial compliance”.
- DOF indicated that savings from the closure of developmental centers will need to revert to the General Fund.
- Senator Leno noted that there needs to be a fix for developmental services during this extraordinary session.
- Jason Sisney (LAO) discussed other taxes (i.e., tobacco and sweetened beverages) that may also be possibilities. Several Senators expressed the need to think more creatively than this and even to existing the effectiveness of existing tax credits to determine if it makes sense to continue them.
- Senator Beall announced that his bill (SB X 2-1) is being introduced that would provide 10% rates and operations increases, minimum wage adjustments, and require DDS to develop a financial sustainability plan. So far, there are eight co-authors, including Senator Monning in the Senate.
- Public comment was taken, with the vast majority of it relating to the need for additional funding to prevent the further collapse of California’s developmental services system. A representative of the health plan association indicated that health plans urge caution in restructuring the current Managed Care Organization tax as the federal government’s timeline for addressing this issue is still a year out.

The recording of the hearing can be found at http://calchannel.granicus.com/MediaPlayer.php?view_id=7&clip_id=3045. Please let me know if you have any questions about today’s hearing.

Amy Westling
 Director of Policy
 Association of Regional Center Agencies
 915 L Street, Suite 1440
 Sacramento, CA 95814
 Phone (916) 446-7961 ext. 21
 Fax (916) 446-6912
awestling@arcanet.org

Omar Noorzad - Big news, and one morfe 20-second enmail needed now

From: "Greg, The Arc & UCP California" <Greg@TheArcCA.org>
To: "Omar Noorzad" <onoorzad@tri-counties.org>
Date: 7/6/2015 8:00 AM
Subject: Big news, and one morfe 20-second enmail needed now



Action Alert

Big news, and more action needed now

Dear Friends,

For those feeling fatigued by the fight to save our service and who want to skip the explanations to go right to the action, click here to email your legislators -- no matter how many times you've contacted them before, or how recently. This is a new message based on new developments.

As most of you know, it will take you about 20 seconds.

For those who want to know what the new developments are, read on.

Exciting news

Three key senators have introduced a bill in to give our community services the emergency 10% across-the-board funding increase the Lanterman Coalition has been seeking all year. Senators Jim Beall, Bill Monning and Fran Pavley introduced the bill in the special legislative session that allows us [ok, requires us] to keep fighting after we got **nothing** to save our services in the budget that Governor Brown signed a week ago.

The Beall-Monning-Pavley bill also would require the state to develop a 10-year financial sustainability plan to ensure that the developmental services system effectively serves all individuals with developmental disabilities -- meeting another key Lanterman Coalition request.

And it would require the state to cover the community service providers' costs for minimum wage increases, as The Arc-UCP and other groups also have been working for. We support a minimum wage increase -- but if the state doesn't pay for it, it will just push move providers off the cliff.

The bill is known as SBx2 1 (or you might see it as SB1x2), meaning it's the first Senate bill in the second extraordinary session that started June 19.

We're focusing our advocacy on this bill starting with the first hearing on it, whenever that is. Please stay tuned and plan to come to Sacramento then if at all possible. If you're a family member or self-advocate and can't get to the Capitol on your own, please talk to your service provider about bussing you and others here. Many providers, especially in the Bay Area and Central Valley, did that in 2009 and 2010 -- and it produced huge crowds that really made a difference in stopping cuts that would have spelled the end of the Lanterman Act.

Ominous but also potentially exciting news

Senate Bill 3 would give California working people a big minimum-wage increase starting January 1, 2016, going up every year thereafter to keep up with inflation. That would be very good news for workers with developmental disabilities and for the dedicated and often grossly under-paid workers who work in our service system -- *except for one big problem.*

The problem is that our service providers are on the brink of financial collapse, and the costs of the minimum-wage increase would push some of them over the brink. We're seeking an amendment similar to the provision in SBx2 1 to require the state to cover the costs. Our providers have nowhere else to turn for these mandated expenses.

Senator Mark Leno, the author of SB 3, asked us to withhold our opposition to the bill on the Senate floor while he worked to get the funding in the budget, and we agreed. For me personally, it was a big relief not to have to oppose a minimum wage bill -- or any bill by Senator Leno, one of our community's most important supporters. ***He and we both kept our parts of the deal, no matter what you might have heard.*** But the budget that the Legislature passed and Governor Brown signed left out the funding he and we asked for, so now we have to fight to stop the bill unless it is amended to put the funding back in.

So it's ominous for our community if the bill passes as-is, exciting if it passes with our amendment, and status-quo if it doesn't pass at all.

The first Assembly hearing is this Wednesday (July 8) in the Labor and Employment Committee. There probably will be more after that.

As always, thank you for your advocacy.

Greg

PS. I apologize if you are one of the people that our system added to this email list who never asked to be on it. To get off, scroll down to the bottom and click the button. As far as I can tell, that will delete your address permanently, even if you use our system to send any more emails.

Greg deGiere
Public Policy Director
The Arc & United Cerebral Palsy California Collaboration
1225 Eighth Street, Suite 350, Sacramento, CA 95814
916-552-6619 x4
Greg@TheArcCA.org

If you no longer wish to receive e-mail from us, please click [here](#).



State of California

Department of Developmental Services

Self-Determination Program - Frequently Asked Questions

Q1. What is the Self-Determination Program?

A. As authorized in Welfare and Institutions Code, Section 4685.8, "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."

Q2. When does the SDP start?

A. The program will start once it is approved for federal funding. The Department is working with stakeholders to draft a Home and Community-Based Services Waiver application that will be submitted for approval to the Centers for Medicare and Medicaid Services no later than December 31, 2014. Upon approval of the Waiver application, the SDP 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.

Q3. How can I keep updated on the progress of the SDP?

A. Updates will be posted as they become available on the Self-Determination website. If you want to be notified when updates are made, email sdp@dds.ca.gov and ask to be included on the update notification list.

Q4. Who is eligible for the SDP?

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 to SDP, working with a Financial Management Services entity, and managing SDP services within an individual budget amount.
- An individual who lives in a licensed long-term health care facility (i.e., a Skilled Nursing Facility, Intermediate Care Facility) is not eligible to participate in the SDP. If someone lives in one of these facilities and is interested in the SDP, he or she can request that the regional center provide person-centered planning services in order to make arrangements for transition to the SDP, provided that he or she is reasonably expected to transition to the community within 90 days.

Q5. What if participants are happy with their current service delivery program and do not wish to enroll in the SDP?

A. Enrollment in the SDP 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 SDP at any time.

Q6. How much responsibility will participants or their family have if they choose to participate in the SDP?

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 their Individual budget.

Q7. What are Financial Management Services?

A. Financial Management Services assist the participant to manage and direct the funds contained in the individual budget, and ensure that the participant can implement his or her IPP throughout the year. Financial Management Services may include bill paying services and activities that facilitate the hiring of support workers for the participant.

Q8. What is an individual budget?

A. It is the amount of money a SDP participant has available to purchase needed services and supports.

Q9. How does the individual budget amount get determined? UPDATED

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

Q10. 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 POS costs? NEW

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

Q11. 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 SDP Waiver and in the IPP. Services funded through other sources (e.g., Medi-Cal, schools) cannot be purchased with SDP funds.

Q12. If I choose to participate in the SDP, will I still have the same rights? NEW

A. Yes, participants enrolled in the SDP will have the same rights established under the traditional service model (e.g. appeals, eligibility determinations, all rights associated with the IPP process).

Q13. How can someone learn more about the SDP?

A. Interested participants, families, or others are encouraged to visit the Self-Determination website (www.dds.ca.gov/sdp) to find out more information about SDP. The site will be updated as more information is available.

Q14. This sounds great; can I enroll in Self-Determination now?

A. The process for selecting and enrolling the 2,500 participants in the first three years has not been finalized. However, you can email sdp@dds.ca.gov to express your interest in the program and you'll receive notice of website updates on the progress of the SDP, including the enrollment process. Please include your name and/or the name of the person interested in enrollment and the regional center you are with in the email.



California's Protection & Advocacy System
Toll-Free (800) 776-5746

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 http://www.leginfo.ca.gov/pub/13-14/bill/sen/sb_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 54302 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 participation 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.

--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>.



SELF-DETERMINATION PROGRAM SB 468 (UPDATE)

In October of 2013, Governor Edmund G. Brown Jr., signed into law, Senate Bill 468, establishing the Self-Determination Program. The Self-Determination program will provide children and adults served by the regional center, and their families more freedom, control, and responsibility in choosing services and supports to help them meet the goals in their Individual Program Plan (IPP).

When will the Self-Determination program be available?

California's Department of Developmental Services submitted the required application to the Center of Medicare & Medicaid Services (CMS) by December 31, 2014. However, due to a number of questions from CMS, the application will need to be re-submitted. When that happens, the 90-day time line begins again.

Who can get services and supports through the Self-Determination program?

To be eligible to receive services and supports through the Self-Determination program, you must be receiving or eligible to receive services from a regional center and must be at least three years old to enroll in the program.

Once the application is approved, the Department of Developmental Services will select the 114 individuals from Tri-Counties Regional Center (TCRC) to participate. This includes 16 individuals who are currently participating in TCRC's Self-Determination pilot project, plus an additional 98 individuals served by TCRC. Recent legislation may increase our numbers to include those coming from the developmental centers.

Individuals, who are interested in Self-Determination, will be required to attend an informational meeting about the program. At this meeting, people will learn about the opportunities and the increased responsibilities involved in accepting more control over coordinating their services. Understanding this information will help people decide if the Self-Determination Program is a good option for them.

If after the meeting, a person decides they would like to participate, TCRC will submit their name to DDS. Then, DDS will randomly select the initial participants from that list; taking into consideration the ethnicity, age, gender and the type of developmental disability of the person served.

For the second phase of the program, there will be no limits on how many people can participate in the program and anyone who receives regional center services can request to be part of the program.

What services are included in the Self-Determination Program?

In the Self-Determination Program, planning teams will use a person-centered planning process to develop all Individual Program Plans (IPPs). Persons served, and those who support them, will see many changes in the choice of services and supports available to them. For example, a person served may be able to receive services that regional centers are not allowed to pay for because of past changes to state law; services like camping, certain types of therapies, and behavior services.

Regular regional center services such as supported living services, independent living services and day program services will still be available and can be purchased through the Self-Determination program. Also, there may be new and different services available through local businesses or community agencies that can be purchased through the Self-Determination program.

How will the IPP process be different under the Self-Determination Program?

Self-Determination program participants will have the opportunity to be more active in creating IPPs and taking on more responsibility in the decision-making process for selecting services and supports. Participants will receive information and training from regional center staff about managing services and supports and hiring staff and agencies. Participants in the program have the option of using an "Independent Facilitator" who can help in planning their services and supports and other tasks related to managing their IPP.

How will budgets be determined under the Self-Determination Program?

Each participant will receive a budget based on the amount of money the regional center spent on services and supports for them from the year before. The budget amount can be changed by the IPP planning team if the participant has some sort of a change in circumstances, needs or resources.

For those who are new to the regional center system, or who have not had a year of regional center services, the planning team will determine the services

and supports needed. Using this information, the regional center will put together a budget based on the average cost of similar services.

What is a Fiscal Management Service and what does it have to do with the Self-Determination program?

A Fiscal Management Service (FMS) is a service that helps a participant to manage their budgets under the Self-Determination program. The FMS representative will help the participant make sure that they have enough money to last throughout the year.

The FMS is a required part of the Self-Determination program by California law. The FMS representative must be part of an agency that contracts with the regional center for services. The FMS representative cannot be a parent or family member of the participant on the Self-Determination program.

Self-Determination Advisory Committee

TCRC, in conjunction with the Central Coast Office of the State Council on Developmental Disabilities have been working together on a variety of activities in preparation for the Self-Determination Program. Our first order of business was to select the members of the Self-Determination Advisory Committee.

We were fortunate that we received a large number of applicants from our community. TCRC worked with the Central Coast office of the State Council, to identify candidates who are individuals receiving services from the regional center as well as family members. In addition, the committee reflects the multicultural diversity of those we serve. We are thrilled to have such a talented group who will guide us as we move forward with the implementation of the Self-Determination Program.

The first Self-Determination Advisory Committee meeting was held on Tuesday, June 30, 2015. The committee learned about the Self-Determination Program as well as person-centered planning. They also received updates on the status of the waiver application to CMS.

The Self-Determination Advisory Committee will meet quarterly and the next meeting is scheduled for Tuesday, October 27, 2015 at the TCRC office in Santa Barbara.

What's next?

At this time, we do not know when the Self-Determination program will begin. And what the final rules about the program will be.

However, as we wait for more information about the Self-Determination program, TCRC is involved with the Self-Determination Committee through the Association of Regional Center Agencies (ARCA) to provide information and suggestions to the Department of Developmental Services about the program.

Thank you for your interest in Self-Determination and please check the Self-Determination page on the DDS website at:

www.dds.ca.gov/sdp/SDPUpdates.cfm for the most recent updates.

For more information, click on the links below:

Department of Developmental Disabilities Services:

www.dds.ca.gov/sdp/SDPFAQ.cfm

Disability Rights California: <http://www.disabilityrightsca.org/pubs/F07701.pdf>

Autism Society Los Angeles County:

<http://autismla.org/resources/Fact Sheet for Consumers and Families.pdf>

**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

TRI-COUNTIES REGIONAL CENTER

SELF-DETERMINATION ADVISORY
COMMITTEE

What Is Self-Determination?

A New Option

- New way to receive services
- Voluntary
- Regular Regional Center vs. Self-Determination Services



Eligibility

- Have a Developmental Disability and currently receiving services from a Regional Center
- Live at home or in the community
 - People are not eligible if they live in certain types of long term health care facilities, unless you're in the process of moving into the community

Selection Process

What we know now:

- During the initial phase-in period, 2500 participants will be chosen statewide.
 - 114 from Tri-Counties Regional Center (includes those who are currently on the pilot project if they chose to continue in the program)
- Recent legislation will potentially allow for an increase in the number of these participants to include people moving from Developmental Centers

Selection Process Continued

- What does someone need to do to be considered for enrollment?
 - Participate in an informational meeting about the Self-Determination program at your regional center.
 - After participating in the informational meeting, let your regional center know you are interested in enrolling in the Self-Determination Program

What happens next?

- Regional centers will send the names of those interested to the Department of Developmental Services (DDS).
- DDS will randomly select the first 2,500 enrollees from among those who have attended an informational meeting.
- The selection will take into consideration:
 - Age
 - Gender
 - Ethnicity
 - Disability diagnosis

Participation

If selected, participants will need to agree to:

- Participate in an orientation about the Self-Determination program
- Use self-determination services and supports only when generic services and supports are not available
- Manage the services and supports within your budget
- Use the services of a Fiscal Manager (FMS)

Fiscal Management Services (FMS)

- Required vendored service
- Help manage the funds in the individual budget
- Pay bills to those who provide supports and services
- Provide a monthly statement of funds spent
- Provide assistance in the hiring of support workers
- Ensure all employment laws are being followed

The Budget

- Will be based upon the cost of services used in the previous 12 months
- If someone is new to the system, the planning team will determine the needed services and supports and the budget will be determined based on the cost of those services
- Changes may be made if there is a significant change in needs or circumstances

Self-Determination Advisory Committee

- Membership in the committee must reflect the multi-cultural and geographic area served by the regional center
- Role of the Committee:
 - Provide oversight of the Self-Determination Program
 - Review the development and ongoing progress of the Self-Determination Program
 - Including:
 - Whether the program advances the principles of self-determination
 - Is operating consistent with the requirements of self-determination
 - Make ongoing recommendations for improvement to the regional center and the Department of Developmental Services

Other Related Advisory Committees

- Statewide Self-Determination Advisory Committee
 - Formed by State Council on Developmental Disabilities
 - Membership consists of the chair, or designee, of the 21 local SDS Advisory Committees
 - Will meet at least twice per year
 - Shall Identify:
 - Self-determination best practices and effective training materials
 - Implementation concerns or systemic issues and ways to enhance the program
 - Make recommendations regarding the most effective method for participants to learn of individuals who are available to provide services and supports.

State Council on Developmental Disabilities

- The State Council shall synthesize information received from the Statewide Self-Determination Advisory Committee, local advisory committees, and other sources
 - Share the information with individuals served, families, regional centers, and the Department of Developmental Services
 - Make recommendations, as appropriate, to increase the effectiveness in furthering the principles of self-determination
- DDS Self-Determination Workgroup

Timelines

- Once the Waiver is accepted by the Center for Medicare and Medicaid Services (CMS), the Waiver must be approved within 90 days
 - To date, it has not been accepted by CMS so the 90 “clock” has not begun.
- Implementation of the SD Program will begin once the Waiver is approved

Other Things to Consider

- Person-Centered Planning (PCP)
 - A process directed by the family or individual intended to identify strengths, capacities, preferences, needs and the desired outcome.
 - Will be a central part of planning for individuals and families participating in the Self-Determination Program.
- Fiscal Management Services – Required
- Independent Facilitator (Optional)
 - A participant may choose to hire an Independent Facilitator to assist them with their participation in the Self-Determination Program.
 - Cannot be someone who is employed by the person or providing services to them.
 - Paid out of the individual budget.
