

Welcome!

Self-Determination Program (SDP)

Informational Meeting

REFERENCE MATERIALS (left side)

- SDP Background Document
- SDP Frequently Asked Questions (FAQs)
- SDP List of Services
- SDP Definitions of Services
- SDP Statute – Welfare and Institutions Code 4685.8
- SDP Local Volunteer Advisory Committee and State Council on Developmental Disabilities Contact and Information

MATERIALS FOR INFORMATIONAL MEETINGS (right side)

- Trainer Guide
- Informational Meeting PowerPoint
- Informational Meeting Attendance Sheet

QUESTIONS

For more information and updates regarding the Self-Determination Program, visit www.dds.ca.gov/sdp.

Any questions regarding the Self-Determination Program from consumers, families, or organizations, may be sent to sdp@dds.ca.gov.

1. WHAT IS SELF DETERMINATION?

- a. “Self-determination” means a voluntary delivery system consisting of a defined and comprehensive mix of services and supports, selected and directed by a participant through person-centered planning, in order to meet the objectives in 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.ⁱ
- b. The Self-Determination Program (SDP) only funds services and supports that the federal Centers for Medicare and Medicaid Services determines are eligible for federal financial participation.ⁱⁱ
- c. The SDP is a program where an individual (or his or her parents or legal representative) is given a specific budget from which they can purchase the services and supports that they need to make their person-centered service plan work for them. Individuals will have more flexibility and choice, and greater control over selecting their services and supports, in order to meet their own needs.
- d. Five Principles of SDPⁱⁱⁱ
 - i. **Freedom** – To exercise the same rights as all citizens. Individuals can freely choose where and with whom they live, how they occupy their time, and who supports them.
 - ii. **Authority** – To control their individual budget and purchase services and supports of their choosing.
 - iii. **Support** – To arrange resources and personnel, both formal and informal, that will assist the individual to live a life integrated in his or her community.
 - iv. **Responsibility** – To take responsibility for decisions in their own lives and to be accountable for the use of public dollars and to accept a valued role in their community through, for example, competitive employment, organizational affiliations, spiritual development, and general caring of others in their community.
 - v. **Confirmation** – Of the critical role of participants and their families in making decisions in their own lives and designing and operating the system on which they rely.

2. HISTORY OF SDP

- a. **Lanterman Developmental Disabilities Act^{iv}**
 - i. The California law that gives people with developmental disabilities the right to the services and supports they need to live a more independent and normal life. The Act is part of the California Welfare and Institutions Code (W&I Code Sections 4500 – 4905)
 - ii. The law ensures that each person is entitled to receive the services and supports that meet their needs and choices.
- b. **SDP Pilot project**
 - i. In 1998, the Legislature expanded the Lanterman Developmental Disabilities Services Act to include self-determination pilot projects.

Currently, there are five regional centers with approximately 100 participants in the pilot.

- ii. Current list of Regional Centers (RCs) in the SDP pilot:
 1. San Diego
 2. Tri-Counties
 3. Eastern LA
 4. Kern
 5. Redwood Coast

c. SDP in the law – Senate Bill No. 468 (SB 468)

- i. SB 468 was signed into law on October 9, 2013. Upon approval of federal funding, SB 468 requires the Department of Developmental Services (DDS) to establish and implement a Statewide SDP that would be available in every regional center catchment area.
- ii. The SDP is a voluntary program and individuals may exit SDP at any time. Regional centers must ensure there is not a gap in services and supports during the transition.
- iii. The law provided that program participants receive an individual budget to be used for the purchase of services and supports necessary to implement their IPP.
- iv. The Statewide program will be phased in over 3 years, serving up to 2,500 regional center consumers during the phase-in period. After the phase-in period, the SDP will be available on a voluntary basis to all eligible regional center consumers except those consumers who reside in licensed long-term health care facilities as defined in Title 17 Section 54302(a)(44). Individuals (or his or her parents or legal representative) who are not eligible to participate in the SDP may request that the regional center provide person-centered service planning 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.
- v. To protect the health and safety of participants in the SDP, the law requires non-vendored providers of services and supports who meet specified criteria to submit to a criminal background check. Fingerprint images and related information will be submitted to the Department of Justice (DOJ) for clearance authorization.
- vi. The law requires each regional center to be responsible for implementing the SDP and to establish a local volunteer advisory committee to provide oversight of the project.

3. KEY PLAYERS/COMPONENTS OF SDP

- a. **Participant** – An individual (or his or her parents or legal representative) who has been deemed eligible for, and has voluntarily agreed to participate in, the Self-Determination Program.
- b. **Person-Centered Planning (PCP)** – An approach to determining, planning for and working toward the preferred future of a person with developmental disabilities and his or her family. The preferred future is what the person and family want to do in the future based on their strengths, capabilities, preferences, lifestyle and cultural background. PCP is a framework for planning and making

- decisions. It is based on an awareness of, and sensitivity to, the lifestyle and cultural background of the consumer and family.
- c. **Individual Program Plan (IPP)** – A plan and provision of services and supports by the regional center system centered on the individual and the family of the individual with developmental disabilities and takes into account the needs and preferences of the individual and the family, where appropriate, as well as promoting community integration, independent, productive, and normal lives, and stable and healthy environments.
 - d. **The IPP team** – A team of people chosen by the participant including, but not limited to FMS, IF, regional center service coordinator, family, etc., shall utilize the person-centered planning process to develop the IPP for a participant. The IPP shall detail the goals and objectives of the participant that are to be met through the purchase of participant-selected services and supports.
 - e. **Independent Facilitator** – Chosen and directed by the participant, the independent facilitator helps with locating, accessing, and coordinating services and supports consistent with the participant's IPP. The cost of an independent facilitator is paid out of the participant's individual budget. . (*Participants who do not wish to work with an Independent Facilitator may have their regional center service coordinators fulfill the role*).
 - f. **Financial Management Services Provider** – Chosen by the participant and vendored by a regional center, assists the participant in managing and distributing funds contained in his or her individual budget and ensures that financial resources are available to implement his or her IPP throughout the year.
 - g. **Individual Budget** – The amount of regional center purchase of service (POS) funding available to the participant for the POS and supports necessary to implement the IPP. The individual budget is determined by using a fair, equitable, and transparent methodology. The participant manages the Self-Determination Program services and supports within his or her individual budget.
 - h. **Regional Center (RC)s** – Private, non-profit agencies under contract with DDS that provide individuals with access to an array of services and supports best suited to meet their needs and choices throughout their lifetime.
 - i. **Local Volunteer Advisory Committee (LVAC)** – Established by each regional center to provide oversight of SDP. The committee consists of the regional center clients' rights advocate, consumers, family members, and other advocates, and community leaders. Consumers and their family members should make up a majority of the committee. The committee should reflect the multicultural diversity and geographic profile of the catchment area. The committee reviews the development and ongoing progress of the SDP, including whether the program advances the principles of self-determination and is operating consistent with the requirements, and may make ongoing recommendations for improvement to the RC and the department.
 - j. **Statewide Self-Determination Advisory Committee (SSDAC)** – The State Council on Developmental Disabilities formed the SSDAC, comprised of the chairs of the 21 local advisory committees or their designees. The SSDAC convenes twice annually, or more frequently in the sole discretion of the council, to identify self-determination best practices, effective consumer and family training materials, implementation concerns, systemic issues, ways to enhance

the program, and recommendations regarding the effective method for participants to learn of individuals who are available to provide services and supports. The council synthesizes information received from the SSDAC, LVAC, and other sources, then shares the information with consumers, families, regional centers, and the department, and make recommendation to increase the program's effectiveness in furthering the principles of self-determination.

- k. **Department of Developmental Services (DDS)** – To ensure that the program is available to all consumers regardless of geographic location, economic or educational background, or ethnicity, and provide oversight and monitoring of funds used for the SDP and to ensure that these outcomes are achieved.

ⁱ For complete language, please reference [WIC 4685.8\(c\)\(6\)](#).

ⁱⁱ For complete language, please reference [WIC 4685.8\(c\)\(6\)](#).

ⁱⁱⁱ For complete language, please reference [WIC 4685.8\(z\)\(2\)\(A – E\)](#).

^{iv} Disability Rights California, [Rights Under the Lanterman Act, Chapter 1](#)

GENERAL

Q. What is the Self-Determination Program?

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

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

A. The program will be available once the state receives approval on the self-determination program federal waiver application. Upon approval of the Waiver application, the Self-Determination Program will be implemented for up to 2,500 participants during the first three years. After the three year phase-in period, the program will be available to all consumers.

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

A. Updates will be posted, as they become available, on the Department of Developmental Services (DDS) Self-Determination website. To sign up for updates please send an email to sdp@dds.ca.gov, and ask to be included on the update notification list.

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

A. Interested consumers, families, or others are encouraged to visit the DDS [Self-Determination Program website](#) to find out more information about California's Self-Determination Program.

Q. What is the projected date for CMS approval of the SDP waiver application?

A. Once the SDP waiver application is re-submitted, CMS has 3 months to either approve or deny the application or ask for more information. DDS has been receiving technical assistance from CMS to resolve questions regarding the SDP waiver application. Once this is complete and minor modifications are made to the application, the state will re-submit the waiver application.

Q. What is person-centered planning and how does it relate to the individual program plan?

A. Person-centered planning is about the individual's future and reaching his or her goals. The process should be driven by the individual and include other people, such as family or friends, only if the individual chooses to include them in the process. Once the individual has made choices about what he or she wants, an individual program plan (IPP) is written based on the individual's decisions. The IPP lays out the individual's goals and what is needed to reach those goals, including necessary services and supports.

CRIMINAL BACKGROUND CHECKS

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

A. A criminal background check is required for people providing direct personal care to a consumer, including family members.

Q. Can a consumer request that a provider obtain a background check?

A. Yes. Consumers or the consumer’s financial management service provider may request a background check for non-vendored providers of services and supports.

Q. Who is responsible for paying for the background check?

A. The person providing services or his or her employing agency.

FINANCIAL MANAGEMENT SERVICES

Q. What are Financial Management Services?

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

Q. Does everyone have to have an FMS provider?

A. Yes. The participant is required to utilize the services of an FMS provider of his or her choosing. The FMS provider must be vendored by a regional center.

Q. Who pays for the cost of my FMS provider?

A. The cost of the FMS provider will be paid by the participant out of his or her individual budget. The SDP offers additional flexibility and options regarding who provides services and supports, including non-vendored providers. As a result, the amount the participant pays for a service could be less under the SDP.

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

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

Q. Who can be a Financial Management Services Provider?

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

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

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

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

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

INDEPENDENT FACILITATOR

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

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

Q. Where does the independent facilitator obtain the necessary training?

A. Training for independent facilitators, with stakeholder input, is being developed by DDS. When the information on independent facilitator training is completed, the DDS Self-Determination website will be updated. The cost of training is the responsibility of the independent facilitator.

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

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

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

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

INDIVIDUAL BUDGET

Q. What is an individual budget?

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

Q. How does the individual budget amount get determined? Can my budget be adjusted?

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

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

A. For these individuals, the individual budget amount is determined by the individual program planning team by identifying the services and supports needed by the individual and available resources. The regional center will calculate the cost of providing services and supports by

using the average cost paid by the regional center for each service or support unless the regional center determines that the consumer has a unique need that requires a higher or lower cost.

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

A. Yes, a participant can only purchase services and supports that comply with the federal HCBS regulations, as described in the Self-Determination Program Waiver, and in the individual program plan. Services funded through other generic sources (e.g. Medi-Cal) cannot be purchased out of the participant's individual budget.

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

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

Q. Will enrolling in the Self-Determination Program decrease an individual's budget for services and supports?

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

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

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

RIGHTS

Q. Do I have to enroll in the Self-Determination Program?

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

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

A. Self-Determination provides individuals more choice and flexibility in selecting services and supports, who provides them, and how money in the individual budget is spent. Participants may choose to get help with these tasks from an independent facilitator. The participant will also need to choose a Financial Management Services entity that will work with him or her to monitor an individual budget, verify provider qualifications, and pay providers.

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

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

SELECTION PROCESS

Q. What criteria will DDS use to select participants?

A. The Department of Developmental Services will randomly select the first 2,500 enrollees from among those who have attended a required Informational Meeting. This selection will be made from the names of those received by the Department of Developmental Services from the regional centers. The selection takes into consideration the following factors to ensure those selected are representative of the statewide regional center population:

- Regional Center
- Ethnicity
- Age
- Gender
- Disability diagnosis

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

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

A. An individual must meet the following eligibility requirements:

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

Q. Is someone who resides at Sonoma, Porterville or Fairview Developmental Center eligible to be selected as one of the 2500 participants?

A. Yes.

Q. How will the existing participants of the Self-Determination Pilot program be accounted for within the first 2,500 enrollees?

A. There are approximately 100 individuals participating in the Self-Determination Pilot program. These individuals will automatically be included in the 2,500 enrollees. They will need to attend an orientation just like new participants.

SERVICES

Q. Where can an individual find a list of services available in the Self-Determination Program?

A. For a list of services that have been proposed in the Self-Determination Program Waiver application, please

visit: http://www.dds.ca.gov/SDP/docs/ProposedServices_SDPApplication.pdf

Included in the waiver application is a description of each service proposed. Each proposed service and description is subject to approval by the Centers for Medicare & Medicaid Services. Therefore, the list linked above and the description of each service proposed are subject to change. For a description of the proposed services, please

visit: http://www.dds.ca.gov/SDP/docs/ProposedSDPWaiverSvs_Definitions.pdf

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

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

Q. How does the HCBS Final Rule affect SDP services? For example, a camp specifically for individuals with developmental disabilities may not be an integrated setting.

A. All services selected by an SDP participant will need to be compliant with the Final Rule. Services and supports designed for those with developmental disabilities would not automatically be excluded from the SDP.

Q. Are services available to address a specialized medical need still an option with the SDP?

A. Yes. Services and supports included in the IPP can be provided through the SDP. As long as generic resources are exhausted first, a service not covered by Medi-Cal or private insurance can be provided through the SDP.

Proposed Services for SDP Application

- Advocacy Services
- Behavioral Intervention Services
- Communication Support
- Community Integration and Employment Supports
- Community Living Supports
- Crisis Intervention and Support
- Dental Services
- Environmental Accessibility Adaptations
- Family Assistance and Supports
- Financial Management Service
- Home Health Aide
- Homemaker
- Housing Access Supports
- Independent Facilitator
- Individual Training and Education
- Integrative Therapies
- Lenses and Frames
- Live-In Caregiver
- Nutritional Consultation
- Optometric/Optician Services
- Participant-directed Goods and Services
- Personal Emergency Response System
- Psychology Services
- Respite
- Skilled Nursing
- Specialized Medical Equipment and Supplies
- Specialized Therapeutic Services
- Speech, Hearing and Language Services
- Technology
- Training and Counseling Services for Unpaid Caregivers
- Transition/Set-Up Expenses
- Transportation
- Vehicle Modifications and Adaptations

Proposed Self-Determination Program Waiver Service Definitions

Advocacy Services

Advocacy services support and facilitate the participant in exercising legal, civil and service rights to gain access to generic services and benefits. Advocacy services shall only be provided when other generic sources of similar assistance are not available to the participant, and when advocacy is directed towards obtaining generic services. The specific nature of advocacy services shall be specified in the IPP.

Behavioral Intervention Services

Behavior intervention services include the use and development of intensive behavioral intervention programs to improve the participant's development and behavior tracking and analysis. The intervention programs are restricted to generally accepted, evidence-based, positive approaches. Depending on the participant's needs, behavioral intervention services may be provided in multiple settings, including the participant's home, workplace, etc. Behavioral intervention services are designed to assist individuals in acquiring, retaining and improving the self-help, socialization and adaptive skills necessary to reside successfully in home and community-based settings. Services may be provided to family members if they are for the benefit of the participant. Services for family members may include training and instruction about treatment regimens, including training on the use of medications, and risk management strategies to enable the family to support the participant.

The participation of parent(s) of minor children is critical to the success of a behavioral intervention plan. The person-centered planning team determines the extent of participation necessary to meet the individual's needs. "Participation" includes the following meanings: Completion of group instruction on the basics of behavior intervention; Implementation of intervention strategies, according to the intervention plan; If needed, collection of data on behavioral strategies and submission of that data to the provider for incorporation into progress reports; Participation in any needed clinical meetings; provision of suggested nominal behavior modification materials or community involvement if a reward system is used. If the absence of sufficient participation prevents successful implementation of the behavioral plan, other services will be provided to meet the individual's identified needs.

Proposed Self-Determination Program Waiver Service Definitions

Communication Support

Communication support services includes communication aides necessary to facilitate and assist persons with hearing, speech, or vision impairment, including individuals who do not speak English as their primary language and who have a limited ability to read, write, speak or understand English (Limited English Proficient or LEP skills). The purpose of this service is to assist individuals to effectively communicate with service providers, family, friends, co-workers, and the general public. The following are allowable communication aides, as specified in the participant's IPP:

1. Facilitators;
2. Interpreters and interpreter services;
3. Translators and translator services; and
4. Readers and reading services.

This service also includes supports for the participant to use computer technology to assist in communication. Such supports include training in the use of the technology, assessment of need for ongoing training and support, and identification of resources for the support.

Communication support services include evaluation for, and training in the use of, communication aides, including for individuals with LEP skills, as specified in the participant's IPP.

Community Integration and Employment Supports

Community Integration and Employment Supports has two components: A) Community Integration Supports and B) Employment Supports. This service is provided to participants tailored to their specific personal outcomes related to the acquisition, improvement and/or retention of skills and abilities to prepare and support the participant for community participation, interdependence, independence, and/or community integrated work.

This service supports the full access of participants receiving services in the community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving these services. In addition, this service assists the participant to learn the skills needed to participate in the community during integrated activities with individuals who are non-disabled.

Proposed Self-Determination Program Waiver Service Definitions

The participant selects this service from among service options including non-disability specific settings. The service options are based on the participant's individualized needs and preferences.

The participant receives this service in settings that are integrated in and supports full access to the greater community, and allows for participant comfort, interdependence, independence, preferences, and use of any technology. The participant's choices are incorporated into the services and supports and his/her essential personal rights of privacy, dignity and respect and freedom from coercion are protected. The service settings must allow the participant to control personal resources and his/her schedule and activities. In addition, the settings must allow the participant to receive breaks in the same manner as a non-disabled individual.

A) Community Integration Supports

Community Integration Supports are provided in the manner specified by the planning team to assist participants with acquisition, retention, or improvement in self-help, socialization and adaptive skills through therapeutic and/or physical activities to achieve the participant's personally defined outcomes. These services and supports may take place in the participant's home, as well as, a wide variety of community-based settings that promote community integration. Services may be provided on a regularly scheduled basis, for one or more days per week.

These services and supports enable the participant to attain or maintain his or her maximum functional level, interdependence, and independence, including the facilitation of connections to community events and activities. In addition, these services and supports may serve to reinforce skills or lessons taught in school, therapy, or other settings, enabling the participant to integrate into the community.

Services and supports to assist the participant to increase and improve self-help, socialization, community integration, and adaptive skills, may include, but are not limited, to:

- a. Socialization and community awareness.
- b. Communication skills.
- c. Visual, auditory and tactile awareness, and perception experiences.
- d. Development of appropriate peer interactions and self-advocacy skills.
- e. Art and recreation programs.

Proposed Self-Determination Program Waiver Service Definitions

- f. Volunteerism.
- g. Vocational training.
- h. College, including financial assistance with tuition, books, and other related fees.
- i. Continuing Education i.e., classes that help participants explore interests or improve academic skills or complete a high school equivalency (GED) diploma while in an inclusive setting
- j. Senior and faith-based groups.
- k. Peer mentoring.
- l. Mobility services, i.e., the access and use of public transportation or other modes of transportation, including access to peer-to-peer ride sharing.
- m. Friendship and relationship building

B) Employment Supports

Employment supports are individually designed and provided in the manner specified by the planning team to assist participants to gain and retain employment, including self-employment, in community integrated work environments to achieve the participant's personally defined outcomes. These services and supports also include activities related to job discovery, self-employment, and retirement.

The participant may receive any combination of Employment Supports, including, but not limited, to:

- a. Physical capacities development, i.e., health concerns.
- b. Psychomotor skills development.
- c. Interpersonal, communicative/social and adaptive skills development, e.g., responding appropriately to supervisors/co-workers, etc.
- d. Work habits development, e.g., attendance and punctuality, focusing on tasks, etc.
- e. Development of vocationally appropriate dress and grooming.
- f. Productive skills development, i.e., the achievement of productivity standards and quality results.
- g. Work-practices training, e.g., following directions, completing tasks, etc.
- h. Work-related skills development, e.g., problem solving, path planning to future employment opportunities, etc.
- i. Money management and income reporting skills.
- j. Development and use of natural job supports.

Proposed Self-Determination Program Waiver Service Definitions

- k. Workforce integration techniques.
- l. Community integration development/relationship building.
- m. Safety skills and training.
- n. Job discovery, job-seeking, and interviewing skills.
- o. Self-advocacy training, participant counseling, peer vocational counseling, career counseling, and peer club participation.
- p. Volunteerism to assist the person in identifying job or career interests.
- q. Individualized assessment.
- r. Job analysis, job development and placement that produce an appropriate job match for the participant and employer.
- s. Direct supervision or training while the participant is engaged in integrated work.
- t. Job coaching provided on or off the worksite.
- u. Counseling with a participant/family and/or authorized representative to ensure support of the participant in job adjustment or planning for retirement.
- v. Counseling on benefits planning to ensure a consumer understands the relationship between earned income and receiving public benefits such as SSI, SSA, Medi-Cal, and PASS Plans.
- w. Consultation with employer's Human Relations staff.
- x. Assessment of need for technology and facilitating acquisition of communication aides and technology.
- y. Job customization, e.g., modifications to work materials, procedures, and protocols.
- z. Self-employment and business development, i.e., identification of potential business opportunities, business plan development, identification of needed supports, ongoing assistance and support, etc.

The above described services and supports cannot be provided when available under a program funded under §110 of the Rehabilitation Act of 1973 (29 U.S.C. 730) or §602(16) and (17) of the Individuals with Disabilities Education Act (IDEA.) (20 U.S.C. 1401 (16 and 17)).

Community Living Supports

Community Living Supports are services that facilitate independence and promote community integration for participants, regardless of the community living arrangement. Services include support and assistance with socialization, personal skill development, community participation, recreation and leisure, and home and personal care, among others, as further described below. Payments for Community Living Supports do not include the cost for room and board.

Proposed Self-Determination Program Waiver Service Definitions

Community Living Supports are provided to a participant in his/her home and community to achieve, improve, and/or maintain social and adaptive skills necessary to enable the participant to reside in the community and to participate as independently as possible. Services are provided in environments that support participant comfort, independence, preferences and the use of technology. The participant's choices are incorporated into the services and supports received. The participant has unrestricted access, and the participant's essential personal rights of privacy, dignity and respect, and freedom from coercion are protected.

The service settings are integrated in, and facilitate each participant's full access to the greater community, which includes opportunities for each participant to engage in community life, control personal resources, and receive services in the community.

The specific services provided to each participant will vary based on the individual, the individual's preferences and the community setting chosen. The specific types and mix of supports that an individual receives as well as any special provider qualifications shall be specified in the Individual Program Plan.

The following items describe the types of possible Community Living Supports:

1. Support with socialization includes development or maintenance of self-awareness and self-control, social responsiveness, social amenities, interpersonal skills, and personal relationships.
2. Support with personal skill development includes activities designed to improve the participant's own ability to accomplish activities of daily living, including eating, bathing, dressing, personal hygiene, mobility, and other essential activities.
3. Support with community participation includes assistance that enables the individual to more fully participate in community activities. Assistance may include, but is not limited to, the acquisition, use, and care of canine or other animal companions specifically trained to provide personal assistance, or devices to facilitate immediate assistance when threats to health, safety, or well-being occur.
4. Support to facilitate participation in post-secondary education, religious, recreation or leisure activities.
5. Support with home and personal care includes services needed to maintain the home in a clean, sanitary and safe environment and provide essential care to the individual. Services include support with household activities, such as

Proposed Self-Determination Program Waiver Service Definitions

planning and preparing meals, money management (personal finances, planning, budgeting and decision making), and laundry. It also includes heavy household chores such as washing floors, windows and walls, securing loose rugs and tiles, moving heavy items or furniture in order to provide safe access and egress, as well as minor repairs such as those which could be completed by a handyman. Heavy household chores and services that can be provided by a handyman are only available when the individual or anyone else in the household is unable to do the service. Services will be provided only in cases where neither the individual, nor anyone else in the household, is capable of performing or financially providing for them, and where no other relative, caregiver, landlord, community/volunteer agency, or third party payer is capable of or responsible for their provision. In the case of rental property, the responsibility of the landlord, pursuant to the lease agreement, will be examined prior to any authorization of service.

6. Support includes the provision of medical and health care services that are integral to meeting the daily needs of the participant (e.g., routine administration of medications or tending to the needs of a participant who is ill or requires attention to medical needs on an ongoing basis.). Medical and health care services such as physician services that are not routinely provided to meet the daily needs of the participant are not provided.
7. Support and training for infant and childcare for participants who are, or will become parents.

Settings where Community Living Supports are provided must have all of the following qualities:

1. The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.
2. The setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting
3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
4. Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.
5. Facilitates individual choice regarding services and supports, and who provides them.

Proposed Self-Determination Program Waiver Service Definitions

In a provider-owned or controlled residential setting, in addition to the qualities specified above, the following additional conditions must be met:

- The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity.
 1. Each individual has privacy in their sleeping or living unit:
 - Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors.
 - Individuals sharing units have a choice of roommates in that setting.
 - Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.
 2. Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.
 3. Individuals are able to have visitors of their choosing at any time.
 4. The setting is physically accessible to the individual.
 5. The unit or dwelling may be shared by no more than four waiver participants.
 6. Any modification of the additional conditions specified in items 1 through 4 above, must be supported by a specific assessed need and justified in the individual program plan (IPP). The following requirements must be documented in the (IPP):
 - Identify a specific and individualized assessed need.

Proposed Self-Determination Program Waiver Service Definitions

- Document the positive interventions and supports used prior to any modifications to the IPP.
- Document less intrusive methods of meeting the need that have been tried but did not work.
- Include a clear description of the condition that is directly proportionate to the specific assessed need.
- Include regular collection and review of data to measure the ongoing effectiveness of the modification.
- Include established time limits for periodic reviews to determine if the modification is still necessary or can be terminated.
- Include the informed consent of the individual.
- Include an assurance that interventions and supports will cause no harm to the individual.

Crisis Intervention and Support

Crisis Intervention and Support is a specialized service that provides short-term care and behavior intervention to provide relief and support of the caregiver and protection for the participant or others living with the participant. This service may include the use and development of intensive behavioral intervention programs to improve the participant's development and behavior tracking and analysis. This service is restricted to generally accepted, evidence-based, positive approaches.

This service is designed to assist participants in acquiring, retaining and improving the self-help, socialization and adaptive skills necessary to reside successfully in home and community-based settings. The service may be provided to family members if they are for the benefit of the participant. The service for family members may include training and instruction about treatment regimens, including training on the use of medications, and risk management strategies to enable the family to support the participant. The participation of parent(s) of minor children is critical to the success of a behavioral intervention program.

The person-centered planning team determines the extent of participation necessary to meet the participant's needs. Depending on the participant's needs, Crisis Intervention and Support can be provided to a participant as follows:

1. Mobile crisis intervention in the participant's home, and/or community or where crisis intervention services are needed. Mobile crisis intervention means immediate therapeutic intervention on a 24-hour emergency basis to a participant exhibiting acute personal, social, and/or behavioral problems. Mobile crisis intervention provides immediate and time-

Proposed Self-Determination Program Waiver Service Definitions

limited professional assistance to a participant who is experiencing personal, social or behavioral problems which, if not ameliorated, will escalate and require that the participant be moved to a setting where additional services are available.

2. Out-of-home crisis intervention when necessary is for the relief of the caregiver, and/or the protection of the participant or others living in the home may be provided in emergency housing in the participant's home community. Out-of-home crisis intervention provides a safe, stable, highly structured environment by combining concentrated, highly skilled staffing (e.g. psychiatric technicians, certified behavior analysts, etc.) and intensive behavior modification programs. Payment for out-of-home crisis intervention will include payment for room and board costs when the service is provided at emergency housing, developed for the provision of crisis intervention that is not a private residence.

As necessary, Crisis Intervention and Support is composed of the following participant-specific activities:

1. Assessment to determine the precipitating factors contributing to the crisis.
2. Development of an intervention plan in coordination with the planning team.
3. Consultation and staff training to the service provider as necessary to ensure successful implementation of the participant's specific intervention plan.
4. Collection of data on behavioral strategies and submission of that data to the caregiver or provider for incorporation into progress reports.
5. Participation in any needed clinical meetings.
6. Development and implementation of a transition plan to aid the participant in returning home if out-of-home crisis intervention was provided.
7. Ongoing technical assistance to the caregiver or provider in the implementation of the intervention plan developed for the participant.
8. Provision of recommendations to prevent or minimize future crisis situations in order to increase the likelihood of maintaining the participant in the community.

Dental Services

Dental services will be provided to individuals age 21 and older, only when the services are not otherwise defined and described in the approved State plan for individuals under the age of 21. The provider qualifications listed in the plan will apply, and are hereby incorporated into this waiver request by reference. Dental services will supplement and not supplant services available through the approved Medicaid State plan or the EPSDT benefit.

Proposed Self-Determination Program Waiver Service Definitions

Environmental Accessibility Adaptations

Those physical adaptations to the participant's home, required by the individual's IPP, which are necessary to ensure the health, welfare and safety of the individual, or which enable the individual to function with greater independence in the home, and without which, the individual would be at risk for institutionalization. These services are allowed only when another entity (i.e. landlord) is not responsible for making the needed adaptation(s).

Such adaptations may include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems which are necessary to accommodate the medical equipment and supplies which are necessary for the welfare of the individual. Provided that they are allowable, other environmental accessibility adaptations and repairs may be approved on a case-by-case basis as technology changes or as a participant's physical or environmental needs change.

Excluded are those adaptations or improvements to the home which are of general utility, and are not of direct medical or remedial benefit to the individual, such as carpeting, roof repair, central air conditioning, etc.. All services shall be provided in accordance with applicable State or local building codes.

- It may be necessary to make environmental modifications to an individual's home before he/she transitions from an institution to the community. Such modifications may be made while the person is institutionalized. Environmental modifications, included in the individual's plan of care, may be furnished up to 180 days prior to the individual's discharge from an institution. However, such modifications will not be considered complete until the date the individual leaves the institution and is enrolled in the waiver.

Family Assistance and Supports

Family Assistance and Support are supports provided either in or out of the home to a participant/family that enables the participant to continue to live and be supported in the family home. The participant's family includes the participant's biological parents, adoptive parents, foster parents, stepparents, siblings, children, spouse, domestic partner, or a person who is the legal representative of the participant. Family supports are intended to support both the participant and the rest

Proposed Self-Determination Program Waiver Service Definitions

of the family to live as much like other families as possible in order to prevent or delay unwanted out-of-home placement. Family Assistance and Supports may include training and education services to the family to accommodate the participant in the home and to access supports offered in the community.

Financial Management Service

This service assists the family or participant to: (a) manage and direct the disbursement of funds contained in the participant's individual budget, and ensure that the participant has the financial resources to implement his or her Individual Program Plan (IPP) throughout the year; (b) facilitate the employment of service providers by the family or participant, as either the participant's fiscal agent or co-employer, by performing such employer responsibilities including, but not limited to, processing payroll, withholding federal, state, and local tax and making tax payments to appropriate tax authorities; and, (c) performing fiscal accounting and making expenditure reports to the participant or family and others as required.

This service includes the following activities to assist the participant in their role as either the employer or co-employer:

1. Assisting the participant in verifying worker's eligibility for employment and provider qualifications
2. Ensuring service providers employed by the participant meet criminal background checks as required and as requested by the participant.
3. Collecting and processing timesheets of workers.
4. Processing payroll, withholding, filing and payment of applicable federal, state and local employment-related taxes and insurance.
5. Tracking, preparing and distributing reports (e.g., expenditure) to appropriate individual(s)/entities.
6. Maintaining all source documentation related to the authorized service(s) and expenditures.
7. Maintaining a separate accounting for each participant's participant-directed funds.
8. Providing the participant and the regional center service coordinator with a monthly individual budget statement that describes the amount of funds allocated by budget category, the amount spent in the previous 30-day period, and the amount of funding that remains available under the participant's individual budget.
9. Ensuring payments do not exceed the amounts outlined in the participant's individual budget
10. Fulfilling other FMS responsibilities as mandated by local, state and federal laws and regulations.

Proposed Self-Determination Program Waiver Service Definitions

Home Health Aide

Services defined in 42 CFR §440.70 that are provided when home health aide services furnished under the approved State plan limits are exhausted. Home health aide services will supplement and not supplant services available through the approved Medicaid State plan or the EPSDT benefit.

The scope and nature of these services do not differ from home health aide services furnished under the State plan. Services are defined in the same manner as provided in the approved State plan. The provider qualifications specified in the State plan apply.

Homemaker

Services consisting of general household activities (meal preparation and routine household care) provided by an individual that has the requisite skills to perform homemaker duties specified in the participant's IPP when the individual regularly responsible for these activities is temporarily absent or unable to manage the home and care for him or herself or others in the home.

Housing Access Supports

Housing Access Supports is a service that provides assistance to a participant when acquiring housing in the community. The purpose of the support is to enable the participant to identify, select and acquire affordable, accessible housing. Services include counseling and assistance in identifying affordable, safe and accessible options and making choices with respect to the participant's preferences of locations and types of housing; identifying the participant's accessibility requirements (including need for modifications); planning for ongoing maintenance and repair (if this will be the participant's responsibility); and identifying and assisting the participant to access financial resources and eligibility for housing subsidies and other benefits. Reimbursement is made for needed accommodations that assist the participant to access typical generic resources, such as apartment rentals and real estate services. Additionally, the service goes beyond the services typically provided by a generic resource (i.e. assists the participant to access affordable apartment units and homes). The specific supports that are required by the participant shall be specified in the IPP. The service

Proposed Self-Determination Program Waiver Service Definitions

does not include payment of deposits or other expenses associated with setting up a household. A parent or legal guardian cannot be paid for providing Housing Access Supports to the participant.

Independent Facilitator

Independent Facilitator means a person, selected and directed by the participant, who is not otherwise providing services to the participant pursuant to his or her IPP. The service or function is intended to assist the participant to plan for and access services to implement needed services identified in the participant's IPP. The services may include, but are not limited to:

1. Participate in the person-centered planning process.
2. Identify immediate and long-term needs, preferences, goals and objectives of the participant for developing the IPP.
3. Make informed decisions about the individual budget.
4. Develop options to meet the identified immediate and long-term needs and access community services and supports specified in the IPP.
5. Advocate on behalf of the participant in the person-centered planning process and development of the IPP, obtaining identified services and supports.

The participant/family may hire, or contract with an IF, and shall specify in the IPP the activities which the IF will conduct. A participant may elect to use his or her regional center service coordinator to fulfill the functions of an IF, instead of contracting with, or using the service of an independent facilitator. This service does not duplicate services provided by the participant's service coordinator.

Individual Training and Education

Individual Training and Education service includes: training the participant in his or her responsibility as an employer, job discovery, community inclusion, relationship building, problem solving, and decision making designed to facilitate the participant's self-advocacy skills, exercise the participant's human and civil rights, and exercise control and responsibility over their SDP services and supports. This service includes enrollment fees, materials, and transportation expenses that are necessary to enable participation in the individual training and education. This service is not provided when funding can be accessed through Public Education as required in IDEA (P.L. 105-17, the IDEA).

Proposed Self-Determination Program Waiver Service Definitions

Integrative Therapies

Integrative Therapies consist of Acupuncture Services, Chiropractic Services, and Massage Therapy. Acupuncture and Chiropractic Services through the SDP waiver are as defined in the approved Medicaid State Plan.

Lenses and Frames

Prescription Lens/Frames will be provided to individuals age 21 and older and are defined and described in the approved State plan for individuals under the age of 21. The provider qualifications listed in the plan will apply, and are hereby incorporated into this waiver request by reference. Prescription lenses and frames will supplement and not supplant services available through the approved Medicaid State plan or the EPSDT benefit.

Live-In Caregiver

Live-in caregiver service provides for the payment for the additional costs of rent and food that can be reasonably attributed to an unrelated live-in personal caregiver who resides in the same household as the participant. This payment is available only in the case of participants who receive personal care support and live in homes that they rent or lease. A legal guardian may not furnish this service. The way the amount that is paid is determined is specified in Appendix I-6. Payment is not made when the participant lives in the caregiver's home or in a residence that is owned or leased by the provider of Medicaid services.

Nutritional Consultation

Nutritional consultation includes the provision of consultation and assistance in planning to meet the nutritional and special dietary needs of participants. These services are consultative in nature and do not include specific planning and shopping for, or preparation of meals for participants.

Optometric/Optician Services

Optometric/Optician Services will be provided to individuals age 21 and older and are defined and described in the approved State plan for individuals under the age of 21. The provider qualifications listed in the plan will apply, and are

Proposed Self-Determination Program Waiver Service Definitions

hereby incorporated into this waiver request by reference. Optometric/Optician services will supplement and not supplant services available through the approved Medicaid State plan or the EPSDT benefit.

Participant-Directed Goods and Services

Participant-Directed Goods and Services consist of services, equipment or supplies not otherwise provided through the SDP Waiver or through the Medicaid State plan that address an identified need in the IPP (including accommodating, improving and maintaining the participant's opportunities for full membership in the community) and meet the following requirements: the item or service would decrease the need for other Medicaid services; promote interdependence, and inclusion in the community; and increase the person's safety in the home environment; and the participant does not have the personal funds to purchase the item or service and the item or service is not available through another funding source.

Personal Emergency Response Systems (PERS)

PERS is a 24-hour emergency assistance service which enables the recipient to secure immediate assistance in the event of an emotional, physical, or environmental emergency. PERS are individually designed services to meet the needs and capabilities of the participant and includes training, installation, repair, maintenance, and response needs. The allowable service includes, but is not limited to, the following:

1. 24-hour answering/paging;
2. Beepers;
3. Med-alert bracelets;
4. Intercoms;
5. Life-lines;
6. Fire/safety devices, such as fire extinguishers and rope ladders;
7. Monitoring services;
8. Light fixture adaptations (blinking lights, etc.);
9. Telephone adaptive devices not available free of charge from the telephone company;
10. Other electronic devices/services designed for emergency assistance.

PERS services are limited to those individuals who have no regular caregiver or companion for periods of time, and who would otherwise require a greater amount of routine supervision. By providing immediate access to assistance, PERS

Proposed Self-Determination Program Waiver Service Definitions

services prevent institutionalization of these individuals and allow them to remain in the community. All Items shall meet applicable standards of manufacture, design, and installation. Repairs to and maintenance of such equipment shall be performed by the manufacturer's authorized dealers where possible.

Psychology Services

Psychology services will be provided to individuals age 21 and older and are defined and described in the approved State plan for individuals under the age of 21. The provider qualifications listed in the plan will apply, and are hereby incorporated into this waiver request by reference. Psychology services will supplement and not supplant services available through the approved Medicaid State plan or the EPSDT benefit.

Respite Services

Respite Services are provided to participants who require intermittent or regularly scheduled temporary supervision. The services are provided on a short-term basis because of the absence or need for relief of those persons who normally care for and/or supervise them and are non-medical in nature, with the exception of colostomy, ileostomy, catheter maintenance, and gastrostomy.

Respite can be any of the following:

1. Services provided by the hour on an episodic basis because of the absence of or need for relief for those persons normally providing the care to individuals.
2. Services provided by the day/overnight on a short-term basis because of the absence of or need for relief for those persons normally providing the care to individuals.
3. Regularly provided care and supervision of children, for periods of less than 24 hours per day, while the parents/primary non-paid caregiver(s) are out of the home.
4. Services that attend to the participant's basic self-help needs and other activities of daily living, including interaction, socialization, and continuation of usual daily routines that would ordinarily be performed by those persons who normally care for and/or supervise them.

Proposed Self-Determination Program Waiver Service Definitions

Respite services may be purchased from qualified agencies or individuals. The participant may employ individual respite workers. In all cases, the IPP must specify the necessary training and skills that such workers or other providers must possess.

Respite Services may be provided in the following locations:

- Private residence.
- Residential facility approved by the State.
- Other community settings that are not a private residence, such as:
 - Adult Family Home/Family Teaching Home
 - Certified Family Homes for Children
 - Adult Day Care Facility
 - Camp
 - Child Day Care Facility
 - Licensed Preschool

Respite Services cannot be provided by the primary care provider or his/her spouse under this definition. Respite providers are required to develop and implement a back-up plan for times when they are scheduled, but are unable to come and provide the services.

Respite Services do not duplicate services provided under the Individuals with Disabilities Education Act (IDEA) of 2004. These services may only be provided when the care and supervision needs of a consumer exceed that of a person of the same age without developmental disabilities and will not be claimed for the cost of room and board except when provided as part of respite care furnished in a facility approved by the State that is not a private residence.

Skilled Nursing

Services listed in the plan of care which are within the scope of the State's Nurse Practice Act and are provided by a registered professional nurse, or licensed practical or vocational nurse under the supervision of a registered nurse, licensed to practice in the State. Skilled Nursing services will supplement and not supplant services available through the approved Medicaid State plan or the EPSDT benefit.

Proposed Self-Determination Program Waiver Service Definitions

Specialized Medical Equipment and Supplies

Specialized medical equipment and supplies include: (a) devices, controls, or appliances, specified in the IPP, that enable participants to increase their ability to perform activities of daily living; (b) devices, controls, or appliances that enable the participant to perceive, control, or communicate with the environment in which they live; (c) items necessary for life support or to address physical conditions along with ancillary supplies and equipment necessary to the proper functioning of such items; (d) such other durable and non-durable medical equipment and supplies not available under the State plan that is necessary to address participant functional limitations; and, (e) necessary medical supplies not available under the State plan. The repair, maintenance, installation, and training in the care and use, of these items is also included. Items reimbursed with waiver funds are in addition to any medical equipment and supplies furnished under the State plan and exclude those items that are not of direct medical or remedial benefit to the participant. All items shall meet applicable standards of manufacture, design, and installation, and must meet Underwriter's Laboratory or Federal Communications Commission codes, as applicable. Repairs to and maintenance of such equipment shall be performed by the manufacturer's authorized dealer where possible.

Specialized Therapeutic Services

Specialized Therapeutic Services are services that provide physical, behavioral/social-emotional health, and or dental health care that have been adapted to accommodate the unique complexities presented by participants. These complexities include requiring:

1. Additional time with the health care professional to allow for effective communication with patients to ensure the most effective treatment;
2. Additional time with the health care professional to establish the patient's comfort and receptivity to treatment to avoid behavioral reactions that will further complicate treatment;
3. Additional time for diagnostic efforts due to the masking effect of some developmental disabilities on health care needs;
4. Specialized expertise and experience of the health care professional in diagnosing health care needs that may be masked or complicated by a developmental disability;

Proposed Self-Determination Program Waiver Service Definitions

5. Treatment to be provided in settings that are more conducive to the patient's ability to effectively receive treatment, either in specialized offices or facilities that offer better structured interaction with the patient or which may provide additional comfort and support which is needed to reduce patient anxiety that is related to his or her developmental disabilities.

All of these additional elements to Specialized Therapeutic Services are designed and proven effective in ensuring the health and safety of the participants who are enrolled in the waiver. They are also designed or adapted with specialized expertise, experience or supports to ensure that the impact of a person's developmental disability does not impede the practitioner's ability to effectively provide treatment. The design features and/or expertise levels required by these consumers have been developed through years of experience and are not available through existing State Plan services. These features are critical to maintain, preserve, or improve the health status and developmental progress of each individual who is referred to these Specialized Therapeutic Services.

Specialized Therapeutic Services include:

1. Oral Health Services: Diagnostic, Prophylactic, Restorative, Oral Surgery
2. Services for Maladaptive Behaviors/Social-Emotional Behavior Impairments (MB/SEDI) Due to/Associated with a Developmental Disability: Individual and group interventions and counseling
3. Physical Health Services: Physical Therapy, Occupational Therapy, Speech Therapy, Respiratory Therapy, Diagnostic and Treatment, Physician Services, Nursing Services, Diabetes Self-Management

The need for a Specialized Therapeutic Service must be identified in the Individual Program Plan, also known as a Plan of Care, and is to be provided only when the individual's regional center planning team has:

1. Determined the reason why other generic or State Plan services cannot/do not meet the unique oral health, behavioral/social-emotional health, physical health needs of the consumer as a result of his/her developmental disability and the impact of the developmental disability on the delivery of therapeutic services;
2. Determined that a provider with specialized expertise/knowledge in serving individuals with developmental disabilities is needed, i.e., a provider of State Plan services does not have the appropriate qualifications to provide the service;

Proposed Self-Determination Program Waiver Service Definitions

3. Determined that the individual's needs cannot be met by a State Plan provider delivering routine State Plan services;
4. Determined that the Specialized Therapeutic Service is a necessary component of the overall IPP; and
5. Consulted with a Regional Center clinician.

The need to continue the Specialized Therapeutic Service will be evaluated during the mandatory annual review of the individual's IPP in order to determine if utilization is appropriate and progress is being made as a result of the service being provided.

Speech, Hearing and Language Services

Speech, Hearing and Language services will be provided to individuals age 21 and older and are defined and described in the approved State plan for individuals under the age of 21. The provider qualifications listed in the plan will apply, and are hereby incorporated into this waiver request by reference. Speech, Hearing and Language services will supplement and not supplant services available through the approved Medicaid State plan or the EPSDT benefit.

Technology

Technology is an item, piece of equipment, or product system, whether acquired commercially, modified, or customized, that is used to promote community integration, independence, and increase, maintain, or improve functional capabilities of participants. Allowable technology services, as specified in the participant's IPP include, but are not limited to:

1. Evaluation of technology needs of a participant, including a functional evaluation of the impact of the provision of appropriate technology and appropriate services to the participant in the customary environment of the participant;
2. Purchasing, leasing, or otherwise providing for the acquisition of any technology device; including but not limited to cell phones (monthly bill, cell phone apps), iPads, tablets, laptops, GPS affixed to clothing (safety), service includes insurance and training on the use of any technology devices.
3. Acquiring remote monitoring equipment used to operate systems such as live video feed, live audio feed, motion sensing system, radio frequency identification, web-based monitoring system, or other device approved by the department. Equipment used to engage in live two-way communication with the individual being monitored.

Proposed Self-Determination Program Waiver Service Definitions

4. Selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing technology devices;
5. Training or technical assistance for the participant, or where appropriate, their family members, guardians, advocates, or authorized representatives of the participant; and
6. Training or technical assistance for professionals or other individuals who provide services to, employ, or are otherwise substantially involved in the major life functions of participant.

Training and Counseling Services for Unpaid Caregivers

Training and counseling services for individuals who provide unpaid support, training, companionship or supervision to participants. For purposes of this service, "individual" is defined as any person, family member, neighbor, friend, companion or co-worker who provides uncompensated care, training, guidance, companionship or support to a person served on the waiver. This service may not be provided to train paid caregivers. Training includes instruction about services and supports included in the IPP, use of equipment specified in the IPP, and updates as necessary to safely maintain the participant at home. Counseling must be aimed at assisting the unpaid caregiver in meeting the needs of the participant. All training for individuals who provide unpaid support to the participant must be included in the IPP. The service includes the cost of registration and training fees associated with formal instruction in areas relevant to participant needs identified in the IPP. The costs for travel, meals and overnight lodging to attend a training event or conference are not covered under this service definition.

Transition/Set Up Expenses: Other Service

Transition/Set Up Expenses are one-time, non-recurring set-up expenses to assist individuals who are transitioning from an institution to their own home in the community. These expenses fund some of the initial set-up costs that are associated with obtaining and securing an adequate living environment and address the individual's health and safety needs when he or she enters a new living environment. "Own home" is defined as any dwelling, including a house, apartment, condominium, trailer, or other lodging that is owned, leased, or rented by the individual. This service includes necessary furnishings, household items and services that an individual needs for successful transition to community living and may include:

Proposed Self-Determination Program Waiver Service Definitions

- Security deposits that are required to obtain a lease on an apartment or home;
- Moving expenses;
- Health and safety assurances, such as pest eradication, allergen control or one-time cleaning prior to occupancy;
- Set up fees or non-refundable deposits for utilities (telephone, electricity, heating by gas);
- Essential furnishings to occupy and use a community domicile, such as a bed, table, chairs, window blinds, eating utensils, food preparation items, etc.

These services exclude:

- Items designed for diversionary/recreational/entertainment purposes, such as hobby supplies, television, cable TV access, or VCRs and DVDs.
- Room and board, monthly rental or mortgage expense, regular utility charges, household appliances, and food.

Items purchased through this service are the property of the individual receiving the service and the individual takes the property with him/her in the event of a move to another residence. Some of these expenses may be incurred before the individual transitions from an institution to the community. In such cases, the Transition/Set Up expenses incurred while the person was institutionalized are not considered complete until the date the individual leaves the institution and is enrolled in the waiver. Transition/Set Up expenses included in the individual's plan of care may be furnished up to 180 days prior to the individual's discharge from an institution. However, such expenses will not be considered complete until the date the individual leaves the institution and is enrolled in the waiver.

Transportation

Service offered in order to enable individuals served to gain access to the Self-Determination Program waiver and community services, employment, activities and resources, and participate in community life as specified by their Individual Program Plan. This service is offered in addition to medical transportation required under 42 CFR 431.53 and transportation services under the State plan, defined in 42 CFR 440.170(a) (if applicable), and shall not replace them. Transportation services under the waiver shall be offered in accordance with the individual's plan of care and shall include transportation aides and such other assistance as is necessary to assure the safe transport of the recipient. Private, specialized transportation will be provided to those individuals who cannot safely access and utilize public transportation

Proposed Self-Determination Program Waiver Service Definitions

services (when available.) Whenever possible, the use of natural supports, such as family, neighbors, friends, or community agencies which can provide this service without charge will be utilized.

Vehicle Modifications and Adaptations

Vehicle adaptations are devices, controls, or services which enable participants to increase their independence, enable them to integrate more fully into the community, and to ensure their health and safety. The repair, maintenance, installation, and training in the care and use, of these items are included. Vehicle adaptations must be performed by the adaptive equipment manufacturer's authorized dealer. Repairs to and maintenance of such equipment shall be performed by the manufacturer's authorized dealer where possible.

Vehicle adaptations include, but are not limited to, the following:

1. Door handle replacements;
2. Door widening;
3. Lifting devices;
4. Wheelchair securing devices;
5. Adapted seat devices;
6. Adapted steering, acceleration, signaling, and braking devices; and
7. Handrails and grab bars

Adaptations to vehicles shall be included if, on an individual basis, the cost effectiveness of vehicle adaptations, relative to alternative transportation services, is established. Adaptations to vehicles are limited to vehicles owned by the recipient, or the recipient's family and do not include the purchase of the vehicle itself. The recipient's family includes the recipient's biological parents, adoptive parents, stepparents, siblings, children, spouse, domestic partner (in those jurisdictions in which domestic partners are legally recognized), or a person who is legal representative of the recipient. Vehicle adaptations will only be provided when they are documented in the individual plan of care and when there is a written assessment by a licensed Physical Therapist or a registered Occupational Therapist.

SELF-DETERMINATION STATUTE

WIC 4685.8**DIVISION 4.5. SERVICES FOR THE DEVELOPMENTALLY DISABLED [4500 - 4884]****CHAPTER 6. Development and Support of Community Facilities and Programs [4670 - 4698.1]****Article 4. Services and Supports for Persons Living in the Community [4685 – 4689.8]**

(a) The department shall implement a statewide Self-Determination Program. The Self-Determination Program shall be available in every regional center catchment area to provide participants and their families, within an individual budget, increased flexibility and choice, and greater control over decisions, resources, and needed and desired services and supports to implement their IPP. The statewide Self-Determination Program shall be phased in over three years, and during this phase-in period, shall serve up to 2,500 regional center consumers, inclusive of the remaining participants in the self-determination pilot projects authorized pursuant to Section 13 of Chapter 1043 of the Statutes of 1998, as amended, and Article 4 (commencing with Section 4669.2) of Chapter 5. Following the phase-in period, the program shall be available on a voluntary basis to all regional center consumers, including residents in developmental centers who are moving to the community, who are eligible for the Self-Determination Program. The program shall be available to individuals who reflect the disability, ethnic, and geographic diversity of the state. The Department of Finance may approve, upon a request from the department and no sooner than 30 days following notification to the Joint Legislative Budget Committee, an increase to the number of consumers served by the Self-Determination Program before the end of the three-year phase-in period.

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

(1) For the first three years of the Self-Determination Program, determine, as part of the contracting process described in Sections 4620 and 4629, the number of participants each regional center shall serve in its Self-Determination Program. To ensure that the program is available on an equitable basis to participants in all regional center catchment areas, the number of Self-Determination Program participants in each regional center shall be based on the relative percentage of total consumers served by the regional centers minus any remaining participants in the self-determination pilot projects authorized pursuant to Section 13 of Chapter 1043 of the Statutes of 1998, as amended, and Article 4 (commencing with Section 4669.2) of Chapter 5 or another equitable basis.

(2) Ensure all of the following:

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

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

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

SELF-DETERMINATION STATUTE

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

(E) Choice of independent facilitators who can assist with the person-centered planning process and choice of financial management services providers vendored by regional centers who can assist with payments and provide employee-related services.

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

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

(1) "Financial management services" means services or functions that assist the participant to manage and direct the distribution of funds contained in the individual budget, and ensure that the participant has the financial resources to implement his or her IPP throughout the year. These may include bill paying services and activities that facilitate the employment of service and support workers by the participant, including, but not limited to, fiscal accounting, tax withholding, compliance with relevant state and federal employment laws, assisting the participant in verifying provider qualifications, including criminal background checks, and expenditure reports. The financial management services provider shall meet the requirements of Sections 58884, 58886, and 58887 of Title 17 of the California Code of Regulations and other specific qualifications established by the department. The costs of financial management services shall be paid by the participant out of his or her individual budget, except for the cost of obtaining the criminal background check specified in subdivision (w).

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

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

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

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

(6) "Self-determination" means a voluntary delivery system consisting of a defined and comprehensive mix of services and supports, selected and directed by a participant through person-centered planning,

SELF-DETERMINATION STATUTE

in order to meet the objectives in his or her IPP. Self-determination services and supports are designed to assist the participant to achieve personally defined outcomes in community settings that promote inclusion. The Self-Determination Program shall only fund services and supports provided pursuant to this division that the federal Centers for Medicare and Medicaid Services determines are eligible for federal financial participation.

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

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

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

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

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

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

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

(D) The participant shall manage Self-Determination Program services and supports within his or her individual budget.

(E) The participant shall utilize the services of a financial management services provider of his or her own choosing and who is vended by a regional center.

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

SELF-DETERMINATION STATUTE

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

(f) An individual receiving services and supports under a self-determination pilot project authorized pursuant to Section 13 of Chapter 1043 of the Statutes of 1998, as amended, or pursuant to Article 4 (commencing with Section 4669.2) of Chapter 5, may elect to continue to receive self-determination services and supports pursuant to this section or the regional center shall provide for the participant's transition from the self-determination pilot program to other services and supports. This transition shall include the development of a new IPP that reflects the services and supports necessary to meet the individual's needs. The regional center shall ensure that there is no gap in services and supports during the transition period.

(g) The additional federal financial participation funds generated by the former participants of the self-determination pilot projects authorized pursuant to Section 13 of Chapter 1043 of the Statutes of 1998, as amended, or pursuant to Article 4 (commencing with Section 4669.2) of Chapter 5, shall be used as follows:

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

(2) With the remaining funds, to offset the costs to the regional centers in implementing the Self-Determination Program, including, but not limited to, operations costs for caseload ratio enhancement, training for regional center staff, costs associated with the participant's initial person-centered planning meeting, the development of the participant's initial individual budget, and the costs associated with training consumers and family members.

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

(i) An individual determined to be ineligible for or who voluntarily exits the Self-Determination Program shall be permitted to return to the Self-Determination Program upon meeting all applicable eligibility criteria and upon approval of the participant's planning team, as described in subdivision (j) of Section 4512. An individual who has voluntarily exited the Self-Determination Program shall not return to the program for at least 12 months. During the first three years of the program, the individual's right to return to the program is conditioned on his or her regional center not having reached the participant cap imposed by paragraph (1) of subdivision (b).

(j) An individual who participates in the Self-Determination Program may elect to continue to receive self-determination services and supports if he or she transfers to another regional center catchment area, provided that he or she remains eligible for the Self-Determination Program pursuant to

SELF-DETERMINATION STATUTE

subdivision (d). The balance of the participant's individual budget shall be reallocated to the regional center to which he or she transfers.

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

(l) The participant shall implement his or her IPP, including choosing and purchasing the services and supports allowable under this section necessary to implement the plan. A participant is exempt from the cost control restrictions regarding the purchases of services and supports pursuant to Sections 4648.5 and 4686.5. A regional center shall not prohibit the purchase of any service or support that is otherwise allowable under this section.

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

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

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

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

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

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

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

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

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

(ii) The regional center shall calculate the cost of providing the services and supports to be purchased by the regional center by using the average cost paid by the regional center for each service or support unless the regional center determines that the consumer has a unique need that requires a higher or lower cost. The regional center shall certify on the individual budget document that this amount would

SELF-DETERMINATION STATUTE

have been expended using regional center purchase of service funds regardless of the individual's participation in the Self-Determination Program.

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

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

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

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

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

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

(q) (1) On or before December 31, 2014, the department shall apply for federal Medicaid funding for the Self-Determination Program by doing one or more of the following:

(A) Applying for a state plan amendment.

(B) Applying for an amendment to a current home- and community-based waiver for individuals with developmental disabilities.

(C) Applying for a new waiver.

(D) Seeking to maximize federal financial participation through other means.

(2) To the extent feasible, the state plan amendment, waiver, or other federal request described in paragraph (1) shall incorporate the eligibility requirements, benefits, and operational requirements set forth in this section. Except for the provisions of subdivisions (k), (m), (p), and this subdivision, the department may modify eligibility requirements, benefits, and operational requirements as needed to secure approval of federal funding.

SELF-DETERMINATION STATUTE

(3) Contingent upon approval of federal funding, the Self-Determination Program shall be established.

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

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

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

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

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

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

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

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

SELF-DETERMINATION STATUTE

forth in Title 17 of the California Code of Regulations when serving participants in the Self-Determination Program.

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

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

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

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

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

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

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

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

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

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

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

(9) If the criminal record information report shows a criminal history, the department shall take the steps specified in Section 4689.2. The department may prohibit a provider of services and supports from

SELF-DETERMINATION STATUTE

becoming employed, or continuing to be employed, based on the criminal background check, as authorized in Section 4689.6. The provider of services and supports who has been denied employment shall have the rights set forth in Section 4689.6.

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

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

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

(1) Each regional center shall establish a local volunteer advisory committee to provide oversight of the Self-Determination Program. The regional center and the State Council on Developmental Disabilities shall each appoint one-half of the membership of the committee. The committee shall consist of the regional center clients' rights advocate, consumers, family members, and other advocates, and community leaders. A majority of the committee shall be consumers and their family members. The committee shall reflect the multicultural diversity and geographic profile of the catchment area. The committee shall review the development and ongoing progress of the Self-Determination Program, including whether the program advances the principles of self-determination and is operating consistent with the requirements of this section, and may make ongoing recommendations for improvement to the regional center and the department.

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

(y) Commencing January 10, 2017, the department shall annually provide the following information to the appropriate policy and fiscal committees of the Legislature:

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

SELF-DETERMINATION STATUTE

- (2) Types and amount of services and supports purchased under the Self-Determination Program, by regional center.
- (3) Range and average of individual budgets, by regional center, including adjustments to the budget to address the adjustments permitted in clause (ii) of subparagraph (A) of paragraph (1) of subdivision (n).
- (4) The number and outcome of appeals concerning individual budgets, by regional center.
- (5) The number and outcome of fair hearing appeals, by regional center.
- (6) The number of participants who voluntarily withdraw from the Self-Determination Program and a summary of the reasons why, by regional center.
- (7) The number of participants who are subsequently determined to no longer be eligible for the Self-Determination Program and a summary of the reasons why, by regional center.
- (z) (1) The State Council on Developmental Disabilities, in collaboration with the protection and advocacy agency identified in Section 4900 and the federally funded University Centers for Excellence in Developmental Disabilities Education, Research, and Service, may work with regional centers to survey participants regarding participant satisfaction under the Self-Determination Program and, when data is available, the traditional service delivery system, including the proportion of participants who report that their choices and decisions are respected and supported and who report that they are able to recruit and hire qualified service providers, and to identify barriers to participation and recommendations for improvement.
- (2) The council, in collaboration with the protection and advocacy agency identified in Section 4900 and the federally funded University Centers for Excellence in Developmental Disabilities Education, Research, and Service, shall issue a report to the Legislature, in compliance with Section 9795 of the Government Code, no later than three years following the approval of the federal funding on the status of the Self-Determination Program authorized by this section, and provide recommendations to enhance the effectiveness of the program. This review shall include the program's effectiveness in furthering the principles of self-determination, including all of the following:
- (A) Freedom, which includes the ability of adults with developmental disabilities to exercise the same rights as all citizens to establish, with freely chosen supporters, family and friends, where they want to live, with whom they want to live, how their time will be occupied, and who supports them; and for families to have the freedom to receive unbiased assistance of their own choosing when developing a plan and to select all personnel and supports to further the life goals of a minor child.
- (B) Authority, which includes the ability of a person with a disability, or family, to control a certain sum of dollars in order to purchase services and supports of their choosing.
- (C) Support, which includes the ability to arrange resources and personnel, both formal and informal, that will assist a person with a disability to live a life in his or her community that is rich in community participation and contributions.
- (D) Responsibility, which includes the ability of participants to take responsibility for decisions in their own lives and to be accountable for the use of public dollars, and to accept a valued role in their

SELF-DETERMINATION STATUTE

community through, for example, competitive employment, organizational affiliations, spiritual development, and general caring of others in their community.

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

The California Department of Developmental Services (DDS) – DDS is the agency through which the State of California provides services and supports to individuals with developmental disabilities. For more information on the Self-Determination Program, please go to: <http://www.dds.ca.gov/SDP/index.cfm>

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1600 9th Street
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Sacramento, CA 94244-2020
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STATE COUNCIL ON DEVELOPMENTAL DISABILITIES (SCDD) – As an independent state agency led by 31 members appointed by the Governor, the SCDD reflects the geographic and ethnic diversity of California. The SCDD promotes independent and productive lives by influencing public policy in areas such as education, employment, housing, inclusion and self-determination.

State Council on Developmental Disabilities
1507 21st Street, Ste. 210, Sacramento, CA 95811
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www.scdd.ca.gov / council@scdd.ca.gov

- **STATEWIDE SELF-DETERMINATION ADVISORY COMMITTEE (SSDAC)** – Formed by the SCDD, the SSDAC is a volunteer committee comprised of the chairs of the 21 local advisory committees or their designees. The SSDAC meets twice annually, or more frequently in the sole discretion of the council. The SSDAC meets to identify self-determination best practices, effective consumer and family training materials, implementation concerns, systemic issues, ways to enhance the program, and recommendations regarding the most effective method for participants to learn of individuals who are available to provide services and supports. More information can be found here: <https://scdd.ca.gov/ssdac/>
- **LOCAL VOLUNTEER ADVISORY COMMITTEES** – Each regional center established a local volunteer advisory committee to conduct outreach through local meetings or forums to consumers and their families to provide information about the Self-Determination Program and to help ensure that the program is available to a diverse group of participants, with special outreach to underserved communities. More information can be found here: <https://scdd.ca.gov/ssdac/local-self-determination-advisory-committees/>
- **Links to each Local Volunteer Advisory Committee:**
 1. [Alta California Regional Center \(ACRC\)- https://www.altaregional.org/alta-sponsored-event/self-determination-advisory-committee-meeting](https://www.altaregional.org/alta-sponsored-event/self-determination-advisory-committee-meeting)
 2. [Central Valley Regional Center \(CVRC\)- https://www.cvrc.org/self-determination-program/](https://www.cvrc.org/self-determination-program/)
 3. [Eastern Los Angeles Regional Center \(ELARC\)- http://www.elarc.org/consumers-families/self-determination/self-determination-local-advisory-committee](http://www.elarc.org/consumers-families/self-determination/self-determination-local-advisory-committee)
 4. [Far Northern Regional Center \(FNRC\)- http://www.farnorthernrc.org/self-determination/](http://www.farnorthernrc.org/self-determination/)
 5. [Frank D. Lanterman Regional Center \(FDLRC\)- https://lanterman.org/self-determination#.WaCbH-Truzn](https://lanterman.org/self-determination#.WaCbH-Truzn)
 6. [Golden Gate Regional Center \(GGRC\)- http://www.ggrc.org/services/self-determination](http://www.ggrc.org/services/self-determination)
 7. [Harbor Regional Center \(HRC\)- http://www.harborrc.org/services/sdp](http://www.harborrc.org/services/sdp)
 8. [Inland Regional Center \(IRC\)- https://www.inlandrc.org/index.php?s=self-determination](https://www.inlandrc.org/index.php?s=self-determination)

FOR MORE INFORMATION...

9. [Kern Regional Center \(KRC\)- http://www.kernrc.org/self-determination-advisory-committ](http://www.kernrc.org/self-determination-advisory-committ)
10. [North Los Angeles County Regional Center \(NLACRC\)-
http://www.nlacrc.org/index.aspx?page=212](http://www.nlacrc.org/index.aspx?page=212)
11. [North Bay Regional Center \(NBRC\)- http://nbrc.net/client-services/self-determination/](http://nbrc.net/client-services/self-determination/)
12. [Regional Center of the East Bay \(RCEB\)- https://www.rceb.org/self-determination](https://www.rceb.org/self-determination)
13. [Regional Center of Orange County \(RCOC\)- http://www.rcocdd.com/services-provided-by-regional-center-of-orange-county/rcoc-self-determination-program-local-advisory-committee/](http://www.rcocdd.com/services-provided-by-regional-center-of-orange-county/rcoc-self-determination-program-local-advisory-committee/)
14. [Redwood Coast Regional Center \(RCRC\)-
http://redwoodcoastrc.org/redwoodcoastrc.org/transparency/self-determination-local-advisory-committee](http://redwoodcoastrc.org/redwoodcoastrc.org/transparency/self-determination-local-advisory-committee)
15. [San Andreas Regional Center \(SARC\)- http://www.sanandreasregional.org/self-determination-program/](http://www.sanandreasregional.org/self-determination-program/)
16. [San Diego Regional Center \(SDRC\)- http://sdrc.org/?page_id=9248](http://sdrc.org/?page_id=9248)
17. [South Central Los Angeles Regional Center \(SCLARC\)- https://sclarc.org/sd-lac.php](https://sclarc.org/sd-lac.php)
18. [San Gabriel Pomona Regional Center \(SGPRC\)- http://38.106.4.145/clients-families/self-determination-program/self-determination-meetings-and-trainings](http://38.106.4.145/clients-families/self-determination-program/self-determination-meetings-and-trainings)
19. [Tri-Counties Regional Center \(TCRC\)- http://www.tri-counties.org/index.php/news/hot-topics/782-self-determination-program-sb-468](http://www.tri-counties.org/index.php/news/hot-topics/782-self-determination-program-sb-468)
20. [Valley Mountain Regional Center \(VMRC\)- https://www.vmrc.net/](https://www.vmrc.net/)
21. [Westside Regional Center \(WRC\)- http://www.westsiderc.org/resources/self-determination/](http://www.westsiderc.org/resources/self-determination/)