



**LPPC COMMITTEE  
MEETING NOTICE/AGENDA**

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<b>PARTICIPANT CODE:</b>	<b>8610332</b>

**DATE:** Thursday, April 23, 2015  
**TIME:** 10:00 a.m. – 3:00 p.m.  
**LOCATION:** State Council on Developmental Disabilities  
1507 21<sup>st</sup> Street, Suite #210  
(916) 322-8481

**TELECONFERENCE SITE**

**Silicon Valley-Monterey**  
2580 North First Street, Suite 240  
San Jose, CA 95131  
(408) 324-2106

*Pursuant to Government Code Sections 11123.1 and 11125(f), individuals with disabilities who require accessible alternative formats of the agenda and related meeting materials and/or auxiliary aids/services to participate in the meeting, should contact Michael Brett at (916) 322-8481 or [michael.brett@scdd.ca.gov](mailto:michael.brett@scdd.ca.gov) by 5:00 pm, April 16, 2015*

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|---------------------------------|-----------------|
| <b>1. CALL TO ORDER</b>         | <b>J. LEWIS</b> |
| <b>2. ESTABLISH QUORUM</b>      | <b>J. LEWIS</b> |
| <b>3. WELCOME/INTRODUCTIONS</b> | <b>J. LEWIS</b> |

For additional information regarding this agenda, please contact Michael Brett, 1507 21<sup>st</sup> Street, Ste. 210, Sacramento, CA 95811, (916) 322-8481. Documents for an agenda item should be turned into SCDD no later than 12:00 p.m. the day before the meeting to give members time to review the material. The fax number is (916) 443-4957.

**4. PUBLIC COMMENTS**

**J. LEWIS**

*This item is for members of the public only to provide comments and/or present information to the Council on matters **not** on the agenda. Each person will be afforded up to three minutes to speak. Written requests, if any, will be considered first.*

**5. APPROVAL of February 23, 2015**

**MEETING MINUTES**

**J. LEWIS**

**5**

**7. OLD BUSINESS**

A) Update on possible meet and greet at Capitol

A. Lopez

B) Discussion about LPPC meeting schedule

J. Lewis

C) Self-Determination Update

C. Lapin

**8. NEW BUSINESS**

A) DRC Presentation

A. Mudryk

**13**

B) Discussion of RAC recommendations

J. Lewis

C) SB 128 Discussion

J. Lewis/B.Giovati/N.Nieblas

D) Detail Sheets/ Bill Review/ Recommendations

B.Giovati/N. Neiblas

**19**

**9. ADJOURNMENT**

*For additional information regarding this agenda, please contact Michael Brett, 1507 21<sup>st</sup> Street, Suite 210, Sacramento, CA 95811, (916) 322-8481*

**Item 5**  
**APPROVAL OF FEB 2015**  
**MINUTES**



**Legislative and public Policy Committee (LPPC) Meeting Minutes**

**February 23, 2015**

**Members Present**

Janelle Lewis  
April Lopez (FA)  
David Forderer (SA)  
Jennifer Allen (SA)  
Tho Vinh Banh

**Members Absent**

Feda Almaliti (FA)  
Lisa Davidson  
Connie Lapin (FA)

**Others Attending**

Mike Clark  
Natalie Bocanegra  
Bob Giovati  
Nelly Nieblas  
Karim Alipourfard  
Michael Brett  
Vicki Smith  
Monica Van  
Zimmerman  
Joyce McNair  
Elizabeth Drake  
Anna Roio  
Anastasia Bacigalupo

**1. CALL TO ORDER**

Chairperson Janelle Lewis called the meeting to order at 10:04 a.m.

**2. ESTABLISHMENT OF QUORUM**

A quorum was established.

**3. WELCOME AND INTRODUCTIONS**

Chairperson Lewis started introductions.

**4. MEMBER REPORTS**

- Chairperson Janelle Lewis reported that she would be attending the Medi-Cal Managed Care workshop sponsored by SCDD in Placer County.
- David Forderer (SA) reported that he had recently met with Senator Beards.
- April Lopez (FA), and Tho Vinh Banh also gave reports.

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Legend

SA = Self-Advocate  
FA = Family Advocate

- Jennifer Allen had no report.

## 5. APPROVAL OF January 15, 2015 MINUTES

It was moved/seconded ( ), (Forderer (SA) and carried to approve the January 15, 2015 LPPC minutes with the following corrections:

- Wayne Glusker needs to be added to "Others Attending."
- Top of Pg. 2 "Tho Vinh is working on a voting project for individuals who are ~~conserved~~ to let them know about their voting rights."
- Middle of Pg. 3 "Families for Early Autism Treatment (FEAT Sacramento) offers free monthly Family Resource Meetings. Recent meetings at Shriners Hospital Auditorium:
  - December - Assistive Technology
  - January - ABCs of Compliance Complaints
  - February - Feeding Disorders
- Change "thru" to "through" top of Pg. 4 (and a few other places in document)
- Top of Pg. 5 Change "program" to "programs throughout California..."  
Middle of Pg. 5 Change "weeks" to "months."
- Top of Pg. 6 Change "CHCS" to "DHCS."
  - Top of Pg. 8 Change "IHHS" to "IHSS" in a couple of places.  
Middle of Pg. 8 "implementation of SB 1093 to Ms. Tho Vinh Banh *and LPPC.*"

## 6. PUBLIC COMMENTS

No public comments.

## 7. OLD BUSINESS

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### Legend

SA = Self-Advocate

FA = Family Advocate

## a. Federal and State Legislation Updates

### Federal Bills to Watch:

ABLE Act

ESEA Reauthorization Bill.

### State Bills to Watch:

SB 128, the so-called Right to Die bill.

AB 52

AB 54

AB 74

AB 97

AB 187

AB 190

SB 11

SB 57

SB 67

## b. Budget

Currently, the Budget Sub-committees are meeting.

## c. IHSS and CMS Updates

Since the last LPPC Meeting, January 15, 2015, there have been no major changes to the IHSS Update. The committee agreed this should remain on the agenda as an ongoing item for future meetings.

Staff mentioned that committee handouts need to be approved by SCDD Leadership and posted to the SCDD Website.

Anastasia Bacigalupo, Regional Manager from the Central Coast Office, to give a CMS Update. Chairperson Lewis stated this is an on-going

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### Legend

SA = Self-Advocate

FA = Family Advocate

issue and needs to remain on the agenda for future committee discussions.

**d. SB1093 Disparity Chart from the Regional Offices**

This was discussed during the January 15, 2015 meeting related to improving the Stakeholder process. Mrs. Banh went over related handouts which are on the SCDD Website. She suggested the POS Disparity Meeting Questions handout could be used for the Regional Offices for their regional stakeholder meetings.

**NEW BUSINESS**

**a. Organization of the Meet and Greet with Legislature and Staff at the Capitol**

April Lopez, Council Chair and member of the LPPC Committee offered to contact Senator Kevin de Leon and attempt to arrange a meeting. She will report back to staff regarding progress.

**Organization of New Member Orientation on meaning of State Council**

This would be an overview of the duties and services of SCDD. Staff recommends the following SCDD staff and Council members be in attendance: Mike Clark, Aaron Carruthers, Benita Baines, April Lopez, Janelle Lewis, and other individuals as required.

**b. What is the role of the State Plan as guide for adopting legislative positions?**

Chairperson Lewis mentioned that the LPPC needs to know what actions it can and cannot take without having Council approval.

It was suggested the SCDD legislative platform and the State Plan could be used as a guide in deciding what legislative positions are recommended by the LPPC to the full Council. Furthermore, it was asked if the LPPC could potentially take positions on specific bills

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Legend

SA = Self-Advocate

FA = Family Advocate

without receiving full Council approval if said bills fell within the guidelines of the legislative platform and State Plan. Chairperson Lewis asked staff to examine previous meeting minutes from the LPPC, Executive Committee, and full Council to see if a formal position was adopted on this issue in the past.

**c. What is the role of the staff with regards to legislative advocacy?**

Staff stated there was much productive, ongoing legislative work that can and will be done that does not require formal Council approval.

**DRC: Support Federal Initiatives that Strengthen Mental Health**

Mrs. Banh briefed the committee on this issue which is dealing with the Murphy Bill.

It was moved/seconded (Lopez (FA)), (Allen (SA) and carried to find out where the NACDD position is. And if they support, the committee requests the Council to take position of support.

(All in favor with no abstentions. Following members took a vote on this motion: Lewis, Lopez (FA), Allen (SA), Forderer (SA), and Banh).

Chairperson Lewis asked if the committee can send group emails amongst the other committee members. Natalie Bocanegra, Legal Council to the SCDD joined the meeting at that point. She gave an overview on Bagley Keene issue and concerns.

**d. DRC: CA Departments Agree to Transform Employment services to People with intellectual and DD**

Ms. Banh gave a briefing on this item.

**THREE POLICY PRIORITY AREAS**

Vickie Smith, Regional Manager from the SCDD San Bernardino Office completed the Strategic Plan for 2015 as determined by the LPPC.

It was moved/seconded (Forderer (SA)), (Lopez (SA) and carried .

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**Legend**

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(All in favor with no abstentions. Following members took a vote on this motion: Lewis, Lopez (FA), Allen (SA), Forderer (SA), and Banh).

## **8. ADJOURNMENT**

Meeting adjourned at 3:46 p.m.

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Legend

SA = Self-Advocate

FA = Family Advocate

## FOR IMMEDIATE RELEASE

January 26, 2015

Contact: Andrew Mudryk, Deputy Director  
Disability Rights California  
(916) 504-5800  
[Andrew.mudryk@disabilityrightsca.org](mailto:Andrew.mudryk@disabilityrightsca.org)

### **California departments agree to transform employment services to people with intellectual and developmental disabilities**

Sacramento, January 26, 2015 -- The California Department of Rehabilitation (DOR), Department of Developmental Services (DDS), and Department of Education (CDE), in collaboration with Disability Rights California (DRC), recently took an historic step as one of a handful of states to transform its provision of employment services to people with intellectual and developmental disabilities. Currently, under certain circumstances, employers can pay people with disabilities less than minimum wage based on their productivity. This practice is most often applied to people with intellectual and developmental disabilities, who are in "sheltered workshops" where they do not work alongside people without disabilities.

There is a national movement to prepare people with disabilities to work in integrated settings earning a livable wage, sometimes referred to as "competitive integrated employment" (CIE). DOR, DDS, and CDE have agreed to develop a plan or "blueprint" to make CIE a reality in California.

People with intellectual and developmental disabilities, like Charles McCarron—a 45 year-old man who wanted to work in the food service industry from the time he was a teenager—can work in the community earning above minimum wage. Although Charles graduated from his high school special education program, he was unable to get a job in the community. Instead, he worked in a sheltered workshop earning about \$.33 per hour. Years later, with appropriate job development and coaching services, Charles now works at Farrell's Ice Cream Parlor, earning \$10 per hour.

DOR, DDS, and CDE, with the involvement of Disability Rights California, will develop a blueprint over a six month period to guide California. The blueprint will contain:

1. A directive from each department to employees and partners that employment in integrated, competitive settings is preferred for individuals with intellectual and developmental disabilities;
2. Establishment of measurable goals and benchmarks including timelines for performance outcomes and a process for reviewing the outcomes, to be completed within five years;
3. Delineation of state and local agency roles and responsibilities in planning,

services, coordination, and dispute resolution between departments;

4. Development of requirements for annually informing individuals and their families about opportunities and supports for integrated, competitive employment;
5. Development of specific recommendations for policy and regulatory change, and stakeholders' recommendations for statutory changes;
6. Creation of an informal resolution process for disputes among the departments regarding the implementation of the blueprint at the state and local levels.

"We applaud the state departments for demonstrating leadership on this issue to make CIE a reality in California," said Andrew Mudryk, DRC's Deputy Director.

Throughout the process, DOR, DDS, and CDE will update the community on its progress in developing the blueprint and will invite input from stakeholders.

Check our website ([www.disabilityrightsca.org](http://www.disabilityrightsca.org)) and [Facebook](#) and [Twitter](#) for additional developments.

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Item 8d  
DETAIL SHEETS/BILL  
REVIEW  
RECOMMENDATIONS

RESEARCH REPORT  
REVIEW  
RESEARCH REPORT

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Many recent news reports have highlighted the lack of frequent inspections facilities across California and the dangers faced by children and elders. Seniors have suffered broken bones, deadly bed sores, sexual assaults and other injuries in assisted living facilities. Children have been victims of neglect, endangerment, unkempt conditions, and injuries

**SUMMARY:** California licensing programs perform the essential function of protecting the basic health and safety of children and adults in care facilities. Budget cuts over the past few years and compliance procedures have resulted in a program that provides inadequate oversight and monitoring of community care facilities.

**BACKGROUND/ISSUES/ANALYSIS:** Prior to 2003, the required frequency of community care facility visits was annually for most facility types (and tri-annually for family child care). Currently, five years or more may elapse between site visits from the licensing program which is hardly frequent enough to ensure minimum safety in an industry with high staff turnover.

AB 74 will implement unannounced annual inspections of all community care facilities by July 1, 2018. By July 1, 2016 DSS will inspect facilities no less often than once every 3 years with a 30% random sample to be subject to an annual inspection. July 1, 2017 DSS will inspect facilities no less often than once every 2 years

**RECOMMENDATION:** Support AB 74 (Calderon)

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal #4 Public safety agencies, other first responders and the justice system get information and assistance to be knowledgeable and aware of the needs of individuals with developmental disabilities so they can respond appropriately when individuals with developmental disabilities may have experienced abuse, neglect, sexual or financial exploitation or violation of legal or human rights.

**ATTACHMENTS:** None.

**PREPARED:** Karim Alipoufard





**AB 74 – COMMUNITY CARE FACILITIES: ANNUAL UNANNOUNCED VISITS**

**BACKGROUND**

California's licensing program performs the essential function of protecting the basic health and safety of children and adults in care. Budget cuts over the past few years and compliance procedures have resulted in a program that provides inadequate oversight and monitoring of community care facilities, which include family child care homes and child care centers, children's residential facilities, such as foster homes, assisted living facilities, and other special agencies.

Prior to 2003, the required frequency of CCLD facility visits was annually for most facility types (and tri-annually for family child care). Currently, five years or more may elapse between site visits from the licensing program, which is hardly frequent enough to ensure minimum safety in an industry with high staff turnover.

Inspections are completed using key indicator inspection protocol that includes a complete walk-through of the facility and a focus on previously identified key health and safety risk indicators to predict the overall propensity for compliance. If a community is found to be out of compliance with key indicators, a comprehensive inspection is initiated. The key indicator inspection protocol is used in other states across the country and is supported by research done nationwide.

Many recent news reports have highlighted the lack of frequent inspections in facilities across California and the dangers faced by children and elders. Seniors have suffered broken bones, deadly bed sores, sexual assaults and other injuries in assisted living facilities. Children have been victims of neglect, endangerment, unkempt conditions, and injuries. Of course, these are the most severe compliance issues; some facilities may have minor compliance issues but many, if not most, of these issues could be solved by having inspectors in facilities at least once a year.

Increasing the frequency of licensing visits will demonstrate that California is serious about addressing the deficiency in our inspection process and put California on par with the inspection procedures of other states.

**EXISTING LAW**

The California Community Care Facilities Act provides for the licensure and regulation of community care facilities by the State Department of Social Services.

Existing law requires, except as otherwise specified, that every licensed community care facility be subject to unannounced visits by the department and require the department to visit the facilities as often as necessary to ensure the quality of care provided, but less often than once every 5 years.

**SOLUTION**

AB 74 will implement a phased in plan to require DSS to conduct annual unannounced inspections of community care facilities by July 1, 2013. By July 1, 2016 DSS will inspect facilities no less often than once every 3 years with a 30% random sample to be subject to an annual inspection. By July 1, 2017 DSS will inspect facilities no less often than once every 2 years with a 20% random sample. Annual unannounced visits are fundamental in protecting the health and safety of children and adults receiving care through facility or home-based care.

**SUPPORT**

- California Communities United Institute
- California Assisted Living Association
- California Commission on Aging
- California Child Care Resources & Referral Network
- Leading Age California
- Child Development Resources
- Solano Family & Children's Services
- Child Care Alliance Los Angeles
- Community Action Partnership of Madera County
- Del Norte Child Care Council
- Child Care Alliance Los Angeles
- Community Resources for Children
- Special Needs Network Inc.
- First 5 Santa Clara County
- AFSCME
- Early Edge California

**STATUS**

Referred to Assembly Committee on Human Services and the Assembly Committee on Aging and Long Term Care

**FOR MORE INFORMATION**

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** The ABLE Act allows Californians with disabilities to access federally recognized Achieving a Better Life Experience (ABLE) savings accounts to save for future disability related expenses

**SUMMARY:** AB 449 recognizes the extra and significant costs of living with a disability. These include costs related to raising a child with significant disabilities or a working age adult with disabilities, for accessible housing and transportation, personal assistance services, assistive technology and health care not covered by insurance, Medicaid or Medicare.

### BACKGROUND/ISSUES/ANALYSIS

Eligible individuals and families will be allowed to establish ABLE savings accounts that will not affect their eligibility for SSI, Medicaid and other public benefits. The legislation explains further that an ABLE account will, with private savings, "secure funding for disability-related expenses on behalf of designated beneficiaries with disabilities that will supplement, but not supplant, benefits provided through private insurance, Medicaid, SSI, the beneficiary's employment and other sources." However, pursuant to federal law once an ABLE account reaches \$100,000, SSI benefits are suspended until the balance goes below that amount.

In order for Californians to benefit from the passage of the federal law, California must take action to create a state run program to be able to offer 529A ABLE accounts, which include tax-deferred savings under Section 529 of the Internal Revenue Code, which provides the framework for what is commonly referred to as the 529 Education Savings

**RECOMMENDATION:** Support AB 449 (Irwin).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 1: Individuals with developmental disabilities have the information, skills, opportunities and support to advocate for their rights and services and to achieve self-determination, independence, productivity, integration and inclusion in all facets of community life.

**ATTACHMENTS:** None.

**PREPARED:** Karim Alipourfard



## Assembly Bill 449 (Irwin) California Achieving a Better Life Experience (ABLE) Act

### SUMMARY

AB 449 allows Californians with disabilities to access federally recognized Achieving a Better Life Experience (ABLE) savings accounts to save for future disability related expenses.

### BACKGROUND

In December 2014 President Obama signed into law the Federal Achieving a Better Life Experience (ABLE) Act with widespread bipartisan support. The Federal ABLE Act amended the Internal Revenue Code to create Section 529A accounts. 529A accounts, also known as ABLE accounts, are similar to 529 college savings accounts in that taxed money deposited into the account accrues interest tax free. Although the federal legislation authorizes the federal tax benefits associated with ABLE accounts effective January 1, 2015, such accounts can only be accessed through a state-administered program authorized under state legislation.

Federal law delineates several differences between 529 and 529A ABLE accounts. 529 college savings accounts have no residency limits and no limit as to how many accounts an individual beneficiary may have, effectively allowing an unlimited amount of money to be contributed to 529 college savings accounts. In contrast, 529A ABLE accounts are subject to residency limits, requiring that an account can only be opened in the state that the beneficiary with disabilities resides. Only one ABLE account per beneficiary is permitted. The annual account contribution limit for 529 and 529A accounts is equal to the annual gift tax exclusion (currently \$14,000/year). The maximum individual account balance is the same for both 529 and 529A accounts and is currently \$371,000.

ABLE accounts can be used to pay for costs related to: education, housing, transportation, employment training and support, assistive technology, personal support services, health care expenses, financial management and administrative services, and other

Last Updated 23-Mar-15

expenses which will be further described in regulations to be developed in 2015 by the Federal Treasury Department.

### NEED FOR THE BILL

In California many people with disabilities and their families depend on a variety of public benefits for income, health care, food and housing assistance provided by the state and federal government. There are strict eligibility requirements for public benefits, such as Supplemental Security Income/State Supplementary Payment (SSI/SSP), CalFresh and Medi-Cal, which often don't allow an individual to have more than \$2,000 in savings. To remain eligible for these public benefits, an individual cannot save for the future

The ABLE Act recognizes the extra and significant costs of living with a disability. These include costs related to raising a child with significant disabilities or a working age adult with disabilities, for accessible housing and transportation, personal assistance services, assistive technology and health care not covered by insurance, Medicaid or Medicare.

Eligible individuals and families will be allowed to establish ABLE savings accounts that will not affect the eligibility for SSI, Medicaid and other public benefits. The legislation explains further that an ABLE account will, with private savings, "secure funding for disability-related expenses on behalf of designated beneficiaries with disabilities that will supplement, but not supplant benefits provided through private insurance, Medicaid SSI, the beneficiary's employment and other sources." However, pursuant to federal law once an ABLE account reaches \$100,000 SSI benefits are suspended until the balance goes below that amount.

In order for Californians to benefit from the passage of the federal law, California must take action to create a state run program to be able to offer 529A ABLE Accounts.



## Assembly Bill 449 (Irwin) California Achieving a Better Life Experience (ABLE) Act

### SOLUTION

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AB 449 will provide people with disabilities and families raising a child with disabilities an opportunity to save money without being penalized with loss of public social services.

Specifically, the bill will give eligible Californians with disabilities access to federally recognized 529A ABLE accounts. Eligibility is federally defined as entitlement to benefits based on blindness or disability under the Federal Social Security Act that occurred before the date on which the individual reached 26 years of age. The California ABLE program will be administered by the State Treasurer, who also administers 529 college savings accounts.

### SUPPORT

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The Arc of Ventura County  
The Arc and United Cerebral Palsy California  
Collaboration  
Autism Speaks  
Center for Autism Related Disorders  
Club 21 Learning and Resource Center  
Down Syndrome Society of Orange County  
Reid's Gift, Inc.  
Special Heroes (San Diego Down Syndrome)  
Strategies To Empower People, Inc.

### OPPOSITION

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No known opposition.

### CONTACT

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Kim Angulo  
Office of Assemblymember Jacqui Irwin  
(916) 319-2044  
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Last Updated 23-Mar-15

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Successful aging for adults with developmental disabilities

**SUMMARY:** AB 563 would establish a 2 year pilot program to develop a means to address the service gap/unmet needs of aging adults with intellectual and developmental disabilities

**BACKGROUND/ISSUES/ANALYSIS:** Under existing law, The Lanterman Development Disabilities Service Act, the Department of Developmental Services is required to contract with the Regional Centers to provide needed services to individuals with developmental disabilities through all stages of their lives. The regional centers purchase needed services for individuals with developmental disabilities through approved service providers or arrange for those services through other publicly funded agencies. There is no known consistent state-wide policy utilizing the Regional Center system to address the specific needs of older adults with developmental and intellectual disabilities. As individuals with developmental disabilities age they will require a unique set of services and supports, which are currently not in place.

**RECOMMENDATION:** Support AB 563 (Lopez)

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal #2: Individuals with developmental disabilities and their families become aware of their rights and receive the supports and services they are entitled to by law across the lifespan, including early intervention, transition into school, education, transition to adult life, adult services and supports, and senior services and supports.

**ATTACHMENTS:** None.

**PREPARED:** Karim Alipourfard

**AB 563 (López)**  
**SUCCESSFUL AGING FOR ADULTS WITH DEVELOPMENTAL Disabilities**

**BILL SUMMARY**

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AB 563 would establish a 2 year pilot program to develop a means to address the service gap/unmet needs of aging adults with intellectual and developmental disabilities.

**BACKGROUND**

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Under existing law, The Lanterman Development Disabilities Service Act, the Department of Developmental Services is required to contract with the Regional Centers to provide needed services to individuals with developmental disabilities through all stages of their lives.

The regional centers purchase needed services for individuals with developmental disabilities through approved service providers or arrange for those services through other publicly funded agencies.

**PROBLEM**

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There is no known consistent state-wide policy utilizing the Regional Center system to address the specific needs of older adults with developmental and intellectual disabilities. As individuals with developmental disabilities age they will require a unique set of services and supports, which are currently not in place.

**SOLUTION**

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To establish a set of guidelines, best practices, and processes wherein older adults with intellectual and developmental disabilities can receive services and supports to promote and maintain successful aging, end of life concerns and optimal independence when their primary caregivers are no longer able to provide their needed care. These practices and applications would then be reported to the assembly to be measured for success and viability of implementing such measures.

**FISCAL IMPACT**

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Unknown

**CONTACT**

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Kristi Lopez  
916-319-2039  
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**SPONSOR**

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1. The California Senior Legislature

**Support**

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The Adult Skill Center

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Regional centers are nonprofit private corporations that contract with the Department of Developmental Services (DDS) to provide or coordinate services for individuals with developmental disabilities. Existing law requires DDS to assess, revise, and collect fees through the Parental Fee Program from parents whose child is receiving care. Families are assessed based on their ability to pay and those families whose income falls below the Federal Poverty Level are not charged a fee.

**SUMMARY:** AB 564 requires the parental fee schedule to be adjusted for the level of annual net income. The bill also clarifies that DDS consider the same income and expenses in the appeal process as the process when determining a parent's ability to pay. It also provides that a parent has the right to file an appeal. This bill will amend Section 4784 of the Welfare and Institutions Code.

**BACKGROUND/ISSUES/ANALYSIS:** According to the Auditor, the process DDS uses "to assess parental fees is riddled with unnecessary delays, lack of documentation, incorrect calculations, and inconsistent staff interpretations. Specifically, it was found that the Department considered the gross income and annual expenses when first determining a parent's ability to pay then used the net income and monthly household expenses in the appeal process. Therefore, anyone who appealed was almost guaranteed to receive a reduction in the monthly fee. In the audit, there are some legislative recommendations this bill attempts to cover.

**RECOMMENDATION:** Support AB 564 (Eggman).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal #14 (plain language version): California has laws and policies that support the independence, productivity, inclusion and self-determination of individuals with developmental disabilities and their families

**ATTACHMENTS:** None.

**PREPARED:** Bob Giovati



## AB 564-Regional Centers: Parental Fees

### SUMMARY

AB 564 seeks to provide consistency in the assessment of parental fees for developmental services at regional centers.

### BACKGROUND

Regional centers are nonprofit private corporations that contract with the Department of Developmental Services (DDS) to provide or coordinate services for individuals with developmental disabilities. Existing law requires DDS to assess, revise, and collect fees through the Parental Fee Program from parents whose child is receiving care. Families are assessed based on their ability to pay and those families whose income falls below the Federal Poverty Level are not charged a fee.

Last year, our office requested an audit of the Parental Fee Program after hearing from a constituent-George McElroy- about his troubling experience with the program. Mr. McElroy has a 15-year old autistic child who resides in a 24-hour care facility in Los Angeles. According to him, his fee from one year to another had increased drastically and after speaking to other families in the facility that had a higher income, he realized they were paying significantly less than him. With this information, he moved forward and filed an appeal. When he appealed the fee, he dealt with a rather extensive, obscure process that did ultimately result in a reduction to his fee.

Following our request, the State Auditor's Office released a report concerning the administration of the Parental Fee Program on January 2015 and found results that

reflected Mr. McElroy's experience.

According to the Auditor, the process DDS uses "to assess parental fees is riddled with unnecessary delays, lack of documentation, incorrect calculations, and inconsistent staff interpretations". Specifically, it was found that the Department considered the gross income and annual expenses when first determining a parent's ability to pay then used the net income and monthly household expenses in the appeal process. Therefore, anyone who appealed was almost guaranteed to receive a reduction in their monthly fee. In the audit, there are some legislative recommendations this bill attempts to cover.

### THIS BILL

This bill requires the parental fee schedule to be adjusted for the level of annual net income. The bill also clarifies that DDS consider the same income and expenses in the appeal process as the process when determining a parent's ability to pay. It also provides that a parent has the right to file an appeal. This bill will amend Section 4784 of the Welfare and Institutions Code.

### SUPPORT

None on File

### OPPOSITION

None on File

### FOR MORE INFORMATION

Office of Assemblymember Eggman  
Mayte Sanchez  
916.319.3130  
Mayte.sanchez@asm.ca.gov

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** The California Constitution and existing property tax law authorize persons over the age of 55 and persons who are severely and permanently disabled, as specified, to transfer the base year value, as defined, of property to replacement property, if certain conditions are met.

**SUMMARY:** AB 571 would additionally authorize the transfer of the base year value of property to replacement property for persons who have a severely and permanently disabled child. This bill would apply this property tax relief to replacement dwellings that are purchased or newly constructed on or after January 1, 2016.

**BACKGROUND/ISSUES/ANALYSIS:** Overall, AB 571 makes it easier to keep a child with a disability in a family home, thus helping keep people out of residential care facilities and reducing state expenditures; a win-win all around.

**RECOMMENDATION:** Support AB 571 (Brown).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 11. Housing Access: Individuals with developmental disabilities have access to affordable and accessible housing that provides control, choice and flexibility regarding where and with whom they live.

**ATTACHMENTS:** None.

**PREPARED:** Bob Giovati



## ASSEMBLYMEMBER CHERYL BROWN

AB 571

### Base Year Transfers: Parents of Severely Disabled Children

#### Summary:

This bill would allow for a one-time Prop 13 base year transfer of an individual's personal residence in limited circumstances where that person has a severely and permanently disabled child. In addition, this bill brings conformity to existing penalty forgiveness provisions in the Revenue & Taxation Code.

#### Background:

##### Base Year Transfers

Proposition 13 established the concept of a base year value for property tax assessments and limitations on the tax rate and assessment increase for real property.

The California Constitution and state statutes surrounding property tax law and Prop 13 allow a one-time transfer of the base year value of their personal residence to a replacement property. This transfer is only authorized for persons over the age of 55 and persons who are severely and permanently disabled.

For example, if a person purchased a house in 1980, the assessed value of that house is based on that purchase date and if the person needed to move in 2015 and they meet the criteria for transferring the base year, they may transfer that assessable "base" to another house. This can only be done once and in very limited circumstances.

##### Penalty Forgiveness

Penalties are imposed on a business entity that fails to respond to a County Assessor or the State Board of Equalization request for information regarding property that has changed ownership and the mandated annual business personal property statement. There is penalty forgiveness language in these circumstances, but the language does not align with Section 4985.2 of the Revenue & Taxation Code. Section 4985.2 provides that penalties may be waived if a taxpayer demonstrates that the failure to file was due to circumstances beyond his or her control and occurred notwithstanding the exercise of ordinary care.

##### Problem:

##### Base Year Transfers

The provisions in the law governing base year transfers - homeowners having an opportunity to transfer their base

year - do not allow for a transfer when the individual has a severely and permanently disabled child. They only allow for the transfer if the resident is the disabled person.

A base year transfer may be possible for the child of a homeowner if a guardianship or an irrevocable trust that places the ownership with the child is established. However, this is a lengthy, complicated and costly legal process. A more direct and available option should be established to assist those families caring for children who are permanently and severely disabled.

##### Penalty Forgiveness

The authority for penalty forgiveness rests with the county assessment appeals board. The standards on penalty forgiveness in Revenue & Taxation Code Sections 463 and 483 are not the same as those in Section 4985.2 of the Revenue & Taxation Code and the interpretation varies across jurisdictions.

##### Solution:

AB 571 specifically provides for a one-time Prop 13 base year transfer of a personal residence in circumstances where that person has a severely and permanently disabled child. Allowing transfers under these limited circumstances maintains the spirit of the original legislative and can easily be administered at the county assessor's office.

AB 571 also aligns existing penalty forgiveness provisions in Revenue & Taxation Code Sections 463 and 483 to mirror the language used in Section 4985.2. The consistent standard will be that a person may have the penalty waived if they are able to demonstrate that the failure to file was due to circumstances beyond their control and occurred notwithstanding the exercise of ordinary care. Clarification of this discrepancy will benefit taxpayers qualifying for penalty forgiveness.

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## **COUNCIL AGENDA ITEM DETAIL SHEET**

**ISSUE:** California needs an expanded Silver Alert system.

**SUMMARY:** AB 643 (Nazarian) increases opportunities to effectively utilize the existing Silver Alert System.

**BACKGROUND/ISSUES/ANALYSIS:** Existing law allows a law enforcement agency to request from the California Highway Patrol (CHP) an activation of a Silver Alert. A Silver Alert is a notification system that alerts the public when a person who is 65 years of age or older, developmentally disabled or cognitively impaired, has been reported missing. AB 643 expands the Silver Alert program to also activate an alert via Changeable Message Signs (CMS).

CMS effectively displays safety and traffic information to the public utilizing California highways. By expanding the Silver Alert to include activation of a CMS, the Alert will reach millions of motorists that use the highway system each day and ensure the safe return of a missing person. CMS has become increasingly important in improving operations and highway safety.

**RECOMMENDATION:** Support AB 643 (Nazarian).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 4: Public Safety Outreach. The Council will maintain or develop collaborative relationships with local law enforcement agencies and others to improve the awareness and education of public safety personnel and the justice system on the unique needs of individuals with developmental disabilities.

**ATTACHMENTS:** None

**PREPARED BY:** Bob Giovati



**AB 643, Silver Alert**  
**ASSEMBLYMEMBER ADRIAN NAZARIAN**

**Background:**

Existing law allows a law enforcement agency to request from the California Highway Patrol (CHP) an activation of a Silver Alert. A Silver Alert is a notification system that alerts the public when a person who is 65 years of age or older, developmentally disabled or cognitively impaired, has been reported missing. The Silver Alert may consist of:

- o **Be- On-The- Lookout (BOLO)** – BOLO notifications contain suspect, victim and vehicle information. Communication Centers broadcast alerts to CHP personnel located in the affected areas.
- o **Emergency Digital Information Service (EDIS)**- EDIS delivers official information about emergencies and disasters to the public, local, state, and federal law enforcement agencies via text message.
- o **The All Points Bulletin Network (APBnet)**- APBnet captures and distributes color photographs and images to law enforcement agencies, the media, and other organizations.

The following must be met prior to issuing a Silver Alert:

- 1) The investigating agency determines that the person has gone missing under unexplained or suspicious circumstances.
- 2) The law enforcement agency believes that the person is in danger because of age, health, mental or physical disability, or that there are other factors indicating that the person may be in peril.
- 3) There is information available that, if provided to the public, could assist in the safe recovery of the missing person.

Having met these conditions, the CHP may issue a Silver Alert within a specific geographical area.

**This bill:**

AB 643 expands the Silver Alert program to also activate an alert via Changeable Message Signs (CMS). CMS effectively displays safety and traffic information to the public utilizing California highways.

**Purpose:**

Six in ten people with dementia will wander. A person diagnosed with Alzheimer's may not remember his or her name or address, may have difficulty recalling recent events, and can become disoriented, even in familiar places.

According to CHP, in 2013, there were 161 Silver Alerts activated. Only ten of those victims were located by BOLO, EDIS or APBnet. In 2014, 164 Silver Alerts were activated and only 11 victims were located by the same means.

Based on a 2012 figure, California motorists traveled a total of 326 billion miles. California ranks amongst the top eight states with the longest commute times. The Alert will reach millions of motorists and improve the likelihood of finding a missing senior citizen, especially in heavy traffic congested areas, such as Los Angeles or San Francisco.

By expanding the Silver Alert to include activation of a CMS, the Alert will reach millions of motorists that use the highway system each day and ensure the safe return of a missing person. CMS has become increasingly important in improving operations and highway safety.

AB 643 makes the Silver Alert consistent with the "Amber Alert" and the "Blue Alert". By including the Silver Alert to be displayed on a CMS, California is taking all possible measures in finding a missing person.

**Support:**

California Senior Legislature (Sponsor)

**Opposition:**

None at this time

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## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Dental care options are sorely lacking for many California families, including those connected to the I/DD community.

**SUMMARY:** AB 648 (Low) offers a new, innovative strategy for making dental care more available.

**BACKGROUND/ISSUES/ANALYSIS:** Many Californians have poor dental health. Sadly, many barriers can exist when it comes to accessing effective dental care particularly in the I/DD community.

The Virtual Dental Home (VDH) is an innovative method and user-friendly way of addressing the problem. Dental professionals gather dental information from patients in common community settings (schools, nursing homes, etc.) The data is sent electronically to a dentist, who then designs a treatment plan to be implemented typically by a hygienist or assistant. If more advanced treatment is needed from an actual dentist, the patients will be referred to dental offices for those procedures. AB 648 is needed so that the VDH could become a sustainable model and be implemented throughout California. The VDH concept is well-suited to people in the I/DD community who many have a fear of dentists, or lack the ability to easily travel to a brick and mortar dental office.

AB 648 authorizes a \$4 million (one time) General Fund appropriation to create a Virtual Dental Home grant program, monitored by the State Dental Director, that would implement the VDH in the areas of the most intense need in California. AB 648 also authorizes allocating grant funds for activities that support VDH implementation.

**RECOMMENDATION:** Support AB 648 (Low).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 10: Health. Individuals with developmental disabilities understand their options regarding health services and have access to a full range of coordinated health, dental and mental health services in their community.

**ATTACHMENTS:** None.

**PREPARED:** Bob Giovati

**AB 648 (Low)**  
**Meeting the Dental Care Needs of**  
**California's Children Spreading the Virtual Dental Home**

**Background**

Good dental health is critical to children's ability to grow up healthy and ready to learn so that they can succeed in school and life. Yet, tooth decay is the most common chronic disease and unmet health care need of children in California. It accounts for persistent pain, trouble eating and sleeping, missed school days, and expensive emergency room visits for preventable dental problems.

Many children and other underserved populations who suffer from poor oral health face significant obstacles in obtaining dental services. For example, a recent audit of Medi-Cal's dental program found that Medi-Cal is providing dental care to fewer than half of all children enrolled in the program. In addition to a lack of providers who see children enrolled in Medi-Cal, many low-income families have difficulty accessing care because they lack affordable transportation, lose pay when they miss work, and face other socioeconomic barriers.

**AB 648 (Low)**

The California Dental Association and The Children's Partnership are co-sponsoring AB 648 to ensure the Virtual Dental Home (VDH)—an innovative and cost-effective system for providing dental care to California's most vulnerable children and adults in community settings—can be spread across the state.

Thanks to legislation enacted in 2014 (AB 1174, Bocanegra) the VDH—originally a pilot—has the potential to become a sustainable and scalable model for delivering dental care. The VDH model of dental care uses technology to connect allied dental team members, located at community sites with dentists in offices or clinics, to facilitate the provision of comprehensive dental care for children and adults who face barriers to accessing that care in traditional service locations. To facilitate this system, AB 1174 allows for dental hygienists and specified dental assistants to perform duties previously piloted in the VDH and requires Medi-Cal to pay for dental care provided via telehealth. However, without an upfront investment in training, equipment, technical assistance, and other support that providers need to get started, the system will not be able to develop a critical mass needed to spread statewide and truly be integrated into California's dental delivery system.

AB 648 would:

- Authorize a one-time, \$4 million General Fund appropriation to establish a Virtual Dental Home grant program, under the leadership and direction of the State Dental Director, for the purpose of expanding the VDH into the state's areas of greatest need; and
- Authorize the allocation of grant funds for activities that support VDH implementation, including training, community-based learning collaboratives, technical assistance and equipment.

**About the Virtual Dental Home: a Proven, Cost-Effective Solution**

Through the VDH—developed by the Pacific Center for Special Care at the University of the Pacific School of Dentistry—specially trained dental hygienists and assistants collect dental information from patients in community settings—such as schools, Head Start sites, and nursing homes. They send that information electronically via a secure Web-based system (called store-and-forward telehealth) to the supervising dentist at a clinic or dental office. The dentist uses that information to establish a diagnosis and create a dental treatment plan for the hygienist or assistant to carry out. The hygienists and assistants refer patients to dental offices for procedures that require the skills of a dentist.

Through a pilot project, nearly 3,000 patients have been seen at more than 50 sites around California with overwhelmingly positive results. A rigorous evaluation has demonstrated patient safety with no adverse outcomes. And approximately two-thirds of the patients seen were able to receive the care they needed at the community site.

For more information and to support AB 648, please contact Jenny Katilove at The Children's Partnership: (310) 260-1220, [jkatilove@childrenspartnership.org](mailto:jkatilove@childrenspartnership.org) or Gayle Mathe at the California Dental Association: (916) 554-4995, [gayle.mathe@cda.org](mailto:gayle.mathe@cda.org)

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Lack of adequate restroom accommodations for individuals with physical disabilities including cerebral palsy, spina-bifida, traumatic brain injury, and multiple-sclerosis in public places. The inclusion of people with disabilities in our community and their participation in activities such as sporting events, concerts, and other forms of entertainment enhances their quality of life. However, participation in these activities may require adequate restroom accommodations

**SUMMARY:** AB 662 expands public restroom accommodations to meet the health and safety needs of the disabled community. This bill requires newly constructed commercial places of public amusement that serve over 1, 000 people on a daily basis to install an adult changing station for people with physical disabilities.

**BACKGROUND/ISSUES/ANALYSIS :** According to the California Department of Developmental Services, there are approximately 52,850 individuals with physical disabilities that would benefit from the assistance of an accessible changing station that includes a changing table. The additional assistance would result in increased health and safety benefits. AB 662 requires that :

-all newly constructed commercial places of public amusement to install an adult changing station for individuals with a physical disability. This applies to all new construction as of January 1,2019.

- all renovations of restrooms in commercial places of public amusement that serve over 1,000 people to install an adult changing station for individuals with a physical disability as of January 1, 2029.

**RECOMMENDATION:** Support AB 662 (Bonilla).

**COUNCIL STRATEGIC PLAN OBJECTIVE: Goal #13:** Individuals with developmental disabilities and their families have access to community based services and supports available to the general population (such as recreation, transportation, childcare, etc.) that enable them to live productive and inclusive lives.

**ATTACHMENTS:** None.

**PREPARED:** Karim Alipourfard



## AB 662: Expanding Access for Individuals with Physical Disabilities

### Summary:

AB 662 expands public restroom accommodations to meet the health and safety needs of the disabled community. This bill requires newly constructed commercial places of public amusement that serve over 1,000 people on a daily basis to install an adult changing station for people with physical disabilities.

### Background:

Currently, there is a lack of adequate restroom accommodations for individuals with physical disabilities including cerebral palsy, spina bifida, traumatic brain injury, and multiple sclerosis.

According to the California Department of Developmental Services, there are approximately 52,850 individuals with physical disabilities that would benefit from the assistance of an accessible changing station that includes a changing table. The additional assistance would result in increased health and safety benefits.

The inclusion of people with disabilities in our community and their participation in activities such as sporting events, concerts, and other forms of entertainment enhances their quality of life. However, participation in these activities may require adequate restroom accommodations.

By expanding public restroom accommodations in large occupancy buildings such as auditoriums, convention centers, exhibition halls, sports arenas,

and theaters we are ensuring that individuals with physical disabilities and their families are given the dignity and basic human right to maintain their health.

### This bill:

Specifically, this bill:

- Requires all newly constructed commercial places of public amusement including auditoriums, convention centers, exhibition halls, sports arenas, and theaters that serve over 1,000 people on a daily basis to install an adult changing station for individuals with a physical disability. This applies to all new construction as of January 1, 2019.
- Requires all renovations of restrooms in commercial places of public amusement that serve over 1,000 people to install an adult changing station for individuals with a physical disability as of January 1, 2029.
- An adult changing station is defined as an adult changing table placed within an enclosed restroom facility.

### Contact:

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## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** According to the author, the A&D Program income level loses value every year because of inflation, thereby pushing the program out of reach of some seniors and people with disabilities.

**SUMMARY:** Increases the amount of income that is disregarded in calculating eligibility for purposes of the Medi-Cal aged and disabled (A&D) program which effectively increases the upper limit of financial eligibility to 138% of the federal poverty level (FPL). People age 65 plus or disabled and not eligible for the SSI program may be able to get Medi-Cal through the Aged & Disabled Federal Poverty Level (A&D FPL) program.

**BACKGROUND/ISSUES/ANALYSIS:** The committee analysis states: The Western Center on Law and Poverty, the sponsor of this bill, notes that the A&D program is a critical part of the Medi-Cal program and it provide free, comprehensive coverage to persons over the age of 65 and those with disabilities while simultaneously allowing them to have a monthly income. The A&D program was enacted in 2000, with an income eligibility standard of 199% FPL plus income disregards, making the eligibility criteria equivalent to 133% of the FPL. However, the disregards lose real value every year, with the resulting income standard today at only 123% of the FPL. When a senior has even a small increase in their income that puts them over 123% FPL, they are forced into the Medi-Cal Medically Needy program with a high share of cost.

Supporters argue this bill will help Californians by increasing the income disregards and thereby increasing eligibility.

**RECOMMENDATION:** Support AB 763 (Burke).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 2: Rights Training & Advocacy Individuals with developmental disabilities and their families become aware of their rights and receive the supports and services they are entitled to by law across the lifespan, including early intervention, transition into school, education, transition to adult life, adult services and supports, and senior services and supports.

**ATTACHMENTS:** None.

**PREPARED:** Bob Giovati

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** The discrepancy in existing law cover behavioral health therapy for pervasive developmental disorder or autism (PDD/A) has made it difficult for parents to obtain coverage for the prescribed treatments of their children which they are entitled to under the law. In some cases, parents do challenge and are successful in receiving the services. Yet, this takes time and effort that many parents of children on the Spectrum simply do not have. Instead, parents are forced to accept a form of BHT that has not been prescribed.

**SUMMARY:** AB 796 updates existing law, which makes reference to Title 17. This bill clarifies the definition of service providers to include other forms of evidence-based behavioral health treatment. Specifically, this bill modifies the minimum training required for "qualified autism service providers" and for "qualified autism service paraprofessionals." AB 796 simply codifies the minimum requirements, specified in Title 17 for providers, and requires non-ABA behavioral service providers to meet these requirements.

**BACKGROUND/ISSUES/ANALYSIS:** SB 946 (Steinberg), Chapter 650, Statutes of 2011 required health plan and health insurance policies to cover behavioral health therapy for pervasive developmental disorder or autism (PDD/A). The bill also required plans and insurers to maintain adequate networks of autism service providers. It defined "behavioral health treatment" (BHT) as professional services and treatment programs such as applied behavior analysis (ABA) etc. AB 796 ensures that the children diagnosed with autism will receive insurance coverage for the type of evidence-based BHT that is right and selected for them by the medical profession that knows that child best. This will be done at no cost to the state. Furthermore, AB 796 reduces state costs. Some families who have been denied coverage by a health plan or insurer are currently receiving BHT through their regional centers.

**RECOMMENDATION:** Support AB 796 (Nazarian).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 10: Individuals with developmental disabilities understand their options regarding health services and have access to a full range of coordinated health, dental and mental health services in their community.

**ATTACHMENTS:** None.

**PREPARED:** Karim Alipourfard



**AB 796, AUTISM BEHAVIORAL HEALTH TREATMENT  
ASSEMBLY MEMBER ADRIN NAZARIAN**

**Background:**

SB 946 (Steinberg), Chapter 650, Statutes of 2011 required health plan and health insurance policies to cover behavioral health therapy for pervasive developmental disorder or autism (PDD/A). The bill also requires plans and insurers to maintain adequate networks of autism service providers.

SB 946 defined "behavioral health treatment" (BHT) as professional services and treatment programs, including applied behavior analysis (ABA) and evidence-based behavior intervention programs that develop or restore, to the maximum extent practicable, the functioning of an individual with pervasive developmental disorder or autism prescribed by a physician and surgeon or developed by a psychologist provided under a treatment plan prescribed by a qualified autism service provider and administered by a "qualified autism service provider," a "qualified autism service professional" or a "qualified autism service paraprofessional."

SB 946 specifies "qualified autism service professional" and a "qualified autism service paraprofessional" as BHT providers. The law specifically references Section 54342 of Title 17 of the California Code of Regulations as the requirement that must be met by BHT providers. Title 17 refers to BHT providers as only ABA providers.

**This bill:**

AB 796 updates existing law, which makes reference to Title 17. This bill clarifies the definition of service providers to include other forms of evidence-based behavioral health treatment.

Specifically, this bill modifies the minimum training required for "qualified autism service providers" and for "qualified autism service paraprofessionals." AB 796 simply codifies the minimum requirements, specified in Title 17 for providers, and requires non-ABA behavioral service providers to meet these requirements.

**Purpose:**

SB 946 mandated coverage of all physician prescribed evidence-based behavioral health treatments. However, when defining the minimum requirements for providers, the bill referred to a section of Title 17 that referenced only one type of

evidence-based BHT, which is ABA. This bill corrects this by codifying the same educational and professional requirements listed in Title 17 for ABA providers and applying these requirements to other evidence-based BHT.

The discrepancy in existing law makes it difficult for parents to obtain coverage for the prescribed treatments their children need and which they are entitled to under the law. In some cases, parents do challenge and are successful in receiving the services. Yet, this takes time and effort that many parents of children on the Spectrum simply do not have. Instead, parents are forced to accept a form of BHT that has not been prescribed.

AB 796 recognizes that there is no one size fits all BHT system for an individual diagnosed with autism. Every child on the spectrum presents differently and they respond to treatment differently. What is right for one child may be wrong for another.

This bill ensures that a qualified medical professional, who knows the child best, can prescribe the appropriate approach for the child, in consultation with the family.

Title 17 definitions were written before newer forms of therapy had been developed and tested, which is why the requirements to be a provider require a background in ABA, not other forms of therapy. As a result, some insurance companies are refusing to cover any BHT other than ABA.

AB 796 ensures that the children diagnosed with autism will receive insurance coverage for the type of evidence-based BHT that is right and selected for them by the medical profession that knows that child best. This will be done at no cost to the state.

Furthermore, AB 796 reduces state costs. Some families who have been denied coverage by a health plan or insurer are currently receiving BHT through their regional center.

**Support:**

DIR Floor Time Coalition (Sponsor)

**Opposition:**

None on File.

**Staff Contact:**

Last Updated: 3.20.2015

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Bullying is a huge problem, and statistics show that I/DD kids are often the targets of school bullying.

**SUMMARY:** In relation to bullying, this bill would, for purposes of pupil suspension or recommendation for expulsion from a school, define "electronic act" as either the creation or transmission of that communication, as specified.

**BACKGROUND/ISSUES/ANALYSIS:** Existing law prohibits the suspension, or recommendation for expulsion, of a pupil from school unless the superintendent of the school district or the principal of the school determines that the pupil has committed any of various specified acts, including, but not limited to, engaging in an act of bullying by means of an electronic act. Existing law further defines "electronic act" as both the creation and transmission originated on or off the schoolsite, by means of an electronic device, including, but not limited to, a telephone, wireless telephone, or other wireless communication device, computer, or pager, of a communication, as specified.

With the advent of new technologies, bullying can now be carried out 24/7, and the person doing the bullying does not have to even be physically present to engage in the act. AB 881 acknowledges this reality.

**RECOMMENDATION:** Support AB 881 (Garcia).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 14: Public Policy. Public policy in California promotes the independence, productivity, inclusion and self-determination of individuals with developmental disabilities and their families.

**ATTACHMENTS:** None.

**PREPARED BY:** BOB GIOVATI

# Assembly Bill 881

## Cyber bullies

Assemblymember Cristina Garcia (D – 58)

### PROBLEM

In the Legislative session of 2013, I authored AB 256 that addressed the issue of how schools should deal with off-campus cyber-misconduct that is likely to crop up in litigation arising from cyber-bullying cases that may test the boundaries of the law in this area. For example, in 2010, the plaintiff in *J.C. v. Beverly Hills Unified School District*, 711 F. Supp. 2d 1094 (2010) successfully argued in the Central District of California that the school violated his son's free speech rights by suspending him for making (while off campus) a controversial Youtube video that bullied another student. Although the court's decision did not turn on the issue of on-campus vs. off-campus misconduct, one of the arguments the plaintiff made was that because the video was made off campus, the school administration had no basis to suspend the student.

### BACKGROUND

Our children are far too commonly victims or witnesses to physical or psychological bullying. It can follow our children from the hallways, to their cell phones, and to their computer screens. This year nationally, more than 13 million American children will be bullied, making it the most common form of violence young people experience. In fact, 1 in 6 parents know their child has been bullied over social media and in over half of these cases their child was a repeat victim.

### Solution

AB 256 (Chapter 700-2013) will protect our children from cyberbullying. It will reach beyond the school yard and stop bullying however it occurs. AB 256 closes large loopholes in a law that was written before the explosive growth of electronic devices and instant communication. AB 881 will make a technical change to AB 256 by clarifying that an "electronic act" means the creation OR transmission of any communication.

### STATUS

Introduced February 26, 2015  
Assembly Committee on Education April 8, 2015

### SUPPORT

Junior Leagues of California State Public Affairs Committee  
California Association for Health, Physical Education, Recreation and Dance,  
California Federation of Teachers

### OPPOSITION

GSA NETWORK  
PUBLIC COUNSEL  
ACLU

### CONTACT

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## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** California I/DD workers' rights are being violated.

**SUMMARY:** AB 987 (Levine) advances California's fair employment laws by clarifying that employers are prohibited from retaliating against an employee for requesting reasonable accommodations.

**BACKGROUND/ISSUES/ANALYSIS:** California laws require employers to reasonably accommodate an employee's disability, or religious beliefs and practices. This includes adjustments that allow a disabled person to carry out his or her job duties.

In October of 2013, a court ruling held that an employee request for reasonable accommodations was not protected from employer retaliation, and because of this ruling, courts are now dismissing cases where an employee was fired or discriminated against for making a request for reasonable accommodations.

**RECOMMENDATION:** Support AB 987 (Levine).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 14: Public Policy. Public policy in California promotes the independence, productivity, inclusion and self-determination of individuals with I/DD and their families. Goal 8: Employment First. The State of California will adopt an Employment First policy which reflects inclusive and gainful employment as the preferred outcome for working age individuals with developmental disabilities.

**ATTACHMENTS:** None.

**PREPARED:** Bob Giovati



OFFICE OF ASSEMBLYMEMBER

Marc Levine

TENTH ASSEMBLY DISTRICT

AB 987 Worker’s Rights

SUMMARY

AB 987 would amend the California Fair Employment and Housing Act (FEHA) under the religious and disability protections to clarify that an employer is prohibited from retaliating or discriminating against a person for requesting a reasonable accommodation.

protected from employer retaliation. Because of this decision, courts are now dismissing cases where an employee was fired or discriminated against for making a request for reasonable accommodation. The court’s interpretation is not in line with the intent of existing law.

EXISTING LAW/BACKGROUND

Federal and state laws make it illegal to discriminate against a job applicant or an employee because of the person’s race, color, religion, sex (including pregnancy), national origin, age, disability or genetic information.

As a result of the *Rope v. Auto-Chlor* decision workers’ rights are being violated.

AB 987 advances California’s fair employment laws by clarifying that employers are prohibited from retaliating against an employee for requesting reasonable accommodations.

The Equal Employment Opportunity Commission (EEOC) and the FEHA explicitly prohibit retaliation by an employer because an individual engaged in protected activity.

THIS BILL

This bill would clarify current law by explicitly prohibiting an employer from retaliating against an employee for requesting a reasonable accommodation for a disability or religion.

California laws require an employer to reasonably accommodate an employee’s disability or religious beliefs and practices. A “reasonable accommodation” is an adjustment in work responsibilities that allows a person to enjoy equal employment. This includes adjustments that allow a disabled person to effectively carry out job duties, e.g. having wheel chair accessibility or excusing someone from work for a medical procedure, or in the case of a religious accommodation, excusing someone to observe a religious holiday.

SUPPORT

- California Employment Lawyers Association (co-sponsor)
- Church State Council (co-sponsor)
- Consumer Attorneys of California
- Association of Regional Center Agencies
- Disability Rights of California
- Agudath Israel of California

In October of 2013, the appellate court in *Rope v. Auto-Chlor* held that an employee request for reasonable accommodation is not

Staff Contact: Melissa Ramirez Melissa.Ramirez@asm.ca.gov (916) 319-2010

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Improving access and participation of the Disabled Veteran Business Enterprise (DBVE) program by providing greater access, more meaningful performance standards and better guidance to administering agencies

**SUMMARY** AB 1218 (Weber) would strengthen and enhance participation of the Disabled Veteran Business Enterprise (DBVE) program by providing greater access, more meaningful performance standards and better guidance to administering agencies. Accordingly, a greater participation motivation should be provided to a key contractor who owns a disabled veteran business.

**BACKGROUND/ISSUES/ANALYSIS:** California is home to over 300,000 veterans with service-related disabilities, with increasing numbers of newly separated veterans from the conflicts in Iraq and Afghanistan. As California works to address the employment and entrepreneurial needs of this latest cohort of disabled veterans, it is time to revisit the DVBE program to ensure that it works as intended and provides greater access to new entrepreneurial ventures.

The Department of General Services, as the state's primary contracting agency, administers the program, while the California Department of Veterans Affairs is responsible for monitoring the awarding department's performance toward meeting the 3% goal and for outreach and promotion of the program.

**RECOMMENDATION:** Support AB 1218 (Weber)

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal #2: Individuals with developmental disabilities and their families become aware of their rights and receive the supports and services they are entitled to by law across the lifespan, including early intervention, transition into school, education, transition to adult life, adult services and supports, and senior services and supports.

**ATTACHMENTS:** None.

**PREPARED:** Karim Alipourfard

# Improving Access and Participation

Assemblymember Shirley Weber (D - 79)

## SUMMARY

AB 1218 (Weber) would strengthen and enhance participation of the Disabled Veteran Business Enterprise (DVBE) program by providing greater access, more meaningful performance standards and better guidance to administering agencies.

## BACKGROUND

In an effort to assist the success of business ventures of disabled veterans, the Disabled Veteran Business Enterprise Program directs state agencies to procure goods and services from certified Disabled Veteran Business Enterprise (DVBE) firms. An awarding entity must meet or exceed 3% of the total dollar amount expended annually.

The Department of General Services, as the state's primary contracting agency, administers the program, while the California Department of Veterans Affairs is responsible for monitoring the awarding departments performance toward meeting the 3% goal and for outreach and promotion of the program.

California is home to over 300,000 veterans with service-related disabilities, with increasing numbers of newly separated veterans from the conflicts in Iraq and Afghanistan. As California works to address the employment and entrepreneurial needs of this latest cohort of disabled veterans, it is time to revisit the DVBE program to ensure that it works as intended and provides greater access to new entrepreneurial ventures.

A recent review of the program by the California State Auditor, found that a number of problems compromised the

effectiveness of the DVBE Program. The audit found departments were using the amount of contract awarded, rather than actual amount paid as a measure of performance toward the 3% goal. Additionally, investigators discovered that only about 2% of firms out of 1,400 received 83% of the total spent on DVBE contracts, and only 19% of DVBE firms are acting as prime contractors.

## EXISTING LAW

Article 6 of the California Military and Veterans Code establishes the Disabled Veteran Enterprise Program to address the particular needs of disabled veterans seeking training and rehabilitation through entrepreneurship.

## SPECIFICALLY, THIS BILL

Would make a number of changes to improve access to the program by DVBEs, and to improve accountability and transparency in the administration of the program, including:

- Preferences for new DVBEs seeking contracts with the state
- Preferences for DVBE prime contractors
- Requires the use of amount paid to a DVBE, rather than amount awarded as the standard measure
- Outcome-based measurements of outreach efforts to recruit new DVBEs

## SUPPORT

NONE ON FILE 3/6/15

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** California has the largest population of older adults in the nation, with more than four million seniors. 40 percent of our older adults are living with a disability. With the aging of the baby boomers, and continuing advances in health care, all Californians are living longer, and often with multiple chronic conditions. Experts agree that the best place to care for seniors and people with disabilities is in the least restrictive environment – through community-based services.

**SUMMARY :** AB 1261 preserves access to the adult day health care services that thousands of frail Californians and their families depend on through the Community-Based Adult Services (CBAS) program and gives providers a reliable rate structure to ensure program sustainability.

**BACKGROUND/ISSUES/ANALYSIS:** Adult Day Health Care (ADHC) was established in California in 1974 as a service designed to meet the needs of older adults and adults with disabilities in community settings rather than in institutional care. ADHC centers are licensed health facilities that provide integrated services through a multi-disciplinary team including nurses, social workers, occupational therapists and other professionals. ADHC centers serve frail elders and other adults with disabilities, chronic conditions and complex care needs, such as Alzheimer's disease or other dementia, diabetes, high blood pressure, mental health diagnoses, traumatic brain injury, people who have had a stroke or breathing problems or who cannot take medications properly.

**RECOMMENDATION:** Support AB 1261(Burke).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 10: Health.  
Individuals with developmental disabilities understand their options regarding health services and have access to a full range of coordinated health, dental and mental health services in their community.

**ATTACHMENTS:** None.

**PREPARED:** Karim Alipourfard

# AB 1261 (Burke) Stabilizing the Community Based Adult Services Program

## SUMMARY

AB 1261 preserves access to the adult day health care services that thousands of frail Californians and their families depend on through the Community-Based Adult Services (CBAS) program and gives providers a reliable rate structure to ensure program sustainability.

## BACKGROUND

California has the largest population of older adults in the nation, with more than four million seniors. 40 percent of our older adults are living with a disability. With the aging of the baby boomers, and continuing advances in health care, all Californians are living longer, and often with multiple chronic conditions. Experts agree that the best place to care for seniors and people with disabilities is in the least restrictive environment – through community-based services.

Adult Day Health Care (ADHC) was established in California in 1974 as a service designed to meet the needs of older adults and adults with disabilities in community settings rather than in institutional care. ADHC centers are licensed health facilities that provide integrated services through a multi-disciplinary team including nurses, social workers, occupational therapists and other professionals. ADHC centers serve frail elders and other adults with disabilities, chronic conditions and complex care needs, such as Alzheimer's disease or other dementia, diabetes, high blood pressure, mental health diagnoses, traumatic brain injury, people who have had a stroke or breathing problems or who cannot take medications properly.

For many years, ADHC was a state plan optional benefit of the Medi-Cal program. The program was eliminated in 2011 as a result of the state budget crisis. A subsequent class action lawsuit, *Esther Darling, et al. v. Toby Douglas, et al.*, challenged the elimination of ADHC as a violation of the Supreme Court decision *Olmstead v. L.C.*

The state settled the lawsuit, agreeing to replace ADHC services with a new program called CBAS effective April 1, 2012, to provide necessary

medical and social services to individuals with intensive health care needs.

The Department of Health Care Services (DHCS) amended the "California Bridge to Reform" 111 Waiver to include the new CBAS program, which was approved by the Centers for Medicare and Medicaid Services on March 30, 2012. Today, in counties that have implemented Medi-Cal managed care, CBAS is available as a managed care benefit. In counties that have not implemented Medi-Cal managed care, or for individuals that are exempt from enrollment in Medi-Cal managed care, CBAS is provided as a fee-for-service Medi-Cal benefit.

## AB 1261

AB 1261 aligns state law with the federal requirements for the CBAS benefit, consistent with the program specifications in the current waiver, allowing for better program sustainability as well as legislative input and oversight. In addition, AB 1261 requires Medi-Cal managed care plans to reimburse contracted providers at rates that are no less than Medi-Cal Fee-For Service (FFS) rates, as published and revised by DHCS, a provision that existed in the waiver until November 2014.

## SUPPORT

- California Association for Adult Day Services (Sponsor)
- Adult Day Health Care of Mad River
- Ararat Adult Day Health Care
- Congress of California Seniors
- San Ysidro Health Center

## STAFF CONTACT

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## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Dyslexia is a language-based learning disability. Dyslexia refers to a cluster of symptoms, which result in people having difficulties with specific language skills, particularly reading. Students with dyslexia usually experience difficulties with other language skills such as spelling, writing, and pronouncing words

**SUMMARY:** AB 1369 requires dyslexia screening for students in Grades K through 3, teacher training, evidence-based remediation, and the term dyslexia to be defined as it is by the International Dyslexia Association (IDA) and the National Institute of Child Health and Human Development (NICHD)

**BACKGROUND/ISSUES/ANALYSIS:** Dyslexia is a learning disorder characterized by difficulty reading due to problems identifying speech sounds and learning how they relate to letters and words. Also called specific reading disability, dyslexia is a common learning disability in children.

Dyslexia occurs in children with normal vision and intelligence. Sometimes dyslexia goes undiagnosed for years and isn't recognized until adulthood.

There's no cure for dyslexia. It's a lifelong condition caused by inherited traits that affect how your brain works. However, most children with dyslexia can succeed in school with tutoring or a specialized education program. Emotional support also plays an important role. By Mayo Clinic Staff

**RECOMMENDATION:** Support AB 1369 (Frazier).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 10: Health.  
Individuals with developmental disabilities understand their options regarding health services and have access to a full range of coordinated health, dental and mental health services in their community.

**ATTACHMENTS:** None.

**PREPARED:** Bob Giovati

## IN BRIEF

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AB 1369 requires dyslexia screening for students in Grades K through 3, teacher training, evidence-based remediation, and the term dyslexia to be defined as it is by the International Dyslexia Association (IDA) and the National Institute of Child Health and Human Development (NICHD).

## BACKGROUND

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Dyslexia is a language-based learning disability. Dyslexia refers to a cluster of symptoms, which result in people having difficulties with specific language skills, particularly reading. Students with dyslexia usually experience difficulties with other language skills such as spelling, writing, and pronouncing words.

Dyslexia affects individuals throughout their lives; however, its impact can change at different stages in a person's life. It is referred to as a learning disability because dyslexia can make it very difficult for a student to succeed academically in the typical instructional environment, and in its more severe forms, will qualify a student for special education, special accommodations, or extra support services.

According to the International Dyslexia Association, about 13–14% of the school population nationwide has a handicapping condition that qualifies them for special education. Current studies indicate that one half of all the students who qualify for special education are classified as having a learning disability (6–7%). About 35% of those students have a primary learning disability in reading and language processing. Nevertheless, many more people—perhaps as many as 15–20% of the population as a whole—have some of the symptoms of dyslexia, including slow or inaccurate reading, poor spelling, poor writing, or mixing up similar words. Not all of these will qualify for special education, but they are likely to struggle with many aspects of academic learning and are likely to benefit from systematic, explicit, instruction in reading, writing, and language.

Dyslexia occurs in people of all backgrounds and intellectual levels. People with dyslexia can be very bright. They are often capable or even gifted in areas such as art, computer science, design, drama, electronics, math, mechanics, music, physics, sales, and sports.

The impact that dyslexia has is different for each person and depends on the severity of the condition and the effectiveness of instruction or remediation. The core difficulty is with word recognition and reading fluency, spelling, and writing. Some individuals with dyslexia manage to learn early reading and spelling tasks, especially with excellent instruction, but later experience their most debilitating problems when more complex language skills are required, such as grammar, understanding textbook material, and writing essays.

People with dyslexia can also have problems with spoken language, even after they have been exposed to good language models in their homes and good language instruction in school. They may find it difficult to express themselves clearly, or to fully comprehend what others mean when they speak. Such language problems are often difficult to recognize, but they can lead to major problems in school, in the workplace, and in relating to other people. The effects of dyslexia reach well beyond the classroom.

Dyslexia can also affect a person's self-image. Students with dyslexia often end up feeling "dumb" and less capable than they actually are. After experiencing a great deal of stress due to academic problems, a student may become discouraged about continuing in school.

## SUPPORT

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- Decoding Dyslexia CA (Sponsor)

## OPPOSITION

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None on File

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Employers need financial incentives to hire the disabled.

**SUMMARY:** This bill offers tax credits to businesses who employ WDD individuals.

**BACKGROUND/ISSUES/ANALYSIS:** The Personal Income Tax Law and the Corporation Tax Law allow various credits against the taxes imposed by those laws. This bill, for taxable years beginning January 1, 2016, would allow a credit under those laws to an employer who employs in this state, an individual with a disability who may be paid a special minimum wage, and pays the qualified employee a wage equal to or exceeding the minimum wage during the taxable year. The credit would be allowed in an amount equal to the difference between the special minimum wage and the minimum wage. This bill would take effect immediately as a tax levy.

**RECOMMENDATION:** Support AB 1404 (Grove).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 8: Employment. The State of California will adopt an Employment First policy which reflects inclusive and gainful employment as the preferred outcome for working age individuals with developmental disabilities

**ATTACHMENTS:** None

**PREPARED BY:** Bob Giovati

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** The existing California Peace Officer Standards and Training (POST) curriculum for prospective officers mandates 664 hours (16 weeks) of training. This includes 72 hours on how to handle firearms and pepper spray; 40 hours for investigative report writing; 40 hours on fitness; and 40 hours on driving -- but just six hours of combined training for people with physical and intellectual disabilities and mental health training.

**SUMMARY:** SB 11 responds to the growing public concerns by mandating additional evidence-based behavioral training proven to reduce the negative interactions between peace officers and people suffering from a mental illness or intellectual disability.

**BACKGROUND/ISSUES/ANALYSIS:** Six hours of training is not enough. The lack of training has had deadly results. With better training, we can reduce injuries and save lives -- both for people with mental health illnesses and officers.

**Specifically, SB 11 mandates:** 20 hours additional hours of universal evidence-based behavioral health classroom-training course in the Academy so that all officers can recognize, de-escalate and refer people with mental illnesses who are in crisis.

Designates behavioral health training as a perishable skill under continuing education and mandates peace officers to take 4 hours of continuing education classroom-training course regarding persons with mental illness once every four years.

**RECOMMENDATION:** Support SB 11 (Beal)

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal# 10: Health. Individuals with developmental disabilities understand their options regarding health services and have access to a full range of coordinated health, dental and mental health services in their community.

**ATTACHMENTS:** None.

**PREPARED:** Karim Alipourfard

# ***SB 11 (Beall) Behavioral Health Training for California Peace Officers***

## **BACKGROUND**

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Day by day there is a growing recognition throughout law enforcement nationwide of the importance of behavioral health training for officers.

The existing California Peace Officer Standards and Training (POST) curriculum for prospective officers *mandates 664 hours* (16 weeks) of training. This includes 72 hours on how to handle firearms and pepper spray; 40 hours for investigative report writing; 40 hours on fitness; and 40 hours on driving -- but just six hours of combined training for people with physical and intellectual disabilities and mental health training.

## **NEED FOR THE BILL**

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Six hours of training is not enough. The lack of training has had deadly results. With better training, we can reduce injuries and save lives – both for people with mental health illnesses and officers.

According to POST representatives, there are currently 38 mental health training courses that have been certified by POST available statewide to law enforcement officers and dispatchers.

Although training resources exists, there is no standardized mental health training curriculum statewide.

The lack of uniformity creates a patchwork of training programs offered by California law enforcement agencies. Some agencies offer robust training programs while others offer far less. Every officer, from Susanville to San Diego, needs to be provided with the most current effective tools to interact safely with people with mental illnesses especially given the frequency of contacts with people with a mental illness (POST estimates 10-15%).

## **THIS BILL**

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SB 11 responds to the growing public concerns by mandating additional evidence-based behavioral training proven to reduce the negative interactions between peace officers and people suffering from a mental illness or intellectual disability.

### ***Specifically, SB 11 mandates:***

20 hours additional hours of universal evidence-based behavioral health classroom-training course in the Academy so that all officers can recognize, de-escalate and refer people with mental illnesses who are in crisis.

Designates behavioral health training as a perishable skill under continuing education and mandates peace officers to take 4 hours of continuing education classroom-training course regarding persons with mental illness once every four years.

Furthermore, SB 11 calls for the training to address issues related to stigma and instruct officers on culturally appropriate procedures.

## **SUPPORT**

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Disability Rights California  
California Correctional Supervisors Organization  
The Arc and United Cerebral Palsy California  
Collaboration  
Los Angeles County Professional Peace Officers  
Association  
Sacramento County Deputy Sheriffs' Association  
Long Beach Police Officers Association  
Santa Ana Police Officers Association  
California State Lodge, Fraternal Order of Police

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Day by day there is a growing recognition throughout law enforcement nationwide of the importance of behavioral health training for officers.

**SUMMARY:** SB 29 is a companion bill to SB 11. Taken together, SB 29 and SB 11 responds to the growing public concerns by mandating additional evidence-based behavioral training proven to reduce the negative interactions between peace officers and people suffering from a mental illness or intellectual disability.

**BACKGROUND/ISSUES/ANALYSIS:** The existing California Peace Officer Standards and Training curriculum for officers does not mandate a prescribe number of hours behavioral health training for peace officers in the Field Training program. Although training resources exists, there is no standardized mental health training curriculum statewide.

The lack of uniformity creates a patchwork of training programs offered by California law enforcement agencies. Some agencies offer robust training programs while others offer far less. Every officer needs to be provided with the most current effective tool to interact safely with people with mental illnesses especially given the frequency of contacts with people with a mental illness (POST estimates 10-15%).

This bill mandates 40 hours of evidence-based behavioral health training for all Field Officer Trainers; mandates an additional 20 hours of evidence-based behavioral health training for new officers. Training must be completed during the employing department's field training and probationary period but in no case later than 24 months after employee's appointment as an officer; and calls for the training to address issues related to stigma and instruct officers on culturally appropriate procedures.

**RECOMMENDATION:** Support SB 29 (Beall).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 4: Public Safety Outreach. The Council will maintain or develop collaborative relationships with local law enforcement agencies and others to improve the awareness and education of public safety personnel and the justice system on the unique needs of individuals with developmental disabilities.

**ATTACHMENTS:** None.

**PREPARED:** Bob Giovati

**SB 29 (Beall)**  
**Field Training Program: Behavioral Training for CA Peace Officers**  
**Coauthors: Senator Mitchell (Principal) & Assemblymembers Chavez, Frazier & Maienschein**

**BACKGROUND**

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Day by day there is a growing recognition throughout law enforcement nationwide of the importance of behavioral health training for officers.

The existing California Peace Officer Standards and Training curriculum for officers does not mandate a prescribe number of hours of behavioral health training for peace officers in the Field Training program.

**NEED FOR THE BILL**

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Increase behavioral health training in the Field Training program can reduce injuries and save lives—both for people with mental health illnesses and officers.

According to POST representatives, there are currently 38 mental health training courses that have been certified by POST available statewide to law enforcement officers and dispatchers.

Although training resources exists, there is no standardized mental health training curriculum statewide.

The lack of uniformity creates a patchwork of training programs offered by California law enforcement agencies. Some agencies offer robust training programs while others offer far less. Every officer, from Susanville to San Diego, needs to be provided with the most current effective tools to interact safely with people with mental illnesses especially given the frequency of contacts with people with a mental illness (POST estimates 10-15%).

**THIS BILL**

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SB 29 is a companion bill to SB 11. Taken together, SB 29 and SB 11 responds to the growing public concerns by mandating additional evidence-based behavioral training proven to reduce the negative interactions between peace officers and people suffering from a mental illness or intellectual disability.

*Specifically, SB 29 mandates:*

- Mandates 40 hours of evidence-based behavioral health training for all Field Officer Trainers;
- Mandates an additional 20 hours of evidence-based behavioral health training for new officers. Training must be completed during the employing department's field training and probationary period but in no case later than 24 months after employee's appointment as an officer; and
- Furthermore, SB 29 calls for the training to address issues related to stigma and instruct officers on culturally appropriate procedures.

SB 29 recognizes that new officers look-up to Field Training officers; and over time, Field Training Officers typically are promoted creating a steady flow of new officers to replace them who will need to be trained – a way to phase in behavioral health training in law enforcement agencies.

**SUPPORT**

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Disability Rights California

**KEY CONTACTS**

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[Sunshine.Borelli@sen.ca.gov](mailto:Sunshine.Borelli@sen.ca.gov)  
(916) 651-2005

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Should we legalize assisted suicide in California?

In the interest of full disclosure, historically speaking, organizations like SCDD have largely opposed these kinds of bills.

**SUMMARY:** SB 128 (Wolk), the so-called Right To Die bill, creates a legal infrastructure to legalize assisted suicide in California. The bill is very strongly modeled after the Oregon legislation.

**BACKGROUND/ISSUES/ANALYSIS:** Assisted suicide is a contentious, lightning rod issue that cannot possibly be completely unpacked in a short detail sheet. While generally coming down against the concept of assisted suicide, the I/DD community over the years has become somewhat more divided on the issue.

In essence, the main arguments opponents assert are that life itself has its own inherent value, that people have been assisted to die against their will (or without the cognitive ability to make such a decision) in the past, and that safeguards put in place to prevent abuse have not worked. They also fear legalizing assisted suicide is fraught with peril in an era of health care cost cutting.

Proponents essentially claim this is a civil rights issue, plain and simple, and that in a free society, such a highly personal decision should be up to each individual to make on their own, independent of government interference.

**RECOMMENDATION:** Neutral on SB 128 (Wolk). Note: By remaining neutral on SB 128, we are not advocating for assisted suicide. Rather, we are simply staying neutral on this particular bill. SCDD could consider writing a "Letter of Concern" regarding this bill without taking a formal support or oppose position.

**COUNCIL STRATEGIC PLAN OBJECTIVE:** N/A

**ATTACHMENTS:** None.

**PREPARED:** Bob Giovati

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** An acquired brain injury (ABI) is an alteration in brain function caused by an external force, vascular, toxic, metabolic, neoplastic or infections cause. Brain injury can have several negative impacts on an individual's well-being, which include, but are not limited to: behavioral issues, sensory losses, cognitive deficits, neurological diseases, loss of independence, and unemployment.

**SUMMARY:** Over 350,000 Californians live with traumatic brain injury (TBI), a form of ABI. Between 2006 and 2012, there was nearly a 10% increase in the number of Californians hospitalized with TBI. During these years there was also an 82% increase in the number of Californians diagnosed with brain injury that were treated by Emergency Rooms.

**BACKGROUND/ISSUES/ANALYSIS:** Neurological recovery is dependent upon access to a continuum for acute and post-acute medical brain injury rehabilitation. This treatment must be of sufficient duration and provided by a highly specialized multidisciplinary team. Appropriate and continued treatment helps many people suffering from ABI to better cope with their injuries and live more productive lives. Unfortunately, insurance carriers are not covering these medically necessary services at an alarming rate. Denial of appropriate treatment shifts the cost of untreated disability to public health and government assistance programs, costing the state billions of dollars.

SB 190 will improve the lives of those suffering from ABI and will save the State billions of dollars annually by allowing patients to be properly treated in the most appropriate treatment settings to reduce disability and cost shifting to the public.

**RECOMMENDATION:** Support SB 190 (Beall)

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 10: Health. Individuals with developmental disabilities understand their options regarding health services and have access to a full range of coordinated health, dental and mental health services in their community.

**ATTACHMENTS:** None.

**PREPARED:** Karim Alipourfard

# Brain Injury Access to Rehabilitation Act Fact Sheet

## BACKGROUND

An acquired **brain injury (ABI)** is an alteration in brain function caused by an external force, vascular, toxic, metabolic, neoplastic or infections cause. Brain injury can have several negative impacts on an individual's well-being, which include, but are not limited to: behavioral issues, sensory losses, cognitive deficits, neurological diseases, loss of independence, and unemployment.

Over 350,000 Californians live with traumatic brain injury (TBI), a form of ABI. Between 2006 and 2012, there was nearly a 10% increase in the number of Californians hospitalized with TBI. During these years there was also an 82% increase in the number of Californians diagnosed with brain injury that were treated by Emergency Rooms.

Neurological recovery is dependent upon access to a continuum for acute and post-acute medical brain injury rehabilitation. This treatment must be of sufficient duration and provided by a highly specialized multidisciplinary team. Appropriate and continued treatment helps many people suffering from ABI to better cope with their injuries and live more productive lives.

Unfortunately, insurance carriers are not covering these medically necessary services at an alarming rate. Denial of appropriate treatment shifts the cost of untreated disability to public health and government assistance programs, costing the state billions of dollars.

## THIS BILL

SB 190 seeks to address a major issue facing the legislature this year – how to ensure that Californians with brain injuries receive the necessary treatment to facilitate their successful rehabilitation and recovery.

More specifically, this bill addresses this issue by doing the following:

- Requires insurance carriers to authorize appropriate rehabilitation following catastrophic brain injury
- Prevents cost shifting by insurance carriers to the public sector for undertreated disability.
- Protects vulnerable Californians and reduce disability, depression, joblessness,

homelessness, and suicide after catastrophic brain injury.

- Preserves skilled nursing benefits under multiple plans.
- Requires treatment that reduces or prevents disease progression after brain injury such as Parkinson's disease, Alzheimer's disease, Multiple Sclerosis or Amyotrophic Lateral Sclerosis.

SB 190 will improve the lives of those suffering from ABI and will save the State billions of dollars annually by allowing patients to be properly treated in the most appropriate treatment settings to reduce disability and cost shifting to the public.

## STATUS/VOTES

Senate Health Committee (TBD)

## SPONSOR

Brain Injury Association of California

## SUPPORT

## OPPOSITION

## FOR MORE INFORMATION

Staff Contact: Kenton Stanhope-(916) 651-4015  
[kenton.stanhope@sen.ca.gov](mailto:kenton.stanhope@sen.ca.gov)

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** California needs state regulations to implement the federal ABLE Act.

**SUMMARY:** SB 324 (Pawley) creates the infrastructure to implement the ABLE Act. This is the companion bill to AB 449 (Irwin.) The two bills are virtually – but not quite - identical.

**BACKGROUND/ISSUES/ANALYSIS:** In December 2014, President Obama signed the Achieving a Better Life Experience (ABLE) Act into law. The ABLE Act creates a tax-free savings account for individuals with disabilities and their families. This account will help ease the financial strains faced by individuals with disabilities and their families. In addition, under the ABLE Act each state is responsible for establishing and operating an ABLE Program. The Secretary of the Department of Treasury is currently in the process of developing regulations that will provide guidance to states seeking to establish these programs.

While states are authorized to create an ABLE program, statutory direction is needed for the state agency responsible for establishing this new program. Lastly, to ensure that these savings accounts are truly tax-free, a statutory change is needed to conform the state revenue and taxation code with federal law.

SB 324 establishes an ABLE Act program, within the State Treasurer's office, that will provide financial tools for individuals with disabilities. The measure also ensures that these ABLE savings accounts are tax free. This new program will ensure that individuals with developmental disabilities and their families will be able to save without fear of losing eligibility for public assistance programs.

**RECOMMENDATION:** Support SB 324 (Pawley).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 14: Public Policy. Public policy in California promotes the independence, productivity, inclusion and self-determination of individuals with developmental disabilities and their families.

**ATTACHMENTS:** None.

**PREPARED:** Bob Giovati

# FACT SHEET: SB 324

## ACHIEVING A BETTER LIFE EXPERIENCE IN CALIFORNIA

**AUTHOR: SENATOR FRAN PAVLEY**  
(Principle Co-Authors: Assembly Member Irwin and Wilk)

### BACKGROUND

In the United States, there are multiple financial tools for individuals to be able to save for future expenses (e.g. college savings accounts, health savings accounts, and individual retirement accounts).

In December 2014, President Obama signed the Achieving a Better Life Experience (ABLE) Act into law.

The ABLE Act creates a tax-free savings account for individuals with disabilities and their families. This account will help ease the financial strains faced by individuals with disabilities and their families.

In addition, under the ABLE Act each state is responsible for establishing and operating an ABLE Program.

The Secretary of the Department of Treasury is currently in the process of developing regulations that will provide guidance to states seeking to establish these programs.

### THE PROBLEM

Millions of individuals with disabilities and their families rely on a variety of public benefits, such as SSI, SNAP and Medicaid. These programs require meeting a means test, which limits program eligibility to individuals with less than \$2,000 in cash savings, retirement funds and other items of significant value.

Thus, in order to be able to access these

programs, individuals with disabilities must remain poor, and cannot plan and save for large future expenses.

In addition, while states are authorized to create an ABLE program, statutory direction is needed for the state agency responsible for establishing this new program.

Lastly, to ensure that these savings accounts are truly tax-free, a statutory change is needed to conform the state revenue and taxation code with federal law.

### THE SOLUTION

SB 324 establishes an ABLE Act program, within the State Treasurer's office, that will provide financial tools for individuals with disabilities.

The measure also ensures that these ABLE savings accounts are tax free.

This new program will ensure that individuals with developmental disabilities and their families will be able to save without fear of losing eligibility for public assistance programs.

### SUPPORT

- Autism Speaks (co-sponsor)
- California Disability Services Association (co-sponsor)
- National Down Syndrome Society (co-sponsor)
- Association of Regional Center Agencies
- Cal-Tax
- Center for Autism and Related Disorders
- The Arc and United Cerebral Palsy

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Low-income housing tax credits are the primary source of capital to construct affordable housing.

**SUMMARY:** This bill seeks to increase the impact of the state's existing low-income housing tax credit with no fiscal impact to the state by structuring the credits in a way that is not subject to federal taxation.

**BACKGROUND/ISSUES/ANALYSIS:** Each year, the California Tax Credit Allocation Committee (TCAC) awards a finite amount of federal and state credits to affordable housing developers through a very competitive process. The developers, who do not have sufficient tax liability to use the credits on their own, in turn seek private equity investment for the project from corporations and others with tax liabilities in exchange for the tax credits. SB 377 makes state low-income housing tax credits refundable, thereby giving developers the option to receive funding directly from the state instead of indirectly from a private investor. Developers choosing refunds would receive the refunds over a four-year period – similar to tax credits – and use the refund commitments as collateral for a bank loan to construct and permanently finance the project. SB 377 will significantly increase the value of state credits and therefore the public benefit because it will eliminate the federal tax impacts associated with investors claiming state credits. In other words, developers can borrow against 100% of the value of the credit.

**RECOMMENDATION:** Support SB 377 (Beall).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 12. Housing: Affordable and accessible housing units are developed in local communities to expand housing options for individuals with developmental disabilities.

**ATTACHMENTS:** None

**PREPARED BY:** Bob Giovati

**ISSUE**

This bill seeks to increase the impact of the state's existing low-income housing tax credit with no fiscal impact to the state by structuring the credits in a way that is not subject to federal taxation.

**STATUS/VOTES**

Introduced February 24, 2015  
To be amended late-March

**BACKGROUND**

Low-income housing tax credits are the primary source of capital to construct affordable housing. Each year, the California Tax Credit Allocation Committee (TCAC) awards a finite amount of federal and state credits to affordable housing developers through a very competitive process. The developers, who do not have sufficient tax liability to use the credits on their own, in turn seek private equity investment for the project from corporations and others with tax liabilities in exchange for the tax credits. Due to the fact that state taxes are deductible from federal taxes, a reduction in an investor's state tax liability results in a higher federal tax liability. With the federal corporate tax rate at 35%, investors will generally invest no more than 65 cents for each dollar of state tax credit.

**SUPPORT**

California State Treasurer John Chiang (Sponsor)

**OPPOSITION**

**FOR MORE INFORMATION**

Staff Contact: Alison  
Dinmore  
[Alison.Dinmore@sta.ca.gov](mailto:Alison.Dinmore@sta.ca.gov)  
(916) 651-4121

**THIS BILL**

SB 377 makes state low-income housing tax credits refundable, thereby giving developers the option to receive funding directly from the state instead of indirectly from a private investor. Developers choosing refunds would receive the refunds over a four-year period – similar to tax credits – and use the refund commitments as collateral for a bank loan to construct and permanently finance the project.

SB 377 will significantly increase the value of state credits and therefore the public benefit because it will eliminate the federal tax impacts associated with investors claiming state credits. In other words, developers can borrow against 100% of the value of the credit.

This proposal would greatly increase the efficiency of the program and allow many more affordable housing units to be built for the same level of state tax expenditure.

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** In 2011, the Legislature passed budget trailer bill SB 74. The new law established a cumbersome and costly auditing process for any entity (vendor) paid by a Regional Center (RC).

**SUMMARY:** SB 74 (2011) was intended to save the State over \$20 million annually through increase accountability. However, as of March of 2014, the Department of Developmental Services states that it has received fewer than 60 audits of concern and NONE of these audits of concern resulted in any savings.

**BACKGROUND/ISSUES/ANALYSIS:** SB 490 is a bipartisan measure that provides a technical cleanup to SB 74. The bill reduces the fiscal impact of the unfunded mandate to small vendors providing services to the developmentally disabled and frees them to invest those dollars back into services. These adjustments create uniformity with state requirements for non-profit entities and reduce the financial burden for vendors with clean audits.

**RECOMMENDATION:** Support SB 490 (Beall and Huff).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 14: Public Policy. Public policy in California promotes the independence, productivity, inclusion and self-determination of individuals with developmental disabilities and their families.

**ATTACHMENTS:** None.

**PREPARED:** Bob Giovati

## **SB 490 (Beall & Huff)**

### **Developmental Disabilities Fiscal Audit Realignment**

#### **BACKGROUND**

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In 2011, the Legislature passed budget trailer bill SB 74. The new law established a cumbersome and costly auditing process for any entity (vendor) paid by a Regional Center (RC).

SB 74 applies to any vendor receiving more than \$250,000 from one or more RCs. Vendors paid more than \$250,000 but less than \$500,000 are required to contract with an independent accounting firm for a financial review or audit. A vendor who receives more than \$500,000 is required to have an independent financial audit performed.

The audits are then submitted to the RC within 30 days of completion for review and follow up. Within 30 days upon their review of vendor audits, RCs are required to inform Department of Developmental Services if they note any significant issues that directly or indirectly impact the RC.

#### **NEED FOR THE BILL**

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SB 74 was intended to save the State over \$20 million annually through increase accountability.

However, as of March of 2014, the Department of Developmental Services states that it has received fewer than 60 audits of concern and NONE of these audits of concern resulted in any savings.

Fiscal cost to perform the financial reviews and audits are borne solely by the vendors, many of whom are facing financial crises. With an average cost of \$10,000 per audit, full compliance is estimated to cost vendors \$57 million dollars since the passage of SB 74 –

money that could have been spent on client services.

Besides the financial waste created by SB 74, there are numerous ambiguities that need to be clarified. For example, SB 74 does not stipulate what monies are subject to an audit. As a result, some vendors and accounting firms are auditing the vendors' entire budget including revenue that is not from the Regional Center.

Finally, SB 74 goes above the industry standard for nonprofit auditing practices, creating a lower threshold to trigger a much more expensive audit versus a simpler financial review. California law, Cal. Gov. Code §12586(e) (1), states that fiscal reviews shall occur for all nonprofit entities in the state between \$500,000 and \$2 million dollars. Nonprofits with revenue greater than \$2 million dollars shall be subject to fiscal audits.

SB 490 provides a technical cleanup and adjusts thresholds to match state standards with industry standards. In addition, the bill reduces the fiscal impact of the unfunded mandate to small vendors providing services to the Developmentally Disabled and frees them to invest those dollars back into services.

#### **THIS BILL**

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This bill adjusts fiscal audit requirements for vendors working with the developmentally disabled. The adjustments create uniformity with state requirements for non-profit entities and reduce the financial burden for vendors with clean audits.

Specifically, SB 490

- Adjusts the financial thresholds for fiscal audits and reviews;
- Clarifies that only monies paid by the regional centers are subject to the audit review and may be count toward the threshold consistent with standard and customary auditing practices for federal monies;
- Allows vendors hit hard by years of budget cutbacks whose audits demonstrate they are in compliance to waive an audit for two years.

## **FISCAL**

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No significant fiscal costs have been identified.

## **CO-AUTHORS**

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Senator Bob Huff (Joint Co-author)

Senators Anderson, Bates, Cannella, Hall, Nguyen, Pavley, Stone, Vidak and Wolk

Assemblymembers Chu and Salas

## **SUPPORT**

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ResCoalition

## **KEY CONTACTS**

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Staff:

Sunshine Borelli

[Sunshine.Borelli@sen.ca.gov](mailto:Sunshine.Borelli@sen.ca.gov)

(916) 651-4015

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** CCI consumers remain one of the most vulnerable populations in California's health care system. CCI rollout has not gone smoothly in some counties resulting in confusion among both consumers and providers. The rights of this fragile population of consumers are not codified in law. SB 492 will help increase awareness of the CCI program and place an emphasis on serving the consumer with truly integrated and coordinated care.

**SUMMARY:** SB 492, the Coordinated Care Initiative (CCI) Consumer Bill of Rights, sets forth the rights afforded to individuals enrolled in CCI. These include, but are not limited to, consumer self-direction and choice and flexibility in access to quality services and supports. The bill requires the Department of Health Care Services to post the CCI Consumer Bill of Rights on the department website and to disseminate hard copies to consumers upon request. The Bill of Rights would also be made available to the public in multiple languages

**BACKGROUND/ISSUES/ANALYSIS:** SB 1008 and 1036 (2012) created California's Coordinated Care Initiative (CCI) as a pilot program to provide integrated delivery of services and supports to the state's low-income older adults and persons with disabilities. The CCI consists of both Cal MediConnect and Managed Medi-Cal Long-Term Supports and Services (MLTSS).

CCI implementation began in 2014 with five counties but has since expanded to seven: Los Angeles, Orange (August 2015), Riverside, San Bernardino, San Diego, San Mateo, and Santa Clara, and of January 2015, 122,908 individuals across the state's counties have been enrolled in Cal MediConnect (CMC).<sup>1</sup> Approximately 1.1 million dual eligibles are enrolled in CCI; seven in ten are ages 65 and older, the majority of which are women. Approximately one in three is a younger person with disabilities.<sup>2</sup>

**RECOMMENDATION:** Support SB 492 (Liu).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal #10: Individuals with developmental disabilities understand their options regarding health services and have access to a full range of coordinated health, dental and mental health services in their community

**ATTACHMENTS:** None.

**PREPARED:** Karim Alipourfard

### SUMMARY

SB 492, the Coordinated Care Initiative (CCI) Consumer Bill of Rights, sets forth the rights afforded to individuals enrolled in CCI. These include, but are not limited to, consumer self-direction and choice and flexibility in access to quality services and supports. The bill requires the Department of Health Care Services to post the CCI Consumer Bill of Rights on the department website and to disseminate hard copies to consumers upon request. The Bill of Rights would also be made available to the public in multiple languages.

### BACKGROUND

SB 1008 and 1036 (2012) created California's Coordinated Care Initiative (CCI) as a pilot program to provide integrated delivery of services and supports to the state's low-income older adults and persons with disabilities. The CCI consists of both Cal MediConnect and Managed Medi-Cal Long-Term Supports and Services (MLTSS).

Individuals enrolled in the CCI are: (1) dual eligibles, those who qualify for both Medicare and Medi-Cal (who are both low-income and 65 years and older and/or persons with disabilities) and (2) Medi-Cal only seniors and persons with disabilities who receive long-term supports and services through managed care.

CCI implementation began in 2014 with five counties but has since expanded to seven: Los Angeles, Orange (August 2015), Riverside, San Bernardino, San Diego, San Mateo, and Santa Clara.

As of January 2015, 122,908 individuals across the state's counties have been enrolled in Cal MediConnect (CMC).<sup>1</sup> Approximately 1.1 million dual eligibles are enrolled in CCI; seven in ten are ages 65 and older, the majority of which are

women. Approximately one in three is a young person with disabilities.<sup>2</sup>

### PURPOSE

CCI consumers remain one of the most vulnerable populations in California's health care system. The rollout has not gone smoothly in some counties resulting in confusion among both consumers and providers. The rights of this fragile population of consumers are not codified in law. SB 492 will increase awareness of the CCI program and place emphasis on serving the consumer with truly integrated and coordinated care.

### SOLUTION

SB 492:

- Provides consumers with a clear sense of the rights as qualified individuals enrolled in the CCI program.
- Improves access to programs and services, in addition to increasing consumer awareness by providing relevant information on programs and services.
- Honors cultural and linguistic competency in communicating with CCI beneficiaries.

### SPONSOR

None

### SUPPORT

The Arc California  
California Association of Caregiver Resource Centers  
California Council of the Blind  
County Welfare Directors Association  
Harris Family Center for Disability and Health Policy  
LeadingAge California  
LifeLong Medical  
Cal PACE

### OPPOSITION

None known at this time

<sup>1</sup>[http://www.thescanfoundation.org/sites/thescanfoundation.org/files/tsf\\_cci\\_factsheet\\_january\\_2015.pdf](http://www.thescanfoundation.org/sites/thescanfoundation.org/files/tsf_cci_factsheet_january_2015.pdf)

<sup>2</sup>[http://www.calduals.org/background/ca\\_duals\\_demo/](http://www.calduals.org/background/ca_duals_demo/)

SB 492 (Sen. Carol Liu)

CONTACT: Chelsea Lee, Senate Fellow, (916) 651-4025, [chelsea.lee@sen.ca.gov](mailto:chelsea.lee@sen.ca.gov)

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Under existing state probate court practices, adults under conservatorship are routinely disqualified from voting due to their actual or perceived inability to complete a voter registration affidavit.

**SUMMARY:** SB 589 will protect the voting rights of disabled individuals under conservatorship by allowing them to retain their right to vote unless it is shown by clear and convincing evidence that the individual cannot communicate, with or without reasonable accommodations, a desire to participate in the voting process.

**BACKGROUND/ISSUES/ANALYSIS:** SB 589 will protect the voting rights of conserved individuals by aligning California law with the standards recommended by the ABA:

- SB 589 creates a presumption that a person has the right to vote regardless of conservatorship status.
- SB 589 will protect a disabled, conserved individual's right to vote unless it is shown by clear and convincing evidence that the individual cannot communicate, with or without reasonable accommodations, a desire to participate in the voting process.
- SB 589 will align California law with federal law by stating that people with disabilities are entitled to reasonable accommodations while registering to vote.

**RECOMMENDATION:** Support SB 589 (Block).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 2: Rights Training & Advocacy. Individuals with developmental disabilities and their families become aware of their rights and receive the supports and services they are entitled to by law across the lifespan, including early intervention, transition into school, education, transition to adult life, adult services and supports, and senior services and supports.

**ATTACHMENTS:** None.

**PREPARED:** Bob Giovati

# Voting Rights of People Under Conservatorship

## Senator Marty Block

### SUMMARY

SB 589 will protect the voting rights of disabled individuals under conservatorship by allowing them to retain their right to vote unless it is shown by clear and convincing evidence that the individual cannot communicate, with or without reasonable accommodations, a desire to participate in the voting process.

### BACKGROUND

Under existing state probate court practices, adults under conservatorship are routinely disqualified from voting due to their actual or perceived inability to complete a voter registration affidavit.

California probate courts have typically made a *pro forma* judicial finding that an individual is unable to complete a voter registration affidavit. There are often no specific findings regarding competency to vote, and no consideration of reasonable accommodations that would enable the disabled individual to complete the voter registration affidavit.

The lack of clear standards has real impact. A review of 61 conservatorship cases involving adults with developmental disabilities in Los Angeles County found that close to 90% of conservatees had been disqualified from voting.<sup>1</sup>

In 2007, the American Bar Association (ABA) adopted a series of recommendations for defining and assessing capacity to vote that included a presumption of the right to vote, an assessment of a person's ability to communicate their desire to participate in the voting process, and a clear and convincing evidence standard. California's current protections fall short of the ABA's recommended standards:

- California law does not presume a person's right to vote regardless of conservatorship status.
- California law relies on the ability to complete a voter registration affidavit rather than an assessment of whether a person can communicate a specific desire to participate in the voting process.
- California law does not require that a person's disqualification from voting be established by clear and convincing evidence.

### EXISTING LAW

Under existing California law, a person can be deemed mentally incompetent and disqualified from voting if during the course of a conservatorship a court finds that the person is not capable of completing a voter registration affidavit. *Cal. Elec. Code § 2208(a)*.

Under Title II of the Americans with Disabilities Act (ADA), an individual with a disability may be entitled to seek or to rely upon assistance in completing a voter registration affidavit, unless such assistance would constitute a fundamental alteration. *28 C.F.R. § 35.130(b)(7)*.

Last year, California law was clarified (AB 1311, Bradford) to explicitly permit certain accommodations – the use of a mark or X, or a signature stamp, or the assistance of a third party – in completing the voter registration affidavit. This was an important step toward protecting the voting rights of conserved individuals. AB 1311 did not, however, modify the standard for determining when a disabled, conserved individual is not competent to participate in the voting process.

### THIS BILL

SB 589 will protect the voting rights of conserved individuals by aligning California law with the standards recommended by the ABA:

- SB 589 creates a presumption that a person has the right to vote regardless of conservatorship status.
- SB 589 will protect a disabled, conserved individual's right to vote unless it is shown by clear and convincing evidence that the individual cannot communicate, with or without reasonable accommodations, a desire to participate in the voting process.
- SB 589 will align California law with federal law by stating that people with disabilities are entitled to reasonable accommodations while registering to vote.

### SPONSOR

Contact: ACLU of California  
Raúl Macías, Voting Rights Attorney  
916.442.1036 ext. 305  
rmacias@acluca.org

<sup>1</sup> Thomas Coleman, Disability and Abuse Project, available at <http://disabilityandabuse.org/doj/complaint.pdf>.

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** The idea of improving the California service system was brought to the attention of the author from public policy advocates who seek both short-term and long-term steps to sustain the promise that Developmentally Disabled (DD) individuals can thrive in their own communities.

**SUMMARY:** California's community services system serves 279,000 individuals who face challenges such as cerebral palsy, intellectual disabilities, and autism. The vision to create fulfilling lives for this population launched in 1969 through the Republican-authored Lanterman Developmental Disabilities Services Act.

**BACKGROUND/ISSUE/ANALYSIS:** SB 638 takes both short-term and long-term steps to sustain the promise that DD individuals can thrive in their own communities, by:

- Providing immediate reimbursement rate relief to supported employment providers, residential programs, and other services.
- Providing fair reimbursement for state and local minimum wage mandates.
- Revising stifling requirements for administrative operations.
- Launching a long-term reform effort to increase quality and accountability and provide sustainable funding for community services

**RECOMMENDATION:** Support 638 (Stone).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal #13 Individuals with developmental disabilities and their families have access to community based services and supports available to the general population (such as recreation, transportation, childcare, etc.) that enable them to live productive and inclusive lives.

**ATTACHMENTS:** None.

**PREPARED:** Karim Alipourfard



# Fact Sheet

## SB 638

### What is the origin of the proposal?

This idea was brought to the attention of Senator Stone from public policy advocates who seek both short-term and long-term steps to sustain the promise that Developmentally Disabled (DD) individuals can thrive in their own communities.

### What is the background of this proposal?

California's community services system serves 279,000 individuals who face challenges such as cerebral palsy, intellectual disabilities, and autism. The vision to create fulfilling lives for this population launched in 1969 through the Republican-authored Lanterman Developmental Disabilities Services Act.

### What deficiency in current law does this bill seek to remedy?

Neglect of the community service system in the past decade has shut down some small businesses and non-profits that serve DD individuals. State budget actions in recent years reduced or froze reimbursement levels for service providers and imposed mandates and administrative hurdles that added little or no value.

Additionally, archaic methods for funding and overseeing services through the non-profit regional centers also reduce the quality of service provided to families who need services for a DD individual. These obstacles continue to threaten the viability of the community system.

### What specifically will this bill do?

SB 638 takes both short-term and long-term steps to sustain the promise that DD individuals can thrive in their own communities, by:

- Providing immediate reimbursement relief to supported employment providers, residential programs, and other services.
- Providing fair reimbursement for state and local minimum wage mandates.
- Revising stifling requirements for administrative operations.
- Launching a long-term reform effort to increase quality and accountability and provide sustainable funding for community services.

### Which code sections does this bill affect?

SB 638 amends several sections of the Welfare and Institution Code, relating to development services.

### Who are the proponents of this legislation?

The bill is Author Sponsored.

### Who is the main contact for this bill?

Chris Norden, Legislative Director  
Phone: (916) 651-4028  
Fax: (916) 651-4928  
Email: [Chris.norden@sen.ca.gov](mailto:Chris.norden@sen.ca.gov)

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** This idea was brought to the attention of Senator Stone from public policy advocates who are committed to helping developmentally disabled (DD) people thrive in their own communities by completing the transition from outdated state developmental centers (DCs) to community-based services.

**SUMMARY:** California's community services system serves 279,000 individuals who face challenges such as cerebral palsy, intellectual disabilities, and autism. The vision to create fulfilling lives for this population launched in 1969 through the Republican-authored Lanterman Developmental Disabilities Services Act.

**BACKGROUND/ISSUES/ANALYSIS:** BACKGROUND/ISSUE/ANALYSIS: SB 639 does the following:

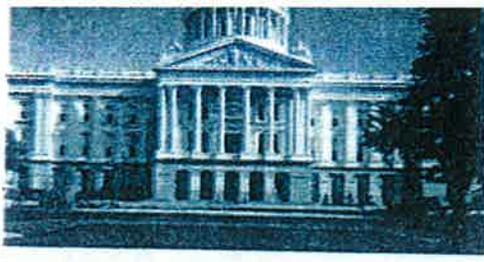
- Sets out target dates to close down Fairview Developmental Center and Sonoma Developmental Center.
- Expresses intent that funds generated by the closure of DCs shift to sustaining community services for the DD population.
- Develops options for using the DC properties to benefit the community on an ongoing basis, such as by identifying on-going revenues through agreements with private entities or local governments.

**RECOMMENDATION:** Support SB 639(Stone)

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal #13 Individuals with developmental disabilities and their families have access to community based services and supports available to the general population (such as recreation, transportation, childcare, etc.) that enable them to live productive and inclusive lives.

**ATTACHMENTS:** None.

**PREPARED:** Karim Alipourfard



# Fact Sheet

## SB 639

### What is the origin of the proposal?

This idea was brought to the attention of Senator Stone from public policy advocates who are committed to helping developmentally disabled (DD) people thrive in their own communities by completing the transition from outdated state developmental centers (DCs) to community-based services.

### What is the background of this proposal?

California's community services system serves 279,000 individuals who face challenges such as cerebral palsy, intellectual disabilities, and autism. The vision to create fulfilling lives for this population launched in 1969 through the Republican-authored Lanterman Developmental Disabilities Services Act.

### What deficiency in current law does this bill seek to remedy?

Roughly 1,100 DD individuals continue to languish in archaic DCs, which do not fulfill the Lanterman Act vision and consume a disproportionate share of state spending. The DC budget totals over \$563 million for 2014-15, or \$504,000 for each DC resident. Compare this to the average of \$17,000 spent on each of the 279,000 DD individuals that reside and receive services in the community.

Additionally, the DC system is plagued with resident health and safety problems. Sonoma DC lost its federal certification in 2012 due to significant health and safety violations, which not only harmed residents, but also resulted in the loss of millions of dollars annually in federal funds. The other DCs are also facing the possibility of

decertification based on violations of federal health and safety standards.

### What specifically will this bill do?

SB 639 does the following:

- Sets out target dates to close down Fairview Developmental Center and Sonoma Developmental Center.
- Expresses intent that funds generated by closure of DCs shift to sustaining community services for the DD population.
- Develops options for using the DC properties to benefit the community on an ongoing basis, such as by identifying ongoing revenues through agreements with private entities or local governments.

### Which code sections does this bill affect?

SB 639 adds Sections 4474.6 and 4474.7 to the Welfare and Institutions Code, relating to developmental services.

### Who are the proponents of this legislation?

The bill is Author Sponsored.

### Who is the main contact for this bill?

Chris Norden, Legislative Director  
Phone: (916) 651-4028  
Fax: (916) 651-4928  
Email: [Chris.norden@sen.ca.gov](mailto:Chris.norden@sen.ca.gov)

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** The Limited Examination and Appointment Program (LEAP) was established as an alternative to the traditional civil service examination and appointment process to facilitate the hiring of persons with disabilities in the state civil service.

**SUMMARY:** SB 644 allows a successful internship performance at a State agency as the indicator as to whether an individual with intellectual or developmental disability is eligible for State civil service employment.

**BACKGROUND/ISSUES/ANALYSIS:** Jobseekers with disabilities living in California are certified eligible for LEAP through the state's Department of Rehabilitation. Once an individual receives a certification, that individual can apply for LEAP examinations during open testing periods (and they may also continue to apply for non-LEAP examinations as well). All examinations are provided online as well as by mail. After successfully passing the examination, the candidate will then be appointed to the civil service classification.

However, LEAP is often not an effective alternative to the standard civil service examination for individuals with ID/DD because it relies on a written test to initially evaluate candidates. Many people with ID/DD can successfully be employed in jobs involving complex tasks but need time and customized training to learn the job. Written tests are not a valid measure of their abilities.

**RECOMMENDATION:** Support SB 644 (Hancock).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 8: Employment. The State of California will adopt an Employment First policy which reflects inclusive and gainful employment as the preferred outcome for working age individuals with developmental disabilities

**ATTACHMENTS:** None.

**PREPARED:** Bob Giovati

# Senate Bill 644

## State Employment for Individuals with Developmental Disabilities

Senator Loni Hancock

As Amended April 7, 2015

### ISSUE

The Limited Examination and Appointment Program (LEAP) was established as an alternative to the traditional civil service examination and appointment process to facilitate the hiring of persons with disabilities in the state civil service.

However, LEAP is often not an effective alternative for people with developmental disability because it relies on a written test to initially evaluate candidates. Many people with developmental disabilities can successfully be employed in jobs involving complex tasks but need time and customized training to learn the job. Written tests are not a valid measure of what they can do.

### CURRENT LAW

Government code 19240 established the LEAP program as an alternative to the traditional civil service examination and appointment process to facilitate the hiring of persons with disabilities in the state civil service.

### BACKGROUND

AB 925 (Aroner 2002) required the California Department of Health and Human Services Agency and the Labor and Workforce Development Agency, to create "a sustainable, comprehensive strategy to accomplish various goals aimed bringing persons with disabilities into employment and ensuring that state government is a model employer of individuals with disabilities.

AB 1041 (Chesbro 2014) created a statewide Employment First Policy, prioritizing opportunities for integrated competitive employment for working age individuals with disabilities, regardless of the severity of their disabilities.

Currently, 92% of Californians with intellectual disabilities of working age are jobless. Unemployment for adults with disabilities is chronic and severe nationwide. Less than 5% of young adults with intellectual disabilities leave K12 and go directly into employment and less than 30% go into post-secondary or career technical education. If young people with intellectual disabilities exiting K12 education are not connected to employment they tend to rely on public benefits and services their entire lives.

Jobseekers with disabilities (defined as individuals with a physical or mental impairment or medical condition that limits one or more life activities) living in California are certified eligible for LEAP through the state's Department of Rehabilitation.

Once an individual receives a certification, that individual can apply for LEAP examinations during open testing periods (and they may also continue to apply for non-LEAP examinations as well). All examinations are provided online as well as by mail.

The LEAP examination consists of two parts:

- **Part I - Readiness Evaluation:** Evaluate Candidates' education, experience,

and personal qualifications are through a competitive examination process.

- **Part II - Job Examination Period (JEP):** The candidate serves a temporary, two to four month, on-the-job performance evaluation period

After successfully passing the examination, the candidate will then be appointed to the civil service classification.

However, LEAP is often not an effective alternative to the standard civil service examination for individuals with developmental disabilities because it relies on a written test to initially evaluate candidates. Many people with developmental disabilities can successfully be employed in jobs involving complex tasks but need time and customized training to learn the job. Written tests are not a valid measure of their abilities

Several states have adopted "model employer" practices to ensure that people with developmental disabilities have access to State employment opportunities. Being a model employer will enable the State to demonstrate to other public sector and to private sector employers how to unlock the potential of this untapped workforce.

Alameda and Santa Clara Counties use a similar method of allowing successful job performance after adequate time on the job to become the "test" for civil service purposes for workers with developmental disabilities to become public employees.

## **THIS BILL**

SB 644 allows a successful internship performance, at a State agency, as the indicator as to whether an individual with a developmental disability is eligible for State civil service employment.

## **SUPPORT**

**California Disability Services Association  
(Sponsor)**

**East Bay Innovations (Sponsor)**

**Futures Explored (Sponsor)**

**Ala Costa Centers**

Alameda County Board of Supervisors

Alameda County Developmental Disabilities  
Council

Association of Regional Center Agencies

Cerebral Palsy Center for the Bay Area

East Bay Developmental Disabilities

The ARC and United Cerebral Palsy California  
Coalition

## **CONTACT**

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510-618-1580 Ext 11

Will Sanford, Futures Explored

[willsanford@futures-explored.org](mailto:willsanford@futures-explored.org);

(925) 284-3240 Ext. 214

## COUNCIL AGENDA ITEM DETAIL SHEET

**ISSUE:** Unpaid family caregivers provide the majority of long term care (LTC) support for their loved ones, yet the health and LTC system is slow to recognize them as partners. Identifying and meeting the needs of California's caregivers can help ensure that appropriate care is provided for aging adults at home or in a rehabilitation or nursing facility and avoid unnecessary readmissions or prolonged stays

**SUMMARY:** SB 675 requires California health care facilities to:

- Record the name of the family caregiver when a loved one is admitted to a hospital or rehabilitation facility,
- Notify the family caregiver when the loved one is to be discharged to another facility or home;
- Provide an explanation and live instruction of the medical tasks that the family caregiver would perform; and
- Provide telephonic technical assistance to the caregiver when questions arise.

**BACKGROUND/ISSUES/ANALYSIS:** Unpaid family caregivers provide the majority of long term care (LTC) support for their loved ones, yet the health and LTC system is slow to recognize them as partners. Identifying and meeting the needs of California's caregivers can help ensure that appropriate care is provided for aging adults at home or in a rehabilitation or nursing facility and avoid unnecessary readmissions or prolonged stays. Assisting caregivers to understand the expectations for care to be provided when the consumer is transferred from one facility to another enhances that caregiver's ability to advocate on behalf of his or her loved one. Caregiver tasks at home, especially paramedical tasks such as tube feeding and wound care, can be complex. Caregivers often require more information and demonstration once they are in the home setting and must perform these tasks by themselves.

**RECOMMENDATION:** Support SB 675(Carol Iiu).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 10: Health.  
Individuals with developmental disabilities understand their options regarding health services and have access to a full range of coordinated health, dental and mental health services in their community.

**ATTACHMENTS:** None.

**PREPARED:** Karim Alipourfard

## SB 675 – TRANSITIONAL CARE

Senator Carol Liu

Principal Coauthor: Assemblymember Cheryl Brown

Introduced February 26, 2015

### SUMMARY

SB 675 requires California health care facilities to:

- Record the name of the family caregiver when a loved one is admitted to a hospital or rehabilitation facility,
- Notify the family caregiver when the loved one is to be discharged to another facility or home;
- Provide an explanation and live instruction of the medical tasks that the family caregiver would perform; and
- Provide telephonic technical assistance to the caregiver when questions arise.

### SPONSOR

None

### SUPPORT

### OPPOSITION

None known at this time

### THE PROBLEM

Unpaid family caregivers provide the majority of long term care (LTC) support for their loved ones, yet the health and LTC system is slow to recognize them as partners. Identifying and meeting the needs of California's caregivers can help ensure that appropriate care is provided for aging adults at home or in a rehabilitation or nursing facility and avoid unnecessary readmissions or prolonged stays.

### SOLUTION

Without full understanding and appropriate training to meet the consumer's needs both the caregiver and consumer suffer. Assisting caregivers to understand the expectations for care to be provided when the consumer is transferred from one facility to another enhances that caregiver's ability to advocate on behalf of his or her loved one. Caregiver tasks at home, especially paramedical tasks such as tube feeding and wound care, can be complex.

Caregivers often require more information and demonstration once they are in the home setting and must perform these tasks by themselves. Enabling them to access information over the phone or online can prevent costly readmissions and ER visits as well as stress and suffering for both the caregiver and the consumer.

To review the Select Committee's 2014 Final Report see:  
<http://sd25.senate.ca.gov/sites/sd25.senate.ca.gov/files/AgingL.org%20TermCareReport.pdf>

SB 547 (Sen. Carol Liu)

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## **COUNCIL AGENDA ITEM DETAIL SHEET**

**ISSUE:** The “Helping Families in Mental Health Crisis Act” (H.R. 3717)

**SUMMARY:** Among other things, H.R. 3717 has a major impact on Protection and Advocacy organizations.

**BACKGROUND/ISSUES/ANALYSIS:** This bill is roughly 135 pages long, and thus, cannot be completely analyzed in a short detail sheet. It has some positive aspects, and a number of strong supporters. However, two areas of concern are as follows:

It creates a HIPAA exemption allowing a “caregiver” to receive protected health information when a mental health care provider reasonably believes disclosure to the caregiver is necessary to protect the health, safety or welfare of the patient, or the safety of someone else. It should be noted that the definition of “caregiver” includes immediate family members.

It also constrains federally funded “Protection and Advocacy” organizations - such as Disability Rights California – in their lobbying efforts. In addition, it restricts them in advising people regarding “refusing medical treatment or acting against wishes of a caregiver.”

**RECOMMENDATION:** Oppose H.R. 3717 (Murphy).

**COUNCIL STRATEGIC PLAN OBJECTIVE:** Goal 14: Public policy. Public policy in California promotes the independence, productivity, inclusion and self-determination of individuals with developmental disabilities and their families.

**ATTACHMENTS:** None

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