

AMENDED IN ASSEMBLY MAY 18, 2023

CALIFORNIA LEGISLATURE—2023–24 REGULAR SESSION

**ASSEMBLY BILL**

**No. 649**

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**Introduced by Assembly Member Wilson**

February 9, 2023

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An act to amend Section 4659 of the Welfare and Institutions Code, relating to developmental services.

LEGISLATIVE COUNSEL'S DIGEST

AB 649, as amended, Wilson. Developmental services.

The Lanterman Developmental Disabilities Services Act makes the State Department of Developmental Services responsible for providing various services and supports to individuals with developmental disabilities, and for ensuring the appropriateness and quality of those services and supports. Pursuant to that law, the department contracts with regional centers to provide services and supports to persons with developmental disabilities.

Existing law prohibits regional centers from purchasing any service that would otherwise be available from Medi-Cal, Medicare, and private insurance, among other sources, when a consumer or a consumer's family meets the criteria of this coverage, but chooses not to pursue that coverage. Existing law also prohibits regional centers from purchasing medical or dental services for a consumer 3 years of age or older unless the regional center is provided with documentation of a Medi-Cal, a private insurance, or a health care service plan denial, and the regional center determines that an appeal *of the denial* by the consumer or the consumer's family ~~of the denial~~ does not have merit.

~~This bill would delete both of those prohibitions on regional center purchases.~~

*This bill would remove the requirement for the regional center to determine that the appeal of the denial by the consumer or the consumer's family does not have merit. The bill also would specify that a consumer or family is not required to appeal the denial of services from another agency that has a legal responsibility to serve all members of the general public and is receiving public funds for providing those services in order for a regional center to purchase those services as part of a consumer's individual program plan.*

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1        *SECTION 1. Section 4659 of the Welfare and Institutions Code*  
2        *is amended to read:*

3        4659. (a) Except as otherwise provided in subdivision (b) or  
4        (e), the regional center shall identify and pursue all possible sources  
5        of funding for consumers receiving regional center services. These  
6        sources shall include, but not be limited to, both of the following:

7        (1) Governmental or other entities or programs required to  
8        provide or pay the cost of providing services, including Medi-Cal,  
9        Medicare, the Civilian Health and Medical Program for Uniform  
10      Services, school districts, and federal supplemental security income  
11      and the state supplementary program.

12       (2) Private entities, to the maximum extent they are liable for  
13      the cost of services, aid, insurance, or medical assistance to the  
14      consumer.

15       (b) Any revenues collected by a regional center pursuant to this  
16      section shall be applied against the cost of services prior to use of  
17      regional center funds for those services. This revenue shall not  
18      result in a reduction in the regional center's purchase of services  
19      budget, except as it relates to federal supplemental security income  
20      and the state supplementary program.

21       (c) Effective July 1, 2009, notwithstanding any other law or  
22      regulation, regional centers shall not purchase any service that  
23      would otherwise be available from Medi-Cal, Medicare, the  
24      Civilian Health and Medical Program for Uniform Services,  
25      In-Home Support Services, California Children's Services, private  
26      insurance, or a health care service plan when a consumer or a  
27      family meets the criteria of this coverage but chooses not to pursue

1 that coverage. If, on July 1, 2009, a regional center is purchasing  
2 that service as part of a consumer's individual program plan (IPP),  
3 the prohibition shall take effect on October 1, 2009.

4 (d) (1) Effective July 1, 2009, notwithstanding any other law  
5 or regulation, a regional center shall not purchase medical or dental  
6 services for a consumer three years of age or older unless the  
7 regional center is provided with documentation of a Medi-Cal,  
8 private insurance, or a health care service plan ~~denial~~ and the  
9 regional center determines that an appeal by the consumer or family  
10 of the denial does not have merit. If, on July 1, 2009, a regional  
11 center is purchasing the service as part of a consumer's IPP, this  
12 provision shall take effect on August 1, 2009. *denial*. Regional  
13 centers may pay for medical or dental services during the following  
14 periods:

15 (A) While coverage is being pursued, but before a denial is  
16 made.

17 (B) Pending a final administrative decision on the administrative  
18 appeal if the family has provided to the regional center a  
19 verification that an administrative appeal is being pursued.

20 (C)

21 (B) Until the commencement of services by Medi-Cal, private  
22 insurance, or a health care service plan.

23 (2) ~~When necessary, the consumer or family may receive~~  
24 assistance from the regional center, the Clients' Rights Advocate  
25 funded by the department, or the state council in pursuing these  
26 appeals. A consumer or family shall not be required to appeal the  
27 denial of services from another agency that has a legal  
28 responsibility to serve all members of the general public and is  
29 receiving public funds for providing those services in order for a  
30 regional center to purchase those services as part of a consumer's  
31 IPP.

32 (e) This section shall not impose any additional liability on the  
33 parents of children with developmental disabilities, or to restrict  
34 eligibility for, or deny services to, any individual who qualifies  
35 for regional center services but is unable to pay.

36 (f) In order to best utilize generic resources, federally funded  
37 programs, and private insurance programs for individuals with  
38 developmental disabilities, the department and regional centers  
39 shall engage in the following activities:

1       (1) Within existing resources, the department shall provide  
2 training to regional centers, no less than once every two years, in  
3 the availability and requirements of generic, federally funded and  
4 private programs available to persons with developmental  
5 disabilities, including, but not limited to, eligibility requirements,  
6 the application process and covered services, and the appeal  
7 process.

8       (2) Regional centers shall disseminate information and training  
9 to all service coordinators regarding the availability and  
10 requirements of generic, federally funded, and private insurance  
11 programs on the local level.

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