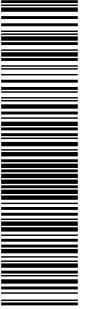


An act to amend Sections 4519.2 and 4572 of, to amend and repeal Section 4731 of, to add Chapter 16 (commencing with Section 4890) to Division 4.5 of, and to repeal Section 4892 of, the Welfare and Institutions Code, relating to developmental services.

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THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

SECTION 1. Section 4519.2 of the Welfare and Institutions Code is amended to read:

4519.2. (a) ~~Through the Developmental Services Task Force, the~~ The department shall identify key indicators to track the regional center system's delivery of services. These indicators shall include both local and statewide measures and shall include a recommendation for analysis and followup of any concerning trends, as well as a plan for reporting of best practices for use statewide. The department, with stakeholder input, shall also identify recommendations for measuring outcomes and improving outcomes for consumers. Goals for system improvement include enhancement of customer services for consumers and their families, facilitation of enhanced communication between regional centers and the state, and identification and dissemination of best practices for developmental services providers. The department shall report these recommended indicators, best practices, and recommendations for analysis to the Legislature no later than January 10, 2021.

(b) (1) Each regional center shall post the following information on its internet website in a format determined by the department no later than April 1, 2020, and shall update the information no less frequently than every six months until the department determines that statewide compliance with the federal Home and Community-Based Services (HCBS) Final Rule has been met, or January 1, 2025, whichever is earlier:

(A) The number of providers identified as needing assessment for HCBS compliance, broken down by provider type, as defined by the department.

(B) The number of providers within each provider type that have been inspected or reviewed for HCBS compliance.

(C) The number of providers within each provider type that have been determined to be HCBS compliant.

(D) The number of providers within each provider type that have been determined not to be HCBS compliant and the reason for lack of compliance.

(E) The number of providers, broken down by provider type, that have been identified as presumed to have the qualities of an institutional setting, as described in Sections 441.301(c)(5)(v) and 441.710(a)(2)(v) of Title 42 of the Code of Federal Regulations.

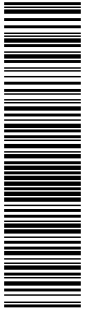
(2) The department shall provide this information to the Legislature as statewide data and for each regional center, no later than May 1, 2020, and shall post that summary on its internet website.

(3) Beginning July 1, 2026, the department shall post the information described in paragraph (1) on its internet website, and shall update the information no less frequently than every six months to monitor compliance with the federal Home and Community-Based Services (HCBS) Final Access Rule. The information may be collected through the statewide provider directory, the Life Outcomes Improvement System, or any other means identified by the department.

(c) (1) The department shall update the Legislature annually, beginning on January 10, 2020, with the number of complaints filed at each regional center pursuant to Section 4731 for the prior fiscal year, and include the following information:

(A) The subject matter of complaints filed.

(B) How complaints were resolved.



(C) The timeframe within which resolutions to those complaints were provided by the regional center.

(D) The number of complaints that were appealed to the department, their resolution, and the timeframe within which a written administrative decision was issued.

(E) Demographic information, as identified by the department, about consumers on whose behalf the complaint was filed, including the ethnicity of the consumer.

(2) The update shall include data for the prior two fiscal years, as available.

(3) The department shall also post this data on its internet website.

(d) The department and each regional center shall include on their internet websites a link to the protection and advocacy agency designated pursuant to Division 4.7 (commencing with Section 4900) and the clients' rights advocate contracted with pursuant to Section 4433. This link shall be posted on the home page of their internet websites, or in another standard location determined by the department.

(e) On and after October 1, 2019, the department shall post all new directives that it issues to regional centers on its internet website.

(f) Any reports submitted by the department to the Legislature pursuant to this section shall be submitted in compliance with Section 9795 of the Government Code.

SEC. 2. Section 4572 of the Welfare and Institutions Code is amended to read:

4572. The State Department of Developmental Services shall develop and implement a plan to monitor, evaluate, and improve the quality of community-based services through the use of a performance dashboard. The department shall work with stakeholders, including, but not limited to, regional centers, consumer advocates, providers, and the Legislature, on the development of the dashboard. The dashboard shall be published annually and in a machine-readable format. Each regional center shall publish its own dashboard and shall post a link to the department's dashboard on its internet website. The dashboard shall include, but not be limited to, all of the following metrics:

(a) Recognized quality and access measures.

(b) Measures to indicate the movement toward compliance with the federal Home and Community-Based Services Waiver rules (CMS 2249-F and CMS 2296-F).

(c) Measures to evaluate the changes in the number of consumers who work in competitive integrated employment.

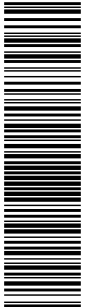
(d) ~~The~~ (1) Until July 1, 2026, the number of complaints referred to the department pursuant to subdivision (c) of Section 4731, for every 1,000 consumers served, by each regional center.

(2) Commencing July 1, 2026, the information described in subdivision (o) of Section 4891.

(e) The number of administrative fair hearings held pursuant to Article 3 (commencing with Section 4710) of Chapter 7, separated by eligibility and service issues, for individuals ages three and over, for every one thousand consumers served, by each regional center.

SEC. 3. Section 4731 of the Welfare and Institutions Code is amended to read:

4731. (a) Each consumer or any representative acting on behalf of any consumer or consumers, who believes that any right to which a consumer is entitled has been abused, punitively withheld, or improperly or unreasonably denied by a regional center, state-operated facility, or service provider, may pursue a complaint as provided in this section.



(b) Initial referral of any complaint taken pursuant to this section shall be to the director of the regional center from which the consumer receives case management services. If the consumer resides in a state-operated facility, the complaint shall be made to the director of the state-operated facility. The director shall, within 20 working days of receiving a complaint, investigate the complaint and send a written proposed resolution to the complainant and, if applicable, to the service provider. The written proposed resolution shall include a telephone number and mailing address for referring the proposed resolution in accordance with subdivision (c).

(c) If the complainant is not satisfied with the proposed resolution, the complainant may refer the complaint, in writing, to the Director of Developmental Services within 15 working days of receipt of the proposed resolution. The director shall, within 45 days of receiving a complaint, issue a written administrative decision and send a copy of the decision to the complainant, the director of the regional center or state-operated facility, and the service provider, if applicable. If there is no referral to the department, the proposed resolution shall become effective on the 20th working day following receipt by the complainant.

(d) The department shall annually compile the number of complaints filed, by each regional center and state-operated facility, the subject matter of each complaint, and a summary of each decision. Copies shall be made available to any person upon request.

(e) This section shall not be used to resolve disputes concerning the nature, scope, or amount of services and supports that should be included in an individual program plan, for which there is an appeals procedure established in this division, or disputes regarding rates or audit appeals for which there is an appeals procedure established in regulations. Those disputes shall be resolved through the appeals procedure established by this division or in regulations.

(f) All consumers or, if appropriate, their authorized representative, shall be notified in writing in their preferred language of the right to file a complaint pursuant to this section when they apply for services from a regional center or a state-operated facility, and at each regularly scheduled planning meeting.

(g) Any complaint filed prior to July 1, 2026, shall continue to be addressed pursuant to the provisions of this section as it read immediately preceding its repeal by the act that added this subdivision.

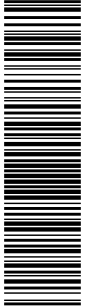
(h) This section shall become inoperative on July 1, 2026, and, as of January 1, 2027, is repealed.

SEC. 4. Chapter 16 (commencing with Section 4890) is added to Division 4.5 of the Welfare and Institutions Code, to read:

CHAPTER 16. GRIEVANCE PROCESS

4890. For the purposes of this chapter, the following terms have the following meanings:

- (a) "Authorized representative" has the same meaning as in Section 4701.
- (b) "Day" means a calendar day.
- (c) "Grievance" means an expression of dissatisfaction related to the regional center, service provider, or state-operated facility's performance of the activities described in Section 441.301(c)(1) to 441.301(c)(6) of Title 42 of the Code of Federal



Regulations or a violation of an individual's rights as described in Sections 4502, 4502.1 and 4503. For the purposes of this chapter, "grievance" does not include an expression of dissatisfaction regarding eligibility for and the provision of services to which Chapter 7 (commencing with Section 4700) applies, or regarding rates or audit appeals for which there is an appeals procedure established in regulations.

(d) "Grievance reviewer" means an individual with subject matter expertise related to the grievance who reviews the grieved issue, including information submitted by griever, and who was not involved in the situation or decisionmaking that resulted in the grievance, or a subordinate of a person so involved.

(e) "Griever" means a person who files a grievance pursuant to this chapter and who meets any of the following descriptions:

(1) An individual with a developmental or intellectual disability who has applied for, been determined to be eligible to receive, or receives services from a regional center or a state-operated facility.

(2) The authorized representative of a person described in paragraph (1).

(3) (A) Any other individual who files a grievance pursuant to this chapter, with the prior written consent of a person described in paragraph (1) or (2), which meets the requirements for the release of information under the Health Insurance Portability and Accountability Act Privacy Rule in Part 164 (commencing with Section 164.102) of Subchapter C of Subtitle A of Title 45 of the Code of Federal Regulations.

(B) A service provider shall not file a grievance that would be a conflict of interest, as established by the department.

(f) "Preferred language" means the language preferred by the griever.

(g) "Resolution plan" means a written summary of the actions to be taken by a regional center, service provider, or state-operated facility to address the grievance and includes all of the following:

(1) A general description of the reason for the grievance.

(2) The date the grievance was received.

(3) The date of each grievance review or, if applicable, grievance review meeting.

(4) The resolution of the grievance, as applicable.

(5) The date of resolution of the grievance, if applicable.

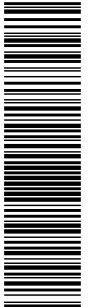
(6) The name of the individual with a developmental or intellectual disability who has applied for, been determined to be eligible to receive, or actually receives, services from a regional center or a state-operated facility for whom the grievance was filed.

4891. (a) A griever desiring to file a grievance shall submit the grievance to the department. A grievance may be submitted online, orally, or in writing by the griever in accordance with this chapter. Upon receipt of a grievance, the griever shall receive an acknowledgment from the department of its receipt.

(b) All consumers, or if appropriate, their authorized representative, shall be notified in writing in their preferred language of the right to submit a grievance pursuant to this chapter from the regional center or state-operated facility.

(c) Upon request, the department and regional centers shall provide grievors with reasonable assistance in completing forms, taking procedural steps, and appropriately filing a grievance with the department.

(d) The department shall refer grievances to the associated regional center or state-operated facility to address. The grievance shall be reviewed within five days,



with priority for review if there is an indication of serious harm or risk of serious harm to the individual.

(e) Regional centers and state-operated facilities shall not take punitive or retaliatory action or threat of action against a griever.

(f) Upon receipt of a grievance, the regional center or state-operated facility shall assign a grievance reviewer. The regional center or state-operated facility shall provide the griever a reasonable opportunity, face-to-face including through the use of audio or video technology, or in writing, to present evidence, information, or testimony and make legal and factual arguments related to their grievance.

(g) The griever shall be provided a copy of, or access to, the consumer's case file, including, but not limited to, information considered, relied upon, and generated by the regional center or state-operated facility related to the grievance. The regional center or state-operated facility shall provide this information free of charge and within three business days from the date the grievance was referred by the state.

(h) The regional center or state-operated facility's grievance reviewer shall review the grievance and send a resolution plan to the griever, the department, and, if applicable, to the service provider. The regional center or state-operated facility's grievance reviewer shall produce and sign the resolution plan within 60 days of the date that the grievance was filed.

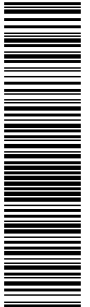
(i) Resolutions included in the resolution plan may include, but are not limited to, convening the individual program planning team, ongoing communication or meetings with the regional center or state-operated facility, completion of any identified steps in the resolution plan, or a statement regarding the outcome of an investigation of alleged noncompliance with the home- and community-based settings rules.

(j) The regional center or state-operated facility may extend the timeframe specified in subdivision (h) up to 14 days if the griever requests the extension or if the regional center or state-operated facility documents that there is need for additional information and how the delay is in the griever's best interest. If the regional center or state-operated facility extends the timeframe not at the request of the individual or griever, it shall do both of the following:

- (1) Make reasonable efforts to give the griever prompt oral notice of the delay.
- (2) Within 2 days of determining that there is a need for a delay, but no later than 60 days from receipt of the grievance, give the griever written notice of the reason for the decision to extend the timeframe.

(k) A griever who is not satisfied with the regional center's or state-operated facility's resolution plan may request a review by the department within seven days of receiving the resolution plan. An extension for good cause may be granted by the department. For the purposes of this subdivision, good cause includes, but is not limited to, the following circumstances:

- (1) The death of a spouse, parent, child, brother, sister, or grandparent of the griever, individual served, or their authorized representative.
- (2) Personal illness or injury of the griever, individual served, or their authorized representative.
- (3) Sudden and unexpected emergencies, including, but not limited to, illness, hospitalization, unexpected travel, court appearances or detention if the conflict is beyond the control of the griever, individual served, or their authorized representative.



(4) The unavailability of information or documentation, the absence of which would result in prejudice to the grievor or individual served or the regional center or state-operated facility.

(5) An intervening request for assistance by the grievor, individual served, or their authorized representative.

(l) If a review is requested pursuant to subdivision (k), the department shall review the resolution plan for relative appropriateness to the grievance and, within 21 days, shall notify the grievor, regional center or state-operated facility, and, if applicable, the service provider, of its determination.

(m) The department shall annually review a sample of resolution plans for each regional center and state-operated facility.

(n) The department shall annually post the deidentified results of the review described in subdivision (m) on its internet website. The department shall use the review to determine operational or systemic problems within a regional center or state-operated facility. The department shall identify and implement options to address identified issues, which may include, but are not limited to, providing technical assistance or training to regional centers or state-operated facilities, or identifying potential policy changes.

(o) The department shall annually post, at a minimum, all of the following information on its internet website:

(1) The number of grievances received by the department annually.

(2) The average number of days for each regional center or state-operated facility to respond to grievances.

(3) The number of grievances that resulted in a request for department review.

(4) The percentages of grievances that were resolved in favor of the grievor, the entity about whom the grievance was filed, or some combination thereof.

(5) The number and type of grievances that resulted in the department providing the regional center or state-operated facility technical assistance pursuant to subdivision (n).

4892. (a) The department shall convene stakeholders no later than August 1, 2027, in order to receive input regarding the implementation of this chapter.

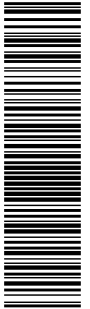
(b) (1) The department shall submit a report to the Legislature on the implementation of this chapter, including stakeholder input received pursuant to subdivision (a), no later than December 1, 2027.

(2) (A) A report to be submitted pursuant to paragraph (1) shall be submitted in compliance with Section 9795 of the Government Code.

(B) Pursuant to Section 10231.5 of the Government Code, this section is repealed on January 1, 2031.

4893. This chapter applies to any grievance filed on or after July 1, 2026. Any grievance filed prior to July 1, 2026, shall continue to be addressed pursuant to the provisions of Section 4731, as it read immediately preceding its repeal by the act that added this section.

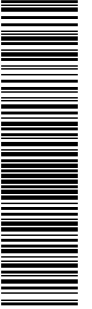
4894. Notwithstanding the rulemaking provisions of the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code), the department may implement, interpret, or make specific this section by means of written directives or similar instructions, after consultation with individuals, families, caregivers, service providers, regional centers,



and advocates. These directives and instructions shall include maintaining compliance with federal requirements and guidance issued by the federal Centers for Medicare and Medicaid Services.

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LEGISLATIVE COUNSEL'S DIGEST

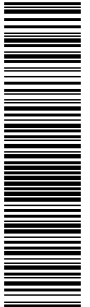
Bill No.
as introduced, _____.
General Subject: Developmental services: complaints.

Existing law, the Lanterman Developmental Disabilities Services Act, requires the State Department of Developmental Services to contract with regional centers for the provision of community services and supports for persons with developmental disabilities and their families. Under the act, a regional center is required to post specified information on its internet website, and update the information no less frequently than once every 6 months, until the department determines that there is statewide compliance with the federal Home and Community-Based Services (HCBS) Final Rule, or January 1, 2025, whichever occurs first.

This bill would require the department, beginning July 1, 2026, to post that information on its internet website and update the information no less frequently than every 6 months to monitor compliance with the HCBS Final Access Rule.

Existing law provides that a consumer, or any representative acting on behalf of a consumer or consumers, who believes that a right to which a consumer is entitled has been abused, punitively withheld, or improperly or unreasonably denied by a regional center, state-operated facility, or service provider, may pursue a complaint and establishes a procedure for processing of those complaints. Pursuant to that procedure, existing law requires the initial referral of a complaint to be made to the director of the regional center, or the director of the state-operated facility, as applicable, and requires the complaint to be investigated and a proposed resolution sent within 20 working days of receiving the complaint. Existing law authorizes, if the complainant is not satisfied with the proposed resolution, the complainant to refer the complaint, in writing, to the Director of Developmental Services, who is required to issue a written administrative decision on the complaint within 45 days of its receipt.

This bill would make that procedure applicable only to complaints filed prior to July 1, 2026, and would establish a new procedure to apply to grievances filed on or after July 1, 2026. The bill would require, under that new procedure, grievances to be filed with the department and the department to refer the grievance to the applicable regional center or state-operated facility. The bill would require the grievance to be reviewed within 5 days and would require the griever to be given an opportunity to present evidence, information, or testimony and make legal and factual arguments related to their grievance. The bill would require the grievance reviewer to send, produce, and sign a resolution plan within 60 days of the date that the grievance was filed, subject to extension, as specified. The bill would authorize the griever to request a review of the resolution plan by the department, and would require the department to make a determination on it within 21 days. The bill would require the department to review a sample of resolution plans and annually post the deidentified results of that review, as well as certain additional information related to grievances, on its internet



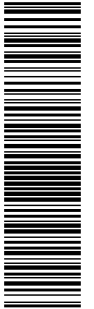
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website. The bill would authorize the department to implement these provisions by means of written directives or similar instructions.

The bill would require the department to convene stakeholders by August 1, 2027, to receive input regarding implementation of these provisions, and to submit a report to the Legislature on the implementation of these provisions no later than December 1, 2027.

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

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