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An act to add Section 4659.1 to 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 4659.1 is added to the Welfare and Institutions Code, to read:

4659.1. (a) If a service or support provided pursuant to a consumer’s individual program plan under this division or individualized family service plan pursuant to the California Early Intervention Services Act (Title 14 (commencing with Section 95000) of the Government Code) is paid for in whole or in part by the consumer’s parents’ private insurance, when necessary to ensure that the consumer receives the service or support, the regional center may pay any applicable copayment associated with the service or support for which the parents are responsible if all of the following conditions are met:

- (1) The consumer is covered by his or her parent’s health insurance plan.
- (2) The family has an annual gross income that does not exceed 400 percent of the federal poverty level.
- (3) There is no other third party having liability for the cost of the service or support, as provided in subdivision (a) of Section 4659 and Article 2.6 (commencing with Section 4659.10).

(b) If a service or support provided to a consumer 18 years of age or older, pursuant to his or her individual program plan, is paid for in whole or in part by the consumer’s private insurance, when necessary to ensure that the consumer receives the service or support, the regional center may pay any applicable copayment associated with the service or support for which the consumer is responsible if both of the following conditions are met:



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(1) The consumer has an annual gross income that does not exceed 400 percent of the federal poverty level.

(2) There is no other third party having liability for the cost of the service or support, as provided in subdivision (a) of Section 4659 and Article 2.6 (commencing with Section 4659.10).

(c) Notwithstanding paragraph (2) of subdivision (a) or paragraph (1) of subdivision (b), a regional center may pay a private insurance copayment for a service or support provided pursuant to a consumer's individual program plan or individualized family service plan if the family's or consumer's income exceeds 400 percent of the federal poverty level, if the service or support is necessary to successfully maintain the child at home or the adult consumer in the least-restrictive setting and the parents or consumer demonstrate one or more of the following:

(1) The existence of an extraordinary event that impacts the parents' ability to meet the care and supervision needs of the child or impacts the ability of the parent, or adult consumer with private insurance, to pay the copayment.

(2) The existence of catastrophic loss that temporarily limits the ability of the parents, or adult consumer having private insurance, to pay and creates a direct economic impact on the family or adult consumer. For purposes of this paragraph, catastrophic loss may include, but is not limited to, natural disasters and accidents involving major injuries to an immediate family member.

(3) Significant unreimbursed medical costs associated with the care of the consumer or another child who is also a regional center consumer.



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(d) The parents of a consumer or an adult consumer with private insurance shall self-certify their gross annual income to the regional center by providing copies of W-2 Wage Earners Statements, payroll stubs, a copy of the prior year's state income tax return, or other documents and proof of other income.

(e) The parents of a consumer or an adult consumer with private insurance are responsible for notifying the regional center when a change in income occurs that would result in a change in eligibility for coverage of private insurance copayments.

(f) Documentation submitted pursuant to this section shall be considered records obtained in the course of providing intake, assessment, and services and shall be confidential pursuant to Section 4514.

(g) Regional centers shall not pay private insurance deductibles.

(h) This section shall not be implemented in a manner that is inconsistent with the requirements of Part C of the federal Individuals with Disabilities Education Act (20 U.S.C. Sec. 1431 et seq.).



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LEGISLATIVE COUNSEL'S DIGEST

Bill No.

as introduced, _____

General Subject: Developmental services: health insurance copayments.

Under existing law, the Lanterman Developmental Disabilities Services Act, the State Department of Developmental Services is authorized to contract with regional centers to provide services and supports to individuals with developmental disabilities. The services and supports to be provided to a regional center consumer are contained in an individual program plan (IPP), developed in accordance with prescribed requirements.

This bill would authorize a regional center to pay any applicable copayment for a service and support required by a consumer's IPP if the consumer or his or her parents have the service paid for by a private insurer if specified conditions are met. The bill would prohibit a regional center from paying a private insurance deductible.

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

