

STD. 400 (REV. 01-2013)

OAL FILE NUMBERS	NOTICE FILE NUMBER Z-	REGULATORY ACTION NUMBER 2019-0314-04S	EMERGENCY NUMBER
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For use by Office of Administrative Law (OAL) only

<p style="text-align: center;">NOTICE</p>	<p style="text-align: center;">REGULATIONS</p>
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ENDORSED - FILED
in the office of the Secretary of State
of the State of California

APR 22 2019
1:47 PM

2019 MAR 27 P 12:37
OFFICE OF ADMINISTRATIVE LAW

AGENCY WITH RULEMAKING AUTHORITY
Department of Developmental Services

AGENCY FILE NUMBER (if any)

A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE Speech-language Pathology	TITLE(S) 17	FIRST SECTION AFFECTED 54319	2. REQUESTED PUBLICATION DATE June 2019
3. NOTICE TYPE <input checked="" type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON Jim Knight	TELEPHONE NUMBER 916-654-2759	FAX NUMBER (Optional)
OAL USE ONLY	ACTION ON PROPOSED NOTICE <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	NOTICE REGISTER NUMBER	PUBLICATION DATE

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Speech-language Pathology	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
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2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)	ADOPT
	AMEND Sections 54319 and 54342
	REPEAL
TITLE(S) 17	

3. TYPE OF FILING

<input checked="" type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<input type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))		<input type="checkbox"/> Other (Specify) _____	

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)
09/21/2018 through 12/05/2018

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)


<input checked="" type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))	<input type="checkbox"/> Effective on filing with Secretary of State	<input type="checkbox"/> \$100 Changes Without Regulatory Effect	<input type="checkbox"/> Effective other (Specify) _____
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6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY

<input checked="" type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal
<input type="checkbox"/> Other (Specify) _____		

7. CONTACT PERSON Jim Knight	TELEPHONE NUMBER 916-654-279	FAX NUMBER (Optional)	E-MAIL ADDRESS (Optional) Jim.knight@dds.ca.gov
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8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE 	DATE 3/26/19
TYPED NAME AND TITLE OF SIGNATORY John Doyle, Chief Deputy Director	

For use by Office of Administrative Law (OAL) only

ENDORSED APPROVED

APR 22 2019

Office of Administrative Law

**Speech-language Pathology & Speech-language Pathology Assistant
California Code of Regulations
Title 17, Division 2, Chapter 3 - Community Services;
Sub-Chapter 2 - Vendorization;
Article 2 - Vendorization Process**

Final Text

Section 54319. Group Practices.

(a) Services which shall apply to both individuals and group practices include:

- (1) Adaptive Skills Trainer -- Service Code 605;
- (2) Art Therapist -- Service Code 691;
- (3) Associate Behavior Analyst -- Service Code 613;
- (4) Attorney -- Service Code 610;
- (5) Behavior Analyst -- Service Code 612;
- (6) Behavior Management Consultant -- Service Code 620;
- (7) Counseling Services -- Service Code 625;
- (8) Dance Therapist -- Service Code 692;
- (9) Developmental Specialist -- Service Code 670;
- (10) Educational Psychologist -- Service Code 672;
- (11) Music Therapist -- Service Code 693;
- (12) Recreational Therapist -- Service Code 694;
- (13) Speech Pathology—Service Code 707;
- ~~(134)~~ Teacher -- Service Code 674;
- ~~(145)~~ Teacher of Special Education -- Service Code 678;
- ~~(156)~~ Tutor -- Service Code 680;
- ~~(167)~~ Dentistry -- Service Code 715;
- ~~(178)~~ Dietary Services (Dietitian only) -- Service Code 720;
- ~~(189)~~ Laboratory and Radiologic Services -- Service Code 735;
- ~~(1920)~~ Occupational Therapy -- Service Code 773;
- ~~(201)~~ Orthoptic Services -- Service Code 745;
- ~~(212)~~ Orthotic and Prosthetic Services -- Service Code 750;
- ~~(223)~~ Other Medical Equipment or Supplies -- Service Code 750;
- ~~(234)~~ Other Medical Services -- Service Code 760;
- ~~(245)~~ Pharmaceutical Services -- Service Code 765;
- ~~(256)~~ Physical Therapy -- Service Code 772;
- ~~(267)~~ Physicians or Surgeons -- Service Code 775;
- ~~(278)~~ Psychiatrist -- Service Code 780;
- ~~(289)~~ Clinical Psychologist -- Service Code 785; and
- ~~(2930)~~ Genetic Counselor -- Service Code 800.

Note

Authority cited: Sections 4405 and 4648(a), Welfare and Institutions Code; and Section 11152, Government Code. Reference: Sections 4631, 4648(a) and 4691, Welfare and Institutions Code.

**Speech-language Pathology & Speech-language Pathology Assistant
California Code of Regulations
Title 17, Division 2, Chapter 3—Community Services;
Sub-Chapter 2—Vendorization;
Article 3—Vendor Numbers and Services Codes**

Final Text

Section 54342. Types of Services.

(75) Speech Pathology - Service Code 707. A regional center shall classify a vendor as a provider of speech-language pathology services if the vendor is:

(A) A speech-language pathologist who is validly licensed as a speech-language pathologist by the Speech Pathology and Audiology Examining Committee of the Medical Board of California; as specified in the California Business and Professions Code, Division 2, Healing Arts, Chapter 5.3, Speech-Language Pathologists and Audiologists; and provides:

1. Diagnostic screening and assessment; and
2. Preventative and corrective therapy for persons with speech or language or swallowing disorders;

(B) A speech-language pathology assistant who is validly licensed in the State of California and performs the duties and functions as specified in the Business and Professions Code, Division 2, Healing Arts, Chapter 5.3, Speech-Language Pathologists and Audiologists, Sections 2538-2538.7, and works under supervision of a qualified licensed speech-language pathologist in a group practice.

Note

Authority cited: Sections 4405, 4648(a) and 4686.3, Welfare and Institutions Code; and Section 11152, Government Code. Reference: Sections 4631, 4648(a) and 4691, Welfare and Institutions Code.