Guidelines

for

Regional Center Community Placement Plan

and

Community Resource Development Plan

For

Fiscal Year 2019-20 Requests

September 25, 2019
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Department of Developmental Services

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and
Community Resource Development Plan
Guidelines

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The Department of Developmental Services (Department) has statutory responsibility to ensure that individuals with developmental disabilities live in the least restrictive setting, appropriate to their needs. Under the authority of Welfare and Institutions Code (WIC) Section 4418.25 and Section 4679 [Enclosure A], the Department shall establish policies and procedures for the development and submission of annual Community Placement Plan (CPP) and Community Resource Development Plan (CRDP) funding proposals by regional centers.

I. Background

Effective July 1, 2012, a moratorium was placed on developmental center (DC) admissions unless an individual is admitted to a “Stabilization, Training, Assistance, Reintegration (STAR)” facility to restore competency, is determined to be incompetent to stand trial, or is in an acute crisis as defined by WIC Section 4418.7(d)(1).

WIC Section 4418.7 authorizes admission of an individual to a STAR facility due to an acute crisis pursuant to a court order and the approval of the Department.

The 2015 Budget Trailer Bill, Senate Bill 82, added WIC Section 4474.11, requiring the Department to submit to the Legislature by October 1, 2015, a plan or plans to close one or more DCs. The Department solicited input from a broad range of stakeholders, including residents of the DCs, and held public meetings in the communities in which the DCs are located to provide an opportunity for public input. On April 1, 2016, the Department submitted its plan for the closures of Fairview DC and the General Treatment Area of Porterville DC.

The 2017 Budget Trailer Bill, Assembly Bill 107, amended WIC Section 4418.25 and added WIC Section 4679, authorizing the Department—when it determines that sufficient funding has been appropriated and reserved for a fiscal year for purposes of the CPP—to allocate the remaining CPP funds to regional centers for purposes of community resource development to address services and supports needs of individuals living in the community, and to issue guidelines on the use of these funds.

II. Goals

The Department’s goals for the CPP and the CRDP is to be responsive to the changing needs of individuals receiving services through the overall framework of California’s developmental disabilities services system and enhance the capacity for community services.
The CPP and CRDP are designed to support three of the Department's goals:

**Goal One:** *Expand the availability, accessibility and types of services and supports to meet current and future needs of individuals and their families in the community.*

**Goal Two:** *Develop systems to ensure that quality services and supports in the least restrictive environment are provided to individuals in the community.*

**Goal Three:** *Develop services that are person-centered and represent the diversity of the regional center’s catchment area.*

### III. Priorities

Proposals submitted by the regional center should be driven by the outcomes of annual comprehensive and updated assessments of individuals residing at the DCs, Canyon Springs, a STAR facility, an Institution for Mental Diseases (IMD), or out-of-state, and the current and emerging needs of their community. The proposals must reflect collaborative efforts between the regional center(s), the individual and his or her family, the DC, and the regional resource development project, with consideration of stakeholder input. The Department supports collaborative proposals between two or more regional centers to develop specialized resources to meet the statewide needs of individuals who have challenging service needs. Regional centers shall ensure that proposed and approved projects include principles of person-centered service planning and that funded services are culturally and linguistically appropriate to the population served by the regional center. [WIC Section 4679(a)]

Due to the mandated closures of Fairview DC and the General Treatment Area of Porterville DC, the transition of all individuals residing at these DCs to community services and the development of safety net facilities and crisis intervention services, shall be considered a priority and addressed in regional center CPPs.

The Department's statewide priorities for development of the CPP include the following:

- Development of safety net, crisis, and support services;
- Meeting individual and community needs for developing specialized services, including regional community services for individuals with challenging service needs;
- Development and/or identification of community living options and other resources for individuals residing at or transitioning from DCs, STAR facilities, Canyon Springs, IMDs, Safety Net facilities, out-of-state and crisis services, consistent with comprehensive assessments (see Section III. C.);
- Development of community care residential services including Enhanced Behavioral Supports Homes [WIC Section 4684.80], Community Crisis Homes [WIC Section 4698], and Transitional Homes;
• Development of resources reflective of a regional center’s community needs, based on data and community input from stakeholder community engagement;
• Requirement to demonstrate the proposed project will be in compliance with the Home and Community-Based Services (HCBS) Final Rule. [Enclosure B]

The Department’s statewide priorities for development of the CRDP include:
• Regional centers establishing priorities that reflect how individual and community needs are incorporated in CRDP funding proposals; evaluating current crisis services and supports that reflect current resources; and a plan for development of additional crisis resources to address identified needs. Priority should continue to focus on supporting individuals in their homes, but also have alternative options when not feasible.
• Evaluating the inventory of consumer crisis services such as mobile crisis teams and/or wrap around services;
• But are not limited to, the development of the following service options:
  o Specialized residential options for adolescents or adults with unique medical and/or challenging services needs
  o Affordable housing
  o Employment
  o Mental health services and supports, when generic resources are not able to meet individual needs
  o Early Intervention Services
  o Specialized dental services not covered by generic resources
• Requirement to demonstrate the proposed project will be in compliance with the Home and Community-Based Services (HCBS) Final Rule.

IV. CPP and CRDP Proposals

Fiscal Year (FY) 2019-20 proposals for Placement, Assessment, Start-Up (CPP and/or CRDP), Deflection Placement Purchase of Service (POS), and Operations (OPS) funding must be justified based upon the regional center’s comprehensive analysis of their individuals residing at DCs (including the Porterville DC Secure Treatment Program) and Canyon Springs; historical and projected placements from DCs (including Porterville DC Secure Treatment Program and Canyon Springs); individuals who receive services out of state; individuals residing in IMDs; individuals residing in acute psychiatric facilities beyond what is therapeutically necessary; and other service development needs, as identified.

The Department will work in collaboration with each regional center to develop CPP and CRDP budgets and establish priorities. When developing a new CPP and CRDP proposal, consideration should be given to all the CPP Start-Up and CRDP projects currently in progress and the regional center’s ability to complete those projects, including projects that are in collaboration with the Southern California Integrated Health
and Living Project. The regional center should consider current community options with capacity as available resources prior to proposing new development.

FY 2019-20 CPP proposals shall include the following:

A. **Placement Funding Requests**

CPP Placement funding is available for individuals who currently reside at a DC, Canyon Springs, a STAR facility\(^1\), an IMD, or are receiving services out-of-state and are projected to move to the community within California.

For tracking and utilization purposes, each placement will be identified as “DC” (which includes all DCs and Canyon Springs), “STAR”, “IMD”, or “OOS” (indicating out-of-state). Placement funding shall be based on projected service and support costs for those individuals projected to be placed in FY 2019-20, and include only costs associated with transitioning and maintaining an individual previously living in a DC, a STAR facility, an IMD, or an out-of-state placement.

Placement funding will be allocated based on claims associated with CPP placements occurring during the fiscal year. For individuals who transitioned from an IMD or an out-of-state placement, only the placement and transition costs above what the expenditure for services, per individual, is prior to transitioning into the community, will be funded.

In the event that an inter-disciplinary team (ID team) identifies a service provider and the established rate is not adequate to safely support the transition, the regional center may submit a Health and Safety Waiver request to the Department prior to the individual’s transition [Enclosure C]. The Department will prioritize review of these requests to facilitate transition of an individual from a more restrictive to a less restrictive setting.

Effective January 1, 2020, the exceptions in WIC Section 4648(a)(9)(C)(ii) regarding IMD placements due to emergencies will no longer apply, and the prohibition in WIC Section 4648(a)(9)(C)(i) will not apply to acute crises when a consumer meets specific conditions as defined by WIC Section 4648.

A consumer may not reside in an IMD longer than six months before being placed into a community living arrangement, unless, prior to the end of the six months all of the criteria listed in WIC Section 4648 occurs. A consumer’s placement at an IMD shall not exceed one year unless certain circumstances occur, in that case, the regional center may request from the court an extension of the commitment, not to exceed 30 days [WIC Section 4648].

B. **Deflection Funding Requests**

Deflection funding is for individuals who are currently living in the community and require additional services and supports to remain in the community to avoid admission to a STAR facility, an IMD, an out-of-state service, or a more restrictive living residence due to an acute crisis or increased service needs.

\(^1\) Placement costs for individuals residing at a STAR facility may be funded with CPP Placement funds. However, the placement will not be part of the regional center’s “placement goal.”
When claiming for Deflection placement costs, the regional center will be reimbursed for service costs associated with increased services and supports (difference between prior placement cost and new placement cost) to prevent admittance to a more restrictive setting to include, but not limited to, an IMD or out-of-state placement. The need for increased services and supports must be included in the individual’s Individual Program Plan (IPP).

C. **Assessment Funding Requests**

The regional center’s FY 2019-20 CPP proposal requesting Assessment funds must include the following:

1. Name and UCI of each individual residing in a facility listed below;
2. Date of each individual’s last comprehensive assessment;

Comprehensive assessments shall be completed through person-centered practices, and are required as follows:

- **DCs:** Regional centers shall complete an updated comprehensive assessment for each individual residing in a DC who is not committed pursuant to Section 1370.1 of the Penal Code. The updated comprehensive assessment shall identify the types of community-based services and supports that are available and/or needed for each individual. Updates to the comprehensive assessment are required on an annual basis as part of the individual program planning process for as long as the individual resides in the DC. [WIC Section 4418.25(c)(2)]

- **STAR Facilities:** A comprehensive assessment for individuals who are admitted to a STAR facility shall be completed within 30 days of admission. [Trailer Bill, SB 82 (Chapter 23, Statutes of 2015)]

If an individual resides at a STAR facility longer than six months, the regional center shall complete an additional comprehensive assessment. [WIC Sections 4418.7(e)(1) and 4418.7(e)(3)(A)(i)]

- **IMDs:** A comprehensive assessment shall be completed by the regional center within 30 days of admission to an IMD, and prior to the individual’s next scheduled IPP meeting. [WIC Section 4648(a)(9)(B) and (C)]

- **Out-of-State:** A comprehensive assessment shall be completed by the regional center prior to submitting a request for out-of-state services and for any extension beyond the initial six months. [WIC Section 4519(a)]

D. **Start-Up Funding Requests**

Start-Up funds are intended to assist in the development of new innovative resources,
but not intended to fund 100 percent of the development costs. It is expected that the vendor will identify funds that, along with Start-Up funds, would demonstrate financial capacity to complete a project. The Department may request an estimated and/or final “Sources and Uses” project development budget outlining the project cost and funding sources.

Once a residential service is developed, or when a facility is licensed, it should be fully occupied within 90 days. Provider Start-Up funds may be used for this transition period. Use of Provider Start-Up funds beyond the 90-day period may be permitted only with the Department’s written approval. Once the home has been fully operational, subsequent vacancies cannot be funded through CPP or CRDP Start-Up.

All services purchased for CPP Start-Up projects must be eligible for Federal Financial Participation (FFP) unless otherwise approved.

Start-Up Contracts: Upon approval of the CPP or CRDP, the regional center must encumber funds though a contract by identifying a vendor utilizing the “Request for Proposal” (RFP) process. The RFP must be posted within 45 calendar days from receipt of the approved plan. Contracts between the regional center and vendor should be executed within 90 calendar days of the approved plan and contain the following:

1. Identify the vendor accountability for the expenditure of funds consistent with the contract terms and for program outcomes;
2. The vendor’s obligation of service to individuals with developmental disabilities for a specified length of time;
3. In the event a project cannot be completed, the Start-Up funds must be returned to the State; and,
4. Upon completion of the project, all unexpended contracted funds will be recouped by the regional center and returned to the State.

The regional center may request from the Department, approval for Start-Up funds for the purchase of permanent housing through an approved Housing Developer Organization (HDO). Proposals requesting Start-Up funding for the acquisition of real estate, must meet the FY 2019-20 CPP Housing Guidelines.

The CPP Housing Guidelines identify several CPP/CRDP housing milestone documents that the regional center is required to submit to DDS following the completion of residential project milestones. DDS requests receipt of these documents to ensure the restriction of homes for the exclusive use by individuals with developmental disabilities, the protection of State funds, and the timely completion of residential projects.

DDS relies on the regional center to provide CPP housing milestone documents in a timely manner. Consistent with the specific year of the CPP Housing Guidelines, these documents may include CPP property documents such as the Restrictive Covenant, updated budget documents, certification of CPP fund reconciliation, executed long-term lease agreement, executed property management agreement, annual report with attached accounting of replacement reserve fund, etc. For a complete listing of required documents, refer to the CPP Housing guidelines.
The Department may request the regional center to provide a copy of the fully-executed Regional Center/Vendor Start-Up contract.

Homes are to be developed with single occupancy bedrooms. (With prior Department approval, homes can be developed with double occupancy bedrooms to accommodate individual preferences.)

**CPP Start-Up Funding Requests**

CPP Start-Up funding may be used to develop resources as identified through individual comprehensive assessments including, but not limited to, Enhanced Behavioral Supports Homes, Community Crisis Homes, mobile crisis services, Transitional Homes and Specialized Residential Facilities, vocational or day services, transportation services, Supported Living Services, clinical and crisis services. Residential Start-Up projects funded by CPP funds must have a percentage of placements dedicated to individuals residing in a DC, an IMD, or individuals residing out-of-state, based on the regional center’s current population in each of these settings. The Department’s ability to fund CPP proposals is dependent upon sufficient appropriation of funds; therefore, the regional center must prioritize the proposed projects and provide supporting information of identified need for each proposal.

CPP funded homes designated for CPP placements shall only be used for CPP placements, however, exceptions may be approved by the Department. The Department may require priority use of the resource to be made available to another regional center for an individual residing in a DC or IMD, prior to approval of an exception.

**CRDP Start-Up Funding Requests**

Each CRDP proposal submitted by the regional center shall be driven by the principles of person-centered planning and be culturally and linguistically appropriate to the individuals served by the regional center. [WIC Section 4679 (a)] It should also include the community capacity and needs for all crisis services including residential services, wrap-around services, and available crisis teams.

The request shall include information received from the regional center’s meaningful outreach activities that seek the input of stakeholders representing the diversity of the regional center’s catchment area, including, but not limited to, individuals, family members, providers and advocates. The proposal must identify the stakeholders with whom the regional center consulted, and include information on how the regional center incorporated the input of stakeholders into its CRDP funding request. [WIC Section 4679 (c)]

In addition to community input, the regional center shall include applicable data to support their request (e.g., individual growth trends or changes in individual demographics or service needs, such as the number of individuals graduating from high school within a specific time period, etc.). Regional centers are encouraged to address current and future needs based on assessed trends. [WIC Section 4679 (d)]

FY 2019-20 CRDP funding proposals shall include the following information:
1. Identification of community resources needed.
2. The results of the outreach activities (e.g., community meetings, internet postings, etc.), identifying the stakeholders consulted and how the information received from the stakeholder input was incorporated into the CRDP proposal request.
3. A justification for funding requests.
4. How the regional center will track quantitative data, monitor development and assess outcomes to be reported in monthly reviews with the Department.

At least two weeks prior to a regional center submitting its CRDP funding proposal(s) to the Department, the regional center shall post its priorities for the CRDP proposal(s) on its website, as informed by the stakeholder process, to allow for any final stakeholder input. [WIC Section 4679 (c)]

F. Operations Funding Requests

Operations (OPS) funding is one-time only and must be used exclusively as approved. The amount funded in one fiscal year will not automatically be funded in the next fiscal year. Approval of OPS funding will be based on several factors, including the regional center’s past CPP performance, the number of Start-Up projects the regional center has in progress and is requesting, and the proposed number of individuals for whom the regional center plans to provide services (including placements, assessments, and community placement) during FY 2019-20.

OPS funding must be used for regional center employees and/or consultants specific to CPP/CRDP activities only and cannot be used to fund operation/administrative costs for other purposes. Examples of regional center employees and/or consultants that may be funded with CPP/CRDP OPS funds include staff to assist with resource development, assessments, placements; nurses, behavioral specialists, and quality management staff necessary to implement the approved plan. Staffing shall be approved in 0.25, 0.50 and 1.0 Full Time Equivalent (FTE) increments.

Positions and costs for employees at the regional centers who focus on CPP to pursue resource development, complete assessments, provide quality assurance, and provide clinical expertise are funded by Regular CPP funds.

The regional center shall provide the Department with the following information for each person dedicated for CPP/CRDP purposes:

1. Name
2. Hire date
3. Position title
4. Full-time position/part-time position/consultant
5. Any position identified for the FY 2019-20 on-going workload of all DC closure activity

With the closure of the developmental centers and the transition of individuals to community living arrangements, regional centers will continue to provide support and monitoring of consumers who have moved into the community. This includes, but is not
limited to, coordination of clinical health and dental services. The Governor’s Budget includes funding to provide salaries, benefits, and operating expenses and equipment for the continuing regional center positions for quality assurance management, healthcare community specialists, nurse and oral health consultants, service coordinators, clinical support teams and administrative assistants. Positions and costs for employees at the regional centers who focus on providing support and monitoring of individuals who have moved into the community are funded by DC Closure/Ongoing Workload funds.

Pursuant to WIC Sections 4684.70 and 4684.84, regional centers must perform monthly monitoring of individuals residing in Adult Residential Facilities for Persons with Special Health Care Needs (ARFPSHN) and Enhanced Behavioral Supports Homes (EBSH). Regional centers employ and utilize registered nurses (RN) to monitor the ARFPSHNs, and licensed behavioral specialists (BS) to monitor EBSHs and Community Crisis Homes (CCHs). Each RN and BS is able to complete required monitoring of homes at a nurse/specialist-to-home ratio of 1:4. Positions and costs for employees at the regional centers who focus on the monthly monitoring of individuals residing in ARFPSHNs and EBSHs are funded by Specialized Home Monitoring funds.

V. Additional Guidelines and Relevant Statute

A. **Home and Community-Based Services Rules**
   When developing resources, regional centers must assure all new development is in compliance with a recent Centers for Medicare and Medicaid Services (CMS) ruling and in accordance with Code of Federal Regulations (CFR), Title 42, Section 441.530(a)(2)(v) (Home and Community-Based Setting), as summarized in *Guidance on Settings that Have the Effect of Isolating Individuals Receiving HCBS from the Broader Community* [Enclosure D], unless approved by the Department.

B. **Statewide Specialized Resource Service**
   In accordance with WIC Section 4418.25, the Statewide Specialized Resource Service (SSRS) was created to track the availability of specialized residential development and clinical services. Pursuant to WIC Section 4418.25(b)(2), in order to track and share needed resources, regional centers shall provide the Department with monthly updates on newly developed resources and current vacancies in specialized resources developed with CPP funds from FY 2005-06 forward. The process for accessing the SSRS is described in the Department’s September 26, 2012, letter to regional centers, entitled, *Statewide Specialized Resource Services* [Enclosure E]. For more information regarding SSRS, contact the Department at ssrs@dds.ca.gov or (916) 654-1956.

VI. Approval, Modification and Monitoring

A. **Timelines**
   FY 2019-20 CPP and CRDP proposed plans are due to the Department within 45 calendar days from the release date of these Guidelines.

B. **Approval Process**
The Department will review the FY 2019-20 CPP and CRDP proposals in their entirety and approve the request(s) based on feasibility, reasonableness, the justification for the resources, alignment with statewide priorities, FFP eligibility of services, and availability of funding. If the proposal meets the requirements of these Guidelines, the Department will send a conditional (enacted on the signing of the Governor’s Budget) approval letter to the regional center’s Executive Director, Administrator and CPP Liaison.

C. Submission and Modification to the CPP or CRDP
The regional center must submit, using the Modification Request Form [Enclosure F], any proposed modifications made to the original, approved CPP or CRDP. The regional center must receive Department approval for any modifications to their approved plans prior to implementation of modifications.

D. Monthly Reporting
Regional centers are required to report on the progress of development and placement activities associated with the closure of a DC, as well as all other resource development and transition activities. The Department will work with regional centers to complete monthly worksheets [Enclosure G] with updated information that shall include, but not be limited to, the following:

1. Placement activity that identifies individuals who transitioned into the community, and updated projections of individuals to move into the community.
2. Assessment activity that identifies the dates of completed comprehensive assessments (as specified in IV. Section C).
3. Start-Up activity:
   a. Status of Request(s) for Proposals
   b. Anticipated or actual completion date(s)
   c. Date(s) contract(s) signed
   d. Contracted amount(s)
   e. Amount(s) expended or updated estimate(s)
   f. Updated “Sources and Uses” budget(s), if changed
   g. Date(s) of occupancy
4. Community placement activity that identifies individuals residing in the community who required increased services.
5. Utilization of CPP and CRDP developed beds, which identifies the number of vacant beds.
6. Operations activity that includes hire dates and staff identified for each position approved.

E. Quarterly IMD Reporting
Regional centers are required to report quarterly on the progress of development and placement activities associated with individuals residing in an IMD. The Department will work with regional centers to complete quarterly worksheets with updated information that shall include, but not be limited to, the following:

1. Individuals who were admitted to an IMD and the length of their current stay;
2. Transition activity and projections of individuals to transition to the
community;
3. Dates of completed assessments for each individual residing in an IMD, including additional assessment activity if placement at the IMD is beyond the six months;
4. Extension requests at 90 days, including the transition plan;
5. Recent regional center visits, including the date of the last quarterly face-to-face visit.

F. Performance
The Department will evaluate the CPP and CRDP performance success of the regional center based on a combination of factors that will measure placements, assessments completed, and resource development efforts that are aligned with the CPP priorities outlined in these Guidelines. This will be taken into consideration when discussing funding and approval of future proposed CPPs.

The Department will evaluate the performance of an approved CRDP using measurable indicators that the regional center must provide at the time of submission of the proposal.

G. Safety Net Plan Update
In accordance with WIC Section 4474.16, the Department is required, on or before January 10, 2020, to submit to the Legislature an updated version of the safety net plan originally submitted pursuant to Section 4474.15(a). The updated plan must be developed in consultation with stakeholders and must evaluate the progress made to create a safety net, identify the further areas the stakeholder community suggests evaluating, and recommendations from the stakeholder community, and must consider new models of care for individuals whom private sector vendors cannot or will not serve.

VII. Claims
An integral part of the CPP and CRDP is the monitoring and reconciliation of claims submitted by the regional center. Claims will be reconciled to the State Claims File of the Uniform Fiscal System (UFS) and monitored based on the regional center’s use of approved allocated funding. The regional center will be required to claim in the manner allocated (i.e., POS – Placement, POS – Assessment, POS – CPP Start-Up, POS – CRDF Start-Up, and POS Deflection, and OPS) in the approved CPP. Submission of the claim must be accompanied by sufficient detail to support the claim. If a claim is specific to the activity of a DC closure, please specify.

IMPORTANT: For claims to be processed and paid, the regional center must follow the POS claiming procedure developed by the Department. This now includes the addition of sub codes that identify the specific start-up project for which a claim is submitted. [Enclosures H & I]

It is the responsibility of the regional center to correct discrepancies in the State Claims File. Technical support is available from the Department’s Regional Center Technology Support Section by calling (916) 654-1466, or the Community Development and Housing
Branch at (916) 654-1956.

VIII. Allocations

The Department will allocate POS and OPS funds based on plan implementation and verification of progress. Failure to demonstrate progress on the regional center’s current plan may affect future funding to the regional center. Any unspent funds shall revert to the State General Fund.

As outlined in the Department’s contract with regional centers, on August 15 of each fiscal year, or not later than fifteen (15) days following the enactment of the annual Budget Act, whichever is later, the Department will allocate to all regional centers Operations and POS funds consistent with the approved allocation methodology. On or before January 15 of each fiscal year, the Department will allocate to all regional centers the remaining funds unless specified in the approved allocation methodology or agreed to by the Association of Regional Center Agencies.

The allocation process is described as follows:

1. **Start-Up**: Assessment and Start-Up funds will be allocated in the first contract amendment based on the approved CPP or CRDP.

2. **Operations**: There will be two allocations for OPS funds. Approved OPS funding will be initially allocated at 75 percent. The remaining 25 percent of OPS funds will be allocated in a subsequent contract amendment and may be modified based on regional center performance. The Department will determine what, if any, modification will occur.

3. **Placement, Assessment and Deflection**: Placement and Deflection funds will be initially allocated at 25 percent in the first allocation amendment, then subsequently funded based on actual POS costs at various points during the year. Adjustments will be made at year-end to reflect actual reconciled placement and deflection costs.