

Rate Reform Service Acknowledgement

1. **BACKGROUND:** As part of continued rate reform implementation pursuant to [Welfare and Institutions \(W&I\) Code section 4519.10](#), service providers shall align with standardized service descriptions, billing codes and payments.
2. **INSTRUCTIONS:** This form should be used to document acknowledgement of the type of service and service code to which the provider will align.
 - a. This form shall be completed for each vendor number and must include all associated service codes and subcodes.
 - b. A copy of the Department directive for the type of service and the rate reform workbook shall be attached.
 - c. The fully executed original should be placed in the vendor file and a copy sent to the provider for their records.
3. **TERMS AND AGREEMENTS:** This agreement between the parties, [name of regional center], hereinafter referred to as [RC abbreviation], and [name of service provider representative], representing [name of service provider entity] hereinafter referred to as CONTRACTOR, agree to align services provided and meet the service provisions as outlined in the applicable Department of Developmental Services directive (enclosed).
4. **ADDITIONAL CONDITIONS:** The CONTRACTOR shall continue to adhere to the requirements for these services as outlined in statute and regulations. The Department directive supersedes any conflict regarding service descriptions and rate-setting. In accordance with California Code of Regulations, Title 17, section [54326](#), CONTRACTOR agrees to maintain and make accessible documentation to support the program standards for the services to be provided and may be subject to audit or review to ensure compliance.
5. **SERVICES TO BE PROVIDED:**
 - a. Vendor Name: _____
Vendor Address: _____

Vendor Number: _____
Type(s) of Service: _____
Service Code(s): _____
Subcode(s): _____
If this is a change, indicate former service code(s): _____
 - b. Residential Services: Only complete for residential service providers.
Current Level: _____ New Residential Service Level: _____

6. **RATE:** The CONTRACTOR agrees the information contained in the Rate Reform Workbook (enclosed) is accurate and agrees to the base rate and final benchmark rate. CONTRACTOR acknowledges any rates that are held harmless at the time of this agreement will be adjusted to the base rate and final benchmark rate on July 1, 2026.

7. **TERMS OF THIS AGREEMENT:** Effective date is _____.

8. **SIGNATURES:**

Contractor Representative

Regional Center Representative

Signature

Signature

Printed Name

Printed Name

Title

Title

Date

Date

Enclosure:

Department Directive, [Title, Date]

Rate Reform Workbook [Vendor #]