

September 16, 2026

D-2026-Rates-004

TO: REGIONAL CENTER EXECUTIVE DIRECTORS

SUBJECT: EARLY START PROGRAM: RATES FOR SERVICES DELIVERED
REMOTE

This letter establishes reimbursement rate policy for Infant Development Program (service code 805) and Specialized Therapeutic Services (service code 116) services when they are provided by remote electronic communications (telephonic or via camera using the internet).

Background

Services provided to children and their families through service code 805 and service code 116 are reimbursed based on in-person delivery using either of the following rates: (1) a rate for services delivered in person in the child's home or community, or (2) a rate for services delivered in person in a clinic or facility. The rates were developed based on assumptions about the costs of providing the service, such as mileage costs or lease costs.

Existing state law, in [subdivision \(d\) of Government Code section 95020](#), allows remote delivery of early intervention services as outlined in the Individualized Family Service Plan (IFSP). Early Start services must be delivered consistent with the method agreed upon and stated in the child's IFSP.

Rates Paid for Remote Delivery of These Services:

The Department is exploring the need to develop a rate for these services when they are delivered remotely. In the interim and effective November 1, 2026, regional centers must follow this directive for reimbursing these services when they are delivered remotely, as follows:

1. For any remote service provided on an as-needed basis only, based on the request of the family, the service must be paid using the vendor's current rate (i.e., if the child is currently being served in the home/community, then the "as needed" remote visit should be paid at the existing home/ community rate; if the child currently is served in a clinic setting, the "as needed" remote visit should be paid at the clinic rate).
 - a. "As needed" refers to unforeseen changes in the family's routine, such as, but not limited to, illness of the child or illness of a family member in the home. These occurrences should not exceed more than 25 percent of scheduled visits in the quarter.
2. For any remote service provided on a regular basis, either: (a) in combination with in-person services (also known as hybrid delivery), or (b) as the only method for delivering services, then the service must be paid as follows:

- a. The regional center must use the clinic-based rate and subcode, regardless of whether or not the provider currently has a clinic-based rate in its vendorization.

Note: The provider is not required to amend its program design to be able to provide services remotely.

Tracking and Reporting Remotely Delivered Services

All vendors of these services must follow the requirements for reporting remote services in eBilling, as outlined in the Department's letter issued on May 1, 2026:

[G-2026-Regional Center Operations-001: Tracking the Provisions of Remote Services.](#)

Questions from regional centers regarding:

- Authorization and reimbursement of services should be directed to ratesquestions@dds.ca.gov.
- Early Start program requirements should be directed to earlystart@dds.ca.gov.

Sincerely,

Original Signed by:

DANA SIMON

Deputy Director, Waiver and Rates Division

cc: Regional Center Administrators
Regional Center Directors of Client Services
Regional Center Directors of Community Services
Association of Regional Center Agencies