

Purpose: The purpose of this attachment is for the participant's regional center to notify participants that the vendorization of their Self-Determination Program (SDP) Financial Management Services (FMS) vendor has been terminated and that the vendor no longer can provide financial management services. It informs participants of what the termination means, outlines their rights and available options, and explains how the regional center will help provide options for other available SDP FMS vendors.

Instructions for regional centers: This letter must be sent within five business days after the regional center provides notice of the date the SDP FMS vendor's vendorization will be terminated. This letter is separate from the correction period letter (Attachment C). Participants must be provided with time to make an informed decision about transitioning to another SDP FMS vendor, and to successfully make that transition.

[Date]

[Participant Name]

[Participant Address Line 1]

[Participant Address Line 2]

**SUBJECT: Your Self-Determination Program Financial Management Services Vendor
No Longer Can Provide Services**

Dear [Participant Name] (or [Participant Name]'s Representative),

We are writing to let you know that [SDP FMS Vendor Name], your Self-Determination Program (SDP) Financial Management Services (FMS) vendor, will no longer be able to provide financial management services after [Termination Date]. The vendor's approval to provide these services, called "vendorization," is scheduled to end on that date. [SDP FMS Vendor Name] did not meet the SDP FMS Vendor Standards.

What This Means

You need to choose a new SDP FMS vendor to keep receiving financial management services. Your service coordinator at [Regional Center Name] will help you identify other available SDP FMS vendors. The choice of a new vendor is yours. [SDP FMS Vendor Name] must provide you with the information you need to move to your new vendor. [SDP FMS Vendor Name] must keep paying for the services and supports in your approved spending plan, including paying service providers for services you have already received, through your last day of service with them or until you move to a new SDP FMS vendor if that happens sooner.

What Happens Next

Please contact your service coordinator as soon as you can so that there is no gap in your services. If you have already chosen a new SDP FMS vendor, please tell your service coordinator. If [SDP FMS Vendor Name] fixes the issues or files an appeal before [Termination Date], the vendorization may not end. If that happens, we will tell you in writing.

Your Rights and Choices

This letter does not change any of your rights. You may choose any available SDP FMS vendor.

If you would like help understanding your options or choosing a new SDP FMS vendor, your regional center service coordinator can assist you.

Questions

If you have questions about this letter or your SDP FMS services, please contact your service coordinator at [Regional Center Name], [Regional Center Phone Number], or [Regional Center Email].

Sincerely,

[Name]

[Title]

[Regional Center Name]