

AMENDED IN ASSEMBLY MARCH 28, 2014

CALIFORNIA LEGISLATURE—2013–14 REGULAR SESSION

ASSEMBLY BILL

No. 2299

Introduced by Assembly Member Nazarian

February 21, 2014

An act to amend Section 4659.1 of the Welfare and Institutions Code, relating to developmental services.

LEGISLATIVE COUNSEL'S DIGEST

AB 2299, as amended, Nazarian. Developmental services: ~~individual program plans and individualized family service plans.~~ *health insurance copayments.*

The Lanterman Developmental Disabilities Services Act authorizes the State Department of Developmental Services to contract with regional centers to provide services and supports to individuals with developmental disabilities. Under existing law, the regional centers purchase needed services for individuals with developmental disabilities through approved service providers or arrange for their provision through other publicly funded agencies. The services and supports to be provided to a regional center consumer are contained in an individual program plan or individualized family service plan, developed in accordance with prescribed requirements. *Existing law authorizes a regional center to pay any applicable copayment or coinsurance for a service or support required by a consumer's individual program plan if the service is paid for by the health care service plan or health insurance policy of the consumer or his or her parent, guardian, or caregiver and, among other conditions, the family or the consumer, as applicable, has an annual gross income that does not exceed 400% of*

the federal poverty level. Existing law prohibits a regional center from paying health care service plan or health insurance policy deductibles.

This bill would declare the intent of the Legislature to enact legislation that would remove barriers that restrict access for regional center consumers to medically necessary services identified in an individual program plan or individualized family service plan. delete that prohibition against payment of deductibles and would require a regional center, without regard to the family’s or consumer’s annual gross income, to pay any applicable copayment, coinsurance, or deductible for a service or support required by a consumer’s individual program plan if the support or service is paid for by the health care service plan or health insurance policy of the consumer or his or her parent, guardian, or caregiver.

Vote: majority. Appropriation: no. Fiscal committee: ~~no~~-yes. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 4659.1 of the Welfare and Institutions
- 2 Code is amended to read:
- 3 4659.1. (a) If a service or support provided pursuant to a
- 4 consumer’s individual program plan under this division or
- 5 individualized family service plan pursuant to the California Early
- 6 Intervention Services Act (Title 14 (commencing with Section
- 7 95000) of the Government Code) is paid for, in whole or in part,
- 8 by the health care service plan or health insurance policy of *the*
- 9 *consumer* or the consumer’s parent, guardian, or caregiver, the
- 10 regional center ~~may, when necessary to ensure that the consumer~~
- 11 ~~receives the service or support, shall~~ pay any applicable ~~copayment~~
- 12 ~~or coinsurance~~ copayment, coinsurance, or deductible associated
- 13 with the service or support for which the *consumer or the* parent,
- 14 guardian, or caregiver is responsible if ~~all~~ *both* of the following
- 15 conditions are met:
- 16 (1) The consumer is covered by his or her ~~parent’s, guardian’s,~~
- 17 ~~or caregiver’s own~~ health care service plan or health insurance
- 18 policy, *or that of his or her parent, guardian, or caregiver.*
- 19 (2) ~~The family has an annual gross income that does not exceed~~
- 20 ~~400 percent of the federal poverty level.~~
- 21 (3)

1 (2) There is no other third party having liability for the cost of
2 the service or support, as provided in subdivision (a) of Section
3 4659 and Article 2.6 (commencing with Section 4659.10).

4 ~~(b) If a service or support provided to a consumer 18 years of
5 age or older, pursuant to his or her individual program plan, is paid
6 for in whole or in part by the consumer's health care service plan
7 or health insurance policy, the regional center may, when necessary
8 to ensure that the consumer receives the service or support, pay
9 any applicable copayment or coinsurance associated with the
10 service or support for which the consumer is responsible if both
11 of the following conditions are met:~~

12 ~~(1) The consumer has an annual gross income that does not
13 exceed 400 percent of the federal poverty level.~~

14 ~~(2) There is no other third party having liability for the cost of
15 the service or support, as provided in subdivision (a) of Section
16 4659 and Article 2.6 (commencing with Section 4659.10).~~

17 ~~(c) Notwithstanding paragraph (2) of subdivision (a) or
18 paragraph (1) of subdivision (b), a regional center may pay a
19 copayment or coinsurance associated with the health care service
20 plan or health insurance policy for a service or support provided
21 pursuant to a consumer's individual program plan or individualized
22 family service plan if the family's or consumer's income exceeds
23 400 percent of the federal poverty level, the service or support is
24 necessary to successfully maintain the child at home or the adult
25 consumer in the least-restrictive setting, and the parents or
26 consumer demonstrate one or more of the following:~~

27 ~~(1) The existence of an extraordinary event that impacts the
28 ability of the parent, guardian, or caregiver to meet the care and
29 supervision needs of the child or impacts the ability of the parent,
30 guardian, or caregiver, or adult consumer with a health care service
31 plan or health insurance policy, to pay the copayment or
32 coinsurance.~~

33 ~~(2) The existence of catastrophic loss that temporarily limits
34 the ability to pay of the parent, guardian, or caregiver, or adult
35 consumer with a health care service plan or health insurance policy
36 and creates a direct economic impact on the family or adult
37 consumer. For purposes of this paragraph, catastrophic loss may
38 include, but is not limited to, natural disasters and accidents
39 involving major injuries to an immediate family member.~~

1 ~~(3) Significant unreimbursed medical costs associated with the~~
2 ~~care of the consumer or another child who is also a regional center~~
3 ~~consumer.~~

4 ~~(d) The parent, guardian, or caregiver of a consumer or an adult~~
5 ~~consumer with a health care service plan or health insurance policy~~
6 ~~shall self-certify the family's gross annual income to the regional~~
7 ~~center by providing copies of W-2 Wage Earners Statements,~~
8 ~~payroll stubs, a copy of the prior year's state income tax return,~~
9 ~~or other documents and proof of other income.~~

10 ~~(e) The parent, guardian, or caregiver of a consumer or an adult~~
11 ~~consumer with a health care service plan or health insurance policy~~
12 ~~is responsible for notifying the regional center when a change in~~
13 ~~income occurs that would result in a change in eligibility for~~
14 ~~coverage of the health care service plan or health insurance policy~~
15 ~~copayments or coinsurance.~~

16 ~~(f) Documentation submitted pursuant to this section shall be~~
17 ~~considered records obtained in the course of providing intake,~~
18 ~~assessment, and services and shall be confidential pursuant to~~
19 ~~Section 4514.~~

20 ~~(g) Regional centers shall not pay health care service plan or~~
21 ~~health insurance policy deductibles.~~

22 ~~(b) Notwithstanding subdivision (a), if the cost of a copayment,~~
23 ~~coinsurance, or deductible payment associated with a service or~~
24 ~~support is more than the cost of directly providing the service or~~
25 ~~support, a regional center may directly provide the service or~~
26 ~~support in lieu of paying the copayment, coinsurance, or deductible~~
27 ~~payment.~~

28 ~~(h)~~

29 ~~(c) This section shall not be implemented in a manner that is~~
30 ~~inconsistent with the requirements of Part C of the federal~~
31 ~~Individuals with Disabilities Education Act (20 U.S.C. Sec. 1431~~
32 ~~et seq.).~~

33 ~~SECTION 1. It is the intent of the Legislature to enact~~
34 ~~legislation that would remove barriers that restrict access for~~
35 ~~regional center consumers to medically necessary services~~
36 ~~identified in an individual program plan or individualized family~~
37 ~~service plan.~~