

Far Northern Regional Center



Purchase of Service Guidelines and Funding Policy

April 11, 2011

**Approved by FNRC Board of Directors on 9/24/2010 and the Department of
Developmental Services on 4/11/2011**

Far Northern Regional Center Purchase of Service Funding Policy

In 1969, the legislature passed The Lanterman Developmental Disabilities Services Act. The Lanterman Act consists of two main parts. The first part of the law acknowledges the State of California's responsibility towards persons with developmental disabilities - a responsibility to ensure they have access to services and supports that best meet their needs throughout their lifetime. The second part of the Lanterman Act created the regional center system to implement these goals. Regional centers were designed to be fixed points of contact in the community for consumers and their families to receive information, advocacy, referral, and case management services. The regional center mandate places a strong emphasis on service coordination activities and includes:

1. Securing needed services and supports.
2. Advocacy for and protection of civil, legal, and service rights.
3. Identifying and building circles of supports within the community
4. Monitoring to assure optimum service quality.
5. Expanding the availability of needed services and supports.
6. Utilizing public and private community agencies and service providers to obtain needed services and supports for consumers.
7. Providing direct treatment and therapeutic services only in emergency situations.

Regional centers may also purchase services and supports for consumers which enable them to integrate into the mainstream of their community. Such purchase must be within the level of funding available in the annual California State Budget Act. Far Northern Regional Center (FNRC) developed this policy and the attendant purchase of service guidelines to reflect our responsibilities for purchasing services and supports in accordance with the Lanterman Act.

MISSION STATEMENT

Far Northern Regional Center will provide services and supports that allow persons with developmental disabilities to live productive and valued lives as welcomed members of their community.

FAR NORTHERN REGIONAL CENTER VISION STATEMENT

In order to achieve our mission, Far Northern Regional Center will take guidance from the following concepts:

- People with developmental disabilities participate in valued ways with their friends, neighbors and co-workers in all areas of community life.
- Families are supported in their role as the primary decision-makers on behalf of their minor children. Minor children live and grow within a natural or surrogate family, attend inclusive neighborhood schools, and play with non-disabled children of their own age.

Professionals join in partnership with families and support their cultural preferences, values and lifestyles.

- Adults with developmental disabilities choose their own homes, are involved in meaningful activities in integrated settings, and participate in their communities.
- The community receives education, training, and consultation to increase its understanding of persons with developmental disabilities and to facilitate equal community partnerships. Professionals build relationships within the community to assure knowledge of and respect and dignity for persons with developmental disabilities.
- Staff is knowledgeable, available to persons with developmental disabilities and their families, and engaged in a continuous effort to assure high quality relationships.
- Persons with developmental disabilities and their families receive the services and supports necessary to make their own meaningful, educated choices.
- The community receives services that minimize the risk of developmental disabilities and lessen developmental delays of infants and young children.
- Services maximize the quality of life for people with developmental disabilities and their families while acknowledging and reinforcing their dignity.

INDIVIDUAL PROGRAM PLANS & INDIVIDUALIZED FAMILY SERVICE PLANS

All consumers over the age of 36 months will participate in the development of an Individual Program Plan (IPP) in accordance with section 4646 of the California Welfare and Institutions Code. Families of consumers from 0-36 months will participate in the development of an Individual Family Service Plan (IFSP) in accordance with section 95020 of the California Government Code. IPPs and IFSPs will be based on assessments performed in the consumer's natural environment whenever possible and will reflect awareness and sensitivity to the consumer's and family's lifestyle and cultural background. Each IPP/IFSP will be personalized to the individual's needs and will contain goals and objectives or outcome statements that allow measurement of progress and monitoring of service delivery.

All IPPs and IFSPs will contain a schedule of the type and amount of services and supports to be purchased by Far Northern Regional Center or obtained from generic agencies or other resources. Service providers identified in the IPP/IFSP may include, but are not limited to, vendors, contracted providers, generic service agencies, and natural supports.

CRITERIA FOR PURCHASE OF SERVICE

FNRC may purchase services and supports for consumers and their families only under the following conditions:

1. The service or support is intended to address special needs directly related to the person's developmental disability or associated with the risk of developmental disability.
2. FNRC will not purchase experimental treatments, therapeutic services, or devices that have not been clinically determined or scientifically proven to be effective or safe or for which risks and complications are unknown. Experimental treatments or therapeutic services include experimental medical or nutritional therapy when the use of the product

for that purpose is not a general physician practice. (California Welfare and Institutions Code 4648(a)(15)).

3. The Interdisciplinary (ID) team has determined that the service and supports will accomplish all or part of the person's IPP or IFSP.
 - a. All services and supports provided to a consumer must be included in the IPP or IFSP.
4. All possible sources of funding have been pursued.
 - a. FNRC is bound by Section 4659(a) of the Welfare and Institutions Code to access funding from governmental and private entities, including Medi-Cal, Medicare, Civilian Health and Medical Program for Uniform Services (CHAMPUS), school districts, Supplemental Security Income (SSI), Social Security, private insurance, and any other potential funding resource.
 - b. In addition, Section 4659(c) states that regional centers shall not purchase any service that would otherwise be available from Medi-Cal, Medicare, the Civilian Health and Medical Program for Uniform Services, In-Home Support Services, California Children's Services, private insurance, or a health care service plan when a consumer or a family meets the criteria of this coverage but chooses not to pursue that coverage.
 - c. Funds available to consumers through legal settlements have been pursued and utilized.
 - i. Regional Center funds may not be used for services that the legal settlement was intended to cover.
5. FNRC funds will not be used to meet deductible or co-payment amounts for private insurance.
 - a. Private insurance is a resource consumers and families are expected to utilize prior to the expenditure of public funds. Meeting the deductible or co-payment is not a responsibility unique to persons with developmental disabilities.
 - b. FNRC cannot exceed the Schedule of Maximum Allowance (SMA) or Medi-Cal rate when funding medical or dental care.
6. FNRC funds will not be used to meet Medi-Cal liabilities or share-of-cost.
 - a. Consumers and families are expected to fund liabilities including share-of-cost expenses in order to access Medi-Cal coverage.
7. Unpaid services and supports in natural community, home, work, and recreational settings have been considered (Welfare and Institutions Code Section 4688 (b)(5)).
8. The Interdisciplinary (ID) team has determined that the selected service provider will best accomplish all or any part of the consumer's IPP.
9. Services purchased by FNRC will be cost effective.
 - a. Pursuant to Sections 4646, 4651, and 4685, of the Welfare and Institutions Code, services purchased by FNRC should produce positive results for the amount of money spent, be efficient, and be economical. Services should be provided as close to the consumer's home as possible to reduce transportation costs and

- hardships. When more than one provider is available offering similar services of similar quality, preference should be given to the one with the most economical rate.
- b. In determining cost-effectiveness, the total cost of the program or service including ancillary costs such as transportation (among others) must be considered.
 - c. Decisions regarding cost effectiveness will be made on an individual basis, taking into account the needs of the consumer.
10. FNRC funds will not be used to supplant the budget of any agency which has a legal responsibility to serve members of the general public and is receiving public funds for providing such services (Welfare and Institutions Code Section 4648 (a)(8)).
11. The family's responsibility for providing similar services to the child without disabilities has been evaluated.
- a. FNRC is subject to 4646.4(a)(4) and Section 54326 of Title 17, California Code of Regulations which state that regional centers must take into consideration the family's responsibility for providing similar services and supports for a minor child without disabilities in identifying the consumer's service and support needs as provided in the least restrictive and most appropriate setting. In this determination, regional centers shall take into account the consumer's need for extraordinary care, services, supports and supervision, and the need for timely access to this care.
 - b. Determinations of family responsibility will be made on an individual basis and will be reflected in the IPP.
12. All services purchased by FNRC require prior authorization. Retroactive authorizations may be granted only in cases where the service was called for by an emergency, FNRC staff were not available, and FNRC was notified as soon as possible after the service was provided (Title 17 California Code of Regulations 54326 (a)(10)).
13. FNRC will not continue to fund a service unless the ID team agrees that reasonable progress toward Individual Service Plan (ISP) objectives has been made (Welfare and Institutions Code Section 4648 (a)(7)); Title 17 California Code of Regulations Section 56716 (c)(2)).
14. FNRC will only purchase goods and services from vendored or contracted providers (Welfare and Institutions Code Sections 4648(a)(3)(A)).
15. FNRC will purchase services within the nine county region when appropriate and economically feasible.
16. Services purchased for children will assist families that care for them at home when that is the preferred objective in the child's IPP.
17. The Interdisciplinary (ID) team has determined that the service and supports will accomplish all or part of the person's IPP or IFSP.

- a. All services and supports provided to a consumer must be included in the IPP or IFSP

PURCHASE OF SERVICE GUIDELINES

FNRC developed the attached Purchase of Service Guidelines to reflect the circumstances under which public funds may be utilized by the regional center to purchase services and/or supports. The guidelines address the most typical categories under which funds are expended, and they are not necessarily all-inclusive. Each category contains a definition, guidelines, amount purchased, and approval authority. The guidelines apply to all consumers, regardless of status 1 or 2.

EXCEPTIONS

The Executive Director has full discretion to authorize purchases that are not consistent with the Funding Policy or POS guidelines when there are compelling individual circumstances.

CANCELLATION OF OUTSTANDING AUTHORIZATIONS

When a consumer relocates out of the FNRC catchment area, all authorizations are to be cancelled and payments are to be made only on new authorizations created in light of the move.

REVIEW OF PURCHASE OF SERVICE FUNDING POLICY AND GUIDELINES

Management staff will be responsible for periodically reviewing the Purchase of Service Funding Policy and Guidelines to determine if additions and/or revisions are needed to comply with current service needs or regulatory changes issued by the Department of Developmental Services. If revisions are indicated, the Executive Director will present the recommended changes to the Board of Directors for approval.

ADULT DAY PROGRAMS

Definition: Adult Day Programs are day service programs that provide non-medical care to persons with physical and/or cognitive impairments. Day Programs provide a variety of services such as personal care, protective supervision, and assistance with activities of daily living, recreation, pre-vocational training, and socialization. Services are provided according to an Individual Service Plan (ISP) that outlines activities and instruction tailored to the individual's goals and abilities. Day Programs fall under five different categories:

Activity Center (AC): is a community based day program that serves consumers who are independent in most of their basic self-care needs. In addition, consumers in these programs are able to make their needs known verbally or through adaptation and are able to interact with others. Activity Center programs focus on the development and maintenance of functional skills such as self-advocacy, community integration, socialization, and pre-vocational skills.

Adult Development Center (ADC): is a community based day program that serves consumers who need assistance with some or most of their basic self-care needs. Individuals who attend Adult Development Centers generally need sustained support and direction in developing the ability to interact with others, to make their needs known, and to respond to directions. Adult Developmental Center programs focus on the development and maintenance of functional skills such as self-advocacy, community integration, socialization, and pre-vocational skills.

Behavior Management Program: is a community based day programs that serves adults with severe behavioral disorders and/or dual diagnoses who are unable to attend other day programs because of behavioral issues.

Community Integration Program: is a community based day program that provides unique and specialized day program activities that focus on pre-vocational training, social recreation and community access.

Mobile Day Program: is a community based day program that brings day program services to the consumer's home or the community. Mobile Day Programs provide day program services to consumer consumers unable to attend a traditional day program due to behavioral, health, or other concerns.

Guidelines: **Guidelines:** Adults with developmental disabilities should be provided access to cost-effective community-based day programs appropriate to their needs and consistent with their preferences. Far Northern Regional Center (FNRC) typically purchases adult day program services under the following conditions:

1. Consumer is at least 18 years of age.

2. Public education services are no longer available or have been determined inappropriate.
 - a. For consumers under the age of 22, the request to exit public education must come from the consumer and/or their conservator.
3. The need for the service must be directly related to the qualifying developmental disability.
4. Before making a referral to a day program, the Interdisciplinary (ID) Team must consider generic resources such as the Department of Rehabilitation, adult day health care, local mental health programs, and senior citizen programs.
5. Services must be provided in the home community, if possible.
 - a. The chosen program must allow for reasonable transportation services to get the consumer to and from his/her day program.
 - b. If a consumer/family chooses a program outside of his/her home community and a closer program exists which can meet their needs, FNRC will only fund transportation to the closest program that can meet the consumer's needs.
6. The staffing ratio of the selected program ~~is~~ must be consistent with the needs of the consumer.
7. The program (including transportation costs) must reflect a cost-effective use of public resources.
8. The ID team has determined the number of days per week that the consumer will attend the program.
9. The program meets the standards for non-residential services specified in Title 17, California Code of Regulations.
10. Continued funding of a day program is based on the agreement that the program is making reasonable progress on the consumer's ISP objectives.

Amount Purchased: As determined by the ID team, but not to exceed five days per week.

Approval Authority: Case Management Supervisor

ASSISTIVE COMMUNICATION DEVICES

Definition: An assistive communication device is any piece of equipment, product, or system that is used to increase, maintain, or improve functional communication capabilities of individuals with developmental disabilities. Assistive communication devices may be purchased commercially, modified or customized to individual needs.

Guidelines: Assistive communication devices may be purchased to maintain, increase, or improve an individual's ability to communicate. Far Northern Regional Center (FNRC) may purchase an assistive communication device under the following conditions:

1. The individual lacks basic, age appropriate communication skills essential to daily living.
2. The need for the assistive communication device is directly related to the qualifying developmental disability.
3. An assistive communication evaluation must be prescribed by the consumer's physician.
4. The need for the assistive communication device should be evaluated by a multi-disciplinary team consisting of a speech and language specialist, an occupational and/or physical therapist, and a technology specialist.
5. The evaluation should occur in natural environments whenever possible.
6. An assistive communication evaluation must include specific training objectives related to the device being recommended and include a schedule of periodic reassessments.
7. Assistive communication devices purchased by FNRC must be cost effective and appropriate to the consumer's natural environment.
8. Evaluations, equipment, and training for school-aged children shall be purchased only after it has been determined that the device is not necessary to provide the child a free, appropriate public education.
 - a. Assistive devices purchased for home use should be coordinated with assistive devices used in the school environment.
9. Evaluations will include a review of any existing communication system the consumer currently uses (including in the school environment).
10. Evaluations, equipment, and training for any consumer shall be purchased only after it has been determined that the device is not a benefit of any

public or private insurance plan, or generic resource. This information must be provided to FNRC in writing.

- a. FNRC may require consumer/family to appeal denials from public or private insurance carriers prior to purchasing equipment, training or evaluations.
- b. FNRC may require a consumer or family to apply for a generic resource, if appropriate.

11. Once equipment is purchased, it becomes the property of the consumer.

12. Once an assistive communication device is purchased by FNRC, the individuals' IPP must address how, where, and when training, utilization, and periodic reassessments will occur.

Amount Purchased: Evaluation – up to 10 hours
Equipment, repairs, and training – determined on an individual basis

Approval Authority: Evaluations –Case Review Committee
Equipment, repairs and training, up to \$1,000 – Associate Director of Case Management
Equipment and training over \$1,000 –Case Review Committee

AUDIOLOGY

Definition: Audiology is a branch of medicine that focuses on hearing, including the anatomy and function of the ear; impairment of hearing; and evaluation, education or re-education, and treatment of persons with hearing loss

Guidelines: Needed audiological services may be purchased by Far Northern Regional Center (FNRC). FNRC may purchase audiological services under the following conditions:

1. The need for audiological services is directly related to the qualifying developmental disability.
2. The treatment is not experimental in nature.
3. FNRC funding will not supplant the family's responsibility for providing similar services to those needed for a non-disabled child.
4. The service is not available through Medi-Cal, Medicare, private insurance, California Children's Services (CCS), or any other publicly funded resource.
5. FNRC funding will not be used to meet Medi-Cal liabilities or private insurance deductibles.
6. If private insurance pays part of the cost of audiological services, FNRC's payment will be limited to the difference between the rate Medi-Cal pays for the service and the amount paid by the insurance company.
7. FNRC funding is limited to the Schedule of Maximum Allowance (SMA) or current Medi-Cal rate.

Amount Purchased: As determined on an individual basis

Approval Authority: Services up to \$1,000.00 – Associate Director of Case Management
Services over \$1,000.00 – Case Review Committee

BEHAVIOR MANAGEMENT SERVICES

Definition: Behavior management services are services using Applied Behavior Analysis (ABA) techniques designed to increase adaptive behaviors and/or prevent, reduce, or eliminate maladaptive behaviors.

Guidelines: Behavior management services are purchased to assist families or residential providers to support individuals with behavioral problems in the least restrictive living arrangement. Far Northern Regional Center (FNRC) may purchase behavioral management services under the following conditions:

1. The need for the service must be directly related to the qualifying developmental disability.
2. Rule out medical factors as the cause or contributing factor to the behavioral problems.
3. The consumer's parents or care providers must attend an orientation which describes the goals and expectations of behavioral management services.
 - a. Behavioral management services require active and unpaid parent/care provider participation.
4. The consumer demonstrates behaviors that pose a threat to the health or safety of the individual or to others, and/or the consumer's behaviors are jeopardizing the least restrictive living arrangement.
5. FNRC will only purchase Applied Behavioral Analysis (ABA) services or intensive behavioral intervention services that reflect evidence-based practices, promote positive social behaviors and ameliorate behaviors that interfere with learning and social interactions.
6. The formal assessment from the behavioral management vendor must show that the consumer will benefit from behavioral services in the environment in which the service is to be provided.
7. The behavior services vendor must develop an Individual Service Plan (ISP) which specifically addresses the objectives to be met through behavioral management services and details the plans for meeting those objectives.
 - a. ISPs and any related behavior plan will be reviewed to ensure that the plan will not cause pain or trauma.
8. At a minimum, this service will be re-evaluated at six-month intervals, or less, to assess that the consumer is making reasonable progress.
9. Behavioral services cannot be used in lieu of respite or day care.

10. FNRC will not supplant the responsibility of the local public educational agency, mental health agency, state adoptions, or any other publicly funded agency for providing behavioral management services in school or other educational environments.

Amount Purchased: Initial Assessment – up to 15 hours
Ongoing hours – based on assessment, not to exceed 40 hours per week.

Approval Authority: Associate Director of Case Management

CAMP

Definition: A facility or program that provides recreation activities. Usually provided during the summer, a camp provides consumers the opportunity to recreate, learn about nature and socialize away from home. Camp occurs in locations outside of the family home.

Due to legislative changes to the Lanterman Act effective July 1, 2009, FNRC's authority to purchase camping services was suspended pending the implementation of an individual choice budget.

An exemption to the suspension of funding for this service may be granted on an individual basis in extraordinary circumstances to permit purchase of camping services when FNRC determines that the service is a primary or critical means for ameliorating the physical, cognitive, or psychosocial effects of the consumer's developmental disability, or the service is necessary to enable the consumer to remain in his or her home and no alternative service is available to meet the consumer's needs. [California Welfare and Institutions Code 4648.5 (a)(1)(2)(4)(c)]

Guidelines: Far Northern Regional Center (FNRC) may purchase camping services under the following conditions:

1. FNRC funding will not supplant the family's responsibility for providing similar services to those needed for a non-disabled child.
 - a. If a camp charges more for a child with disabilities, then FNRC will only fund the difference between what a child *without* disabilities is charged and what a child *with* disabilities is charged.
2. The need for the service must be directly related to the qualifying developmental disability.
3. FNRC will fund up to one session of camp, not to exceed seven (7) days per fiscal year.
4. The camp must be able to accommodate the level of physical, social, and behavioral needs of the consumer.
 - a. A physician's order/approval may be requested for individuals with compromised health conditions.
5. Parent(s) must provide transportation to and from camp or to a designated drop off location.

Amount Purchased: Usual and Customary

Approval Authority: Case Management Supervisor

CLOTHING

Definition: Clothing consists of garments and wearing apparel essential to daily living

Guidelines: Families are responsible for providing clothing for children, and most adults have access to Supplemental Security Income (SSI), wages, or other income to meet their clothing needs. Far Northern Regional Center (FNRC) may consider purchasing clothing in the following circumstances:

1. The developmental disability presents a unique cost for clothing above that for a non-disabled person of the same age.
2. The individual has experienced a significant change in weight and no longer has clothes that fit appropriately.
3. The individual has been placed in a licensed residential facility and has an inadequate supply of clothing.

Amount Purchased: As determined on an individual basis, but generally not to exceed \$200 per fiscal year for consumers living in community care facilities and \$400 per fiscal year for consumers living in ICF/DD-H, ICF/DD-N, or skilled nursing facilities.

Approval Authority: Case Management Supervisor.

COMMUNITY ACTIVITIES SUPPORT SERVICES (CASS)

Definition: Community Activities Support Services (CASS) provides support on a time-limited basis to assist consumers with various activities. CASS is a non-instructional support service. CASS services may include transportation, moving assistance, assistance with paperwork, community integration, assistance locating housing, picking up medications and non-instructional grocery shopping and similar tasks.

Guidelines: Community Activities Support Services (CASS) may be purchased as a cost effective means for obtaining needed services under the following conditions:

1. The need for this service must be directly related to the qualifying developmental disability.
2. The Interdisciplinary (ID) Team agrees that there is a need for this service.
3. The service will meet specific, time-limited objectives in the Individual Program Plan (IPP).
4. The service is not available through an unpaid natural support, such as family or friends.
 - a. Agencies that provide transportation assistance (including, but not limited to California Children's Services or Shriner's) should be contacted before authorizing CASS for transportation.
 - b. Generic agencies and other natural supports must be considered.
5. The service is not available through In-Home Support Services (IHSS).
6. The service is designed to provide supportive assistance rather than consumer skill training.
7. The ID Team agrees the service is meeting the needs for which it is intended.
8. The service is a cost effective use of public resources.

Amount Purchased: As determined on an individual basis. Authorizations may be set up for one time only, weekly, or monthly.

Approval Authority: One time service, up to eight (8) hours – Case Management Supervisor
All other uses – Associate Director of Case Management

COMPUTERS

Definition: A device that computes, especially a programmable electronic machine that performs high-speed mathematical or logical operations or that assembles, stores, correlates, or otherwise processes information.

Guidelines: Generally Far Northern Regional Center (FNRC) does not purchase computers since it is considered a family or individual responsibility. FNRC may fund a computer purchase under the following conditions:

1. FNRC funding will not supplant the family's responsibility for providing similar services to those needed for a non-disabled child, or the individuals' responsibility in the case of an adult.
2. The need for a computer is related to the qualifying developmental disability.
3. The need for a computer is not the responsibility of another publicly funded agency such as (but not limited to) the Local Education Agency (LEA) or the Department of Rehabilitation.
4. Computers purchased by FNRC should reflect a cost-effective use of public funds and be appropriate for use in the consumer's home environment.
5. FNRC may fund repairs related to device malfunction or errors. Routine maintenance and repair to damaged equipment is the responsibility of the consumer and/or family.
6. Once equipment is purchased, it becomes the property of the consumer.
7. FNRC will not purchase printers, cables, Internet services or other components of a full computer system. FNRC purchases are limited to a monitor, computer, keyboard and mouse.

Amount Purchased: Varies

Approval Authority: Up to \$1,000 – Associate Director of Case Management
Over \$1,000 – Case Review Committee

CONSERVATORSHIP

Definition: Conservatorship is the legal appointment of a designated individual by a judge to protect and manage the financial affairs and/or the person's daily life due to physical and/or mental limitations.

Guidelines: The need for conservatorship services for adults with developmental disabilities should be determined on an individual basis. Far Northern Regional Center (FNRC) may fund the legal services to establish conservatorship services as well as ongoing costs in the following circumstances:

1. The needed legal services are not available through local mental health agencies, the public guardian or other public agencies.
2. The need for the service must be directly related to the qualifying developmental disability.
3. FNRC must take into account the family's or conservatee's responsibility to fund legal services for conservatorship.
4. There is an immediate, identifiable medical or protective need for conservatorship which cannot be met through less restrictive means (i.e. power of attorney, etc).
5. The consumer's family supports the appointment of the proposed conservator.
 - a. FNRC will not fund conservatorship services in cases where there is familial discord regarding the appointment of conservator.
6. FNRC will only fund legal services to pursue a limited conservatorship.
7. FNRC will not support including the powers of "prevention of sexual activity" or the "prevention of marriage" in a limited conservatorship except in extreme or unusual circumstances.
8. The proposed conservator must participate in an orientation prior to FNRC's approval of funding for conservatorship.
9. The proposed conservator must be willing and capable of discharging the legal responsibilities for acting on behalf of the consumer.

Amount Purchased: Usual and customary legal fees charged for obtaining and/or maintaining conservatorship

Approval Authority: Case Review Committee

COUNSELING

Definition: Counseling is a process provided by a licensed practitioner meant to assist in changes needed to live a more stable and productive life by reducing stressors and improving coping mechanisms.

Guidelines: Far Northern Regional Center (FNRC) generally does not fund counseling services due to the availability of private and community resources. In some cases, FNRC may purchase time-limited counseling services for consumers and/or their families under the following conditions:

1. The need for counseling services must be directly related to the qualifying developmental disability.
2. FNRC will not assume the family's responsibility for funding counseling services for a minor consumer that is similar to what is needed for a child without disabilities.
3. The requested counseling service is not available through the local mental health agency, non-profit counseling agencies, or other free or low-cost community counseling resources.
 - a. Counseling resources that offer sliding-scale fees based upon income are considered a community resource and FNRC will not assume funding for part or all of the counseling costs in such cases.
 - b. FNRC may request the filing of an administrative appeal if counseling services are denied by other resources.
4. Counseling services cannot be billed to Medicare, Medi-Cal and/or private insurance.
 - a. A written denial from insurance, Medi-Cal or Medicare is required.
 - b. FNRC may request the filing of an administrative appeal if counseling services are denied.
5. All counseling services will be provided on an out-patient basis.
6. The initial service purchased will be an assessment of the individual's need for counseling and recommendations for further treatment including objectives, plans, and target dates.
7. Each reauthorization will require an assessment of the individual's need for counseling, progress, and a revised treatment plan.
8. Authorizations will be set up for periods not to exceed twelve months and will not be renewed without the Interdisciplinary (ID) team's concurrence that satisfactory progress is being made.

Amount Purchased: Individual evaluations may be authorized for up to three (3) hours.

Ongoing counseling will be determined on an individual basis, generally not to exceed:

Counseling for parents after child's diagnosis – up to twelve (12) sessions total.

Counseling for consumers – not to exceed twenty (20) sessions per fiscal year.

Approval Authority: Initial assessments –Associate Director of Case Management
Ongoing counseling – Associate Director of Case Management

DAY CARE

Definition: Supervision and care for disabled children and adults provided less than 24 hours per day by a person or organization.

Guidelines: Day care may be purchased to assist working families with the care and supervision of their disabled family members and to enable them to remain living with their families. FNRC may fund day care under the following conditions:

1. Day care services are available only to consumers who live with a family member.
 - a. Family member is an individual who:
 - i. Has a consumer residing with him or her
 - ii. Is responsible for the 24-hour care and supervision of the consumer
 - iii. Is not a licensed or certified residential care facility or foster family home receiving funds from any public agency or regional center for the care and supervision provided.
2. Family member must be engaged in work, an educational program leading to work, or both.
3. Consideration must be given to natural supports and generic resources, including In Home Support Services (IHSS).
4. The family is responsible for the cost of day care charged for a child without disabilities
5. Before the age of 13, FNRC may purchase day care services only when the costs for day care exceed the cost of a child without disabilities.
 - a. In such cases, FNRC will only pay the difference between the cost for a child *with* disabilities and the cost for a child *without* disabilities.
6. The day care service provider selected by the Interdisciplinary (ID) team must be cost effective.
7. Day care may not be used to replace or supplant respite services.
8. FNRC will not fund day care services during school hours or when school is in session.

Amount Purchased: As determined on an individual basis.

Approval Authority: Associate Director of Case Management

DENTAL SERVICES

Definition: Dental services are the services prescribed and/or provided by licensed health care professionals designed to maintain or improve oral health.

Guidelines: Medi-Cal/Denti-Cal funding for adults was eliminated in 2009. The Department of Developmental services authorized Far Northern Regional Center (FNRC) to fund dental care for consumers who lost dental coverage. As a result, FNRC may purchase dental services in the following circumstances:

1. If the consumer is 21 years of age or older and receives Medi-Cal, FNRC may fund dental care with the following criteria:
 - a. All services will be funded at the Medi/Denti-Cal rate.
 - b. FNRC will only fund dental services that were allowed under Medi/Denti-Cal rules.
 - c. Annual dental expenditures will not exceed the limits that existed under Medi/Denti-Cal.
2. Dental services are still a covered benefit under Medi/Denti-Cal for persons under the age of 21, and for persons residing in ICFs and SNFs.

FNRC may purchase dental services that exceed what Medi-Cal/Denti-Cal allows under the following conditions:

1. The service is directly related to the qualifying developmental disability.
2. The treatment is not experimental in nature.
3. FNRC funding will not supplant the family's responsibility for providing similar services to those needed for a non-disabled child.
4. The service is not available through Medi-Cal, Medicare, private insurance, California Children's Services (CCS), or any other publicly funded resource.
5. FNRC funding will not be used to meet Medi-Cal liabilities or private insurance deductibles.
6. FNRC funding is limited to the Schedule of Maximum Allowance (SMA) or Medi-Cal rates.
 - a. Exceptions may be made if FNRC can demonstrate the needed dental services cannot be obtained without exceeding the SMA rate.
7. If private insurance pays part of the cost of dental services, FNRC payment will be limited to the difference between the rate Medi-Cal pays for the

service and the amount paid by the insurance company.

Amount Purchased: As determined on an individual basis

Approval Authority: Services up to \$1,000 – Associate Director of Case Management
Services over \$1,000 – Case Review Committee

DIAGNOSTIC SERVICES

Definition: Diagnostic services are medical, psychological, and related services necessary to establish the diagnosis and/or substantially handicapping nature of a developmental disability.

Guidelines: Far Northern Regional Center (FNRC) may purchase diagnostic services for persons known to have or suspected of having a developmental disability under the following circumstances:

1. The service is necessary to confirm or rule out a diagnosis of mental retardation, epilepsy, cerebral palsy, autism, or a condition similar to mental retardation.
2. The service is necessary to establish the substantially handicapping nature of the developmental disability.
3. The service cannot be billed to or provided by another public agency, such as (but not limited to) Medi-Cal, California Children's Services (CCS), or the Local Education Agency (LEA).
4. If families use private insurance, FNRC payment will be limited to the difference between the Schedule of Maximum Allowances (SMA) or Medi-Cal rate and the amount paid by the insurance company.

Amount Purchased: Varies

Approval Authority: Non-medical evaluations – Intake Specialist
Medical and psychological evaluations, up to \$1,000 – Associate
Director of Case Management
Medical and psychological evaluations, over to \$1,000 – Case Review
Committee

EMERGENCY RENTAL ASSISTANCE

Definition: Emergency rental assistance refers to the funding of emergency rent for consumers.

Guidelines: Far Northern Regional Center (FNRC) generally does not pay rent for consumers because it is considered a basic living expense to be funded from SSI or SSA benefits. In unusual and dire circumstances, FNRC may fund rent on a short-term basis. FNRC will fund rent only under the following conditions:

1. The consumer is homeless and has a medical condition or other issues which make homelessness a danger to health and safety.
2. The need for the service must be directly related to the qualifying developmental disability.
3. FNRC will only fund housing that is within the average rental cost for the locality in which the consumer lives (average rents according to information from the local Housing Authority or similar agency).
4. Consumer agrees to receive Independent Living Skills (ILS) services.
5. Consumer agrees to have a representative payee.
 - a. If the consumer does not have SSI, he/she will need to apply or appeal, if denied.
6. Before FNRC funds rent (or at the next opportunity), the consumer must apply for Section 8 housing assistance.
7. Rental assistance should not exceed 30 days.
 - a. Interdisciplinary (ID) Team shall meet and develop a plan for the consumer to pay their own housing costs within 14 days.
8. Before FNRC funds rent, the ID Team shall develop a plan for the consumer to reimburse the regional center.

Amount Purchased: Varies

Approval Authority: Case Review Committee

FAMILY HOME SERVICES

Definition: Family home services refer to a residential service model in which a consumer is matched with a specially trained family that provides room and board along with care and supervision.

Guidelines: Far Northern Regional Center (FNRC) may purchase family home services under the following criteria:

1. The consumer is over the age of 18
2. The consumer and/or conservator agree that a family home is the most appropriate residential choice option.
3. The consumer's needs have been assessed and the family home is able to provide the appropriate level of care and supervision.
 - a. The family home has the resources and training necessary to implement a specialized health care plan for the consumer, if necessary.
 - b. The family home has the resources and training necessary to implement a behavior plan appropriate to the consumer, if necessary.
4. The family home is within access of educational and/or vocational resources to meet the consumer's needs as identified in the Individual Program Plan (IPP).
5. The Interdisciplinary (ID) Team agrees the facility is making reasonable progress on the consumer's Individual Service Plan (ISP) objectives.

Amount Purchased: The amount purchased will be consistent with each family home agency's approved Tier Levels appropriate to each individual's needs.

Approval Authority: Level determinations – Associate Director of Case Management
Placement authorizations – Case Management Supervisor

HOME HEALTH CARE

Definition: Home health care is a form of health care service provided where a consumer lives. Consumers can receive home health care services whether they live in their own homes, with or without family members, or in a supported living or residential care environment. The purpose of home health care is to promote, maintain, or restore a consumer's health and reduce the effects of disease or disability.

Guidelines: Far Northern Regional Center (FNRC) recognizes that the need for home health care is not unique to persons with developmental disabilities. At the same time, the presence of a developmental disability may present a special need for additional support such as home health care. FNRC may purchase home health care under the following conditions:

1. The need for the service is directly related to the qualifying developmental disability.
2. Any home health care services must be prescribed or authorized by a physician.
3. FNRC will take into consideration the family's responsibility for providing similar services and supports to minor children without disabilities.
4. There is documentation stating the service is not available through Medi-Cal, Medicare, California Children's Service (CCS), or any other public or private insurance provider.
5. The service is a cost effective use of public resources.
6. FNRC funding will not be used to meet Medi-Cal liabilities or private insurance deductibles.
7. Authorizations will not exceed six (6) months at a time.

Amount Purchased: As determined on an individual basis

Approval Authority: RN Evaluation, up to two (2) hours – Associate Director of Case Management
Onset of service – Case Review Committee
Reauthorizations – Associate Director of Case Management

HOME MODIFICATIONS

Definition: Home modifications refer to physical changes made to a consumer's home to improve access and enable consumers with physical disabilities to be as independent as possible in their own homes.

Guidelines: Generally, physical modifications to consumer or family homes are the responsibility of the consumer or their family. In some cases Far Northern Regional Center (FNRC) may fund home modifications under the following criteria:

1. The need for the service is directly related to the qualifying developmental disability.
2. The consumer has a physical disability that limits their ability to freely access their home environment.
3. The need for home modification has been evaluated and recommended by a physical therapist or occupational therapist.
4. All other sources of funding, such as (but not limited to) the local housing authority, Medi-Care, Medi-Cal, and non-profit organizations have been exhausted.
 - a. Written denials from community resources may be required.
5. The service must reflect a cost-effective use of public funds.
6. All home modifications must be provided by a licensed building contractor.
7. At least three (3) estimates from licensed contractors are required before authorizing home modifications.
8. The consumer or family must own the home in which modifications are planned or present documentation to FNRC from the owner agreeing to all modifications.
 - a. FNRC will not fund major structural changes to a rental property.
9. FNRC will fund the minimal modifications necessary to ensure safety and access.

Amount Purchased: Varies

Approval Authority: Case Review Committee

INCONTINENCE SUPPLIES

Definition: Incontinence supplies are disposable undergarments designed to provide protection against leakage due to bowel and/or bladder incontinence and related items such as chucks, pads, gloves wipes, and cleansing agents.

Guidelines: Far Northern Regional Center (FNRC) may purchase incontinence supplies under the following conditions:

1. FNRC considers the purchase of incontinence supplies for children under the age of three a family responsibility.
 - a. FNRC may purchase incontinence supplies for children under three years of age when the family can demonstrate a financial need and when doing so will enable the child to remain in the family home.
2. The need for the service directly relates to the qualifying developmental disability.
3. FNRC funding will not supplant the family's responsibility for providing similar services to those needed for a non-disabled child.
4. The incontinence supplies are essential to basic activities of daily living.
5. The consumer and family must agree to implement a toilet training program.
6. All outside sources of funding have been exhausted.
 - a. Outside sources include, but are not limited to California Children's Services, Medi-Cal, and private insurance.
 - b. Written denials from alternative funding sources may be requested.
7. FNRC will only fund generic incontinence supply products.
8. Requests to purchase specialized diapers due to allergies to latex or other ingredients present in commercial diapers require a complete diagnostic explanation from the consumer's physician.

Amount Purchased: Varies

Approval Authority: Case Management Supervisor

INDEPENDENT LIVING PROGRAM

Definition: Independent Living Programs (ILP) are programs that instruct adult consumers in the functional skills necessary to secure and sustain an independent living situation in the community. ILP may also provide the necessary support to maintain independent living skills over time.

Guidelines: Far Northern Regional Center (FNRC) may purchase an Independent Living Program under the following conditions:

1. The consumer is at least 18 years of age.
2. The need for the service is directly related to the qualifying developmental disability.
3. The consumer must be living independently or have an identified plan to move into independent living within six (6) months from the start of an ILP.
4. For consumers who live in residential care, ILP services will commence no more than 30 days before the planned move into an independent living setting.
5. The same or similar service is not available through another community agency.
6. A formal assessment indicated the consumer has a need for instruction, and specific measurable objectives have been developed to meet those needs.
7. The training objectives are measurable and focus on the acquisition and retention of functional skills.
8. ILP services must reflect a cost effective use of public funds. Cost effectiveness, includes the hourly rate plus any additional costs (transportation, etc).
9. Authorizations for ILP services will not exceed six (6) months.
10. ILP services are designed to provide instruction. If a consumer needs assistance completing a task without instruction or has shown an inability to complete a necessary task, In-Home Supportive Services (IHSS) or Community Activities Support Services (CASS) must be considered.
11. The Interdisciplinary (ID) team has agreed the consumer is making reasonable progress on measurable ILP objectives.

Amount Purchased: Initial Evaluations –up to 14 hours
Apartment/Housing Search – Up to 10 hours
Ongoing ILP services are authorized on an individual basis.

Approval Authority: Evaluations – Case Management Supervisor
Apartment/Housing Search – Case Management Supervisor
Ongoing services, up to 17 hours/month – Case Management Supervisor
Ongoing services, over 17 hours/month – Associate Director of Case Management

INFANT DEVELOPMENT SERVICES

Definition: Infant Development Services are services which provide instruction and activity programs for children aged 0-36 months, and their families. Services are provided individually and in small, organized groups. Parents and/or primary care providers (such as day care providers) must participate in the program. These services are designed to encourage the development of the child to prepare them for entrance into local schools as appropriate.

Guidelines: Far Northern Regional Center (FNRC) may fund infant development services under the following conditions:

1. The consumer is under the age of 36 months.
2. The consumer does not qualify for services from a publicly supported local school or, if qualified, is awaiting service because the local school program is inactive or there are no current vacancies.
3. The Individual Family Service Plan (IFSP) or Individual Program Plan (IPP) includes an objective or outcome which can be met by an infant development program.
4. The Interdisciplinary (ID) Team agrees reasonable progress is being made toward the IPP/IFSP objective/outcome for which the program is responsible.
5. In keeping with the interagency agreement between the California Department of Developmental Services and the California Department of Education to implement California's Early Start Program, funding for an Infant Development Program will only be terminated due to the consumer reaching 36 months, a change the consumer's need for the program, or at the request of the parent.
6. Infant Development Services are not to be utilized in lieu of day care or respite.
7. Services are to be provided in the consumer's home or the most natural learning environment possible.

Amount Purchased: As determined by the ID team based on an assessment of the infant's and family's needs

Approval Authority: Case Management Supervisor

INTENSIVE EARLY TREATMENT FOR AUTISM

Definition: Intensive early treatment for autism is an Applied Behavior Analysis (ABA) based, in-home program. This program is characterized by face-to-face training implemented by trained staff using techniques specifically designed for children with a confirmed Autism Spectrum Disorder (ASD) diagnosis to address skill, behavior, and communication deficits.

Guidelines: Far Northern Regional Center (FNRC) may purchase intensive early treatment for children with autism if all of the following criteria are met:

1. The child has a suspected diagnosis of Autism Spectrum Disorder (ASD), before the age of 36 months. After the age of 36 months, there must be a confirmed diagnosis of ASD.
2. There is evidence that indicates the child is likely to respond to the treatment.
3. The parent(s) are willing and able to support and participate in the treatment program.
4. The parent(s) are willing to be trained in the teaching approaches used.
5. The parent(s) will not be reimbursed for services they provide.
6. It is expected that as parents become trained in the teaching approaches used, they will assume an increased responsibility for the intervention plan.
7. Funding for the treatment will not exceed three (3) month increments.
8. For each additional three (3) month increment, FNRC must be in receipt of a detailed written report that demonstrates clear evidence of meaningful progress and presents justification for further intervention.
9. The service is a cost-effective use of public resources.
10. The service curriculum is research based; peer reviewed, and has evidence of empirical effectiveness.
11. All services provided under this guideline must emphasize the use of positive, non-aversive interventions and be in compliance with Title 17, Sections 50800 – 50823, concerning peer review of behavior management techniques that cause pain or trauma.

Amount Purchased: Initial evaluations and training may be purchased up to 20 hours total.

On-going treatment will be determined on an individual basis but will not exceed 20 hours per week for a child who is participating in a structured pre-school or 30 hours per week for a child for whom no structured pre-school is available.

Approval Authority: Initial evaluations and training – Case Review Committee
On-going treatment – Case Review Committee

MEDICAL EQUIPMENT & SUPPLIES

Definition: Medical equipment and supplies are durable and non-durable products essential to the health, maintenance, or well-being of persons with developmental disabilities. Included in the term are equipment or adaptations designed to maintain or increase independence and/or to facilitate living in the least restrictive environment.

Guidelines: FNRC may fund needed medical equipment and supplies, including adaptations, under the following conditions:

1. The need for the equipment or supplies relate directly to the presence of the qualifying developmental disability.
2. The cost-effectiveness of renting equipment versus purchase has been evaluated.
3. The equipment and/or supplies are essential to basic activities of daily living.
4. The equipment and/or supplies are age appropriate.
5. The consumer's physician has prescribed the medical equipment and/or supplies.
 - a. When appropriate an evaluation by and Occupational Therapist (OT) or a Physical Therapist (PT) may be required.
6. The consumer and/or the family have agreed to utilize the equipment for its intended purpose and that utilization is reflected in an Individual Program Plan (IPP) objective.
7. All outside sources of funding have been exhausted.
 - a. Including, but not limited to California Children's Services (CCS), Department of Rehabilitation, Medi-Cal, and private insurance.
8. At least three estimates must be obtained to determine the most cost-effective provider.
 - a. To determine cost-effectiveness, the total cost of the equipment, assembly and delivery must be taken into account.
9. FNRC may fund repairs related to equipment malfunction or errors. Routine maintenance and repair to damaged equipment is the responsibility of the consumer and/or family.
10. All durable medical equipment purchased by FNRC will become the property of the consumer.

11. FNRC funding is limited to the Schedule of Maximum Allowance (SMA) or Medi-Cal rates.

Amount Purchased: As determined on an individual basis

Approval Authority: Up to \$1,000 – Associate Director of Case Management
Over \$1,000 –Case Review Committee

MEDICAL SERVICES

Definition: Medical Services include the prevention, treatment, and management of illness and the preservation of physical well-being through the services offered by licensed medical and allied health professions. Services under this category include (but are not limited to) physicians, hospitals, clinics, and laboratories.

Guidelines: Far Northern Regional Center (FNRC) may purchase medical services in the following circumstances:

1. The service is directly related to the qualifying developmental disability.
2. The treatment is not experimental in nature.
3. FNRC funding will not supplant the family's responsibility for providing similar services to those needed for a non-disabled child.
4. The service is not available through Medi-Cal, Medicare, private insurance, California Children's Services (CCS), or any other publicly funded resource.
5. FNRC funding will not be used to meet Medi-Cal liabilities or private insurance deductibles.
6. FNRC funding is limited to the schedule of Maximum Allowance (SMA) or Medi-Cal rates.
7. If private insurance pays part of the cost of service, FNRC's payment will be limited to the difference between the Schedule of Maximum Allowances (SMA) and the amount paid by the insurance company.

Amount Purchased: As determined on an individual basis

Approval Authority: Services up to \$1,000 – Associate Director of Case Management
Services over \$1,000 – Case Review Committee

MEDICARE PART D

Definition: Medicare Part D refers to the prescription drug plan which covers Medicare recipients. When the program started, consumers who were receiving both Medi-Cal and Medicare benefits lost drug coverage from Medi-Cal. As a result, these “dual eligible” consumers are now required to pay for Over-The-Counter (OTC) medications along with small co-payments for prescription drugs. The Department of Developmental Services (DDS) authorized regional centers to provide assistance for consumers to meet these new costs.

Guidelines: Far Northern Regional Center (FNRC) may purchase OTC medications and fund co-payments for Medicare Part D under the following conditions:

1. The consumer lost prescription drug coverage from Medi-Cal and is “dual eligible” (receives both Medi-Cal and Medicare).
2. FNRC will not fund non-medically related over-the-counter (OTC) products.
 - a. Non-medically related OTCs include items such as shampoo, hand cream, hair care products and other items without an express medical purpose.
 - b. FNRC may request additional documentation from the consumer’s primary care provider.
3. FNRC will only fund OTC products if they are prescribed in writing by the consumer’s physician.
4. FNRC does not fund Medicare Part D deductibles or Medicare premiums.

Amount Purchased: Varies

Approval Authority: Associate Director of Case Management

MOBILE CRISIS SERVICE

Definition: Mobile crisis services provide evaluations and short-term behavioral interventions to consumers and their families for situations that do not warrant intervention by the police or other local authorities. Mobile crisis services are designed to help maintain a consumer's residence in the least restrictive environment possible.

Guidelines: The provision of a 24-hour crisis response is required by the Department of Developmental Services (DDS). Far Northern Regional Center (FNRC) may purchase mobile crisis services under the following conditions:

1. The need for the service must be directly related to the qualifying developmental disability.
2. The family, residential provider, and/or the consumer's significant other report that the consumer's behavior requires intervention.
3. There are no unpaid, natural supports available to deal with the situation.
4. Mobile crisis services are not to be used to address issues that are the responsibility of (or best handled by) law enforcement or the local mental health agency.
5. The service is to be provided on a time-limited, individual basis.
6. The mobile crisis vendor will provide a written summary of activity within 12 hours of the event.

Amount Purchased: Evaluations/emergency interventions –generally 4 to eight 8 hours.
Follow-up services –determined on an individual basis, if needed.

Approval Authority: Case Management Supervisor

MOBILITY/DESTINATION TRAINING

Definition: Mobility training refers to the instruction of consumers about their local public transportation system. This includes understanding the bus schedule; pick up times, drop-off times and any other task necessary for consumers to become transportation independent. Destination training is a basic version of mobility training focusing on teaching a consumer how to get from one location to another.

Guidelines: Far Northern Regional Center (FNRC) may fund mobility/destination training under the following conditions:

1. The need for the service is directly related to the qualifying developmental disability.
2. The same or similar service is not available through a community agency.
3. The use of public transportation is appropriate given the consumer's developmental disability.
4. Public transportation services must be available within a reasonable distance from the consumer's home and/or work/day program.
5. A formal assessment shows the consumer has a need for training, and specific objectives have been developed to meet those needs.
6. Mobility/destination training services must reflect a cost-effective use of public funds.

Amount Purchased: Varies

Approval Authority: Case Management Supervisor

NUTRITION SERVICES

Definition: Nutrition services are services provided to consumers in order to improve and/or maintain an individual's health and nutritional status. Nutrition services may include an evaluation, follow-up, consultation and/or supplies.

Guidelines: Nutrition services may be purchased by Far Northern Regional Center (FNRC) under the following conditions:

1. The need for the nutrition service is associated with, or results from a qualifying developmental disability or the service is to prevent a developmental disability.
2. FNRC funding will not supplant the family's responsibility for providing similar services to those needed for a non-disabled child.
3. Nutrition services must be prescribed by a physician and provided by a licensed nutritionist.
4. All alternative sources of funding (such as, but not limited to Medi-Cal, Genetically Handicapped Persons Program (GHPP), Medicare, California Children's Service (CCS) and private insurance) for nutrition services and supplies have been exhausted.
5. Licensed residential providers are generally expected to provide for the nutrition needs for their residents as part of their basic services.
6. Consumers who receive enteral (tube) feeding should be referred to a nutrition consultant for review and monitoring.
7. Nutrition supplements should not be purchased as a replacement for meals for consumers with oral motor skills sufficient to consume an adequate dietary intake by mouth unless they are medically indicated and approved by a nutrition consultant.
8. When nutrition supplies are prescribed for caloric supplementation, documentation of nutritional deficiency is required by a physician or nutritionist.
9. Authorizations for nutrition services will not exceed six (6) months.
10. Nutrition services should reflect a cost-effective use of public resources.

Amount Purchased: As determined on an individual basis

Approval Authority: Associate Director of Case Management

OCCUPATIONAL & PHYSICAL THERAPY

Definition: **Occupational therapy** - is a service provided by a professional under medical supervision who is registered by the American Occupational Therapy Association. Occupational therapy uses productive or creative physical activity in the treatment or rehabilitation of individuals with permanent or short-term physical disabilities.

Physical therapy - is a service provided by a professional under medical supervision licensed by the Physical Therapy Examining Committee of the Medical Board of California and who, under medical supervision, treats individuals to relieve pain, develop or restore motor function, and maintain performance by using a variety of physical means.

Guidelines: Far Northern Regional Center (FNRC) may purchase physical and/or occupational therapy under the following conditions:

1. The need for the service is directly related the qualifying developmental disability or the prevention of a developmental disability.
2. The service is not available through alternative resources such as, but not limited to, the public schools, California Children’s Services (CCS), private insurance, Medi-Cal and/or Medicare.
3. A physician has prescribed physical or occupational therapy services.
4. The service is essential to maintaining or improving an individual’s functioning skills.
5. A formal evaluation has addressed specific, time-limited treatment objectives.
6. The consumer and/or family member or care provider has agreed to follow through with the treatment objectives.
7. FNRC funding is limited to the Schedule of Maximum Allowance (SMA) or Medi-Cal rates.
 - a. For children under 36 months in Early Start, the rate may exceed SMA rates if the provider is vendored under specialized therapeutic service codes.

Amount Purchased: As determined on an individual basis
Authorizations shall not exceed six months in length.

Approval Authority: Case Management Supervisor, Early Intervention – Consumers under 36 months of age
Associate Director of Case Management Services – Consumers over 36 months of age

PARENTING SERVICES

Definition: Parenting services are programs that teach adult consumers who live independently the functional skills of parenting a child. In addition to teaching independent living skills, parenting services provide developmentally disabled parents an opportunity to receive pre-natal assistance, and to acquire and maintain effective parenting skills.

Guidelines: Far Northern Regional Center (FNRC) may purchase parenting services under the following conditions:

1. The parent must be a FNRC consumer and at least 18 years of age.
2. The need for the service is directly related to the qualifying developmental disability.
3. Parenting services may commence at the time a consumer becomes pregnant.
4. The consumer must live independently or have an identified plan to move into independent living.
5. The consumer expresses a willingness to participate in the program.
6. All alternative sources of funding have been exhausted.
7. A formal assessment shows the consumer has a need for training, and specific measurable objectives have been developed to meet those needs.
8. The instructional objectives are measurable and focus on the acquisition and retention of functional independent living and parenting skills.
9. Parenting services must reflect a cost effective use of public funds. Cost effectiveness, includes the hourly rate plus any additional costs (transportation, etc).
10. Authorizations for parenting services will not exceed six months.
11. The Interdisciplinary (ID) Team agrees the consumer is making reasonable progress on parenting service objectives.

Amount Purchased: Initial Evaluations – up to 15 hours
Ongoing parenting services are authorized on an individual basis.

Approval Authority: Evaluations – Case Management Supervisor
Ongoing services, up to 17 hours/month – Case Management Supervisor
Ongoing services, over 17 hours/month – Associate Director of Case Management

PSYCHIATRIC SERVICES

Definition: The medical specialty concerned with the prevention, diagnosis, and treatment of mental illness.

Guidelines: Mental illness can present special challenges to persons who have a developmental disability. Generally, Far Northern Regional Center (FNRC) does not purchase psychiatric services due to the availability of community resources. In some cases FNRC may purchase psychiatric services under the following conditions:

1. The need for the service is directly related to the qualifying developmental disability.
 - a. Any Axis I diagnosis will be referred to the local mental health agency.
2. FNRC funding will not supplant the family's responsibility for providing similar services to those needed for a non-disabled child.
3. The service is not available through county mental health agencies, Medi-Cal, Medicare, private insurance, California Children's Services (CCS), or any other publicly funded resource.
4. The consumer engages in behaviors that pose a health and/or safety threat to themselves or others, and/or the consumer's mental health is jeopardizing his/her current living arrangement.
5. FNRC funding will not be used to meet Medi-Cal liabilities or private insurance deductibles.
6. FNRC funding is limited to the Schedule of Maximum Allowance (SMA) or Medi-Cal rates.
7. Psychiatric services require parental/care provider participation, if appropriate.

Amount Purchased: As determined appropriate on an individual basis

Approval Authority: Associate Director of Case Management Services

RECREATION THERAPY

Definition: Recreation therapy is the provision of planned treatment or therapy (i.e. health restoration, remediation, habilitation, rehabilitation) by a certified recreation therapist or a recreation therapy assistant, which uses recreation and physical/social activities as the primary medium of treatment for persons who are limited in their functional abilities due to illness, disability, maladaptation, or other conditions.

Due to legislative changes to the Lanterman Act effective July 1, 2009, FNRC's authority to purchase recreation therapy services was suspended pending the implementation of an individual choice budget.

An exemption to the suspension of funding for this service may be granted on an individual basis in extraordinary circumstances to permit purchase of recreation therapy services when FNRC determines that the service is a primary or critical means for ameliorating the physical, cognitive, or psychosocial effects of the consumer's developmental disability, or the service is necessary to enable the consumer to remain in his or her home and no alternative service is available to meet the consumer's needs. [California Welfare and Institutions Code 4648.5 (a)(1)(2)(4)(c)]

Guidelines: Far Northern Regional Center (FNRC) may purchase recreation therapy under the following conditions:

1. The need for the service is directly related to the qualifying developmental disability.
2. The service will promote normalization and integration into the natural resources of the community.
3. The service must reflect a cost-effective use of public funds.
4. The service is not available through community resources or natural supports.
5. FNRC will not assume the family's responsibility for providing socialization opportunities and instruction for minor consumers similar to what is needed for a child *without* disabilities.
6. The Interdisciplinary (ID) team has developed specific, measurable Individual Service Plan (ISP) objectives that can only be met through recreation therapy services.
7. The services will be reviewed every 6 months.

Amount Purchased: As determined on an individual basis

Approval Authority: Evaluation, up to 6 hours – Case Management Supervisor
Up to 17 hours/month – Case Management Supervisor
Over 17 hours/month – Associate Director of Case Management

RESIDENTIAL CARE

Definition: Residential care is 24-hour non-medical care and supervision provided in a licensed community care facility. There are several types of residential care:

Community Care Facility (CCF) – Is a residential care facility licensed by community care licensing to provide room, board, and instruction to consumers who lack the skills to live independently. CCFs provide a varying level of care from level 2 to 4I. Consumers in level 2 facilities require minimal supervision and instruction. In contrast, level 4I facilities, consumers exhibit severe behavioral problems and/or self-care deficits.

Intermediate Care Facilities (ICF) - An intermediate care facility for the developmentally disabled is a residential program that has as its primary purpose the provision of health and/or rehabilitation services to individuals with mental retardation or related conditions receiving care and services under Medi-Cal. Each individual residing in an ICF must require and receive active treatment. ICF facilities include ICF-DDN (Intermediate Care Facility – Developmentally Disabled, Nursing), which focuses on medically compromised consumers and ICF-DDH (Intermediate Care Facility – Developmentally Disabled, Habilitative) for consumers who require significant assistance with activities of daily living.

Residential Care Facility for the Elderly (RCFE) – Similar to CCFs, residential care facilities for the elderly are licensed residential programs designed to serve consumers over the age of 55. In most cases, services at RCFE's are billed at the Usual and Customary (UNC) rate, which is based upon the costs the facility would charge a non-FNRC consumer. A few homes are vendored by FNRC and the rates are identical to what is charged in CCFs.

Guidelines: When an individual's needs can no longer be met at home or when home is no longer the preference of the individual and/or family, FNRC may purchase residential care under the following conditions:

1. The need for the service must be directly related to the qualifying developmental disability.
2. Placement should be in the least restrictive setting possible.
3. The consumer and/or conservator are in agreement with the need for out of home placement.
4. Preference should be given to small facilities located in or near the consumer's home community.
5. The consumer and/or authorized representative will be offered choices among appropriate, available facilities.

6. The consumer's needs have been assessed and the facility has been determined to offer an appropriate level of care.
 - a. The facility has the resources and training necessary to implement a specialized health care plan for the consumer, if necessary.
 - b. The facility has the resources, and training necessary to implement a behavior plan appropriate to the consumer, if necessary.
7. The facility is located near educational and/or vocational resources to meet the consumer's needs as identified in the Individual Program Plan (IPP).
8. The Interdisciplinary (ID) Team agrees the facility is making reasonable progress on the IPP objectives for which the facility is responsible.
9. Services will be terminated under the following conditions:
 - a. Residential provider has complied with T22 and T17 and given written three (3), seven (7), or 30 day notice.
 - b. In case of an immediate danger, (defined in T17) services can be immediately terminated by the FNRC.
 - c. The consumer and his or her designee can terminate the services at any time.

Amount Purchased: The amount purchased will be consistent with the facility's approved Service Level and as determined appropriate to each individual's needs.

Approval Authority: Level Determinations – Associate Director of Case Management
Placement Authorizations – Case Management Supervisor

RESIDENTIAL STABILIZATION SERVICES

Definition: Residential stabilization services refers to the use of a licensed residential facility which provides services to individuals with developmental disabilities who require 24 hour care and supervision and whose needs cannot be appropriately met by the assortment of available community living options. Residential stabilization services may include: assessment, medical and psychiatric treatment, behavior intervention, and transition planning to a less restrictive setting.

Guidelines: Individuals whose needs cannot be met within the selection of other available community living options may be able to access a licensed-specialized residential facility. In many cases, this type of service supports individuals who are otherwise at risk of placement in a developmental center or hospitalization for psychiatric services.

1. The consumer's living situation is threatened by behavioral, psychiatric, and/or medical problems that may be addressed through residential stabilization services at a licensed specialized residential facility.
2. The facility is located near educational and/or vocational resources to meet the consumer's needs as identified in the Individual Program Plan (IPP).
3. The consumer's needs have been assessed and the facility has been determined to provide an appropriate level of care.
4. To the extent feasible, the consumer and/or authorized representative will be offered choices among appropriate, available facilities.
5. The Interdisciplinary (ID) Team agrees the consumer is making reasonable progress on IPP objectives for which the facility is responsible.
6. Before a consumer leaves a licensed residential stabilization program, the ID Team must develop a detailed plan for transition to the consumer's preferred residential environment.
7. Services will be terminated under the following conditions:
 - a. Residential provider has complied with T22 and T17 and given written three (3), seven (7), or 30 day notice.
 - b. In case of an immediate danger, (defined in T17) services can be immediately terminated by Far Northern Regional Center (FNRC).
 - c. The consumer and his or her designee can terminate the services at any time.

Amount Purchased: Varies, per contract

Approval Authority: Case Review Committee

Definition: Respite is intermittent or regularly scheduled temporary care and supervision designed to:

1. Assist family members in maintaining the client at home.
2. Provide appropriate care and supervision to protect the client's safety in the absence of family members.
3. Relieve family members from the consistently demanding responsibility of caring for a client.
4. Attend to the client's basic self-help needs and other necessities of daily living, including interaction, socialization, and continuation of usual daily routines which would ordinarily be performed by a family member.

In-Home respite services are delivered in the client's natural environment and provided through a respite agency or an employer of record agency (which handles payroll and related paperwork).

Out-of-Home respite is provided in a licensed residential care facility vendored with Far Northern Regional Center or provided in a vendored camp in lieu of a licensed residential care facility.

Guidelines: FNRC may purchase respite services under the following conditions:

1. The care and supervision needs of the client exceed that of a person without developmental disabilities of the same age.
2. The client resides with a family member, guardian, or conservator.
3. FNRC funds will not be used to purchase respite services for a minor child without taking into account the family's responsibility for providing similar services to a minor child without disabilities.
4. Respite services must reflect a cost effective use of public funds. To determine cost effectiveness, the total cost of respite and transportation must be included.
5. Respite alternatives such as day programs, public schools, and In-Home Supportive Services (IHSS) have been pursued and utilized to the extent possible.
 - a. FNRC will only consider In-Home Supportive Services (IHSS) as a generic resource for respite when the approved services meet the respite need as identified in the client's Individual Program Plan

(IPP) or Individualized Family Service Plan (IFSP).

6. The Interdisciplinary (ID) Team has considered the cost-effectiveness of the various respite options.
7. The ID team agrees that the provision of respite services will assist the family in maintaining the client at home.
8. Individuals with medical conditions requiring specialized care must receive care from an appropriately licensed medical professional.
 - a. The level of care provided to an individual client with a medical condition should be prescribed by the attending physician or determined through a nursing assessment.
9. The Individual Program Plan (IPP) will specify the amount and type of respite (in-home, out-of-home, or a combination of both) to be provided, with actual utilization to be determined by the family, conservator, or guardian.
10. All of the previous guidelines apply to any parent who is also a regional center client.

Amount Purchased: In-Home respite - 90 hours per quarter is the initial authorized amount. The family may request additional In-Home respite by contacting their service coordinator as long as the total support hours and sleep time (IHSS, school/day program, day care, respite, etc.) does not exceed 744 hours in a month.

Out-of-Home respite – 21 days per fiscal year is the initial authorized amount. The family may request additional Out-of-Home respite by contacting their service coordinator, not to exceed 21 consecutive days, or 21 days in one calendar month to comply with Social Security Administration regulations.

Approval Authority: Case Management Supervisor – Up to 90 hours per quarter and up to 21 days Out-of-Home respite consecutively or in one calendar month.

Associate Director of Client Services – Any request over 90 hours per quarter of In-Home respite or any request over 21 days.

Revised POS Guideline was approved by the FNCC Board of Directors on May 18, 2018, and the Department of Developmental Services on July 5, 2018.

SOCIAL RECREATION SERVICES

Definition: Social Recreation Services provides a group social environment designed for adults to learn and practice appropriate social skills.

Due to legislative changes to the Lanterman Act effective July 1, 2009, FNRC's authority to purchase social recreation services was suspended pending the implementation of an individual choice budget.

An exemption to the suspension of funding for this service may be granted on an individual basis in extraordinary circumstances to permit purchase of social recreation services when FNRC determines that the service is a primary or critical means for ameliorating the physical, cognitive, or psychosocial effects of the consumer's developmental disability, or the service is necessary to enable the consumer to remain in his or her home and no alternative service is available to meet the consumer's needs. [California Welfare and Institutions Code 4648.5 (a)(1)(2)(4)(c)]

Guidelines: Generally, consumers, families, and licensed residential facilities are responsible for providing social recreation opportunities. Far Northern Regional Center (FNRC) may purchase social recreation services under the following criteria:

1. The consumer is over the age of 18.
2. The service is not available through natural supports
3. The service is not available through community resources.
4. The need for the service is directly related to the qualifying developmental disability.
5. The need for the service is reflected in the consumer's Individual Program Plan (IPP).
6. Ongoing funding of social recreation services is contingent on the Interdisciplinary (ID) Team's agreement that the provider is making reasonable progress on the consumer's Individual Service Plan (ISP) objectives.

Amount Purchased: As determined on an individual basis

Approval Authority: Up to 17 hours/month – Case Management Supervisor

Over 17 hours/month – Associate Director of Case Management

SOCIALIZATION TRAINING

Definition: Socialization training provides a social environment for children to learn and practice appropriate social skills.

Due to legislative changes to the Lanterman Act effective July 1, 2009, FNRC's authority to purchase socialization training services was suspended pending the implementation of an individual choice budget.

An exemption to the suspension of funding for this service may be granted on an individual basis in extraordinary circumstances to permit purchase of socialization training services when FNRC determines that the service is a primary or critical means for ameliorating the physical, cognitive, or psychosocial effects of the consumer's developmental disability, or the service is necessary to enable the consumer to remain in his or her home and no alternative service is available to meet the consumer's needs. [California Welfare and Institutions Code 4648.5 (a)(1)(2)(4)(c)]

Guidelines: Generally, consumers, families, and licensed residential facilities are responsible for providing socialization opportunities. Far Northern Regional Center (FNRC) may purchase socialization under the following conditions:

1. The need for the service is directly related to the qualifying developmental disability.
2. The service is not available through natural supports
3. The service is not available through community resources.
4. The service will be provided in the consumer's home community and is a cost-effective use of public resources.
5. FNRC will not assume the family's responsibility for providing socialization opportunities and instruction for minor consumers that is similar to what is needed for a child *without* disabilities.
6. The need for the service is reflected in the consumer's Individual Program Plan
7. Ongoing funding of socialization training is contingent on the Interdisciplinary (ID) team's agreement that the consumer is making reasonable progress on ISP objectives.
8. The service will be reviewed every 6 months.

Amount Purchased: As determined on an individual basis

Approval Authority: Supervisor Up to 17 hours/month – Case Management Supervisor
Over 17 hours/month – Associate Director of Case Management

SPECIALIZED RECREATION SERVICES

Definition: Specialized recreation services are services that provide unique forms of activities designed to increase physical activity, promote socialization, and to provide recreational opportunities. Specialized recreation services may include services such as health club memberships, equestrian therapy, ballet, karate, swimming, music lessons or therapy, art, and gymnastics.

Due to legislative changes to the Lanterman Act effective July 1, 2009, FNRC's authority to purchase specialized recreation services was suspended pending the implementation of an individual choice budget.

An exemption to the suspension of funding for this service may be granted on an individual basis in extraordinary circumstances to permit purchase of specialized recreation services when FNRC determines that the service is a primary or critical means for ameliorating the physical, cognitive, or psychosocial effects of the consumer's developmental disability, or the service is necessary to enable the consumer to remain in his or her home and no alternative service is available to meet the consumer's needs. [California Welfare and Institutions Code 4648.5 (a)(1)(2)(4)(c)]

Guidelines: In most cases, recreation is considered the responsibility of the consumer and/or family. Far Northern Regional Center (FNRC) may fund specialized recreation services under the following conditions:

1. The need for the service directly relates to the qualifying developmental disability.
2. The need for the service is identified in the Individual Program Plan (IPP).
3. The consumer and/or family cannot provide or afford specialized recreation services.
4. All alternative sources of funding have been exhausted.
5. The consumer must show consistent attendance of at least twice per week for this service to be reauthorized.

Amount Purchased: Usual and Customary

Approval Authority: Associate Director of Case Management

SPEECH AND LANGUAGE SERVICES

Definition: Speech and Language Services are diagnostic, preventative, and corrective services provided by professionals qualified to address speech and language disorders.

Guidelines: Far Northern Regional Center (FNRC) may purchase speech and language services under the following conditions:

1. The need for speech and language services is directly related to the qualifying developmental disability.
2. The consumer and/or family express motivation to utilize the recommended speech and language services and to follow through with any treatment recommendations to be implemented at home.
3. Speech and language services are needed for basic communication.
4. For school aged children, speech and language services are the responsibility of the Local Educational Agency (LEA).
 - a. FNRC may require families to pursue administrative appeals through the school district before speech and language services are funded.
5. The service is not available through Medi-Cal, California Children's Services (CCS), or private insurance.
 - a. FNRC shall be the payor of last resort after all other public sources for payment have been reviewed to determine if a referral shall be made by the SC and/or the parent. This review shall not delay the provision of early intervention services specified in the IFSP. Early Intervention services specified on the IFSP shall begin as soon as possible
6. Preference should be given to Medi-Cal providers in order to access that funding to the best extent possible.
7. The service will be reviewed every six months.
8. The Interdisciplinary (ID) Team agrees the service is resulting in reasonable progress.

Amount Purchased: As determined on an individual basis, generally not to exceed once per week.

Approval Authority: Case Management Supervisor for children under 36 months of age
Associate Director of Case Management Services for children over 36 months of age.

SUPPORT SERVICE (1:1)

Definition: Support Services refers to the addition of staff to a day program, residential facility or other vendored program. Support services are designed to provide additional staff on a time-limited basis to assist consumers with increased service needs.

Guidelines: Consumers need to receive the necessary services and supports required for them to live in the least restrictive environment, or participate in the least restrictive day program. In order to accomplish this, Far Northern Regional Center (FNRC) may purchase Support Services under the following conditions:

1. The need for the service is directly related to the qualifying developmental disability.
2. Alternatives such as the public schools, In-Home Support Services (IHSS), and other generic and/or community resources have been pursued and are not available or not appropriate.
3. Provision of support services will enable the consumer to remain in the least restrictive environment possible.
4. Alternative programs or facilities with a higher level of staffing or support have been considered and are either not available or not appropriate.
5. The service is a cost-effective use of public resources.
6. The need for ongoing support services is evaluated every three months by the vendor completing the request for intensive support staffing ratio (FNRC form # 039), an Individual Service Plan (ISP), and a progress review.

Amount Purchased: As determined appropriate on an individual basis.

Approval Authority: Associate Director of Case Management

SUPPORTED EMPLOYMENT

Definition: Supported employment refers to the development, training and ongoing support of consumers engaged in employment facilitated through the Department of Rehabilitation (DOR). Far Northern Regional Center (FNRC) and DOR collaborate to assist consumers to gain employment in a variety of environments. There are three different types of supported employment.

Work Activity Program (WAP) – Work activity programs are the “entry” level of supported employment. WAP programs employ consumers under a “sub-minimum wage” authorization from the Department of Labor. Jobs typically provided by WAP vendors focus on light manufacturing or assembly work and are commonly paid under a “piece rate” instead of an hourly wage. In FNRC’s catchment area, most WAP programs are sheltered workshops which employ a large number of consumers under one roof. FNRC funds WAP programs from the point of the initial referral.

Supported Employment Group – Also called an enclave, supported employment group services are group work sites with a coach to consumer ratio of not less than 1:4 or more than 1:8 (some older established enclaves operate at a 1:3 ratio allowed in a “grandfathered” clause from the budget act of 2004-2005). In supported employment group positions consumers do not typically work with the general population. DOR funds supported employment group services until the consumer has achieved stabilization.

Supported Employment Individual Placement – Individual placement is when a consumer is working in a competitive job in the community. Consumers receive individualized job coaching to help them find, learn, and maintain their job. DOR funds supported employment individual placement services until the consumer has achieved stabilization.

Guidelines: FNRC may fund supported employment under the following conditions:

1. The consumer is at least 18 years of age.
2. For consumers under the age of 22, the request to exit public education must come from the consumer and/or their conservator.
 - a. FNRC may require documentation of the exit from public education.
3. The need for the service is directly related to the qualifying developmental disability.
4. The consumer has expressed a desire to work and there is a vocational objective in the consumer’s Individual Program Plan (IPP).

5. Funding for job development and the initial placement in supported employment group and individual placements is the responsibility of DOR. FNRC does not assume financial responsibility until after stabilization.
6. The consumer has achieved stabilization and funding of the service is no longer the responsibility of the Department of Rehabilitation (DOR).
 - a. Stabilization is achieved in a group position when the consumer has performed the job satisfactorily for a minimum of sixty (60) days or longer and the consumer's job is expected to be stable and to continue.
 - b. Stabilization is defined in an individual placement position as the point at which the consumer's need for job coaching represents 30% of hours worked or less.
 - c. Consumers who are currently working but receive new tasks that require additional training may need to be re-referred back to DOR until they regain stabilization on the job.
7. WAP services and supported employment group are authorized on an annual basis.
8. Supported employment individual placement services are authorized for six months at a time.
9. Per DOR regulations, all consumers entering a supported employment position must obtain a current physical and TB test before they begin working.

Amount Purchased: Work activity programs and supported employment group services rates are set via contract and are billed either daily or hourly.

Supported employment individual placement job coaching hours are authorized on an individual basis.

Approval Authority: Case Management Supervisor

SUPPORTED LIVING SERVICES

Definition: Supported Living Services (SLS) are services and supports which enable consumers to live in their own homes, participate in community activities to the extent appropriate to each consumer's interests and capacity, and realize their individualized potential to live lives that are integrated, productive, and normal.

Guidelines: Adults with developmental disabilities should be afforded access to cost-effective Supported Living Services (SLS) appropriate to their needs and interests. Far Northern Regional Center (FNRC) may purchase SLS services under the following conditions:

1. The consumer is at least 18 years of age.
2. The consumer has expressed directly or through the consumer's personal advocate, as appropriate, a preference for SLS among the residential options proposed during the Individual Program Plan (IPP) process.
3. Consumer is financially able to support him or herself in an independent setting and/or is willing to have a roommate.
4. Per W&I Code, consumers sharing the same domicile will be supported by the same SLS vendor whenever possible.
5. Rent, mortgage, lease payments and household expenses shall be the responsibility of the individual and any roommate who resides with that person.
6. Appropriate and available generic supports and resources have been accessed to the fullest extent feasible.
7. Consumers shall not be denied eligibility for SLS solely because of the nature and severity of their disabilities.
8. If a consumer has not already applied for In Home Support Services (IHSS), per W&I Code, an application for IHSS must be made within five days of moving into his or her home under SLS.
9. The consumer needs more services and supports than are generally available through an Independent Living Program (ILP) provider.
10. Prior to referral the case will be reviewed for relevant concerns and issues to facilitate referral.
11. The consumer is living in a home that is not the place of residence of a parent or conservator of the consumer or owned by the SLS vendor.

12. Rates are based on consumer need and are calculated individually according to a cost effective rate methodology.

Amount Purchased: As determined on an individual basis.

Approval Authority: Evaluations and on-going services – Associate Director Case Management Services.

TRANSLATION/ INTERPRETING SERVICES

Definition: Translation/interpreting services are services designed to provide verbal and non-verbal translation for consumers and family members who do not speak English or who utilize sign language for communication.

Guidelines: Far Northern Regional Center (FNRC) may purchase translation services under the following conditions:

1. The need for the service directly relates to the qualifying developmental disability.
2. Translation/interpretive services are essential to accessing important services and supports for the consumer.
3. FNRC funding will not assume the family's responsibility for providing similar services to those needed for a non-disabled child.
4. All generic sources of translation or interpretive assistance or funding have been exhausted.
5. Translation or interpretive services are not the responsibility of a publicly funded agency that is required to provide written and oral language assistance for consumers and family to access services.

Amount Purchased: As determined on an individual basis

Approval Authority: Case Management Supervisor

TRANSPORTATION - GENERAL

Definition: Transportation – General refers to transportation services not covered under any other guideline. Transportation services are used to assist consumers and their families to obtain needed supplies and services.

Guidelines: Most transportation needs should be funded by the consumer and/or their families by using their personal income (including public benefits). Far Northern Regional Center (FNRC) may fund transportation under the following criteria:

1. The need for the service is directly related to the consumer's qualifying developmental disability.
2. The need for the service is not part of the consumer's community based day program.
3. FNRC will not fund transportation for minor children (under age 18) unless the family provides sufficient written documentation to FNRC demonstrating their inability to provide transportation to needed services.
4. The consumer and/or their family have demonstrated an inability to fund their own transportation.
5. The method of transportation is the least restrictive possible option and reflects a cost effective use of public funds.
6. Public transportation is to be utilized whenever possible.
 - a. Mobility or destination training may be purchased to assist consumers with learning how to use public transportation (see guidelines for mobility/destination Training).

Amount Purchased: As determined on an individual basis

Approval Authority: Case Management Supervisor

TRANSPORTATION – MEDICAL

Definition: Transportation –Medical refers to the use of public or private modes of travel to enable consumers to obtain needed medical services unavailable in their home community.

Guidelines: In most cases, consumers, families, and licensed residential providers are responsible for providing transportation to medical and dental appointments. Far Northern Regional Center (FNRC) may purchase transportation services for consumers under the following conditions:

1. The need for the service must be directly related to the consumer's qualifying developmental disability.
2. The need for the service is identified in the Individual Program Plan (IPP) or Individualized Family Service Plan (IFSP).
3. Funding or providing medical transportation is not the responsibility of any public agency that receives public funds for providing medical transportation.
4. The need for medical transportation is directly related to the consumer's qualifying developmental disability or provided as part of the diagnostic process necessary to establish a qualifying developmental disability.
5. The needed medical transportation is beyond a 60 radius of the consumer's home. Transportation to medical services within a 60 radius is considered a family or individual responsibility.
6. The method of transportation being used is economical, normalizing and cost-effective.
7. Public transportation is to be used whenever possible.
8. FNRC shall fund the least expensive mode of transportation that meets the consumer's needs as set forth in the consumer's IPP or IFSP.
9. FNRC will not fund medical transportation for minor children (under age 18) unless the family provides sufficient written documentation to FNRC demonstrating their inability to provide transportation to needed medical services.
10. FNRC will require written documentation from the out of area medical provider confirming that the appointment occurred.

Amount Purchased: Varies, may include lodging, mileage, per-diem or medical transporter.

Approval Authority: Lodging, Mileage & Per Diem Reimbursement – Case Management Supervisor
Medical Transporter – Associate Director of Case Management
Residential Provider (beyond 60 miles) – Case Management Supervisor

TRANSPORTATION – WORK & DAY PROGRAM

Definition: Transportation- Work & Day Program refers to the use of public or private modes of travel to assist consumers with transportation to work or a day program.

Guidelines: Far Northern Regional Center (FNRC) may purchase transportation to work or day program for consumers when the following conditions are met or apply:

1. The need for work/day program transportation is directly related to the consumer's qualifying developmental disability.
2. The need for the service is identified in the Individual Program Plan (IPP).
3. Funding or providing transportation is not the responsibility of any public agency that receives public funds for providing transportation.
4. Public transportation is to be used whenever possible.
5. Transportation for day programs will not exceed five days per week.
6. The method of transportation being used is economical, normalizing and cost effective.
7. FNRC shall fund the least expensive mode of transportation that meets the consumer's needs as set forth in the consumer's IPP or IFSP.
8. FNRC shall not fund door-to-door transportation for consumers with the physical and cognitive ability to utilize public transportation.
 - a. FNRC may fund transportation to work or day program on a temporary basis while the consumer receives training and instruction about accessing public transportation.
9. FNRC will only fund work or day program transportation to the vendor or location closest to the consumer's home which is able to meet his/her needs.
10. In some cases FNRC may fund mileage for family or friends to provide transportation to work or day program sites for consumers who live beyond scheduled transportation.
11. FNRC will not purchase commercial bicycles in lieu of work/day program transportation.
 - a. The purchase of adaptive bicycles is covered under the guidelines for medical equipment and supplies.
12. Driver's training may be purchased to enable a consumer to obtain a

driver's license when it is considered appropriate for a consumer to operate a motor vehicle. If access to employment is involved, this service should first be pursued through the Department of Rehabilitation.

Amount Purchased: Varies

Approval Authority: Case Management Supervisor

VAN LIFT/RAMP

Definition: A van lift is a manual or automatic access ramp or lift added to an existing vehicle to enable automatic transfer of a consumer and their mobility device into and out of a vehicle.

Guidelines: Far Northern Regional Center (FNRC) may purchase a van lift under the following conditions:

1. Generic resources such as paratransit and other viable transportation alternatives must be explored.
2. The need for the lift is identified in the Individual Program Plan (IPP).
3. The need for lift is directly related to the qualifying developmental disability.
4. An evaluation by an Occupational Therapist (OT) or Physical Therapist (PT) must be conducted to determine the most cost-effective and appropriate alternatives.
5. FNRC funds will not be used to purchase the vehicle.
6. All alternative sources of funding, including but not limited to the Department of Rehabilitation, Medi-Cal and Medicare have been exhausted
7. The vehicle in which the lift is to be installed must be in good mechanical and physical condition.
8. The vehicle in which the lift is to be installed must meet the requirements for installation without requiring extensive modifications such as raising the roof or lowering the floor.
9. At least two estimates must be obtained to determine the most cost-effective provider.
 - a. To determine cost-effectiveness, the total cost of the equipment, assembly and delivery must be taken into account.

Amount Purchased: Usual and Customary

Approval Authority: Purchase of Service Review Committee