

**BEFORE THE
OFFICE OF ADMINISTRATIVE HEARINGS
STATE OF CALIFORNIA**

In the Matter of:

CLAIMANT

and

INLAND REGIONAL CENTER, Service Agency

DDS No. CS0024846

OAH No. 2025030189

DECISION

Mary Agnes Matyszewski, Administrative Law Judge, Office of Administrative Hearings, State of California, heard this matter by videoconference on April 22, 2025.

Claimant's conservator/mother and her husband represented claimant, who was not present.

Senait Teweldebrhan, Fair Hearings Representative, Fair Hearings and Legal Affairs, represented Inland Regional Center (IRC).

Oral and documentary evidence was received. The record was closed, and the matter was submitted for decision on April 22, 2025.

ISSUE

Shall IRC be required to continue funding claimant's monthly board and care rate and his personal and incidental (P&I) expenses now that he has been approved and is receiving Social Security Income (SSI)?

FACTUAL FINDINGS

Jurisdictional Matters

1. Claimant is 21 years old and resides in a Level 4I residential care facility (group home). He is eligible for regional center services based on his diagnoses of autism spectrum disorder and intellectual disability.
2. Prior to becoming a U.S. citizen, IRC funded claimant's monthly board and care rate, P&I expenses, and programming fees at the group home.
3. On February 25, 2025, IRC advised claimant that because he was now receiving SSI benefits, IRC would no longer fund his board and care or P&I.
4. Claimant appealed that decision, and this hearing followed.

Evidence Introduced at Hearing

5. Consumer Services Coordinator (CSC) Nicole Huntspon, Consumer Program Liaison Sharon Slaughter, Program Manager (PM) Elizabeth Tagle, claimant's conservator/mother, and her husband testified, and documents were introduced. The factual findings reached herein are based on that evidence.
6. IRC's Position Statement set forth the reasons for its action.

7. Claimant's current monthly board and care fees at his group home are \$1,420.07, and he receives \$179 per month for P&I, for a total of \$1,599.07. IRC funds those expenses, as well as the programming fees for the group home.

8. CSC Huntspon and claimant's prior CSC both spoke with claimant's conservator/mother regarding services claimant may be eligible for should he become a U.S. citizen. When he did become a citizen, CSC Huntspon encouraged claimant's conservator/mother to apply for SSI benefits.

9. Claimant's conservator/mother completed the SSI application. She identified claimant's residence as his group home. Question 23(c) on the SSI application asked if the group home paid claimant's room and board, and she checked the box marked "Yes." She did not explain at hearing why she checked that box.

10. Question No. 36, page 10, on the SSI application sought information regarding claimant's monthly expenses. In response thereto, claimant's conservator/mother only identified one expense, to wit: \$800 in monthly food expenses. She did not identify any monthly mortgage or rental expenses, or any other monthly expenses.

11. Question 37(b), page 10, on the SSI application asked if anyone not living with claimant paid for any of his household food or shelter items. Claimant's conservator/mother identified herself as providing "food, personal hygiene items, clothes, [and] shoes," but she left the part asking her to identify the monthly value of those items blank.

12. After completing the SSI application, claimant's mother/conservator sent it to CSC Huntspon to review. At the time, CSC Huntspon was a relatively new IRC employee, and gave her "personal opinion" that the application looked fine. CSC

Huntspon did not provide any feedback regarding the responses claimant's conservator/mother gave to Question 23(c), Question 36, or Question 37(b). CSC Huntspon did not consult with anyone at IRC about the application.

13. CSC Huntspon advised claimant's conservator/mother "several times" to have the application reviewed by the Social Security Administration (SSA), as there is a person at SSA specifically tasked with reviewing SSI applications.

14. Claimant's conservator/mother asserted that neither CSC Huntspon nor anyone at IRC advised her that the SSI application needed to include claimant's board and care or his P&I or that IRC would cease funding those expenses if claimant received SSI benefits. She gave the application to IRC with the housing costs blank as she did not know those costs and thought IRC would provide that information, but it did not. Of note, her testimony did not explain why she failed to specifically ask IRC for that information so she could provide it in the application or why she chose to submit the application without that information. She also never explained why she did not consult with anyone at SSA before submitting the application. As submitted, the application made it seem claimant's housing costs were paid by the group home and that his only monthly expenses were \$800.

15. The SSI application was signed by claimant's conservator/mother in September 2023. In January 2025, she advised IRC that the application was approved. Claimant was first approved for retroactive benefits in December 2024. Thereafter he was approved as of January 2025 to receive \$1,182.94 in monthly benefits.

16. Claimant's conservator/mother described the many expenses she pays with the SSI benefits. IRC asserted that many of those items are things the P&I is supposed to fund or the group home is required to provide, such as clothing,

eyeglasses, and toiletries. Claimant's group home's program design also requires it to provide claimant with three meals per day plus snacks. IRC asserted those sources should be used to pay those costs before SSI funds are used.

17. Testimony was received regarding whether claimant's nutritional needs were being met at the group home. Consumer Program Liaison Slaughter identified what IRC does to confirm those needs are being met and what claimant can do, as well as what claimant's P&I can be used to fund.

18. Claimant's conservator/mother and her husband described the 20-pound weight loss claimant experienced when he did not receive his mother's home-cooked food, his favorite, during the pandemic lock down, and how he eats unhealthy fast food during outings. IRC explained that the group home respects the rights of its residents and allows them to make food choices.

19. Claimant's group home must also comply with any nutritional or medical orders or restrictions in place for its residents. To date, no such orders or restrictions regarding claimant have been provided to IRC.

20. Consumer Program Liaison Slaughter identified the services the group home is required to provide and the audits IRC conducts to ensure compliance with applicable laws and IRC guidelines. She also identified the items consumers may purchase with their P&I funds. IRC has created P&I guidelines which CSC Huntspon shared with claimant's conservator/mother in March 2025 following their meeting.

21. Claimant's conservator/mother uses the SSI funds to purchase food for claimant so she can make his favorite dishes. She has also used those funds to purchase the special eyeglasses he requires as his Medi-Cal funds are not enough to cover those expenses, to purchase an iPad he needs to communicate as he is non-

verbal, and to purchase clothing. However, as outlined in IRC's P&I guidelines, P&I funds should be used to pay for clothing and for eyeglasses not covered by insurance.

22. A document explaining SSI in California gave information regarding the SSI program. A table on the document provided the "combined federal and state amounts." Included on that table was a maximum amount of \$1,599.07 an individual, such as claimant, living in a "non-medical out-of-home care" placement could receive.

23. Given that the SSI benefits are insufficient to cover claimant's board and care and P&I costs, IRC encouraged claimant to apply for an SSI benefit increase. PM Tagle explained that, in her experience, SSI benefits can be increased for changes in housing or employment. In the past, approving those SSI changes typically does not take as long as the initial SSI application process. Information can also be submitted electronically to SSA and IRC provided claimant's conservator/mother with information regarding the group home so she could provide that to SSA.

24. Claimant's conservator/mother explained that her repeated calls to SSA went unanswered. The SSA office is closed, so she could only drop off her request for an increase in SSI benefits. She did this in March 2025, and has yet to receive a response. She set forth these issues in her written statement.

25. PM Tagle described the loan agreement IRC can do to fund a service while SSI is being sought, after which a consumer would repay IRC once SSI was approved.

26. PM Tagle explained that now that SSI is approved, it must be used to fund claimant's board and care and P&I. IRC is the "payor of last resort," so must look first to generic resources, such as SSI, but if SSA does not increase the benefits, IRC can fund the difference and has offered to do so.

27. Claimant's conservator/mother and her husband described claimant's physical conditions, their deep commitment to him and involvement in his life, and their willingness to be completely transparent with IRC about their communications with SSA and the expenses they are incurring.

28. Excerpts from IRC's Purchase of Service Policy (POS) set forth the general guidelines that IRC must pursue all possible sources of funding, which includes SSI funding. The POS references Welfare and Institutions Code section 4648, noting IRC funds cannot be used to "supplant the budget of any agency which has a legal responsibility to serve all members of the general public and is receiving public funds for providing those services."

LEGAL CONCLUSIONS

Purpose of the Lanterman Act

1. The purpose of the Lanterman Developmental Disabilities Act (Lanterman Act) is to provide a "pattern of facilities and services . . . sufficiently complete to meet the needs of each person with developmental disabilities, regardless of age or degree of handicap, and at each stage of life." (Welf. & Inst. Code, § 4501; *Association of Retarded Citizens v. Department of Developmental Services* (1985) 38 Cal.3d 384, 388.)

Burden and Standard of Proof

2. Each party asserting a claim or defense has the burden of proof for establishing the facts essential to that specific claim or defense. (Evid. Code, §§ 110, 115, 500; *McCoy v. Bd. of Retirement* (1986) 183 Cal.App.3d 1044, 1051, footnote 5.) In this case, claimant bears the burden to prove that IRC should be required to continue

funding claimant's monthly board and care rate and his P&I now that he has been approved and is receiving SSI.

3. The standard by which each party must prove those matters is the "preponderance of the evidence" standard. (Evid. Code, § 115.)

4. A preponderance of the evidence means that the evidence on one side outweighs or is more than the evidence on the other side, not necessarily in number of witnesses or quantity, but in its persuasive effect on those to whom it is addressed. It is "evidence that has more convincing force than that opposed to it." (*People ex rel. Brown v. Tri-Union Seafoods, LLC* (2009) 171 Cal.App.4th 1549, 1567.)

The Lanterman Act, DDS, and Regional Centers

5. The Lanterman Act is found at Welfare and Institutions Code section 4500 et seq.

6. Welfare and Institutions Code section 4501 sets forth the state's responsibility and duties.

7. Welfare and Institutions Code section 4512 defines services and supports.

8. The Department of Disability Services (DDS) is the state agency responsible for carrying out the laws related to the care, custody and treatment of individuals with developmental disabilities under the Lanterman Act. (Welf. & Inst. Code, § 4416.) In order to comply with its statutory mandate, DDS contracts with private non-profit community agencies, known as "regional centers," to provide the developmentally disabled with "access to the services and supports best suited to them throughout their lifetime." (Welf. & Inst. Code, § 4620.)

9. A regional center's responsibilities to its consumers are set forth in Welfare and Institutions Code sections 4640-4659.2.

10. Welfare and Institutions Code section 4646, subdivision (b), provides that the IPP "is developed through a process of individualized needs determination."

11. Welfare and Institutions Code section 4646.4 sets forth the internal process for creating IPPs. Subdivision (a)(1) requires regional centers to conform with their purchase of service policies.

12. Welfare and Institutions Code section 4646.5, subdivision (a)(1), requires the IPP planning process to include gathering information and conducting assessments.

13. Welfare and Institutions Code section 4648 requires regional centers to ensure that services and supports assist individuals with developmental disabilities in achieving the greatest self-sufficiency possible. Regional centers must secure services and supports that meet the needs of the consumer, as determined by the IPP. Regional centers must be fiscally responsible and may purchase services or supports through vendorization or contracting. Subdivision (a)(8) states: "Regional center funds shall not be used to supplant the budget of an agency that has a legal responsibility to serve all members of the general public and is receiving public funds for providing those services."

14. Welfare and Institutions Code section 4659 states in part:

(a) Except as otherwise provided in subdivision (b) or (e), the regional center shall identify and pursue all possible sources of funding for consumers receiving regional center

services. These sources shall include, but not be limited to, both of the following:

(1) Governmental or other entities or programs required to provide or pay the cost of providing services, including Medi-Cal, Medicare, the Civilian Health and Medical Program for Uniform Services, school districts, and federal supplemental security income and the state supplementary program.

[¶] . . . [¶]

(b) Any revenues collected by a regional center pursuant to this section shall be applied against the cost of services prior to use of regional center funds for those services. This revenue shall not result in a reduction in the regional center's purchase of services budget, except as it relates to federal supplemental security income and the state supplementary program.

[¶] . . . [¶]

(f) In order to best utilize generic resources, federally funded programs, and private insurance programs for individuals with developmental disabilities, the department and regional centers shall engage in the following activities:

(1) Within existing resources, the department shall provide training to regional centers, no less than once every two

years, in the availability and requirements of generic, federally funded and private programs available to persons with developmental disabilities, including, but not limited to, eligibility requirements, the application process and covered services, and the appeal process.

(2) Regional centers shall disseminate information and training to all service coordinators regarding the availability and requirements of generic, federally funded, and private insurance programs on the local level.

Evaluation

15. IRC is an independent, not a federal, agency, and its employees are not federal employees, so cannot be held to know the intricacies of federal laws, such as those that govern SSI benefits. CSCs are not lawyers and do not provide legal advice to consumers. That being said, they are the resource to whom families turn, and given the requirements of Welfare and Institutions Code section 4659, subdivision (f), should be knowledgeable of the topics about which they are asked, have resources they can provide, or be able to locate that information at IRC. In fact, numerous such resources were introduced at hearing as exhibits so clearly are available at IRC.

Claimant relied on CSC Huntspon's statement that her SSI application was completed correctly. The parties never discussed, and CSC Huntspon never inquired about, the answer on the application that indicated the group home was paying the housing fees or the section where the rental information was left blank. Even though CSC Huntspon was a relatively new IRC employee, she should have made further inquiry about the application, such as consulting with her PM or other individuals at

IRC. However, she did advise claimant's mother/conservator to seek advice from SSA as this was SSA's application, which was the proper thing for CSC Huntspon to do. On balance, the onus was on claimant to correctly complete the application, and IRC cannot be faulted for the failure to do so.

However, that does not end the analysis. While it is true that IRC is the payor of last resort and must look to generic resources for "sources of funding," nothing requires a source of funding to be the sole source of that funding, and any insufficient funding when a claimant has sought that generic source of funding, must be paid by IRC. This finding is consistent with the goal of the Lanterman Act, and applicable laws and regulations.

Nonetheless, as required by the Lanterman Act, IRC's funding has certain limitations. Here, claimant's group home must provide three meals a day plus snacks. There are no nutritional orders or restrictions in place for claimant; if there are, they must be followed by the group home. Claimant's conservator/mother's desire to provide home-cooked meals of claimant's favorite foods is admirable, but is a choice she is making, and one for which she may not use SSI benefits to fund given the group home's program design and laws governing IRC. The SSI funds must first be used to pay claimant's board and care, and claimant must use his P&I funds to pay for expenses as outlined in the IRC guidelines.

Currently, claimant's monthly SSI benefits are \$1,182.94, and his monthly board and care fees are \$1,420.07, which leaves a \$237.13 shortfall, not factoring his P&I.

IRC shall continue to fund that monthly difference (\$237.13) for claimant's group home board and care and fund his monthly P&I. If and when SSA renders its decision regarding the request for an increase in SSI benefits, IRC may reduce its

contribution towards the board and care and P&I costs commensurate with any SSI increase. However, should there be a shortfall even after an SSI increase, IRC shall continue to fund the shortfall between the SSI benefits and the board and care and P&I costs. Claimant may not use his SSI benefits to fund expenses that should be paid for by his P&I. His SSI benefits must first be used to pay his monthly board and care.

IRC shall also be required to provide training as required by the Lanterman Act so that its employees provide accurate information to consumers regarding SSI applications. At hearing, IRC introduced numerous documents regarding those SSI benefits which should be made available to all IRC employees, so that issues such as the one herein do not arise in the future.

ORDERS

Claimant's SSI funds shall be used to pay his monthly board and care fees. IRC shall fund the monthly difference between claimant's group home board and care fees and his SSI benefits, currently a difference of \$237.13.

IRC shall continue to fund claimant's P&I, but claimant must use those funds as outlined in the IRC guidelines. He shall not use them to pay for meals or snacks, except as allowed during outings, as those expenses are part of the board and care fees per the group home's program design.

If and when SSA renders a decision regarding claimant's request to increase his SSI benefits, IRC may reduce its contribution towards those board and care and P&I costs commensurate with that SSI increase.

IRC shall ensure its employees are properly trained and/or have access to resources regarding applications for SSI benefits as required by Welfare and Institutions Code section 4659, subdivision (f).

DATE: April 25, 2025

Mary Agnes Matyszewski
Administrative Law Judge
Office of Administrative Hearings

NOTICE

This is the final administrative decision. Each party is bound by this decision. Either party may request reconsideration under Welfare and Institutions Code section 4713, subdivision (b), within 15 days of receiving the decision, or appeal the decision to a court of competent jurisdiction within 180 days of receiving the final decision.