BEFORE THE
DEPARTMENT OF DEVELOPMENTAL SERVICES
STATE OF CALIFORNIA

In the Matter of:

CLAIMANT

and

ALTA CALIFORNIA REGIONAL CENTER, Service Agency

DDS No. CS0034500

OAH No. 2026030395

PROPOSED DECISION

Hearing Officer Christopher W. Dietrich, Administrative Law Judge, Office of Administrative Hearings, State of California, heard this matter on May 26, 2026, by videoconference from Sacramento, California.

DJ Weersing, Legal Services Specialist, represented Alta California Regional Center (ACRC).

Claimant's mother represented Claimant, who was not present.

Evidence was received, the record closed, and the matter submitted for decision on May 26, 2026.

ISSUES

1. Is ACRC required to add funds to Claimant's Self-Determination Program (SDP) budget to purchase services from Social Cognitive Learning Center (SCLC)?

2. Is ACRC permitted to terminate funding in Claimant's SDP spending plan to purchase services from SCLC?

FACTUAL FINDINGS

Background and Jurisdictional Matters

3. Claimant is a 13-year-old ACRC consumer. He receives regional center services through the SDP based upon his qualifying diagnosis of Autism Spectrum Disorder (ASD). He lives with his mother and father.

Request for SCLC Services

4. ACRC provided Claimant's Title 19 notes summarizing Claimant's interactions with ACRC. On October 12, 2023, Claimant's mother requested approval to add SCLC services to Claimant's SDP spending plan for the period between December 1, 2023, and November 30, 2024. ACRC approved the request, and the service was added to Claimant's spending plan thereafter. However, additional funds were not allocated in Claimant's SDP budget to purchase SCLC services.

5. Summer Taneman, ACRC Service Coordinator, testified at hearing. Ms. Taneman has been Claimant's Service Coordinator since March 29, 2024. On July 17, 2024, Ms. Taneman and Claimant's mother exchanged emails regarding Claimant's SDP spending plan. On August 16, 2024, Ms. Taneman requested that Claimant's

mother provide information about Claimant's SCLC services to determine whether they should be categorized as social skills training services. Claimant's mother responded on the same date and provided the following information:

> [Claimant] is currently participating in a one-on-one coaching program that focuses on pretend and imaginative play. The program also assists him in using appropriate sentences during these activities and learning social cues, and social manners such as eye contact, and reciprocal conversations.

(Grammar original.)

6. In September 2024, Claimant's mother and Ms. Taneman finalized Claimant's 2024-2025 SDP spending plan, which included SCLC services. An Individual Program Plan (IPP) meeting was held on November 8, 2024. Ms. Taneman, Claimant, and Claimant's mother were present at the meeting. Following the meeting, Ms. Taneman prepared a written IPP setting forth goals and identifying services and supports that Claimant could purchase using SDP funds to achieve those goals. The IPP reflects that Claimant enjoys being with people but becomes overwhelmed in social settings. The IPP states a goal for Claimant to improve his social recreation and community integration skills.

7. On July 15, 2025, Claimant's mother and Ms. Taneman met to discuss Claimant's 2025-2026 SDP budget. On September 18, 2025, Ms. Taneman sent Claimant's mother an email asking for a written report regarding Claimant's progress in SCLC services. On September 22, 2025, Claimant's mother responded asking whether a progress report was required if SCLC was going to be included in Claimant's

SDP spending plan, but not his SDP budget. Ms. Taneman responded by email on September 24, 2025, indicating that the progress report would be required regardless of whether this service was added to Claimant's SDP budget or not. Claimant's mother agreed to request a progress report from SCLC.

8. On October 6, 2025, Claimant's mother sent Ms. Taneman a progress report authored by SCLC's Director Noriko Y. Abenojar. Ms. Abenojar writes that Claimant has been enrolled in SCLC's intensive private coaching and group social skills coaching program since December 2023. She states that Claimant's goals are for him to (1) be able to pick up social cues from peers and know how to respond to them; (2) initiate conversations that are relevant to what is going on socially at that time; (3) maintain engagement/joint attention during group play; (4) expand on collaborative and imaginative play skills; and (5) gain more confidence and independence in navigating social situations with peers. She summarized Claimant's progress towards these goals as follows:

> [Claimant] has been making progress through the coaching process. His desire to connect with peers is evident. He continues to learn what he should say or do in the moment to make a genuine connection with them. For example, in a social setting, he understands that it is a good idea to ask a peer a question about what the peer is doing, however, he struggles to come up with the words. [Claimant] also can have difficulty maintaining engagement with peers when the activity is not structured. During transitions or less structured play time, he is unsure what to do, which results

> in him pulling away from the social interactions both physically and mentally.

(Grammar original.)

Ms. Abenojar recommended that Claimant continue to participate in weekly group coaching and private coaching programs. Further, she recommended that Claimant increase his private coaching program to a minimum of two sessions per month.

9. Ms. Taneman submitted Claimant's request for ongoing SCLC services to ACRC's Behavior Supports Committee for review. The committee did not meet with or assess Claimant. The committee determined that ACRC could not add funds to purchase SCLC services to Claimant's SDP budget. The committee documented the reasons for its determination as follows:

> Discussion of continuity of care - The letter provided from SCLC does not show progress toward goals over the last couple years. Additionally, Client has been receiving [Applied Behavior Analysis (ABA)] therapy alongside attending the social cognitive learning center which prevents the committee from attributing any gains [Claimant] has made over the past couple years to SCLC only. Therefore, the committee cannot determine the risk of regression if participation in the program were to end.
>
> The committee does not believe that the law would be in support of adding funding to the SDP budget to fund a program that would increase client's social skills as there

> are two generic resources that have not been explored and exhausted.
>
> The committee is in agreement that the client should be assessed for insurance funded ABA services that evaluate the client's social/communication needs and the best treatment modality (Direct individual vs. Group or trainer to trainer) to address those needs.

(Grammar original.)

10. On February 4, 2026, Ms. Taneman sent Claimant's mother an email informing her that ACRC did not approve including SCLC services in his SDP budget and spending plan. Ms. Taneman further informed Claimant's mother that she intended to prepare a Notice of Action (NOA) regarding this decision and that Claimant could obtain aid paid pending if she filed a timely appeal to the NOA.

11. On February 13, 2026, Ms. Taneman consulted with ACRC's behavior specialist regarding Claimant. The specialist recommended that Claimant pursue generic resources including speech therapy, the UC Davis MIND Institute, and HOPE consulting. Ms. Taneman sent Claimant's mother an email recommending these providers to Claimant. Further, she offered to have ACRC's behavioral specialist attend Claimant's next IPP meeting.

12. Claimant's 2025-2026 SDP budget and spending plan were delayed because of the disagreement regarding funding for SCLC and other services. Ms. Taneman and Claimant's mother corresponded regarding a gap budget and spending plan between November 2025 and February 2026. A gap budget and spending plan

covering the period from December 1, 2025, and January 31, 2026, was finalized on February 12, 2026.

Notice of Action and Fair Hearing Request

13. On February 10, 2026, ACRC issued an NOA (1) denying Claimant's request to add funding for SCLC to his SDP budget and (2) terminating funding for SCLC services in his SDP spending plan. In the NOA, ACRC explained the reason for the proposed actions as follows:

> [Claimant's] identified need for social skills development is currently being addressed through generic resources, including ABA services funded by private health insurance and speech therapy services provided through the school district.
>
> [Claimant's] ABA provider reports that he is actively working on generalizing social communication skills and is making progress toward those goals, including participation in a recommended social skills group.
>
> ACRC is already funding multiple social recreational activities, both adaptive and integrated, to support [Claimant's] ability to interact with peers in group settings.
>
> Services provided by [SCLC] are not demonstrated to be evidence-based, and there is insufficient documentation showing measurable progress toward goals attributable to SCLC services.

> Because the identified needs can be met through available generic resources and existing ACRC-funded services, additional funding for SCLC services is not necessary to meet [Claimant's] needs.
>
> Services that would not be approved if requested through the traditional regional center service system cannot be approved through the [SDP].

(Grammar original.)

14. In the NOA, ACRC stated the following facts and laws supporting their proposed actions:

> • Welfare and Institutions Code [section] 4648[, subdivision] (a): Regional centers are responsible for securing services and supports necessary to meet a consumer's needs while utilizing generic resources when available.
>
> • Welfare and Institutions Code [sections] 4659 and 4684.4 [*sic*]: Regional center funding is the payor of last resort and may be used only when no generic resource is available to meet the identified need.
>
> • Welfare and Institutions Code [section] 4685.8: Participation in the Self-Determination Program does not expand the regional center's funding obligations, and services funded through SDP must be services otherwise available under the Lanterman Act.

> • Welfare and Institutions Code [section] 4648.1[, subdivision] (d): A regional center may deny, reduce, or terminate services that are not necessary to meet the consumer's needs or that duplicate services available through other funding sources.

(Grammar original.)

15. On April 10, 2026, Claimant's mother requested a fair hearing on Claimant's behalf to contest ACRC's proposed actions. She listed the reasons for the appeal as follows:

> 1. Considering his lifelong diagnosis of [ASD], his developmental trajectory, and his current level of social functioning, his primary area of need remains social development. There is no substantial justification for the regional center to terminate services targeting social skills.
>
> 2. His ABA services will conclude on March 10th. As he transitions from a structured clinical setting to natural social environments, he requires a bridge of support to maintain and generalize the skills he has acquired.
>
> 3. His current ABA provider recommends continued participation in a social skills program to ensure maintenance and generalization of the skills developed during group sessions. His pediatrician has emphasized the importance of continued services at [SCLC], noting that this

is a critical developmental stage as he enters puberty and seeks increasing independence.

4. He was denied admission to the social skills program at the UC Davis MIND Institute on December 19, 2025, due to language limitations. At this time, we have not identified any alternative social skills programs other than the MIND Institute and SCLC.

5. While he participates in recreational activities, these settings do not directly target his individualized social goals. In those environments, he primarily follows group directions but rarely initiates or sustains meaningful peer interactions.

6. SCLC directly addresses core social competencies, including duration of joint attention, perspective-taking, and attending to group games with reduced prompting. These are foundational skills necessary for successful integration into real-life social settings.

7. He will soon transition to junior high school and plans to enroll in homeschooling through . . . Independent Study, which does not provide IEP-related services such as speech therapy. As a result, he will have even fewer structured opportunities to develop peer relationships. Without specialized social programming, he is at significant risk for increased social isolation.

> 8. We are requesting this service under social-recreational support rather than as a medical therapy service. Therefore, the standard of rigorous clinical evidence typically required for medical treatment should not be the determining factor for authorization. Instead of relying solely on numerical data, the program director provides detailed session notes after each session and parent meeting. These notes document his goals, progress, areas of difficulty, and offering meaningful guidance for continued development. If there are concerns regarding authorization for services at SCLC, we respectfully request clarification, as we understand that other clients served through ACRC currently access this service.

(Grammar original.)

Regional Center's Additional Evidence

SUMMER TANEMAN'S ADDITIONAL TESTIMONY

16. On May 11, 2026, Claimant's mother and ACRC approved a budget and spending plan for the period between February 1, 2026, and January 31, 2027. The budget and spending plan allocate $22,849 in services to Claimant for community integration supports and participant directed goods and services. Specifically, funds are allocated for Claimant to purchase private tennis lessons, a summer tennis camp, group horseback riding lessons, private piano and violin lessons, group and private swimming lessons, ski lessons, and private rock-climbing lessons. Further, funds were allocated for Claimant to continue SCLC services, as aid paid pending.

17. Due to a change in policy, ACRC is now able to add social recreation services in Claimant's SDP budget. Previously, these services were not funded in Claimant's budget. Instead, Claimant's mother utilized funds allocated for respite care to purchase social recreation activities. Funds were added to Claimant's 2025-2026 budget for him to purchase social recreation activities as community integration supports. Ms. Taneman estimated that Claimant receives six hours per week of social recreation activities funded through his SDP spending plan.

18. The November 8, 2024 IPP is Claimant's most recent IPP. Ms. Taneman testified that Claimant's 2025 IPP was delayed because of the delays in preparing an updated spending plan. She and Claimant's mother were scheduled to meet on May 27, 2026, to update Claimant's IPP.

KATHERINE WESTON'S TESTIMONY

19. Katherine Weston, ACRC Client Services Manager, explained the basis for ACRC's decision regarding SCLC services. Regional centers cannot allocate funds for consumers to purchase duplicative services. She argued that SCLC services are duplicative, as Claimant's SDP budget includes multiple social recreation activities. Further, regional centers can only fund established behavior interventions, as opposed to experimental treatments. She testified that SCLC services are not evidence based but did not articulate the basis for this opinion.

20. Additionally, regional centers cannot permit consumers to purchase services that are available through other resources. She recommended that Claimant utilize his school district and insurance to obtain necessary skill building resources. Ms. Weston acknowledged that Claimant has utilized all applicable generic resources to address these needs.

21. Ms. Weston further explained that regional centers previously had greater flexibility to allow consumers to purchase services through the SDP. ACRC has since adopted internal processes to ensure that the SDP program is implemented consistently for all ACRC consumers. ACRC reviewed Claimant's services in committee and determined that SCLC services could not be purchased using SDP funds.

NATIONAL AUTISM CENTER REPORT

22. The National Autism Center (NAC) issued a report titled "Findings and Conclusions: National Standards Project, Phase 2." The report sets forth conclusions on the effectiveness of autism treatments and interventions based upon a review of multiple research studies. For teens and young adults, the NAC determined that there are 14 established autism interventions. The NAC determined that these established interventions have been thoroughly researched and have sufficient evidence to establish their effectiveness. The NAC identified "Social Skills Package" as an established intervention to increase communication and interpersonal interaction skills. In describing this intervention, NAC writes:

> Social skills refer to a wide range of abilities including providing appropriate eye contact, using gestures, reciprocating information, initiating or ending an interaction. The challenges individuals with ASD face regarding social skills vary greatly. The general goal of any Social Skills Package intervention is to provide individuals with ASD the skills necessary to meaningfully participate in the social environments of their homes, schools, and communities.

[¶] . . . [¶]

Social Skills Package interventions can take many forms. Often, intervention packages include use of reinforcement, prompting, and modeling. A Social Skills Package intervention may occur in a one-to-one setting, in a peer dyad, or in a small group. Targets may include behaviors such as:

• Recognizing facial expressions

• Turn-taking in conversations

• Initiating an interaction and joint attention

• Problem solving

(Grammar original.)

DEPARTMENT OF DEVELOPMENTAL SERVICES DIRECTIVE AND SDP SERVICE DEFINITIONS

23. The Department of Developmental Services (DDS) adopted a directive regarding SDP budgets and spending plans titled "Self-Determination Program: Initial Individual Budgets and Spending Plans" on November 25, 2025. (DDS Directive D-2025-Self Determination Program-003.) The directive states, in pertinent part:

> An individual budget should be built to contain the amount of funding an individual will have to purchase services and supports needed to meet the individual's IPP goals. The amount of funding in an individual budget must be based

upon services the regional center would have funded through the traditional service delivery model to meet the individual's IPP goals. (Welf. & Inst. Code, § 4685.8, subd. (m)(1)(A)(ii)(II).)

[¶] . . . [¶]

Once the individual budget has been established, a spending plan must be created that identifies the specific services and supports that will be purchased using the individual budget.

[¶] . . . [¶]

The spending plan identifies the types of services and supports that will be purchased to meet the individual's IPP goals, for the services included in the individual budget. The services and supports that can be included in the spending plan are defined in SDP service definitions. The spending plan needs to include the services, how often the services will be purchased, the SDP service codes, and the cost of each service and support that will be purchased.

AB 143 requires regional centers to certify the individual's spending plan. As part of the certification process, regional centers must certify that the goods and services in the spending plan meet all the following:

• Address the goals in the individual's IPP.

> • Are not available from generic services, including but not limited to, Medi-Cal, In-Home Supportive Services, services from other state departments such as the Department of Rehabilitation, and services provided by local school districts or private insurance.
>
> • Are eligible for federal financial participation, which means the services or supports are eligible for federal funding and that the services have been approved by the federal Centers for Medicare and Medicaid Services.

(Grammar original.)

24. DDS's SDP Service Definitions define the service category of "Community Integration Supports" as follows:

> This service is provided to participants tailored to their specific personal outcomes related to the acquisition, improvement and/or retention of skills and abilities to prepare and support the participant for community participation, interdependence, and independence.
>
> This service supports the full access to engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving these services. In addition, this service assists the participant to learn the skills needed to participate in the community during integrated activities with individuals who are non-disabled.

[¶] . . . [¶]

Community Integration Supports are provided in the manner specified by the planning team to assist participants with acquisition, retention, or improvement in self-help, socialization and adaptive skills through therapeutic and/or physical activities to achieve the participant's personally defined outcomes. . . . .Services may be provided on a regularly scheduled basis, for one or more days per week. These services are not provided in the participant's residence. These services and supports enable the participant to attain or maintain his or her maximum functional level, interdependence, and independence, including the facilitation of connections to community events and activities. In addition, these services and supports may serve to reinforce skills or lessons taught in school, therapy, or other settings, enabling the participant to integrate into the community.

Services and supports to assist the participant to increase and improve self-help, socialization, community integration, and adaptive skills, may include:

a. Socialization and community awareness.

b. Communication skills.

[¶] . . . [¶]

d. Development of appropriate peer interactions and self-advocacy skills.

[¶] . . . [¶]

j. Friendship and relationship building.

(Grammar original.)

Claimant's Additional Evidence

CLAIMANT'S MOTHER'S TESTIMONY

25. Claimant has been attending monthly individual sessions and weekly group sessions at SCLC since December 2024. Each session lasts approximately 15 minutes. After each session, SCLC's director provides detailed notes regarding strategies employed during sessions and Claimant's progress.

26. Claimant has shown meaningful progress in developing his social skills through his participation in SCLC. Since he started this program, he has been able to engage in imaginative play and conversations for the first time. He has learned to ask appropriate follow-up questions in conversations. However, he still needs prompting to "stay in the moment" during interactions and avoid dysregulated behaviors.

27. Claimant receives special education services through his school district. Claimant's parents have enrolled him in an independent study program for the 2026-2027 school year. This will reduce his social interactions and access to special education services. She testified that students are required to waive special education services as a condition of enrollment in independent study. Claimant's mother argues

that it is essential that Claimant continue to receive SCLC services during this transition.

28. Claimant stopped attending ABA after he "graduated" from his program in March 2026. Claimant's Board Certified Behavior Analyst (BCBA) recommended that Claimant continue to practice his social skills to maintain the progress he made through ABA. Claimant's mother views SCLC's services as an essential bridge between structured ABA services and Claimant's "real world" interactions. Claimant's mother contacted the alternative service providers identified by Ms. Taneman after ACRC denied the request for ongoing funding for SCLC. However, these providers only provide ABA therapy, which Claimant has already completed.

29. Additionally, Claimant's mother sought to enroll Claimant in a social skills program offered by the UC Davis MIND Institute. However, she was unable to enroll Claimant in this program. The program's coordinator explained that Claimant's support needs, including his need for 1:1 support in school settings, would make it challenging for Claimant to benefit from the MIND Institutes' program.

30. Claimant's mother acknowledges that Claimant receives various SDP-funded social recreation services and that these services are potentially duplicative. However, she is willing to reduce these other services so that Claimant could continue to receive SCLC services.

31. Claimant's mother argues that Claimant is being treated differently from other ACRC consumers. She is aware of another ACRC consumer with ASD who uses SDP funds to pay for SCLC services.

DOCUMENTARY EVIDENCE

32. Claimant's BCBA issued a discharge report dated March 16, 2026. Claimant last received ABA services on March 10, 2026. Claimant initially commenced ABA services to address concerns regarding his pragmatic communication and social skills. The BCBA documented Claimant's "plan for discharge" as follows:

> [Claimant] is expected and planned to discharge from [ABA] services due to meeting ultimate outcomes and caregiver no longer having concerns. He is recommended to continue strengthening his social skills and pragmatic communication skills in other natural settings and\or with other services that will allow him access to peers for continued maintenance and generalization of skills.

(Grammar original.)

33. Claimant was evaluated by a Kaiser Permanente Speech Language Pathologist (SLP) on September 10, 2025. The SLP recommended that Claimant receive biweekly speech therapy sessions for 12 weeks for home program instruction and parent training. The SLP documented her assessment as follows:

> [Claimant] presents with adequate functional communication skills characterized by ability to express wants and need and follow 2 step directions. [Claimant] exhibits difficulties in the area of pragmatics. Overall functional communication skills appear to be adequate. [Claimant] and his family would benefit from home programming to support self advocacy and conversation

> skills. [Claimant] would be appropriate for clinical discharge from speech therapy services after this single additional episode of care.

(Grammar original.)

34. Per Claimant's Individualized Education Plan (IEP) dated October 28, 2025, Claimant receives special education services based upon his diagnoses of ASD, other health impairment, and speech or language impairment. Further, the IEP documents that Claimant "demonstrates difficulties with developing and maintaining relationships with peers and adults, limited social-emotional reciprocity, use of atypical language, engagement in repetitive or purposeless behaviors, behavioral rigidity, and sensory sensitivities." His special education supports include specialized academic instruction, language and speech services, paraeducator support, and an extended school year.

35. Claimant's pediatrician wrote a letter in support of Claimant's request for SCLC services. She writes:

> [Claimant] has ABA therapy currently but it concludes in March 2026. He has been attending both individual and group sessions at the [SCLC] . . . , which is a great benefit for his continued development of social skills especially at his age when he is entering puberty and naturally becoming more independent. Social skill classes are vital to his continued success as he grows and develops. There are no other programs similar to this program locally or anything else offered through Kaiser in this area; therefore, I am

supporting his family's request that the cost of the program be covered or subsidized by the Regional Center.

(Grammar original.)

Analysis

36. Claimant bears the burden of proving that ACRC must add funding for SCLC services to Claimant's SDP individual budget. ACRC bears the burden of proving that it may terminate funding for SCLC in Claimant's SDP spending plan.

CLAIMANT'S IPP GOALS

37. The evidence established that Claimant struggles with socialization and relationship building as a result of his ASD. Although he enjoys being around others, he struggles with social interaction and developing friendships. Claimant's IPP identifies a goal for him to improve his social recreation and community integration skills. To that end, Claimant has utilized SDP funds to purchase individual and group coaching from SCLC, as well as various group and individual social recreation activities.

EVIDENCE BASED SERVICES

38. In the NOA, ACRC contends that SCLC's services are not evidence based and lack documentation of measurable progress towards goals. When a regional center denies a service or support, it must provide claimants with "adequate notice" of its decision, including "[t]he reason or reasons for that action" and "[t]he specific provision or provisions of law, regulation, or policy supporting that action." (Welf. & Inst. Code, §§ 4685.7, subd. (p); 4701, subd. (a)(2), (4); and 4710, subd. (b).) ACRC cited no law, regulation, or policy requiring that community integration supports be

evidence based. Accordingly, ACRC deprived Claimant of adequate notice of this basis for its decision and cannot deny Claimant's request on this ground.

39. Additionally, even if adequate notice had been given, the evidence does not support the contention that SCLC's services are not evidence based. SCLC's services are functionally similar to the Social Skills Package intervention which the NAC determined was effective based upon a review of multiple studies. Ms. Weston's contrary testimony was not persuasive, as she did not state a basis for her opinion. (See Evid. Code, §§ 702, subd. (a) [witness testimony must be based upon demonstrated personal knowledge]; 800, subd. (a) [a lay witness's opinion testimony must be "rationally based on the perception of the witness."].)

DUPLICATIVE SERVICES

40. ACRC contended that SCLC's services are duplicative of Claimant's other SDP funded services and supports. In support of this contention, ACRC cited Welfare and Institutions Code section 4848.1, subdivision (d). However, this statute is inapplicable as it does not address duplication of services. Rather, this statute addresses a regional center's authority to terminate payments to service providers who do not comply with regional center contracts or state law. As ACRC failed to cite any applicable provision of law, regulation, or policy in support of its contention that SCLC's services must be denied as duplicative, it cannot base its denial on this ground.

SERVICES AVAILABLE IN SDP

41. In the NOA, ACRC asserted that services cannot be approved in SDP if they cannot be funded through the traditional regional center service system. However, ACRC did not identify any law, regulation, or policy that would prohibit a regional center from funding SCLC's services either under the traditional services

model or the SDP. On the contrary, SCLC's services meet the criteria set forth in DDS's service definitions for community integration supports as a service to support (1) socialization and community awareness; (2) communication skills; (3) development of appropriate peer interactions; and (4) friendship and relationship building. ACRC cannot deny Claimant's request on this ground.

NECESSITY OF SCLC SERVICES AND AVAILABILITY OF GENERIC RESOURCES

42. SDP consumers may only purchase services and supports which are necessary to implement the consumer's IPP. (Welf. & Inst. Code, § 4685.8, subd. (c)(3).) Additionally, SDP consumers may only use SDP funds to purchase services when generic services and supports to meet a need are not available. (Welf. & Inst. Code, §§ 4659, subd. (a)(1) & (2); 4685.8, subd. (d)(3)(B).) SCLC's services are consistent with Claimant's IPP goals to improve his social recreation and community integration skills. However, the evidence established that Claimant's needs for social skills development are also addressed through generic resources including ABA and speech therapy. Claimant no longer attends ABA as he achieved his communication-related goals in that program. Additional SCLC services are not necessary to achieve Claimant's IPP goals.

43. Claimant's speech language pathologist indicated that Claimant would benefit from additional speech therapy services to support his self-advocacy and conversation skills. Claimant can access speech therapy services through his school district and his health insurance. Claimant's mother contends that Claimant will be unable to access speech therapy in the coming school year due to his enrollment in an independent study program. However, Claimant's school district remains obligated to provide special education and related services to meet the needs of children with disabilities. (See 20 U.S.C. § 1400(d)(1)(A); Ed. Code, § 56000, subd. (a).) The evidence

accordingly did not establish that Claimant would be unable to access necessary speech therapy services.

CONCLUSION

44. Although ACRC's reasons for denying Claimant's request to use SDP funds to purchase SCLC services were not entirely accurate or persuasive, the evidence established that Claimant cannot utilize SDP funds to purchase SCLC services. Accordingly, Claimant's appeal must be denied.

LEGAL CONCLUSIONS

1. The Lanterman Developmental Disabilities Services Act (Lanterman Act) governs this case. (Welf. & Inst. Code, § 4500 et seq.) An administrative fair hearing to determine the rights and obligations of the parties is available under the Lanterman Act. (Welf. & Inst. Code, §§ 4700–4716.)

Burden and Standard of Proof

2. Claimant has the burden of proving by a preponderance of the evidence that ACRC must add funds to Claimant's SDP budget to purchase SCLC services. (*Lindsay v. San Diego Retirement Bd.* (1964) 231 Cal.App.2d 156, 161 [the party seeking government benefits has the burden of proving entitlement to such benefits]; Evid. Code, § 115 [the standard of proof is preponderance of the evidence, unless otherwise provided by law].) ACRC has the burden of proving by a preponderance of the evidence that it is entitled to terminate funding for SCLC services in Claimant's SDP spending plan. (*In re Conservatorship of Hume* (2006) 140 Cal.App.4th 1385, 1388 [the law has "a built-in bias in favor of the status quo," and the party seeking to change the

status quo has the burden "to present evidence sufficient to overcome the state of affairs that would exist if the court did nothing"]; Evid. Code, § 115.) Proof by a preponderance of the evidence means "more likely than not." (*Sandoval v. Bank of America* (2002) 94 Cal.App.4th 1378, 1387.)

Services and Supports for the Developmentally Disabled

3. Under the Lanterman Act, the State of California is responsible for providing individuals with developmental disabilities with the "treatment and habilitation services and supports" to enable such persons to live "in the least restrictive environment." (Welf. & Inst. Code, § 4502, subd. (b)(1).) To comply with this mandate the Department of Developmental Services contracts with nonprofit agencies called regional centers to provide services and supports for individuals with developmental disabilities. (Welf. & Inst. Code, § 4620.)

4. To determine what services a regional center consumer needs, regional centers are directed to conduct a planning process that results in an IPP designed to promote as normal a lifestyle as possible. (Welf. & Inst. Code, § 4646; *Assn. for Retarded Citizens v. Dept. of Developmental Services* (1985) 38 Cal.3d 384, 389.) The planning process includes "gathering information and conducting assessments to determine the life goals, capabilities and strengths, preferences, barriers, and concerns or problems of the [consumer]." (Welf. & Inst. Code, § 4646.5, subd. (a)(1).) The IPP must set forth goals and objectives for the consumer, provisions for acquiring services, contain a statement of time-limited objectives for improving the consumer's situation, and reflect the consumer's particular desires and preferences. (Welf. & Inst. Code, §§ 4646, subd. (a)(1), (2), & (4), 4646.5, subd, (a)(2), 4512, subd. (b), & 4648, subd. (a)(6)(E).)

5. Welfare and Institutions Code section 4659, subdivision (a), provides in pertinent part:

> 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.
>
> (2) Private entities, to the maximum extent they are liable for the cost of services, aid, insurance, or medical assistance to the consumer.

Self-Determination Program

6. The Self-Determination Program provides regional center consumers "an individual budget, increased flexibility and choice, and greater control over decisions, resources, and needed and desired services and supports to implement" a consumer's IPP. (Welf. & Inst. Code, § 4685.8, subd. (a).) Self-determination is designed to give the participant greater control over which services and supports best meet their IPP needs, goals, and objectives. (Welf. & Inst. Code, § 4685.8, subd. (b)(2)(B).) One goal of the SDP is to allow participants to innovate to achieve their goals more effectively. (*Id.* at §

4685.8, subd. (b)(2)(G).) DDS is empowered to implement program directives regarding the SDP. (Welf. & Inst. Code, § 4685.8, subd. (p)(2).)

7. "Self-determination" means "a voluntary delivery system consisting of a defined and comprehensive mix of services and supports, selected and directed by a participant through person-centered planning, in order to meet the objectives in their IPP." (Welf. & Inst. Code, § 4685.8, subd. (c)(6).) "Individual Budget" means the amount of regional center purchase-of-service funding available to the participant to purchase services and supports necessary to implement the IPP. (Welf. & Inst. Code, § 4685.8, subd. (c)(3).) The regional center can adjust the individual budget if it determines it is necessary due to a change in circumstances, needs, or resources that would result in an increase or decrease in purchase of service expenditures or if the IPP team identifies a prior unmet need that was not addressed in the IPP. (*Id.* at § 4685.8, subd. (m)(1)(A)(ii).)

8. The SDP requires a regional center, when developing the individual budget, to determine the services, supports and goods necessary for each consumer based on the needs and preferences of the consumer, and when appropriate, the consumer's family, the effectiveness of each option in meeting the goals specified in the IPP, and the cost effectiveness of each option. (Welf. & Inst. Code, § 4685.8, subd. (b)(2)(H)(i).)

9. The SDP requires participants to "only purchase services and supports necessary to implement their IPP." (Welf. & Inst. Code, § 4685.8, subd. (d)(3)(C).) The SDP specifically obligates the participant to "utilize the services and supports available within the Self-Determination Program only when generic services and supports are not available." (*Id.* at § 4685.8, subd. (d)(3)(B).)

Conclusion

10. The evidence established that SCLC services are not necessary to implement Claimant's IPP. Generic resources such as ABA and speech therapy are available to meet Claimant's social recreation and community integration needs. As such, Claimant cannot utilize SDP funds to purchase SCLC's services, and his appeal must be denied.

ORDER

Claimant's appeal from Alta California Regional Center's February 10, 2026 Notice of Action (1) denying Claimant's request to add funding for SCLC to his SDP budget and (2) terminating funding for SCLC services in his SDP spending plan, is DENIED.

DATE: June 1, 2026

CHRISTOPHER W. DIETRICH
Administrative Law Judge
Office of Administrative Hearings

BEFORE THE
DEPARTMENT OF DEVELOPMENTAL SERVICES
STATE OF CALIFORNIA

In the Matter of:

Claimant

OAH Case No. 2026030395

Vs.

DECISION BY THE DIRECTOR

Alta California Regional Center

Respondent.

ORDER OF DECISION

On June 1, 2026, an Administrative Law Judge (ALJ) at the Office of Administrative Hearings (OAH) issued a Proposed Decision in this matter.

The Proposed Decision is adopted by the Department of Developmental Services. The Order of Decision, together with the Proposed Decision, constitute the Decision in this matter.

This is the final administrative Decision. Each party is bound by this Decision. Either party may request a reconsideration pursuant to Welfare and Institutions Code section 4712.5, subdivision (a)(1), 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.

Attached is a fact sheet with information about what to do and expect after you receive this decision, and where to get help.

IT IS SO ORDERED on this day June 23, 2026.

Original Signed by
Katie Hornberger, Deputy Director
Division of Community Assistance and Resolutions