BEFORE THE
OFFICE OF ADMINISTRATIVE HEARINGS
STATE OF CALIFORNIA

In the Matter of:

CLAIMANT

and

NORTH LOS ANGELES COUNTY REGIONAL CENTER,

Service Agency.

DDS No. CS0036029

OAH No. 2026041269

DECISION

Administrative Law Judge Chantal M. Sampogna, Office of Administrative Hearings (OAH), State of California, heard this matter on June 8, 2026, by videoconference.

Claimant's mother (Mother) and father (Father), collectively parents, appeared and represented Claimant, who was not present. (Titles are used to protect the family's privacy.)

Karin Adhoot, Due Process Officer for North Los Angeles County Regional Center (Service Agency) appeared and represented Service Agency.

Testimony and documentary evidence was received. The fair hearing was continued to July 8, 2026, for evidence only. Claimant timely submitted her closing argument, marked as Exhibit E, and rebuttal argument, marked as Exhibit F; Service Agency timely submitted its closing argument, marked as Exhibit 12. The record closed and the matter was submitted for decision on July 8, 2026.

ISSUE

Whether Service Agency must retroactively reimburse Claimant $26,500 for the wheelchair ramp portion of the converted van parents purchased in April 2025.

EVIDENCE RELIED UPON

Documents: Service Agency's Exhibits 1 through 11; Claimant's Exhibits A through D.

Testimony: Folahan Ogunyankin, Service Coordinator; Gerald Calderone, Consumer Services Supervisor; Mother; Father.

SUMMARY

Claimant is a 16-year-old girl who uses a wheelchair based on mobility limitations caused by her qualifying condition of intellectual disability (ID). Claimant must attend multiple medical appointments per month to maintain her health. Throughout her childhood, parents have used a van to transport Claimant to school and medical appointments.

In June 2024, before her June 2024 Individualized Program Plan (IPP) meeting, parents requested support from Service Agency to obtain a new converted van, in anticipation of Claimant's newly ordered wheelchair requiring a larger vehicle with different loading requirements. Parents further explained Claimant's increased weight precluded Mother from independently transitioning Claimant into their van. However, between September 2024 and April 2025 Claimant had no assigned service coordinator and her request was not addressed. Further, Service Agency did not provide Claimant a subsequent IPP until January 2026.

In April 2025, Claimant's new wheelchair arrived and it was incompatible with parents' van. In addition, since the 2024 IPP Claimant had developed new diagnoses which increased the frequency of her medical visits. Parents communicated with Service Agency regarding the need for an expedited approval for a converted van, but their request was not meaningfully addressed. That same month parents purchased a new converted van and requested Service Agency retroactively reimburse the cost for the wheelchair ramp.

Service Agency does not dispute Claimant requires a converted van or that Claimant has provided all necessary paperwork to be approved for reimbursement for van conversion costs. The sole dispute is as to timing, i.e., that Claimant did not obtain preauthorization before purchasing the converted van and Service Agency's assertion that it cannot retroactively reimburse for van conversion costs. In support of its denial, Service Agency alleges it was incumbent upon parents to do more, such as by requesting an IPP meeting, to formally raise the van conversion issue before purchase of the vehicle.

Service Agency's position is without merit. Service Agency had an affirmative duty under the Lanterman Act to ensure implementation of Claimant's IPP and to

uphold her rights to dignity and prompt medical care, most notably during a critical time for Claimant's health and physical development. Further, Claimant established a medical necessity for the van conversion, an exception provided for in Service Agency's Purchase of Service policy (POS). Accordingly, Service Agency must retroactively reimburse Claimant $26,500 for the wheelchair ramp portion of the converted van parents purchased in April 2025.

Jurisdiction

1. Claimant is 16 years old and is eligible for services under the Lanterman Developmental Disabilities Services Act (Lanterman Act) (Welf. & Inst. Code, § 4500 et seq.) based on her diagnosis of intellectual disability. (Statutory references are to the Welfare and Institutions Code.) Claimant also has a medical diagnosis of arthrogryposis, a neuromuscular and musculoskeletal condition affecting multiple joints throughout her body, and utilizes a wheelchair for mobility.

2. Claimant is enrolled in the Home and Community-based Services Waiver program. (Exh. 4, p. A54.)

3. On June 4, 2024, Father sent SC Folahan Ogunyankin an email requesting Service Agency assist Claimant with obtaining a van conversion. Father explained it had become difficult to lift and carry Claimant in and out of the family vehicle and take her to required medical appointments and outings in the community. Later that month, an IPP meeting was held and Mother informed SC Ogunyankin she would follow up when parents were ready to move forward with the van conversion request.

4. On October 7, 2024, Mother left a voice message for SC Ogunyankin following up on the request for assistance with a van conversion purchase. Service

Agency did not respond to parents' request and did not issue a Notice of Action (NOA) denying the request.

5. On April 11, 2025, Mother advised SC Ogunyankin Claimant had a new wheelchair which was very heavy, requiring both Mother and Father to lift the wheelchair and place Claimant in their current van. She further stated parents were planning to purchase a new converted van the following week and would like to know the options for retroactive reimbursement of costs. SC Ogunyankin advised Mother parents would need to follow Service Agency's van conversion process and would not be able to fund the conversion costs retroactively if parents completed the van conversion without Service Agency approval. Service Agency did not issue a NOA in response to its communicated denial of Claimant's request.

6. On January 2, 2026, Claimant's IPP team met and discussed Claimant's request for retroactive reimbursement. During January and February 2026, Service Agency provided, and parents completed, the required van conversion documents.

7. On April 15, 2026, Service Agency issued a NOA to Claimant denying Claimant's request for retroactive reimbursement for van conversion costs in the amount of $28,450. Claimant timely appealed.

8. At the fair hearing, the parties stipulated that Claimant is requesting retroactive reimbursement for the cost of the wheelchair ramp totaling $26,500, not $28,500, which Service Agency has denied. (See Exh. A, pp. B9 & B10.)

Claimant's Converted Van Requirements

9. On April 17, 2025, parents purchased a 2025 Toyota Sienna with a rear-entry VMI conversion from Mobility Works, an approved Service Agency vendor. The

total cost for the vehicle was $69,811.43. The wheelchair ramp portion of the total cost was $26,500. (Ex. A, pp. B9 & B10.)

10. Service Agency does not dispute Claimant requires a converted van to transport her in her wheelchair. Nonetheless, some detail regarding why Claimant requires a converted van is necessary to consider Service Agency's responsibility to Claimant to ensure she has a vehicle that can transport her to medical appointments and to understand why parents April 2025 purchase without Service Agency's preauthorization qualifies for an exception to Service Agency's POS.

CLAIMANT'S HEALTH CONDITIONS

11. Pursuant to Claimant's January 2, 2026 IPP (2026 IPP), and as corroborated by parents' testimonies, Claimant has the following health conditions:

> [Claimant] is eligible for regional center services based on the diagnosis of [ID]. [Claimant] is 69 inches tall and weighs 180 lbs. [Claimant] has Arthrogryposis (a neuro -skeletal disorder affecting various joints in the body) and uses a walker for ambulation. [Claimant] has limited use of her hands due to contractures in her joint [*sic*]. . . . [Claimant] continues to wear braces -AFO's at nighttime when in bed to help prevent her from developing club feet. [Claimant] also wears Knee-ankle-foot orthosis -KAFO at daytime. This is a custom-made brace that extends from the thigh to the foot to support and stabilize the knee, ankle and foot. This helps with [Claimant's] ambulation . . . . [Claimant] is not ambulating very well . . . . [Claimant] began having seizures

> at the beginning of 2025 and was diagnosed with epilepsy. [Claimant] was diagnosed with Hashimoto's this year and [she] has had no hospitalizations over the last year. . . . [Claimant] has not been walking and utilizes her wheelchair daily. . . .

12. Parents further explained that Claimant's contractures limit her ability to bend her legs when she is sitting. This limitation coupled with her increasing height and leg length necessitated a new wheelchair and larger vehicle to safely accommodate her growing body. In addition, parents' original van allowed Claimant to be placed in the vehicle with a side entrance and then swivel forward. However, the larger and much heavier new wheelchair, coupled with Claimant's longer and primarily straight legs, now prohibited Claimant from using this type of vehicle entrance generally, and also because parents could no longer lift Claimant in the new wheelchair. Therefore, a new and larger van with a ramp and rear entrance capability was required. (See Exh. A.)

13. Claimant's medical conditions require her to attend multiple medical appointments at different locations regularly. Claimant sees the following medical specialists: orthopedics lower, orthopedics upper, endocrinology, neurology, neurosurgery, genetics, prosthetist, pediatrician, and a blood draw clinic. These appointments occur at a minimum of four different locations which are between 40 to 60 minutes away from Claimant's home. (Exh. A, p. B2.)

CLAIMANT'S NEW WHEELCHAIR

14. Parents provided the following explanation of how Claimant's new wheelchair also required the purchase of a different converted van:

> Until April 2025, [Claimant's] adaptive stroller was foldable and could fit in [parents'] 2018 van trunk. In April [2025], she received a new, much larger and stronger wheelchair that could no longer fold and fit into the trunk. It needed to be lifted by two people and could only fit in the van if the back seats were gone. . . . [I]t took almost a year and a half for [Claimant] to get her new wheelchair. Also, [Claimant] was not able to trial the wheelchair she eventually ended up with because the company only carried smaller chairs so [parents] had no idea how heavy or tall it was going to be until it was finally delivered.

(Exh. A, p. B3.)

15. Parents explained they first discussed the possibility of needing a new converted van with SC Ogunyankin in 2022. At that time, Claimant was 12 years old, and her height and weight began to increase at a faster rate than when she was a young child. By June 2024, as communicated to SC Ogunyankin, Mother could not independently transfer Claimant to their vehicle. However, it was not possible to have Father always present during these transitions. In March 2025, Mother lost her grip of Claimant during a transition and had to lower her to the ground to prevent injury to Claimant and Mother. Based on Claimant's increased height and weight, and even before the new wheelchair and because Claimant cannot help to carry her own weight, parents risked injury to Claimant and themselves upon each transfer. (See. Exh. C, p. B13.) The added weight of the new wheelchair precluded parents from safely transitioning Claimant into their original vehicle.

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16. Parents added the following information about the many factors that led to the uncertainty about what vehicle they would need until the new wheelchair arrived in April 2025:

> We had no way of predicting [Claimant's] future needs two years ago. She used to be able to walk with full leg braces. This is a skill that she started to lose when she hit puberty due to a multitude of reasons: Covid lockdown and no school, growth spurts, prosthetist availability during lockdown, new fears of falling, and more) [*sic*]. [Two] years ago, we were focused more on her regaining her walking skills. Now, we have reached a point where we see that her walking may never be the same in her adult-sized body. Instead, we have chosen to prioritize her comfort in a wheelchair because that is the reality of her life now. We would have made the wrong choice in a converted van two years ago. We probably would have picked a side entry because she was much smaller then.

(Exh. A, p. B4.)

CLAIMANT'S 2024 IPP OUTCOME GOALS

17. On June 26, 2024, Claimant, Mother, and SC Ogunyankin met by phone to conduct Claimant's 2024 IPP meeting and document her 2024 IPP. At the time of her 2024 IPP, Claimant weighed 159 pounds and was 67 inches tall, and did not take prescriptive medication. Parents funded Claimant's medical needs through their

insurance. At that time, Claimant used a stroller type wheelchair which Claimant was able to propel, and which was funded by parents' insurance.

18. Claimant's 2024 IPP identified three Outcome Goals (goals) - Claimant will communicate her needs; parents will receive respite; and Claimant will attend her medical appointments. (Exh. 2, p. A40.) These goals are consistent with Claimant's 2026 IPP which are detailed in Factual Finding 19. During the 2024 IPP meeting, the IPP team discussed funding for a wheelchair accessible van in the future. SC Ogunyankin reviewed her previous discussion with Father, and Mother advised SC Ogunyankin parents would contact Service Agency when they were ready to proceed with a converted van. (Exh. 2, p. A37.)

CLAIMANT'S 2026 IPP

19. Claimant's 2026 IPP provides the following three goals:

- Life Area – Education and Learning: Claimant will continue to attend high school until she is 22 years old. Claimant has a one-to-one aide and receives speech therapy and occupational therapy consultative services. Claimant takes the bus to school and enjoys going out into the community. Claimant does not have any friends at school and does not show interest in her peers. (Exh. 11, p. A210.)

- Life Area - Healthcare/Wellness: Claimant will attend all scheduled medical and dental appointments and work on finding a new shower chair. Claimant was prescribed Keppra twice per day to address her epilepsy. Claimant recently got a new wheelchair and parents are exploring options for home modifications so Claimant can move freely between the bedroom and living room. Parents recently bought a new van and had it converted to

accommodate Claimant's wheelchair. Parents inquired about regional center funding reimbursement for their van conversion. (Exh. 11, p. A211.)

- Life Area - Supports at Home: Claimant will receive support and supervision while her family receives a wellness break. Claimant requires assistance with all activities of daily living and always has a family member or other adult with her to ensure safety. Parents provide Claimant support with all her self-care tasks, meal preparation, and provide her assistance with taking medication. Service Agency provides Claimant 48 hours of respite monthly. (*Id.* at pp. A212-A214.)

- The 2026 IPP did not set forth other services to be provided by Service Agency to Claimant.

Communications Between Parents and Service Agency Regarding Van Conversion

20. Service Agency's Interdisciplinary Notes (ID notes) summarize the communication between parents and Service Agency regarding Claimant's need for a converted van. The ID notes act as a summary of points of contact between Service Agency and parents and Service Agency employee's internal actions on Claimant's case. Particularly, SC Ogunyankin's entered notes are timely and detailed.

JUNE 2024

21. On June 4, 2024, father emailed SC Ogunyankin and told her parents had been having difficulty lifting and carrying Claimant in and out of the family's vehicle. Father requested Service Agency's help with obtaining a vehicle conversion to enable them to safely transition Claimant in and out of their vehicle and transport her to her

many medical appointments. (Exh. 4, p. A49.) That same day, SC Ogunyankin spoke with her supervisor and discussed that parents must first exhaust all generic resources.

22. On June 6, 2024, SC Ogunyankin and Father discussed the van conversion approval process. First, Father reiterated the difficulties with transporting Claimant because she had grown. Because of this difficulty, family had been limiting Claimant's activities. Father added that neither Mother nor Father could lift Claimant into the family's van alone. Due to her diagnosis, Claimant cannot carry her own weight during the transfers. Father stated the family currently has an old Pacifica van but they would look into getting a new or used van for the conversion. Father also asked if Service Agency would reimburse and pay for the conversion part if they get a van from Mobility Works. SC Ogunyankin advised Father that Service Agency may pay the vendor for the conversion and explained Service Agency's van conversion requirements. (Exh. 4, p. 51.)

23. As provided in Factual Finding 18, during the 2024 IPP, the IPP team discussed the van conversion process and Mother advised SC Ogunyankin parents would contact Service Agency when they were ready to move forward.

SEPTEMBER 2024 THROUGH MAY 2025

24. On September 11, 2024, Claimant's case was assigned to Service Agency's Transition Unit (transition unit). (Exh. 6, p. A52.) On September 11, 2024, Claimant's case was assigned to a vacant case load, meaning she had no assigned SC. (*Ibid.*) Service Agency did not inform parents of these changes.

25. As documented in the ID notes, on October 7, 2024, Mother left a voice message for SC Ogunyankin following up on the van conversion issue, and SC Ogunyankin noted in the ID notes she would return Mother's call. However, the ID

notes do not indicate SC Ogunyankin made any subsequent contact with parents until April 2025.

26. Service Agency's evidence was insufficient to credibly establish SC Ogunyankin or any Service Agency employee contacted parents in response to Mother's October 7, 2024, phone call (October 2024 phone call). SC Ogunyankin testified she believed she had spoken with Mother soon after the October 2024 phone call but could not say what was discussed and could not explain why she did not summarize the alleged discussion in the ID notes. SC Ogunyankin acknowledged the lack of documentation was inconsistent with her practice of documenting her communications and actions taken on a case. Further, Mother had no recollection of such a phone call.

27. On April 10, 2025, Mother spoke with SC Heather Gonzalez, the SC of the day, and stated she was calling because SC Ogunyankin had not responded to Mother's October 2024 phone call. Mother explained parents were thinking about buying a van because Claimant received a wheelchair which requires two people to lift her into their current van. Mother asked if it was possible for Service Agency to reimburse the costs for the converted van. SC Gonzalez provided Mother with Service Agency's van conversion checklist (checklist) and a list of vendors for estimates, and told her obtaining denials from insurance and medical providers was a good start to the process. SC Gonzalez also noted that Mother stated she did not know Claimant was in the transition unit. (Exh. 6, p. A52.)

28. On April 11, 2025, Mother emailed SC Ogunyankin similar information as was discussed with SC Gonzalez. Mother also asked SC Ogunyankin if it was possible to receive retroactive reimbursement because they were planning to get the new van the following week and Mother thought it was unlikely to complete the van conversion

paperwork requirements and receive approval in that amount of time. After consulting with her supervisor and informing Claimant's new SC, Mariana Garcia, about the request, SC Ogunyankin contacted Mother and told her parents would need to complete the van conversion process and Service Agency would not be able to retroactively reimburse for the van conversion costs. (Exh. 6, p. A53.)

29. On April 15, 2025, SC Garcia left a voice message for parents. She introduced herself as Claimant's new SC and asked them to call her back to further discuss the van conversion request. On April 22, 2025, SC Garcia and Mother spoke and SC Garcia stated Service Agency needs the completed checklist, estimates from vendors, and denials from insurance. On May 13, 2025, SC Garcia received a written request from parents for reimbursement of van conversion costs. SC Garcia replied via email and informed parents they must submit insurance denials. (Exh. 6, p. A54.)

JUNE 2025 THROUGH MARCH 2026

30. Service Agency did not contact parents between June and September 2025. Soon after SC Garcia's May 13, 2025, communication with parents, she stopped working for Service Agency. Claimant was again without an SC until October 20, 2025, when SC Elizabeth Gaspar was assigned to Claimant's case. (Exh. 6, p. A55.) Service Agency informed parents of the new SC assignment via an introduction letter sent on October 20, 2025. Based on the evidence presented, for the 15 months spanning between June 2024, when information was presented to Service Agency regarding Claimant's pending need for a converted van, and October 2025, Claimant had an assigned SC for one month and Service Agency made no meaningful effort to support Claimant's imminent need for a converted van.

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31. On December 8, 2025, SC Gaspar contacted parents to schedule an IPP meeting. Mother responded on December 10, 2025, and the IPP was scheduled for January 2, 2026. During the 2026 IPP meeting, parents requested reimbursement for van conversion costs. SC Gaspar consulted with her supervisor and on January 6, 2026, sent parents the required paperwork including the checklist and vehicle modification form. During that month, Mother and SC Gaspar had follow up discussions, and on February 6, 2026, Mother submitted the required documentation including the vehicle registration, completed checklist, and letter requesting reimbursement. SC Gaspar forwarded the information to her supervisor and discussed the request.

32. On March 18, 2026, SC Gaspar spoke with Mother and informed her Service Agency was denying the retroactive reimbursement request. Mother stated parents would like to appeal and SC Gaspar stated she would complete an NOA. (Exh. 6, p. A56.)

Service Agency's Position

33. Service Agency's primary arguments are that it is prohibited from retroactively reimbursing Claimant for van conversion costs not preauthorized by Service Agency and that parents were required to request a formal or emergency IPP meeting to have had their van conversion reimbursement request considered sooner than January 2026. Service Agency did not provide factual or legal support for these assertions.

TEMPLATE VEHICLE CONVERSION AGREEMENT

34. In support of its position, Service Agency submitted its template "Vehicle Modification and Adaptation Agreement Between [Service Agency] and Family" (template vehicle conversion agreement) (Exh. 6). The template agreement provides

that a family will receive approval before purchasing or converting a vehicle and that the van conversion is identified in the consumers IPP. (*Id.* at p. A65.) The template vehicle conversion agreement also identifies a wheelchair ramp as an item eligible for reimbursement. (Exh. 6, p. A62.) The template vehicle conversion agreement does not state Service Agency is prohibited from retroactive reimbursement if the other van conversion requirements have been met. (*Ibid.*)

SERVICE AGENCY'S SERVICE STANDARDS

35. Service Agency also presented its "Service Standards" (standards) (Exh. 7.) The standards do not support Service Agency's position. As to van modifications, the standards provide that Service Agency may purchase van modifications for consumers to enable them to access the community when generic or natural supports are not available. "Modifications must be consistent with the most cost-effective adaptation that meets the individualized need of the consumer and must represent the lowest of three bids from vendored service providers." (Exh. 7, p. A116.)

36. The standards do not state Service Agency cannot retroactively reimburse for van modification costs. Nor did Service Agency dispute Claimant's requested amount of reimbursement of $26,500 for the cost of the wheelchair ramp or claim this amount was not the most cost effective adaptation.

37. The standards also provide Service Agency's policies, consistent with the Lanterman Act, for SC responsibilities and IPP development and implementation. The standards delineate an SC's responsibilities which include the following: providing or ensuring that needed services and supports are available to the consumer; developing, implementing, overseeing, and monitoring the consumer's IPP; offering individual advocacy; and conducting quality assurance activities. (Exh. 7, p. A108.)

38. Regarding the IPP process, the standards provide that if a review of the IPP is requested by any IPP team member, the review must happen within 30 days. (Exh. 7, p. A99.) The standards also provide that the consumer's needs are determined through the IPP process based on the needs and preferences of the consumer or, when appropriate, the consumer's family and are reevaluated at the request of an IPP team member. (*Id.* at pp. A100 & A101.)

39. The standards do not mention or otherwise identify an emergency IPP process; nor do they place on a consumer or the family a responsibility to request an emergency IPP for Service Agency to consider and address a request for services. Further, no evidence was presented that Service Agency ever informed parents they needed to request a formal or emergency IPP to have their van conversion request considered.

40. Finally, the standards provide that Service Agency cannot anticipate all requests for the IPP planning process and provide for an exception procedure. The standards recognize that some individual needs are so unique they are not addressed in the service standards and therefore, Service Agency's executive director or designee may grant exceptions. The planning team must make a request for an exception to the center's staffing committee. The staffing committee must review the request and make a recommendation to the executive director or designee. (Exh. 7, p. A109.)

41. Service Agency did not present evidence that it informed parents of the exceptions process or that Service Agency otherwise submitted to its staffing committee a request to consider an exception to its policy that van conversion cost reimbursement must be preauthorized. Rather, the evidence established Service Agency considered Claimant's cooperation with the van conversion requirements, but

did not consider extraordinary circumstances or hardship, and denied Claimant's request because she had not obtained preauthorization.

WITNESS TESTIMONY

42. SC Ogunyankin and Consumer Services Supervisor (CSS) Gerald Calderone testified at hearing. SC Ogunyankin acknowledged she did not follow up on or pursue any van conversion service provision after the June 2024 IPP, nor did she identify it as an open issue when Claimant's case transferred to the transition unit. When Claimant's case was transferred to the transition unit, SC Ogunyankin had been Claimant's SC for over 10 years and she did not refute or otherwise disagree with parents' assertions regarding Claimant's needs for a converted van.

43. CSS Calderone confirmed the only basis for Service Agency's denial of Claimant's request was timing. Claimant otherwise established her need for the converted van, provided all required documentation, and there were no concerns regarding the costs or possible generic resources. CSS Calderone also asserted Service Agency is prohibited from retroactively reimbursing parents and that parents failed to request a formal or emergency IPP regarding the van conversion issue, ultimately resulting in the denial of their request.

44. CSS Calderone also acknowledged that had he been Claimant's SC, he would have independently pursued the request for reimbursement of a van conversion on behalf of Claimant, without parents requesting an IPP to address the issue and without the issue having been identified in Claimant's IPP. CSS Calderone explained that in consideration of Claimant's medical needs and physical development, the difficulty parents were having transferring Claimant into their van, and the anticipated

time it takes to obtain approval, which alone can take up to three months, he would have moved forward on staffing and addressing the van conversion issue in June 2024.

Claimant's Evidence

45. In addition to the evidence already presented, parents testified regarding their efforts to comply with Service Agency's van conversion requirements and to appropriately address Claimant's changing needs. In June 2024, Parents timely communicated with Service Agency regarding Claimant's changing needs and anticipated need for a new wheelchair and converted van. Parents were not informed Claimant had no SC between September 2024 and April 2025, or between June 2025 and October 2025. Parents were also not informed before the fair hearing of any action they had been required to take to initiate the van conversion process.

46. In addition to Service Agency's failure to communicate with parents regarding the van conversion process, parents were faced with a multitude of unanticipated events which resulted in the April 2025 purchase of the converted van without prior Service Agency authorization. Parents had ordered Claimant's new wheelchair in approximately October 2023 and did not know it would take 18 months to be delivered. Parents also did not know how tall Claimant would grow or how her growth would impact the required size of her wheelchair. In addition, parents did not know Claimant's walking mobility would lessen as she grew into a teenager, or that these changes would make her transitions into a vehicle reliant solely on parents lifting Claimant into the vehicle unless their vehicle was converted with a wheelchair ramp. Finally, parents did not know in June 2024 that Claimant would, in 2024, develop epilepsy and Hashimoto disease, thereby increasing her medical visits and medications. (Exh. B.)

47. Finally, parents argued that because Service Agency, in January 2026, nine months after parents had purchased the converted van preauthorization, engaged with parents in the van conversion reimbursement process demonstrates that retroactive reimbursement is possible upon a finding of an exception. However, parents assert Service Agency failed to adhere to its own standards and denied their request without assessing for an exception to the standards.

LEGAL CONCLUSIONS

Jurisdiction

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

2. Claimant requested a fair hearing to appeal Service Agency's denial of her request to have Service Agency retroactively reimburse Claimant $26,500 for the wheelchair ramp portion of the converted van parents purchased in April 2025. (Factual Findings 1-8.) Jurisdictional requirements have been met.

Burden and Standard of Proof

3. The party asserting a claim generally has the burden of proof in administrative proceedings. (See, e.g., *Lindsay v. San Diego County Retirement Bd.* (1964) 231 Cal.App.2d 156, 161-162.) In this matter, Claimant bears the burden of

proving, by a preponderance of the evidence, that Service Agency must pay for the requested service. (Evid. Code, §§ 115, 500.)

Regional Center Responsibilities

4. The state is responsible to provide services and supports for developmentally disabled individuals and their families. (§ 4501.) Regional centers are "charged with providing developmentally disabled persons with 'access to the facilities and services best suited to them throughout their lifetime' and with determining "the manner in which those services are to be rendered." (*Association for Retarded Citizens v. Department of Developmental Services* (1985) 38 Cal.3d 384, 389, hereafter *ARC*, quoting from § 4620.)

5. A regional center must provide specialized services and supports toward the achievement and maintenance of the consumer's independent, productive, and normal life that allows the consumer to "approximate the pattern of everyday living available to people without disabilities of the same age." (§ 4501.)

6. Regional centers are responsible for conducting a planning process that results in an IPP, which must set forth goals and objectives for the consumer. (§§ 4512, subd. (b), 4646, 4646.5, subd. (a).)

7. To achieve the stated objectives of a consumer's IPP, the regional center must provide the consumer with needed services and supports which assist the consumer in achieving the greatest self-sufficiency possible and exercising personal choices which allow the consumer to interact with persons without disabilities in positive, meaningful ways. (§ 4648, subd. (a)(1).)

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8. If the regional center has not held an in-person IPP meeting or completed any other in-person meeting or visit with the consumer in the previous 12 months, the regional center must hold an in-person IPP meeting or other meeting or visit at a location and at a time that is convenient for, and reflects the preference of, the consumer, and the consumer's family. This requirement on the part of the regional center must not "impede, delay, or prevent the timely development or revision of an [IPP], or the timely authorization or receipt of services and supports. (§ 4646, subd. (f)(2)(A).)

9. Though regional centers have wide discretion in how to implement the IPP, "they have no discretion in determining whether to implement: they must do so." (*ARC*, 38 Cal.3d at p. 390, citing § 4648, subd. (a).)

Service Requirements

10. Persons with developmental disabilities have the right to dignity, privacy, and humane care, and a right to prompt medical care and treatment. (§ 4502, subd. (b)(2) & (4).)

11. The services to be provided to any consumer must be individually suited to meet the unique needs of the individual client in question, and within the bounds of the law each consumer's particular needs must be met. (See, e.g., §§ 4500.5, subd. (d), 4501, 4502, 4512, subd. (b), 4640.7, subd. (a), 4646, subd. (a), 4648, subd. (a)(1) & (a)(2).) The Lanterman Act assigns a priority to services that will maximize the consumer's participation in the community. (§ 4646.5, subd. (a)(2).)

12. "Enhanced service coordination" for individuals enrolled in the Home and Community-based Services Waiver program for persons with developmental disabilities includes the following: regular contact, via telephone or video, with

consumers or their families, maintaining no less than quarterly contact with consumers or their families, and having annual IPP meetings. (4640.6, subd. (c)(3) & (5)(C)(i)-(iii).)

Funding for Services

13. Regional Centers must conform to their respective POS policies. (§ 4646.4, subd. (a)(1).)

14. Regional Center funds must not be used to supplant the budget or an agency that has a legal responsibility to serve a member of the general public and is receiving public funds for providing those services. (§ 4648, subd. (a)(8).)

15. Regional Centers must pursue all possible sources of funding for services, including private insurance to the maximum it is liable for the costs of services or aid to the consumer. (§ 4659, subd. (a).)

16. Regional Center must not purchase any service that would otherwise be available from private insurance or a health care service plan when a client meets the criteria of this coverage but chooses not to pursue the coverage. (§ 4659, subd. (c).)

17. At the time of development or modification of a consumer's IPP, regional centers must ensure that generic services and supports are utilized when appropriate and that the family's responsibility for providing similar services and support for a minor child without disabilities is considered, taking into account the consumer's need for extraordinary care, services, support and supervision, and the need for timely access to this care. In such instances, the regional center must provide for exceptions, based on family need or hardship. (§ 4646.4, subd. (a)(2) & (4); Cal. Code Regs., tit. 17, § 54326, subd. (d)(1).)

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Consideration of Costs

18. Although regional centers are mandated to provide a wide range of services to implement the IPP, they must do so in a cost-effective manner, based on the needs and preferences of the consumer, or where appropriate, the consumer's family. (§§ 4512, subd. (b), 4640.7, subd. (b), 4646, subd. (a).)

19. When selecting a provider of consumer services or supports, the regional center and the consumer, or conservator, must, pursuant to the IPP, consider the following: a provider's ability to deliver quality services or supports that can accomplish all or part of the consumer's IPP; and a provider's success in achieving the objectives set forth in the individual program plan. "The cost of providing services or supports of comparable quality by different providers, if available, shall be reviewed, and the least costly available provider of comparable service, . . . who is able to accomplish all or part of the consumer's individual program plan, consistent with the particular needs of the consumer and family as identified in the individual program plan, shall be selected." (§ 4648, subd. (a)(6).)

20. If a needed service or support cannot be obtained from another source, a regional center must fund it. (*ARC*, *supra*, 38 Cal.3d at p. 390.) Generic resources shall be utilized first. A regional center is the provider of last resort. (*Ibid.*)

Cause to Grant Claimant's Appeal

21. The issue presented is whether Service Agency must retroactively reimburse Claimant $26,500 for the cost of the wheelchair ramp portion of the converted van parents purchased in April 2025. Service Agency does not dispute Claimant's need for the converted van; nor does it challenge the amount of the costs

requested or assert there are generic resources available to pay for the wheelchair ramp.

22. Service Agency asserts it is prohibited from approving retroactive reimbursement of the requested costs. Further, Service Agency places responsibility on parents for the fact that the request is retroactive and without Service Agency's prior authorization. However, Service Agency's positions are without merit and are contrary to the Lanterman Act, the Regulations, and its own POS and standards, collectively applicable law.

23. Contrary to Service Agency's assertions, applicable law does not prohibit Service Agency from retroactively approving reimbursement for such costs. Rather, applicable law provides circumstances may exist which provide cause to grant an exception to Service Agency's POS and standards. Further, Service Agency bears the responsibility to conduct annual IPP meetings and to not delay the provision of services due to a pending IPP meeting.

24. Claimant met her burden of proof to establish cause to grant an exception and order Service Agency to retroactively reimburse Claimant for the wheelchair ramp costs. Claimant established she has an extraordinary need for services and family hardship which require the requested retroactive reimbursement.

SERVICE AGENCY'S FAILURE TO COMPLY WITH IPP REQUIREMENTS

25. Between 2022 and March 2025, parents made multiple requests to Service Agency for assistance with purchasing a converted van. These requests were made based on Claimant's increased height and weight and resulting need for a new wheelchair and the multiple medical appointments required to maintain her health. By June 2024, parents also communicated to Service Agency it was becoming increasingly

difficult to transfer Claimant in and out of their vehicle based on her increased height and weight. (Factual Findings 20-32, 42-44.)

26. During this time, Claimant was between 12 and 15 years old, a maturing girl who would necessarily be increasing in height and weight. By the fact of her age, in September 2024, Service Agency transitioned Claimant to the transition unit. However, Service Agency failed to address Claimant's simultaneous need for a converted van that accommodated Claimant's physical development and could support the health portion of Claimant's IPP which requires her to attend multiple medical appointments. It was incumbent upon Service Agency to anticipate this need and timely support Claimant in obtaining a van conversion to prevent an emergency situation. (Factual Findings 9-19.)

27. Generally, Service Agency was required to meet with Claimant annually and to communicate with Claimant quarterly. (Legal Conclusion 8.) Further, as a waiver recipient, Service Agency was required to review her IPP annually. (Legal Conclusion 12.) However, other than approximately four weeks during April and May 2025 (spring 2025), between June 2024 and October 2025 Claimant did not have a designated SC. In addition, during spring 2025, Service Agency's contact with Claimant was limited to providing parents some of the van conversion paperwork and reviewing their written responses, and requesting insurance denials, without follow up or other service provision. (Factual Findings 20-32, 42-44.)

28. Service Agency's inattentiveness to, and inactivity regarding, its responsibilities to anticipate and address Claimant's service needs fell far short of its responsibilities under the applicable law and resulted in Claimant being in an emergency situation once her new wheelchair arrived. Once parents purchased the converted van, they requested Service Agency consider an exception to the applicable

law and grant their request for retroactive reimbursement. However, Service Agency did not assess whether to grant an exception. Rather, it reviewed Claimant's conversion documents and denied the request due to timing, not after consideration of exceptional circumstances or hardship.

CAUSE TO GRANT AN EXCEPTION TO SERVICE AGENCY'S VAN CONVERSION POS POLICY

29. Applicable law provides that in certain circumstances Service Agency cannot anticipate all requests for the IPP planning process and in such cases provides an exception procedure which considers the consumer's need for extraordinary services and the family's need or hardship. (Legal Conclusion 17.) Further, the standards recognize that some individual needs are so unique they are not addressed in the service standards and therefore, Service Agency's executive director or designee may grant exceptions. (Factual Finding 40.)

30. Claimant has been a consumer of Service Agency for over 13 years. By the very nature of Claimant growing from a child into a young teenager who requires access to multiple medical appointments to maintain her health, it was incumbent upon Service Agency to anticipate Claimant's possible need for a converted van and, upon learning of family's challenges with transferring Claimant into their vehicle, actively taking measures to ensure Claimant's IPP goals, including attendance at her medical appointments, were achievable. It was also incumbent upon Service Agency to ensure Claimant's individual rights under the Lanterman Act, including the right to dignity and prompt medical care, were upheld. (Legal Conclusions 4-12.)

31. Claimant is eligible for an exception because of her need for extraordinary services. Initially, Service Agency failed to uphold its IPP and

communication responsibilities with Claimant, a primary cause for family's need to request for retroactive reimbursement. In addition, it was not feasible for parents to know how to adhere to Service Agency's van conversion policy, which can take months to complete, when they did not know the new wheelchair would arrive in April 2025, 18 months after it was ordered, and only learned of its size, weight, and rear entrance requirement upon its arrival. (Factual Findings 9-47.)

32. In addition to the logistical exceptional circumstances, Claimant also faced medical and personal rights challenges which established additional exceptional circumstances and family hardships and the need for extraordinary services in the form of retroactive reimbursement. By the time the new wheelchair arrived, Claimant had been diagnosed with two additional illnesses, epilepsy and Hashimoto's disease, both requiring additional medical appointments. (Factual Findings 20-47.)

33. Regarding compromises to Claimant's safety and dignity, since June 2024, and worsening through April 2025, parents could not transfer Claimant into their vehicle safely and in a manner that maintained her dignity. Rather, parents repeatedly struggled to safely transition Claimant, at a risk to Claimant's and their own injury. As recently March 2025, Mother had to lay Claimant on the ground during a transition to prevent injury to Claimant and Mother. These struggles exceed the customary struggles children without disabilities incur when being transition into a vehicle and compromised Claimant's dignity and constitute exceptional circumstances. (Factual Findings 9-47.)

34. Claimant established cause to grant an exception to Service Agency's POS and standards based on her need for extraordinary services, exceptional circumstances, and family hardship. Accordingly, Service Agency must retroactively

reimburse Claimant $26,500 for costs of the wheelchair ramp portion of the converted van parents purchased in April 2025.

ORDER

Claimant's appeal is granted. Service Agency is ordered to retroactively reimburse Claimant $26,500 for the wheelchair ramp portion of the converted van parents purchased in April 2025.

DATE:

CHANTAL M. SAMPOGNA
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 a reconsideration pursuant to subdivision (b) of Welfare and Institutions Code section 4713 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.