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www.nbrc.net

Our Mission:

(what we do and for whom)

Our mission is to empower, respect and serve each child and adult with or with the potential for a developmental disability, while promoting the health and well-being of each individual, their families, and our community.

MEETING NOTICE

The next meeting of the Board of Directors is a Regular Business Meeting scheduled as follows:

DATE: March 4, 2026

TIME: 6:00 pm

PLACE: Hybrid – NBRC Vacaville Office or Zoom
445 Merchant Street, Vacaville, CA

Please click the link below to join the webinar:

<https://us02web.zoom.us/j/86393481705?pwd=gObaaMwGB7EVakKUOLhOlhlo4qcoGO.1>

Passcode:594765

Se Habla Español

American Sign Language Interpretation Available

Agenda Enclosed

The NBRC Board of Directors is actively recruiting for board members. Please email your completed application or send any questions to Janelle Santana at janelles@nbrc.net.

- [NBRC Board Application - English](#)
- [NBRC Solicitud de Junta - Español](#)
- [Ang Aplikasyon para Maging Miyembro ng Lupon ng mga Direktor ng - Tagalog](#)

REMINDER: Notices are posted at www.nbrc.net. All meetings are made accessible to persons with disabilities and all members of the public are welcome to attend. Please contact Janelle Santana at (707) 256-1224 for further information or to request any disability-related modifications or accommodations.

North Bay Developmental Disabilities Services, Inc.
Board of Directors' Board Meeting – Hybrid
March 4, 2026 6:00 p.m.
445 Merchant Street
Vacaville, CA

Or via Zoom Webinar

- I. CALL TO ORDER – Martha Valdez, President
- II. ROLL CALL AND INTRODUCTIONS – Sahira Arroyos, Vice President (3 min)
- III. CONSIDERATION OF MINUTES – Business Meeting Minutes from February 4, 2026 be approved as submitted. (2 min) (pgs. 1-4) ACTION
- IV. CONSIDERATION OF AGENDA – Additions or modifications to this agenda by Board Members (2 min) ACTION
- V. GENERAL PUBLIC COMMENT – Please use the sign-up sheet if attending in-person or chat in the Zoom meeting to sign up. If attending by phone, please text (707) 256-1224 to sign up. (2 minutes per person unless otherwise allowed by Board Chairperson). (10 min)
- VI. APPROVAL OF CONTRACT OVER \$250,000 ACTION
 - A. B-4 Regional Center Allocation - Isabel Calder, Chief Financial Officer (5 min) (attachment)
- VII. PRESENTATION: REIMBURSEMENT - SOCIAL RECREATION SERVICES INFO
 - A. Beth DeWitt, Director of Client Services; Isabel Calder, Chief Financial Officer; & Claudia Ritchie, Director of Equity & Engagement (30 mins) (pgs. 5-39)
Please note this presentation will be given in English & Spanish.
- VIII. REVIEW OF APPROVED CONTRACTS OVER \$250,000 INFO
 - A. Courtney Singleton, Director of Community Services (15 mins) (pgs. 40-43)
- IX. TREASURER'S REPORT – Christopher Bennett, Treasurer & Andrea Bednarova, Former Treasurer
 - A. Treasurer's Report be approved as submitted (5 min) (attachment) ACTION
- X. UPDATE ON GRASSROOTS DAY – INFO
 - A. Martha Valdez, Board President; Christopher Bennett, Board Treasurer; Cheryl Snavelly, Board Member; & Gabriel Rogin, Executive Director (pg. 44)
- XI. COMMITTEE ITEMS –
A list of committee reports and upcoming meetings can be found on pages 45-55.
- XII. EXECUTIVE DIRECTOR'S REPORT – Gabriel Rogin, Executive Director (15 mins) INFO
- XIII. GOOD OF THE ORDER – Any other Board business may be brought up at this time.
- XIV. GENERAL PUBLIC COMMENT – Please use the sign-up sheet if attending in-person or chat in the Zoom meeting to sign up. If attending by phone, please text (707) 256-1224 to sign up. (2 minutes per person unless otherwise allowed by Board Chairperson). (10 min)
- XV. CLOSED SESSION (30 mins)
 - a. The appointment, employment, evaluation of performance, or dismissal of a regional center employee

- b. Labor contract negotiations
- c. Any matter specifically dealing with a particular regional center client

XVI. RETURN FROM CLOSED SESSION

- d. Report on any action taken during the closed session (1 min)

INFO

XVII. ADJOURNMENT – Martha Valdez, President

CLOSED SESSION – a) The governing board of a regional center may hold a closed meeting to discuss or consider one or more of the following: (1) real estate negotiations, (2) the appointment, employment, evaluation of performance, or dismissal of a regional center employee, (3) employee salaries and benefits, (4) labor contract negotiations, (5) pending litigation. b) Any matter specifically dealing with a particular regional center client must be conducted in a closed session. -- W&I Code 4663.

NEXT MEETING ANNOUNCEMENT – The next annual Board Meeting is on April 1, 2026 at NBRC's Napa Office – 610 Airpark Road, Napa, CA 94558.

**North Bay Developmental Disabilities Services, Inc.
Board of Directors Regular Business Meeting
February 4, 2026 6:00 p.m.
Via In Person & Zoom Webinar
520 Mendocino Avenue, Santa Rosa, CA 95401**

NBRC BOARD MEMBERS' PRESENT:

Martha Valdez, President, Sonoma County	Sahira Arroyos, Vice President, Solano County
Cheryl Snavely, Sonoma County	Andrea Bednarova, Treasurer
Christopher Bennett, Napa County	Alan Kerzin, Sonoma County
Jessica Sadowsky, VAC Representative	Joanne Giardello, Solano County
Ronald Gers, Secretary, Sonoma County	Swati Vembakottai, Sonoma County

NBRC BOARD MEMBERS ABSENT:

None

NBRC STAFF PRESENT:

Gabriel Rogin, Executive Director	Janelle Santana, Executive Assistant
Beth DeWitt, Director of Client Services	Mariam Guirguis, Compliance Specialist
Claudia Ritchie, Director of Equity and Engagement	Deanna Mobley, Director of Intake and Clinical Services
Courtney Singleton, Director of Community Services	Isabel Calder, Chief Financial Officer
Jennifer Crick, Director of Administrative Services	

GUESTS (names listed as seen on Zoom):

Amber Lopez, Spanish Interpreter	Chris Aguire, DDS
Stacey Martinez, The Arc – Solano	ASL Interpreter, DeBlois
Derek Hearhtower	ASL Interpreter, Jesse
Sara Speck	Amber Lopez, Spanish Interpreter
Adriana Diaz, 24-Hour Homecare	Merilee Bennett
Sandy Stevens	Linda Plourde, Bayberry Inc.
Brent Mikulski	Holly Grant
Debra Garrett	iPhone (9)
Justin Hamilton Hole	Maria Teresa
	Paula Finley – BI

MINUTES

CALL TO ORDER – Martha Valdez, President, called the regular business meeting to order at approximately 6:08 pm.

ROLL CALL AND INTRODUCTIONS – Ronald Gers, Secretary, conducted roll call and a quorum was present.

CONSIDERATION OF MINUTES – Business Meeting Minutes from January 7, 2026 & January 23, 2026, approved as submitted.

M/S/C (Gers/Arroyos) Moved to approve January 7, 2026 & January 23, 2026 minutes as submitted.

**APPROVED
UNANIMOUS**

CONSIDERATION OF AGENDA – No modifications.

M/S/C (Gers/Bennett) Moved to approve the agenda as submitted.

**APPROVED
UNANIMOUS**

GENERAL PUBLIC COMMENT –

- Derek Hearthtower, Community Member, shared about an incident that recently happened to a person with autism in Australia and ways to mitigate that situation in the future.

APPROVAL OF CONTRACT OVER \$250,000

Isabel Calder, Chief Financial Officer, presented the B-3 contract that can be found on page 11 of the February Board Meeting packet.

M/S/C (Gers/Arroyos) Moved to approve the B-3 contract.

**APPROVED
UNANIMOUS**

PRELIMINARY AMENDMENT TO CALPERS CONTRACT

Jennifer Crick, Director of Administrative Services, presented the amendment to the CalPERS contract that can be found on pages 7-10 in the February Board Meeting packet.

M/S/C (Gers/Arroyos) Moved to approve the amendment to the CalPERS contract.

**APPROVED
UNANIMOUS**

PRESENTATION: 2024-2025 PERFORMANCE CONTRACT REPORT

Courtney Singleton, Director of Community Services, presented the 2024-2025 performance contract report that can be found as an attachment to the February 2025 board meeting packet.

- Swati Vembakottai, Board Member, suggested NBRC conduct a survey to gather data on how the internship opportunities and whether they lead to paid employment.
- Joanne Giardello, Board Member, noted a big difference in Purchase of Service (POS) spending for those who speak Tagalog and those who speak Spanish and wanted clarification of the disparity.
 - o Claudia Ritchie, Director of Equity and Engagement, noted there will be future meetings that will address the subject in more detail.
 - May Board Meeting: Presentation on POS Disparities
 - March 24th: Annual POS Disparity Presentation
- Courtney Singleton, Director of Community Services, to discuss the following at a future board meeting.
 - o Gather strategies from other regional centers to increase percentages of paid internship programs and share at a future board meeting.
 - o Review the distribution of services by age. Look for patterns. If so, share feedback on what impacts the patterns.

PUBLIC COMMENT ON 2024-2025 PERFORMANCE CONTRACT

- Derek Hearthtower, Community Member, inquired about why the intake numbers decreased from one year to the next.
 - o Gabriel Rogin, Executive Director, shared there are high levels of growth within Intake at regional centers across the state. NBRC continues to look at expanding the Intake department as necessary.
 - o Deanna Mobley, Director of Intake and Clinical Services, said NBRC is looking at increasing vendors to assist with eligibility assessments.
- Justin Hamilton Hole, Community Member, offered to help NBRC if they're looking for internship candidates.

TREASURER'S REPORT –

Treasurer's Report be approved as submitted.

Andrea Bednarova, Treasurer, reviewed the Treasurer's Report. A summary of the Board Opportunity Fund and the CFO board report can be found on pages 18-19 of the February 2026 board packet.

- Board Opportunity Fund
 - o The Opportunity Fund had an ending balance of \$63,179.30 as of December 31, 2025.
 - o There was one (1) transaction during the month of December 2025. This donation was from

Ms. Isbell who has donated \$10,000 for the past few years. We appreciate her ongoing generous donation!

- In addition, Debbie Adams, a Service Coordinator who worked for NBRC for over 23 years, recently retired from North Bay Regional Center and requested in lieu of gifts; a donation would benefit the Board Opportunity Fund. A total of \$1800 in honor of her years of service was donated and will be reflected in March.
 - A huge thank you to Debbie for her generous gesture and dedication to the individuals she supported over the years. We wish her the very best in this next chapter of retirement. A special thank you to your donors (they are listed in the report).
- Operations – Current Fiscal Year 2025/2026
 - NBRC paid a total amount of \$21,075,412 for all operation expenditures, including Senior Companion Program, Mental Health Services Act, and LACC through December 31, 2025.
 - NBRC’s Operations expenditures are at 47% for this fiscal year. NBRC will continue to monitor expenses as we begin the second half of our fiscal year.
- Purchase of Service – Current Fiscal Year 2025/2026
 - NBRC paid a total of \$291,310,200 for POS expenditure through December 31, 2025. NBRC has estimated the projections based on the 6 months of POS payments. NBRC is working closely with DDS on the contract spending authority to ensure an additional allocation is issued to cover POS costs associated with rate reform and Minimum Wage that became effective on January 1, 2026.
- Cashflow
 - As of January 2, 2026, NBRC’s cash availability is just over \$97 million. Of this amount, \$45 million is invested in a 30-day CD which matures on February 26th. This investment will earn an estimated \$145,000 interest.
 - NBRC anticipates receiving just over \$51 million for the December State Claim on February 6th.

M/S/C (Gers/Bennett) Motioned to approve the Treasurer’s Report as submitted.

**APPROVED
UNANIMOUS**

COMMITTEE ACTION ITEMS –

A. Nominating Committee Update –

a. Vote for Board Member Term

i. Alan Kerzin

ii. The Nominating Committee recommended Alan Kerzin for his second board term from April 2026 to March 2029 (3 years).

iii. Alan Kerzin left the room. Board members discussed.

Approved the second board term for **Alan Kerzin** from 04/2026 – 03/2029. All board members present voted in favor.

b. Vote for Board Treasurer

i. Christopher Bennett was nominated for Board Treasurer.

ii. Christopher left the room. Board members discussed.

iii. 8 board members voted in favor. 2 abstained.

Approved the first term for **Christopher Bennett** to serve as Board Treasurer from 03/2026 – 02/2028 (2 years).

c. Vote for Board Candidate

i. **Sandy Stevens** was introduced to board members and shared a few words.

ii. Sandy left the room.

iii. All board members present voted in favor.

M/S/C (Snaveley/Arroyos) Motioned to approve the first board term for Sandy Stevens from 02/2026 –

01/2027 (1 year).

EXECUTIVE DIRECTOR'S REPORT –

Gabriel Rogin, Executive Director, and Christopher Bennett, Board Member, shared about the Proposed State Budget.

- As we approach the May Revise, we'll see what happens at the federal level.
- DDS released proposed Trailer Bill Language (TBL).
 - o The summary of proposed changes can be found on pages 33-41 of the board meeting packet.
- The regional center system is expected to grow rapidly.
- By cleaning up social security number data, it generated an additional \$154 million of federal reimbursement.

GOOD OF THE ORDER –

- Andrea Bednarova, Board Treasurer, recommended the Board recognize Debbie Adams for her honorable retirement contribution to the Board Fund by getting her flowers.
- Martha Valdez, Board President, asked board members to urgently review her Executive Director recruitment plan and provide feedback via email.

GENERAL PUBLIC COMMENT –

- Justin Hamilton Hole shared how nice it was to work with Christopher Bennett and welcomed him as Board Treasurer. Justin also requested to be added to the board meeting distribution list.
- Derek Hearthtower, Community Member, commented that they're happy for Christopher Bennett being selected as Board Treasurer.

CLOSED SESSION –

The board moved into closed session at 8:06pm to discuss the following.

- a. Labor negotiations
- b. The appointment, employment, evaluation of performance, or dismissal of a regional center employee.

RETURN FROM CLOSED SESSION-

A. Report on any action taken during closed session.

The board returned from the closed session at 8:29pm and there was no action taken.

ADJOURNMENT – Martha Valdez, President, adjourned the regular business board meeting at 8:29pm.



Reimbursement Services for families

**March 2026
NBRC Board of Directors**



Servicios de Reembolso para familias

**Marzo de 2026
Junta Directiva de la NBRC**

Agenda

- Overview of NBRC purchase reimbursement process
- How to become a vendor for purchase reimbursement
- When are authorizations created for purchase reimbursement
- What is required by the fiscal department for reimbursement
- When are reimbursements processed and paid
- Who can help with questions

Agenda

- Resumen del proceso de reembolso de compras de NBRC
- Cómo convertirse en proveedor para el reembolso de compras
- ¿Cuándo se crean las autorizaciones para el reembolso de compras?
- ¿Qué exige el departamento fiscal para el reembolso?
- ¿Cuándo se procesan y pagan los reembolsos?
- ¿Quién puede ayudar con las preguntas?



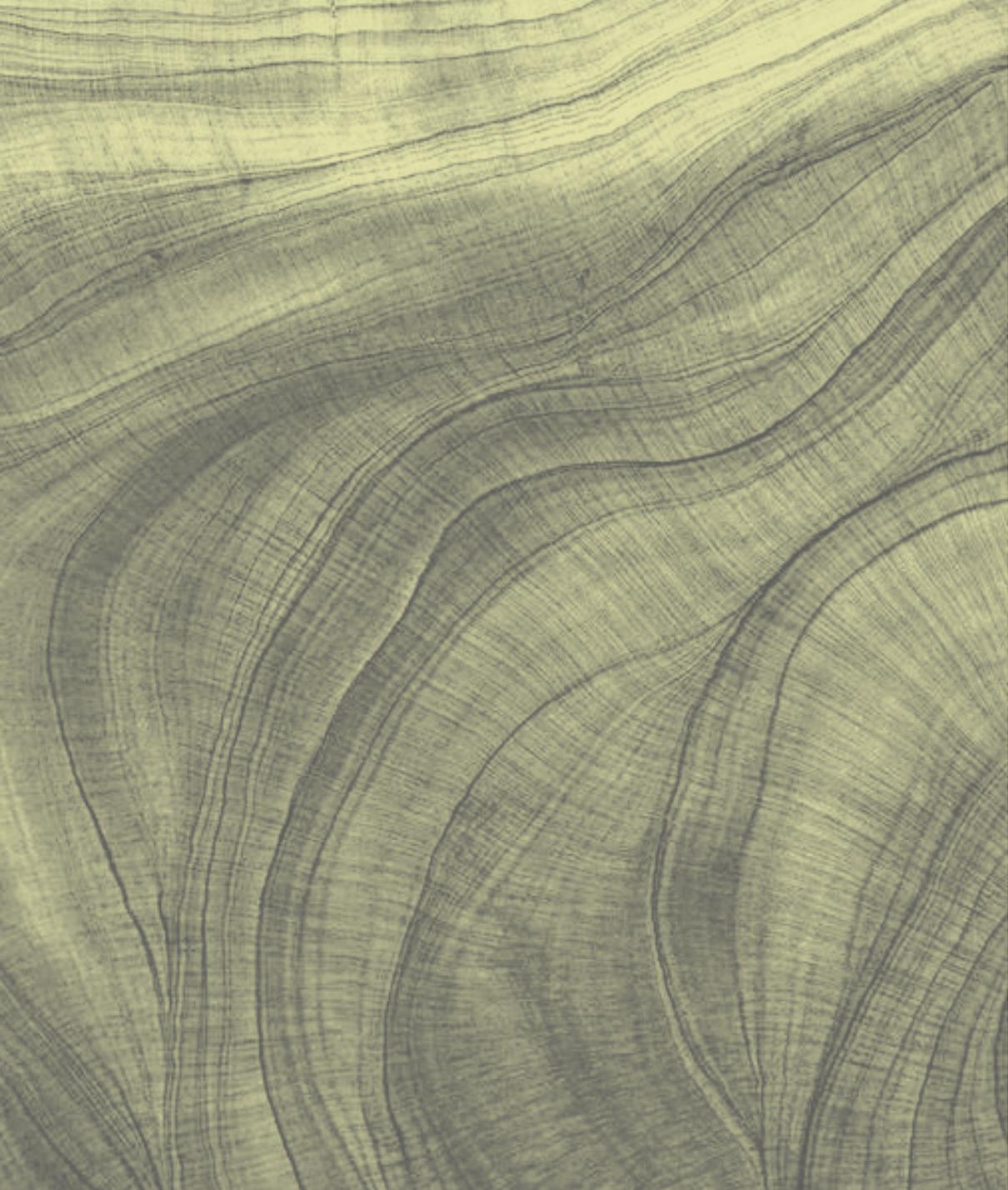
Requests for reimbursement

Social Recreational Services



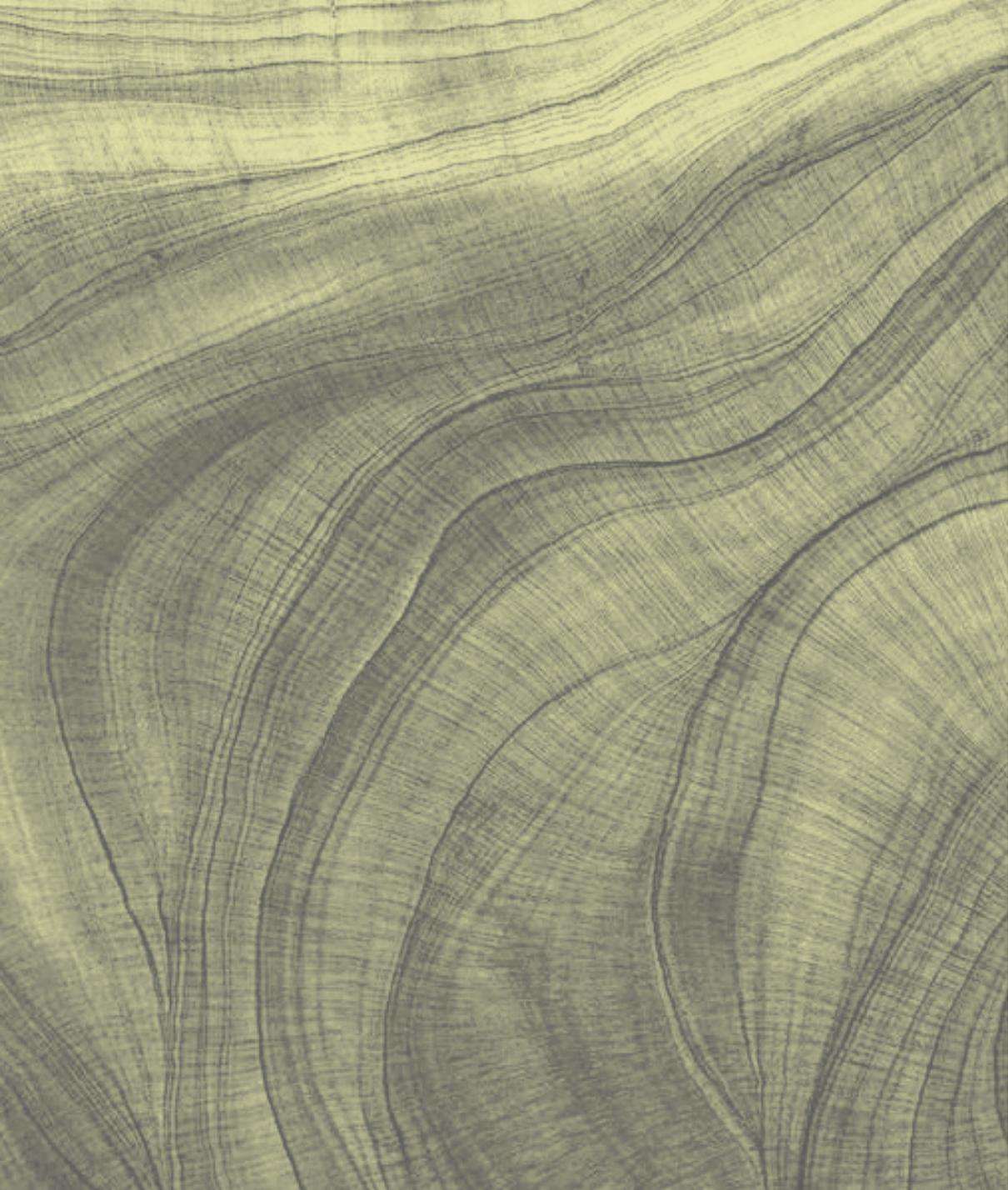
Solicitudes de reembolso

Servicios Recreativos Sociales



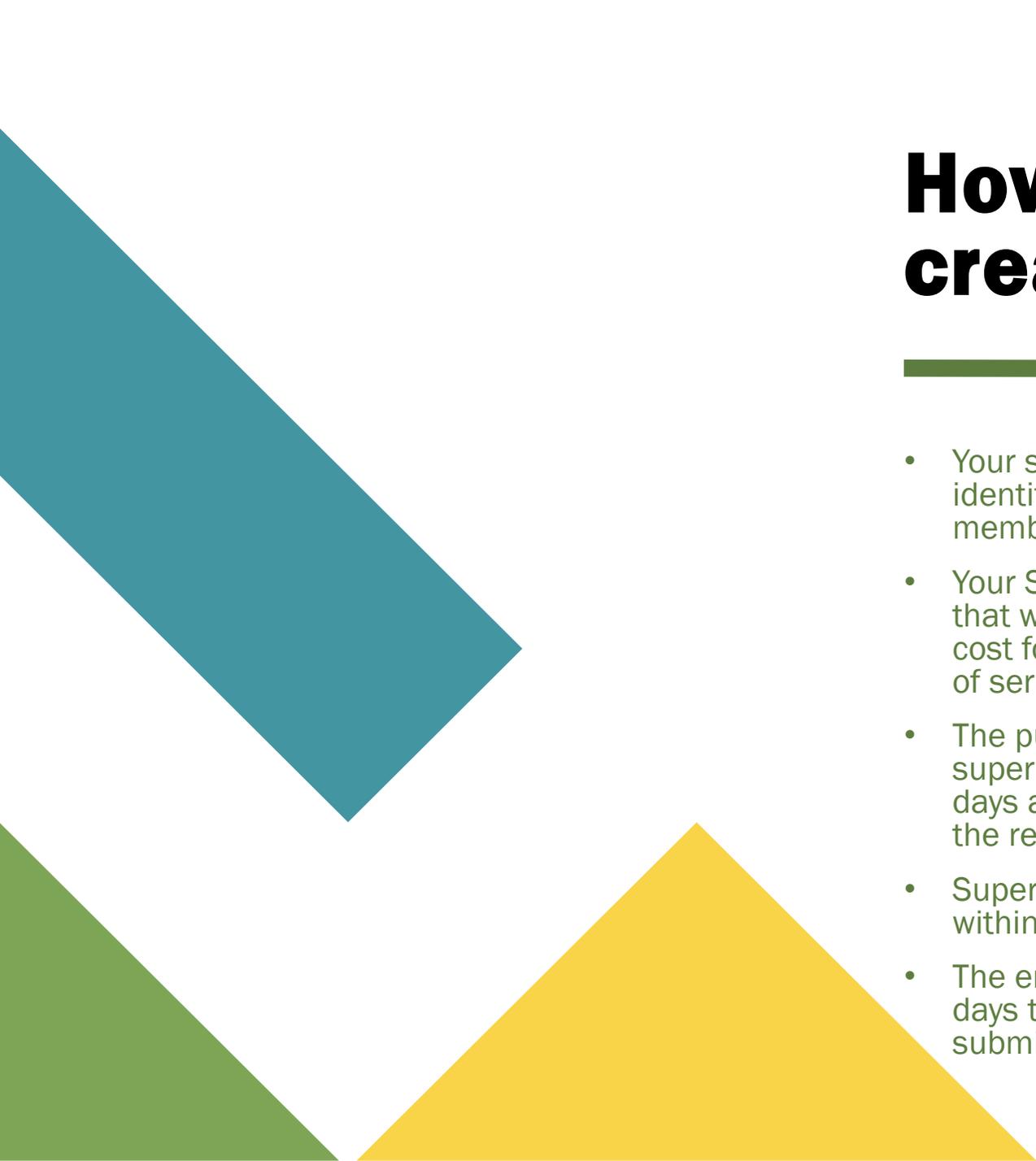
How to become vendored for reimbursement

- Talk with your Service Coordinator about a social recreational activity for your family member before you pay for any activities
- Complete the required paperwork to become vendored as soon as possible-(Refer to Parent Vendor Packet and Purchase Reimbursement Agreement)
- Services cannot be reimbursed until a vendor number has been issued by NBRC's fiscal department.
- You will be issued a vendor number which will allow you to be authorized for services and reimbursement
- This process may take up to 45 days to complete
- Note: Vendorizations for purchase reimbursement are not issued a 1099 for tax purposes



Cómo convertirse en proveedor para el reembolso

- Hable con su Coordinador de Servicios sobre una actividad social recreativa para su familiar antes de pagar por cualquier actividad.
- Complete la documentación necesaria para convertirse en proveedor lo antes posible (Consulte el Paquete para Padres Proveedores y el Acuerdo de Reembolso de Compras).
- Los servicios no se reembolsarán hasta que el departamento fiscal de NBRC haya emitido un número de proveedor.
- Se le asignará un número de proveedor que le permitirá estar autorizado para recibir servicios y reembolsos.
- Este proceso puede tardar hasta 45 días en completarse.
- Nota: Las autorizaciones de proveedor para el reembolso de compras no reciben un formulario 1099 a efectos



How purchases are created

- Your service Coordinator will set up a meeting to discuss and identify services that will meet the needs of your child/family member served by the regional center
- Your Service Coordinator will require the name of agency that will provide the social recreation activity, the dates, and cost for the activity to complete an addendum and purchase of service needed for authorization
- The purchase of service is completed and submitted to the supervisor by the Service Coordinator typically within 30 days after confirming a valid vendor number and receipt of the required information
- Supervisors review and approve the submitted requests within 14 days of the submitted purchase of service
- The entire purchase of service process may take up to 90 days to complete depending on how quickly documents are submitted

Cómo se crean las compras

- Su Coordinador de Servicios concertará una reunión para discutir e identificar los servicios que satisfarán las necesidades de su hijo/familiar atendido por el centro regional.
- Su Coordinador de Servicios le pedirá el nombre de la agencia que proporcionará la actividad social recreativa, las fechas y el costo de la actividad para completar un anexo y la compra del servicio necesario para la autorización.
- La compra del servicio se completará y se enviará al supervisor por parte del Coordinador de Servicios, normalmente en un plazo de 30 días tras confirmar un número de proveedor válido y recibir la información requerida.
- Los supervisores revisan y aprueban las solicitudes presentadas en un plazo de 14 días a partir de la presentación de la compra del servicio.
- El proceso completo de compra del servicio puede tardar hasta 90 días en completarse, dependiendo de la rapidez con la que se envíen los documentos.

Authorizations and Invoices timelines

- The Fiscal Department processes all approved purchase of service requests daily with a 3-business day timeline for authorization
- Authorizations are generated and sent to vendors every Tuesday and Thursday by either US Postal mail or email
- Each authorization generates a billing invoice that is sent to the vendor. Invoices are sent via US Postal mail or email on the 16th, 22nd, and last day of each month

Plazos para Autorizaciones y Facturas

- El Departamento Fiscal procesa diariamente todas las solicitudes de compra de servicios aprobadas con un plazo de 3 días hábiles para la autorización.
- Las autorizaciones se generan y se envían a los proveedores todos los martes y jueves, ya sea por correo postal de EE. UU. o por correo electrónico.
- Cada autorización genera una factura que se envía al proveedor. Las facturas se envían por correo postal de EE. UU. o por correo electrónico los días 16, 22 y el último día de cada mes.

What is required by NBRC's fiscal department for payment?

The fiscal department requires the following when processing payment for reimbursement:

- Completed and signed invoice for the service month in which the activity occurred
- Itemized/detailed receipt that identifies the agency, the activity, the date of service, and the cost for the activity
- Proof of payment including a canceled check, credit card statement, Venmo receipt, Zelle bank confirmation
- When paying for an authorized social recreation activity, it is important to maintain a copy of the receipt along with proof of payment for your records
- Submit the receipt and proof of payment directly to NBRC fiscal department through the Ebilling email at Ebilling@nbrc.net
- NBRC processes social recreation reimbursement invoices/requests on a weekly basis. Average timeframe for reimbursements is 14-days
- To avoid delays, proper reimbursement documents must be submitted timely
- All reimbursements are issued to your bank account through Direct Deposit or by check that is mailed to your home address
- If you do not have a computer, we ask that you drop off your documents with the receptionist at your local NBRC office

¿Qué se requiere para realizar el pago según el departamento fiscal de NBRC?

El departamento fiscal requiere lo siguiente al procesar el pago para el reembolso:

- Factura completada y firmada correspondiente al mes en que se realizó la actividad.
- Recibo detallado que identifique la agencia, la actividad, la fecha del servicio y el costo de la actividad.
- Prueba de pago, incluyendo un cheque cancelado, un extracto de la tarjeta de crédito, un recibo de Venmo o una confirmación bancaria de Zelle
- Al pagar una actividad recreativa social autorizada, es importante conservar una copia del recibo junto con el comprobante de pago para sus registros.
- Envíe el recibo y el comprobante de pago directamente al departamento fiscal de NBRC a través del correo electrónico de facturación electrónica a Ebilling@nbrc.net
- El NBRC procesa las facturas/solicitudes de reembolso de actividades recreativas sociales semanalmente. El plazo medio para los reembolsos es de 14 días.
- Para evitar retrasos, los documentos de reembolso deben enviarse a tiempo
- Todos los reembolsos se envían a su cuenta bancaria mediante depósito directo o mediante un cheque que se envía por correo a su domicilio.
- Si no dispone de una computadora, le pedimos que entregue sus documentos a la recepcionista de su oficina local del NBRC.

Who can help with questions?



- Your Service Coordinator will let you know when your vendor application is complete and a vendor number has been issued
- Your Service Coordinator can answer questions about when the purchase of service (for social recreational activity) was submitted to their supervisor.
- Your Service Coordinator can let you know where to submit your cancelled checks and other necessary documents
- You may contact the Fiscal Department by email at Ebiling@nbrc.net for assistance with the following:
 - Authorization status
 - Payment status
 - Auto deposits
 - Support with billing documents
 - The Fiscal Department also offers bilingual assistance

¿Quién puede ayudar con las preguntas?

- Su Coordinador de Servicios le informará cuando su solicitud de proveedor esté completa y se le haya asignado un número de proveedor.
- Su Coordinador de Servicios puede responder a preguntas sobre cuándo se envió la solicitud de compra del servicio (para actividades sociales y recreativas) a su supervisor.
- Su Coordinador de Servicios le indicará dónde presentar sus cheques cancelados y otros documentos necesarios.
- Puede ponerse en contacto con el Departamento Fiscal por correo electrónico [en Ebiling@nbrc.net](mailto:Ebiling@nbrc.net) para obtener ayuda con lo siguiente:
- Estado de la autorización
- Estado del pago
- Depósitos automáticos
- Asistencia con los documentos de facturación
- El Departamento Fiscal también ofrece asistencia bilingüe.

Fiscal can help you with these questions:

- 1) Where is my authorization?
- 2) What do I need to submit to get paid for my social recreation?
- 3) How do I bill for my social recreation?
- 4) When will I get paid?
- 5) Where is my check?
- 6) I need help with my billing.

Ebilling@nbrc.net

Fiscal puede ayudarle con estas preguntas:

- 1) ¿Dónde está mi autorización?
- 2) ¿Qué debo presentar para que me paguen por mis actividades recreativas sociales?
- 3) ¿Cómo facturo mi actividad recreativa social?
- 4) ¿Cuándo recibiré el pago?
- 5) ¿Dónde está mi cheque?
- 6) Necesito ayuda con mi facturación.

Ebiling@nbrc.net

Fiscal can also help you with these questions:

1. Are reimbursements taxed?
2. Can I bring receipts/proof payment to the NBRC offices? Does my vendor number expire?
4. Is being a vendor required for reimbursement?
5. What if I pay for an activity before I have a vendor number?
6. Who could help if I submitted receipts, but I have not been reimbursed?

Ebilling@nbrc.net

Fiscal también puede ayudarle con estas preguntas:

1. ¿Los reembolsos están sujetos a impuestos?
2. ¿Puedo llevar los recibos/justificantes de pago a las oficinas de la NBRC? Mi número de proveedor tiene fecha de vencimiento?
4. ¿Es necesario ser proveedor para obtener el reembolso?
5. ¿Qué pasa si pago una actividad antes de tener un número de proveedor?
6. ¿Quién podría ayudarme si he presentado los recibos, pero no me han reembolsado?

Ebiling@nbc.net

Thank you



Beth DeWitt
Director of Client Services
NBRC
(707) 256-9122

Gracias



Beth DeWitt

Directora de Servicios al Cliente

NBRC

(707) 256-9122

VENDOR APPLICATION

DS 1890 (Rev. 11/2004) (Electronic Version)

Reset Form

Save As

Applicant Name					Federal Tax ID or SSN *
					NA
Name of Governing Body or Management Organization					
NA					
Mailing Address	(Street)	(City)	(State)	(Zip)	(County)
Service Address	(Street)	(City)	(State)	(Zip)	(County)
<i>(If different than mailing address)</i>					
Applicant <i>(owner or executive director)</i>				Telephone number	
				()	
Type of Service to be Provided				Facility Capacity	
DIAPER VOUCHER/FAMILY MEMBER				NA	

Identification of the type of consultants, subcontractors and community resources to be used by the vendor as part of its service
 Parent/Guardian to explore and utilize cost effective alternatives in purchasing diapers for their child by taking advantage of sales and competitive market pricing.

CERTIFICATION

I hereby certify to the best of my knowledge and belief, this information is true, correct, and complies with Title 17, Section 54310(a).

Applicant's Signature	Date
	

INSTRUCTIONS

Please read the Department of Developmental Services California Code of Regulations, available from the regional centers, prior to completing this form. Type or print this form. Mail to the regional center serving your area.

Attach applicable information outlined in Title 17, Section 54310(a)(10)

- (A) Any license, credential, registration or permit required for the performance of the service or operation of the program, or proof of application for such document;
- (B) Any academic degree required for performance or operation of the service;
- (C) Any waiver from licensure, registration, certification, credential, or permit from the responsible controlling agency;
- (D) The proposed or existing program design as required in Section 56712 and Section 56762, if applicable, for applicants seeking vendorization as community-based day programs;
- (E) The proposed or existing staff qualifications and duty statements as required in Sections 56722 and 56724 for applicants seeking vendorization as community-based day programs;
- (F) The proposed or existing design as required in Section 56780 for applicants seeking vendorization as in-home respite services agencies;
- (G) The proposed or existing staff qualifications and duty statements as required in Section 56792 for applicants seeking vendorization as in-home respite services agencies;
- (H) The signed Home and Community-Based Services Provider Agreement with the Department of Health Services, if required.

* "Except for the Federal Tax ID or Social Security Number, all information provided by you on this form may be released to a member of the public pursuant to the Public Records Act, Section 6250 et seq. of the California Government Code."

HOME AND COMMUNITY BASED-SERVICES PROVIDER AGREEMENT

Name of Service Provider *(Please type or print)*

Address

Telephone

Vendor Number

Service Code

CERTIFICATION STATEMENT

The Provider agrees and shall certify under penalty of perjury that all claims for services provided to regional center clients have been provided to the clients by the Provider. The services were, to the best of the Provider's knowledge, provided in accordance with the client's written Individual Program Plan. The Provider shall also certify that all information submitted to the regional center is accurate and complete. The Provider understands that payment of these claims will be from federal and/or state funds, and any falsification or concealment of a material fact may be prosecuted under federal and/or state laws. The Provider agrees to keep for a minimum period of three years from the date of service a printed representation of all records which are necessary to disclose fully the extent of services furnished to the client. The Provider agrees to furnish these records and any information regarding payments claimed for providing the services, on request, within the State of California, to the California Department of Health Services; the Medi-Cal Fraud Unit; California Department of Developmental Services; California Department of Justice; Office of the State Controller; U.S. Department of Health and Human Services, or their duly authorized representatives. The Provider also agrees that services are offered and provided without discrimination based on race, religion, color, national or ethnic origin, sex, age, or physical or mental disability.

THE PROVIDER AGREES TO INCLUDE WITH EACH CLAIM SUBMITTED TO THE REGIONAL CENTER A CERTIFICATION STATEMENT TO THE ABOVE TERMS AND CONDITIONS WHICH SHALL BE PRINTED ON THE REVERSE SIDE OF EACH PROVIDER OF CARE CLAIM FORM.

I certify that the undersigned will be A PARTICIPATING provider of Medi-Cal home and community-based services upon SUBMISSION OF THIS AGREEMENT TO THE REGIONAL CENTER and satisfaction of all vendorization requirements pursuant to Title 17, California Code of Regulations, and compliance with the requirements for providers of service set out in Welfare and Institutions Code, Division 9, Part 3, and in California Code of Regulations, Title 22.

Department of Health Services

Signature of Service Provider

Date

APPLICANT/VENDOR DISCLOSURE STATEMENT

GENERAL INSTRUCTIONS

Every applicant or vendor must complete and submit a current Applicant/Vendor Disclosure Statement, DS 1891 (disclosure statement) as part of a complete application packet for vendorization or upon request of the vendoring regional center. The following instructions are designed to clarify certain questions on the form. Instructions are listed in order of question for easy reference. See 42 CFR 455.101 for additional definitions.

Overall Authority: Code of Federal Regulations (CFR), Title 42, Part 455; California Code of Regulations, Title 17, Section 54311. Welfare and Institutions Code, Section 4648.12.

Important:

- **IT IS ESSENTIAL THAT ALL APPLICABLE QUESTIONS BE ANSWERED ACCURATELY AND THAT ALL INFORMATION BE CURRENT.**
- **Parents and consumers of Vouchers, Participant-Directed Services, or Purchase Reimbursements:** Complete Part 1 on page 2 and Part 3 on page 3, then proceed to **Applicant/Vendor Signature** on page 4 to sign and date.
- Failure to disclose complete and accurate information will result in a denial of enrollment and/or may be cause for termination of vendorization.
- Read **ALL** instructions when completing the disclosure statement.
- Type or print clearly in ink.
- If applicant or vendor must make corrections, please line through, date, and initial in ink. Do not use correction fluid.
- Answer all questions as of the current date.
- If additional space is needed, attach a sheet referencing the part and question being completed.
- Return this completed statement with the complete application package to the regional center to which you are applying.

Part 1: Identifying Information

- A. Specify name of the applicant or vendor, agency, facility or organization, vendor number and service code, business address, and telephone number of applicant or vendor submitting the vendor application.
- B. Specify in what capacity the applicant or vendor is doing business. For example: The name of the corporation under which they are doing business. This name must match the license name, if applicable.
- C. List the National Provider Identifier, of the applicant or vendor, if any.
- D. List the Social Security Number, Date of Birth, and/or the Federal Employer Identification Number (EIN) of the applicant or vendor, if any. Enter Vendor's nine-digit EIN assigned by the IRS in the following format: XX-XXXXXXX.
 - An EIN is used to identify the accounts of employers and certain others who have no employees.
 - For more information about an EIN, please check <http://www.irs.gov> for "Employer Identification Numbers" or "EIN". Whenever this Disclosure Statement requests an EIN about an individual or entity, it has the same meaning.
- E. Check the entity type that best describes the structure of your organization.

Part 2: Ownership and Control Interests. Use the following definitions to identify the individuals you should enter in A, B and C of this section. See 42 CFR 455.101 for additional definitions.

- "Indirect Ownership Interest" means an ownership interest in an entity that has an ownership interest in the applicant or vendor. This term includes an ownership interest in any entity that has an indirect ownership interest in the applicant or vendor;
- "Managing Employee" means a general manager, business manager, administrator, director, or other individual who exercises operational or managerial control over, or who directly or indirectly conducts the day-to-day operation of an institution, organization, agency or business entity;
- "Ownership Interest" means the possession of equity in the capital, the stock, or the profits of the applicant or vendor.
- "Person with an Ownership or Control Interest" means a person or corporation that:
 - A) Has an ownership interest totaling 5 percent or more in an applicant or vendor;
 - B) Has an indirect ownership interest equal to 5 percent or more of an applicant or vendor;
 - C) Has a combination of direct or indirect ownership interests equal to 5 percent or more in an applicant or vendor;
 - D) Owns an interest of 5 percent or more in any mortgage, deed of trust, note, or other obligation secured by the applicant or vendor if that interest equals at least 5 percent of the value of the property or assets of the applicant or vendor;
 - E) Is an officer or director of an applicant or vendor that is organized as a corporation; or
 - F) Is a partner in an applicant or vendor that is organized as a partnership.
- "Significant Business Transaction" means any business transaction or series of transactions that, during any one fiscal year, exceed the lesser of \$25,000 and 5 percent of an applicant or vendor's total operating expenses.

Part 2. Ownership, indirect ownership, and managing employee interests (If not applicable, please indicate.)

A. List the name(s), title(s), address(es), SSNs, and DOBs of individuals for organizations having direct or indirect ownership interests, and/or managing employees in the applicant/vendor (see instructions for definitions). Also list all members of a group practice. Attach additional pages as necessary to list all officers, owners, management and ownership individuals and entities.

Name	Title	Address	SSN	DOB
N/A				

B. List those persons named in ‘A’ above or ‘Part 4. A’ below, that are related to each other as spouse, parent, child, or sibling.

Name	Relationship	Address
N/A		

C. List the name, address, vendor number and service code, SSN, NPI and/or EIN of any other applicant or vendor in which a person with an ownership or controlling interest in the applicant or vendor also has an ownership or control interest of at least 5 percent or more. For example: Are any owners of the applicant or vendor also owners of Medicare or Medicaid facilities? (Example: sole proprietor, partnership or members of Board of Directors.)

Name	Address	Vendor Number and Service Code	SSN, NPI and/or EIN
N/A			

Part 3. Excluded Individuals or Entities (If not applicable, please indicate.)

List the name, title, and address of any person, as applicant or vendor, or entity with an ownership or control interest, any agent, director, officer, or managing employee of the applicant or vendor who is an excluded individual or entity, as defined on page 2.

Name	Title	Address
N/A		

Part 4. Subcontractor (If not applicable, please indicate.)

A. List the name, title, address, SSN, NPI and/or EIN of each person or entity with an ownership or control interest in any **subcontractor** in which the applicant or vendor has direct or indirect ownership of 5 percent or more. State percentage.

Name	Title	Address	Percentage	SSN, NPI and/or EIN
N/A				

B. List the name, title, address, SSN, NPI and/or EIN of each **subcontractor or wholly owned supplier** in which the applicant or vendor has had any significant business transactions within 5 years of the application or request.

Name	Title	Address	SSN, NPI, and/or EIN
N/A			

APPLICANT/VENDOR SIGNATURE

Knowingly and willfully failing to fully and accurately disclose the information requested may result in denial of a request to become vendored, or if the service provider already is vendored, a termination of its vendorization.

By signing this disclosure statement, you hereby certify and swear under penalty of perjury that (a) you have knowledge concerning the information above, and (b) the information above is true and accurate. You agree to inform the vendoring Regional Center, in writing, within 30 days of any changes or if additional information becomes available.

Name of Applicant/Vendor or Authorized Representative **Title**

Signature **Date**

Recordkeeping and Access to Records

Subject to the provisions of Title 17, California Code of Regulations, Section 54311 and Code of Federal Regulations, Title 42, Part 455.105, an applicant or vendored provider agrees to provide access for the review of any and all ownership disclosure information and/or documentation upon written request by the vendoring regional center, the Department of Developmental Services, the State Medicaid Agency, Department of Health Care Services, any State survey team, the Secretary of the United States Department of Health and Human Services, or any duly authorized representatives of the above named entities.

Privacy Statement

All information requested on the application and the disclosure statement is mandatory with the exception of the social security number for any person other than the person or entity for whom an IRS Form 1099 must be provided by the Department of Developmental Services pursuant to 26 USC 6041. This information is required by the authority of Welfare and Institutions Code, Section 4648.12 and Title 17, California Code of Regulations, Section 54311. The consequences of not supplying the mandatory information requested are denial of vendorization as a regional center vendor or termination of vendorization. Any information may also be provided to the State Controller's Office, the California Department of Justice, the Department of Consumer Affairs, other state or local agencies as appropriate, fiscal intermediaries, managed care plans, the Federal Bureau of Investigation, the Internal Revenue Service, Medicare Fiscal Intermediaries, Centers for Medicare and Medicaid Services, Office of the Inspector General, Medicaid, or licensing programs in other states.

SOLICITUD DE VENDEDOR DE SERVICIOS

DS 1890 (Rev. 02/2006) (Version Electrónica)

Reset Form

Save As

Nombre del Solicitante					ID de Impuesto Federal o SSN *
					No Aplica
Nombre de Organismo u Organización de Administración					
No Aplica					
Dirección Postal	(Calle)	(Ciudad)	(Estado)	(Código Postal)	(País)
Dirección del Servicio <i>(si fuera diferente a la dirección postal)</i>	(Calle)	(Ciudad)	(Estado)	(Código Postal)	(País)
Solicitante (<i>propietario o director ejecutivo</i>)				Número de Teléfono	
Tipo de Servicio a prestar				Capacidad del Servicio	
Vale de Pañales/ Miembro de Familia				No Aplica	

Identificación del tipo de consultores, subcontratistas y recursos comunitarios que el vendedor usará como parte de sus servicios

Padre/Guardián que busque y utilicé métodos alternativos de costos mas efectivos cuando compren pañales para su hijo/a como aprovechar ventas y precios competitivos de las tiendas.

CERTIFICACIÓN

Certifico por la presente, a mi mejor saber y entender, que esta información es veraz, correcta y cumple con el Título 17, Sección 54310(a).

Firma del Solicitante	Fecha
	

INSTRUCCIONES

Por favor lea el Código de Reglamentos del Departamento de Servicios del Desarrollo de California que se encuentra disponible en los centros regionales, antes de completar este formulario. Escriba a máquina o imprima este formulario. Envíelo por correo al centro regional de su área.

Adjunte la información aplicable que se resume en el Título 17, Sección 54310(a)(10)

- (A) Cualquier licencia, credencial, registro o permiso que se requiera para la presentación del servicio u operación del programa, o comprobación de la solicitud para dicha aplicación;
- (B) Cualquier título académico que se requiera para la presentación u operación del servicio;
- (C) Cualquier renuncia de licenciamiento, registro, certificación, credencial o permiso de organismo controlante responsable;
- (D) El diseño del programa propuesto o existente según se requiere en la Sección 56712 y Sección 56762, si correspondiera, para solicitantes que procuren obtener la venta del servicio como programas de día con base en la comunidad;
- (E) Las calificaciones propuestas o existentes del personal y las declaraciones de deberes según se requiere en las Secciones 56722y 56724 para solicitantes que procuren obtener la venta del servicio como programas de día con base en la comunidad;
- (F) El diseño propuesto o existente según se requiere en la Sección 56789 para solicitantes que procuren obtener la venta del servicio como agencias de servicios de descanso en el hogar;
- (G) Las calificaciones propuestas o existentes del personal y las declaraciones de deberes según se requiere en la Sección 56792 para solicitantes que procuren obtener la venta del servicio como agencias de servicios de descanso en el hogar;
- (H) El Convenio firmado de Proveedor del Programa Medi-Cal, Certificación de Reclamo, con el Departamento de Servicios de Salud, si se lo requiere.

* "Excepto para el Número de Identificación de Impuesto Federal o de Seguro Social, toda la información que usted proporcione en este formulario podrá suministrarse al público conforme a la Ley de Registros Públicos, Sección 6250 et seq. ael Código del Gobierno de California."

HOME AND COMMUNITY BASED-SERVICES PROVIDER AGREEMENT

Name of Service Provider *(Please type or print)*

Address

Telephone

Vendor Number

Service Code

CERTIFICATION STATEMENT

The Provider agrees and shall certify under penalty of perjury that all claims for services provided to regional center clients have been provided to the clients by the Provider. The services were, to the best of the Provider's knowledge, provided in accordance with the client's written Individual Program Plan. The Provider shall also certify that all information submitted to the regional center is accurate and complete. The Provider understands that payment of these claims will be from federal and/or state funds, and any falsification or concealment of a material fact may be prosecuted under federal and/or state laws. The Provider agrees to keep for a minimum period of three years from the date of service a printed representation of all records which are necessary to disclose fully the extent of services furnished to the client. The Provider agrees to furnish these records and any information regarding payments claimed for providing the services, on request, within the State of California, to the California Department of Health Services; the Medi-Cal Fraud Unit; California Department of Developmental Services; California Department of Justice; Office of the State Controller; U.S. Department of Health and Human Services, or their duly authorized representatives. The Provider also agrees that services are offered and provided without discrimination based on race, religion, color, national or ethnic origin, sex, age, or physical or mental disability.

THE PROVIDER AGREES TO INCLUDE WITH EACH CLAIM SUBMITTED TO THE REGIONAL CENTER A CERTIFICATION STATEMENT TO THE ABOVE TERMS AND CONDITIONS WHICH SHALL BE PRINTED ON THE REVERSE SIDE OF EACH PROVIDER OF CARE CLAIM FORM.

I certify that the undersigned will be A PARTICIPATING provider of Medi-Cal home and community-based services upon SUBMISSION OF THIS AGREEMENT TO THE REGIONAL CENTER and satisfaction of all vendorization requirements pursuant to Title 17, California Code of Regulations, and compliance with the requirements for providers of service set out in Welfare and Institutions Code, Division 9, Part 3, and in California Code of Regulations, Title 22.

Department of Health Services

Signature of Service Provider

Date

DECLARACIÓN DE INFORMACIÓN DEL SOLICITANTE/VENDEDOR

INSTRUCCIONES GENERALES

Todos los solicitantes y vendedores deben completar y entregar una Declaración de Información del /Solicitante/Vendedor actualizada, DS 1891 (declaración de información) como parte de un paquete de solicitudes completo para el proceso de incorporación como vendedor de servicios o a pedido del Centro Regional que lleva a cabo este proceso. Las siguientes instrucciones tienen como objeto aclarar ciertas preguntas incluidas en el formulario. Las instrucciones están enumeradas en orden de las preguntas para una mejor referencia. Ver el Título 42 del Código Reglamentario Federal (CFR) 455.101 para acceder a otras definiciones.

Autoridad general: Código Reglamentario Federal (CFR), Título 42, Parte 455; Código Reglamentario de California, Título 17, Sección 54311, Código de Bienestar e Instituciones, Sección 4648.12.

Importante:

Padres y consumidores de Reembolsos para Servicios Dirigidos por Participante, o Reembolsos de Compra: Favor de Completar la Parte 1 en la página 3 y la Parte 3 en la página 4, y continuar a firmar y fechar según la instrucción en la página 4.

RESULTA FUNDAMENTAL QUE TODAS LAS PREGUNTAS APLICABLES SE RESPONDAN EN FORMA PRECISA Y QUE TODA LA INFORMACIÓN ESTÉ ACTUALIZADA.

- La entrega de información incompleta e imprecisa dará lugar a la denegación de la inscripción o podría constituir causal de rescisión de la inscripción como vendedor de servicios.
- Lea **TODAS** las instrucciones al completar la declaración de información.
- Escriba a máquina o a mano, claramente con tinta.
- En caso de que el solicitante o el vendedor deban realizar correcciones, tache, feche y firme con tinta. No use líquidos correctores.
- Responda todas las preguntas con información actualizada.
- En caso de que se necesite más espacio, adjunte una hoja haciendo referencia a la parte y a la pregunta que esté completando.
- Entregue esta declaración completa con el paquete de solicitudes completo al Centro Regional en el que presente su solicitud.

Parte 1: Información identificadora

- A. Indique el nombre del solicitante o vendedor, agencia, instalación u organización, número de vendedor y código de servicios, domicilio comercial y número telefónico del solicitante o vendedor que presenta la solicitud de vendedor.
- B. Indique el nombre del negocio, nombre escrito en la licencia, o el nombre inscripto con la Secretaria de Estado de California, si se aplica.
- C. Indique el número de Medi-Cal (NPI), si se aplica, del solicitante o del vendedor.
- D. Indique el Número de Seguro Social (SSN) o Número de Identificación Federal del Empleador (EIN) del solicitante o del vendedor, de haberlo. Ingrese el EIN de nueve dígitos que el Servicio de Impuestos Internos (IRS) le ha asignado al vendedor en el siguiente formato: XX-XXXXXXX.
- El EIN se utiliza para identificar las cuentas de los empleadores y ciertas otras que no cuentan con empleados.
 - Para mayor información sobre el EIN, visite <http://www.irs.gov> para consultar los "Números de Identificación del Empleador" o "EIN". Toda vez que esta Declaración de Información solicite un EIN de una persona física o jurídica, tendrá el mismo significado.
- E. Verifique el tipo de persona jurídica que mejor describa la estructura de su organización.

Parte 2: Participación Controlante y en la Propiedad. Use las siguientes definiciones para identificar a las personas físicas que debe consignar en las partes A, B y C de esta sección. Ver el T 42 del Código Reglamentario Federal (CFR) para acceder a otras definiciones.

- "Participación Indirecta en la Propiedad" hace referencia a la participación en la propiedad en una persona jurídica que es titular de participación en la propiedad en el solicitante o vendedor. Este término incluye la participación en la propiedad en una persona jurídica que tiene participación indirecta en la propiedad en el solicitante o vendedor;
- "Empleado Gerente" hace referencia un gerente general, gerente comercial, administrador, director u otra persona física que ejerza control operativo o gerencial sobre una institución, organización, agencia o persona jurídica comercial o que lleve adelante directa o indirectamente la actividad diaria de estas;
- "Participación en la Propiedad" hace referencia a la tenencia de capital accionario, las acciones o las ganancias del solicitante o del vendedor.
- "Persona con Participación Controlante o en la Propiedad" hace referencia a una persona o sociedad que:
 - A) Tiene una participación en la propiedad que alcanza un total del 5 por ciento o más en un solicitante o vendedor;
 - B) Tiene una participación indirecta en la propiedad equivalente al 5 por ciento o más en un solicitante o vendedor;

- C) Tiene una combinación de participación en la propiedad directa e indirecta equivalente al 5 por ciento o más en un solicitante o proveedor;
 - D) Es propietario de una participación controlante de al menos 5 por ciento o más en cualquier hipoteca, escritura de fideicomiso, pagaré u otra obligación garantizada por el solicitante o vendedor si esa participación equivale al menos al 5 por ciento del valor de la propiedad o de los bienes del solicitante;
 - E) Es un directivo o director de un solicitante o vendedor organizado como sociedad por acciones; o
 - F) Es socio de un solicitante o vendedor constituido como sociedad de personas.
- “Operación Comercial Significativa” hace referencia a cualquier operación comercial o serie de operaciones que, durante cualquier ejercicio económico, superen el los que resulten menores de \$25.000 y el 5 por ciento de los gastos operativos totales del o solicitante o vendedor.
 - “Subcontratista” hace referencia a una persona física, agencia u organización con que un solicitante o vendedor haya contratado o le haya delegado alguna de las funciones gerenciales o responsabilidades de prestación de servicios.
 - “Totalmente Adquirido” hace referencia a una participación total en la propiedad está en manos de un solicitante o vendedor o de una o más personas físicas u otra persona jurídica o con participación controlante o en la propiedad en un solicitante o vendedor.

Parte 3: Personas físicas o personas jurídicas excluidas (Ver página 3, parte 3. Debe completarse en caso de resultar aplicable).

“Personas Físicas o Personas Jurídicas Excluidas” hace referencia a aquellas personas físicas o jurídicas que han sido incluidas en la Lista de Personas Físicas o Personas Jurídicas de la Oficina del Inspector General (OIG) del Departamento de Salud y Servicios Humanos o en la Lista de personas físicas o jurídicas Personas Físicas o Personas Jurídicas como “No Aptas” y Suspendidas de Medi-Cal del Departamento de Servicios de Atención Médica (DHCS) que han sido acusados de un delito penal relacionado con la participación en un programa de Medicare, Medicaid o en el programa de servicios del Título XX o aquellas Personas Físicas o Personas Jurídicas que cumplan el criterio incluido en la Sección 54311(a)(6).

**Título 17 del Código Reglamentario de California, Sección 54311(a)(6)
(Criterio para las personas físicas y jurídicas excluidas)**

El nombre, título y dirección de las personas que, como solicitantes o vendedores o que sean titulares de una participación controlante o en la propiedad en el solicitante o vendedor, o que sean agentes, directores, directivos o empleados gerenciales del solicitante o vendedor, y que en los últimos diez años:

- (A) hayan sido condenadas por un delito penal grave o menor que involucre fraude o abuso en un programa gubernamental o que esté relacionado con el maltrato o abuso de una persona mayor o de un adulto o niño bajo su cuidado o en relación con la interferencia u obstrucción en una investigación de fraude o abuso relacionada con la atención médica o
- (B) haya sido declarada responsable en un procedimiento civil por fraude o abuso relacionado con un programa gubernamental o
- (C) haya firmado un acuerdo de conciliación con motivo de una condena por fraude o abuso en un programa gubernamental.

Mantenimiento de Registros y Acceso a los Documentos

Conforme a las disposiciones del Título 17 del Código Reglamentario de California, Sección 54311 y del Código Reglamentario Federal, Título 42, Parte 455.105, los solicitantes o es vendedores aceptan brindar acceso para la revisión de toda la información sobre propiedad o documentación mediante solicitud escrita del Centro Regional que realiza el proceso de incorporación de vendedores de servicios, Departamento de Servicios de Desarrollo, la Agencia Estatal de Medicaid, el Departamento de Servicios de Atención Médica, todo equipo de encuestadores estatales, la Secretaría del Departamento de Salud y Servicios Humanos de los Estados Unidos o a cualquier representante debidamente autorizado de las personas jurídicas mencionadas anteriormente.

FAVOR DE COMPLETAR

Guardar

Restablecer

Parte 1. Información del solicitante/ vendedor

A. **Nombre del solicitante** o vendedor, persona jurídica, agencia, instalación u organización, como se ha informado al IRS:

Número del vendedor y código de servicio:

Dirección del negocio (o residencia si se aplica):

Número telefónico (con el código de área):

B. Nombre del negocio o nombre escrito en licencia pertinente. O Nombre inscrito en la Secretaría de Estado de California, si se aplica:

C. Número de Medi-Cal o NPI, si se aplica:

D. **Número de Seguro Social, fecha de nacimiento**, o Número de Identificación Federal del Empleador (EIN), si se aplica:

E. Verifique el tipo de persona jurídica que mejor describa la estructura de la persona física solicitante, emprendedor autónomo, sociedad comercial, agencia, instalación u organización: Marque el casillero que se aplica:

Padre o consumidor de Reembolsos para Servicios Dirigidos por Participante, o Reembolsos de Compra: Complete la Parte 1 arriba, y la Parte 3 en la página 4 (si se aplica), y continúe para firmar y fechar en la página 4.

- Emprendedor o propietario autónomo (no inscripto)**
- Sociedad colectiva** **Sociedad en comandita simple** **Sociedad en comandita por acciones**
- Sociedad de responsabilidad limitada:** Estado de constitución: _____
- Gubernamental**
- Sociedad por acciones:** Número de sociedad _____ Estado de constitución : _____
- Organización sin fines de lucro – Marque uno:**
 - Asociación no inscrita** **Sociedad por acciones:** **Religiosa/Benéfica** **Otra (especificar):** _____

Parte 2. Propiedad, propiedad indirecta y participaciones del empleado gerente (Se puede indicar "no se aplica.")

A. Consigne el/los nombre/s y domicilio/s de las personas físicas para organizaciones con participación directa o indirecta en la propiedad o empleados gerentes en el solicitante/ vendedor (vea instrucciones para las definiciones). También consigne los nombres de todos los miembros de una práctica grupal. Adjunte páginas adicionales, si es necesario, para consignar a todos los directivos, propietarios, personas físicas y jurídicas propietarias y gerentes.

Nombre:	Título	Dirección	SSN	Fecha de Nacimiento
N/A				

B. Consigne los nombres de las personas mencionadas en 'A' arriba que estén relacionados entre sí, como cónyuges, padres, hijos o hermanos. (Se puede indicar "no se aplica.")

Nombre:	Relación	Dirección
N/A		

C. Consigne el nombre, domicilio, el número de vendedor o código de servicio y número de Medi-Cal de cualquier otro solicitante o vendedor en el que una persona con una participación en la propiedad en el solicitante o vendedor también es titular de una participación controlante o en la propiedad de al menos el 5 por ciento. Por ejemplo: ¿Los propietarios del solicitante o vendedor también son propietarios de otras instalaciones de Medicare o Medicaid? (Por ejemplo: emprendedor independiente, socio o director). *(Se puede indicar "no se aplica.")*

Nombre:	Dirección	Número del vendedor y Código de servicio	Número de Medi-Cal, NPI o EIN
N/A			

Parte 3. Personas físicas o personas jurídicas excluidas (Se puede indicar "no se aplica.")

Consigne el nombre, el cargo y el domicilio de la persona física o jurídica con una participación controlante o en la propiedad, agente, director, directivo o empleado gerente del solicitante o vendedor que sea una persona física o jurídica excluida, como se define en la página 2.

Nombre:	Título	Dirección
N/A		

Parte 4. Subcontratista (Se puede indicar "no se aplica.")

A. Consigne el nombre y el domicilio de cada persona física y jurídica con participación controlante y en la propiedad en cualquier subcontratista en la que el solicitante o el vendedor sea propietario directo o indirecto de al menos 5 por ciento o más.

Nombre:	Título	Dirección	Porcentaje	SSN, NPI, o EIN
N/A				

B. Consigne el nombre y el domicilio de cada subcontratista o totalmente adquirido en el que el solicitante o el vendedor haya realizado operaciones comerciales significativas dentro de los 5 años de la solicitud o de ser pedida.

Nombre:	Título	Dirección	Porcentaje	SSN, NPI, o EIN
N/A				

FIRMA DEL SOLICITANTE/ VENDEDOR

La entrega incompleta o imprecisa en forma intencional de la información solicitada podría dar lugar a la desaprobación de una solicitud de inscripción como vendedor de servicios o, en caso de que el vendedor ya hubiera superado el proceso, la cancelación de su estado de ser vendedor.

Por medio de la firma de la presente declaración de entrega de información, usted certifica y jura bajo pena por falso testimonio que (a) conoce la información precedente y (b) la información precedente es verdadera y precisa. Usted se compromete a informar al Centro Regional que lleva a cabo el proceso de inscripción como vendedor de los servicios en forma escrita y dentro de los 30 días posteriores a todo cambio o información adicional.

Nombre del solicitante/vendedor o de representante autorizado **Título**

Firma **Fecha**

Declaración de privacidad:

Toda la información requerida en la solicitud y en la declaración de entrega de información será obligatoria, con la excepción del número de seguro social para toda persona distinta de la persona física o jurídica para la cual el Departamento de Servicios de Desarrollo debe emitir un Formulario 1099 del IRS conforme al Título 26 del Código de los EE. UU., 6041. Esta información se exige en virtud del Código de Bienestar e Instituciones, Artículo 4648.12 y Título 17 del Código Reglamentario de California, Sección 54311. Las consecuencias de no proporcionar la información obligatoria solicitada consisten en la denegación de su inscripción como vendedor de servicios o en la cancelación de esa inscripción. La información también puede entregarse a la Oficina de Contralor Estatal, el Departamento de Justicia de California, el Departamento de Asuntos del Consumidor, otras agencias locales o estatales pertinentes, intermediarios fiscales, planes de cuidado manejado, la Agencia Federal de Investigación, el Servicio de Impuestos Internos, los intermediarios fiscales de Medicare, los Centros de Servicios de Medicare y Medicaid, la Oficina del Inspector General, Medicaid o programas de licencia en otros estados.

**PURCHASE REIMBURSEMENT AGREEMENT
024/Purchase Reimbursement**



FAMILY MEMBER _____ **VENDOR #** _____
CLIENT NAME _____ **CLIENT UCI#** _____
SERVICE CODE _____

I certify that I will purchase _____ services for my family member at a rate that is cost effective for the Regional Center.

I understand that I will be reimbursed for the authorized amount during the specified dates on the **Authorization to Provide Services** and that I will be reimbursed only if the following regulations and conditions are met:

1. NBRC will not issue reimbursement for any services before the beginning date or after the ending date shown on my **Authorization to Provide Services**.
 - Dates of expenses/receipts must be within the authorization approval dates listed on your purchase and IPP.
 - If expense was incurred before or after dates on authorization – contact service coordinator for assistance.
2. NBRC will not provide reimbursement for more than authorized on my **Authorization to Provide Services**.
3. The amount reimbursed may not exceed the actual amount I paid for the service. I will not be reimbursed for more than is stated on my **Authorization to Provide Services**.
4. An original itemized receipt and proof of payment, such as Venmo, Zelle, or cashed check, is required. Both the receipt and the proof of purchase must be submitted along with the Provider of Care Claim Billing form, or eBilling invoice submission, before reimbursement can be issued.

I have read and understand this agreement.

Signature _____ **Date** _____

Address _____

City _____ **State** _____ **Zip** _____ **Phone #** _____

Operations <input type="checkbox"/>
Purchase of Service <input checked="" type="checkbox"/>

North Bay Regional Center has renewed the below contracts. All purchases for these contracts are driven by the Individual Program Plan for each individual living in the homes.

Purpose of Contract	Number of individuals served	Contractor Name and Vendor# (if applicable)	Term of Contract	Contract Amounts	Notes
Residential Level 7	4	C.A.S.A. LUNA, INC HN0434	01/01/2026-12/31/28	\$20,576.41/per month per individual \$987,667.68/annual contract	
Residential Level 7	4	Amani Homes, LLC HN0510	01/01/2026-12/31/28	\$15,472.93/per month per individual \$742,700.64/annual contract	
Residential Level 7	4	BRIGHT HORIZONS CARE HN0739	01/01/2026-12/31/28	\$21,478.79/per month per individual \$1,030,981.92/annual contract	
Residential Level 7	4	CORNERSTONE HN0572	01/01/2026-12/31/28	\$16,975.76/per month per individual \$814,836.48/annual contract	
Residential Level 7	4	EDRINE HOME HN0438	01/01/2026-12/31/28	\$24,433.31/per month per individual \$1,172,798.88/annual contract	
Residential Level 7	4	Gregoria Manor LLC, HN0651	01/01/2026-12/31/28	\$16,585.12/per month per individual \$796,085.76/annual contract	
Residential Level 7	4	Haven Enterprise Corporation HN0701	01/01/2026-12/31/28	\$17,565.64/per month per individual \$843,125.76/annual contract	
Residential Level 7	4	HR Agape Spanish Bay HN0662	01/01/2026-12/31/28	\$15,661.56/per month per individual \$751,754.88/annual contract	
Residential Level 7	4	Providence HN0512	01/01/2026-12/31/28	\$15,349.27/per month per individual \$736,764.96/annual contract	
Residential Level 7	4	Walk of Life HN0642	01/01/2026-12/31/28	\$15,472.93/per month per individual \$742,700.64/annual contract	

Summary:

These **Residential Level 7** are licensed by California Social Services, Department of Community Care Licensing and vendored by North Bay Regional Center to serve individuals with medical and/or behavioral needs. Many were developed to serve individuals moving from Sonoma Developmental Center or for individuals that need support higher than a level 6 home. The homes provide between 2 -3 staff to 4 client ratio during awake hours with a 2 staff to 4 client ratio overnight. Professional Consultation services may include: A Registered Nurse, Board Certified Behavior Analyst, Occupational Therapist, Registered Dietician, Recreational Therapist and/or Physical Therapist. These homes are monitored/visited on a quarterly basis by each client's NBRC Service Coordinator, on an annual basis by Quality Assurance Staff and annually unannounced by Community Care Licensing.

Purpose of Contract	Consumers Served	Contractor Name and Vendor# (if applicable)	Term of Contract	Contract Amounts	Notes
Enhanced Behavioral Supports Home	4	A PLACE OF GRACE- HN0534	01/01/2026-12/31/28	\$73,110.48/monthly amount \$877,325.52/annual contract	
Enhanced Behavioral Supports Home	4	BATs Erik's Home HN0435	01/01/2026-12/31/28	\$67,027.60/monthly amount \$804,331.20/annual contract	
Enhanced Behavioral Supports Home	4	BATs -Lucia's Home HN0533	01/01/2026-12/31/28	\$68,831.14/monthly amount \$825,973.68/annual contract	
Enhanced Behavioral Supports Home	4	Elwyn, California- HN0468	01/01/2026-12/31/28	\$92,159/monthly amount \$1,105,908/annual contract	
Enhanced Behavioral Supports Home	4	Elwyn, California- HN0467	01/01/2026-12/31/28	\$88,618/monthly amount \$1,063,416/annual contract	
Enhanced Behavioral Supports Home	4	Kwanza HN0593	01/01/2026-12/31/28	\$90,002.44/monthly amount \$1,080,029.28/annual contract	

Summary:

This Enhanced Behavioral Support Home (EBSH) was developed to individuals with challenging behavioral needs that are moving from Porterville Developmental Center, other locked settings and individuals being deflected from locked settings. The individuals that live in these homes, cannot be served in any other setting. This is a four (4) bedroom home, with each individual having their own room. A full-time administrator is responsible for the operation of the home. All staff must be Licensed Psychiatric Technicians or Registered Behavior Technicians. There is a base staffing ratio of one lead staff on every shift. Additional staffing levels are determined based on each individual's needs, through their Individual Program Plan (IPP). An additional purchase of service is put in place to fund this staffing,

separate from this contract amount. The facility budget is approved by NBRC and certified by The Department of Developmental Services. This contract is for the facility costs for the home. When the first individual moves into the home, the facility cost is paid to the EBSH vendor. These homes are monitored on a monthly basis by NBRC's Board Certified Behavior Analyst (BCBA), quarterly by each client's NBRC Service Coordinator, quarterly by NBRC's Quality Assurance Staff, semiannually by The Department of Developmental Services' BCBA, and annually unannounced by Community Care Licensing.

The below items are covered in the facility cost per month:

-Rent for the property	-Insurance	-Board Certified Behavior Analyst supervision	-Internet/Cable
-744 hours a month of Lead Staff (salary, benefits & taxes)	-Phone	-Property Taxes	-Utilities
-40 hours a week of the home Administrator	-Repairs/Maintenance		-Transportation

**Subject to change based on DDS approval*

Purpose of Contract	Consumers Served	Contractor Name and Vendor#	Term of Contract	Contract Amounts	Notes
Community Crisis Home	4	Telecare HN0511	01/01/26-06/30/26	\$100,448.49/monthly amount \$1,205,381.88/annual contract	
Community Crisis Home	4	Telecare HN0531	01/01/26-06/30/26	\$95,164.67/monthly amount \$1,141,976.04/annual contract	

Summary:

A Community Crisis Home (CCH) provides 24-hour nonmedical care to people with developmental disabilities receiving regional center services and in need of crisis intervention services, who would otherwise be at risk of admission to a more restrictive setting. Each CCH serves four individuals. All staff in the home must be Registered Behavior Technicians even if they are Licensed Psychiatric Technicians. The CCH contract is governed by California Code of Regulations Title 17 sections §59014 through §59016. The facility budget is approved by NBRC and certified by The Department of Developmental Services. This contract is for the facility costs for the home. When the first individual moves into the home, the facility cost is paid to the CCH vendor. These homes are monitored/visited monthly by each client's NBRC Service Coordinator, monthly by NBRC's Board Certified Behavior Analyst, quarterly by NBRC's Quality Assurance Staff, semiannually by The Department of Developmental Services and annually unannounced by Community Care Licensing. Each client also has their own individual budget that covers additional staffing and consultation costs, based on their needs.

The below items are covered in this contract:

- | | | |
|---|------------------|-------------|
| • Rent for the property/repairs/maintenance | • Internet/Cable | • Insurance |
| • 168 hours a week of Lead Staff | • Utilities | • Phone |
| • 40 hours a week of the home Administrator | • Transportation | • Repairs |
| • Board Certified Behavior Analyst | • Property Taxes | |

Purpose of Contract	Consumers Served	Contractor Name and Vendor#	Term of Contract	Contract Amounts	Notes
Adult Residential Facility for Persons with Special Healthcare Needs	4	HE&RT, LLC. DBA Heart Home HN0719	01/01/26-12/31/28	\$36,977.17/ per month per individual \$1,774,904.10/annual contract	
Adult Residential Facility for Persons with Special Healthcare Needs	4	NEA Home dba Tamara Way HN0476	01/01/26-12/31/28	\$33,505.21/ per month per individual \$1,608,250/annual contract	
<p>Summary: An Adult Residential Facility for Persons with Special Healthcare Needs (ARFPSHN) is a four- or five-bedroom home licensed by Department of Social Services-Community Care Licensing, certified by The Department of Developmental Services and vendored by a regional center. An ARFPSHN provides care to individuals that require 24 hour licensed nursing care in a home setting. Staffing requirements are two staff to five individuals, with 24 hours a day of licensed nursing, of which 40 hours a week must be a Registered Nurse. Individuals also receive 60-day visits by their physician. Professional Consultation services may include: A Registered Nurse, Board Certified Behavior Analyst, Occupational Therapist, Registered Dietician, Recreational Therapist and/or Physical Therapist. These homes serve some of NBRC's most medically fragile individuals. ARFPHNs are monitored/visited monthly by NBRC's Senior Nurse Consultants, on a quarterly basis by each client's NBRC Service Coordinator, on an annual basis by NBRC's Quality Assurance Staff, semiannually by The Department of Developmental Services and annually unannounced by Community Care Licensing. This home was developed for individuals moving from Sonoma Developmental Center</p>					
Crisis Intervention Facility - Children	3	Inclusion Specialized Programs, LLC HN0532	01/01/26-12/31/28	\$862/per day per individual \$943,890/annual contract	
<p>Summary A Crisis Intervention Facility for children is a short-term home to allow children to stabilize their behaviors and return home or move into a permanent living arrangement. This home provides 168 hours a week of Registered Behavior Technician staffing and 230 hours of Direct Support Professional staffing. Individuals will have 24 hours a month of consultation services. Consultation types are based on individual need and can be, but are not limited to: Board Certified Behaviorist, Registered Nurse, Occupational Therapist, Recreation Therapist, or Psychiatrist.</p>					



2026 Grassroots Day Advocacy: *Key Points*

AB 2324 (Gonzalez, Jeff) Vocational Education: Youth Caregivers Career Pathway Program

Family caregiving is vital for supporting people with disabilities and seniors. Many of these caregivers are young people. Youth caregivers provide services within the scope of practice of direct support professionals. The state should create a career pathway program in schools that would support the direct support profession while recognizing the contributions of youth caregiver family members and providing them support they need for academic success.

This bill will require the Governor's Council for Career Education (GCCE) to propose workplace learning strategies to the California Workforce Pathway Joint Advisory Committee (CWPJAC). The GCCE will look into the challenges and needs of youth caregivers in California and share these with the CWPJAC. The CWPJAC is to appoint, on or before July 1, 2028, an advisory group of subject matter experts to create and establish the Youth Caregivers Career Pathway program. The goal is to develop a Youth Caregivers Career Pathway program for direct support professionals. This program will include a curriculum focused on in-home caregiving for youth caregivers, allowing students in grades 9 to 12 to earn school credit while preparing for careers in direct support.

AB 1670 (Arambula) Oral Health Services: Behavior Management

In 2018, the Medi-Cal Dental program started a new service called Behavior Management. This service helps patients with physical, behavioral, developmental, or emotional issues that make it hard for them to participate in a dental visit. However, dentists and Registered Dental Hygienists in Alternative Practice (RDHAPs) can only bill for this service if the patient also receives another necessary dental procedure during the same visit. This means that providers might give expensive services without getting paid.

The proposed bill would change this rule. It would allow oral health professionals to bill for the Behavior Management service as a stand-alone service up to 3 times in a 12-month period. By the fourth use of Behavior Management code (D9920), the procedure must accompany a billable dental procedure.

Concurrent Resolution on the 60th Anniversary of the Two Pilot Regional Centers

(Author pending) - In 1966 Assembly Bill 691, authored by Assemblymember Jerome Waldie, was enacted, which established the two pilot regional centers, GGRC and FDLRC. 2026 marks the 60th anniversary of these two pilot regional centers.

Stabilizing Regional Center Funding

Regional centers are responsible for assessing individual eligibility for services, carrying out service coordination, developing and overseeing needed community resources, and ensuring systems meet federal funding requirements. Their current funding formula is outdated and inadequate, leaving regional centers without the resources to effectively fulfill their responsibilities in all these areas.

ARCA, The Lanterman Coalition, and CalTASH are jointly advocating to better match regional center funding with actual staffing costs. Make urgent investments into regional center staff funding so that individuals served receive the critical service coordination and systems navigation support they need, and regional centers can also carry out their other critical functions.

In addition, it is important to protect historic investments in sustainable service rates and to update these rates in response to the increased costs identified under AB 2423. This will help ensure an adequate workforce so that individuals with intellectual and developmental disabilities (I/DD) can access the services and supports they need.



Board Committee Information

For board committee agendas and location information, please visit

<https://nbrc.net/about-us/board-of-directors/board-meetings/board-committee-meetings/>

Board Committees & Next Meeting	Summary of Previous Meeting	Description
<p>Executive Committee March 16th 6:30pm – 7:30pm @Zoom</p> <p>Occurs the 3rd Monday of every month</p>	N/A	<p>The Executive Committee consists of officers elected by the Board of Directors. The Executive Committee oversees the direction of NBRC and provides leadership to the board. The committee meets monthly to discuss matters involving the agency and to plan the agenda for the upcoming board meeting.</p>
<p>Vendor Advisory Committee (VAC)</p> <p>March 10th 10am – 11:30am @Zoom</p> <p>Occurs the 2nd Tuesday of every month</p>	See meeting minutes in packet.	<p>The Vendor Advisory Committee is comprised of service providers from Napa, Solano, and Sonoma counties. The members provide guidance, advice, and recommendations as they meet about issues and concerns that affect their services.</p>
<p>Public Policy Advisory Committee (PPAC)</p> <p>March 24th 10am – 11:30am @Zoom</p> <p>Occurs the 4th Tuesday of every month</p>	N/A	<p>The Public Policy Advisory Committee is an advisory committee to the board. The committee reviews public policy impacting regional center services including:</p> <ul style="list-style-type: none"> - Congressional bills, California state legislation and budget trailer bills - Federal and state executive orders - Changes in regulation and other law relating to disability programs and services - Department of Developmental Services directives

		The purpose of the committee is to keep the Board informed of important policy developments and recommend potential actions for the Board to take.
<p>Cultural and Linguistic Competency Committee (CLCC)</p> <p>March 19th 12pm – 1pm @Zoom</p> <p>Occurs the 3rd Thursday of every month</p>	N/A	The CLCC promotes diversity, equity and belonging within our agency and community by gathering input, analyzing data, reviewing policies, and making recommendations to the Board.
<p>Client Advisory Committee (CAC)</p> <p>March 13th 10:30am – 12:00pm @Santa Rosa</p> <p>Occurs quarterly, 4th Friday of the month</p>	See flyer in packet for upcoming meeting.	The CAC represents the perspectives of people served by NBRC. The members share information, provide feedback on NBRC policies and practices, and make recommendations to the Board.
<p>Risk Reduction Advisory Committee (RRAC)</p> <p>March 25th 12:30pm – 1:30pm @Zoom</p> <p>Occurs the last Wednesday of every month</p>	N/A	The Committee develops agendas that focus on policies, discussions, practices, and tasks related to prevention and response to neglect, physical and sexual abuse.



MEETING MINUTES

January 13, 2026 at 10:00 am - 11:30 am

VAC VOTING MEMBERS PRESENT:

Jeremy Hogan, VAC Co-Chair, UCP of the North Bay
Marissa Elder, Enriching Lives Family Home Agency
Jessica Sadowsky, Bayberry Inc.
Mary Eble, North Bay Housing Coalition
Kaela Talafili, Becoming Independent

Carin Hewitt, alift llc
Kelley Hanson, Pace Solano
Sara Trail, Connected Living
Jessica Perez, Milestones

VAC VOTING MEMBERS ABSENT:

Samantha Wilhite, Connections for Life
Adria Carson, On My Own
Breeanne Kolster, VAC Co-Chair, 24 Hour Home Care

NBRC STAFF PRESENT at 10:30am:

Gabriel Rogin, Executive Director
Courtney Singleton, Director of Community Services
Deanna Heibel, Associate Director of Client Services

June Ursini, Resource Developer
Kelly Weber, Associate Director of Client Services
Janelle Santana, Executive Assistant
Ellen Sweigert, Consumer Advocate

GUESTS (Names as listed in Chat):

Ronda Reyes, Solano Diversified Services
Graciél Menor – Enriching Lives FHA
Holly Pagel, Empowered Living SLS
Julia Prentice, Solano Diversified Services
Marissa Elder – Enriching Lives FHA
Kelley Hanson – Pace Solano
Faith Cross - CBEM
Robert Hutt NBI
Lea Munoz, Integrated Resources Institute
Rhonda Mottern, Bayberry
Stacey Martinez, The Arc Solano
Sherri Kimbell, California Programs for Autism, INC
Tokasa Binimasi, Bulafiji SLS
Dalia Flores – North Bay Industries
Dawn Strong, Flourish ILS
Emma Koell – North Bay Industries
Elizabeth Clary – Alchemia
Lea Ronald – Napa Valley PSI
Shayne Aloe, Kreative Community Services
Shanna Grogg, Starshine Therapeutic Services
Natalie Terrell New Leaf Solutions
Jamie Thompson Napa Valley Support Services
Mereoni Raivalita BulaFiji SLS
Mercedes Murphy Turning Point Community Program TSS
Sonoma

Jesse Carbone North Bay Industries
Andrea Mendoza, Advanced Supportive Living, SLS/ILS
Alisha Krupinsky – Lifehouse Agency
Jeannie Smith, Napa Valley Support Services
Linda Pourde Bayberry
Hygie Raquinio

- A. CALL TO ORDER at 10:05 am
 - a. Roll Call of Voting Members
 - b. Establish Quorum-quorum established
 - c. Jeremy shared that Jessica Sadowsky is officially the new VAC Board Representative
 - d. Jeremy welcomed Jess Perez from Milestones as a new VAC voting member

- B. APPROVAL OF MINUTES
 - a. Jeremy asked for any corrections to the December 9, 2025 meeting minutes as presented. None noted. Mary Eble moved, and Jessica Sadowsky seconded, to approve the December minutes as presented.

- C. VAC BUSINESS
 - a. **Treasurer's Report** - Kelley reported the balance in the VAC account held at Pace Solano is \$4076.26. There have been no major expenses since the last report. Jeremy shared that the Public Policy Committee was looking to find funds for the legislative luncheon. It was noted that VAC funds could be used for this purpose but the hope is that NBRC will be able to pick up the costs. Jamie Thompson from NVSS, shared a quote of \$12 per person from Redwood Credit Union's café in Napa where the luncheon will be held.
 - b. **VAC General Membership**
 - I. Jeremy announced that the VAC voted via email to bring on Gabrielle Phillipe-Auguste on as a VAC voting member. She will join us officially in February.
 - II. There are still open positions on the VAC. Carin acknowledged that leadership transitions at the VAC are creating delays in response to emails to the nbrcvac@gmail.com She shared the intent to respond to those who have reached out via email shortly and thanked everyone for their patience. **Those interested in applying for the VAC, should click the link below:**
https://docs.google.com/forms/d/e/1FAIpQLSc1gTRb6k_zs8Ok9Wz0DsuY1gzQcYae6Y5REsLrvsdnKAONJw/viewform?usp=sf_link
 - c. **Development of a Self-Advocacy Sub-Committee to start in January**- Carin shared the following purpose statement which will be flushed out in more detail by the committee. She also shared that Leah Gulley, Organizational Development Manager at alift has stepped forward as a co-chair. The VAC is also talking to NBRC about who on their end could possibly co-lead the committee. The goal is to have a 3 person co-chair with a representative from the vendor community, NBRC and someone with lived disability experience. The committee will be time limited and the hope is to start in April to give the co-chairs time to make the committee effective. If you are interested in joining the committee, please email nbrcvac@gmail.com. If you have already expressed your interest via email, we will be in touch.

VAC Self Advocacy Committee Draft Purpose Statement

This committee brings together people with disabilities, regional center representatives and service providers to work collaboratively with the goal of creating a more connected local self advocacy network which includes increased leadership opportunities for individuals with disabilities, improved access to advocacy resources, stronger alignment with statewide efforts, reduced participation barriers, and enhanced system responsiveness to the voices of self advocates.

- d. **PCT Survey Link**- Jeremy shared a link from Carrie Brown, PCT Coordinator and Trainer at NBRC. Please complete the survey to provide feedback on vendor training needs related to person centered practices: [Survey for Vendors: Person-Centered Thinking Workshops – Fill out form](#)

D. VENDOR COMMUNITY DISCUSSION

a. Discussion and sharing:

- i. In response to Isabel’s request, vendors brainstormed forms that would be helpful to include on NBRC’s new website as follows:
 - 1. Continuously updated phone directories
 - 2. Current Org chart
 - 3. SIR forms
 - 4. Links to Q and A
 - 5. SC Phone List
 - 6. Vendor Phone list
 - 7. Links to Title 17 and 22
 - 8. Direct info on Provider Directory, QIP, HCBS etc.
 - 9. It was noted that a key focus should be making sure the forms work.
 - ii. The group also discussed concerns or issues that vendors have experienced with Rate Reform or the QIP?
 - 1. It was noted that vendors want a process for what to do with issues that arise. It was noted that drop in sessions would be helpful.
 - 2. It was noted in chat that it would be great to have a transparent understanding of how the referral process is supposed to work. Is there an equitable process for processing referrals for vendors?
 - 3. VAC members noted that the DDS QIP Provider Survey deadline was extended to 2/27/26
- b. **Job Development** – Jeremy asked if anyone was using the new Job Development subcode and in the absence of responses suggested we ask Courtney during her report.

END OF VENDOR ONLY TIME

E. GENERAL ANNOUNCEMENTS

- a. Jeremy thanked Janelle for her tech support today. The VAC is navigating the new zoom format and she has been so helpful.
- b. We are still looking for a presenter on the Public Records Act and we are hopeful to have someone next month.
- c. The Vendor Potluck has been moved to spring due to renovations at NBRC in Napa.
- d. **POS Drop In Sessions** – Deanna and Kelly will host drop in sessions directly following the VAC meeting at 11:30am. The link to join was shared in chat and will be shared during VAC each month.

F. NBRC UPDATES

- a. **Fiscal** - Isabel absent so no report
- b. **Vendor Relations** – Courtney shared that rates for January 2026 are posted on the DDS website. She indicated that each service code has a rate model to show how it was developed. This is an increase due to minimum wage which went up to \$16.90 on January 1. She reminded vendors that the hold harmless from the rate reform ends on February 28, 2026. This means rates will go down if they are over the rate reform amounts. NBRC will reach out to vendors who are impacted by this.

Courtney shared that there are new SIR reporting requirements coming from DDS. NBRC is working on a plan for trainings and will update the SIR form. DDS will do some training as well. Changes include mandatory reporting for emergency room visits and trips and falls. These are not new reportable events for NBRC.

There is also a new directive about monitoring for HCBS. Starting in April, vendors must be monitored for compliance. NBRC is updating their review tool and will have to report whether vendors are compliant. They have already been following this process so it shouldn't result in many changes for vendors.

DDS extended the deadline for QIP Provider Surveys to 2/27/26. Courtney showed how vendors can look up their status on the website. They can also look up to see compliance with audit requirements. Go to QIP on the DDS website and select Provider Survey Status to see if you are compliant.

<https://www.dds.ca.gov/rc/vendor-provider/quality-incentive-program/>

A vendor asked where audits should be sent. Courtney said, send them to rates@nbrc.net

Jeremy asked about QIP drop in sessions. Courtney shared that there are drop in sessions planned with NBRC that allow vendors to sign up for 15 minute slots to ask questions.

In response to questions about how vendors can access the job development program, Courtney shared that Job development was added to everyone who had a 950 POS but they haven't talked about expectations. She will follow up on this.

Lastly, incentive payments for early start and the final employment incentive payments have been processed. The TDS rate is now set by DDS and they are updating vendors to make sure they are receiving the new rate as well.

- c. **Consumer Advocacy** - Ellen shared that coming up this month there is an NBRC job club. It will be held in Santa Rosa on 1/28 from 11-12:30pm and in Napa on 1/30 from 11-12:30pm.

Next month on 2/15 is the *Better Together* dance. This is a link to sign up:

<https://forms.gle/tT66e4GZYyx4npM47> If anyone wants to volunteer at the event, please go to

<https://forms.gle/hTch2jEcJ8tQdXPF8> to sign up. She shared that the Advocator Newsletter included photos taken by her. For those in Napa, next Monday at Justin Sienna, 10-1pm there is an event being put on that will include many community resources.

G. GROUP REPORTS

- a. **Napa-Solano Vendor Group** Kelley Hanson shared that the group did not meet but will meet prior to the next VAC. Contact Kelley if you want to join the Sonoma Vendor Group kelley@pacesolano.org
- b. **Sonoma Vendor Group**- Elizabeth Clary shared that the group did meet last week. They had a great meeting and agreed to keep an informal meeting schedule to get maximum attendance. She will send out a doodle poll later this month. The main topic of this month's meeting was determining how to resolve issues around rate reform. Elizabeth reiterated the need for the drop in sessions. Contact Elizabeth if you want to join the Sonoma Vendor Group elizabeth.clary@alchemia.org
- c. **Affordable Housing Committee**- Mary Eble had to leave early and will send a report later.
- d. **Transportation**- Anel Renteria from R&D reported they have transitioned all 880 and 875 vendors to rate reform. Now they are working on 882 and hope to complete this month.
- e. **NBRC Board Report**- Jessica shared that Gabriel's stepping down from his role as ED was a major focus of the board this month. Other items included a presentation from alift regarding their Leadership Academy and an update on the strategic plan. The good news was that there was a reduction in caseloads. NBRC hired 70 new employees in 2025. Jessica reported that there are 2 open positions open on the board (Treasurer and Secretary).
- f. **ARCA Report**- Gabriel shared that he has been working with attorneys regarding the Public Records Act and would ask them if they might be willing to present to the VAC. He shared that he has accepted a position at ARCA and will be leaving North Bay Regional Center shortly. He is hoping for a smooth transition and is not planning to leave right away. He shared that NBRC has a strong team and most of the work is done by then. He also said they have a strong board who will pick a caring, competent person. The board is discussing timelines. His new role will be as the Director of Leadership Development at ARCA. It is a new position. He expressed appreciation for the partnership and was recognized for his efforts in our community by several members.

g. Committees/Subcommittees

NBRC Public Policy Advisory Committee - Linda Plourde indicated that the California budget was not as bad as anticipated. It didn't consider Federal cuts so that is still up in the air. Money was added for growth in the system. There is a rally at the capitol tomorrow. Arrival at 11:30 on the west steps of the capital. The individuals will meet with legislative reps in small groups after the rally.

The group is planning the Legislative luncheon. Is it scheduled for Friday, April 10th and a *Save the Date* is coming. The committee is working out the details but the plan is tentatively 11-12:30pm. They hope to have Congressman Thompson provide updates and the CAC is co-planning the event. The Legislative Planning Meeting is on January 16th at 10am. A link was sent to the planning group. If you did not receive it and would like to attend the planning meeting, please email JanelleS@nbr.net

Minimum wage increased to \$16.90. Exempt staff need to be twice that rate. California is seeking to offer universal healthcare but this will be slow to implement. In regard to ACA subsidies, the house bill passed to extend subsidies for 3 years. It is moving on to the Senate to create a revised package.

Linda shared the results of a Direct Support Crisis report for 2025 from Anchor. There have been slight improvements nationwide since last year. For example, 88% of vendors experienced moderate to severe challenges with recruiting DSPs, this number was 90% in 2024. 62% of vendors turned down referrals. This number was 69% in 2024. 52% were considering cutting programs if things did not improve. This number was only 38% in 2024.

Lastly, Linda shared there is an organization in Minnesota that has had a high profile fraud scandal. This could result in additional federal investigations into other state programs.

H. GENERAL ANNOUNCEMENTS (from vendors, NBRC, & public)

- a. The next VAC will be Tuesday, February 10th on Zoom - Janelle will send out the link to register.
- b. Alift shared free HCBS Trainings for the vendor community
- c. The Sonoma County Transition Fair is on March 4th (the deadline to register is 1/31/26)
- d. ARC Solano is hosting a virtual bingo fundraiser this Thursday night. Cards are only \$10 each, so many program participants like to attend. Cards can be bought on their website at www.TheArcSolano.org.
- e. Milestones is having a paint and sip February 6th contact Jessicap@milestonesofdevelopment.org
- f. Public Policy meetings are the 4th Tuesday of each month, next being January 27 at 10 am
- g. There is a large Nationwide art exhibit in San Francisco. This is an exciting opportunity for artists and open to the public Friday, Saturday, and Sunday February 23rd, 24th, and 25th.
<https://www.creativityexplored.org/events-exhibitions/ce-x-openinvitational>
- h. The next Consumer Advisory Committee meeting is on January 30th at 11:30.

I. FUTURE AGENDA ITEMS AND/OR ITEMS FOR FOLLOW UP

- a. None noted

J. ADJOURNMENT at 11:32 am

Public Policy/CAC Board Member Report by Christopher Bennett
Wednesday, March 4, 2026

Recent Public Policy Advisory Committee Agenda

1) Federal Updates:

- Partial Government Closure
- Recognizing the Role of Direct Support Professionals Act (H.R. 6137; S 3211)
- Legislative updates

2) State:

Lanternman Coalition

Master Plans

- Trailer Bill Proposals: <https://myemail.constantcontact.com/2026-2027-Budget-Update--Trailer-Bill-Proposals.html?soid=1134980383158&aid=ARUsoxk3Gw8>

3) Local:

- Legislative Luncheon- Jeremy Hogan
- ARCA- Gabriel Rogin
- Grassroots Advocacy Development
- Public Records Act- Saanen Kerson
- Administrative Support for PPAC

Public Policy Committee Next Meeting Date:

March 24, 2026

Disco At The Capitol Event happening on May 18th & 19th!

Click Here for more information: <https://discoatthecapitol.org/>



NBRC CLIENT ADVISORY COMMITTEE

Friday, March 13, 2026

10:30 AM - 12:00 PM

**The meeting will be held in NBRC's Santa Rosa Office.
Sonoma Conference Room
520 Mendocino Avenue, Santa Rosa, CA 95401
or via Zoom (link below)**

**[Zoom Webinar Link Below](#)
[Click Here](#)**

**Please email JanelleS@nbrc.net
if you have any questions.**

Spanish & ASL Interpretation will be available.



COMITÉ ASESOR DE CLIENTES DEL NBRC

Viernes 13 de marzo de 2026

10:30 a. m. - 12:00 p. m.

La reunión se llevará a cabo en la oficina de
NBRC en Santa Rosa.

Sala de conferencias de Sonoma
520 Mendocino Avenue, Santa Rosa, CA 95401 o
vía Zoom (enlace a continuación)

[Enlace del seminario web de Zoom a continuación.](#)
[Haga clic aquí.](#)

[Envíe un correo electrónico a JanelleS@nbrc.net](mailto:JanelleS@nbrc.net)
[si tiene alguna pregunta.](#)

Habrá interpretación en español y ASL disponible.

2026 North Bay Legislative Lunch

April 10, 2026

11 am - 12:30 pm



We have
A VOICE

In-person attendance

AT 480 DEVLIN RD, NAPA, CA 94558



Virtual attendance by Zoom



Contact MariamG@nbrc.net for additional
accommodation information & questions

All Presentations will be in English
with Spanish and ASL interpretation
available

Almuerzo Legislativo de North Bay 2026

10 de abril de 2026

11:00 am - 12:30 pm



Tenemos
UNA VOZ

Asistencia Presencial

EN 480 DEVLIN RD, NAPA, CA 94558



Asistencia Virtual

por Zoom



Para obtener más información sobre el alojamiento y otras preguntas, póngase en contacto con MariamG@nbrc.net

Todas las presentaciones serán en Inglés con interpretación al Español y al Lenguaje de Señas Americano (ASL) disponible.

2026 North Bay Legislative Tanghalian

Abril 10, 2026

11 am - 12:30 pm



Mayroon tayong
BOSES

Personal na pagdalo

SA 480 DEVLIN RD, NAPA, CA 94558



Virtual na pagdalo sa

Zoom



Kontakin si MariamG@nbrc.net para sa
karagdagang impormasyon at mga
tanong tungkol sa akomodasyon

Lahat ng presentasyon ay English
na may Spanish at available ang
interpretasyong ASL⁵⁸



LEADERSHIP ACADEMY

COHORT III

TOPICS:

- Understanding the Disability Service System
- Home and Community Based Services Final Rule
- How to be a Leader
- Presentation and Facilitation Skills
- Self-Advocacy and Mentorship
- How to make an Impact in your Community



We are welcoming individuals to apply for Cohort III of the **alift Leadership Academy**. This program is **FREE** to individuals who are recipients of North Bay Regional Center's services.

Join our Informational Session to learn more!

Tuesday, March 10th

10:00 am

Zoom Meeting Details:

Meeting ID: 870 7760 5080

Passcode: 484757

Please contact **Elvializ Ramos** at elvializ@aliftllc.com for more information.

This initiative is being funded in partnership with North Bay Regional Center.

