Self-Determination Program ACRC Individual Budget Calculation and Certification Tool

Participant:	Regional Center:	ACRC
UCI#:	Service Coordinator:	
Date of Birth (M/D/Y):	Prior 12 Month Period:	

This tool is intended to guide you through building the individual budget for a participant in the Self-Determination Program (SDP). It is structured to reflect the annualized cost of ongoing services in comparison to the client's prior 12-month expenditure. The individual budget should be calculated and certified in conjunction with, or prior to, development of the Individual Program Plan (IPP) and Spending Plan for SDP.

Please note, services that are handled outside of the Individual Budget are limited to Competitive Integrated Employment (CIE) Incentives, Paid Internship Program (PIP) payments, SSI and/or SSP restoration payments, costs for insurance co-payments, deductibles or co-insurance, and rental/lease payments consistent with Welfare and Institutions Code section 4689(i).

This is a protected document intended to preserve formulas in the tables. Enter amounts into the grey areas within the tables, as applicable. There are some fields that require manual calculations. Totals will automatically calculate in the tables as you move through the document. Automatically calculated fields appear orange and cannot be edited.

Upon completion of the individual budget calculation, please sign the form to reflect Regional Center (RC) certification and participant review.

1. Baseline Amount: Client's Prior 12-Month Expenditure Used to Purchase Services in the IPP

nount on 12-month expenditure report: \$

2. Annualization Table: These are the annualized cost of ongoing services identified in the current IPP

Service Code Description	Comments	Estimated Units per Month	Unit Type	Rate	Total Annual Cost
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
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					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
			Self-Deter	mination Annual Individual Budget:	\$ -

Regional Center

I certify that the regional center expenditures for this individual budget, including any adjustment, would have occurred regardless of the individual's participation in the Self-Determination Program per Welfare and Institutions Code 4685.8 (n)(1).

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Regional Center Representative Signature	Date
Regional Center Representative Signature	Date
Participant or Legal Representative	
The individual budget document calculation and certification has been reviewed with me.	
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articipant or Legal Representative Signatu	Date

Rights: Participants enrolled in the Self-Determination Program have the same rights established under the traditional service model (e.g. appeals, eligibility determinations, and all other rights associated with the individual program plan process).