Hearing Date: September 26, 2014 J:\MANDATES\2001\tc\01-tc-16 (Fire Safety Care Facs)\13-MR-01\Proposed Decision and Amendment to Parameters and Guidelines\TOC.docx

ITEM 6

PROPOSED DECISION

AND

AMENDMENT TO PARAMETERS AND GUIDELINES

Health and Safety Code section 13235(a)

Statutes 1989, Chapter 993 As Modified by: Statutes 2009-2010, Chapter 12 (ABX 4 12)

Fire Safety Inspection of Care Facilities, 01-TC-16 (13-MR-01)

Department of Finance, Requester

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Exhibit A

EDMUND G. BROWN JR., Governor

STATE OF CALIFORNIA

COMMISSION ON STATE MANDATES 980 NINTH STREET, SUITE 300 SACRAMENTO, CA 95814 PHONE: (916) 323-3562 FAX: (916) 445-0278 E-mail: csminfo@csm.ca.gov

July 29, 2014

Mr. Michael Byrne Department of Finance 915 L Street, 8th Floor Sacramento, CA 95814

And Parties, Interested Parties, and Interested Persons (See Mailing List)

Re: Adopted Decision, Notice of Second Hearing Draft Proposed Decision, Draft Expedited Amendment to Parameters and Guidelines, and Notice of Hearing Mandate Redetermination Request, 13-MR-01 *Fire Safety Inspections of Care Facilities, (01-TC-16)* Health and Safety Code Section 13235(a); as added or amended by Statutes 1989, Chapter 993; Statutes 2009, Chapter 12 (ABX4 12) Department of Finance, Requester

Dear Mr. Byrne:

On July 25, 2014 the Commission on State Mandates (Commission) adopted the decision on the adequate showing issue for the above-named matter and directed staff to notice a second hearing to determine whether to adopt a new test claim decision to supersede the previously adopted test claim decision. The adopted decision, the draft proposed decision for the second hearing, and the draft expedited amendment to parameters and guidelines are enclosed for your review and comment.

Written Comments on Second Hearing Draft Proposed Decision

Written comments may be filed on the draft proposed decision by August 19, 2014.

Written Comments on Draft Expedited Amendment to Parameters and Guidelines

Staff has prepared a draft expedited amendment to parameters and guidelines for adoption at the September Commission hearing. The draft expedited amendment to parameters and guidelines is set for hearing on **September 26, 2014** and will only be taken up if the Commission first approves the request for redetermination.

<u>Review of Draft Expedited Amendment to Parameters and Guidelines.</u> Proposed modifications or comments may be filed on staff's draft proposal by **August 19, 2014**. (Cal. Code Regs., tit. 2, § 1183.9(c).)

<u>Rebuttals.</u> Written rebuttals may be submitted within 15 days of service of the comments. (Cal. Code Regs., tit. 2, § 1183.8(f).)

You are advised that comments filed with the Commission are required to be simultaneously served on the other interested parties on the mailing list, and to be accompanied by a proof of service. However, this requirement may also be satisfied by electronically filing your documents. Please see <u>http://www.csm.ca.gov/dropbox.shtml</u> on the Commission's website for instructions on electronic filing. (Cal. Code Regs., tit. 2, § 1181.3.)



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Mr. Michael Byrne July 29, 2014 Page 2

If you would like to request an extension of time to file comments, please refer to section 1187.9(a) of the Commission's regulations.

Hearing

The second hearing on the request for a mandate redetermination is set for **Friday**, **September 26, 2014**, at 10:00 a.m., State Capitol, Room 447, Sacramento, California. Additionally, the amendment to the parameters and guidelines is also set for hearing on **Friday**, **September 26, 2014**, but will only be taken up if the Commission first approves the request for redetermination. The proposed decision for the second hearing and amendment to the parameters and guidelines will be issued on or about September 12, 2014. Please let us know in advance if you or a representative of your agency will testify at the hearing, and if other witnesses will appear. If you would like to request postponement of the hearing, please refer to section 1187.9(b) of the Commission's regulations.

Please contact Heidi Palchik at (916) 323-3562 if you have any questions.

Sincerely.

Heather Halsey Executive Director

Hearing Date: September 26, 2014 J:\MANDATES\2001\tc\01-tc-16 (Fire Safety Care Facs)\13-MR-01\Second Hearing - New Test Claim Decision\Draft PD.docx

ITEM ___

MANDATE REDETERMINATION SECOND HEARING: NEW TEST CLAIM DECISION

DRAFT PROPOSED DECISION

Health and Safety Code section 13235(a)

Statutes 1989, Chapter 993

Fire Safety Inspections of Care Facilities, (01-TC-16)

As Alleged to be Modified by:

Statutes 2009-2010, Chapter 12 (ABX 4 12)

13-MR-01

Department of Finance, Requester

EXECUTIVE SUMMARY

Overview

On March 29, 2006, the Commission on State Mandates (Commission) adopted the Statement of Decision for the *Fire Safety Inspections of Care Facilities* test claim.¹ The Commission found that Health and Safety Code section 13235(a) imposed a reimbursable new program or higher level of service upon local agencies within the meaning of article XIII B, section 6 of the California Constitution and Government Code section 17514.

The Commission approved the test claim for the following reimbursable activities relating to the preinspection of a facility:

- 1. The preinspection of community care facilities, residential care facilities for the elderly, and child daycare facilities;
- 2. The consultation and interpretation of applicable fire safety regulations for the prospective facilities licensee; and
- 3. Written notice to the prospective facility licensee of the specific fire safety regulations which shall be enforced in order to obtain the final fire clearance approval.

The Commission also found that inspection activities relating to the final fire clearance approval are not reimbursable.

Statutes 2009-2010, Extraordinary Session, chapter 12 amended Health and Safety Code section 13235(a) to provide as follows in underline and strikeout:

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¹ Test Claim 01-TC-16 Statement of Decision, adopted March 29, 2006.

A fee of not more than fifty dollars (\$50) equal to, but not exceeding, the actual cost of the preinspection services may be charged for the preinspection of a facility with a capacity to serve 25 or fewer persons. A fee of not more than one hundred dollars (\$100) equal to, but not exceeding, the actual cost of the preinspection services may be charged for a preinspection of a facility with a capacity to serve 26 or more persons.

On July 29, 2013, the Department of Finance (DOF) filed a request for redetermination of the test claim decision pursuant to Government Code section 17570.² Pursuant to 17570(f), a request "shall be filed on or before June 30 following a fiscal year in order to establish eligibility for reimbursement or loss of reimbursement for that fiscal year." Thus, based on the filing date of July 29, 2013, the period of reimbursement potentially affected by this decision begins July 1, 2012. DOF alleges that Health and Safety Code section 13235(a) as amended constitutes a subsequent change in law as defined in section 17570. DOF further alleges that this change, pursuant to Government Code section 17556(d), results in a modification of the state's liability under the test claim statute. DOF specifically states, "the amendment provides authority to charge fees sufficient to cover the full costs of the mandated activities in the Fire Safety Inspections of Care Facilities Program."³

Section 17570 provides a process whereby a previously determined mandate finding can be redetermined by the Commission based on a subsequent change in law. The Government Code provides for a two-step hearing process. The Commission's regulations state that "[i]f the Commission proceeds to the second hearing, it shall consider whether the state's liability...has been modified based on the subsequent change in law alleged by the requester, thus requiring adoption of a new test claim decision to supersede the previously adopted test claim decision."⁴ If the Commission adopts a new test claim decision that supersedes the previously adopted test claim decision, and "which finds that there are costs mandated by the state pursuant to article XIII B, section 6(a) of the California Constitution, the amount and method of reimbursement shall be redetermined in accordance with article 3 of these regulations."⁵

On July 25, 2014, the Commission held the first hearing on this matter. The Commission found that DOF made an adequate showing that the request had a substantial possibility of prevailing at the second hearing, and the Commission therefore directed staff to set the matter for hearing on whether a new test claim decision should be adopted. The issue in this second hearing, pursuant to the code and the applicable regulations, is whether to adopt a new test claim decision to supersede the previously adopted test claim decision. If a new test claim decision is adopted that finds that the states liability for any of the reimbursable activities has been modified, the parameters and guidelines must be amended to reflect such modification in accordance with the period of eligibility established by the filing date of the request for redetermination.

² Exhibit B, Request for Determination, filed July 29, 2013 at p. 6.

³ Exhibit B, Request for Determination, filed July 29, 2013 at p. 6.

⁴ California Code of Regulations, title 2, section 1190.5 (Register 2014, No. 21).

⁵ California Code of Regulations, title 2, section 1190.5(b)(7) (Register 2014, No. 21).

Fire Safety Inspection of Care Facilities, 13-MR-01 Mandate Redetermination, Second Hearing Draft Proposed Decision

Staff Analysis

Government Code section 17570 provides, with respect to mandate redetermination, that:

"Subsequent change in law" is a change in law that requires a finding that an incurred cost is a cost mandated by the state, as defined by Section 17514, or is not a cost mandated by the state pursuant to section 17556, or a change in mandates law...⁶

Government Code section 17556(d) provides that the Commission *shall not find* costs mandated by the state, within the meaning of article XIII B, section 6, if "[t]he local agency or school district has the authority to levy service charges, fees, or assessments sufficient to pay for the mandated program or increased level of service." Section 17556(d) also states that this rule "applies regardless of whether the authority to levy charges, fees, or assessments was enacted or adopted prior to or after the date on which the statute or executive order was enacted or issued."⁷

Staff finds that Statutes 2009-2010, Extraordinary Session, chapter 12 (ABX 4 12) constitutes a subsequent change in law, as defined in section 17570. Health and Safety Code section 13235(a), as amended, provides local government with the authority to charge a fee equal to the actual cost of preinspection services. Thus, Statutes 2009-2010, chapter 12 provides fee authority sufficient to pay for the mandated program, and, pursuant to Government Code section 17556(d), the Commission shall not find costs mandated by the state where a local government has such fee authority.

Section 17570(f) provides that a request for adoption of a new test claim decision shall be filed on or before June 30 following a fiscal year in order to establish eligibility for reimbursement for that fiscal year. This request was filed on July 29, 2013, establishing eligibility beginning on July 1, 2012. Therefore, as a result of this proposed decision, staff finds that the approved activities in the prior test claim decision are no longer reimbursable as of July 1, 2012.

Staff Recommendation

Staff recommends that the Commission adopt this analysis as its new test claim decision, ending reimbursement for the mandated program as of July 1, 2012.

Staff also recommends that the Commission, for its next item of business, adopt the proposed expedited amended parameters and guidelines that reflect the end of the state's liability for this program, beginning July 1, 2012.

Staff further recommends that the Commission authorize staff to make any non-substantive, technical changes to the proposed new test claim decision following the hearing.

⁶ Government Code section 17570(a)(2) (Stats. 2010, ch. 719 (SB 856)).

⁷ Government Code section 17556 (As amended by Stats. 2010, ch. 719 (SB 856)).

Fire Safety Inspection of Care Facilities, 13-MR-01 Mandate Redetermination, Second Hearing Draft Proposed Decision

BEFORE THE

COMMISSION ON STATE MANDATES

STATE OF CALIFORNIA

IN RE MANDATE REDETERMINATION: SECOND HEARING: NEW TEST CLAIM DECISION FOR:

Health and Safety Code Section 13235(a);

As amended by Statutes 1989, Chapter 993.

Fire Safety Inspections of Care Facilities, 01-TC-16

As Alleged to be Modified by:

Statutes 2009-2010, Chapter 12 (ABX 4 12)

Filed on July 29, 2013

By the Department of Finance, Requester.

Case No.: 13-MR-01

Fire Safety Inspections of Care Facilities (01-TC-16)

DECISION PURSUANT TO GOVERNMENT CODE SECTION 17500, ET SEQ.; CALIFORNIA CODE OF REGULATIONS, TITLE 2, DIVISION 2, CHAPTER 2.5, ARTICLE 7. [Gov. Code, § 17570; Cal. Code Regs., tit. 2, § 1190.5]

(Adopted September 26, 2014)

DECISION

The Commission on State Mandates (Commission) heard and decided this mandate redetermination during a regularly scheduled hearing on September 26, 2014. [Witness list will be included in the final decision.]

Government Code section 17570 and section 1190 et seq. of the Commission's regulations establish the mandate redetermination process. In addition, the law applicable to the Commission's determination of a reimbursable state-mandated program is article XIII B, section 6 of the California Constitution, Government Code section 17500 et seq., title 2, California Code of Regulations 1181 et seq., and related case law.

The Commission [adopted/modified] the proposed decision as its new test claim decision, granting the request for redetermination and approving the request to end reimbursement for the test claim activities by a vote of [vote count will be included in the final decision].

Summary of the Findings

The Commission finds the state's liability pursuant to article XIII B, section 6(a) of the California Constitution, for the *Fire Safety Inspections of Care Facilities*, 01-TC-16 mandate has been modified based on a subsequent change in law, and that a new test claim decision must be adopted to supersede the previously adopted test claim decision. Specifically, Statutes 2009-2010, chapter 12 (ABX 4 12) amended Health and safety Code section 13235(a) to provide local

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Fire Safety Inspection of Care Facilities, 13-MR-01 Mandate Redetermination, Second Hearing Draft Proposed Decision agencies with the authority to charge a fee equal to the actual cost of the mandated preinspection services. Government Code section 17556(d) proscribes a finding of costs mandated by the state where the local government has fee authority sufficient to cover the costs of the mandate. Pursuant to Government Code section 17570, the Commission approves the request for redetermination and concludes that the *Fire Safety Inspection of Care Facilities*, 01-TC-16 program does not constitute a reimbursable state-mandated program within the meaning of article XIII B, section 6 of the California Constitution and Government Code section 17556(d), beginning July 1, 2012.

COMMISSION FINDINGS

I. Chronology

03/29/06	The Commission adopted the test claim statement of decision for <i>Fire Safety</i> <i>Inspections of Care Facilities</i> , 01-TC-16. ⁸
03/28/08	The Commission adopted parameters and guidelines. ⁹
07/29/13	Department of Finance (DOF) filed a request for redetermination on test claim 01-TC-16. ¹⁰
08/09/13	Commission staff deemed the filing complete.
09/09/13	The State Controller's Office (SCO), Division of Accounting and Reporting, filed comments concurring with DOF's request for redetermination.
05/16/14	Commission staff issued the draft staff analysis for the first hearing.
07/25/14	The Commission adopted the decision for the first hearing, directing Commission staff to set the matter for the second hearing.
07/29/14	Commission staff issued the draft proposed decision for the second hearing and the amendment to parameters and guidelines.

II. Background

Health and Safety Code Section 13235(a) and Test Claim Decision

Health and Safety Code section 13235(a) was enacted in 1989 (Stats. 1989, ch. 993), amending previous section 13235. The purpose of the amendments was to ensure that community care facilities, residential care facilities for the elderly, and child care facilities, during the process of being licensed by the State Department of Social Services, timely receive correct fire clearance information from the local fire enforcing agency or the State Fire Marshal. Upon receipt of a request from a prospective licensee, the local fire department or State Fire Marshal, whichever has primary jurisdiction, is required to conduct a preinspection of the facility prior to the fire

⁸ Exhibit A, Test Claim 01-TC-16 Statement of Decision.

⁹ Exhibit C, Test Claim 01-TC-16 Parameters and Guidelines.

¹⁰ Exhibit B, DOF Request for Redetermination, filed July 29, 2013.

Fire Safety Inspection of Care Facilities, 13-MR-01 Mandate Redetermination, Second Hearing Draft Proposed Decision

clearance approval. At the time of preinspection, the applicable fire enforcing agency will provide consultation and interpretation of the fire safety regulations that are to be enforced in order to obtain the clearances necessary to obtain a license.

On March 29, 2006, the Commission adopted the Statement of Decision for the *Fire Safety Inspections of Care Facilities* test claim.¹¹ The Commission found that Health and Safety Code section 13235(a), constituted a new program or higher level of service and imposes a statemandated program upon local agencies within the meaning of article XIII B, section 6 of the Californian Constitution and Government Code section 17514.

The Commission approved the test claim for the following reimbursable activities relating to the preinspection of the facility:

- 1. The preinspection of community care facilities, residential care facilities for the elderly, and child day care facilities;
- 2. The consultation and interpretation of applicable fire safety regulations for the prospective facility licensee; and
- 3. Written notice to the prospective facility licensee of the specific fire safety regulations which shall be enforced in order to obtain the final fire clearance approval.¹²

At the time of the test claim decision, Health and Safety Code section 13235(a), specifically allowed the following fees to be charged for the preinspection of a facility: 1) not more than \$50 for a facility serving 25 or fewer persons; and 2) not more than \$100 for a facility serving more than 25 persons. In the test claim Statement of Decision for this program, the Commission found that this limited fee authority did not cover the actual cost of the program and identified it as offsetting revenue.¹³

Health and Safety Code section 13235(a) was amended as follows, in underline and strikeout to provide:

A fee of not more than fifty dollars (\$50) equal to, but not exceeding, the actual cost of the preinspection services may be charged for the preinspection of a facility with a capacity to serve 25 or fewer persons. A fee of not more than one hundred dollars (\$100) equal to, but not exceeding, the actual cost of the preinspection services may be charged for a preinspection of a facility with a capacity to serve 26 or more persons.¹⁴

As amended, section 13235(a) provides fee authority for the full actual cost of preinspection services.

¹¹ Exhibit A, Test Claim 01-TC-16 Statement of Decision.

¹² Exhibit A, Test Claim 01-TC-16 Statement of Decision, p. 13.

¹³ Exhibit A, Test Claim 01-TC-16 Statement of Decision, pp.12-13.

¹⁴ Statutes 2009-2010, 4th Extraordinary Session, chapter 12 (AB 12), section 14, effective July 28, 2009.

Fire Safety Inspection of Care Facilities, 13-MR-01 Mandate Redetermination, Second Hearing Draft Proposed Decision

Mandate Redetermination Process under Section 17570

Government Code section 17570 provides a process whereby a test claim decision may be redetermined and superseded by a new test claim decision, if a subsequent change in law, as defined, has modified the state's liability for reimbursement. Section 17570 calls for a two hearing process; at the first hearing, the requestor must make "an adequate showing which identifies a subsequent change in law as defined by Government Code section 17570, material to the prior test claim decision, that may modify the state's liability pursuant to article XIII B, section 6, (a) of the California Constitution."¹⁵ At the second hearing, the Commission "shall constitution has been modified based on the subsequent change in law alleged by the requester, thus requiring the adoption of a new test claim decision to supersede the previously adopted test claim decision."¹⁶

A subsequent change in law is defined in section 17570 as follows:

[A] change in law that requires a finding that an incurred cost is a cost mandated by the state, as defined by section 17556, or a change in mandates law, except that a "subsequent change in law" does not include the amendments to Section 6 of Article XIII B of the California Constitution that were approved by the voters on November 2, 2004. A "subsequent change in law" also does not include a change in the statutes or executive orders that impose new state-mandated activities and require a finding pursuant to subdivision (a) of Section 17551.¹⁷

If the Commission finds, at the second hearing, that the state's liability has been modified based upon a subsequent change in law, "it shall adopt a new decision that reflects the modified liability of the state."¹⁸ If the Commission adopts a new test claim statement of decision that supersedes the previously adopted test claim decision, the Commission shall amend existing parameters and guidelines pursuant to Section 17557.¹⁹

III. Position of the Parties

A. Department of Finance, Requester

DOF asserts that Statutes 2009-2010, chapter 12 (ABX 4 12) constitutes a subsequent change in the law, as defined in section 17570, which, when analyzed in light of section 17556, results in the state's liability under the test claim statutes being modified. DOF asserts that the amendment to section 13235(a) "provides authority to charge fees sufficient to cover the full costs of the mandated activities in the Fire Safety Inspection Program." Therefore the state is no longer

¹⁵ California Code of Regulations, title 2, section 1190.5(a)(1).

¹⁶ California Code of Regulations, title 2, section 1190.5(b)(1).

¹⁷ Government Code section 17570, as added by Statutes 2010, chapter 719 (SB 856).

¹⁸ California Code of Regulations, Title 2, section 1190.5(b)(1).

¹⁹ Government Code section 17570(i) (Stats. 2010, chapter 719 (S.B. 856)).

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obligated to reimburse any costs for the mandated activities, pursuant to Government Code sections 17570 and 17556(d).²⁰

State Controller's Office

The SCO filed comments concurring with the DOF request for redetermination.

IV. Discussion

Under article XIII B, section 6 of the California Constitution, local agencies and school districts are entitled to reimbursement for the increased costs of state-mandated new programs or higher levels of service. In order for local government to be eligible for reimbursement, one or more similarly situated local agencies or school districts must file a successful test claim with the Commission. "Test claim" means the first claim filed with the Commission alleging that a particular statute or executive order imposes costs mandated by the state. Test claims function similarly to class actions and all members of the class have the opportunity to participate in the test claim process and all are bound by the final decision of the Commission for purposes of that test claim.

The Commission is the quasi-judicial body vested with exclusive authority to adjudicate disputes over the existence of state-mandated programs within the meaning of article XIII B, section 6.²¹ The determination whether a statute or executive order imposes a reimbursable state-mandated program is a question of law.²² In making its decisions, the Commission must strictly construe article XIII B, section 6, and not apply it as an "equitable remedy to cure the perceived unfairness resulting from political decisions on funding priorities."²³

Under Government Code section 17570, upon request, the Commission may consider the adoption of a new test claim decision to supersede a prior test claim decision based on a subsequent change in law which modifies the state's liability. If the Commission adopts a new test claim decision that supersedes the previously adopted test claim decision which approved reimbursement, the Commission is required to amend existing parameters and guidelines.

A. Statutes 2009-2010, Chapter 12 Constitutes a Subsequent Change in Law.

On March 29, 2006, the Commission adopted a test claim decision for the *Fire Safety Inspections of Care Facilities* test claim 01-TC-16.²⁴ The Commission found that Health and Safety Code section 13235(a), added by Statutes 1989, chapter 993 imposed a reimbursable state-mandated program upon local agencies within the meaning of article XIII B, section 6 of the California Constitution and Government Code section 17514. On March 28, 2008, the

²⁴ Exhibit A, Test Claim 01-TC-16 Statement of Decision.

²⁰ Exhibit B, Request for Redetermination, filed July 29, 2013 at p. 6.

²¹ *Kinlaw v. State of California* (1991) 53 Cal.3d 482, 487; Government Code sections 17551; 17552.

²² County of San Diego v. State of California, (1997) 15 Cal.4th 68, 109.

²³ County of Sonoma v. Commission on State Mandates, (2000) 84 Cal.App.4th 1265, 1280, citing City of San Jose v. State of California (1996) 45 Cal.App.4th 1802, 1817.

Commission adopted parameters and guidelines which outlined the reimbursable activities as follows:

A. One-Time Activity (one time per employee)

Training for each new fire inspector assigned to preinspection of care facilities, pursuant to Health and Safety Code section 13235, subdivision (a). A maximum of four hours of training is allowable per employee.

- B. Ongoing Activities
 - 1. Conduct preinspections of community care facilities, residential care facilities for the elderly, and child day care facilities upon receipt of a request from a prospective licensee of such a facility, before final fire clearance approval. More than one preinspection per facility as deemed necessary by the local fire agency is reimbursable.
 - 2. Provide consultation and interpretation of applicable fire safety regulations for the prospective facility licensee.
 - 3. Provide a written notice to the prospective licensee of the specific fire safety regulations that shall be enforced in order to obtain the final fire clearance approval.
 - 4. Maintain files relating solely to preinspection activities pursuant to Health and Safety Code section 13235, subdivision (a).²⁵

Statutes 2009-2010, 4th Extraordinary Session, chapter 12 (AB 12), effective July 28, 2009, amended section 13235(a) to provide as follows in strikeout and underline:

(a) Upon receipt of a request from a prospective licensee of a community care facility, as defined in Section 1502, of a residential care facility for the elderly, as defined in Section 1569.2, or of a child day care facility, as defined in Section 1596.750, the local fire enforcing agency, as defined in Section 13244, or the State Fire Marshal, whichever has primary jurisdiction, shall conduct a preinspection of the facility prior to the final fire clearance approval. A the time of the preinspection, the primary fire enforcing agency shall provide consultation and interpretation of fire safety regulations, and shall notify the prospective licensee of the facility in writing of the specific fire safety regulations which shall be enforced in order to obtain fire clearance approval. A fee of not more than fifty dollars (\$50) equal to, but not exceeding, the actual cost of the preinspection services may be charged for the preinspection of a facility with a capacity to serve 25 or fewer persons. A fee of not more than one hundred dollars (\$100) equal to, but not exceeding services may be charged for the preinspection services may be charged for the preinspection services may be charged for a preinspection services may be charged for the preinspection services may be charged for a preinspection of a facility with a capacity to serve 26 or more persons.

²⁵ Exhibit C, 01-TC-16, Parameters and Guidelines, adopted March 28, 2008, pp. 2-3.

²⁶ Health and Safety Code section 13235(a), amended by Statutes 2009-2010 4th Extraordinary session, chapter 12 (AB 12), § 14, effective July 28, 2009.

In its request for mandate redetermination,²⁷ DOF asserts that the amendment of Health and Safety Code section 13235(a) granted local agencies authority to "charge a fee sufficient to cover all of the costs attributable to the mandated activities under Health and Safety Code section 13235, subdivision (a)."²⁸ As sufficient fee authority has been provided, DOF maintains that a new test claim decision must issue finding there are no costs mandated by the state pursuant to Government Code section 17556(d). DOF asserts that the amendment to section 13235(a) is a "subsequent change in law" as defined in Government Code section 17570.²⁹

B. Section 17556(d) is Not Self-Executing, but Requires Commission Action Pursuant to Section 17570, Where a Commission Decision on the Test Claim Statutes has been Previously adopted.

Government Code section 17556(d) provides that the Commission "shall not find costs mandated by the state, as defined in Section 17514" if the Commission finds that "the local agency or school district has the authority to levy service charges, fees, or assessments sufficient to pay for the mandated program or increased level of service." The California Supreme Court upheld the constitutionality of Government Code section 17556(d), in *County of Fresno v. State of California.* ³⁰ The court, in holding that the term "costs" in article XIII B, section 6, excludes expenses recoverable from sources other than taxes, stated:

Section 6 was included in article XIII B in recognition that article XIII A of the Constitution severely restricted the taxing powers of local governments. (See *County of Los Angeles I, supra,* 43 Cal.3d at p. 61.) The provision was intended to preclude the state from shifting financial responsibility for carrying out governmental functions onto local entities that were ill equipped to handle the task. (*Ibid.*; see *Lucia Mar Unified School Dist. v. Honig* (1988) 44 Cal.3d 830, 836, fn. 6 [244 Cal.Rptr. 677, 750 P.2d 318].) Specifically, it was designed to protect the tax revenues of local governments from state mandates that would require expenditure of such revenues. Thus, although its language broadly declares that the "state shall provide a subvention of funds to reimburse ... local government for the costs [of a state-mandated new] program or higher level of service," read in its textual and historical context section 6 of article XIII B requires subvention only when the costs in question can be recovered *solely from tax revenues.*³¹

Accordingly, in *Clovis Unified School District v. Chiang*, the court found that the SCO was not acting in excess of its authority in reducing reimbursement claims to the full extent of the districts' authority to impose fees, even if there existed practical impediments to collecting the fees. In making its decision the court noted that the concept underlying the state mandates

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²⁷ Exhibit B, DOF Request for Mandate Redetermination, filed July 29, 2013, p. 6.

²⁸ Exhibit B, DOF Request for Mandate Redetermination, filed July 29, 2013, p. 6.

²⁹ Exhibit B, DOF Request for Mandate Redetermination, filed July 29, 2013, p. 6.

³⁰ County of Fresno v. State of California, supra, 53 Cal.3d 482.

³¹ Id, at p. 487.

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process that Government Code sections 17514 and 17556(d) embody is that "[t]o the extent a local agency or school district 'has the authority' to charge for the mandated program or increased level of service, that charge cannot be recovered as a state-mandated cost."³² The court further noted that, "this basic principle flows from common sense as well. As the Controller succinctly puts it, 'Claimants can choose not to require these fees, but not at the state's expense."³³

Section 17556(d) further provides that the limitation "applies regardless of whether the authority to levy charges, fees, or assessments was enacted or adopted prior to or after the date on which the statute or executive order was enacted or issued. In the context of fee authority enacted *after the test claim decision* on the subject matter has been adopted, an analysis under section 17556(d) cannot be entertained absent the redetermination process provided in section 17570. The Commission's process is the sole and exclusive venue in which eligible claimants vindicate the reimbursement requirement of article XIII B, section 6, and the Commission's decision on a test claim is final and binding, absent judicial review.³⁴ A later-enacted statute providing fee authority for a mandated program cannot, of its own force, undermine the Commission's mandate determination in a prior test claim decision. Section 17570 thus provides the mechanism for considering section 17556(d) when there is a subsequent change in law, as defined, "material to the prior test claim decision, that may modify the state's liability" pursuant to article XIII B, section 6.

"Subsequent change in law," is defined in section 17570(a)(2) as follows:

[A] change in law that requires a finding that an incurred cost is a cost mandated by the state, as defined by Section 17514, or is not a cost mandated by the state pursuant to Section 17556, or a change in mandates law, except that a "subsequent change in law" does not include the amendments to Section 6 of Article XIII B of the California Constitution that were approved by the voters on November 2, 2004. A "subsequent change in law" also does not include a change in the statutes or executive orders that impose new state-mandated activities and require a finding pursuant to subdivision (a) of Section 17551.³⁵

Here, the amendments effected by Statutes 2009-2010, 4th Extraordinary Session , chapter 12 (AB 12), authorize local fire enforcing agencies to charge a fee "equal to, but not exceeding the actual cost of the preinspection service", implicate a section 17556(d) analysis, and therefore the amendments constitute a subsequent change in law, as defined.

Based on the foregoing, the Commission finds that there are no costs mandated by the state, as defined in section 17514, under Health and Safety Code section 13235(a), as amended by Statutes 2009-2010, chapter 12 (ABX 4 12). Section 17570 provides that a request for adoption of a new test claim decision shall be filed on or before June 30 following a fiscal year in order to

³² Clovis Unified School Dist. v. Chiang (2010) 188 Cal.App.4th 794, at p. 812.

³³ *Ibid*.

³⁴ CSBA I, supra, 171 Cal.App.4th 1183, at pp. 1199-1200.

³⁵ Government Code section 17570, as added by Statutes 2010, chapter 719 (SB 856).

Fire Safety Inspection of Care Facilities, 13-MR-01 Mandate Redetermination, Second Hearing Draft Proposed Decision

establish eligibility for reimbursement for that fiscal year. This request was filed on July 29, 2013, establishing eligibility beginning July 1, 2012. Therefore, the activities approved for reimbursement in the prior test claim decision are no longer reimbursable as of July 1, 2012.

V. CONCLUSION

Based on the foregoing, the Commission approves the request for redetermination and concludes that the *Fire Safety Inspection of Care Facilities*, 01-TC-16 program does not constitute a reimbursable state-mandated program within the meaning of article XIII B, section 6 of the California Constitution and Government Code section 17556(d), beginning July 1, 2012.

Fire Safety Inspection of Care Facilities, 13-MR-01 Mandate Redetermination, Second Hearing Draft Proposed Decision

DECLARATION OF SERVICE BY EMAIL

I, the undersigned, declare as follows:

I am a resident of the County of Solano and I am over the age of 18 years, and not a party to the within action. My place of employment is 980 Ninth Street, Suite 300, Sacramento, California 95814.

On July 29, 2014, I served the:

Adopted Decision, Notice of Second Hearing Draft Proposed Decision, Draft Expedited Amendment to Parameters and Guidelines, and Notice of Hearing Mandate Redetermination Request, 13-MR-01 *Fire Safety Inspections of Care Facilities, (01-TC-16)* Health and Safety Code Section 13235(a); as added or amended by Statutes 1989, Chapter 993; Statutes 2009, Chapter 12 (ABX4 12) Department of Finance, Requester

by making it available on the Commission's website and providing notice of how to locate it to the email addresses provided on the attached mailing list.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct, and that this declaration was executed on July 29, 2014 at Sacramento, California.

Zablik

Heidi J. Palchik Commission on State Mandates 980 Ninth Street, Suite 300 Sacramento, CA 95814 (916) 323-3562

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Mailing List

Last Updated: 7/29/14

Claim Number: 13-MR-01

Matter: Fire Safety Inspections of Care Facilities (01-TC-16)

Requester: Department of Finance

TO ALL PARTIES, INTERES TED PARTIES, AND INTERES TED PERSONS:

Each commission mailing list is continuously updated as requests are received to include or remove any party or person on the mailing list. A current mailing list is provided with commission correspondence, and a copy of the current mailing list is available upon request at any time. Except as provided otherwise by commission rule, when a party or interested party files any written material with the commission concerning a claim, it shall simultaneously serve a copy of the written material on the parties and interested parties to the claim identified on the mailing list provided by the commission. (Cal. Code Regs., tit. 2, § 1181.3.)

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DRAFT EXPEDITED AMENDMENTS TO

PARAMETERS AND GUIDELINES

Health and Safety Code Section 13235, Subdivision (a)

Statutes 1989, Chapter 993

Fire Safety Inspections of Care Facilities 01-TC-16

(amended by 13-MR-01)

As Modified by:

Statutes 2009-2010, Chapter 12 (ABX 4 12)

The reimbursement period for this program ends June 30, 2012

I. SUMMARY OF THE MANDATE

Health and Safety Code section 13235, subdivision (a), requires local fire departments to perform fire safety inspections of all community care facilities, residential care facilities for the elderly, and child daycare facilities. Upon receipt of a request from a prospective licensee, the local fire department, or State Fire Marshal, whichever has primary jurisdiction, is required to conduct a preinspection of the facility prior to the fire clearance approval. At the time of the preinspection, the applicable fire enforcing agency will provide consultation and interpretation of the fire safety regulations that are to be enforced in order to obtain the clearances necessary to obtain a license.

On March 29, 2006, the Commission on State Mandates (Commission) adopted the Statement of Decision for the *Fire Safety Inspections of Care Facilities* test claim. The Commission found that Health and Safety Code section 13235, subdivision (a), constitutes a new program or higher level of service and imposes a state-mandated program upon local agencies within the meaning of article XIII B, section 6 of the California Constitution and Government Code section 17514.

The Commission approved this test claim for the following reimbursable activities relating to the preinspection of the facility:

- 1. the preinspection of community care facilities, residential care facilities for the elderly, and child day care facilities;
- 2. the consultation and interpretation of applicable fire safety regulations for the prospective facility licensee; and
- 3. written notice to the prospective facility licensee of the specific fire safety regulations which shall be enforced in order to obtain the final fire clearance approval.

Inspection activities relating to the final fire clearance approval are not reimbursable.

On July 29, 2013, the Department of Finance (Finance) filed a request for redetermination of the test claim decision pursuant to Government Code section 17570. Finance asserted that Statutes 2009-2010, chapter 12 (ABX 4 12) constitutes a subsequent change in the law, as defined in section 17570, which pursuant to section 17556(d), results in the state's liability under the test claim statute being modified.

On September 26, 2014, the Commission adopted a new test claim decision, finding that Statutes 2009-2010, chapter 12 (ABX 4 12), effective July 28, 2009, amended Health and Safety Code, section 13235(a) to provide fee authority sufficient to cover the full costs attributable to the mandated inspection activities required by section 13235(a). Thus, a subsequent statutory change has eliminated the state's obligation to reimburse this program as of June 30, 2012, pursuant to Government Code section 17556(d). These parameters and guidelines have been amended in accordance with that decision.

II. ELIGIBLE CLAIMANTS

Any city, county, city and county, and any fire protection district or other district performing fire protection services at the local level, formed pursuant to Health and Safety Code sections 13800 et seq., that is subject to the tax and spend limitations of articles XIII A and XIII B, and that incurs increased costs as a result of this reimbursable state-mandated program is eligible to claim reimbursement of those costs.

III. PERIOD OF REIMBURSEMENT

Government Code section 17557, subdivision (e) states that a test claim shall be submitted on or before June 30 following a given fiscal year to establish eligibility for that fiscal year. The City of San Jose filed the test claim on June 3, 2002. Therefore, costs incurred on or after July 1, 2000, in compliance with Health and Safety Code section 13235, subdivision (a) (Stats. 1989, ch. 993), are eligible for reimbursement.

Actual costs for one fiscal year shall be included in each claim. Pursuant to Government Code section 17561, subdivision (d)(1)(A), all claims for reimbursement of initial fiscal year costs shall be submitted to the State Controller within 120 days of the issuance date for the claiming instructions.

If the total costs for a given fiscal year do not exceed \$1,000, no reimbursement shall be allowed except as otherwise allowed by Government Code section 17564, subdivision (a).

Statutes 2009-2010, chapter 12 (ABX 4 12) provided fee authority sufficient to fund this program effective June 28, 2009.

IV. REIMBURSABLE ACTIVITIES

The activities of this program are no longer reimbursable as of June 30, 2012.

To be eligible for mandated cost reimbursement for any fiscal year, only actual costs may be claimed. Actual costs are those costs actually incurred to implement the mandated activities. Actual costs must be traceable and supported by source documents that show the validity of such costs, when they were incurred, and their relationship to the reimbursable activities. A source document is a document created at or near the same time the actual cost was incurred for the event or activity in question. Source documents may include, but are not limited to, employee time records or time logs, sign-in sheets, invoices, and receipts.

Evidence corroborating the source documents may include, but is not limited to, worksheets, cost allocation reports (system generated), purchase orders, contracts, agendas, calendars, training packets, and declarations. Declarations must include a certification or declaration stating, "I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct," and must further comply with the requirements of Code of Civil Procedure section 2015.5.

Evidence corroborating the source documents may include data relevant to the reimbursable activities otherwise in compliance with local, state, and federal government requirements. However, corroborating documents cannot be substituted for source documents.

Claimants may use time studies to support salary and benefit costs when an activity is task-repetitive. Time study usage is subject to the review and audit conducted by the State Controller's Office.

The claimant is only allowed to claim and be reimbursed for increased costs for reimbursable activities identified below. Increased cost is limited to the cost of an activity that the claimant is required to incur as a result of the mandate.

For each eligible claimant, the following activities related to the preinspection are reimbursable:

A. One-Time Activity (one time per employee)

Training for each new fire inspector assigned to the preinspection of care facilities, pursuant to Health and Safety Code section 13235, subdivision (a). A maximum of four hours of training is allowable per employee.

- B. Ongoing Activities
 - 1. Conduct preinspections of community care facilities, residential care facilities for the elderly, and child day care facilities upon receipt of a request from a prospective licensee of such a facility, before the final fire clearance approval. More than one preinspection per facility as deemed necessary by the local fire agency is reimbursable.
 - 2. Provide consultation and interpretation of applicable fire safety regulations for the prospective facility licensee.
 - 3. Providing a written notice to the prospective facility licensee of the specific fire safety regulations that shall be enforced in order to obtain the final fire clearance approval.
 - 4. Maintain files relating solely to preinspection activities pursuant to Health and Safety Code section 13235, subdivision (a).

V. CLAIM PREPARATION AND SUBMISSION

Each of the following cost elements must be identified for each reimbursable activity identified in Section IV, Reimbursable Activities, of this document. Each claimed reimbursable cost must be supported by source documentation as described in Section IV. Additionally, each reimbursement claim must be filed in a timely manner.

A. Direct Cost Reporting

Direct costs are those costs incurred specifically for the reimbursable activities. The following direct costs are eligible for reimbursement.

1. Salaries and Benefits

Report each employee implementing the reimbursable activities by name, job classification, and productive hourly rate (total wages and related benefits divided by productive hours). Describe the specific reimbursable activities performed and the hours devoted to each reimbursable activity performed.

2. Materials and Supplies

Report the cost of materials and supplies that have been consumed or expended for the purpose of the reimbursable activities. Purchases shall be claimed at the actual price after deducting discounts, rebates, and allowances received by the claimant. Supplies that are withdrawn from inventory shall be charged on an appropriate and recognized method of costing, consistently applied.

3. Contracted Services

Report the name of the contractor and services performed to implement the reimbursable activities. If the contractor bills for time and materials, report the number of hours spent on the activities and all costs charged. If the contract is a fixed price, report the services that were performed during the period covered by the reimbursement claim. If the contract services are also used for purposes other than the reimbursable activities, only the pro-rata portion of the services used to implement the reimbursable activities can be claimed. Submit contract consultant and attorney invoices with the claim and a description of the contract scope of services.

4. Fixed Assets and Equipment

Report the purchase price paid for fixed assets and equipment (including computers) necessary to implement the reimbursable activities. The purchase price includes taxes, delivery costs, and installation costs. If the fixed asset or equipment is also used for purposes other than the reimbursable activities, only the pro-rata portion of the purchase price used to implement the reimbursable activities can be claimed.

5. Travel

Report the name of the employee traveling for the purpose of the reimbursable activities. Include the date of travel, destination point, the specific reimbursable activity requiring travel, and related travel expenses reimbursed to the employee in compliance with the rules of the local jurisdiction. Report employee travel time according to the rules of cost element A.1, Salaries and Benefits, for each applicable reimbursable activity.

6. Training

Report the cost of training an employee to perform the reimbursable activities, as specified in Section IV of this document. Report the name and job classification of each employee preparing for, attending, and/or conducting training necessary to implement the reimbursable activities. Provide the title, subject, and purpose (related to the mandate of the training session), dates attended, and location. If the training encompasses subjects broader than the reimbursable activities, only the pro-rata portion can be claimed. Report employee training time for each applicable reimbursable activity according to the rules of cost element A.1, Salaries and Benefits, and A.2, Materials and Supplies. Report the cost

of consultants who conduct the training according to the rules of cost element A.3, Contracted Services.

B. Indirect Cost Rates

Indirect costs are costs that are incurred for a common or joint purpose, benefiting more than one program, and are not directly assignable to a particular department or program without efforts disproportionate to the result achieved. Indirect costs may include both (1) overhead costs of the unit performing the mandate; and (2) the costs of the central government services distributed to the other departments based on a systematic and rational basis through a cost allocation plan.

Compensation for indirect costs is eligible for reimbursement utilizing the procedure provided in the Office of Management and Budget (OMB) Circular A-87. Claimants have the option of using 10% of direct labor, excluding fringe benefits, or preparing an Indirect Cost Rate Proposal (ICRP) if the indirect cost rate claimed exceeds 10%.

If the claimant chooses to prepare an ICRP, both the direct costs (as defined and described in OMB Circular A-87 Attachments A and B) and the indirect costs shall exclude capital expenditures and unallowable costs (as defined and described in OMB Circular A-87 Attachments A and B). However, unallowable costs must be included in the direct costs if they represent activities to which indirect costs are properly allocable.

The distribution base may be (1) total direct costs (excluding capital expenditures and other distorting items, such as pass-through funds, major subcontracts, etc.), (2) direct salaries and wages, or (3) another base which results in an equitable distribution.

In calculating an ICRP, the claimant shall have the choice of one of the following methodologies:

- 1. The allocation of allowable indirect costs (as defined and described in OMB Circular A-87 Attachments A and B) shall be accomplished by (1) classifying a department's total costs for the base period as either direct or indirect, and (2) dividing the total allowable indirect costs (net of applicable credits) by an equitable distribution base. The result of this process is an indirect cost rate which is used to distribute indirect costs to mandates. The rate should be expressed as a percentage which the total amount allowable indirect costs bears to the base selected; or
- 2. The allocation of allowable indirect costs (as defined and described in OMB Circular A-87 Attachments A and B) shall be accomplished by (1) separating a department into groups, such as divisions or sections, and then classifying the division's or section's total costs for the base period as either direct or indirect, and (2) dividing the total allowable indirect costs (net of applicable credits) by an equitable distribution base. The result of this process is an indirect cost rate that is used to distribute indirect costs to mandates. The rate should be expressed as a percentage which the total amount allowable indirect costs bears to the base selected.

The activities of this program are no longer reimbursable beginning July 1, 2012.

VI. RECORD RETENTION

Pursuant to Government Code section 17558.5, subdivision (a), a reimbursement claim for actual costs filed by a local agency or school district pursuant to this chapter¹ is subject to the initiation of an audit by the Controller no later than three years after the date that the actual reimbursement claim is filed or last amended, whichever is later. However, if no funds are appropriated or no payment is made to a claimant for the program for the fiscal year for which the claim is filed, the time for the Controller to initiate an audit shall commence to run from the date of initial payment of the claim. In any case, an audit shall be completed not later than two years after the date that the audit is commenced. All documents used to support the reimbursable activities, as described in Section IV, must be retained during the period subject to audit. If an audit has been initiated by the Controller during the period subject to audit, the retention period is extended until the ultimate resolution of any audit findings.

VII. OFFSETTING REVENUES AND OTHER REIMBURSEMENTS

Any offsetting revenues the claimant experiences in the same program as a result of the same statutes or executive orders found to contain the mandate shall be deducted from the costs claimed. In addition, reimbursement for this mandate from any source, including but not limited to, service fees collected, federal funds, and other state funds, shall be identified and deducted from this claim.

Pursuant to Health and Safety Code section 13235, subdivision (a), fee recovery for the preinspection activity is limited to: 1) \$0 for facilities which serve six or fewer persons; 2) \$50 for facilities with a capacity to serve seven to 25 persons; and 3) \$100 for facilities with a capacity to serve 26 or more persons. This revenue shall be identified and deducted from total costs claimed. In the event that the Legislature enacts legislation which either increases or decreases the fee authority, such legislation shall control and will not necessitate an amendment to these parameters and guidelines unless the activities to be performed are also amended.

VIII. STATE CONTROLLER'S CLAIMING INSTRUCTIONS

Pursuant to Government Code section 17558, subdivision (b), the Controller shall issue claiming instructions for each mandate that requires state reimbursement not later than 60 days after receiving the adopted parameters and guidelines from the Commission, to assist local agencies and school districts in claiming costs to be reimbursed. The claiming instructions shall be derived from the test claim decision and the parameters and guidelines adopted by the Commission.

Pursuant to Government Code section 17561, subdivision (d)(1), issuance of the claiming instructions shall constitute a notice of the right of the local agencies and school districts to file reimbursement claims, based upon parameters and guidelines adopted by the Commission.

IX. REMEDIES BEFORE THE COMMISSION

Upon request of a local agency or school district, the Commission shall review the claiming instructions issued by the State Controller or any other authorized state agency for reimbursement of mandated costs pursuant to Government Code section 17571. If the Commission determines that the claiming instructions do not conform to the parameters and guidelines, the Commission shall direct the Controller to modify the claiming instructions and

¹ This refers to Title 2, division 4, part 7, chapter 4 of the Government Code.

the Controller shall modify the claiming instructions to conform to the parameters and guidelines as directed by the Commission.

In addition, requests may be made to amend parameters and guidelines pursuant to Government Code section 17557, subdivision (d), and California Code of Regulations, title 2, section 1183.2 1183.17.

X. LEGAL AND FACTUAL BASIS FOR THE PARAMETERS AND GUIDELINES

The Statement of Decision test claim and parameters and guidelines decisions are legally binding on all parties and provide the legal and factual basis for the parameters and guidelines. The support for the legal and factual findings is found in the administrative record for the test claim. The administrative record, including the Statement of Decision, is on file with the Commission.



Exhibit C

RECEIVED August 19, 2014

Commission on

State Mandates

JOHN CHIANG California State Controller Division of Accounting and Reporting

August 19, 2014

Ms. Heather Halsey Executive Director Commission on State Mandates 980 Ninth Street, Suite 300 Sacramento, CA 95814

Re: Adopted Decision, Notice of Second Hearing Draft Proposed Decision, Draft Expedited Amendment to Parameters and Guidelines, and Notice of Hearing Mandate Redetermination Request, 13-MR-01 *Fire Safety Inspections of Care Facilities*, (01-TC-16) Health and Safety Code Section 13235(a); as added or amended by Statutes 1989, Chapter 993; Statutes 2009, Chapter 12 (ABX4 12) Department of Finance, Requester

Dear Ms. Halsey:

The State Controller's Office reviewed the draft expedited amendment to Parameters and Guidelines for the Fire Safety Inspections of Care Facilities program and recommends no changes.

Should you have any questions regarding the above, please contact Afsana Saida at (916) 324-7870 or email ASaida@sco.ca.gov.

Sincerely,

JAV LAL, Manager Local Reimbursements Section

MAILING ADDRESS P.O. Box 942850, Sacramento, CA 94250 STREET ADDRESS 3301 C Street, Suite 700, Sacramento, CA 95816

