

DEPARTMENT OF FINANCE BILL ANALYSIS

AMENDMENT DATE: July 1, 2008
POSITION: Oppose

BILL NUMBER: SB 1475
AUTHOR: T. Torlakson

BILL SUMMARY

This bill would require the Department of Developmental Services (DDS) to establish a two-year pilot project, called The Centers of Excellence for Early Autism Intervention and Transitional Services (Centers). The purpose of the pilot would be to identify best practices in integrating the services and supports provided through the regional centers and local education agencies (LEAs) for children from birth to five years of age with Autism Spectrum Disorders (ASD). This bill would require the DDS to report specified information on the pilot project to the Legislature and the Governor by June 1, 2012. Additionally, this bill states that no General Fund be used for the pilot project and that DDS apply to the California Children and Families Commission (First 5 California) for funding to cover the cost of the pilot program.

FISCAL SUMMARY

- This bill would cost approximately \$2.3 million per year for one pilot center and an additional \$2 million per year for each additional pilot center. Estimated costs include the following:
- DDS would need one additional Research Analyst II position (\$98,579 per year) to guide the design and implementation of the local Centers projects, oversee the necessary data systems, provide on-site technical assistance and oversight to the local pilot centers to ensure data integrity and consistency, to compile and analyze the data, and to develop the mandated report for the Legislature.
- One regional center staff person for each pilot center location for the planning and implementation of the pilot (\$100,000 per specialist, per year).
- A consulting contract for expertise in complex research design, data collection, analysis, and report writing, which is estimated to cost \$150,000.
- Based on the legislative findings in this bill, the DDS assumes that the pilot program would result in regional centers funding the cost of services for children ages 3 to 5 with ASD. Additional regional center costs of approximately \$1.9 million (\$5,340 x 365 children) a year due to children ages 3 to 5 with ASD who would normally receive services through a LEA, but under the provisions of this bill, would receive services through a regional center. Based on current data, DDS estimates that 365 three-year olds would continue to receive regional center services, rather than transition to a LEA, at a cost of \$5,340 for six months, which is the average length of service for children in that age group diagnosed with ASD.

This bill would prohibit the use of General Fund to fund the pilot program and would require DDS to apply for and obtain funding from the First 5 California or other sources.

COMMENTS

- The Department of Finance is opposed to this bill for the following reasons:
- Although this bill specifies that General Fund may not be used for the pilot program and that DDS must apply for and obtain funds from First 5 California, this bill may create pressure on the General (Continued)
Fund if First 5 California does not adequately fund the pilot program. Additionally, regional centers and LEAs may be expected to fund any funding shortfall that occurs due to an unanticipated increase in children with ASD or unanticipated increases in service costs.
- This bill may be unnecessary because the Blue Ribbon Commission on Autism (Commission) has stated that there are models of voluntary collaboration between regional centers and school districts that provide services to children with ASD and that these models increased satisfaction among families and have produced more effective outcomes than the traditional model. Because the

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Governor's Office: By: Date: Position Approved
Position Disapproved

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Commission already has information on the problems and solutions associated with transitioning children with ASD from regional centers to schools, it appears this bill may be duplicative.

According to the author's office, this bill is based on a recommendation by the Commission. The Commission held several public meetings and the concerns addressed in this bill were brought to the Commission by parents and other interested parties.

Background:

DDS' Early Start Program focuses on infants and toddlers from birth to 36 months, who have developmental delays, are at high risk for a developmental disability, and those who have established risks for a developmental delay. Not all children who transition from the Early Start Program become eligible for regional center services. While the figure varies among regional centers, approximately 15 percent of infants and toddlers served in the Early Start Program continue as regional center consumers. Through the early intervention efforts of the program, the risk factors for many infants and toddlers are mitigated and they do not meet eligibility for regional center services.

DDS serves 36,952 persons with ASD in the community. Persons with ASD and pervasive developmental disorders have special needs in regards to numerous co-occurring conditions, including behavioral disorders and particular health issues, such as sleep disorders, gastrointestinal problems, and immune system deficiencies. The vast majority -- 80 percent -- are minors. Persons with autism constitute 60 percent of all new cases to the regional center system.

Existing law:

- Provides that the DDS contract with private nonprofit regional centers to provide or purchase services and supports for individuals with developmental disabilities.
- Identifies autism as one of several developmental disabilities that are included in services provided by regional centers.
- Establishes LEAs to provide educational services to children, including early intervention services for children with disabilities and children who are at risk of a disability.
- Establishes the Commission to study and investigate issues, including, but not limited to, the early identification and intervention of ASD. Requires the Commission to identify gaps in programs, services, and funding related to the early identification of ASD.

This bill would:

- Make findings and declarations regarding children with ASD, including the following:
 - The number of children diagnosed with ASD has grown dramatically in recent years and is a serious public health crisis.
 - Currently, children with ASD receiving services from regional centers through the Early Start Program must transition to services provided by school districts when they are between three to five years of age.
 - This transition currently presents a severe crisis to many families because it disrupts the continuity of programs and interventions that have already been implemented and are proving efficient in overcoming ASD and improving developmental outcomes.
 - The transition is not cost-effective because the LEAs, despite lacking the resources and administrative supports, must duplicate complex assessments that have already been performed by the regional centers.
 - Services and interventions for children with ASD are often delayed while regional centers and LEAs quarrel over the financial responsibilities of implementing services.
- Require the DDS to establish a two-year pilot program in at least three locations to identify and implement best practices that will establish a seamless, comprehensive, and integrated service delivery model between regional centers and LEAs for children with ASD.
- Requires the pilot project to do the following:
 - Establish innovative, collaborative, integrated, and seamless methods, instruments, and systems of care between regional centers and LEAs for the early identification and assessment of children with ASD from birth to five years of age.
 - Establish innovative fiscal models using pooled funding and resources that have demonstrated cost-effective benefits and outcomes.

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- o Determine how the use of telehealth, telemedicine, and other innovative web-based technology strategies may improve the professional development, outreach, and training of families, consumers, professionals, and staff who are affiliated or served by regional centers or LEAs.
- Direct DDS to manage the pilot program in partnership with one or more regional centers.
- Require the DDS to submit a report containing specified information on the pilot project to the Legislature and Governor by June 1, 2012.
- Provide that no General Fund be used to fund the pilot program. Requires DDS to apply to the First 5 California for funding to cover the costs of the pilot program and provides that the pilot program only be established after DDS obtains funds.

Code/Department Agency or Revenue Type	SO	(Fiscal Impact by Fiscal Year)							Fund Code
	LA	(Dollars in Thousands)							
	CO	PROP	2008-2009		2009-2010		2010-2011		
RV	98	FC	FC	FC	FC	FC	FC		
4300/Develop Svcs	SO	No	-----	See Fiscal Summary	-----	-----	-----	0001	
4250/Chld/FamComm	SO	No	-----	See Fiscal Summary	-----	-----	-----	0639	
6100/Education	SO	Yes	-----	See Fiscal Summary	-----	-----	-----	0001	
<u>Fund Code</u>	<u>Title</u>								
0001	General Fund								
0639	Unallocated Acct, Child & Families Trust								