

# **Department of Developmental Services**

## **Fact Book**

**Tenth Edition**



**Prepared by DDS Information Services Division  
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**Department of Developmental Services  
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# ***Preface***

The Fact Book presents pertinent data about the individuals served by the Department of Developmental Services (DDS), including an overview of services and trends in California. We hope you find this information useful in better understanding California's developmental services system and the persons served.

DDS is responsible for administering the Lanterman Developmental Disabilities Services Act and the Early Intervention Services Act. These laws ensure the coordination and provision of services and supports to enable persons with developmental disabilities to lead more independent, productive and integrated lives. In addition, these laws ensure the delivery of appropriate services to infants and toddlers at risk of having developmental disabilities and their families. DDS carries out its responsibilities through 21 community-based, non-profit corporations known as "regional centers" (RC) and State-operated facilities, including five State developmental centers (SDC) and two smaller facilities. For purposes of this publication, the two smaller facilities will be included in numbers reported for SDCs.

A "developmental disability" is a condition that originates before an individual reaches age 18; continues, or can be expected to continue indefinitely; and constitutes a substantial impairment in three or more areas of major life activity.<sup>1</sup> Developmental disabilities include mental retardation, epilepsy, cerebral palsy, autism, and disabling conditions closely related to mental retardation or requiring treatment similar to that required by people with mental retardation. The service delivery system, which offers personalized supports, includes individuals with developmental disabilities, their families and/or legal representatives, advocacy and professional organizations, the State Council on Developmental Disabilities, direct service providers, SDCs, RCs, and DDS.

The following pages offer a look at the demographics and characteristics of persons served by DDS. The Fact Book and other information is available on the DDS home page at [www.dds.ca.gov](http://www.dds.ca.gov). Questions may be directed to the DDS Data Request Line at (916) 651-7435. Information in this publication was derived from data reported electronically to DDS Headquarters and compiled by the Data Extraction Unit.

<sup>1</sup>Areas of major life activity include self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency. Substantial impairment reflects the person's need for a combination of special, interdisciplinary, or generic support services.

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**Cover Art:** "Island Beauty" is an artwork created by artist Marilyn Warmesley using graphite sticks. Ms. Warmesley has attended Southside Art Center (SSAC) since 1997 and revels in producing art every day. Her creativity as an artist is reflected in her many colorful paintings, beautiful mosaic pieces, and other works of art. Selling her art also has empowered Marilyn financially. SSAC is a nonprofit organization serving individuals with developmental disabilities through art, personal development and community integration programs.

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# Whom DDS Serves



This untitled artwork was created by artist Martha Lane using crayon and paper. Lane started in art at age 26, coming to the National Institute of Art and Disabilities (NIAD) in 1993. Martha likes to draw and paint houses and people in bright colors. Her artistic style is most appealing to collectors. Her art was featured as a t-shirt design for the 1995 AIDS Walk sponsored by Citibank. NIAD is an innovative visual art center that serves adults with developmental and physical disabilities. Copies of Martha Lane's artworks and those of other artists can be viewed on-line at [www.niadart.org](http://www.niadart.org).

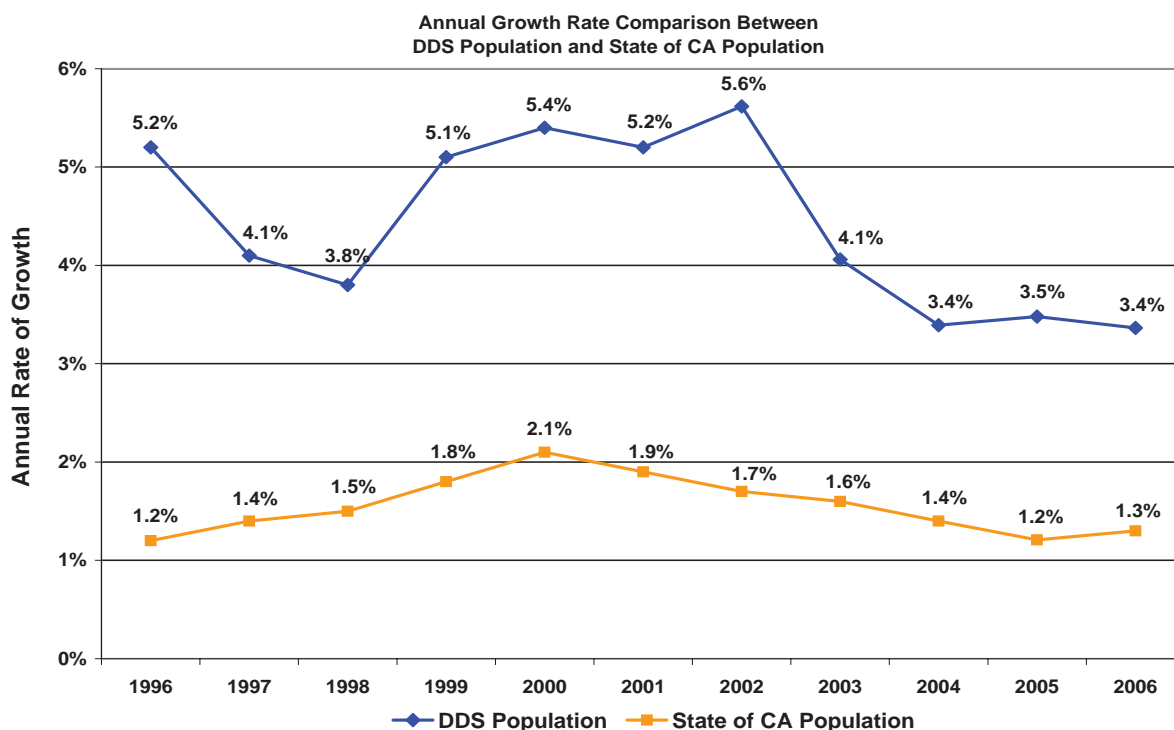
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## Caseload

The number of persons served by DDS increased 60.5 percent from January 1996 through December 2006. According to Department of Finance estimates, California's general population grew 18.3 percent between January 1, 1996 and January 1, 2007. About 0.57 percent of California's population was served by DDS as of 2006 year end.

While the total DDS population (i.e., persons with status codes 1, 2 and 8 on the Client Master File (CMF))<sup>2</sup> and the general population in California both increased in numbers each year during the period displayed below, the annual rate of growth differed significantly in these two populations.



From January 1996 through December 2006, the number of individuals served by DDS in the community (i.e., persons with status codes 1 and 2) increased 64.4 percent. During this same period, the State developmental center (SDC) population (i.e., persons with status code 8) decreased 41.6 percent.

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<sup>2</sup>The source of the data depicted in the Caseload charts is the [Client Master File \(CMF\)](#). Information on a person is initially entered into the CMF at the time of application for RC services. The CMF is the primary source for demographic, case status and service coordinator information. The definitions of active status codes are as follows:

**Status Code 1:** Children birth to age three who are at risk of having a developmental disability or who have a developmental delay but have not been diagnosed as having a developmental disability. Persons with a status code 1 qualify for early intervention and prevention services.

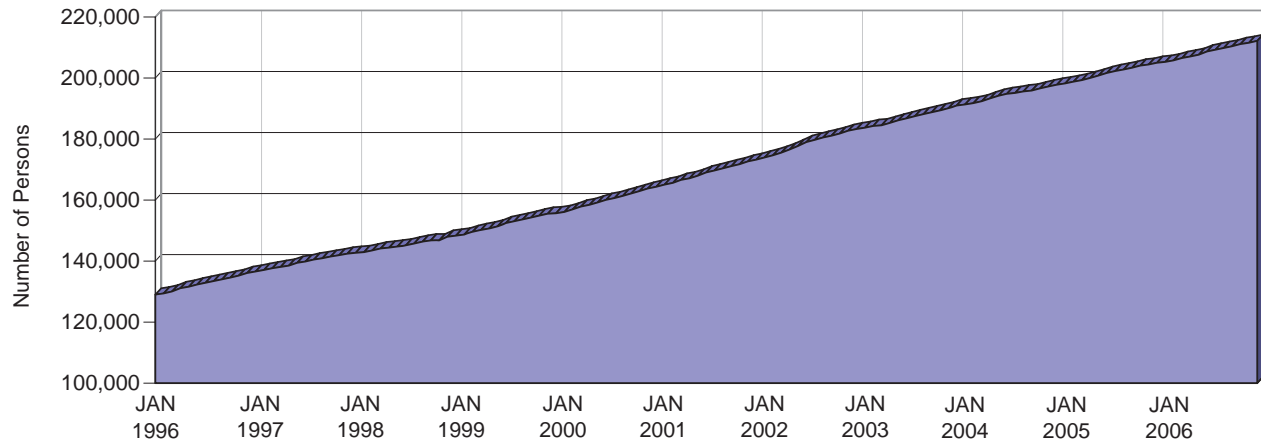
**Status Code 2:** Persons diagnosed as having a developmental disability and being served in the community (not in an SDC).

**Status Code 8:** Persons diagnosed as having a developmental disability and being served in an SDC.

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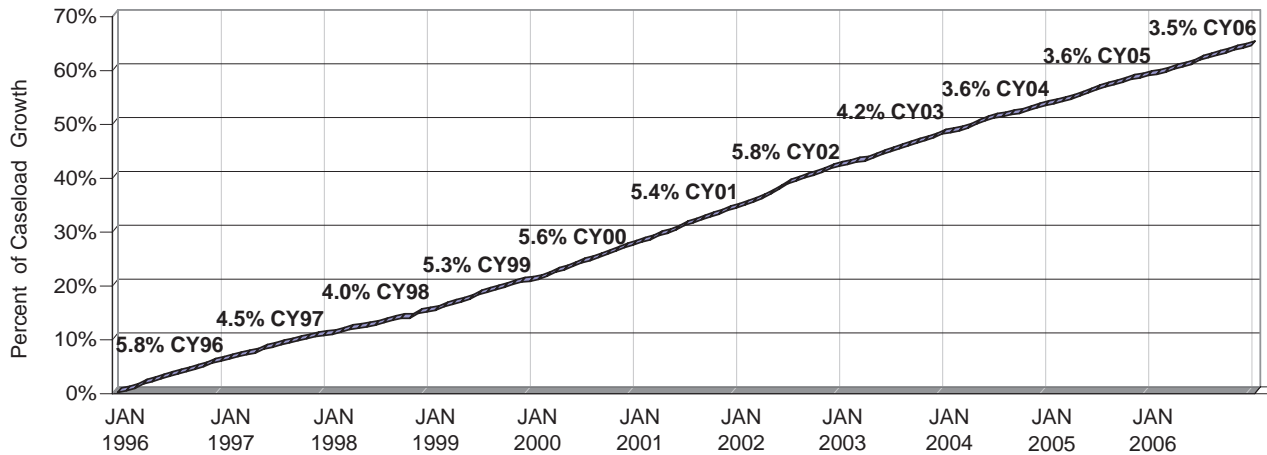
## Community Caseload

**Caseload Growth\***  
1/96 through 12/06



\*Persons with status codes 1 and 2.

**Cumulative Percent of Caseload Growth\***  
with Annual Percent Changes Noted  
1/96 through 12/06

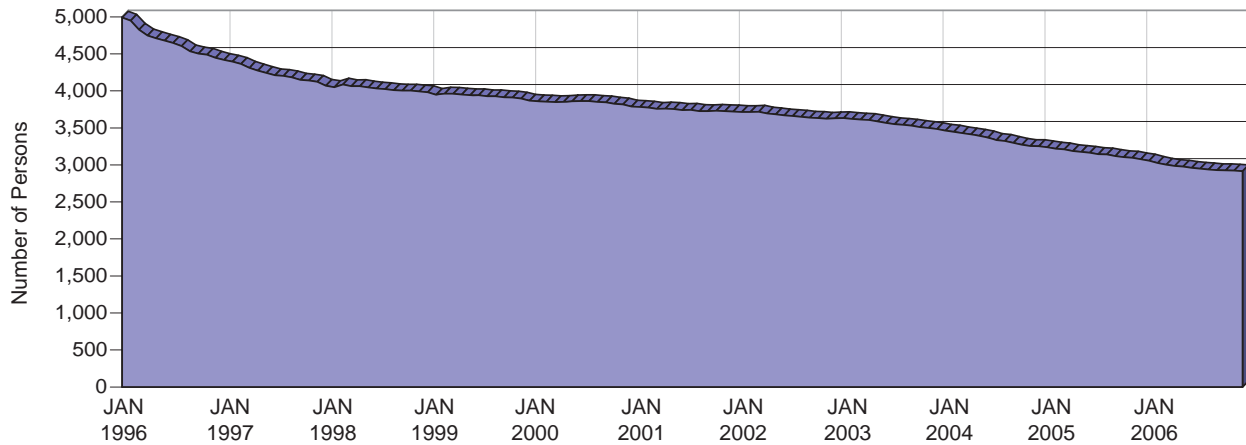


\*Persons with status codes 1 and 2.

Note: In graph above, CY means Calendar Year.

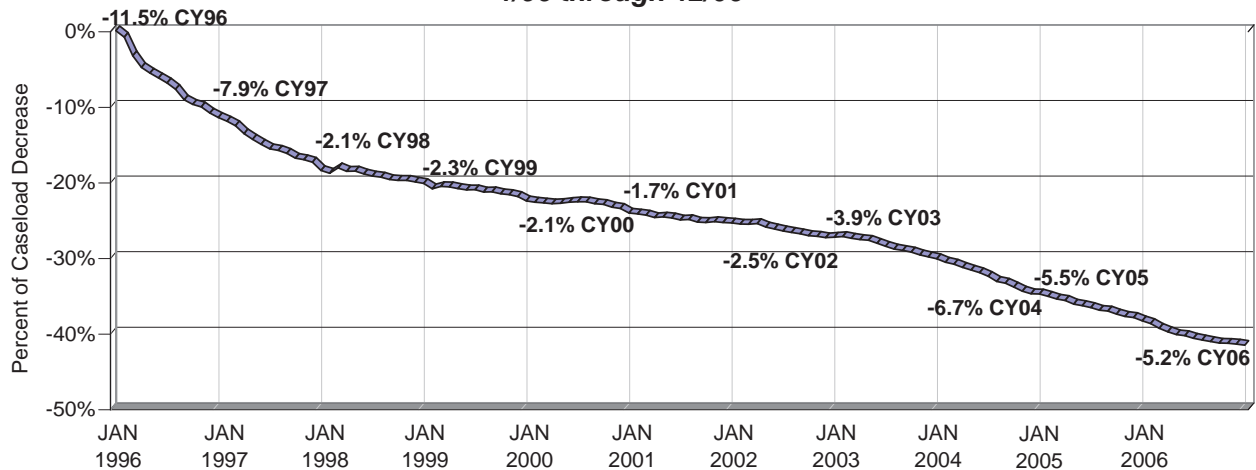
## State Developmental Center Residents

**Decline in Number of Residents\***  
1/96 through 12/06



\*Persons with status code 8.

**Cumulative Percent in SDC Residence\***  
with Annual Percent Changes Noted  
1/96 through 12/06



\*Persons with status code 8.

Note: In graph above, CY means Calendar Year.

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## ***Demographics of Persons Served by DDS***

In the pages that follow, demographic information is provided by gender, age, residence types and ethnicity of persons with status codes 1, 2, and 8 in December 1996 as compared to December 2006. To obtain demographic information on the population served by DDS for other years, please refer to prior editions of the Fact Book (available at [www.dds.ca.gov/factsstats/factbook.cfm](http://www.dds.ca.gov/factsstats/factbook.cfm)).

The trend in the gender distribution of persons served by DDS continued in 2006 with males increasing in numbers relative to females. In December 1996, 57.4 percent of persons served were male as compared to 42.6 percent female. In December 2006, the gap widened to 60.9 percent male compared to 39.1 percent female.

Age distribution trends for persons served by DDS also continued. With 57.3 percent of the population under 22 years of age in December 2006 as compared to 52.4 percent in this age group in December 1996, the DDS population is becoming increasingly younger.

Changes in the residence types of the population are also worth noting. While 65.5 percent of persons resided in the home of a parent or guardian in December 1996, 72.6 percent had this residence type in December 2006. During this same period, decreases continued in the proportion of persons living in community care settings (17.5 to 12.4 percent) and developmental centers (3.1 to 1.3 percent).

The predominant trend in the ethnic makeup of the population continued in 2006. Hispanics remain the fastest growing segment of the DDS population increasing from 25.6 percent in December 1996 to 32.8 percent in December 2006. Over this same period, the white population decreased from 47.6 percent to 40.8 percent.

### **Definitions of Residence Types**

***Own Home-Family:*** Home of a family member or guardian.

***Community Care:*** Settings such as a Community Care Facilities (CCF), Foster Homes for Children, and Family Homes for Adults (FHA).

***ILS/SLS:*** Independent Living Setting (ILS) or Supported Living Setting (SLS).

***SNF/ICF:*** Skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF). ICF includes ICF/Developmentally Disabled (ICF/DD), ICF/Developmentally Disabled-Habilitation (ICF/DD-H), and ICF/Developmentally Disabled-Nursing (ICF/DD-N).

***Developmental Center:*** State developmental center (SDC) operated by DDS.

***Other:*** Settings such as hospitals, community treatment facilities, rehabilitation centers, psychiatric treatment centers, correctional institutions, and other settings in the community.

## ***Demographics of Persons Served by DDS***

### **Persons with Status Codes 1, 2 and 8 on Client Master File as of December 1996 Compared to December 2006**

#### **December 1996**

<b>Gender</b>	<b>Number of Persons</b>	<b>Percentage of Total</b>
Female	59,853	42.6%
Male	80,564	57.4%
<b>Total</b>	<b>140,417</b>	<b>100.0%</b>

<b>Age</b>	<b>Number of Persons</b>	<b>Percentage of Total</b>
Birth - 2 Yrs.	15,013	10.7%
3 - 13 Yrs.	38,732	27.6%
14 - 21 Yrs.	19,862	14.1%
22 - 31 Yrs.	23,567	16.8%
32 - 41 Yrs.	21,706	15.5%
42 - 51 Yrs.	13,086	9.3%
52 - 61 Yrs.	5,173	3.7%
62 Yrs. & Older	3,278	2.3%
<b>Total</b>	<b>140,417</b>	<b>100.0%</b>

<b>Residence Type</b>	<b>Number of Persons</b>	<b>Percentage of Total</b>
Own Home-Family	91,944	65.5%
Community Care	24,550	17.5%
ILS/SLS	11,103	7.9%
SNF/ICF	7,630	5.4%
Developmental Center	4,366	3.1%
Other	824	0.6%
<b>Total</b>	<b>140,417</b>	<b>100.0%</b>

<b>Ethnicity</b>	<b>Number of Persons</b>	<b>Percentage of Total</b>
White	66,873	47.6%
Hispanic	35,996	25.6%
Black	14,876	10.6%
Asian	6,222	4.4%
Filipino	2,204	1.6%
Native American	572	0.4%
Pacific Islander	229	0.2%
Other	13,445	9.6%
<b>Total</b>	<b>140,417</b>	<b>100.0%</b>

#### **December 2006**

<b>Gender</b>	<b>Number of Persons</b>	<b>Percentage of Total</b>
Female	84,042	39.1%
Male	131,004	60.9%
<b>Total</b>	<b>215,046</b>	<b>100.0%</b>

Birth - 2 Yrs.	26,559	12.4%
3 - 13 Yrs.	59,643	27.7%
14 - 21 Yrs.	36,989	17.2%
22 - 31 Yrs.	30,716	14.3%
32 - 41 Yrs.	22,163	10.3%
42 - 51 Yrs.	21,229	9.9%
52 - 61 Yrs.	12,157	5.7%
62 Yrs. & Older	5,590	2.6%
<b>Total</b>	<b>215,046</b>	<b>100.0%</b>

<b>Residence Type</b>	<b>Number of Persons</b>	<b>Percentage of Total</b>
Own Home-Family	156,204	72.6%
Community Care	26,744	12.4%
ILS/SLS	18,802	8.7%
SNF/ICF	8,811	4.1%
Developmental Center	2,891	1.3%
Other	1,594	0.7%
<b>Total</b>	<b>215,046</b>	<b>100.0%</b>

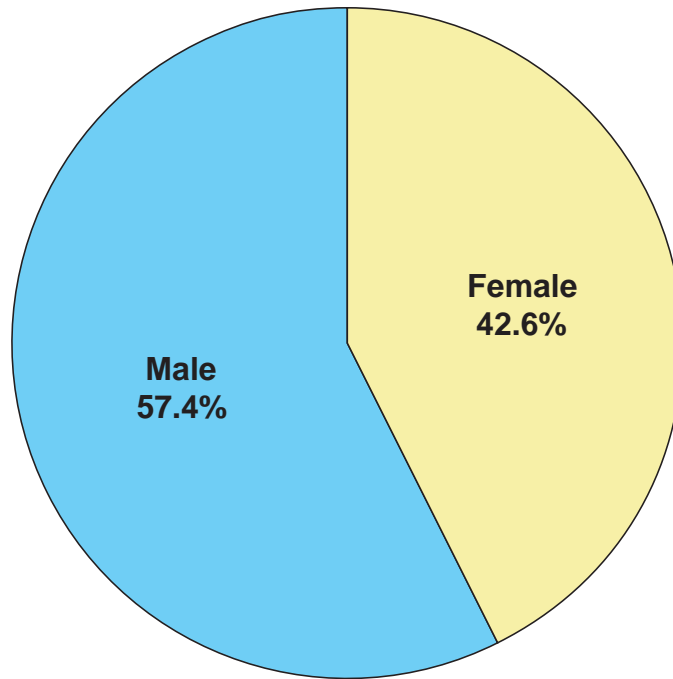
<b>Ethnicity</b>	<b>Number of Persons</b>	<b>Percentage of Total</b>
White	87,726	40.8%
Hispanic	70,517	32.8%
Black	21,235	9.9%
Asian	12,544	5.8%
Filipino	4,418	2.1%
Native American	833	0.4%
Pacific Islander	486	0.2%
Other	17,287	8.0%
<b>Total</b>	<b>215,046</b>	<b>100.0%</b>

**Note:** The source of the data depicted in the "Demographics of Persons Served by DDS" tables and charts is the Client Master File (CMF). Please refer to page 1 for the definitions of the CMF and status codes.

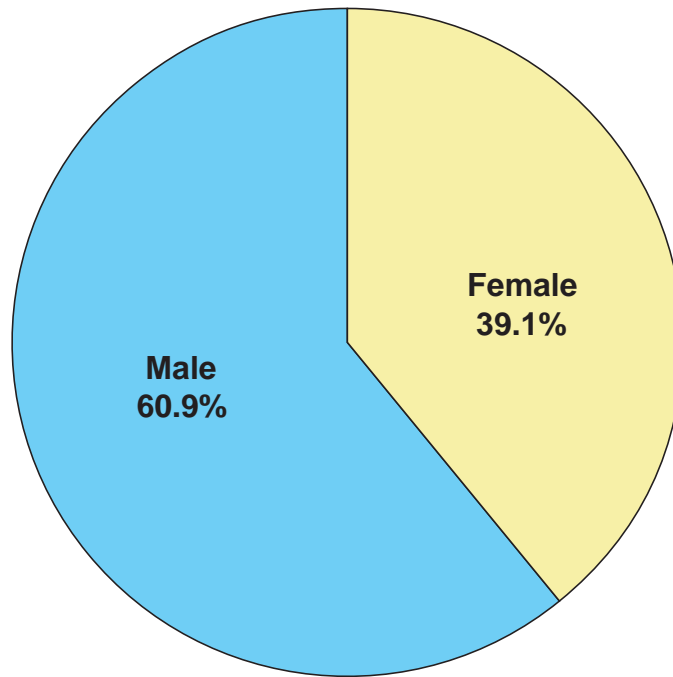
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## Gender of Individuals Served by DDS\*

December 1996



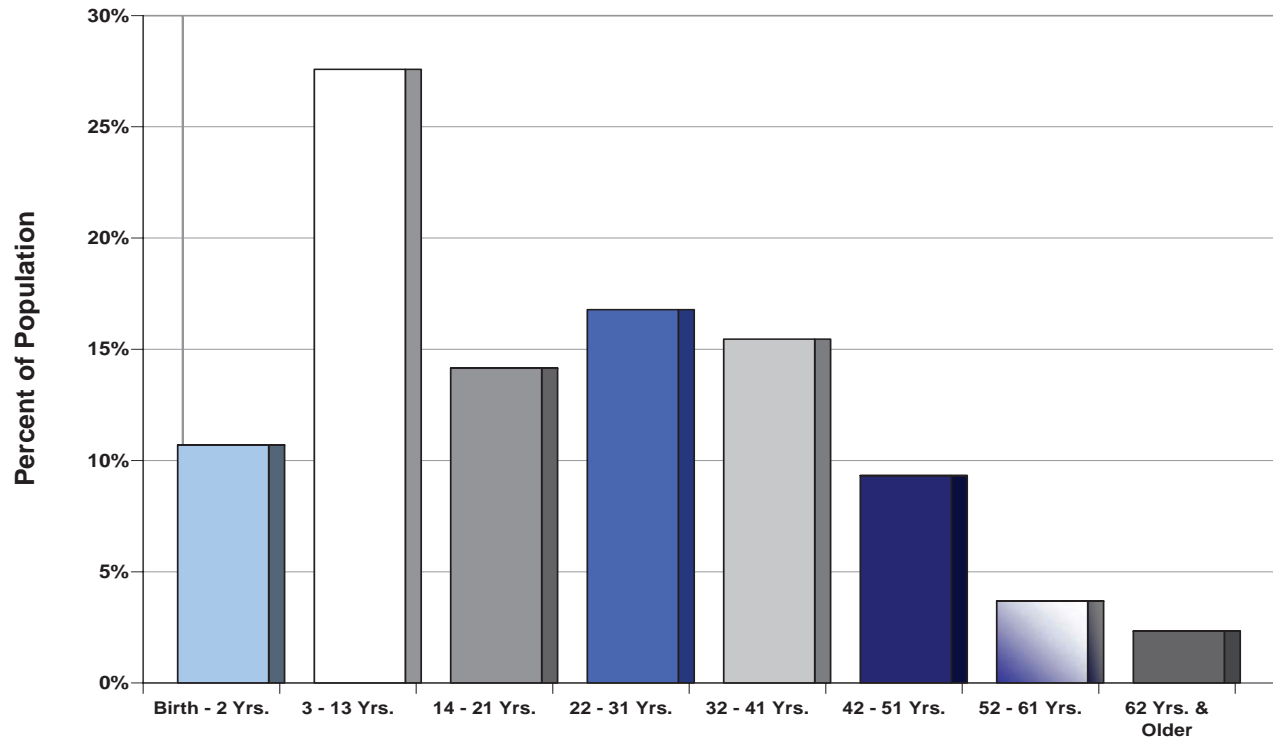
December 2006



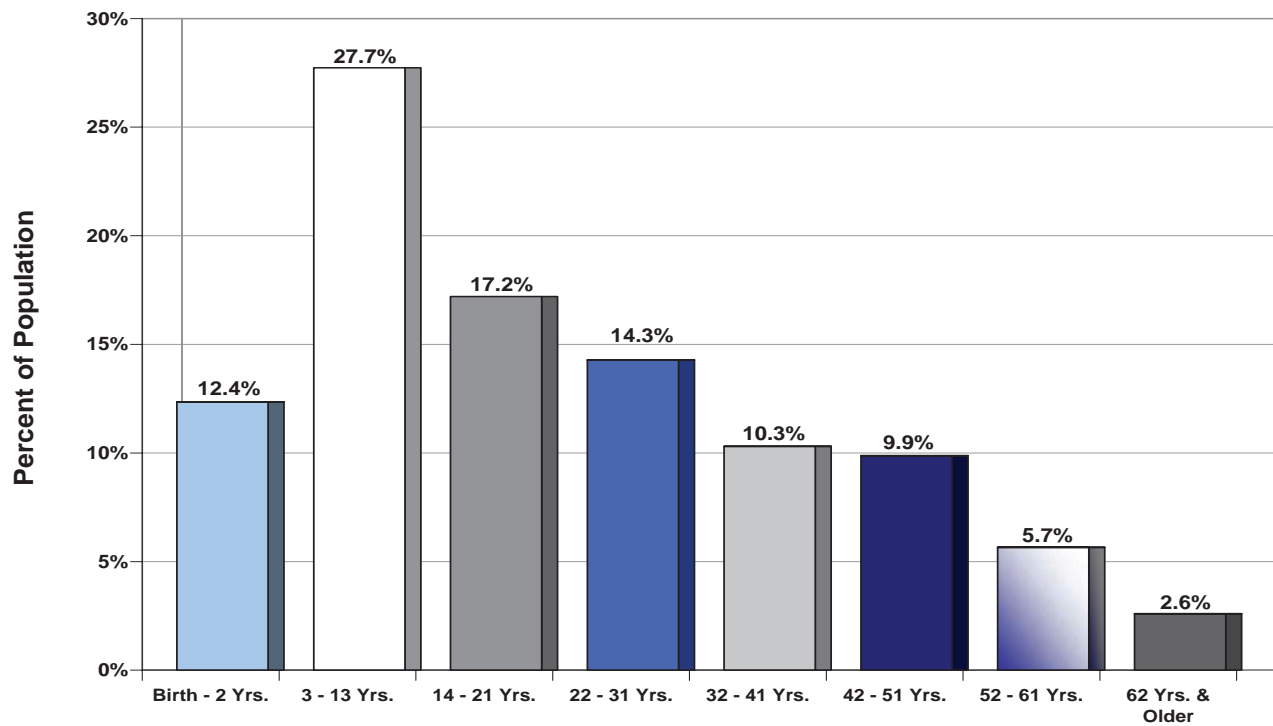
\*Persons with CMF Status Codes 1, 2 and 8

## Age of Individuals Served by DDS\*

December 1996



December 2006

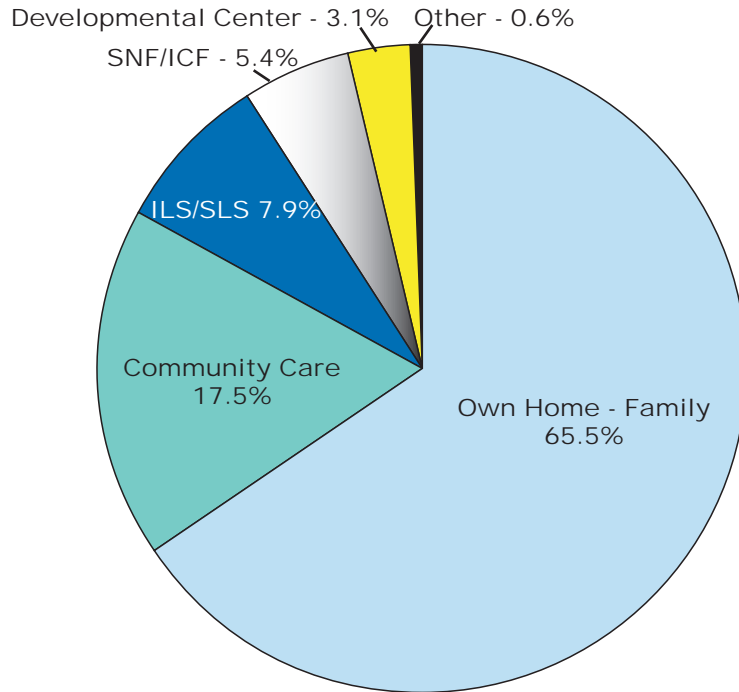


\*Persons with CMF Status Codes 1, 2 and 8

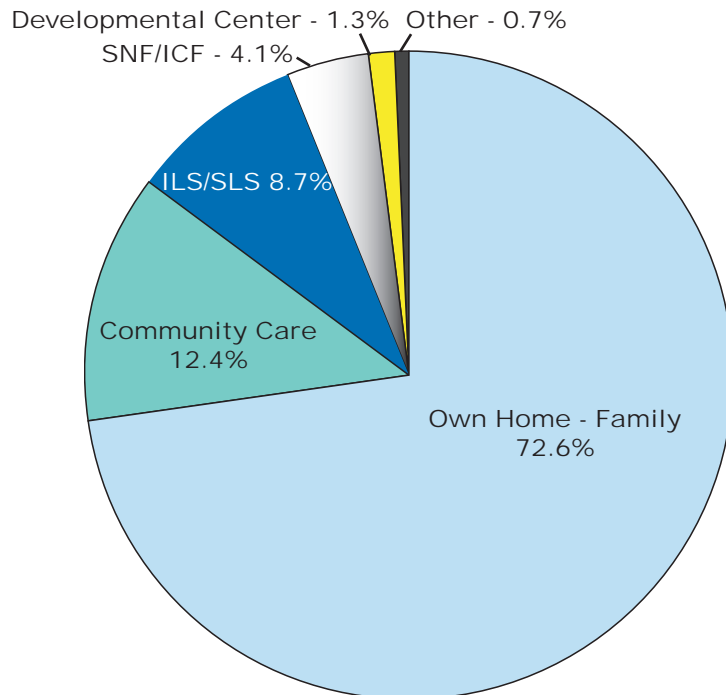
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## Residence of Individuals Served by DDS\*

**December 1996**



**December 2006**

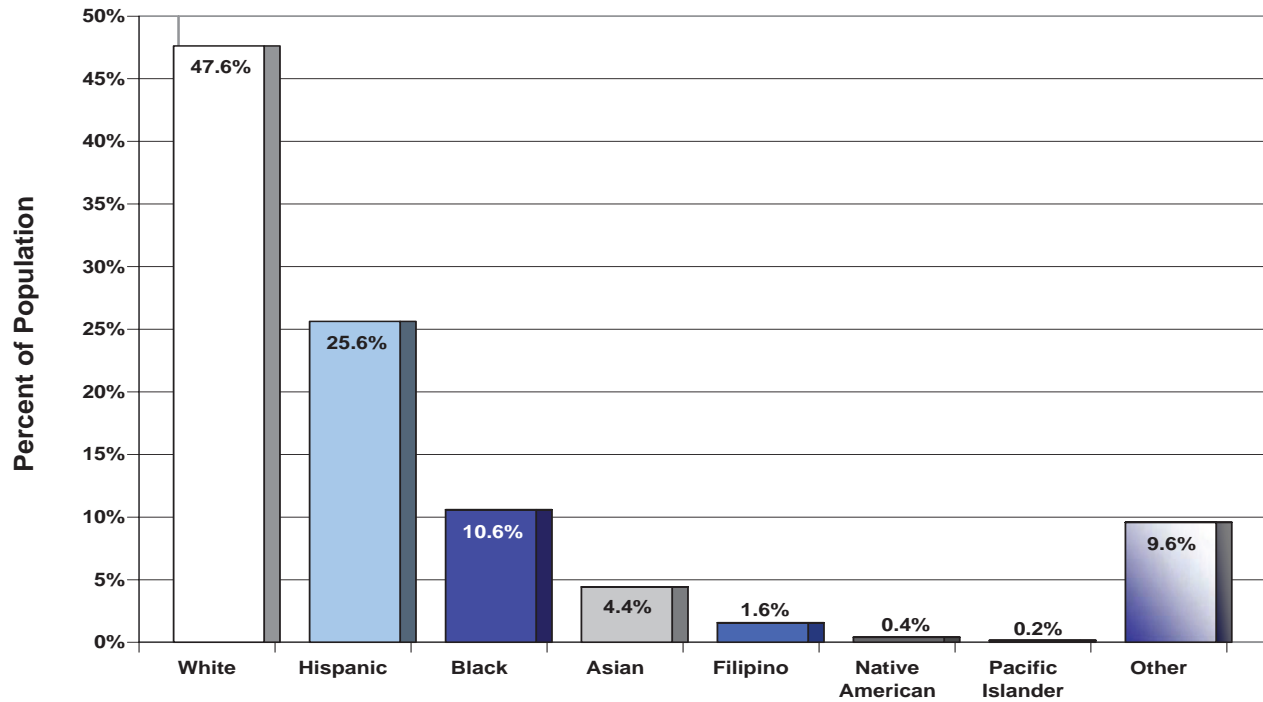


\*Persons with CMF Status Codes 1, 2 and 8

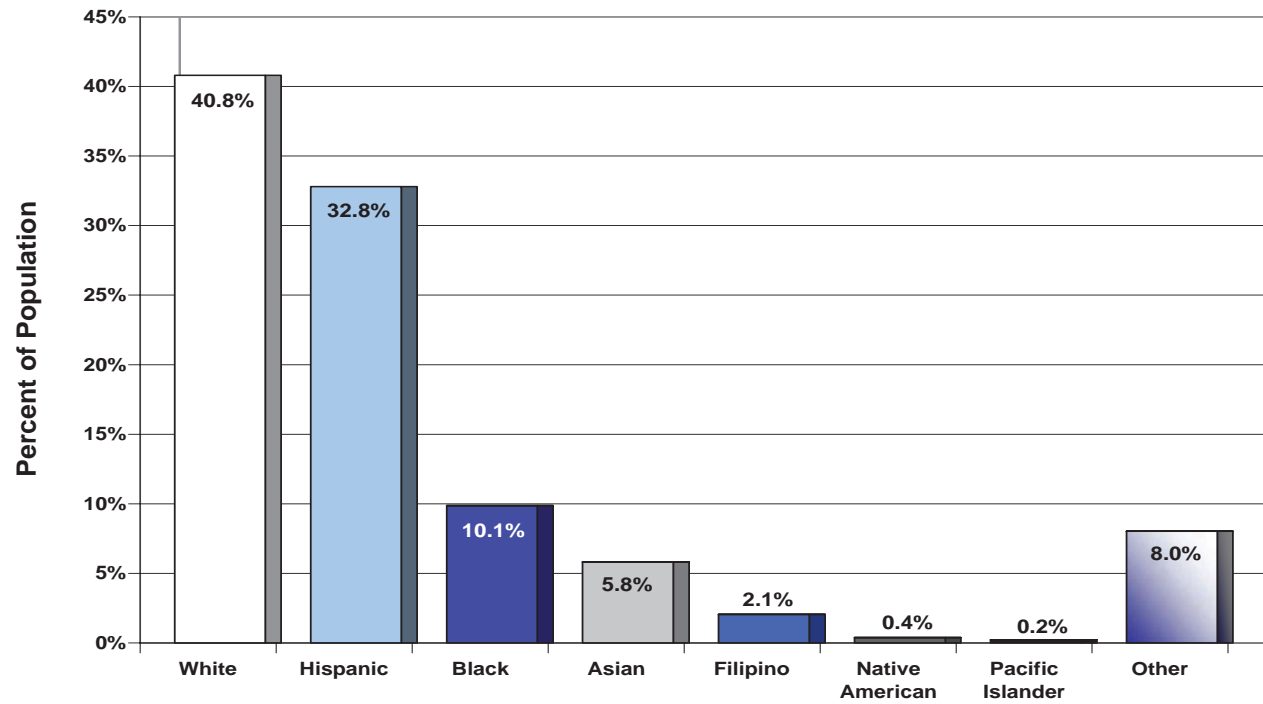
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## Ethnicity of Individuals Served by DDS\*

December 1996



December 2006



\*Persons with CMF Status Codes 1, 2 and 8

## ***Residence Types of Persons with Developmental Disabilities by Age Group in December 1996 and December 2006***

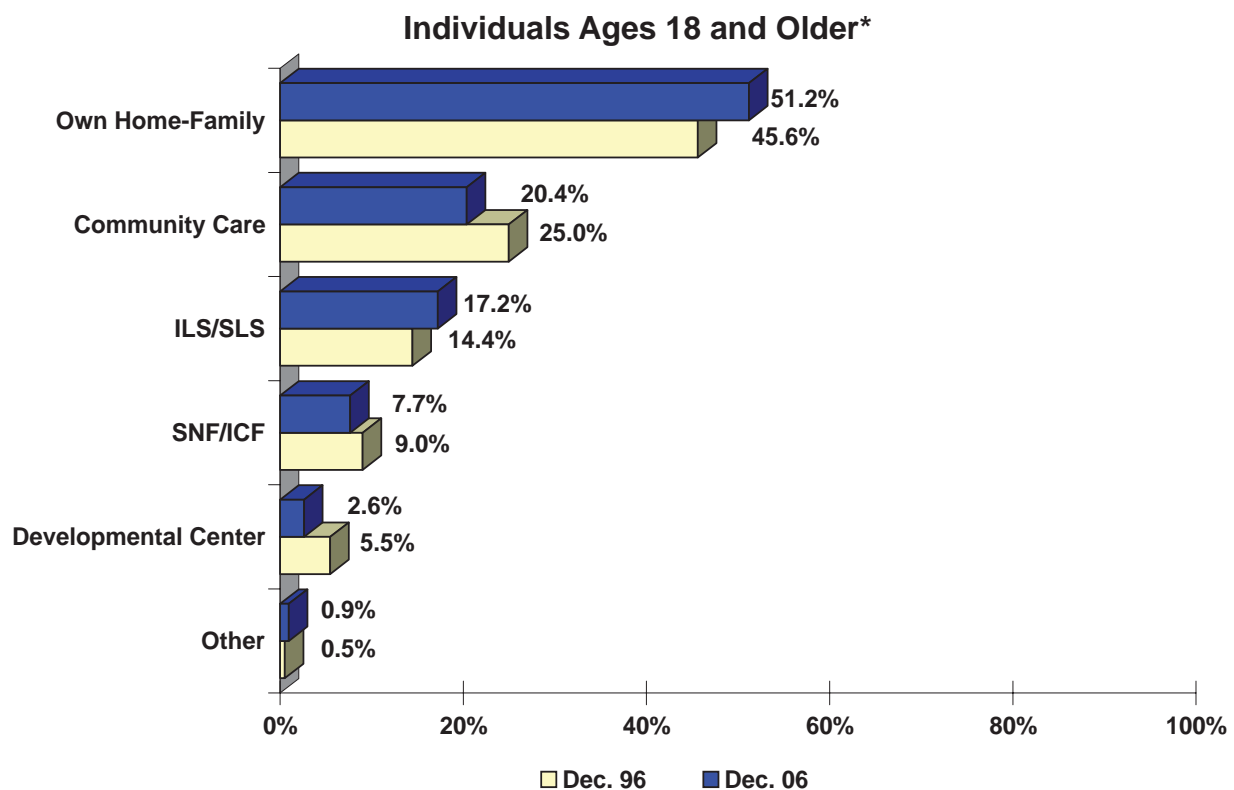
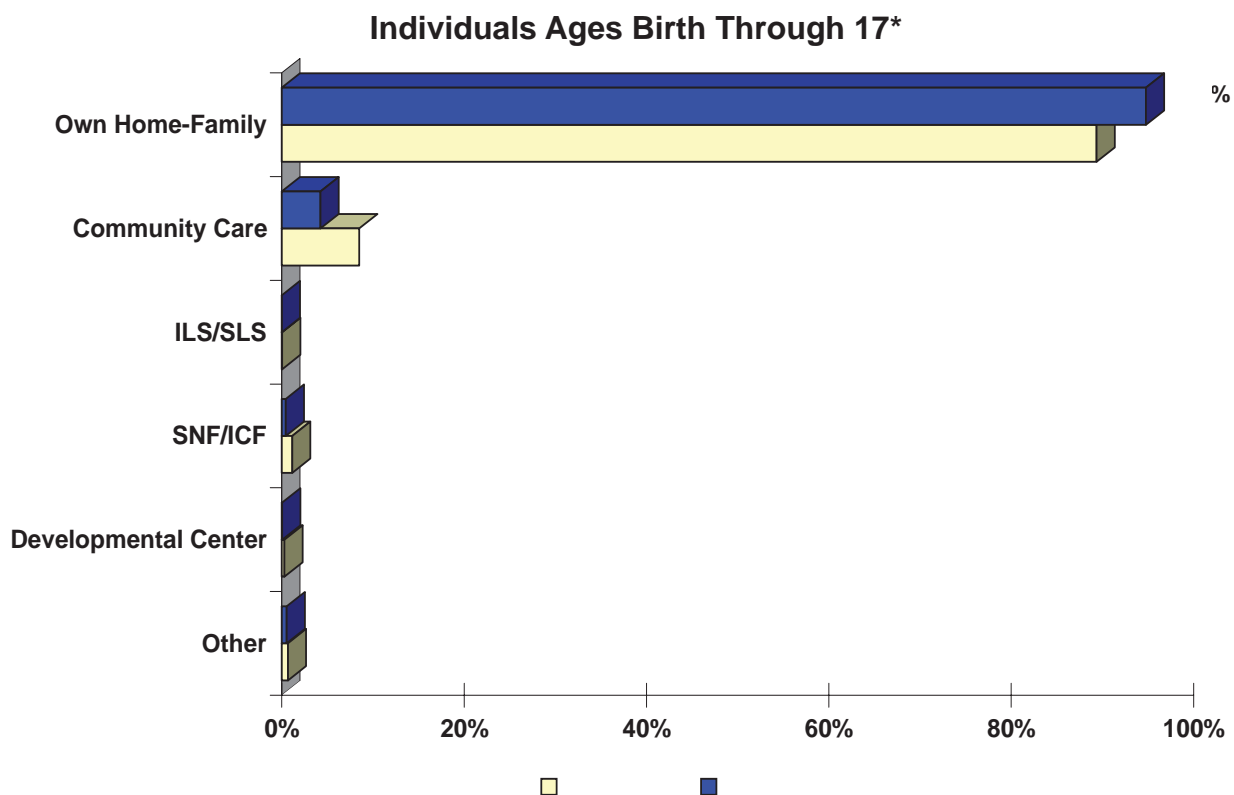
During the period from December 1996 through December 2006, the percentage of persons served by DDS in both the "Birth through 17" and "18 and Older" age groups increased for those residing in the home of a parent, guardian or conservator (labeled "Own Home-Family" in the tables below) and decreased for those residing in community care settings and developmental centers. These changes are consistent with the high priority the Lanterman Act places on providing opportunities for children with developmental disabilities to live with families and for people of all ages to live in home-like environments.

The percentage of persons 18 years of age and older residing in independent and supported living settings also increased between December 1996 and December 2006. This change also follows the Lanterman Act's direction to provide "opportunities for individuals with developmental disabilities to be integrated into the mainstream of life in their home communities, including supported living and other appropriate community living arrangements."

<b>Individuals Ages Birth through 17</b>				
<b>Residence Type</b>	<b>as of Dec. 1996</b>		<b>as of Dec. 2006</b>	
	<b>Number of Persons</b>	<b>Percentage of Total</b>	<b>Number of Persons</b>	<b>Percentage of Total</b>
Own Home-Family	56,985	89.4%	100,322	94.8%
Community Care	5,417	8.5%	4,488	4.2%
ILS/SLS	28	0.0%	3	0.0%
SNF/ICF	728	1.1%	457	0.4%
Developmental Center	185	0.3%	37	0.0%
Other	428	0.7%	559	0.5%
<b>Total</b>	<b>63,771</b>	<b>100.0%</b>	<b>105,866</b>	<b>100.0%</b>

<b>Individuals Ages 18 and Older</b>				
<b>Residence Type</b>	<b>as of Dec. 1996</b>		<b>as of Dec. 2006</b>	
	<b>Number of Persons</b>	<b>Percentage of Total</b>	<b>Number of Persons</b>	<b>Percentage of Total</b>
Own Home-Family	34,958	45.6%	55,882	51.2%
Community Care	19,133	25.0%	22,256	20.4%
ILS/SLS	11,075	14.4%	18,799	17.2%
SNF/ICF	6,902	9.0%	8,354	7.7%
Developmental Center	4,181	5.5%	2,854	2.6%
Other	395	0.5%	1,035	0.9%
<b>Total</b>	<b>76,644</b>	<b>100.0%</b>	<b>109,180</b>	<b>100.0%</b>

Note: The tables above include only persons with status codes 1, 2 and 8.  
 For a description of status codes, see page 1.  
 For a description of residence types, see page 4.



\*Persons with CMF Status Codes 1, 2 and 8

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## ***Age of Persons at Time of Intake Into Developmental Services System and Demographics of Persons Engaged in the Intake and Assessment Process***

The age of individuals at the time of intake (based on the first CMF date) was analyzed for persons who entered the developmental services system during the ten-year period from the end of December 1996 through December 2006. The following patterns were found:

- Sixty-two percent of persons entering the developmental services system were under three years of age. Seventy-three percent were five years of age or younger.
- Entries into the developmental services system declined during the typical school ages but increased as individuals “aged out” of the school system.
- Another peak in the number of persons entering the developmental services system was found as individuals reached their mid 30s.

Information relating to the gender and age of persons engaged in the intake and assessment process in December 1996 and December 2006 is provided on the next page.<sup>3</sup> Comparisons across the years may indicate changes are occurring in the gender and age distribution of persons involved in the intake and assessment process. However, because the numbers for each year are based on only one point in time, a more complete study would be required to draw conclusions.

The percent of the population engaged in intake who were male increased from 61 percent in December 1996 to 67 percent in December 2006. In age distribution, the age group of birth through two years was the segment of the intake population with the largest increase, growing from 32 percent in December 1996 to 51 percent in December 2006. The combined age group of persons 22 through 41 years declined the most from 10 percent of the intake population in December 1996 to 3 percent in December 2006.

Of the 7,656 persons who received intake and assessment services in December 2006, 54 percent were determined eligible to receive services and given a “high risk infant” status (code 1) or an active status (codes 2 or 8) on the CMF as of July 1, 2007.

<sup>3</sup>Prior editions of the Fact Book offer similar information for other years.

## ***Demographics of Persons Engaged in the Intake and Assessment Process***

**Persons with Status Code 0**

**Based on Client Master File as of December in 1996 and 2006**

	December 1996		December 2006	
Birth to 2 Yrs	1,954	32.4%	3,892	50.8%
03 to 13 Yrs	2,388	39.6%	2,668	34.8%
14 to 21 Yrs	844	14.0%	679	8.9%
22 to 31 Yrs	364	6.0%	163	2.1%
32 to 41 Yrs	245	4.1%	90	1.2%
42 to 51 Yrs	146	2.4%	94	1.2%
52 to 61 Yrs	55	0.9%	52	0.7%
62 and Older	41	0.7%	18	0.2%
<b>Total</b>	<b>6,037</b>	<b>100.0%</b>	<b>7,656</b>	<b>100.0%</b>

	December 1996		December 2006	
Male	3,699	61.3%	5,152	67.3%
Female	2,338	38.7%	2,504	32.7%
<b>Total</b>	<b>6,037</b>	<b>100.0%</b>	<b>7,656</b>	<b>100.0%</b>

**Note:** The source of the data depicted in the "Demographics of Persons Engaged in the Intake and Assessment Process" tables is the CMF. Please refer to definition on page 1.

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## ***Characteristics of Persons with CDERs<sup>4</sup> on File as of December in 1996 and 2006***

DDS collects data on the characteristics of the persons it serves. In the tables and charts that follow, information on four of the major categories of developmental disabilities of persons served by DDS are presented for December 1996 and December 2006. Similar data have been reported for other years in prior editions of the Fact Book.

The composition of the population by type of developmental disability shows some significant shifts from December 1996 to December 2006. For example, only 13.9 percent of the population served had “No Mental Retardation (No MR)” recorded on their CDERs in December 1996. By December 2006, the percent with “No MR” had grown to 24 percent. During this same time period, the percentage of persons reported to have “Moderate”, “Severe” or “Profound” mental retardation declined from a collective 41.7 percent to 31 percent. The percent of the population with epilepsy and the percent with cerebral palsy also declined over this period from 24.6 to 20.1 percent for epilepsy and from 22.9 to 18.4 percent for cerebral palsy. The only category that showed an overall increase as a percentage of the population was autism, which grew from 6.4 percent in December 1996 to 17.6 percent in December 2006.<sup>5</sup>

The accumulated growth rates spanning December 1996 through December 2006 for the four major categories of developmental disabilities are compared on page 18. In addition, the graph on page 19 displays information on the combinations of developmental disabilities that persons served by DDS have.

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<sup>4</sup>Only persons with a Client Development Evaluation Report (CDER) on file are included in the “Characteristics of Persons” article, tables and graphs. The CDER file contains diagnostic and evaluation data including developmental, cognitive, behavioral and medical information that is recorded when a person is given a client development evaluation. All persons diagnosed with a developmental disability who have active status in the DDS system should have a CDER on file. For children under three years of age, a different, age-appropriate assessment tool called the Early Start Report is used instead of the CDER.

<sup>5</sup>For detailed analyses regarding persons with autism who are served by DDS, please refer to the 2003 DDS Autism Report available on-line at [www.dds.ca.gov/autism](http://www.dds.ca.gov/autism).

Mental Retardation				
Dec. 1996			Dec. 2006	
Level of Mental Retardation	Number of Persons	% of Total	Number of Persons	% of Total
No MR	16,348	13.9%	44,832	24.0%
Mild	44,868	38.2%	71,366	38.3%
Moderate	24,469	20.8%	31,912	17.1%
Severe	13,080	11.1%	14,966	8.0%
Profound	11,546	9.8%	11,007	5.9%
Unknown	7,228	6.1%	12,360	6.6%
<b>Total</b>	<b>117,539</b>	<b>100.0%</b>	<b>186,443</b>	<b>100.0%</b>

**Mental Retardation** is characterized by significant limitations both in intellectual functioning (i.e., an IQ of approximately 70 or below) and in adaptive behavior as expressed in conceptual, social and practical adaptive skills. Levels of retardation are reported here as mild, moderate, severe, profound, no MR (i.e., mental retardation is not present), or unknown.

Epilepsy				
Dec. 1996			Dec. 2006	
Has Epilepsy	Number of Persons	% of Total	Number of Persons	% of Total
No	88,648	75.4%	148,890	79.9%
Yes	28,891	24.6%	37,553	20.1%
<b>Total</b>	<b>117,539</b>	<b>100.0%</b>	<b>186,443</b>	<b>100.0%</b>

**Epilepsy** is defined as recurrent, unprovoked seizures. Seizures can cause loss of muscle control, tremors, loss of consciousness and other symptoms. A modification of "International Classification of Epileptic Seizures" is employed for describing seizures.

Cerebral Palsy				
Dec. 1996			Dec. 2006	
Has CP	Number of Persons	% of Total	Number of Persons	% of Total
No	90,615	77.1%	152,084	81.6%
Yes	26,924	22.9%	34,359	18.4%
<b>Total</b>	<b>117,539</b>	<b>100.0%</b>	<b>186,443</b>	<b>100.0%</b>

**Cerebral Palsy** includes two types of motor dysfunction: (1) nonprogressive lesion or disorder in the brain occurring during intrauterine life or the perinatal period and characterized by paralysis, spasticity, or abnormal control of movement or posture which is manifest prior to two or three years of age, and (2) other significant motor dysfunction appearing prior to age 18.

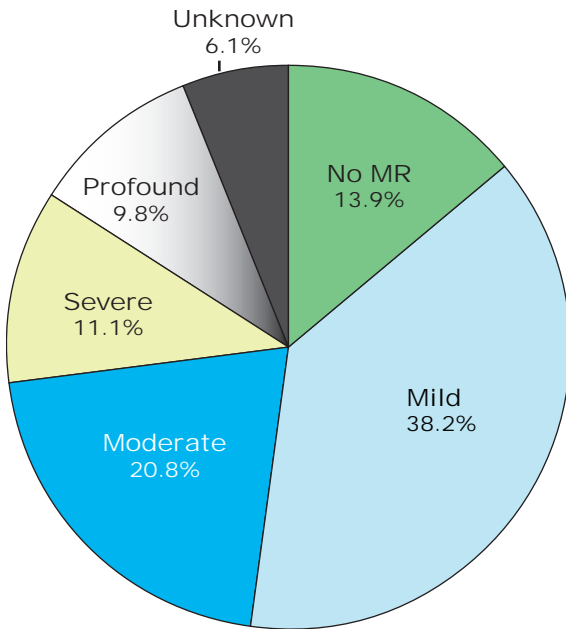
Autism				
Dec. 1996			Dec. 2006	
Has Autism	Number of Persons	% of Total	Number of Persons	% of Total
No	110,052	93.6%	153,634	82.4%
Yes	7,487	6.4%	32,809	17.6%
<b>Total</b>	<b>117,539</b>	<b>100.0%</b>	<b>186,443</b>	<b>100.0%</b>

**Autism** is a neurodevelopmental disorder with multiple etiologies defined as a syndrome causing gross and sustained impairment in social interaction and communication with restricted and stereotyped patterns of behavior, interests, and activities that appear prior to the age of three. The number of persons reported with Autism include both the diagnosis of Autism-Full Syndrome and the diagnosis of Autism-Residual State, as recorded on CDER.

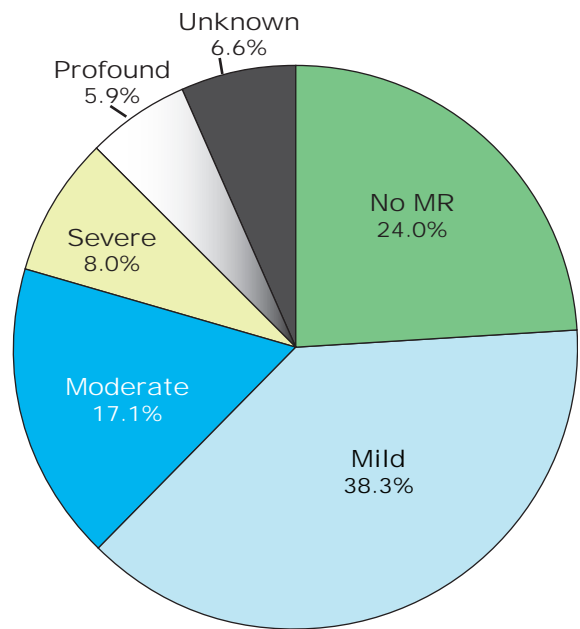
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## Level of Mental Retardation

**December 1996**

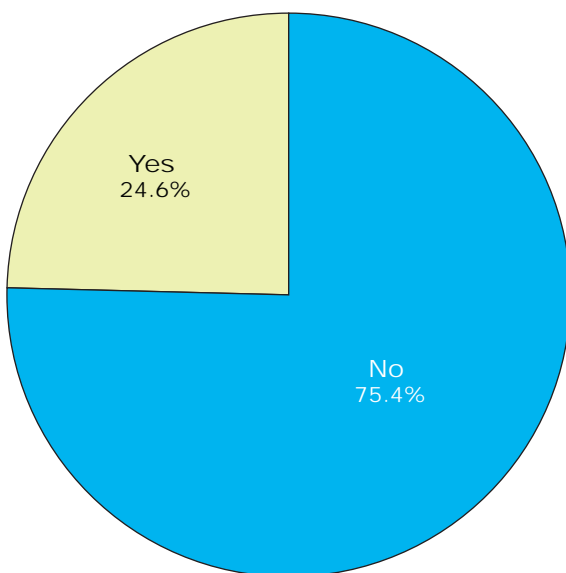


**December 2006**

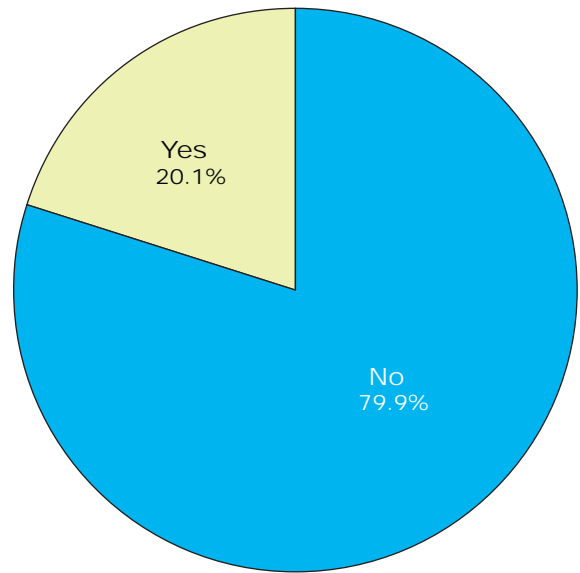


## Epilepsy or Seizure Disorder

**December 1996**



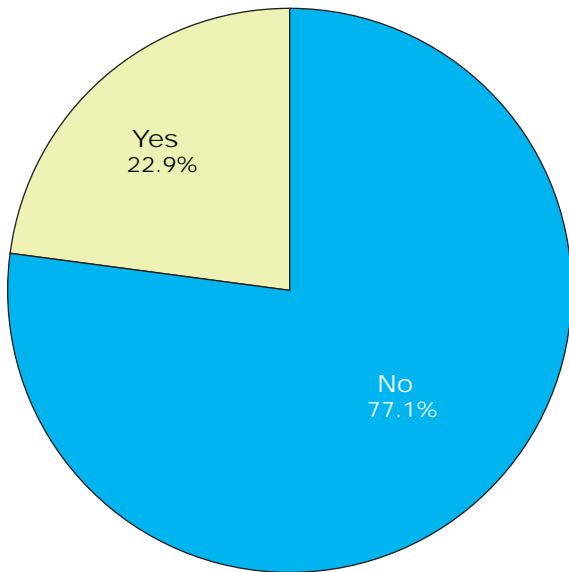
**December 2006**



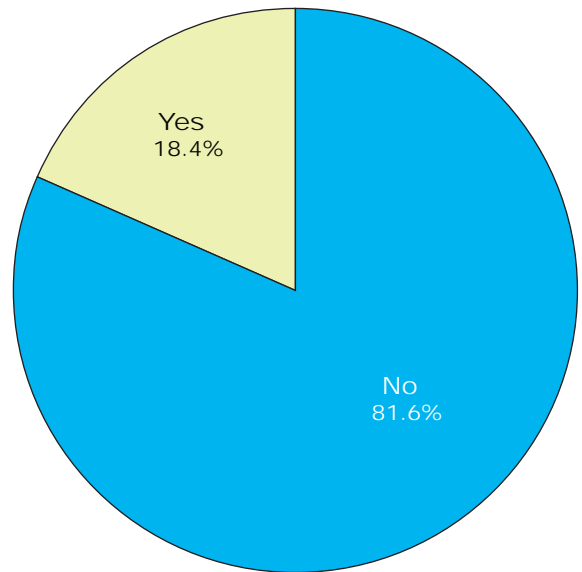
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## Cerebral Palsy or Similar Motor Dysfunctions

December 1996

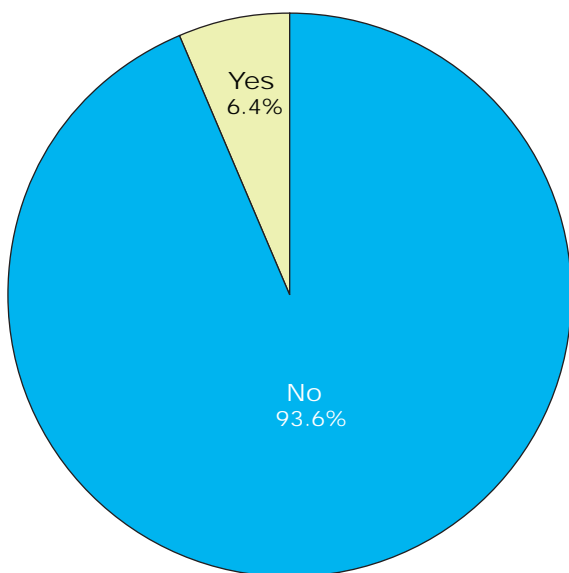


December 2006

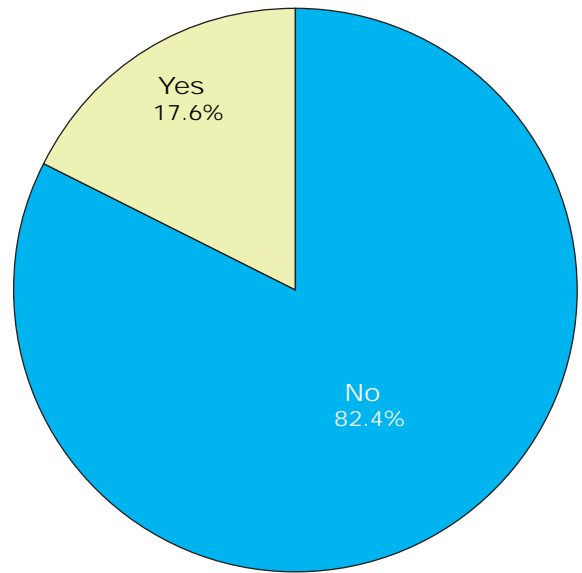


## Autism

December 1996



December 2006

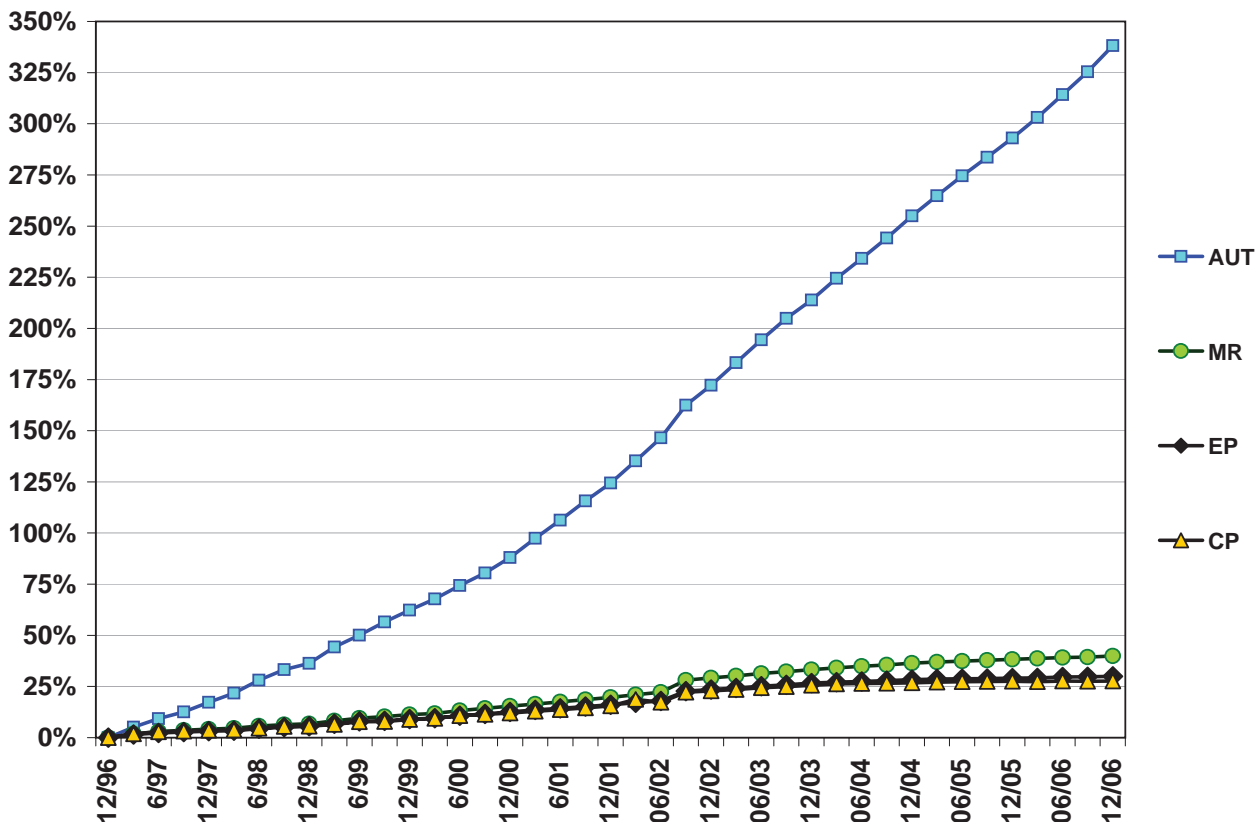


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## ***Trends of Four Major Categories of Developmental Disabilities Compared***

*Population Growth from December 1996 through December 2006  
Based on CDERs at Quarterly Intervals*

An examination of growth in the population served by DDS with CDERs on file for each of the four primary categories of developmental disabilities over a ten-year period, from December 1996 through December 2006, reveals a significant rate of growth for those with autism compared to the other three categories of developmental disabilities. While the total number of persons served with CDERs increased 59 percent (117,539 to 186,443), the number of persons with autism on CDERs grew 338 percent (7,487 to 32,809) from December 1996 through 2006. During this same period, the other categories showed the following growth: 1) mental retardation, 40 percent (101,191 to 141,611 persons); 2) epilepsy, 30 percent (28,891 to 37,553 persons); and 3) cerebral palsy, 28 percent (26,924 to 34,359 persons). As shown on the next page, individuals may have more than one developmental disability.



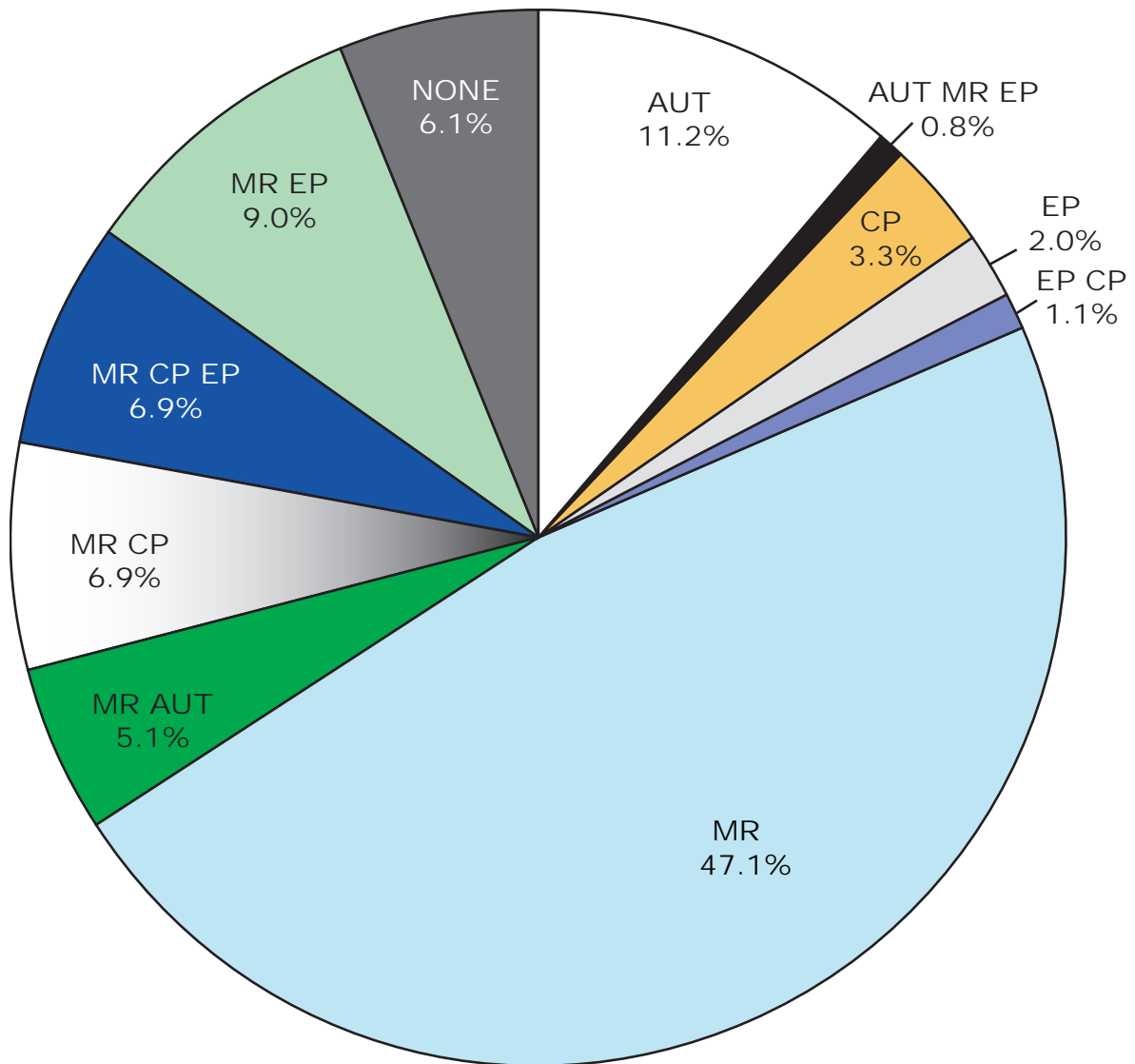
MR = Mental Retardation; AUT = Autism; EP = Epilepsy/Seizure Disorder; CP = Cerebral Palsy

Note: Population numbers for each category of developmental disability identified above should not be added together, because there is duplication of persons across categories.

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## ***Information on Developmental Disability Combinations***

*Based on December 2006 CDER*



Note: The four major categories of developmental disabilities have been abbreviated in the chart above as follows--Autism (AUT), Cerebral Palsy (CP), Epilepsy/Seizure Disorder (EP), and Mental Retardation (MR). The chart segment labeled "None" represents the fifth category of developmental disability defined as a disabling condition closely related to mental retardation that requires similar treatment. Five developmental disability combinations were omitted from the chart above because the percent of people who fell in these categories was small. The combinations and percents omitted from the chart are as follows--AUT/EP=0.3%, AUT/MR/CP=0.1%, AUT/CP=0.1%, AUT/EP/CP=0.0% and AUT/MR/EP/CP=0.1%.

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# What People Receive

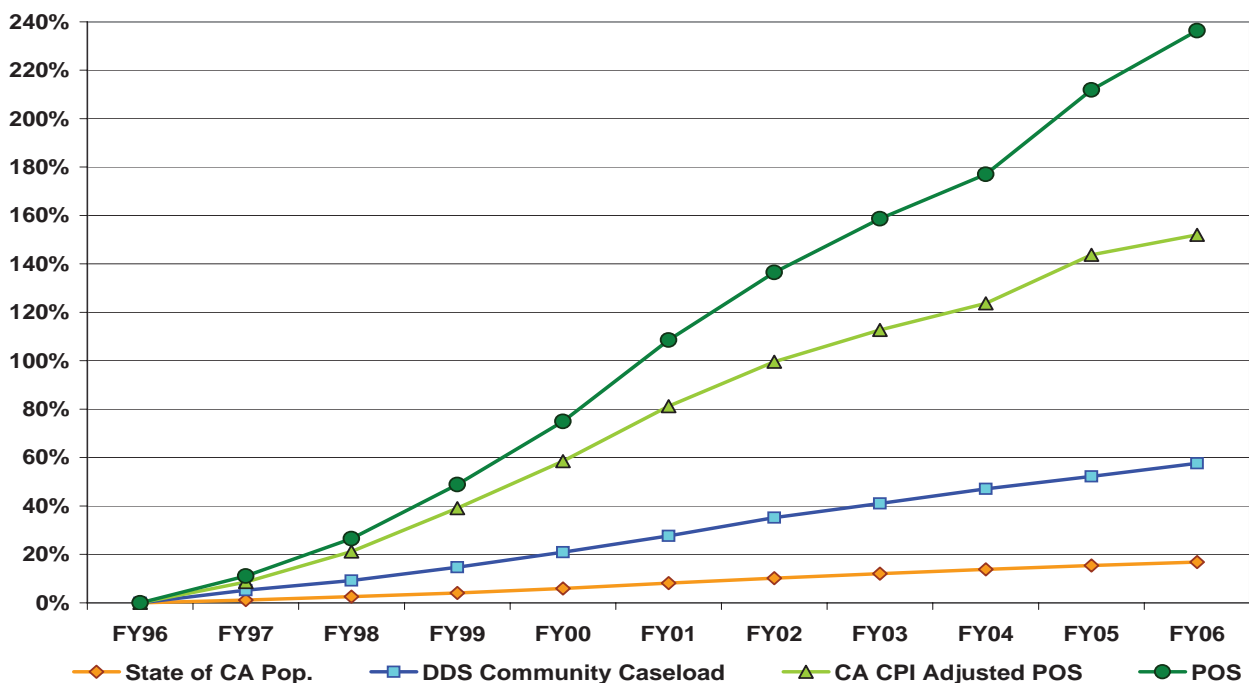


“Outdoor Concert” is an artwork created by artist Jason Monzon using watercolor and colored pencils on paper. Born in 1980, Jason has created art at Creativity Explored since 2006. He enjoys using watercolor, colored pencils, and collage. He also has started creating sculpture in paper mache. Monzon is a meticulous artist who is notable for his excellent draftsmanship in creating highly detailed landscapes and portraits. For the past 25 years, Creativity Explored, a nonprofit visual arts center located in San Francisco, has been assisting artists with developmental disabilities to create, exhibit, and sell art. The artwork of Jason Monzon and other artists can be viewed online at [www.creativityexplored.org](http://www.creativityexplored.org).

## POS Growth Compared to DDS Caseload and State of California Population Growth - Fiscal Years (FY) 1995/96 through 2005/06

The cumulative rate of growth for Purchase of Service (POS) expenditures from FY 1995/96 through FY 2005/06 totaled 236 percent. The cumulative growth rate of POS dollars adjusted by the California Consumer Price Index (CA CPI)<sup>6</sup> totaled 152 percent. By comparison, the community caseload (persons with status codes 1 and 2 on the CMF in June of each FY) grew 58 percent over this period. The State of California population from January 1996 through January 2006 grew 17 percent (based on Dept. of Finance estimates).

**Comparison of Cumulative Growth in POS, CA CPI Adjusted POS, DDS Community Caseload, and State of California Population**  
Fiscal Years 1995/96 Through 2005/06



Fiscal Year	State of CA Pop (DOF Jan. Estimates)		DDS Caseload (CMF Status 1 & 2)		CA CPI Adjusted POS		POS Expenditures	
	Number of Persons	Cumulative Growth	Number of Persons	Cumulative Growth	Dollars	Cumulative Growth	Dollars	Cumulative Growth
1995/96	31,837,399	0	132,411	0	\$455,156,656	0	\$706,403,130	0
1996/97	32,207,869	1.16%	139,321	5.22%	\$494,120,749	8.56%	\$784,663,750	11.08%
1997/98	32,657,877	2.58%	144,619	9.22%	\$551,546,585	21.18%	\$893,505,467	26.49%
1998/99	33,140,771	4.09%	151,926	14.74%	\$633,328,227	39.15%	\$1,051,324,857	48.83%
1999/00	33,721,583	5.92%	160,091	20.90%	\$721,704,353	58.56%	\$1,235,557,853	74.91%
2000/01	34,441,561	8.18%	169,022	27.65%	\$824,781,936	81.21%	\$1,473,060,538	108.53%
2001/02	35,088,671	10.21%	179,028	35.21%	\$908,474,175	99.60%	\$1,670,684,007	136.51%
2002/03	35,691,534	12.11%	186,763	41.05%	\$968,199,514	112.72%	\$1,826,992,482	158.63%
2003/04	36,252,878	13.87%	194,769	47.09%	\$1,018,313,627	123.73%	\$1,957,198,791	177.07%
2004/05	36,743,186	15.41%	201,614	52.26%	\$1,109,365,236	143.73%	\$2,203,199,359	211.89%
2005/06	37,195,240	16.83%	208,687	57.61%	\$1,147,222,361	152.05%	\$2,375,897,509	236.34%

<sup>6</sup>The source of the California CPI index is the California Department of Finance (DOF). DOF calculates the index using a formula developed by the California Department of Industrial Relations.

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## ***Purchase of Service Expenditures by Budget Category Fiscal Year 2005/06***

POS budget categories include Out-of-Home, Day Programs, Work Activity Program, Supported Employment, and Other Services. The “Out-of-Home” category includes the care, supervision, and training for individuals in community care facilities. “Day Programs” include community-based training such as behavior management, self-help/care skills, community integration, and infant development programs. “Transportation” includes transportation services provided by transportation companies, residential facilities, day programs, public transportation, and family/friends. “Work Activity Programs” provide services normally in non-integrated settings where individuals are paid for their work and receive vocational training. “Supported Employment Programs” include individual and group services in integrated settings where paid workers are supported by job coaches. The “Other Services” category includes the sub-categories of Support Services, Miscellaneous Services, In-home Respite, Health Care, and Out-of-Home Respite.

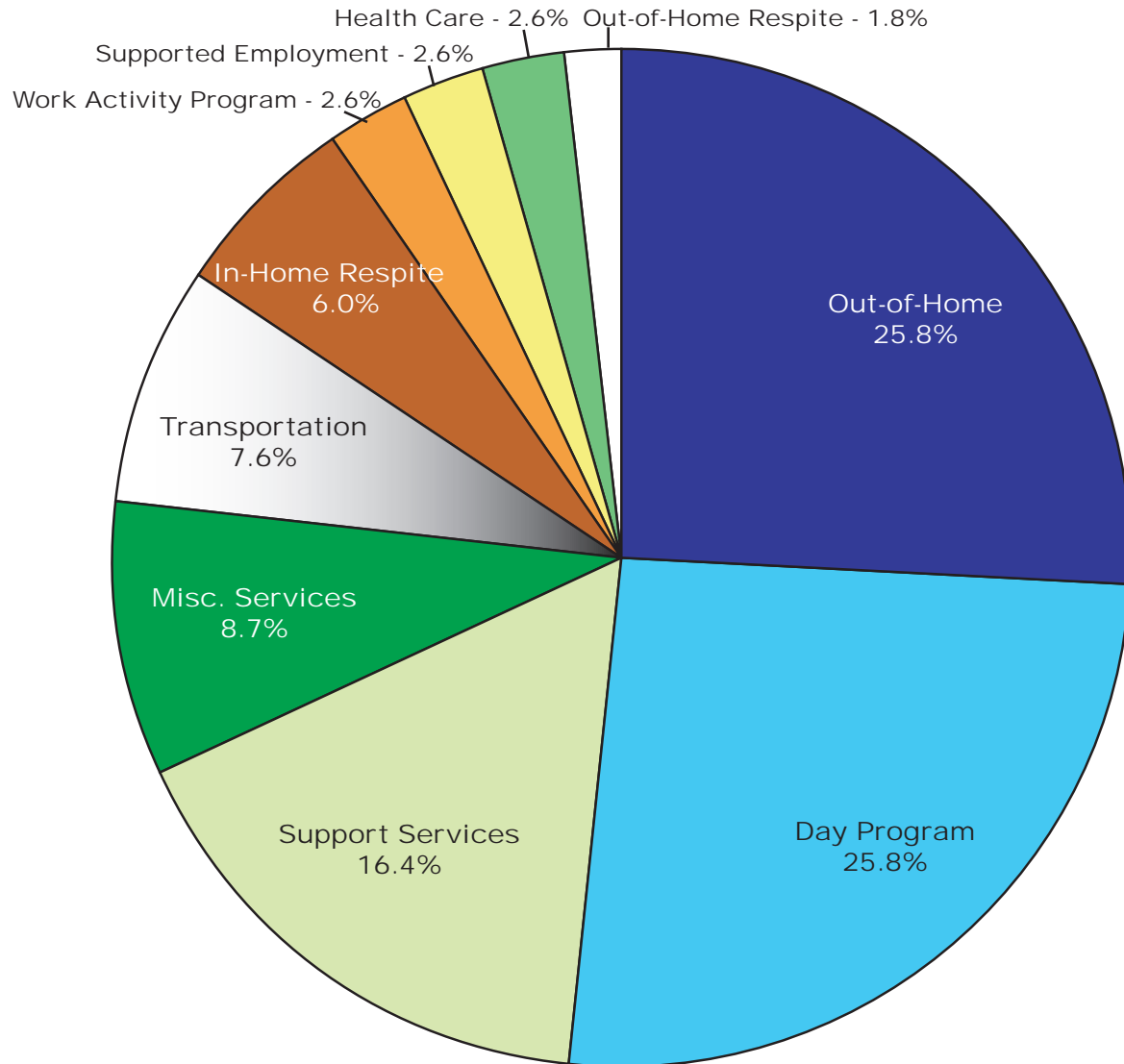
In FY 2005/06, POS expenditures totaled nearly 2.4 billion dollars. Between FY 2004/05 and 2005/06, total POS expenditures increased 8.3 percent. The category of “Work Activity Program” showed the smallest percentage growth with an increase of only 0.1 percent. The category of “Miscellaneous Services” had the largest percentage increase, growing 26.1 percent between FY 2004/05 and FY 2005/06. The two categories that increased the most in terms of their share of total POS expenditures in FY 2005/06 compared to FY 2004/05 were Support Services (15.2% of FY 2004/05 total to 16.4% of FY 2005/06 total) and Miscellaneous Services (7.5% of FY 2004/05 total to 8.7% of FY 2005/006 total).

<b>Budget Category</b>	<b>Fiscal Year 2005/06</b>	
	<b>POS Dollars</b>	<b>% of Total</b>
Out-of-Home	\$613,123,902	25.8%
Day Program	612,348,396	25.8%
Support Services	389,647,759	16.4%
Misc. Services	206,637,219	8.7%
Transportation	181,232,662	7.6%
In-Home Respite	142,496,321	6.0%
Work Activity Program	62,650,779	2.6%
Supported Employmnt	62,292,710	2.6%
Health Care	61,731,268	2.6%
Out-of-Home Respite	43,736,495	1.8%
<b>Total</b>	<b>\$2,375,897,509</b>	<b>100.0%</b>

Note: Regional centers can submit purchase of service claims to DDS years after the services have been delivered. Dollar amounts are recorded in the POS file according to when the services were rendered, not when the claims were received. As such, the POS dollar amounts reflected for prior years continue to change as additional vendor billings are received for services delivered during previous years. The POS file at DDS HQ is updated monthly. While all of the POS-related articles in this Fact Book edition are based on the POS file as updated in July 2007, dollar amounts reported for prior years may not agree with the dollar amounts reported for the same years in previous editions of the Fact Book.

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**Fiscal Year 2005/06 POS Dollars**



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## ***POS Expenditure Changes Fiscal Years 2001/02 through 2005/06***

While most service categories increased in total POS dollars spent in FY 2005/06 compared to 2001/02, the percentage change in dollars over the period varied considerably from one service category to the next. Two service categories that had fewer POS dollars in FY 2005/06 than in FY 2001/02 were “Mobility Training” that decreased 29 percent and “Activity Center” that decreased 1 percent.

The highest growth category in terms of the percentage change in POS dollars over the five years was “Behavioral Services” (increased 194 percent). Other high growth categories over this time span included “Other Look-Alike Programs” (increased 140 percent) and “Social/Recreational Activities” (increased 101 percent). By comparison, total POS expenditures increased 42 percent between FY 2001/02 and 2005/06.

While the expenditure growth rate for a given service category may be large, the difference in terms of actual POS dollars spent may far less than the change in dollars for categories with smaller growth rates. For example, between FY 2001/02 and 2005/06, the POS dollars spent for “Social/Recreational Activities” increased 101 percent, but in terms of total dollars, the gain was less than \$12 million. Conversely, POS expenditures for “Residential Services” over this five year period grew about 25 percent, but the dollar increase totalled over \$118 million.

The relative share of total POS dollars that a service category represents also deserves attention. For example, the combined POS dollar amount in FY 2005/06 for the three service categories with the highest growth rates between FY 2001/02 and 2005/06 (i.e., “Behavioral Services”, “Other Look-Alike Programs”, and “Social/Recreational Activities”) represented about eight percent of the total POS dollars. In contrast, “Residential Services” and “Adult Day Programs”, two service categories with expenditure growth rates below the growth rate for total POS dollars during the five year span, together represented almost half of all POS dollars spent (25 percent and 23 percent, respectively) in FY 2005/06.

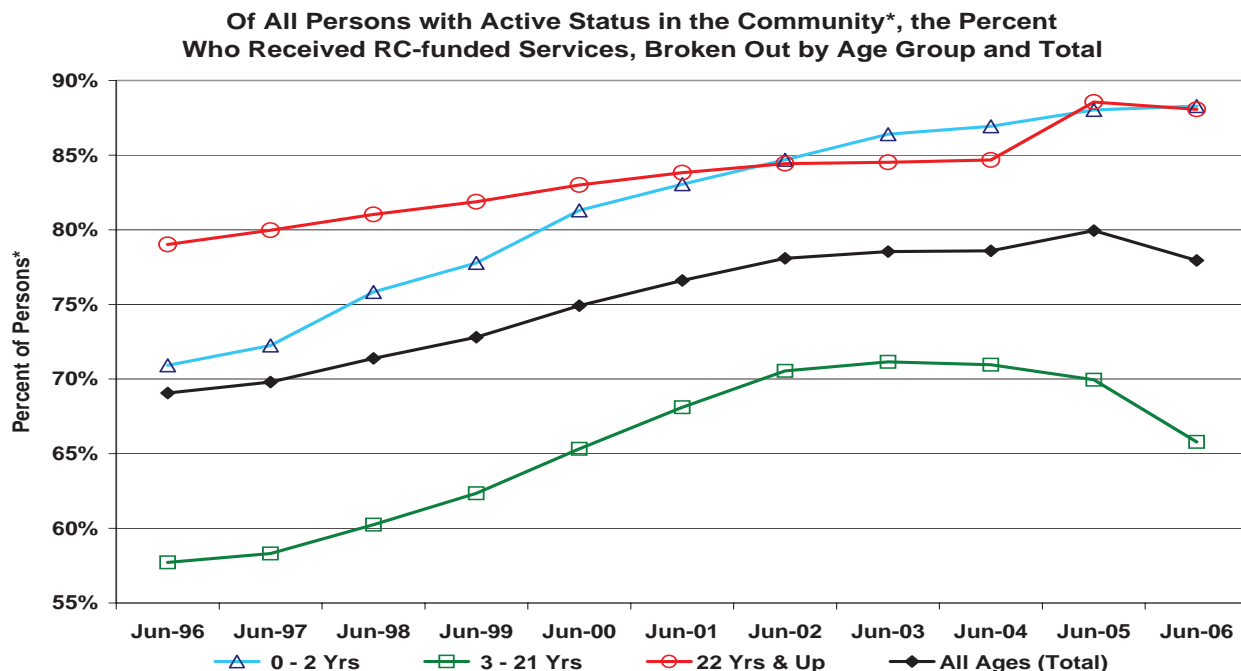
POS Expenditures by Fiscal Year (Dollars in Thousands)						
Service Category	FY 01/02	FY 02/03	FY 03/04	FY 04/05	FY 05/06	FY 01/02 to FY 05/06 % Change
Residential Services	\$479,943	\$514,882	\$547,849	\$576,921	\$598,096	24.6%
Adult Day Programs	\$442,398	\$480,579	\$509,301	\$530,658	\$556,174	25.7%
Activity Center	\$42,448	\$42,482	\$42,307	\$41,989	\$42,057	-0.9%
Adult Development Center	\$213,595	\$225,123	\$238,439	\$247,761	\$254,111	19.0%
Behavior Mgmt. Program	\$99,864	\$108,011	\$115,291	\$122,402	\$128,865	29.0%
Independent Living Program	\$57,952	\$60,772	\$59,672	\$61,414	\$65,356	12.8%
Social Recreation Program	\$2,486	\$2,860	\$2,975	\$3,058	\$3,209	29.1%
Other "Look-Alike" Programs	\$26,053	\$41,331	\$50,617	\$54,034	\$62,575	140.2%
Supported Living & Related Svcs	\$153,810	\$181,840	\$209,016	\$232,208	\$267,462	73.9%
Transportation	\$143,639	\$152,951	\$161,324	\$167,761	\$181,268	26.2%
Respite	\$145,811	\$154,866	\$153,619	\$144,900	\$147,687	1.3%
Infant Program Services	\$75,708	\$84,763	\$90,208	\$99,890	\$112,698	48.9%
Behavioral Services	\$38,353	\$49,927	\$71,781	\$87,508	\$112,568	193.5%
Medical Care & Services	\$51,827	\$58,148	\$61,056	\$64,448	\$73,302	41.4%
Work Activity Program	\$0	\$0	\$0	\$62,611	\$62,646	
Supported Employment Program	\$0	\$0	\$0	\$57,946	\$62,298	
Day Care	\$29,562	\$32,945	\$33,744	\$35,746	\$37,874	28.1%
Supplemental Program Support	\$26,264	\$29,256	\$30,122	\$33,641	\$37,967	44.6%
Social/Recreational Activities	\$11,395	\$13,783	\$14,075	\$18,251	\$22,895	100.9%
Non-Medical Therapy Services	\$5,537	\$6,937	\$7,209	\$7,574	\$7,561	36.5%
Medical & Adaptive Equip./Supplies	\$5,684	\$5,175	\$5,337	\$6,207	\$5,960	4.8%
Camps	\$3,843	\$4,478	\$3,886	\$3,869	\$4,287	11.6%
Environmental & Vehicle Modif.	\$1,680	\$846	\$1,208	\$1,404	\$1,737	3.4%
Mobility Training	\$599	\$630	\$580	\$509	\$426	-28.9%
All Other Services	\$54,631	\$54,987	\$56,884	\$71,147	\$82,992	51.9%
<b>TOTAL</b>	<b>\$1,670,684</b>	<b>\$1,826,992</b>	<b>\$1,957,199</b>	<b>\$2,203,199</b>	<b>\$2,375,898</b>	<b>42.2%</b>

## ***Percent of Persons Receiving RC-funded Services of All Persons Served by DDS in the Community, Fiscal Years 1995/96 through 2005/06***

All persons served by DDS receive case management services through their local RC; regardless of whether they receive purchased services. RCs are required by law to provide or secure services in the most cost-efficient way possible. They must use all other resources, including those provided by other agencies, before using any RC funds. When alternate sources are not available, the RC purchases services as specified in the person's Individual Program Plan (IPP) or the Individualized Family Service Plan (IFSP).

While the percentage of persons receiving RC-funded services out of all persons served in the community (CMF status codes 1 or 2) continued to increase over the years spanning fiscal years 1995/96 through 2004/05, fiscal year 2005/06 represents the first fiscal year where the percentage of recipients decreased. In June 1996, 69 percent of persons served in the community received RC-funded services during FY 1995/96; by June 2005, nearly 80 percent received RC-funded services in FY 2004/05. In June 2006, the percentage of persons served in the community receiving RC-funded services fell to 78 percent.

The distribution across age groups varied widely. The percentage of children under age three receiving RC-funded services out of all children under age three served in the community continued to grow even in FY 2005/06. The largest decrease in terms of the percentage receiving RC-funded services was experience by the "3-21 Yrs" age group (70% in June 2005 compared to 66% in June 2006 received RC-funded services).



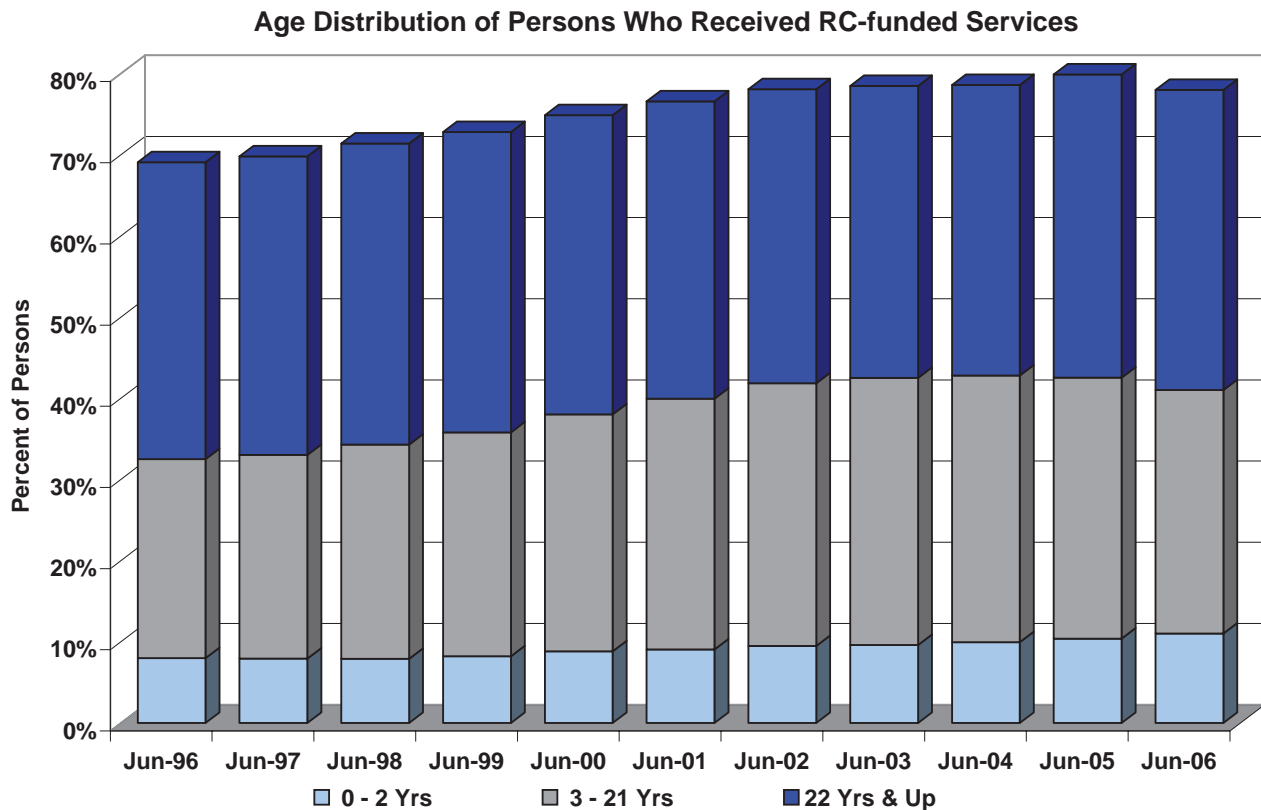
\*"Persons with Active Status in the Community" is defined as persons with status codes 1 or 2 on the Client Master File. The data points in the graph above show, for each age group, the percentage who received RC-funded services out of all persons with active status in the community.

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## ***Age Distribution of Persons Who Received RC-funded Services, Fiscal Years 1995/96 through 2005/06***

The age distribution of the population who received RC-funded services over the past 11 fiscal years is also noteworthy. The top of each bar in the chart below reflects the percent of persons who received RC-funded services out of all individuals served in the community. The sections within each bar represent the distribution by age group of persons who received RC-funded services.

The distribution across age group of persons who receive RC-funded services has shifted over the years from FY 1995/96 through 2005/06. Persons ages 22 and over continue to comprise the largest segment of the total population of RC-funded service recipients. However, in FY 2005/06, this age group represented a smaller percentage (47.4 percent) of the total population of RC-funded service recipients than it did in FY 1995/96 (53.6 percent). The age group that increased the most as a percent of the total population of RC-funded recipients was the 3 through 21 years age group (grew from 34.6 percent of recipient population in FY 1995/96 to 38.4% in FY 2005/06). While their share of the recipient population is growing, children under age three still represent a relatively small percentage (14.2 percent in FY 2005/06) of the population receiving RC-funded services.

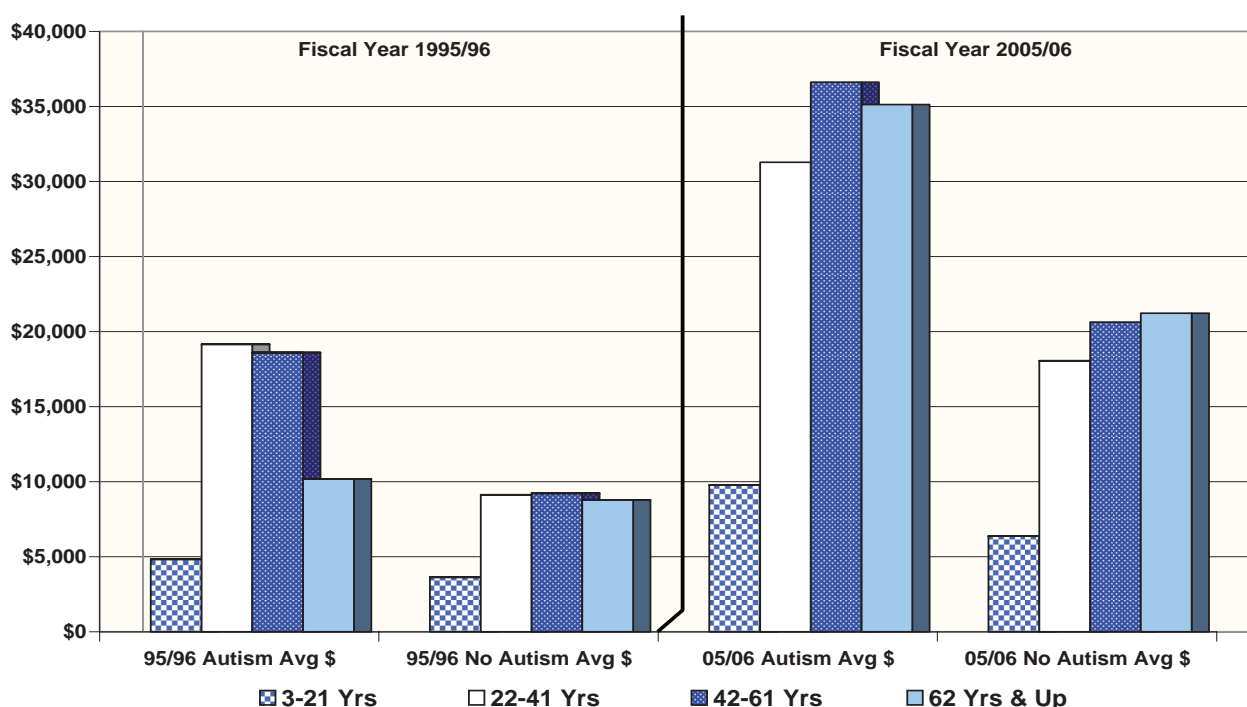


\* Includes only persons who received RC-funded services and had a status code 1 or 2 on CMF in June of the respective fiscal year.

## **Average Per Capita POS Dollars Compared for Persons with Autism and Persons without Autism, with Details by Age**

In both fiscal years (FY) 1995/96 and 2005/06, persons with autism, on average, received more expenditures than persons without autism in all age groups. From FY 1995/96 to 2005/06, the differences in average per capita expenditures between persons with autism and persons without autism increased in all age categories. Interestingly, in FY 2005/06, the overall average POS for persons with autism (\$13,824) was lower than the overall average POS for persons without autism (\$14,437). The reason average expenditures in FY 2005/06 for persons with autism was higher than those for persons without autism when broken out by age group, but not for the autism population overall is explained on the next page.

**Comparison of Avg. Per Capita POS for Persons with Autism & Persons without Autism**



1995/96 - Age Group	Autism Avg Per Capita POS	No Autism Avg Per Capita POS	Difference in Avg Per Capita POS \$s
3 through 21	\$4,831	\$3,631	\$1,200
22 through 41	\$19,152	\$9,132	\$10,019
42 through 61	\$18,608	\$9,234	\$9,374
62 & Up	\$10,187	\$8,777	\$1,410
Total	\$9,752	\$7,026	\$2,726

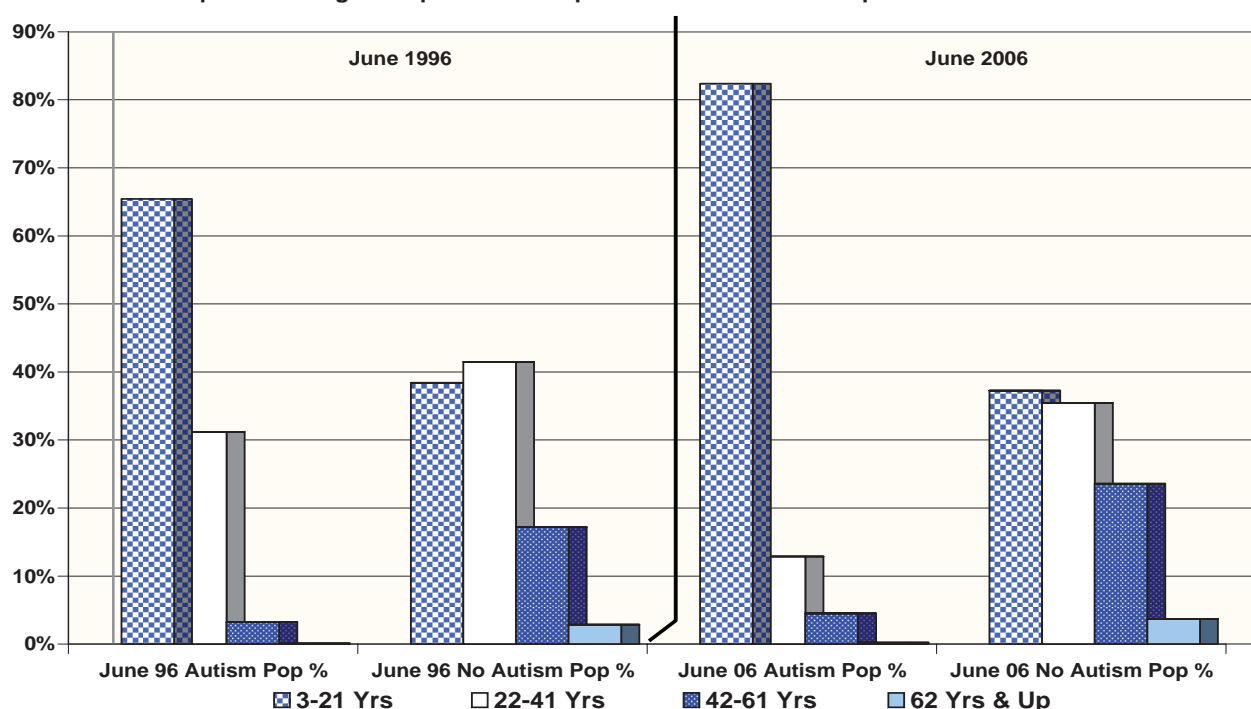
2005/06 - Age Group	Autism Avg Per Capita POS	No Autism Avg Per Capita POS	Difference in Avg Per Capita POS \$s
3 through 21	\$9,781	\$6,389	\$3,392
22 through 41	\$31,280	\$18,061	\$13,219
42 through 61	\$36,614	\$20,633	\$15,981
62 & Up	\$35,117	\$21,222	\$13,895
Total	\$13,824	\$14,437	-\$613

Note: Only persons with status codes 1 or 2 on the CMF in June 1996 for FY 1995/96 and June 2006 for FY 2005/06 were included in the tables and graph above. Also, individuals under age three were excluded because children under age three seldom have a CDER, the data source used to identify persons with autism.

## ***Age Composition for Population with Autism and Population without Autism Compared***

The reason average POS expenditures for persons without autism, overall, now exceed those for persons with autism, overall, is that the age composition of these two populations has shifted. From June 1996 to June 2006, the autism population became younger. The “3 through 21” age group represented 65.4 percent of the autism population in June 1996, but 82.4 percent in June 2006. Since children tend to live at home and use education services, serving them, on average, costs considerably less than serving adults. During this same period, the population without autism became older, causing their overall service costs to increase. As the autism population ages, if age related costs stay consistent with current cost structures, this population will become increasingly expensive to serve.

**Comparison of Age Composition of Population with Autism & Population without Autism**



Age Group	June 96		June 96	
	Autism Pop w. POS	% of Total Autism Pop w. POS	No Autism Pop w. POS	% of Total No Autism Pop w. POS
3 through 21	3,338	65.4%	29,104	38.4%
22 through 41	1,591	31.2%	31,445	41.5%
42 through 61	166	3.3%	13,048	17.2%
62 & Up	6	0.1%	2,172	2.9%
Total	5,101	100.0%	75,769	100.0%

Age Group	June 06		June 06	
	Autism Pop w. POS	% of Total Autism Pop w. POS	No Autism Pop w. POS	% of Total No Autism Pop w. POS
3 through 21	19,201	82.4%	43,331	37.2%
22 through 41	3,007	12.9%	41,246	35.5%
42 through 61	1,055	4.5%	27,418	23.6%
62 & Up	52	0.2%	4,336	3.7%
Total	23,315	100.0%	116,331	100.0%

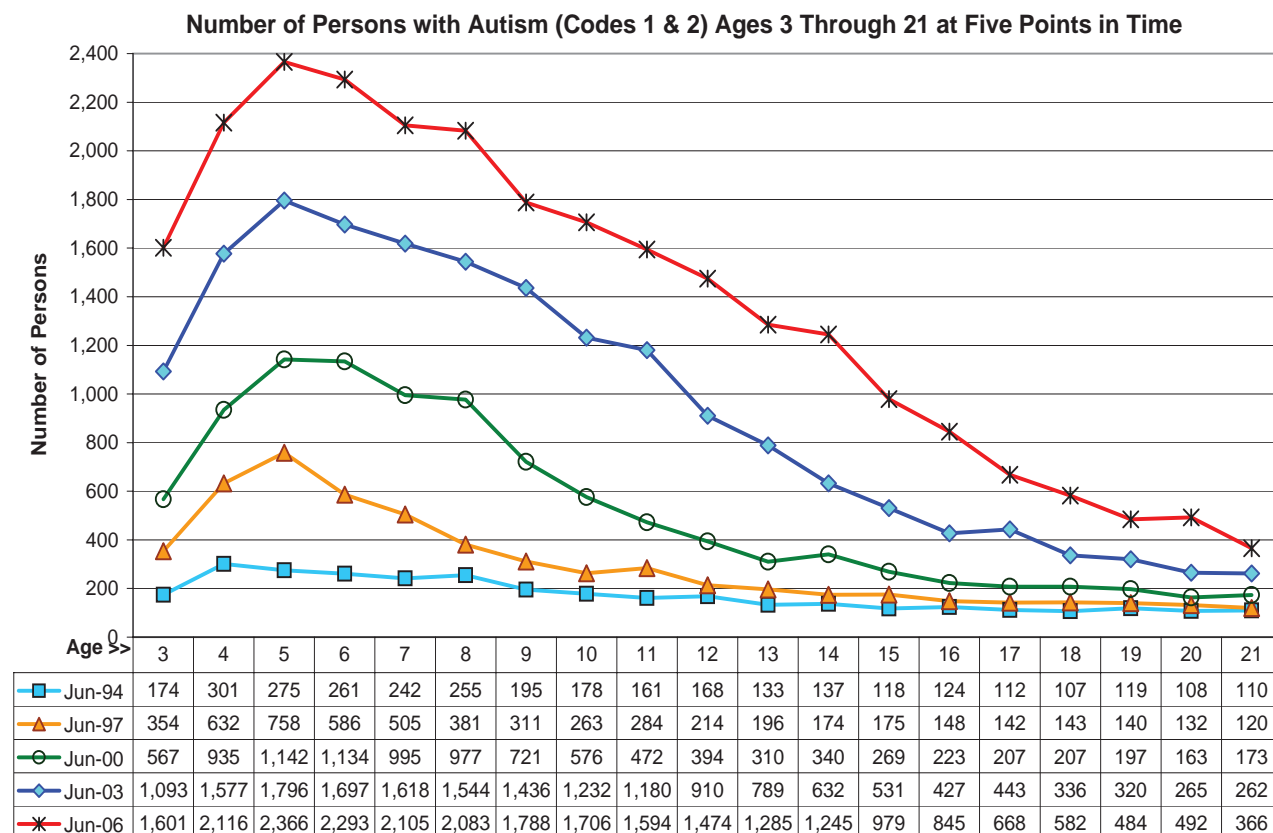
Note: Only persons with status codes 1 or 2 on the CMF in June 1996 for FY 1995/96 and June 2006 for FY 2005/06 were included in the tables and graph above. Also, individuals under age three were excluded because children under age three seldom have a CDER, the data source used to identify persons with autism.

## ***Population Trends by Year of Age for Children with Autism Ages 3 through 21***

As of June 2006, 84 percent of all persons with autism served by DDS were 3 to 21 years of age, inclusive. Since this age group, on average, has lower per capita costs, there is increasing concern regarding cost implications for future years as this growing segment of the population ages. The chart below shows the distribution by age for children with autism ages 3 through 21 at five points in time. In June 1994, the distribution across these ages was relatively flat. Using June 1994 as the base year, the three ages with the highest cumulative growth rates from June 1994 through June 2006 were ages 11, 13, and 10.

However, when comparing one point in time to the next, the growth percentages show a different pattern. Between June 1997 and June 2000, the three ages with the largest increases in caseload were ages 8, 9, and 10. The highest caseload growth between June 2000 and June 2003 occurred with ages 13, 11, and 12. Meanwhile, the number of children ages 16, 14, and 20 increased the most between June 2003 and June 2006.

As these children grow older, the cost implications become significant. In FY 2005/06, the average per capita cost for individuals with autism ages 22 through 41 years of age was 220 percent higher than the average per capita cost for persons with autism in the 3 through 21 years age group.



Data Source: Information is drawn from files reflecting June month end data for 1994, 1997, 2000, 2003, and 2006. Data on autism is derived from the Client Development Evaluation Report and age is calculated based on birth dates found on the Client Master File.

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