

ANNUAL REPORT TO THE LEGISLATURE ON AUTISM

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Developmental Services
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TABLE OF CONTENTS

SECTION 1: BACKGROUND 3

SECTION 2: AUTISM CASELOAD INFORMATION 4

2:1 Autism Caseload Trends 4

2:2 Population Characteristics and Demographics 8

2:3 Age at Eligibility Determination 9

2:4 Services and Supports 10

SECTION 3: AUTISM SERVICES BRANCH UPDATE 15

3:1 Communications and Technical Assistance 15

3:2 Community Engagement 16

3:3 Building System-wide Expertise 17

SECTION 4: GLOSSARY 18

SECTION 1: BACKGROUND

Under the Lanterman Developmental Disabilities Services Act (Lanterman Act), the California Department of Developmental Services (DDS) serves individuals with intellectual and developmental disabilities and oversees the services and supports needed for individuals to lead more independent and productive lives in the community of their choice. DDS contracts with 21 regional centers (RCs) to identify and coordinate services to individuals in the community.

Autism Spectrum Disorder (ASD) is a developmental disability characterized by social, communication, and behavioral challenges. Autism is one of the developmental disabilities that qualify for services and supports in accordance with the Lanterman Act (Welfare & Institutions Code 4512(a)(1)).

The California Budget Act of 2023 established the Autism Services Branch within DDS. The Budget Bill included a requirement that DDS report outcomes related to this investment:

Of the funds appropriated in Schedule (2), \$1,032,000 is appropriated for the creation of an Autism Services Branch within the State Department of Developmental Services. Of the reimbursements appropriated in Schedule (4), \$206,000 is available for support of these purposes. By April 1, 2024, and at least annually thereafter, the department shall provide written reporting to the Legislature on outcomes and impacts associated with this expenditure, including updates on autism caseload data, and associated intake, ethnicity, age of eligibility determination, transitions out of secondary education, services and supports, and racial and ethnic inequities. This information shall be provided using historical data, yielding trend data over time, to the maximum extent feasible. As part of this written reporting, the department shall provide observations and analysis on the trends as demonstrated in the data related to autism, including information on areas of the system where there is a demonstration of unmet need.

Provision 9 under Section 60. Item 4300-001-001 of Section 2.00 of the Budget Act of 2023

The associated allocated funds allowed the Department to hire a team of staff to support research, programs, outreach, and initiatives focused on ASD. This report provides updates on DDS ASD caseload and services data and the activities of the DDS Autism Services Branch.

SECTION 2: AUTISM CASELOAD INFORMATION

2:1 Autism Caseload Trends

In Fiscal Year (FY) 2023-2024, the DDS caseload included 386,062 individuals eligible for Lanterman Act services, and 196,756 of those individuals had a diagnosis of ASD. Within the ASD caseload, the majority of individuals served (78.5%) are children and youth under 22 years-of-age. Children 6-9 years-of-age represent the largest proportion of the ASD population (22.5%).

Figure 1. The DDS ASD Caseload by Age Group in FY 2023-2024.

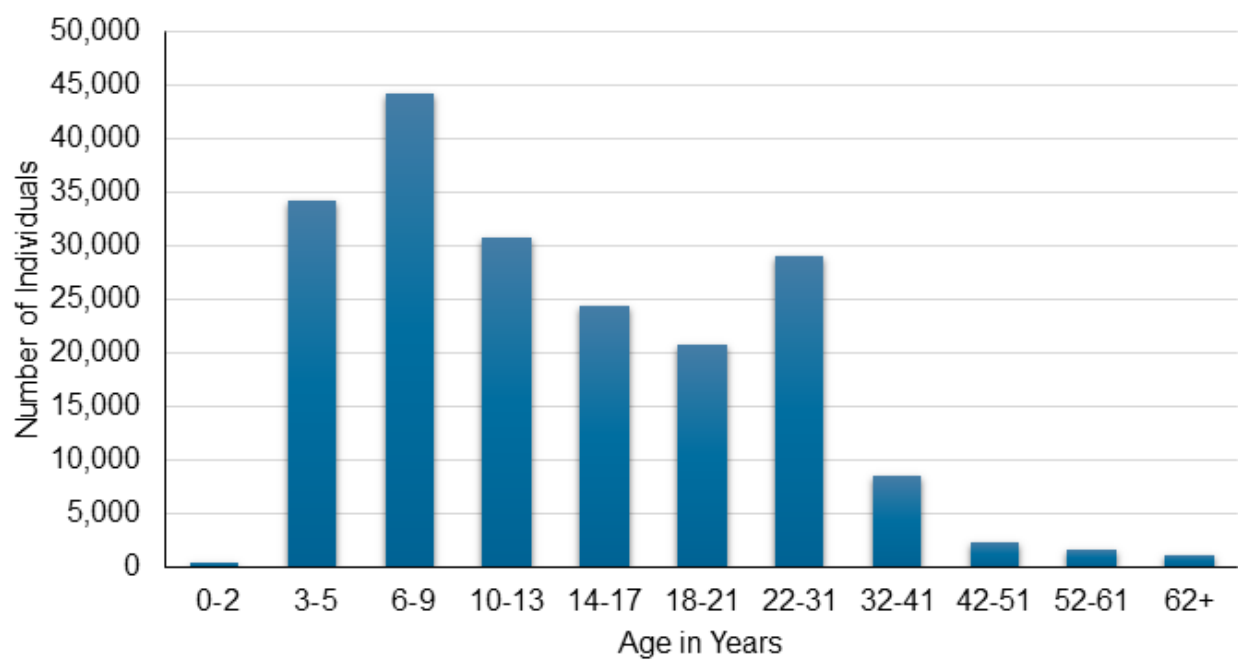


Figure 1 Source: DDS Client Master File and Client Development Evaluation Report for Lanterman-eligible individuals with a diagnosis of ASD in FY 2023-2024. Data extracted January 13, 2025.

The population count and share of individuals with a diagnosis of ASD have been steadily rising over time. Over the last ten years (FY 2013-2014 to FY 2023-2024), the ASD caseload has grown by 156%. Over that time, the ASD caseload has grown in share of the Lanterman-eligible caseload from 31% in FY2013-2014 to 51% in FY 2023-2024 (Table 1). The year 2024 marked the first time ASD became the majority diagnostic category, prior to 2024 Intellectual Disability made up the majority.

Figure 2. Lanterman-eligible ASD Caseload by Birth Year (1947-2021)

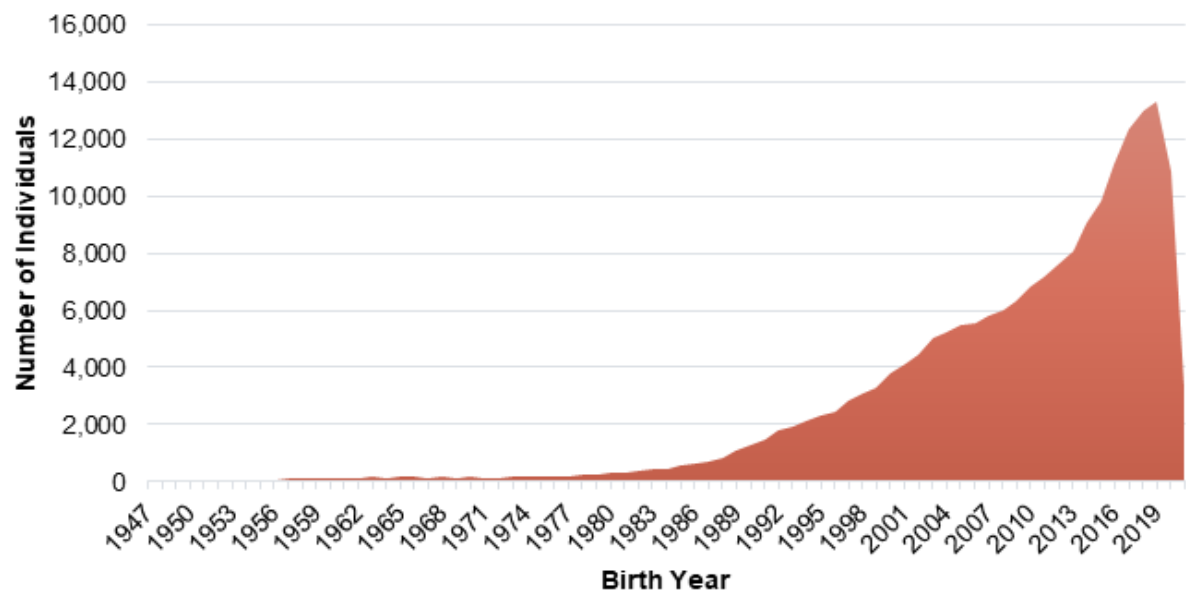


Figure 2 Source: DDS Client Master File and Client Development Evaluation Report for Lanterman-eligible individuals with a diagnosis of ASD. Note: Birth years with fewer than 10 individuals are excluded (years 1933-1946).

Table 1. Shares of Each Lanterman Act Services Developmental Disability Category from FY 2013-2014 to FY 2023-2024.

<i>Fiscal Year</i>	<i>Autism</i>	<i>Intellectual Disability</i>	<i>Cerebral Palsy</i>	<i>Epilepsy</i>	<i>Other</i>
2013-2014	31%	67%	15%	17%	10%
2014-2015	33%	65%	14%	16%	10%
2015-2016	34%	64%	14%	15%	10%
2016-2017	36%	62%	13%	15%	10%
2017-2018	38%	60%	13%	14%	10%
2018-2019	40%	58%	12%	13%	10%
2019-2020	43%	56%	12%	13%	11%
2020-2021	44%	54%	11%	12%	11%
2021-2022	47%	52%	11%	12%	11%
2022-2023	49%	50%	10%	11%	11%
2023-2024	51%	47%	9%	10%	11%

Table 1 Source: DDS Client Master File and Client Development Evaluation Report for Lanterman-eligible individuals with a diagnosis of ASD in FY 2013-2014 through FY 2023-2024. Data extracted January 13, 2025. Note: An individual may have more than one diagnosis and may be counted under multiple diagnosis (i.e., duplicated counts).

The share of individuals with a diagnosis of ASD varies by RC. Golden Gate Regional Center has the lowest share at 33%, while Frank D. Lanterman Regional Center has the highest share at 62% (Table 2).

Table 2. Lanterman-Eligible Caseload and ASD Caseload Shares by RC in FY 2023-2024.

<i>Regional Center</i>	<i>ASD Caseload</i>	<i>Total Caseload</i>	<i>ASD Share</i>
<i>Alta California</i>	14,919	28,931	52%
<i>Central Valley</i>	10,693	24,152	44%
<i>Eastern Los Angeles</i>	7,524	13,019	58%
<i>Frank D. Lanterman</i>	6,913	11,196	62%
<i>Far Northern</i>	4,606	9,239	50%
<i>Golden Gate</i>	3,031	9,211	33%
<i>Harbor</i>	10,087	16,597	61%
<i>Inland</i>	16,469	42,536	39%
<i>Kern</i>	6,202	12,148	51%
<i>North Bay</i>	4,279	9,462	45%
<i>North Los Angeles County</i>	18,846	30,967	61%
<i>East Bay</i>	12,493	23,190	54%
<i>Orange County</i>	10,949	22,465	49%
<i>Redwood Coast</i>	2,013	4,361	46%
<i>San Andreas</i>	7,585	16,838	45%
<i>South Central Los Angeles</i>	9,814	18,683	53%
<i>San Diego</i>	21,528	36,490	59%
<i>San Gabriel/Pomona</i>	6,731	14,081	48%
<i>Tri Counties</i>	7,873	15,772	50%
<i>Valley Mountain</i>	8,926	17,120	52%
<i>Westside</i>	5,274	9,603	55%

Table 2 Source: DDS Client Master File and Client Development Evaluation Report for Lanterman-eligible individuals with a diagnosis of ASD in FY 2023-2024.
Data extracted January 13, 2025.

The prevalence rate of ASD, measured as the number of Lanterman-eligible individuals with a diagnosis of ASD divided by the total estimated county population, varies by county within the state. For example, Imperial county has the highest proportion of individuals with a diagnosis of ASD (1.21% of the estimated county population), while Sierra and San Francisco counties have the lowest proportions (0.13% of each estimated county population). The statewide average prevalence is 0.46%.

Figure 3. ASD Prevalence: the Share of Estimated Population within each California County with a Diagnosis of ASD (Lanterman-eligible) in January 2024

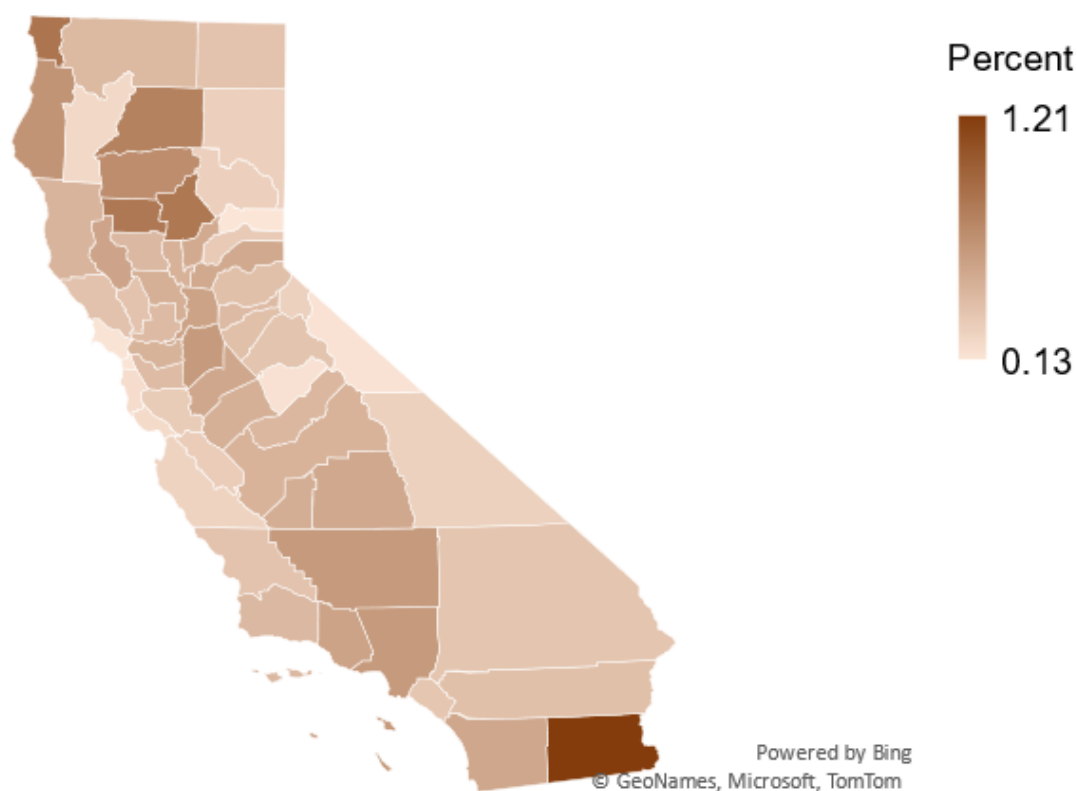


Figure 3 Source: DDS Client Master File and Client Development Evaluation Report for Lanterman-eligible individuals with a diagnosis of ASD in January 2024. Data were extracted January 13, 2025. An individual's county was determined by their zip code of record, and individuals without valid zip codes were excluded from the analysis. Population estimates by county were adapted from the California Department of Finance Population Estimates for Cities, Counties, and the State (2021-2024) for the year 2024.

Note: This analysis includes only individuals with a diagnosis of ASD who are eligible for Lanterman services. Some individuals in California may have a diagnosis of ASD but are not eligible for regional center services, and are not included.

2:2 Population Characteristics and Demographics

Within the statewide Lanterman-eligible ASD caseload, 41% identify as Hispanic, 25% identify as White, 11% identify as Asian, 7% identify as African American or Black, and 16% identify as any other race/ethnicity (including mixed race).

Figure 4. DDS ASD Caseload by Shares of Each Race/Ethnicity Group in FY 2023-2024.

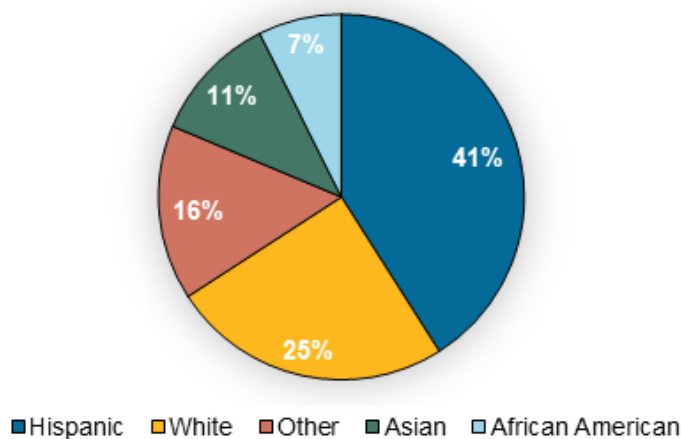


Figure 4 Source: DDS Client Master File and Client Development Evaluation Report for Lanterman-eligible individuals with a diagnosis of ASD in FY 2023-2024. Data extracted January 13, 2025.

Among individuals with a diagnosis of ASD, 78% of individuals are male and 22% are female (ratio = 3.76:1). Approximately 19% of the statewide ASD caseload has co-occurring Intellectual Disability, while 81% do not have an identified co-occurring Intellectual Disability.

Figure 5. Left: Share of DDS ASD Caseload Identifying as Male and Female; Right: Share of DDS ASD Caseload with and without an Identified Co-Occurring Intellectual Disability.

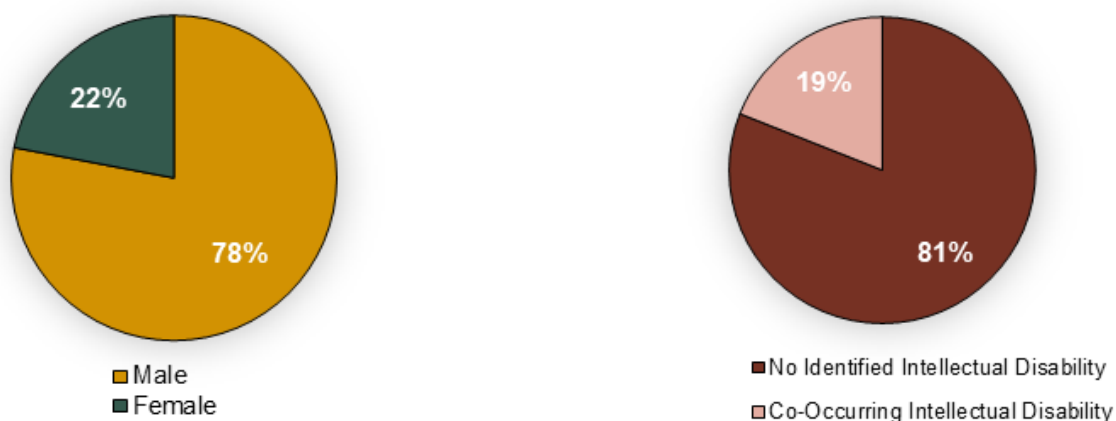


Figure 5 Source: DDS Client Master File and Client Development Evaluation Report for Lanterman-eligible individuals with a diagnosis of ASD in FY 2023-2024. Data extracted January 13, 2025.

There are some notable differences in shares of individuals with co-occurring Intellectual Disability across races and ethnicities. African Americans have the highest share (26%), followed by Asian (21%), Hispanic (18%), White (18%), and Other (16%).

The five most common primary languages spoken by individuals with a diagnosis of ASD include English (82%), Spanish (15%), Vietnamese (1%), Mandarin Chinese (<1%), and Cantonese Chinese (<1%).

2:3 Age at Eligibility Determination

To evaluate system entry trends, individuals' ages were examined at the time of their transition from intake to eligibility determination for Early Start or Lanterman Act services (for individuals first entering the DDS service system between FY 2017-2018 and FY 2023-2024). Statewide, 53% of individuals with ASD became eligible for services from birth through 2 years-of-age, 30% became eligible between 3 and 8 years-of-age, and 18% became eligible at 9 years-of-age and older.

Across racial and ethnic groups, there were larger shares of children identifying as Hispanic, Asian and Other Race/Ethnicity entering the system under 3 years-of-age compared to children identifying as African American or White. Individuals identifying as White had the largest share of individuals becoming eligible at 9 years-of-age and older.

Table 3. Shares of Individuals Becoming Eligible for Early Start and Lanterman Services by Age and Race/Ethnicity.

Age in Years	African American	Asian	Hispanic	Other	White	Total Share by Age
0	4%	2%	4%	3%	3%	3%
1	16%	17%	22%	21%	15%	20%
2	28%	30%	32%	33%	23%	30%
3	8%	7%	7%	6%	6%	7%
4	9%	9%	8%	8%	7%	8%
5	6%	7%	6%	5%	5%	6%
6	4%	5%	4%	4%	4%	4%
7	3%	3%	2%	2%	3%	3%
8	2%	2%	2%	2%	3%	2%
9+	20%	17%	14%	16%	31%	18%
TOTAL	100%	100%	100%	100%	100%	100%

Table 3 Source: History Status file and Client Developmental Evaluation report Data as of January 13, 2025, for individuals first entering the DDS system (transitioning from Intake to Early Start or Lanterman Act Services) from July 1, 2017 to June 30, 2024. Age is as of the date of transition to Early Start or Lanterman Act services. Data extracted January 2025.

2:4 Services and Supports

For individuals with a diagnosis of ASD of all ages statewide, the most commonly used service type in FY 2023-2024 was In-home Respite (service code 862). The next most commonly used service types vary by age group (Table 4).

Table 4. Top 10 Most Commonly Used Service Codes Among Individuals with ASD by Age Group in FY 2023-2024.

Service Code and Name	0-13	Rank	14-17	Rank	18-21	Rank	22+	Rank
862-IN-HOME RESPITE SERVICE AGENCY	38,371	1	9,317	1	6,415	1	8,614	1
051-PERSONAL EMERGENCY RESPONSE	10,035	2	1,725	2	974	7		
643-TRANSLATOR	7,910	3	1,683	3	1,207	4		
028-SOCIALIZATION TRAINING PROGRAM	5,106	4	1,299	5				
490-FINANCIAL MANAGEMENT SERVICES	4,962	5	857	9				
024-PURCHASE REIMBURSEMENT	4,883	6	883	7	576	10		
102-INDIVIDUAL OR FAMILY TRAINING	4,453	7	1,012	6	1,018	6		
103-SPECIALIZED HEALTH, TREATMENT & TRAINING	4,091	8	870	8	754	8		
062-PERSONAL ASSISTANCE	4,066	9	1,501	4	1,617	2	3,127	9
660-RETAIL/WHOLESALE STORES	3,805	10						
605-ADAPTIVE SKILLS TRAINER			681	10	706	9		
520-INDEPENDENT LIVING PROGRAM					1,520	3	5,436	4
055-COMMUNITY INTEGRATION TRAINING PROGRAM					1,087	5	7,052	2
880-TRANSPORTATION-ADDITIONAL COMPONENT							6,460	3
510-ADULT DEVELOPMENT CENTER							4,381	5
515-BEHAVIOR MANAGEMENT PROGRAM							3,801	6
915-RESIDENTIAL FACILITY SERVING ADULTS							3,623	7
895-TRANSPORTATION-PUBLIC/RENTAL/TAXI							3,384	8
875-TRANSPORTATION COMPANY							3,028	10

Table 4 Source: Comprehensive Historical Details dataset for individuals with Lanterman, Provisional, or At-Risk eligibility status (2, 3, and U) as of FY 2023-2024. Data extracted January 2025.

Note: Service code descriptions are included in Section 4 (page 18).

For individuals with a diagnosis of ASD falling into the 0-13, 14-17 and 18-21 age groups, In-home Respite (service code 862) services accounted for the largest amount of purchase of service (POS), followed by Personal Assistance (service code 062). For adults 22 years-of-age and older, Residential Facilities Serving Adults (service code 915) accounted for the largest amount of POS, followed by Supported Living Services (service code 896) (Table 5).

Table 5. Top 10 Service Codes with Highest Total POS Among Individuals with ASD by Age Group in FY 2023-2024.

Service Name	0-13	Rank	14-17	Rank	18-21	Rank	22+	Rank
862-IN-HOME RESPITE SERVICE AGENCY	\$291,147,242	1	\$85,567,875	1	\$61,517,222	1	\$90,962,707	7
062-PERSONAL ASSISTANCE	\$68,151,628	2	\$32,521,768	2	\$41,942,931	2	\$120,945,580	5
605-ADAPTIVE SKILLS TRAINER	\$15,468,429	3	\$7,623,250	6	\$11,633,208	7		
331-COMMUNITY INTEGRATION SUPPORTS	\$14,220,833	4	\$8,130,181	5				
028-SOCIALIZATION TRAINING PROGRAM	\$11,946,797	5	\$4,917,546	8				
320-COMMUNITY LIVING SUPPORTS	\$11,075,835	6	\$4,789,314	9	\$12,960,306	5		
115-SPECIALIZED THERAPEUTIC SERVICES (AGES 3-20)	\$9,931,281	7						
805-INFANT DEVELOPMENT PROGRAM	\$9,691,412	8						
465-PARTICIPANT-DIRECTED RESPITE	\$9,511,523	9						
455-PARTICIPANT-DIRECTED DAY CARE	\$8,233,014	10						
901-ENHANCED BEHAVIORAL SUPPORTS HOME			\$12,378,849	3	\$10,620,963	8	\$54,348,096	10
113-SPECIALIZED RESIDENTIAL FACILITY HABILITATION			\$11,532,303	4	\$10,502,870	9	\$150,431,959	4
920-RESIDENTIAL FACILITY SERVING CHILDREN			\$6,115,082	7				
017-CRISIS TEAM			\$4,525,768	10				
915-RESIDENTIAL FACILITY SERVING ADULTS					\$27,657,057	3	\$339,150,800	1
055-COMMUNITY INTEGRATION TRAINING PROGRAM					\$16,817,949	4	\$161,887,800	3
896-SUPPORTED LIVING SERVICES					\$11,660,857	6	\$237,710,083	2
520-INDEPENDENT LIVING PROGRAM					\$10,101,445	10		
515-BEHAVIOR MANAGEMENT PROGRAM							\$101,035,530	6
109-SUPPLEMENTAL RESIDENTIAL PROGRAM SUPPORT							\$66,407,541	8
510-ADULT DEVELOPMENT CENTER							\$60,869,141	9

Table 5 Source: Comprehensive Historical Details dataset for individuals with Lanterman, Provisional, or At-Risk eligibility status (2, 3, and U) as of FY 2023-2024. Data extracted January 2025.

Note: Service code descriptions are included in Section 4 (page 18).

Among individuals with ASD, there are differences in POS across racial and ethnic groups, however the trends in POS differ depending on the age groups and respective types of service. For example, for individuals with a diagnosis of ASD living in the family home, there are some POS differences across race/ethnicity groups (Table 6). For young adults (18-21 years-of-age), Hispanic, Asian, and White groups had similar average POS, while African Americans had higher POS and individuals of any other race/ethnicity had lower POS on average.

The POS values presented below include the mean and median values for each age group and race/ethnicity group. The average (mean) and median (middle score) are statistical methods used to examine the center of a dataset. Often the mean can be used to represent the most common measure of POS, however, in cases where a small number of outliers skew the overall distribution of data for a group, the median may be a better representation. For example, in cases where a few individuals have very high POS (like individuals residing in specialized residential homes), the mean can become inflated.

Table 6. Mean and Median POS of Individuals with a Diagnosis of ASD Living In the Family Home by Race/Ethnicity in FY 2023-2024.

	Mean	Median
Ages 0-13		
African American	\$6,020	\$4,846
Asian	\$5,523	\$4,293
Hispanic	\$4,837	\$3,924
Other	\$4,582	\$3,502
White	\$5,541	\$3,678
Ages 14-17		
African American	\$9,866	\$9,022
Asian	\$8,206	\$6,768
Hispanic	\$8,285	\$7,626
Other	\$6,908	\$6,024
White	\$7,814	\$5,863
Ages 18-21		
African American	\$13,145	\$11,674
Asian	\$11,559	\$8,667
Hispanic	\$11,484	\$9,507
Other	\$9,418	\$7,920
White	\$11,297	\$7,836
Ages 22+		
African American	\$26,267	\$23,015
Asian	\$26,052	\$22,741
Hispanic	\$21,157	\$18,202
Other	\$21,478	\$18,176
White	\$23,417	\$18,641

Table 6 Source: Comprehensive Historical Details dataset for individuals with Lanterman, Provisional, or At-Risk eligibility status (2, 3, and U) as of FY 2023-2024. In-home is defined as individuals with residence type code of 11 (home of parent/family/guardian), 78 (foster home), 79 (family home under a family home agency), and 80 (certified foster home) as of each month in the FY. Data were extracted January 2025.

For respite services, which are the most commonly used service type for individuals with a diagnosis of ASD across all age groups, there are small differences in POS across race/ethnicity groups.

Table 7. Mean POS and Median POS of Individuals with ASD with Respite Usage by Race and Ethnicity in FY 2023-2024.

	Mean	Median
Ages 0-13		
African American	\$8,095	\$7,073
Asian	\$7,025	\$5,729
Hispanic	\$8,101	\$6,995
Other	\$7,097	\$5,696
White	\$6,942	\$5,520
Ages 14-17		
African American	\$9,847	\$8,586
Asian	\$8,326	\$6,878
Hispanic	\$9,923	\$8,578
Other	\$8,193	\$7,058
White	\$8,375	\$6,670
Ages 18-21		
African American	\$9,988	\$8,696
Asian	\$9,717	\$8,035
Hispanic	\$10,078	\$8,873
Other	\$8,995	\$7,258
White	\$8,609	\$7,445
Ages 22+		
African American	\$10,849	\$8,956
Asian	\$10,472	\$8,513
Hispanic	\$10,409	\$8,967
Other	\$10,806	\$8,205
White	\$10,698	\$8,195

Table 7 Source: Comprehensive Historical Details dataset for individuals with Lanterman, Provisional, or At-Risk eligibility status (2, 3, and U) as of FY 2023-2024. Respite services are defined as service codes: 420, 864, and 862. Data extracted January 2025.

Personal assistance (service code 062) is the second highest ranked service type by POS for individuals under the age of 22. For this service type, there are large differences between the mean and median values for each group, indicating there may be small numbers of individuals with very high utilization of the service (Table 8).

Table 8. Mean POS and Median POS of Individuals with ASD with Personal Assistance Usage by Race/Ethnicity in FY 2023-2024.

	Mean	Median
Ages 0-13		
African American	\$16,975	\$13,288
Asian	\$17,054	\$13,116
Hispanic	\$16,234	\$13,105
Other	\$15,350	\$10,616
White	\$18,823	\$13,047
Ages 14-17		
African American	\$21,274	\$19,265
Asian	\$19,988	\$15,225
Hispanic	\$21,637	\$17,988
Other	\$21,938	\$16,045
White	\$22,388	\$13,328
Ages 18-21		
African American	\$26,269	\$25,734
Asian	\$21,959	\$15,670
Hispanic	\$23,946	\$20,750
Other	\$26,864	\$15,188
White	\$31,770	\$19,155
Ages 22+		
African American	\$35,045	\$27,687
Asian	\$34,524	\$31,471
Hispanic	\$32,383	\$25,173
Other	\$44,478	\$29,007
White	\$47,836	\$24,319

Table 8 Source: Comprehensive Historical Details dataset for individuals with Lanterman, Provisional, or At-Risk eligibility status (2, 3, and U) as of FY 2023-2024. Personal Assistance is defined as service code 062. Data extracted January 2025.

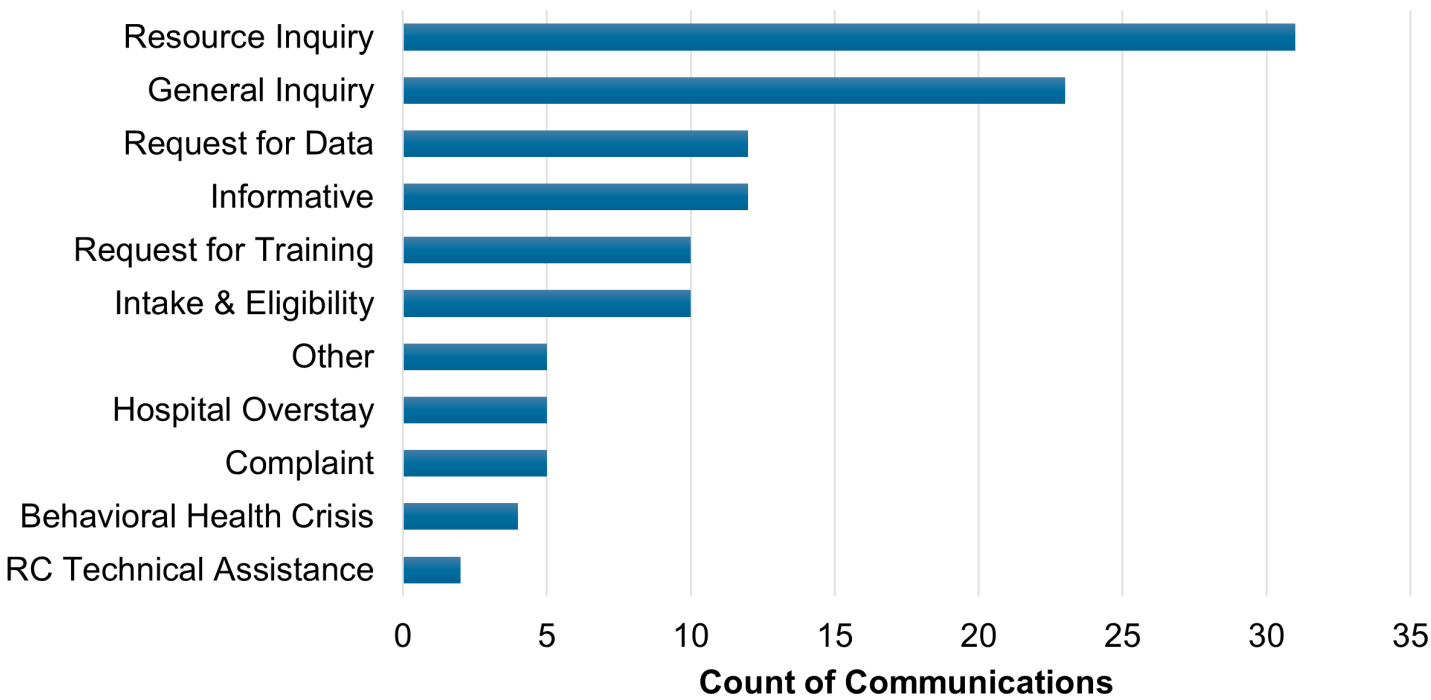
SECTION 3: AUTISM SERVICES BRANCH UPDATE

The DDS Autism Services Branch supports a variety of projects and initiatives related to ASD. Updates on these activities, including completed deliverables, are provided below.

3:1 Communications and Technical Assistance

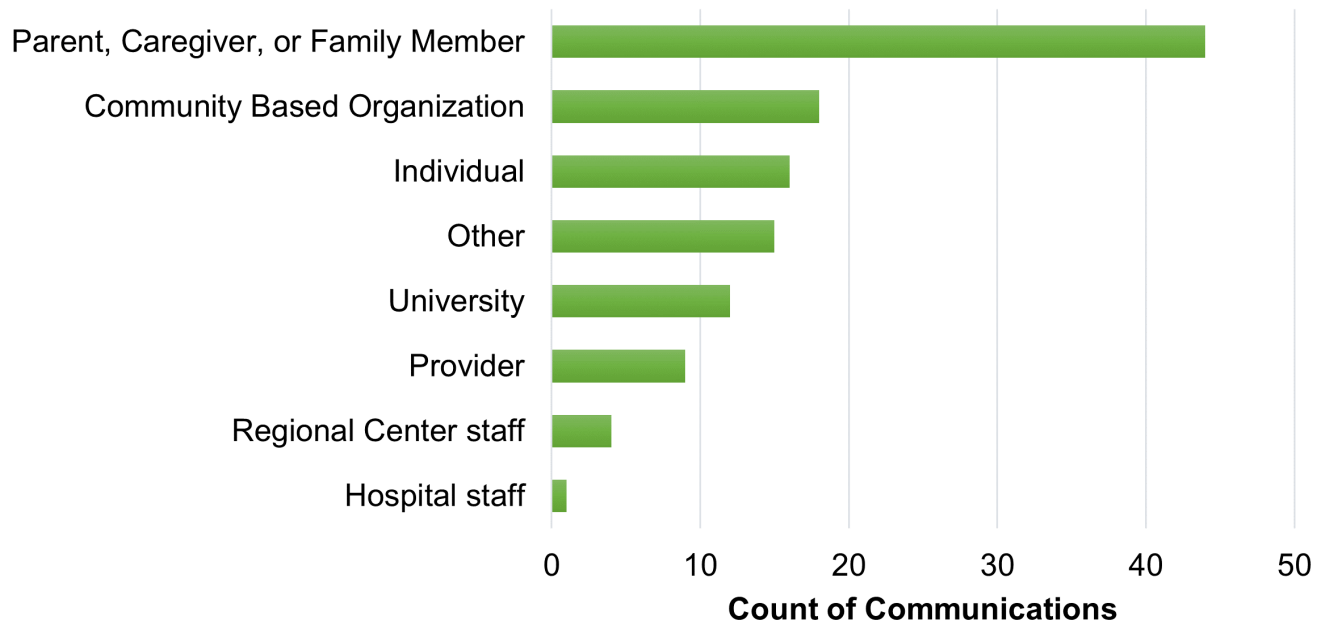
DDS operates the Autism Helpline to respond to inquiries and requests for assistance coming to the Department and related to ASD. The helpline includes an email inbox and phone line that are available for anyone to contact at (833) 815-2337 or autism@dds.ca.gov. The department is also tracking data on the types of communications received through the Autism Helpline, in order to follow emerging trends and inform the development of informational materials (like FAQs).

Figure 6. Types of Communications Received by the Autism Helpline in FY 2023-2024.



Note: Count of Communications includes only the first phone call or email made by an individual or organization to the Autism Helpline; it does not include counts of related follow up emails or phone calls.

Figure 7. Types of Individuals or Groups Contacting the Autism Helpline in FY 2023-2024.



On October 31, 2024, DDS launched the Autism Resource Hub. The Autism Resource Hub is an informational webpage housing resources and information related to ASD and supports and services, as well as downloadable FAQs and informational materials. In the first two months post launch, 2,410 active users visited the Autism Resource Hub page, resulting in 19,215 interactions (including clicks on resource links and materials downloaded).

3:2 Community Engagement

In 2024, DDS hosted four quarterly meetings of the Autism Focus Group. This group is comprised of 14 autistic individuals served by RCs across the state, ranging in age from 18 to 49. The primary function of this workgroup is to identify priority areas for evaluation and make recommendations on how to reduce barriers to community inclusion. The meetings in 2024 centered around topics identified as priorities by the group, which included workforce training, the DDS website and resources, relationships and social/recreation services, and housing and living services. The group reconvened on February 22, 2025 and will continue to meet quarterly throughout the year.

The DDS Autism Services and Safety Net branches partnered to host two Family Focus Groups in Northern California in October 2024, bringing together families of individuals with developmental disabilities and high support needs, or who experience behavioral complexities or crises. Discussions centered on families’ lived experiences and their identification of potential focus areas for service development. In 2025, DDS will host additional Family Focus Groups for this population in Central and Southern California.

The Autism Services Branch staff are continuously engaging with the autism community and providing trainings related to ASD statewide. In FY 2023-2024, staff participated in 12 disability community events and resource fairs and led 26 presentations on ASD for approximately 3,243 attendees. Presentation audiences varied from individuals and families, regional centers, other state departments, university students and fellows, clinicians, and providers.

3:3 Building System-wide Expertise

In 2023, DDS secured an interagency agreement with the UC Davis MIND Institute University Center for Excellence in Developmental Disabilities (UCEDD) to host an ongoing **ECHO Autism** for California professionals, system partners, and families. Project ECHO (Extension for Community Healthcare Outcomes) was developed at the University of New Mexico, and is a learning and guided practice model for increasing workforce capacity to provide specialty care and reduce health disparities. The ECHO Autism builds an interdisciplinary learning network across California to train on evidence-based practices through presentations and case-based discussion. The UC Davis MIND Institute UCEDD and Autism Services Branch staff collaborate to identify topics and curriculum for each 6-session training cohort. The ECHO Autism is offered to participants free of charge. In FY 2023-2024, there were four completed training cohorts:

- August-October 2023: *“Behavior Supports in Medical Settings”*
 - 26 participants including physicians, nurses, Board Certified Behavior Analysts, and Case Managers
- January-June 2024: *“ECHO: Autismo”* (hosted in Spanish)
 - 108 participants including professionals and family members
- January-March 2024: *“Early Intervention Strategies”*
 - 45 participants including educators, speech language pathologists, social workers, and school psychologists
- April-June 2024: *“Creating Inclusive Medical Settings”*
 - 44 participants including behavioral health providers, physicians, nurses, and administrators and coordinators

In 2023, the DDS Autism Services Branch and Clinical Services Branch teams began meeting with the Association of Regional Center Agencies (ARCA) Psychology Collaborative clinicians to update the **Autism Spectrum Disorders: Best Practices Guidelines for Screening, Diagnosis, and Assessment** (2002) publication. This publication will provide detailed best practice recommendations for screening, evaluating, and assessing individuals for a diagnosis of ASD. In 2024, the new guidelines were drafted in partnership with RC psychologists. In 2025, the draft is undergoing review with the ARCA Psychology Collaborative membership and clinical experts from the California UCEDDs and other California university autism centers.

SECTION 4: GLOSSARY

4:1 Abbreviations in this Report

ARCA: Association of Regional Center Agencies

ASD: Autism Spectrum Disorder

DDS: Department of Developmental Services

ECHO: Extension for Community Healthcare Outcomes

FAQs: Frequently Asked Questions

FY: Fiscal Year

POS: Purchase of Service

RC: Regional Center

UCEDD: University Center for Excellence in Developmental Disabilities

4:2 Descriptions of Top Service Codes

Service Code	Name	Description
017	Crisis Team	Crisis intervention services designed to support and stabilize the consumer in the consumer's current living arrangement or other appropriate setting (e.g., day program, school, community respite).
024	Purchase Reimbursement	Reimbursement for purchases to meet an individual's Individual Program Plan objectives.
028	Socialization Training Program	Services that provide socialization opportunities that enhance and develop an individual's interpersonal relationships.
051	Personal Emergency Response	Personal systems, devices, or items designed for emergency assistance. Examples include 24-hour answering/paging, beepers, Med-Alert bracelets, intercoms, Life-lines, fire safety devices, light fixture adaptations, adaptive telephone device and other emergency assistance devices or services.
055	Community Integration Training Program	Training that assists with acquisition, retention, or improvement in self-help, socialization and adaptive skills in a setting other than the home or facility where an individual resides.

062	Personal Assistance	Provision of personal assistance and support.
102	Individual or Family Training	Training services for individuals or their family members that is necessary to implement an objective in the individual's Individual Program Plan.
103	Specialized Health, Treatment, and Training Services	Provision or purchase of health or dental services deemed necessary by a health care professional to implement an objective in the individual's Individual Program Plan.
109	Supplemental Residential Program Support	Time limited, supplemental staffing for a residential setting.
113	Specialized Residential Facility Habilitation	A residential care facility licensed by the Department of Social Services that provides 24-hour care and supervision.
115	Specialized Therapeutic Services	Specialized therapeutic services (such as oral health, speech therapy, counseling) for individuals ages 3-20 years.
320	Community Living Supports	Services that support learning skills for independent living in the community.
331	Community Integration Supports	Services that support learning skills that promote community participation and independence.
465	Participant-Directed Respite	Respite services provided by an individual's family member.
490	Financial Management Services	A service that processes payroll, payments and reimbursements for services and goods.
510	Adult Development Center	A community-based day program that serves adults who are in the process of learning self-help skills.
515	Behavior Management Program	A community-based day program that serves adults with severe behavior disorders and/or dual diagnosis.
520	Independent Living Program	A community-based day program that trains adults in functional, self-help skills for independent living.
605	Adaptive Skills Trainer	Training to enhance an individual's adaptive skills.
643	Translator	A translator fluent and able to read and write in both English and a language other than English.
660	Retail/Wholesale Stores	A facility with goods for purchase.
805	Infant Development Program	An early intervention program for infants with developmental delays.
862	In-home Respite Service Agency	Non-medical care and supervision provided in the individual's own home.

875	Transportation Company	Transportation to and from community-based day programs or other vendored services for a regional center.
880	Transportation-Additional Component	Transportation to and from program activities provided by community-based day program vendor.
895	Transportation-Public Transit, Rental Car, or Taxi	Transportation provided by a service available to the general public. Examples include public transit authorities, rental car agencies, and taxis.
896	Supported Living Services	Services to support the needs of an individual living in their own home.
901	Enhanced Behavioral Supports Home	An adult residential facility or a group home providing 24-hour, non-medical care to individuals who require enhanced behavioral supports, staffing, and supervision in a homelike setting.
915	Residential Facility Serving Adults	A licensed community care facility for adults.
920	Residential Facility Serving Children	A licensed community care facility for children.

CONTACT INFORMATION

**Department of Developmental Services
Office of Statewide Clinical Services
Autism Services Branch**

Mailing Address: 1215 O Street, MS 7-10
Sacramento, CA 95814

Email: autism@dds.ca.gov

Phone: (833) 815-2337

