

**Introduced by Senator Torlakson
(Principal coauthor: Senator Steinberg)
(Coauthor: Senator Alquist)**

February 21, 2008

An act to add and repeal Article 8 (commencing with Section 4698) to Chapter 6 of Division 4.5 of the Welfare and Institutions Code, relating to autism.

LEGISLATIVE COUNSEL'S DIGEST

SB 1475, as introduced, Torlakson. Autism pilot program.

Under existing law, the State Department of Developmental Services, the State Department of Education, the State Department of Health Care Services, the State Department of Mental Health, and the State Department of Social Services collaborate to provide early intervention for children with disabilities or at risk of having disabilities. Under existing law, the State Department of Developmental Services contracts with private nonprofit regional centers to provide or purchase services and supports for persons with developmental disabilities, including Autism Spectrum Disorders (ASD). The State Department of Education and school districts also provide services in the schools for children with ASD.

This bill would require the State Department of Development Services to establish a 2-year pilot project to identify best practices in integrating the services and supports provided to children with ASD through the regional centers and through the school districts and local educational agencies. This bill would require the department to establish an Early Autism Intervention and Transition Advisory Counsel to assist the department in administering the program. This bill would also require the advisory council and the department, no later than June 1, 2012, to

report to the Legislature and the Governor on the pilot project containing specified information. This bill would create the Early Autism Intervention and Transitional Services Program Fund in the State Treasury, to be used by the department, upon appropriation by the Legislature, for purposes of this pilot program. This bill would make its provisions inoperative on July 1, 2012, and repeal them on January 1, 2013.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. The Legislature finds and declares all of the
2 following:
- 3 (a) The number of children diagnosed with an Autism Spectrum
4 Disorder (ASD) has grown dramatically in recent years and is a
5 serious public health crisis that must be addressed.
- 6 (b) Currently, children with ASD receive services from regional
7 centers through the Early Start Program, but must transition to
8 services provided by school districts when they are between three
9 to five years of age.
- 10 (c) This transition currently presents a severe crisis to many
11 families because it disrupts the continuity of programs and
12 interventions that have already been implemented and are proving
13 efficient in overcoming ASD and improving developmental
14 outcomes.
- 15 (d) The transition is often inefficient and not cost effective
16 because the regional centers and the school districts are not
17 coordinated with regard to programs, services, and interventions.
- 18 (e) In many cases this transition is also disruptive because the
19 programs, professionals, and providers who contract to provide
20 services to regional services and school districts are different.
- 21 (f) The transition is not cost effective because the school
22 districts, despite lacking the resources and administrative supports,
23 must duplicate complex assessments that have already been
24 performed by the regional centers.
- 25 (g) Crucial services and interventions for children with ASD
26 are often delayed while regional centers and school districts quarrel
27 over the financial responsibilities of implementing the services.

(h) The California Legislative Blue Ribbon Commission on Autism noted that there are models of voluntary collaboration between regional centers and school districts that provide comprehensive, integrated, and seamless services to children with ASD and that these models have increased family and consumer satisfaction and have produced more effective outcomes than the traditional model.

SEC. 2. Article 8 (commencing with Section 4698) is added to Chapter 6 of Division 4.5 of the Welfare and Institutions Code, to read:

Article 8. Early Autism Intervention and Transition Pilot Program

4698. (a) As used in this article “ASD” means Autism Spectrum Disorder.

(b) It is the intent of the Legislature to implement a two-year pilot project in key geographic areas around the state that will identify solutions to significantly improve the transition of children with Autism Spectrum Disorder from receiving services from regional centers to the school system and, thereby, improve the quality of early intervention and educational programs for children with ASD from birth to five years of age.

(c) The intent of the pilot program is to identify and implement existing models of excellence and best practices that will establish a seamless, comprehensive, and integrated service delivery model between regional centers and school districts for children with ASD and their families, particularly in culturally, linguistically, and geographically diverse or underserved populations.

4698.1. (a) The department, in partnership with one or more regional centers, shall establish and administer a pilot project which shall be called The Centers of Excellence for Early Autism Intervention and Transitional Services.

(b) At least three pilot locations shall be established for a period of two years. Each location shall require a collaborative, integrated proposal between at least one regional center and at least one school district or local educational agency.

(c) Pilot project proposals may include the participation of other agencies, organizations, foundations, or other providers as long as the participation is approved by the department.

(d) The department and the Early Autism Intervention and Transition Advisory Council, established pursuant to Section 4698.2, may partner with existing public or private, state or national programs and initiatives to share information and avoid duplication and shall build upon the work and recommendations of recent reports and published models.

4698.2. (a) The department shall establish an Early Autism Intervention and Transition Advisory Council that shall advise and assist the department in administering this article.

(b) Members of the advisory council shall include, but not be limited to, multidisciplinary autism experts, representatives and advocates for families and consumers served by regional centers and school districts, regional center staff, local educational agency staff, early intervention providers, and stakeholders in the pilot project counties.

(c) The advisory council shall do all of the following:

(1) Establish innovative, collaborative, integrated, and seamless methods, instruments, and systems of care between regional centers and school districts for the early identification and assessment of children with autism spectrum disorder from birth to five years of age.

(2) Establish innovative, collaborative, integrated, and seamless system of programs, services, and providers for the early intervention and treatment of children with ASD from birth to five years of age.

(3) Establish innovative best practices that can provide collaborative, integrated, and seamless case management for children with ASD from birth to five years of age.

(4) Establish innovative fiscal models using pooled funding and resources that have demonstrated cost-effective benefits and outcomes.

(5) Establish best practices and recommendations that will improve communication between regional centers, school districts and local educational agencies, providers, and families and consumers.

(6) Identify and recommend future changes in regulations, policies, procedures, or other legislation at the local or statewide level to improve the early identification and intervention of children with ASD from birth to five years of age by regional centers and school districts or local educational agencies.

1 (7) Determine how the use of telehealth, telemedicine, and other
2 innovative web-based technology strategies may improve the
3 professional development, outreach, and training of families,
4 consumers, professionals, and staff who are affiliated with, or
5 served by, regional centers, school districts, or local educational
6 agencies.

7 (d) Advisory council members shall receive no compensation,
8 except for reimbursement of travel expenses.

9 4698.3. (a) No later than June 1, 2012, the department, working
10 with the advisory council, shall provide to the Legislature and the
11 Governor with a report on the pilot program. The report shall make
12 legislative, regulatory, and fiscal recommendations that would
13 further the goal of providing a seamless, integrated, and
14 coordinated system of care for the early identification and treatment
15 of ASD between the regional centers and school districts and local
16 educational agencies.

17 (b) The report shall specifically address all of the following:

18 (1) The effectiveness of the pilot program in terms of early
19 identification of children with ASD.

20 (2) Benchmarks and indicators of the therapeutic efficacy and
21 developmental improvements achieved by the pilot program.

22 (3) Indicators of consumers who have dropped out of the pilot
23 program.

24 (4) Family satisfaction indicators.

25 (5) Cost effectiveness of the pilot program.

26 (6) Benchmarks and quality service indicators for the services
27 provided by the pilot program.

28 (7) Other outcomes and indicators reflecting changes in referral
29 numbers and patterns from baseline historical trends after training
30 and implementation of screening, referral, and assessment
31 protocols.

32 (8) Based on the pilot program data, all of the following:

33 (A) The planning and resource allocation that is necessary at
34 the state and federal levels to build capacity in, and ensure access
35 to, the regional centers and Early Start Programs to prepare for the
36 influx of children and families that will result from routine
37 screening, including achieving reasonable wait times after a family
38 has been referred for assessment.

39 (B) The accessibility of diagnostic evaluation and intervention
40 resources for children identified as having ASD.

1 (C) The fiscal impact on health care professionals and regional
2 centers of increased screening and referral.

3 (D) The changes in practice patterns for participating physicians,
4 including new residents establishing practices, and other health
5 care professionals.

6 (E) The effectiveness of physicians' developmental monitoring
7 and screening efforts over time.

8 (F) Cost effectiveness of routine early screening, referral, and
9 intervention conducted in a coordinated fashion using the medical
10 home model.

11 (G) The impact on families in an environment of universal wide
12 spread developmental screening, including the impact of false
13 positives on parent-child interaction.

14 (H) Other factors the department and the advisory council deem
15 appropriate.

16 (c) The preparation of the report shall be funded through federal,
17 state, or private funds secured with the help of the advisory council.
18 No state general funds shall be used to prepare the report.

19 4698.4. (a) The Early Autism Intervention and Transitional
20 Services Program Fund is hereby created in the State Treasury.
21 The department shall deposit any moneys received from the state,
22 federal government, or from private donations into the fund, to be
23 used by the department, upon appropriation by the Legislature, for
24 the pilot program. Notwithstanding Section 16305.7 of the
25 Government Code, interest and dividends on moneys in the fund
26 shall accrue to the fund.

27 (b) No state general funds shall be used to fund the pilot program
28 unless a specific appropriation is made in the Budget Act or other
29 statute.

30 4698.5. This article shall become inoperative on July 1, 2012,
31 and, as of January 1, 2013, is repealed unless a later enacted statute,
32 that is enacted before January 1, 2013, deletes or extends the dates
33 on which it becomes inoperative and is repealed.