

Date of Hearing: April 29, 2025

ASSEMBLY COMMITTEE ON HUMAN SERVICES

Alex Lee, Chair

AB 1099 (Bryan) – As Amended April 22, 2025

SUBJECT: Developmental services: initial intake: assessment

SUMMARY: Revises the existing requirements for initial intake and assessments at regional centers for persons believed to have a developmental disability. Specifically, **this bill:**

- 1) Authorizes an initial intake to include a determination that the person is eligible or provisionally eligible for regional center services.
- 2) Prohibits a decision to not to provide an assessment from being solely based on either: the lack of documentation, including, but not limited to, school, medical, or court records, provided by the person requesting assistance or, if appropriate, by the person's parents, legal guardian or conservator, or authorized representative, or age of the person when they received a diagnosis of a qualifying condition, as long as the qualifying condition originated before the person was 18 years of age, as determined through the assessment process.
- 3) Requires the regional center, for initial intakes involving a foster child who has not been determined to be eligible or provisionally eligible for regional center services by the end of the 15-working-day initial intake period, to conduct the assessment.
- 4) Requires the regional center by the end of the 15-day initial intake period to determine if the foster child is eligible or provisionally eligible for regional center services or refer the foster child for the assessment.
- 5) Requires a regional center to give adequate notice, as specified, if it determines that an individual is not provisionally eligible for regional center services.
- 6) Adds when a client is a foster child to the list of circumstances when an assessment must be performed as soon as possible and no more than 60 days following the initial intake.
- 7) Removes existing law that made an assessment conditional upon receipt of the release of information, as specified, and instead authorizes the receipt of the release of information for the assessment, requires the regional center to assist in collecting and procuring this documentation to ensure that assessment is conducted as soon as possible. Requires the assessment to be conducted within the timelines as specified irrespective of whether the person, or a person acting on their behalf, possesses that documentation.
- 8) Requires the regional center to make its determination within the timelines specified, irrespective of whether the person, or a person acting on their behalf, possesses that documentation of valuations and tests, including, but not limited to, intelligence tests, adaptive functioning tests, neurological and neuropsychological tests, diagnostic tests performed by a physician, psychiatric tests, and other tests or evaluations.
- 9) Adds an authorized representative to the list of people who must provide copies of health benefit cards under which the consumer is eligible to receive health benefits. Adds

conservators and authorized representatives to the list of people that the regional center and cannot use the lack of benefits to negatively impact the services. Prohibits a regional center from requiring an individual to use their health benefits before it conducts an assessment.

- 10) Requires the Department of Developmental Services (DDS) to annually post on its website the following statewide data, by regional center, and on a statewide-aggregated basis:
- a) The number of initial intakes, and, separately, the number of initial intakes involving foster children, received by regional centers;
 - b) The percentage of initial intakes, and, separately, the percentage of initial intakes involving foster children, that resulted in eligibility and provisional eligibility determinations, respectively, during the initial intake period;
 - c) The percentage of initial intakes, and, separately, the percentage of initial intakes involving foster children that occurred more than 15 working days following a request for assistance;
 - d) The number of assessments conducted by regional centers and the percentage of cases that resulted in an assessment after the initial intake;
 - e) The total number of individuals, and, separately, the total number of foster children, who qualified for an expedited assessment within 60 days following initial intake;
 - f) The percentage of individuals, and, separately, the percentage of foster children, who qualified for an expedited assessment following initial intake but whose assessment occurred more than 60 days following initial intake;
 - g) The percentage of assessments that occurred more than 120 days following initial intake;
 - h) The percentage of individuals, and, separately, the percentage of foster children, whose applications for services under the California Early Intervention Services Act took longer than the 45-day timeline;
 - i) The average number of days that elapsed between a request for assistance and an initial intake for applicants, and, separately, for foster children applicants, who received an initial intake.
 - j) The average number of days that elapsed between an initial intake and an assessment for applicants, and, separately, for foster children applicants, who received an assessment following initial intake; and,
 - k) The age, race or ethnicity, and preferred language for all of the following:
 - i) Individuals, and, separately, foster children, who were denied an initial intake following a request for assistance;
 - ii) Individuals, and, separately, foster children, who were denied eligibility for services;

- iii) Individuals, and, separately, foster children, who, following an assessment, were denied eligibility for services under the California Early Intervention Services Act; and,
- iv) Individuals, and, separately, foster children, who challenged an initial intake denial or eligibility denial through the appeals process or a mediation conference or due process hearing, as applicable.

11) Defines a foster child, for the purposes of the above provision, as:

- a) A child who has been removed from their home by a county child welfare services agency;
- b) A child who is the subject of a juvenile court petition filed, as specified, whether or not the child has been removed from their home;
- c) A dependent child of the court of an Indian tribe, consortium of tribes, or tribal organization who is the subject of a petition filed in the tribal court pursuant to the tribal court's jurisdiction in accordance with the tribe's law;
- d) A child who is the subject of a voluntary placement agreement; or,
- e) A nonminor dependent.

12) Defines "request for assistance," for the purposes of the above provision, as any initial contact or inquiry from an individual, or a person acting on their behalf, on the nature of services or supports available or provided by the regional center, or the individual's possible eligibility to receive them based on a potential developmental concern or disability.

EXISTING LAW:

- 1) Establishes the Lanterman Developmental Disabilities Services Act (Lanterman Act), which states that California is responsible for providing a range of services and supports sufficiently complete to meet the needs and choices of each person with developmental disabilities, regardless of age or degree of disability, and at each stage of life, and to support their integration into the mainstream life of the community. (Welfare and Institutions Code [WIC] § 4500 *et seq.*)
- 2) Establishes a system of nonprofit regional centers, overseen by DDS to provide fixed points of contact in the community for all persons with developmental disabilities and their families, to coordinate services and supports best suited to them throughout their lifetime. (WIC § 4620)
- 3) Defines developmental disability as a disability that originates before an individual attains 18 years of age, continues, or can be expected to continue, indefinitely, and constitutes a substantial disability for that individual. As defined by the Director of DDS, in consultation with the Superintendent of Public Instruction, this term shall include intellectual disability, cerebral palsy, epilepsy, and autism. This term shall also include disabling conditions found to be closely related to intellectual disability or to require treatment similar to that required

for individuals with an intellectual disability, but shall not include other handicapping conditions that are solely physical in nature. (WIC § 4512(a)(1))

- 4) Establishes that a child who is under five years of age is provisionally eligible for regional center services if the child has a disability that is not solely physical in nature and has significant functional limitations in at least two of the following areas of major life activity, as determined by a regional center and as appropriate to the age of the child:
 - a) Self-care;
 - b) Receptive and expressive language;
 - c) Learning;
 - d) Mobility; and,
 - e) Self-direction. (WIC § 4512(a)(2))
- 5) Requires, if assessment is needed, the assessment to be performed within 120 days following initial intake. Further specifies that the assessment must be performed as soon as possible and in no event more than 60 days following initial intake where any delay would expose the client to unnecessary risk to their health and safety or to significant further delay in mental or physical development, or the client would be at imminent risk of placement in a more restrictive environment. Assessment may include collection and review of available historical diagnostic data, provision or procurement of necessary tests and evaluations, and summarization of developmental levels and service needs and is conditional upon receipt of the release of information. (WIC § 4643)

FISCAL EFFECT: Unknown, this bill has not been analyzed by a fiscal committee.

COMMENTS:

Background: *Initial Intake and Assessment Process.* Regional centers provide diagnosis and assessment of eligibility and help plan, access, coordinate, and monitor the services and supports that are needed because of a developmental disability. However, prior to becoming a consumer, an individual must go through the intake process. Any person believed to have a developmental disability, and any person believed to have a high risk of becoming the parent of a developmentally disabled infant, is eligible for initial intake and assessment services. To start the intake process, regional centers require an application and request any applicable documentation that might help determine the child's developmental needs. The intake also includes an interview with a regional center coordinator. Following the initial intake, the regional center determines if an assessment is appropriate. If a regional center makes the decision not to provide an assessment, they must properly notify the individual, parent, or authorized representative so they are aware of the option to appeal the regional center's decision through the fair hearing process. Current law requires a decision to be made within 15 days.

After the intake, the regional center may conduct an assessment to determine regional center eligibility. The assessment includes intelligence tests, adaptive functioning tests, and other specialized tests. Regional centers are authorized to ask for supporting documents such as

available historical diagnostic data, provision or procurement of necessary tests and evaluations, and summarization of developmental levels.

This assessment is required to be performed within 120 days following the intake. In limited instances, regional centers are required to conduct the assessment within 60 days following initial intake where any delay would expose the client to unnecessary risk to their health and safety or to significant further delay in mental or physical development, or the client would be at imminent risk of placement in a more restrictive environment. This timeline is made conditional upon the recipient of the release of information for tests performed by other professionals such as intelligence tests, adaptive functioning tests, neurological and neuropsychological tests, diagnostic tests performed by a physician, psychiatric tests, and other tests or evaluations.

This bill clarifies that foster youth must be included in the group of individuals that must be assessed within 60 days, not 120 days. *This bill* also specifies that the timelines must be met regardless of receiving the documentation described above.

A person is considered eligible for services if they have a disability that began before the individual's 18th birthday, that is expected to continue indefinitely, and present a substantial disability. Qualifying conditions include intellectual disability, cerebral palsy, epilepsy, and autism.

Following eligibility determination, the regional center and the consumer come up with an Individual Program Plan (IPP). IPP meetings are designed to help people with developmental disabilities outline in a person-centered manner a "preferred future" by identifying a preferred place to live, favorite people with whom to socialize, and preferred types of daily activities, including preferred jobs. After an IPP is decided upon, the consumer may begin services. Some of the services and supports provided by the regional centers include:

- Information and referral;
- Assessment and diagnosis;
- Counseling;
- Lifelong individualized planning and service coordination;
- Purchase of necessary services included in the individual program plan;
- Resource development;
- Outreach;
- Assistance in finding and using community and other resources;
- Advocacy for the protection of legal, civil and service rights;
- Early intervention services for at risk infants and their families;

- Genetic counseling;
- Family support;
- Planning, placement, and monitoring for 24-hour out-of-home care;
- Training and educational opportunities for individuals and families; and,
- Community education about developmental disabilities.

Foster Youth with Intellectual and Developmental Disabilities (I/DD). California does not track how many foster youth have I/DD so it is difficult to pinpoint how many foster youth are impacted by an I/DD. Advocates report that anywhere from 30-80% of foster youth have developmental delay. A 2019 study found that children with I/DD were more likely to experience abuse. According to the study, “Children with [autism spectrum disorder and I/DD] and ID-only were between two and three times more likely to experience maltreatment. All groups were more likely to experience physical neglect, and children in the [autism spectrum disorder and I/DD] and ID-only groups were more likely to experience all forms of abuse. Children in the autism spectrum disorder-only group were more likely to experience physical abuse. Maltreated children in the [autism spectrum disorder and I/DD] only groups experienced more cases of physical abuse and neglect, and were victimized by more perpetrators compared to other maltreated youth. Maltreatment was associated with higher likelihood of aggression, hyperactivity, and tantrums for children with autism spectrum disorder.” (McDonnell, et. al, 2019: Child maltreatment in autism spectrum disorder and intellectual disability: results from a population-based sample. J Child Psychol Psychiatry.) *This bill* requires a report to the Legislature including information on the number of intakes and assessments involving foster youth. This does not address existing foster youth in the system, but it does help to pinpoint how many are entering the system.

The delivery of care to foster youth with I/DD is challenging for several reasons, including difficulty finding placements due to coordination of services and therapy. Additionally, advocates report there is a delay in assessment, which then delays services and further complicates placements. If a foster youth does not have a stable placement and they are still pending an assessment from a regional center and moves to another regional center, then they have to restart the intake. *This bill* establishes that foster youth must be assessed within 60 days after their initial intake.

Author’s Statement: According to the Author, “For children with intellectual and developmental disabilities (I/DD) and their families, getting the supports and training provided by the state’s regional centers in a timely manner is critical to reducing child maltreatment, family disruption and unnecessary institutionalization. Yet, foster youth routinely face significant delay in accessing these services due to the regional center’s overly burdensome application process. [This bill] removes administrative barriers from the process by ensuring that applicants are not denied purely on the basis of a lack of formal diagnosis or documentation, which many system-involved youth lack for reasons beyond their control. Additionally, the bill ensures that the existing expedited 60-day timeline for people who are at risk of a more restrictive placement also applies to foster youth. [This bill] will promote access to critical regional center services for foster youth with I/DD, reduce placement instability, and support family reunification for system-involved families.”

Equity Implications: Given that foster youth often move to multiple placements within a short timeframe, they also require an expedient intake and assessment. Delays can be devastating for a foster youth who is waiting their turn with the regional center and then abruptly required to change placements. Unlike children who reside with their parents, foster youth do not typically have a primary adult that keeps all their documentation that a regional center may request to make a determination. *This bill* aims to create equitable access for foster youth so they can access services and supports like their peers.

RELATED AND PRIOR LEGISLATION:

AB 1197 (Alvarado-Gil), Chapter 909, Statutes of 2024, authorized children who receive Aid to Families with Dependent Children-Foster Care benefits and regional center services to receive in-home respite services.

AB 1089 (Calderon), Chapter 761, Statutes of 2014, established procedures for the transfer of a regional center consumer who also is placed in foster care from one regional center's catchment area to another.

AB 649 (Wilson) of 2023, would have permitted regional centers to purchase services that would otherwise be available from other specified means when a consumer or a consumer's representative chooses not to pursue coverage despite eligibility. *AB 649 was held on the Senate Committee on Appropriations suspense file.*

REGISTERED SUPPORT / OPPOSITION:

Support

Children's Law Center of California (Co-Sponsor)
Disability Rights California (Co-Sponsor)
Public Counsel (Co-Sponsor)
All of US or None Orange County
Bay Area Legal Aid
California Alliance of Caregivers
California State Council on Developmental Disabilities (SCDD)
California State PTA
Coalition of California Welfare Rights Organizations
County Welfare Directors Association of California
Disability Rights Education and Defense Fund
Disability Voices United (DVU)
Easterseals Northern California
Families Inspiring Reentry & Reunification 4 Everyone (FIR4E)
Family Voices of California
Integrated Community Collaborative
Judicial Council of California
Legal Aid Foundation of Los Angeles
Los Angeles Dependency Lawyers, INC.
Public Law Center
Special Needs Network, INC.
The Arc and United Cerebral Palsy California Collaboration
Western Center on Law & Poverty, INC.

Opposition

None on file.

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