

## DISPARITY DATA ON PURCHASED SERVICES

California law and regulation requires that regional centers display on their websites information about the dollar value of services they purchase for clients. These data (called “purchase of service” or “POS” data) must be reported separately by clients’ ethnic/racial group, language and diagnosis. The legislature asked for this kind of reporting as a first step in trying to understand whether and what types of disparities exist in purchased services across these groups – in other words whether clients in some ethnic, language or diagnostic groups receive, on average, more services than clients in other groups. This year, the reports have been expanded to show differences by living arrangement and also to include the costs paid by regional centers for insurance copays and deductibles, and co-insurance.

Documents show expenditures and authorized services by ethnicity or race, by the primary language of the client/family, by residence type, and by diagnosis. You will find both amounts authorized and amounts actually spent by the regional center. The last column of these reports gives the percent of authorized services that were actually used. For a variety of reasons, some clients/families do not use all of the services that are authorized. Reports are also included for clients who received no purchased services. An explanatory document, prepared by the Association of Regional Center Agencies, is also included. This highlights the limitations of the data. Some important things to know are:

- The data include only dollars authorized and spent by regional centers. Clients receive services through other sources (such as Medi-Cal and the school system), but these are not included in the reports.
- The data include all clients for whom the regional center purchased any services during fiscal year 2013-14. Some of these clients may no longer be clients of Lanterman Regional Center. For example, they may have transferred to another center or reached age 3 and been found not eligible for continued services.

- The data do not include services that the regional center pays for “by contract.” These are services for which the provider receives a single (contract) amount to serve a number or clients. Examples of this would be group supported employment services.
- The clients in any of the five diagnostic categories may also have additional diagnoses. For example, a client in the autism group may also have a diagnosis of intellectual disability, or a client with an intellectual disability may also have epilepsy.

## **ASSOCIATION OF REGIONAL CENTER AGENCIES**

### **REGIONAL CENTER PURCHASE OF SERVICES (POS) DATA LIMITATIONS OF POS EXPENDITURE DATA**

#### **1. Purchase of Service Costs**

The Purchase of Service (POS) data displayed represents the cost of services that Clients received that are paid for by the regional center. This POS expenditure data does not include the cost of services Clients receive that are paid for by Supplemental Security Income, Medi-Cal, the school system, and other generic agencies. The POS expenditure data represents expenditures the regional center made for services clients received during Fiscal Year (FY) 2013-14 based on regional center POS state claim data that was provided to DDS. The regional center may still make payments for services provided to clients during FY 2013-14 up until June 2016.

#### **2. Client Count**

The total number of clients who received services during the fiscal year will be greater than the regional center’s actual caseload. A client is included in the data if the client received a regional center funded service at any time during the fiscal year. A client who received a single service once during the year is counted the same as a client who received ongoing monthly services. The client is also counted regardless of their current status with the regional center. The data may include clients whose current status is closed, transferred-out, in-active, etc. if the client received regional center services during FY 2013-14.

### **3. Contract Purchase of Service Expenditures**

Due to the limitations of the regional center uniform fiscal system (UFS), POS expenditure data may not include payments made by the regional center that are paid to a service provider under a "contract". Currently, UFS is unable to allocate expenditures paid to a service provider under a "contract" to clients utilizing the "contract" service. Therefore, POS expenditures paid under a "contract" are excluded from the POS data. Typical services paid to a service provider under a "contract" may include, but are not limited to, transportation services and supported employment program (SEP) group services. Therefore, the total amount of POS expenditures reported will not reconcile with the regional center's actual POS expenditures for FY 2013-14.

### **4. Authorized Services**

Services that are authorized "encumber" the funds needed to pay for those services. The regional center's computer system (UFS) gives the regional center options regarding the "maintenance" of its encumbrances. When encumbrances are routinely adjusted for non-utilization, there will be a higher utilization percentage. When encumbrances are not routinely adjusted for non-utilizations, there will be a lower utilization rate.

### **5. Clients with Multiple Diagnoses**

There are many clients who have more than one diagnosis. In the summary reports for Purchase of Service Expenditures by Diagnosis and Consumers with No Purchase of Service by Diagnosis these consumers will be counted in every category for which they have a diagnosis. As an example, a client with a diagnosis of both autism and epilepsy will be counted in both the "Autism" and "Epilepsy" categories. Therefore, the sum of the clients reported in all the categories will be more than the total number of clients served by the regional center.

### **6. Category 5 Clients**

Clients listed in Category 5, according to Welfare and Institutions Code section 4512, are individuals who have "disabling conditions found to be closely related to mental retardation or to require treatment similar to that required for individuals with mental retardation, but shall not include other handicapping conditions that are solely physical in nature."