

**Methodology Overview**  
**Department of Developmental Services (DDS)**  
**Research, Audits, and Evaluation Branch**  
**External Comprehensive Dashboard**

**OBJECTIVE**

Facilitate timely access to regional center (RC) and statewide trends in caseload and Purchase of Service (POS) expenditures.

**SCOPE**

- Population: Individuals with an active status (1, 2, 3, 8, U) or POS expenditure in the time period(s)
- Time period(s): FY 2011/12 - current (less 120 days for claim processing)
- Topics: Summaries of caseload, claim amounts, and average POS expenditures, by regional center and selected demographic characteristics

**DESIGN**

This is a cross-sectional description of the active consumer population and individuals with POS expenditure records by fiscal year.

**DATA SOURCE(S)**

- Data Sources: Data used in the external/comprehensive dashboard come from information collected by local RCs, submitted to DDS each month, and stored in the DDS Data Warehouse.
  - Client Master File (CMF): Consumer identifiers and demographics
  - Client Development Evaluation Report (CDER): Reported diagnoses from the most recent CDER file
  - State Claims data: POS expenditures
- Data preparation:
  - Records are extracted for individuals with active status or at least one POS expenditure record in each month of the time period, are linked, by Unique Client Identifier (UCI), to diagnostic indicators from the CDER and claims data from the State Claims file.
- Inclusions/exclusions:

- Contract records (i.e., UCIs with 'CONTRACT' or other contract identifier) are excluded.
- All non-missing claim records are included. Claim records include zero dollar claims as well as any credits/adjustments (negative claim amounts).
- Individuals with a claim record but no corresponding Client Master File record, are excluded.
- No other exclusions are applied.

## DATA TRANSFORMATION OR CLEANING

- Regional Center (RC) caseload: The RC caseload represents the unique count of UCIs associated with POS expenditure records; individuals can be counted in more than one RC. For each month, individuals without any POS expenditures are assigned to the RC based on the client master file. Individuals who change RCs can be counted more than once at the fiscal year level.
- Total POS expenditures: Total POS expenditures reflect the sum of all claims.
- Per-capita POS: Per-capita POS expenditures are calculated by dividing the total expenditures by the number of unique individuals. Per-capita POS calculations include individuals with and without any POS expenditures.
- Age: At the monthly level, age is computed at the end of the month and organized into three groups: 0-2, 3-21, and 22 and older. At the fiscal year level, age groups reflect all individuals in the age group at any time in the fiscal year.
- Primary Language: Language reported as the preferred language in the latest CMF.
- Disability: Major disability categories used include:
  - Intellectual Disability: Based on the CDER field MRLEVEL, an individual is considered to have an intellectual disability if any one of the following diagnostic codes is present: 317, 3170, 70, F70, 318, 3180, 71, F71, 3181, 72, F72, 3182, 73, F73, 319, F78, F79.
  - Autism: Presence of autism or Pervasive Developmental Disorder (Autism level of '1' or a PDD code of '3' or '4' in the CDER).
  - Cerebral Palsy: Based on the CDER field CPALSY, a value of 1-3 (Has CP or Has other significant motor dysfunction).
  - Epilepsy: Based on the CDER field, EPSEIZ1 Type of Seizure: Any positive values for partial, generalized, or unclassified seizures.

- Fifth Category: Based on CDER field CAT5, a value of Y. Or if value in ICD33A is not blank when all “0” and “\*” are removed.
- Residence type: Residence is displayed in two categories, based on the residence code in the last month of the fiscal year (June).
  - In-Home: Home of Parent/Guardian/Family Home Agency/Foster Home (residence code 11, 78, 79, 80).
  - Out of Home: All other residence types (residence codes 9, 13, 14, 20-24, 29-31, 40-50, 52-58, 59, 60, 81-87, 89, 90, 98).

## DATA ANALYSIS

- Caseload, claims, and average POS expenditures can be filtered by:
  - Status category (Early Start, Intake, Lanterman, and Other Status)
  - Regional Center
  - Age group
  - Race/ethnicity
  - Primary language
  - Major disability
  - Residence type
- The dashboard limits filtering and applies cell suppression to comply with California Health and Human Services de-identification guidelines, available [here](#).
  - To maximize the amount of available data, suppression is applied to caseload, total expenditures, and total authorization fields so that per-capita POS values can be retained. Values are suppressed if the caseload represents fewer than 11 individuals.
- Software used: Power BI

## ADDITIONAL INFORMATION

- The first year of publication is 2024.