

**BEFORE THE
OFFICE OF ADMINISTRATIVE HEARINGS
STATE OF CALIFORNIA**

In the Matter of:

CLAIMANT

and

INLAND REGIONAL CENTER, Service Agency

DDS No. CS0035233

OAH No. 2026040217

DECISION

Traci C. Belmore, Administrative Law Judge, Office of Administrative Hearings, State of California, heard this matter on May 12, 2026, by videoconference and telephone.

Claimant's mother represented claimant, who was not present.

Sasha Barajas, Fair Hearings Representative, Fair Hearings and Legal Affairs, represented Inland Regional Center, the service agency.

Oral and documentary evidence was received. The record was closed, and the matter was submitted for decision on May 12, 2026.

ISSUE

Is claimant eligible for regional center services on the basis of autism spectrum disorder (ASD), intellectual disability disorder (IDD),¹ or a disabling condition found to be closely related to IDD or to require treatment similar to that required for individuals with IDD (fifth category)?

FACTUAL FINDINGS

Background

1. Claimant is a fifteen-year-old female living with her mother, father, and two siblings.

2. On January 22, 2025, claimant submitted an intake application to Inland Regional Center (IRC) for an assessment of regional center eligibility based on the suspicion of claimant having ASD.

¹ The Lanterman Act was amended long ago to eliminate the term "mental retardation" and replace it with "intellectual disability," as reflected in the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition* (DSM-5). The more current DSM-5, text revision (DSM-5-TR) no longer uses the term "intellectual disability" and instead refers to the condition as IDD. Many of the regional center forms have not been updated to reflect this change, and all of the terms were used interchangeably. Accordingly, for purposes of this decision, as well as all admissible documentary evidence, "mental retardation," "intellectual disability," and "IDD" mean the same thing.

3. On February 27, 2026, IRC issued a Notice of Action (NOA). The NOA set forth the determination by IRC that claimant was not eligible for regional center services because she did not have a developmental disability as defined by the Lanterman Developmental Disabilities Act (Lanterman Act).

4. On March 25, 2026, IRC received claimant's appeal request, and this hearing ensued.

Evaluations

5. On December 2, 2024, Lisa French, Psy.D., a licensed psychologist with Collaborative Autism Management Programs (CAMP), performed an assessment of claimant and prepared a written report. In the report, Dr. French noted that claimant's parents had requested the ASD evaluation due to concerns regarding claimant's "social difficulties and anxiety symptoms."

6. Dr. French reviewed records and administered several tests to claimant including the Gilliam Autism Rating Scale – Third Edition (GARS 3), Vineland Adaptive Behavior Scales Third Edition (Vineland 3), and the Autism Diagnostic Observation Schedule, Second Edition (ADOS 2). The assessment and tests were conducted with claimant's mother present. Claimant's score on the GARS 3 indicated that the probability of claimant having ASD was in the "Very Likely" range. Claimant's score on the ADOS 2 fell within the classification for ASD. Claimant's scores on the Vineland 3 ranged from moderately low to low.

7. Dr. French wrote that claimant presented as a "very shy and socially awkward girl." Dr. French observed that claimant often rocked in her seat and displayed difficulty engaging in conversation and answering questions. Dr. French

opined that claimant met the criteria for ASD. Dr. French diagnosed claimant with ASD, Level 2; social anxiety disorder; and attention deficit hyperactivity disorder (ADHD).

8. On December 15, 2025, a social assessment was done by IRC intake counselor (IC) Yvette Trevino-Reyes. IC Trevino-Reyes noted that claimant was not enrolled in school "due to her anxiety." Claimant's mother informed IC Trevino-Reyes that claimant was having issues with hygiene, i.e. showering only once per week and not brushing her teeth; transitions; and had audio and tactile sensitivities. According to her mother, claimant has not received any special education services while she was enrolled in school.

9. On January 20, 2026, Vickie Holmes, Psy.D., performed a psychological assessment of claimant. Claimant's father took claimant to the office for the assessment. However, he was not present when Dr. Holmes administered the tests to claimant. Dr. Holmes reviewed records and administered tests to claimant including the ADOS 2, Wechsler Abbreviated Scale of Intelligence, Second Edition (WASI 2), Adaptive Behavior Assessment System, Third Edition (ABAS 3), and the Autism Diagnostic Interview, Revised (ADI-R). Claimant's score on the WASI 2 indicated that her "cognitive functioning is in the below average range." During the administration of the ADOS 2, Dr. Holmes noted that claimant was "arm scratching and body rocking" but otherwise "sat appropriately still."

10. Dr. Holmes wrote that claimant had "no significant deficits in her cognitive function skills" and did not exhibit "substantial deficits" in at least three areas of major life activities. Dr. Holmes opined that claimant did not meet the diagnostic criteria for ASD. Dr. Holmes diagnosed claimant with social anxiety disorder and unspecified depressive disorder.

IRC Eligibility Determination

11. Jessica De Santiago, Psy.D., is on the team of professionals tasked with making eligibility determinations for IRC. Dr. De Santiago is a licensed clinical psychologist. She obtained her Ph.D. in clinical psychology from California School of Professional Psychology, Alliant International University in 2016. She also holds bachelor's and master's degrees in psychology. For the past four years, Dr. De Santiago has been employed as a staff psychologist specializing in assessment and diagnosis of persons for the purpose of determining eligibility for regional center services. Dr. De Santiago is an expert in the assessment of individuals for eligibility on the basis of ASD, IDD, and fifth category. Dr. De Santiago testified at hearing regarding the basis for her opinion that claimant was not eligible for regional center services.

12. In making her determination, Dr. De Santiago reviewed claimant's records, including Drs. French's and Holmes's reports. Dr. De Santiago noted that learning disabilities, and solely psychiatric or physical disorders are generally excluded from eligibility for regional center services. Dr. De Santiago stated the criteria for eligibility for services are that an individual must have a qualifying diagnosis, must have significant functional limitations in three of the seven areas of major life activity, and must have been diagnosed prior to 18 years of age.

13. From her review of claimant's records, Dr. De Santiago determined that claimant did not have a qualifying diagnosis, nor did claimant qualify under the fifth category. Dr. De Santiago acknowledged that claimant's rocking can be indicative of ASD but is also seen in individuals with diagnoses of anxiety and ADHD, both of which claimant has been diagnosed with. Additionally, Dr. De Santiago noted that claimant does not have an Individualized Education Plan, which is given to children who qualify for special education services through their school.

14. Dr. De Santiago expressed concerns with the validity of the assessment done by Dr. French because claimant's mother was present during the entirety of the assessment, which is not normal procedure for the assessment.

Claimant's Evidence

15. Claimant's mother testified on behalf of claimant. She stated that when claimant was attending school, staff at the school told her that claimant might have ASD and that she should have claimant evaluated. Regarding her being present during the assessment, claimant's mother stated that claimant would not participate in the assessment unless she was present. Claimant's mother stated that claimant has issues with hygiene, body rocking, and pacing.

LEGAL CONCLUSIONS

1. In a proceeding to determine whether an individual is eligible for regional center services, the burden of proof is on the claimant to establish that he or she has a qualifying developmental disability. The standard of proof required is preponderance of the evidence.

2. The State of California accepts responsibility for persons with developmental disabilities under the Lanterman Act. The Lanterman Act is found at Welfare and Institutions Code² section 4500 et seq. The purpose of the Lanterman Act is to rectify the problem of inadequate treatment and services for the developmentally

² All statutory references are to the Welfare and Institutions Code unless otherwise indicated.

disabled and to enable developmentally disabled individuals to lead independent and productive lives in the least restrictive setting possible. (§§ 4501, 4502; *Association for Retarded Citizens v. Department of Developmental Services* (1985) 38 Cal.3d 384.)

3. A developmental disability is a disability that originates before an individual reaches age 18; continues, or can be expected to continue, indefinitely; and constitutes a substantial disability for that individual. (§ 4512, subd. (a); Cal. Code Regs., tit. 17, § 54000, subd. (b).)

4. "Developmental disability" as defined in the Lanterman Act includes intellectual disability, cerebral palsy, epilepsy, autism, and disabling conditions found to be closely related to intellectual disability or to require treatment similar to that required for individuals with an intellectual disability. (§ 4512, subd. (a); Cal. Code Regs., tit. 17, § 54000, subd. (a).)

5. "Substantial disability" means major impairment of cognitive and/or social functioning, and the existence of significant functional limitations, as appropriate to a person's age, in three or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency. (§ 4512, subd. (l)(1); Cal. Code Regs., tit. 17, § 54000, subd. (a).)

Discussion

6. Claimant provided a report from Dr. French diagnosing her with ASD, social anxiety disorder, and ADHD. IRC provided a psychological evaluation by Dr. Holmes diagnosing claimant with social anxiety disorder and unspecified depressive disorder. Neither written report was more persuasive than the other, although it

should be noted that both Drs. French and Holmes diagnosed claimant with social anxiety disorder.

7. Dr. De Santiago explained that the body rocking observed by both doctors is also a symptom of anxiety and ADHD. Based on her review of claimant's records, Dr. De Santiago opined that claimant did not meet the criteria for a diagnosis of ASD. No credible evidence refuted Dr. De Santiago's opinions that claimant did not have a qualifying diagnosis for regional center purposes.

8. Even assuming claimant has a qualifying diagnosis of ASD, claimant failed to prove she has significant functional limitations in three or more areas of major life activity as required. At best, claimant has limitations in only one area of major life activity, self-care, which is insufficient to find her eligible for regional center services.

9. Moreover, claimant never received special education services while she was in school. Although a school providing services to a student under an autism disability is insufficient to establish eligibility for regional center services, because schools are governed by California Code of Regulations, Title 5 and regional centers are governed by California Code of Regulations, Title 17, which has much more stringent eligibility requirements than Title 5, claimant not receiving Title 5 services suggests her school did not have concerns she may have ASD, as Dr. De Santiago alluded to in her testimony.

10. Claimant has not met her burden of establishing that she is eligible for regional center services. Claimant failed to establish that she has a substantial disability due to a qualifying diagnosis.

ORDER

Claimant's appeal is denied. Inland Regional Center's determination that claimant is not eligible for regional center services is affirmed.

DATE: May 22, 2026

TRACI C. BELMORE
Administrative Law Judge
Office of Administrative Hearings

NOTICE

This is the final administrative decision. Each party is bound by this decision. Either party may request reconsideration pursuant to subdivision (b) of Welfare and Institutions Code section 4713 within 15 days of receiving the decision, or appeal the decision to a court of competent jurisdiction within 180 days of receiving the final decision.