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Commissioner

Local Commissioners Memorandum

Transmittal:	02 OCFS LCM-08
To:	Local District Commissioners
Issuing Division/Office:	Administration
Date:	April 12, 2002
Subject:	Tuition Reimbursement for Educationally Handicapped Children Placed in Child Care Institutions
Contact Person(s):	Sandra Dingee – (518) 474-2812; or by e-mail through Outlook or Exchange; or through the Internet: sandra.dingee@dfa.state.ny.us
Attachments:	<ul style="list-style-type: none">▪ State Education Department (SED) Claims Reports for 1998-99 for Participating Social Services Districts▪ Sign-Off Sheet with Disability Codes
Attachments Available On – Line:	A listing of Agency Names and Codes, to be used as a reference for identifying the provider code to specify for each child, is available on-line through Outlook or Exchange by opening the following folders: "Public Folders".. "All Public Folders"... "Statewide"... "OCFS"... "Rate Setting"... "SED Tuition Reports"

I. Purpose

The Office of Children and Family Services (OCFS) is requesting 1998-99 tuition payment data for educationally handicapped children who were reported to OCFS by social services districts pursuant to Section 4006 of the Education Law. The tuition data is to be completed on the enclosed State Education Department (SED) Claims Reports.

II. Background

Section 4004 of the Education Law specifies that the tuition costs for a child placed in a child care institution (defined as a child placed by social services districts, OCFS or the family court in an OCFS-licensed institution or group residence; a child placed in an OMH-licensed residential treatment facility (RTF) for children and youth; or a child admitted to Blythedale Children's Hospital) are the responsibility of the social services district financially responsible for such child at the time of placement, or at the time of admission to Blythedale Children's Hospital. Those costs are currently funded through the Family and Children's Services Block Grant. Section 4004 also specifies that social services districts are eligible to receive additional reimbursement to offset some of the tuition costs for such children. This additional reimbursement represents the local school district's share of the cost of educating the child had the child continued in his/her school district of residence.

III. Program Implications

The procedure outlined in this memorandum is an effort by OCFS to reduce tuition costs to social services districts through the transfer of funds from SED to financially responsible social services districts. All social services districts are encouraged to participate in this process. Social services districts that do not participate are foregoing potentially significant revenue and should consider the opportunity for additional reimbursement through this process.

Enclosed is a district-specific SED Claims Report listing the educationally handicapped children whose eligibility may provide a social services district with additional reimbursement for the 1998-99 school year cycle. The printout for the 1998-99 cycle begins September 1998 and ends June 1999. Where there is data preprinted on the report, it comes from the DSS-3424 forms (School District Notification of Financial Responsibility for Educationally Handicapped Foster Child Placed in a Child Care Institution) previously completed and submitted to OCFS. The blank areas require information that must be completed at this time.

NOTE: If a social services district did not participate in this process to date, or did not submit DSS-3424 forms for the 1998-99 school year, an SED Claims Report will not be attached. A social services district may, however, still participate in the process by submitting the required forms and data. Please call the State contact immediately for technical assistance. The DSS-3424 was revised effective October 1991. Please order the revised forms from: Document Services, P.O. Box 1990, Albany, New York 12201.

Each social services district must verify the preprinted information and complete the following entries for the children listed:

- Disability (Handicapping Condition) - Specify only one handicapping condition (see attached Sign-Off Sheet with Disability Codes for a list of conditions).
- Provider (the name of the agency/school providing educational services) - This is the agency/education provider which may or may not be the same as the residential provider (see the listing of Agency Names and Codes for a list of agency names and codes).

- Code (provider code) - Specify the code for the educational provider (see the listing of Agency Names and Codes for a list of agency names and codes).
- Program - Specify the name of the school program into which the child is placed (e.g., school-age, special class, or other school program name, if known).
- Code (program code) - FOR SED USE ONLY. SED will complete this portion of the form.
- Education Service Period - Specify dates of enrollment (September through June).
- Termination of CCI/RTF Care - Specify the date of discharge from a child care institution or RTF, if applicable.
- Total Cost Paid - Specify the amount of tuition paid from September through June only.
- The preparer in each local district must enter his/her name, title, telephone number and date of completion on the enclosed Sign-Off Sheet. This is necessary in the event the System to Track and Account for Children (STAC) processing unit in SED requires further input for processing.
- Each local district section of the report includes three "Add" that have no child data preprinted on them. They are to be used for additional entries, i.e., children for whom there were no DSS-3424 records on file when the report was generated. If additional children are placed on this report, completed DSS-3424 forms must be included for those children. No new entries will be processed without the appropriately completed forms.
- The forms completed by hand are sometimes difficult to read. Please ensure that the copies submitted are legible.

Social services districts are required to return completed SED Claims Reports for 1998-99 by no later than June 14, 2002 to the address below. Reimbursement may be forfeited by those social services districts that are late in submitting their reports.

OCFS - Rate Setting Unit
NYS Office of Children & Family Services
52 Washington St., South Building
Room 314
Rensselaer, New York 12144-2796

In addition, as part of the on-going process of submitting DSS-3424 forms, please advise your staff to continue to send all completed DSS-3424 forms to this address.

I. Other

Please share this memorandum with your Director of Services and Accounting Supervisor.

/s/ Melvin I. Rosenblat

Issued By

Name: Melvin I. Rosenblat

Title: Deputy Commissioner of Administration

Division/Office: Administration