



**Nassau County
Department of Health**

DUE PROCESS DOCUMENTATION

For

**CPSE Chairs
And
CPSE Support Staff**

**Updated
January 2024**

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**Nassau County Department of Health
Preschool Special Education Program
Due Process Notification**

Date: _____

School District: _____

Name of who we can contact at the School District regarding this case: _____

Telephone number for contact person: _____

Student Name: _____

Attorney representing School District: _____

Attorney representing Child: _____

Date for Mediation: _____

Date for Impartial: _____

After completing the information requested above:

1. Place call to the Nassau County Department of Health Preschool Special Education Program @ (516) 227-8702 or (516) 227-869 2to notify them that you are faxing this document and any other pertinent information.
2. Fax this form and any documents to (516) 227-8666.
3. If you have any questions about this process or this case, please call Ronnesheia Gonzalez @ (516) 227-8702 or Denise Mancilla @ (516) 227-8692.

Preschool Due Process Cost Reimbursement Claim Procedures

Once the due process proceeding is concluded and the determination is final:

1. The School District will:
 - a. Compile the Following:
 1. Preschool Due Process Reimbursement Request form.
 2. Copies of all invoices/bills for which reimbursement is requested and cancelled checks which paid these bills (fronts and backs of checks).
 3. Copy of Impartial Hearing Officers Findings of Fact and Decision Report.
 4. Verification form indicating the hourly rate at which the district has retained its Attorney (if reimbursement for school district Attorney is requested).
 5. Affirmation form (if the parent has prevailed in this proceeding and reimbursement of the parents' Attorney's fees is requested).
 6. STAC-1 or STAC-3 amendment form (original to STAC Unit, copy to PRDU), dated June 29 to June 30, 20 _ _

- b. Submit complete packages of the above information to:

Mr. Robert Wojtkiewicz
Mr. Nicholas Thayer
STAC and Special Aids Unit
Room 514 EB
Albany, NY 11234

Ms. Jennifer Finucan
Mr. Ian Hobbs
Ms. Catherine Campbell
Rate Setting Unit
Room 304 EB
Albany, NY 11234

2. SED will review the costs submitted. SED will recommend reimbursement of reasonable costs, subject to approval by the Division of Budget.
3. Once certified, SED will send a rate letter to the school district (cc to the County). This rate will be put on the STAC system as a child specific rate under the school district name. This rate letter gives the school district authority to bill the County for the approved costs.
4. Copy of the child specific tuition rate letter and the child specific STAC 1 (under the school district name) should be submitted by the school district to the County. The County will review and approve the STAC 1 and submit to the STAC Unit for processing. (The County will mail the original STAC 1, signed by the County, and a copy of tuition letter to Mr. Robert Wojtkiewicz and Mr. Nicholas Thayer). SED will assign the code 9114.
5. The STAC Unit will issue a STAC 3 approval, which is notification to the school district and County that the rate is approved. This is also the County's authorization to seek reimbursement from the State. The State will reimburse the County for the approved costs in the same manner as it provides reimbursement for approved costs related to programs and services under Section 4410 of the Education Law.

Verification of School District Attorney Fees

The _____ law firm has been retained by the _____
_____ school board at an hourly rate of _____
(or under the terms and conditions indicated in he attached agreement).

Superintendent of Schools

School District Attorney Affirmation

(Must be completed only if parents prevailed)

I, _____, attorney for the
_____ School District, affirm that the due
Process proceeding held on behalf of _____ is final.
The parent was the prevailing party in this matter. I further affirm that I have
Reviewed the bill submitted by _____ regarding his/her
Representation of the above named student, and upon my review, I have
determined that:

1. The hourly rate charged reflects the community rate which is
_____ per hour.
2. The number of hours claimed by the attorney
constitutes a reasonable fee for the legal services rendered.

Signature

