

JAMES MCGUINNESS
& ASSOCIATES INC.
Consultants

Ulster County eSTACs Getting Started - Entering Children and STAC-5

Ulster County Timeline

- * **April 30, 2024:**

- * McGuinness will migrate all of the children that are in the Ulster County Preschool system over into eSTACs.

- * **May 1, 2024:**

- * Ulster County school districts can begin entering 24/25 children and STACs into eSTACs.

- * **All prior year STAC's** (23/24, 22/23, 21/22 etc.), send paper STAC to the county to enter or amend in their Preschool system. Prior years will not be turned on in eSTACs and you will not be able to enter any STACs.

What is eSTACs

- * eSTACs is part of our CPSE Portal website (<https://www.cpseportal.com>).
- * It is a series of screens to facilitate the communication of STAC related information from the school district to the County.
- * The goal is to eliminate sending paper between from the district to the County (or at least get very close).

Types of Information

- * The following information can be sent to the County via eSTACs
 - * Evaluation information (eliminating need for STAC-5)
 - * Service information (eliminating need for STAC-1)
 - * Supporting documentation including
 - * Medicaid Parental Consents
 - * Transportation forms
 - * IEP
 - * Aide / Nurse forms
 - * Birth certificate, passport, adoption papers, legal name change document
 - * More....

District Designation of Digital Signatories for eSTACs Form

- * Each school district completes a District Designation of Digital Signatories for eSTACs form.
 - * This form will designate the CPSE Chair and all staff who will have access to eSTACs, and will be marked as to **who can** sign & submit STAC-1 & STAC-5's for the school district.
 - * McGuinness will enter all staff listed on the form and invite them to the Portal.
 - * Once the school district staff accepts the invitation, and sets up their Portal account, then McGuinness will give the staff the necessary permissions to each staff to sign according to what is marked on the form.
 - * If you want staff to do entry work, but **NOT** sign & submit STAC's, then do not check off any of the boxes.
- * If the school district has a change in staff or needs to add staff signing privileges, a new form should be completed, and sent to McGuinness.

District Designation of Digital Signatories for eSTACs

District Designation of Digital Signatories for eSTACs

District _____

CPSE Chairperson _____

I authorize of the following individuals to use a digital signature to submit electronic STAC records the eSTACs system on behalf of our district.

Name	eMail	Position / Title	STAC-5	STAC-1
		CPSE Chairperson	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

We certify that for any STAC-5 that the above individuals electronically sign and submit through the eSTACs system, the child has received the submitted multidisciplinary evaluation in accordance with Section 4410 of the Education Law and the Regulations of the Commissioner of Education and we maintain proper documentation to support this.

We certify that for any STAC-1 that the above individuals electronically sign and submit through the eSTACs system, the preschool student with a disability is being provided the educational services submitted and that such services have been recommended by the Committee on Preschool Education and that the child is eligible for such placement in accordance with Section 4410 of the Education Law and the Regulations of the Commissioner of Education and we maintain proper documentation to support this.

Name

Title

Signature

Date

Please fax the completed form to
(518) 393-9938 attention eSTACs.

Getting Started

Home Page of Portal

- * You will be using the eSTACs tab on your home page.
- * You will also see News Feed articles on the right side of your home page.

CPSE PORTAL

Hello, DemoCPSEChair . You are currently logged in for **CLARKSTOWN CSD** (Logout)

JAMES MCGUINNESS & ASSOCIATES INC. Consultants

Home File Transfer IEP **eSTACs** Lookup Documents Reports Medicaid People My Account Knowledge Base

Hide

User Profile

Username: **DemoCPSEChair**
First Name: **Demo**
Last Name: **CPSEChair**
Email: **tframent@jmcguinness.com**

[Edit User Account](#)

News Feed

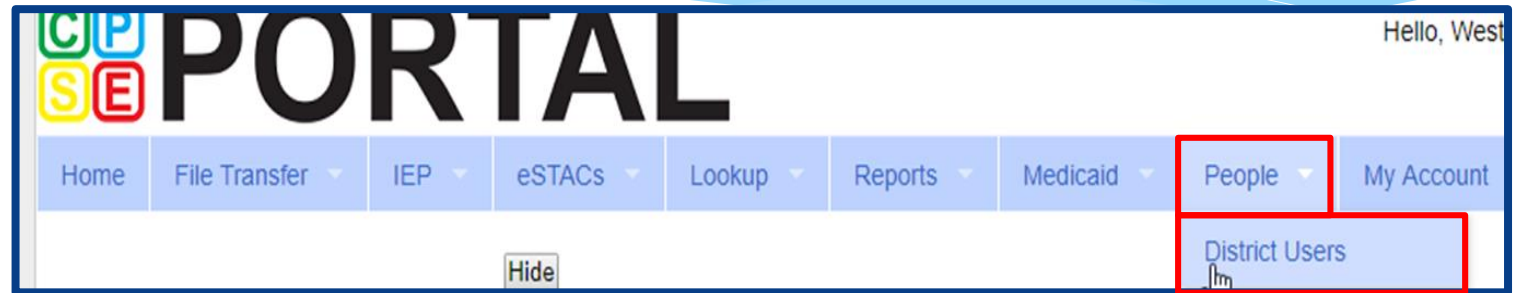
[View All Your Articles](#)

No news

Getting Started

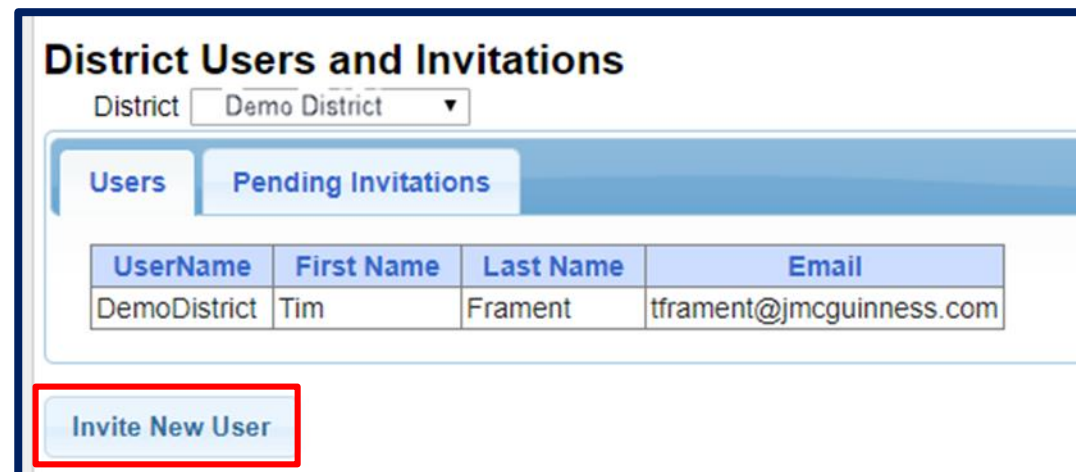
- * Each district has a login to the CPSE Portal.
 - * If you currently have access to the Portal as a provider, you will now need another username for access to eSTACs as the district.
- * That single login can “invite” additional users from their district.
- * Every individual that logs in for a district should have their own username & password.
- * When a person receives an invite, they can then click a link to accept the invitation and create a username and password.

Inviting New Users



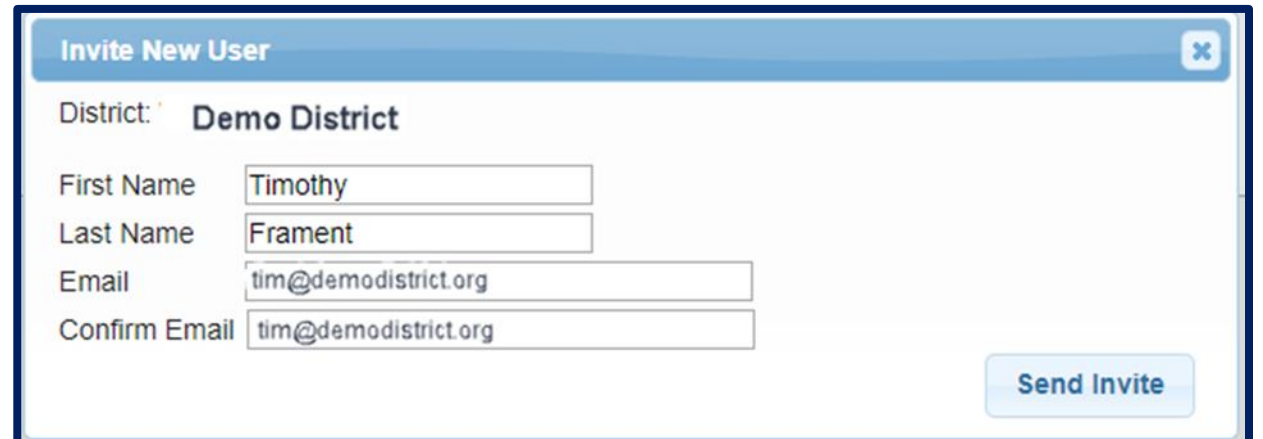
* Go to *People* -> *District Users*

* Click “*Invite New User*”.



Inviting New Users

- * Enter First Name, Last Name & Email address of new user, and click “*Send Invite*”.
- * CPSE Portal will send an email inviting the new user to join the Portal.



The screenshot shows a web form titled "Invite New User" with a close button (X) in the top right corner. The form contains the following fields and values:

District:	Demo District
First Name	Timothy
Last Name	Frament
Email	tim@demodistrict.org
Confirm Email	tim@demodistrict.org

A "Send Invite" button is located at the bottom right of the form.

Accepting the Invitation

- * The new user will receive the below email containing a link to join the Portal.
- * The link will come from **noreply@CPSEPortal.com**.

From: noreply@CPSEPortal.com
Sent: Thursday, January 31, 2019 9:56 PM
Subject: User Invitation

Timothy Frament,

You have been invited to be associated with the district DEMO DISTRICT in the CPSEPortal system. Please follow the link below to confirm this invitation, and associate yourself with this district.

<http://localhost/CPSEPortal/People/Invites/DistrictInvitationResponse.ashx?code=db7d8f7ab79a4ddebd037d9c855e36fc>

NOTE: This is an automated email and should not be replied to.



Choosing Username and Password

- * The confirmation page allows the user to choose a username and password, and “Accept Invitation”.
- * When the individual enters their choice for a username the screen will display whether that name is available or not.



CPSEPortal Invitation
You have been invited to be associated with V [redacted] as a [redacted] password and then you may log in to the system. If any of your details

Name Confirmation - Confirm this information is correct
First Name Last Name
Timothy Frament

User Account Information
Username
 Available

Password  Confirm Password 

User Account Information
Username
 Taken

Password  Confirm Password 

Invitation Issues – User did not receive an email

- * Have user check their junk / spam folder.
- * Use the Pending Invitations tab under **People -> District Users** to either:
 - * Resend link
 - * Copy the link and send with your email

First Name	Last Name	Email	Email Sent	
Test	User	demo@cpseportal.com	01/31/2019 @ 10:17 PM	resend delete View Link

Invite New User

Link to Invitation

<http://localhost/CPSEPortal/People/Invites/DistrictInvitationResponse.ashx?code=b89d3aa6bbc842079b77da67b71378a0>

Copy Ctrl+C

Deleting District Users

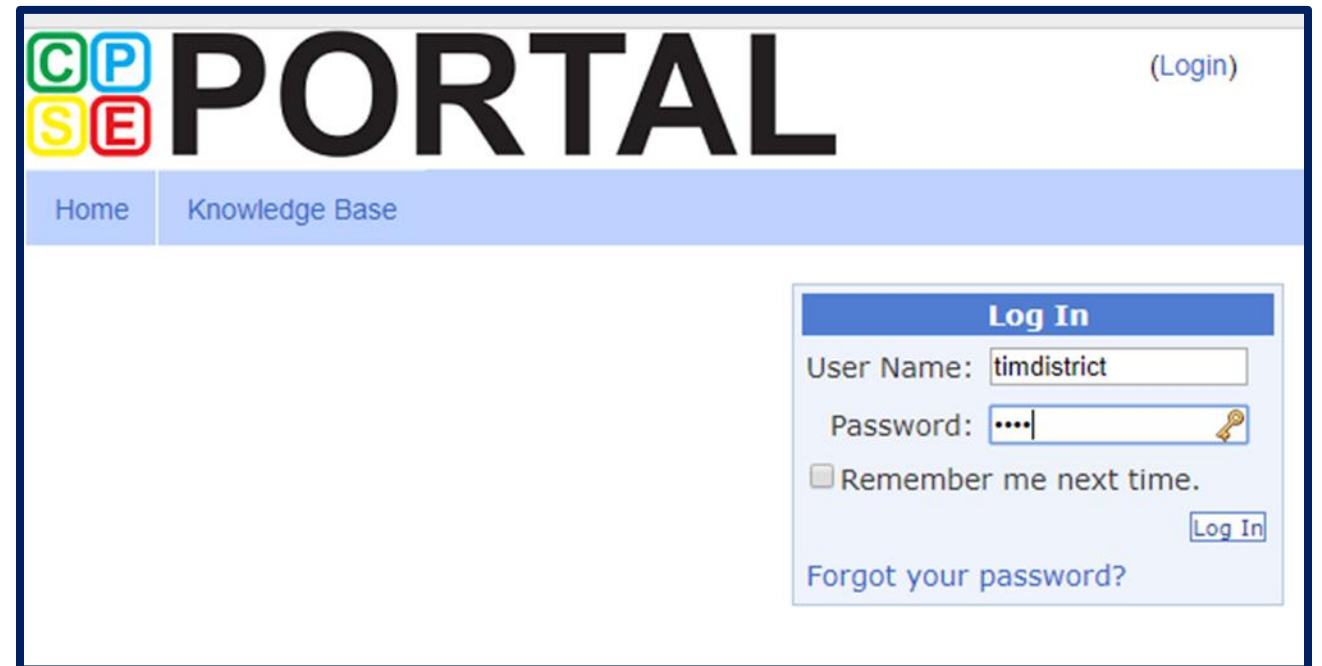
- * If a staff member leaves their position the CPSE Chair listed in the Portal can delete them from the Portal.
- * Go to **People -> District Users**
- * Select the “Delete” option next to the staff members name.

The screenshot shows the 'District Users and Invitations' page. The navigation menu at the top includes 'Home', 'File Transfer', 'IEP', 'eSTACs', 'Lookup', 'Documents', 'Reports', 'Medicaid', 'People', 'My Account', and 'Knowledge Base'. The 'People' menu is expanded, showing 'District Users' as a sub-option. Below the navigation, there is a 'District' dropdown menu. The main content area has two tabs: 'Users' and 'Pending Invitations'. The 'Users' tab is active, displaying a table with columns for 'UserName', 'First Name', 'Last Name', and 'Email'. A 'Delete' button is visible next to the last row of the table. An 'Invite New User' button is located at the bottom left.

UserName	First Name	Last Name	Email		
					Delete
					Delete

Logging In

- * Use your browser to navigate to <https://www.cpseportal.com>
- * Enter your User Name and password.



The screenshot shows the CPSE Portal login interface. At the top left, the logo consists of four colored squares (C in green, P in blue, S in yellow, E in red) followed by the word "PORTAL" in large black letters. A "(Login)" link is in the top right. Below the logo is a navigation bar with "Home" and "Knowledge Base" links. The main content area features a "Log In" form with the following elements:

- Log In** (form title)
- User Name:
- Password: (with a key icon for password visibility)
- Remember me next time.
-
- [Forgot your password?](#)

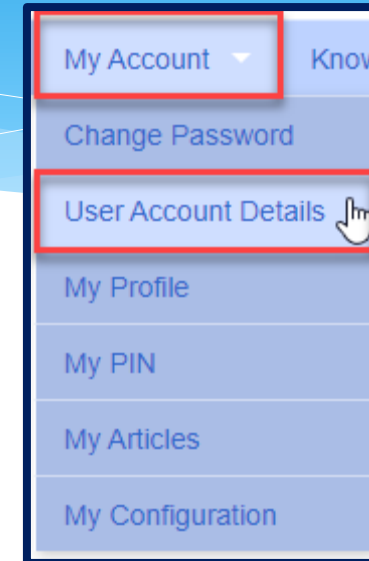
Digital Signature – User Profile

- * The user's account should have that individuals first and last name associated with the account.
- * You can easily see whether your account has the first and last name entered by looking user profile panel on the dashboard when you first log in.
- * To add or edit First & Last name, click **My Account -> User Account Details**.



Digital Signature

- * Go to **My Account** -> **User Account Details**
- * Use the User Account Details page to enter / edit your Last name and First name for your account.
- * Click **“Update”** to save the changes

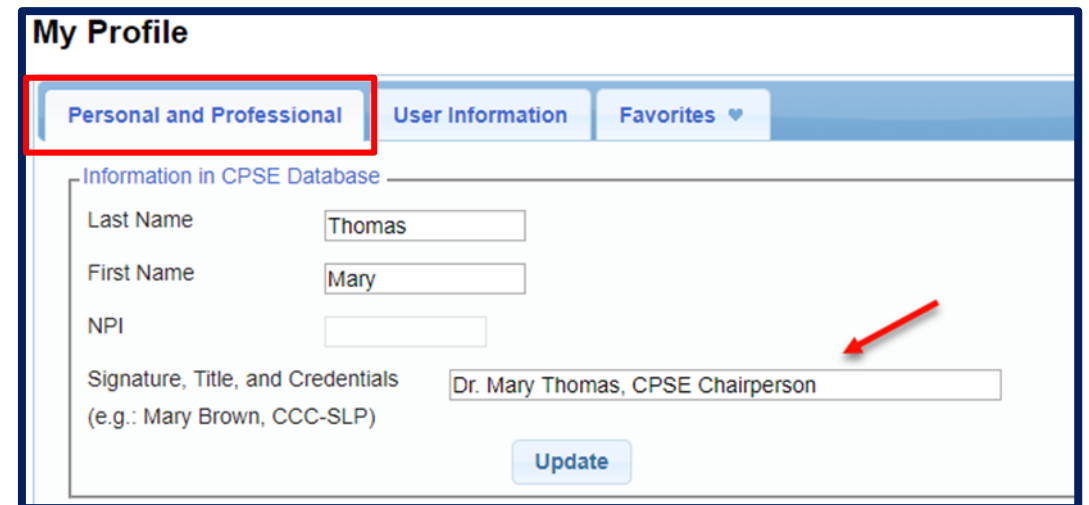
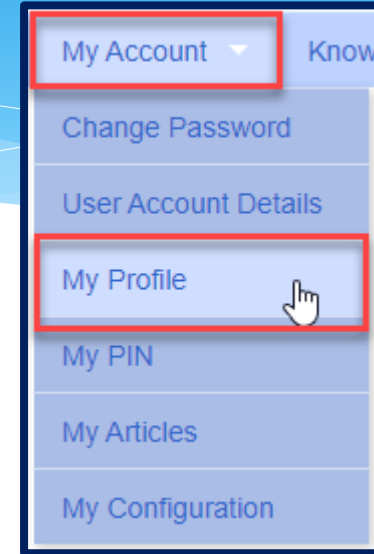


User Information Updated Successfully

Username	<input type="text" value="RydellUser"/>
Last Name	<input type="text" value="Mary"/>
First Name	<input type="text" value="Thomas"/>
Email	<input type="text" value="RydellUser@RydellCSD.org"/>

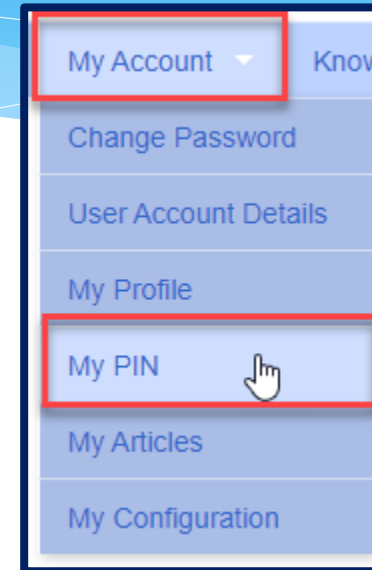
Digital Signature – Signature & Title

- * Go to **My Account -> My Profile**
- * On the Personal and Professional tab, ensure that your first and last name are correct.
- * Enter your Signature & Title by typing out your “signature” exactly as it would be if you signed your name with a pen. Include any punctuation, titles, etc. that you include when you sign your name for CPSE related documents.
- * Click “**Update**” to save your changes.

A screenshot of the 'My Profile' page. The 'Personal and Professional' tab is selected and highlighted with a red box. Below the tabs, there is a section titled 'Information in CPSE Database' with several input fields: Last Name (Thomas), First Name (Mary), NPI (empty), and Signature, Title, and Credentials (Dr. Mary Thomas, CPSE Chairperson). A red arrow points to the Signature, Title, and Credentials field. An 'Update' button is located at the bottom right of the form.

Digital Signature – Creating Your Pin

- * Go to **My Account -> My PIN**
- * To create your PIN:
 - * 1 - Choose a PIN and type it in the PIN Number field.
 - * 2 - Enter your username that you log in with (should be prefilled).
 - * 3 - Enter your password that you use to login to CPSE Portal.
 - * 4 - Click “*Save PIN*”.



PIN Selection

You have not yet chosen a PIN. You will be unable to digitally sign until you do so. Please create one now.

PIN Number: 1

Username: 2

Password: 3

4

Digital Signature – Creating PIN Problems


- * The message “**No person record exists for your account. PIN cannot be created.**” indicates that you did not perform Step #1 – Entering your first and last name for the user account.
- * The message “**Invalid Password. Try Again**” indicates that what you are entering into “Password” field is not the correct password that you use to log into CPSE Portal. Make sure that you are not entering your PIN a second time in the Password field.

PIN Selection

No person record exists for your account. PIN cannot be created.

PIN Number:

Username:


Password: 

PIN Selection

You have already chosen a PIN.
Invalid Password. Try again.

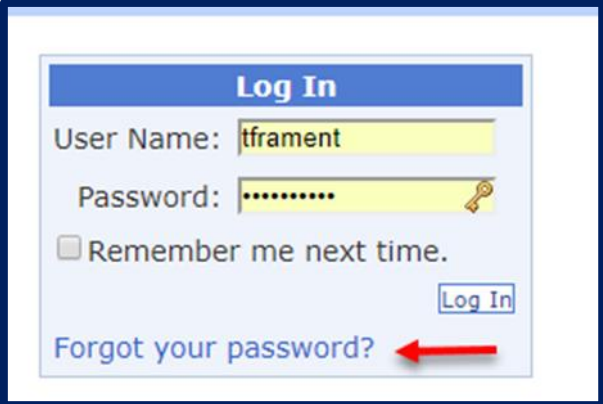
PIN Number:

Username:


Password: 

Forgotten Passwords

- * User can click “*Forgot your password?*” on login screen.
- * Enter your username and click “*Submit*”.
- * An email with a new password will be sent to your email address.




The screenshot shows a 'Log In' form with a blue header. It contains a 'User Name' field with the text 'tfragment', a 'Password' field with masked characters and a key icon, a checkbox for 'Remember me next time.', and a 'Log In' button. A red arrow points to the 'Forgot your password?' link at the bottom left of the form.



The screenshot shows a 'Password Recovery' form with a blue header titled 'Forgot Your Password?'. Below the header, it says 'Enter your User Name to receive your password.' There is a 'User Name' input field and a 'Submit' button at the bottom right.

Forgotten Usernames

- * Any district user (or County user) can use the district users screen to view all the users and see what their username is.
- * Go to **People -> District Users**



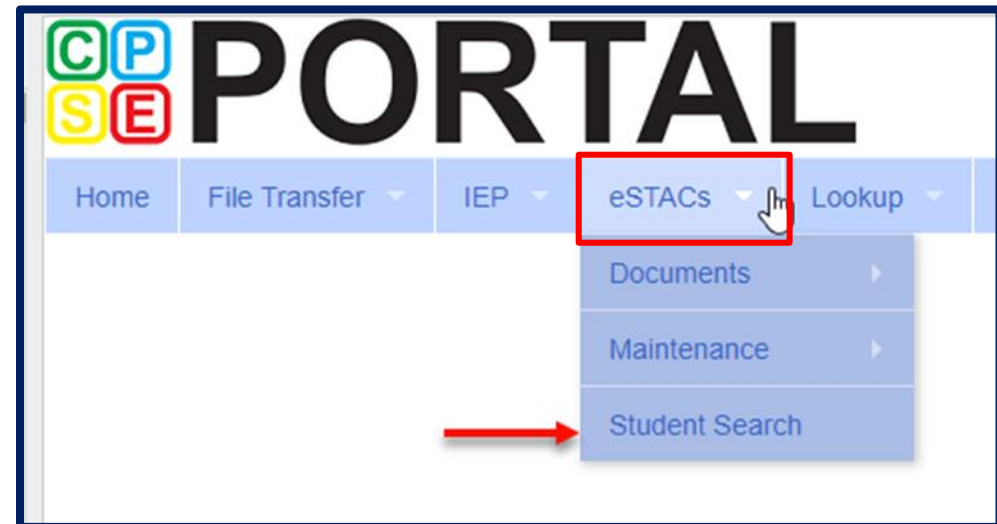
UserName	First Name	Last Name
DemoDistrict	Tim	Frament
timdistrict	Timothy	Frament

Invite New User

eSTACs Entering Children

eSTACs Student Search

* Go to eSTACs → Student Search



Student Search

Filters

Last Name	First Name	DOB	STACID	CIN	Student Number
County	ROCKLAND				
District	CLARKSTOWN CSD				

Clear Filters Retrieve

- * **ALWAYS** search to make sure the child isn't already in the system.
- * The fields above are used as filters to find a specific child. You can search based on any combination of fields.
- * Searching with no filters specified will return all children. Click “Retrieve”.

Student Search – no Filters

Filters

Last Name First Name DOB STACID CIN Student Number

County WESTCHESTER

District RYDELL CSD

Clear Filters Retrieve

Add New Student

Last Name	First Name	DOB	Gender	CIN	STACID	Student Number			
Balmudo	Leo	03/19/16	M			6600019969	Edit	Details	Delete
Carrington	Michael	04/04/16	M			6600019981	Edit	Details	Delete
Chisum	Tom	12/31/16	M			6600019967	Edit	Details	Delete
DeFuego	Anthony	03/12/16	M			6600019973	Edit	Details	Delete
DiGregorio	Charlene	02/22/16	F			6600019968	Edit	Details	Delete
DiMucci	Louis	12/15/16	M			6600019980	Edit	Details	Delete
Facciano	Franchesca	09/09/16	F			6600019971	Edit	Details	Delete
Jaworski	David	05/18/16	M			6600019972	Edit	Details	Delete
LaTierri	Sonny	08/13/16	M			6600019965	Edit	Details	Delete
Maraschino	Marty	07/22/16	F			6600019966	Edit	Details	Delete
McKenzie	Bradley	12/05/16	M			6600019974	Edit	Details	Delete
Misner	Martin	11/11/16	M			6600019978	Edit	Details	Delete
Murdoch	Kenickie	10/10/16	M			6600019970	Edit	Details	Delete
Nogerelli	John	06/14/16	M			6600019975	Edit	Details	Delete
Rebchuck	Paulette	08/22/16	F			6600019977	Edit	Details	Delete
Rizzo	Betty	09/09/16	F			6600019964	Edit	Details	Delete
Willard	Willie	05/11/16	M			6600019979	Edit	Details	Delete
Zinone	Stephanie	01/21/16	F			6600019976	Edit	Details	Delete

Student Search – Partial Name

- * For the first and last name you can enter the first few letters and search to find all students that name start with those letters.

Filters

Di First Name DOB STACID CIN

District County

Last Name	First Name	DOB	Gender	CIN	STACID		
DiGregorio	Charlene	02/22/16	F			Edit	Details
DiMucci	Louis	12/15/16	M			Edit	Details

Student Search - Wildcard

- * Use the percent sign (%) as a wildcard.

Filters

De%fuego First Name DOB STACID CIN

District [SYSTEM 000 ▼]

County []

Retrieve

Add New Student

Last Name	First Name	DOB	Gender	CIN	STACID		
Del Fuego	Peter	05/15/15	M			Edit	Details
DelFuego	Anthony	03/12/16	M			Edit	Details
DeltoroFuego	Maria	09/12/16	F			Edit	Details

Student Search – Multiple Fields

- * You can search for both first and last name as well as partial first and last names.

Filters

rizz fr DOB STACID CIN

District [▼]

County []

Retrieve

Add New Student

Last Name	First Name	DOB	Gender	CIN	STACID		
Rizzo	Frank	12/18/16	M			Edit	Details

Adding a Student

- * Go to the Student Search screen.
- * Verify student is not already in system.
- * Click on “Add New Student” button.

The screenshot displays a search interface with the following elements:

- Filters** section containing input fields for: Last Name, First Name, DOB, STACID, CIN, and Student Number.
- County dropdown menu set to **ROCKLAND**.
- District dropdown menu set to **ABBOT**.
- Buttons for **Clear Filters** and **Retrieve**.
- A button labeled **Add New Student** at the bottom left, which is highlighted with a red arrow pointing to it.

Student Information

- * Field with an asterisk (*) next to their label are required in order to save.
- * When creating a child:
 - * If the child is a Jr/II/III, please enter this information in the Suffix box. Do not include this with the child's last name.
- * Ulster County requires the address of the child.
- * Other fields should be entered if the information is known.

Student Information

[Add/Edit Student](#)

County of Student's Current Location*

Is this student placed in Foster Care?* Yes No

District*

Legal Last Name* Suffix

Legal First Name*

Middle Initial

DOB*

Gender* Male Female

Race/Ethnicity*

CIN

SEDSTACID

Address

City

State

Zip

[Transfer Student Information](#)

From County From District

Student Information

- * When you enter the DOB, the dates of eligibility will populate.
- * Gender now contains “Non Binary” if needed.
- * Race/Ethnicity field contains “Two or more Races / Unknown” if you do not know the race.

Student Information
[Add/Edit Student](#)

County of Student's Current Location*

Is this student placed in Foster Care?* Yes No

District*

Legal Last Name* Suffix

Legal First Name*

Middle Initial

DOB*
Eligibility: 1/1/2023-8/31/2025

Gender* Male Female Non Binary

Race/Ethnicity*

CIN

SEDSTACID

Address

City

State

Zip

[Transfer Student Information](#)

From County

From District

Saving Incomplete Entry

- * Clicking “Save” without all mandatory fields entered will result in labels indicating the missing data.
- * If you do not enter the child’s address, you will not be able to submit the STAC-5 or STAC-1.
- * Remember to enter the address of the child or you will receive an error when signing & submitting.

Student Information

[Add/Edit Student](#)

County of Student's Current Location*

Is this student placed in Foster Care?* Yes No *Required

District*

Legal Last Name* *Required Suffix

Legal First Name* *Required

Middle Initial

DOB* *Required

Gender* Male Female *Required

Race/Ethnicity* *Required

CIN

SEDSTACID

Address

City

State

Zip

[Transfer Student Information](#)

From County From District

Student Details

* Upon saving a new student, the system will take you to the student details page.

* Once student is created, each child is given a Student Number.

CPSE: 660413020000 ABBOT

Student Information

Last Name: **Mouse** First Name: **Minnie** DOB: 1/1/2020 Eligibility: 1/1/2023 - 8/31/2025

STACID: CIN: Student Number: **5000067786** Edit Resync

STAC-5s Evaluation Components IEP Placements IEP Mandates Documents Forms Eligibility Waivers

eSTACs Evaluation Number	County	Description	Status	Submitted By	Submitted Date						
No STAC-5s											

Add New Evaluation

Student Details

- * Top section shows child demographic information.
- * Lower section has tabs for:
 - * STAC-5s (one row per STAC-5)
 - * Evaluation Components (one row per evaluation component)
 - * IEP Placements (one row per STAC-1)
 - * IEP Mandates (one row per mandated service on IEP)
 - * Documents (uploaded documents for student)
 - * Forms
 - * Eligibility Waivers

CPSE: 660413020000 ABBOT

Student Information

Last Name: **Mouse** First Name: **Minnie** DOB: 1/1/2020 Eligibility: 1/1/2023 - 8/31/2025

STACID: CIN: Student Number: 5000067786 Edit Resync

STAC-5s Evaluation Components IEP Placements IEP Mandates Documents Forms Eligibility Waivers

eSTACs Evaluation Number	County	Description	Status	Submitted By	Submitted Date						
No STAC-5s											

Add New Evaluation

Editing Existing Student

- * Search for student
- * Click “*Edit*” to edit student demographics (name, address, etc.)
- * Click “*Details*” to get to student details page with evaluations, services, documents, etc.

Filters

Last Name First Name DOB

District

County

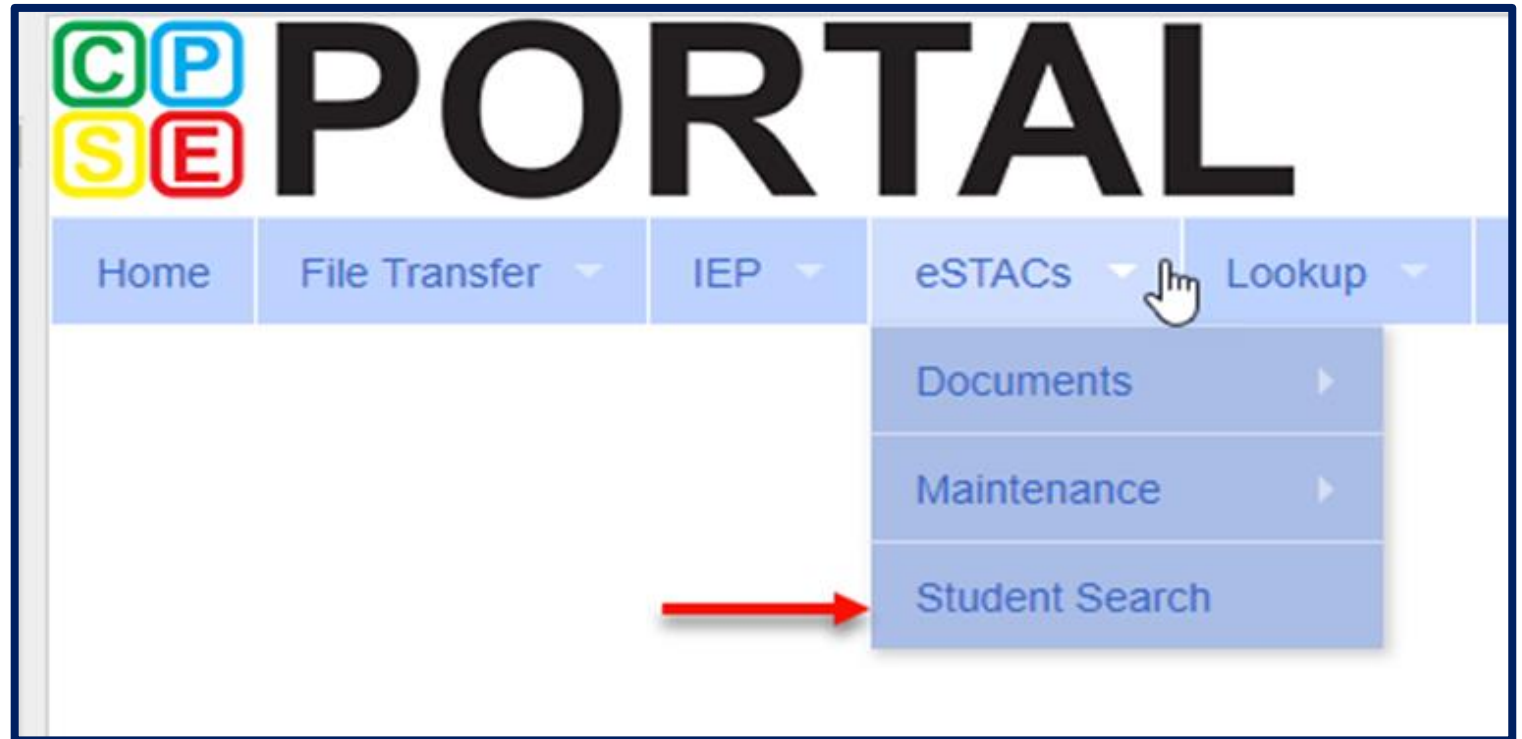
[Add New Student](#)

Last Name	First Name	DOB	Gender	CIN	STACID		
Balmudo	Leo	03/19/16	M			Edit	Details
Carrington	Michael	04/04/16	M			Edit	Details
Chisum	Tom	12/31/16	M			Edit	Details
Del Fuego	Peter	05/15/15	M			Edit	Details
DelFuego	Anthony	03/12/16	M			Edit	Details
DeltoroFuego	Maria	09/12/16	F			Edit	Details
DiGregorio	Charlene	02/22/16	F			Edit	Details
DiMucci	Louis	12/15/16	M			Edit	Details

eSTACs Entering STAC-5

eSTACs Student Search

- * Go to **eSTACs** -> **Student Search**



Student Search for Student Details

- * Always search for the student first.
- * If student is already in system, click the “**Details**” link for that student.
- * If student does not exist, click “**Add New Student**”.

Filters

Last Name First Name DOB STACID CIN

District

County

Last Name	First Name	DOB	Gender	CIN	STACID		
Balmudo	Leo	03/19/16	M			Edit	Details
Carrington	Michael	04/04/16	M			Edit	Details
Chisum	Tom	12/31/16	M			Edit	Details
DeFuego	Anthony	03/12/16	M			Edit	Details
DiGregorio	Charlene	02/22/16	F			Edit	Details
DiMucci	Louis	12/15/16	M			Edit	Details
Facciano	Franchesca	09/09/16	F			Edit	Details
Jaworski	David	05/18/16	M			Edit	Details
LaTierra	Sonny	08/13/16	M			Edit	Details
Maraschino	Marty	07/22/16	F			Edit	Details
McKenzie	Bradley	12/05/16	M			Edit	Details
Misner	Martin	11/11/16	M			Edit	Details
Murdoch	Kenickie	10/10/16	M			Edit	Details
Nogereilli	John	06/14/16	M			Edit	Details
Rebchuck	Paulette	08/22/16	F			Edit	Details
Rizzo	Betty	09/09/16	F			Edit	Details
Willard	Willie	05/11/16	M			Edit	Details
Zinone	Stephanie	01/21/16	F			Edit	Details

Adding a New Evaluation

- * Select the “**STAC-5s**” tab.
- * Click the “*Add New Evaluation*” button.

CPSE: **660413020000** ABBOT

Student Information

Last Name: **Mouse** First Name: **Minnie** DOB: **1/1/2020** Eligibility: **1/1/2023 - 8/31/2025**

STACID: CIN: Student Number: **5000067786** Edit Resync

STAC-5s Evaluation Components IEP Placements IEP Mandates Documents Forms Eligibility Waivers

eSTACs Evaluation Number	County	Description	Status	Submitted By	Submitted Date						
No STAC-5s											

Add New Evaluation 

eSTACs vs Paper STAC-5

Evaluation Info

County* 2

School Year*

Provider* 1

Is this student placed in Foster Care?* Yes No

County at time of placement* 2

Child is: Preschool Student With a Disability Non-Disabled 4

Translation Cost 5

This student is eligible for evaluations from **09/01/2018** to **07/31/2021**

Evaluation	Component	Eval Date	Bilingual		
Social	SOC	<input type="text"/>	<input type="checkbox"/>		
Psychological	PSY	<input type="text"/>	<input type="checkbox"/>		
Speech/Language	SPT	<input type="text"/>	<input type="checkbox"/>		
Physical Therapy	PHT	<input type="text"/>	<input type="checkbox"/>		
Occupational Therapy	OCT	<input type="text"/>	<input type="checkbox"/>		
Physical/Medical	PHY	<input type="text"/>	<input type="checkbox"/>		
Education	EDU	<input type="text"/>	<input type="checkbox"/>		6
Audiological	AUD	<input type="text"/>	<input type="checkbox"/>		
Other Physician	OTH	<input type="text"/>	<input type="checkbox"/>		
Other Non-Physician	OTH	<input type="text"/>	<input type="checkbox"/>		
Psychiatric	PYC	<input type="text"/>	<input type="checkbox"/>		
Neurological	NEU	<input type="text"/>	<input type="checkbox"/>		
Optometric	OPT	<input type="text"/>	<input type="checkbox"/>		
Orthopedic	ORT	<input type="text"/>	<input type="checkbox"/>		
Counseling	CSL	<input type="text"/>	<input type="checkbox"/>		
Functional Vision	FUV	<input type="text"/>	<input type="checkbox"/>		
Teacher of Visually Impaired	TVI	<input type="text"/>	<input type="checkbox"/>		
Neuropsychological	NPY	<input type="text"/>	<input type="checkbox"/>		

STAC-5 The University of the State of New York THE STATE EDUCATION DEPARTMENT STAC and Medicaid Unit Rev. 8/2017

Request for Commissioner's Approval of Reimbursement for the Cost of Evaluations

STAC-ID

List the date each evaluation component was completed (use four digits to indicate month and year). For bilingual evaluations indicate on line provided.

STUDENT INFORMATION			EVALUATION COMPONENT	MONTH / YEAR	CHECK IF BILINGUAL
Last Name	First Name	Middle Initial	Audiological	AUD	<input type="text"/>
Date of Birth (mm/dd/yy)	Student Identification Number (if applicable)	Gender <input type="checkbox"/> Female <input type="checkbox"/> Male	Counseling	CSL	<input type="text"/>
DISABILITY: The child named above is: <input type="checkbox"/> PD - Preschool Student With a Disability <input type="checkbox"/> ND - Non-Disabled			RACIAL ETHNIC CATEGORY OF STUDENT <input type="checkbox"/> Hispanic or Latino Not of Hispanic Origin: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more Races <i>(see explanation on second page)</i>		
			Education	EDU	<input type="text"/>
School District with CPSE Responsibility			Functional Vision	FUV	<input type="text"/>
County of Child's Current Location (where child resides)			Music	MUS	<input type="text"/>
County at time of Placement in Foster Care			Neurological	NEU	<input type="text"/>
Approved Evaluator			Neuropsychological	NPY	<input type="text"/>
			Occupational Therapy	OCT	<input type="text"/>
			Optometric (visual)	OPT	<input type="text"/>
			Orthopedic	ORT	<input type="text"/>
			Physical/Medical	PHY	<input type="text"/>
			Physical Therapy	PHT	<input type="text"/>
			Psychiatric	PYC	<input type="text"/>
			Psychological	PSY	<input type="text"/>
			Social	SOC	<input type="text"/>
			Speech / Language	SPT	<input type="text"/>
			Teacher of Visually Impaired	TVI	<input type="text"/>
			Other:		<input type="text"/>
			Cost of translation/transmittal of evaluation documentation or summary report for monolingual evaluations only. \$ <input type="text"/> 5		
PERSON COMPLETING THIS FORM					
Name			Title		
Phone			Email		

CERTIFICATION OF EVALUATION: I certify that the preschool child herein named received a multidisciplinary evaluation as indicated above and in accordance with Section 4410 of the Education Law and the Regulations of the Commissioner of Education.

MUNICIPALITY: The municipality of _____ has received on _____ the STAC-5 Request for Commissioner's Approval of Reimbursement for the Cost of Evaluations for the above named child pursuant to Section 4410 of the Education Law.

Signature CPSE Chairperson _____ Date _____ 7

Signature of Authorized Representative of the Municipality _____ Date _____

Complete Fields Related to Evaluation

- * Enter information regarding evaluation.
- * Enter the exact evaluation dates.
- * All fields labeled with an asterisk (*) must be filled in to save.

Evaluation Info

County*

School Year*

Provider*

Is this student placed in Foster Care?* Yes No

Child is: Preschool Student With a Disability Non-Disabled

Translation Cost

This student is eligible for evaluations from **03/01/2021** to **07/31/2023**

Evaluation	Component	Eval Date	Bilingual		
Audiological	AUD	<input type="text"/>	<input type="checkbox"/>		
Education	EDU	<input type="text"/>	<input type="checkbox"/>		
Neurological	NEU	<input type="text"/>	<input type="checkbox"/>		
Neuropsychological	NPY	<input type="text"/>	<input type="checkbox"/>		
Occupational Therapy	OCT	<input type="text"/>	<input type="checkbox"/>		
Optometric	OPT	<input type="text"/>	<input type="checkbox"/>		
Orthopedic	ORT	<input type="text"/>	<input type="checkbox"/>		
Other Non-Physician	OTH	<input type="text"/>	<input type="checkbox"/>		
Other Physician	OTH	<input type="text"/>	<input type="checkbox"/>		
Physical Therapy	PHT	<input type="text"/>	<input type="checkbox"/>		
Physical/Medical	PHY	<input type="text"/>	<input type="checkbox"/>		
Psychiatric	PYC	<input type="text"/>	<input type="checkbox"/>		
Psychological	PSY	<input type="text" value="11/01/2021"/>	<input type="checkbox"/>		
Social	SOC	<input type="text" value="11/01/2021"/>	<input type="checkbox"/>		
Speech/Language	SPT	<input type="text" value="11/01/2021"/>	<input type="checkbox"/>		
Teacher of Visually Impaired	TVI	<input type="text"/>	<input type="checkbox"/>		

Evaluations – STAC-5 Tab

- * There are two tabs for Evaluations:
- * **STAC-5s Tab** - shows one line per STAC-5 group of components.

CPSE: 660413020000 ABBOT

Student Information

Last Name: **Smith** First Name: **John** DOB: 1/1/2019 Eligibility: 1/1/2022 - 8/31/2024

STACID: CIN: Student Number: 5000067785 Edit Resync

STAC-5s Evaluation Components IEP Placements IEP Mandates Documents Forms Eligibility Waivers

eSTACs Evaluation Number	County	Description	Status	Submitted By	Submitted Date						
EV00048818	ROCKLAND	ARC -- PRIME TIME FOR KIDS Sep 2022 (PSY, SOC, SPT)	Amended			Amend	Rescind	Print	Sign and Submit	Submission History	Resync
EV00048819	ROCKLAND	ARC -- PRIME TIME FOR KIDS Jul 2023 (PSY, SOC)	Not Submitted			Edit	Delete	Print	Sign and Submit		Resync

Add New Evaluation

Evaluation Components Tab

- * The second tab for Evaluations is the Evaluation Components.
- * **Evaluation Components Tab** - shows one line per component.

CPSE: 660413020000 ABBOT

Student Information

Last Name: **Smith** First Name: **John** DOB: 1/1/2019 Eligibility: 1/1/2022 - 8/31/2024

STACID: CIN: Student Number: 5000067785 [Edit](#) [Resync](#)

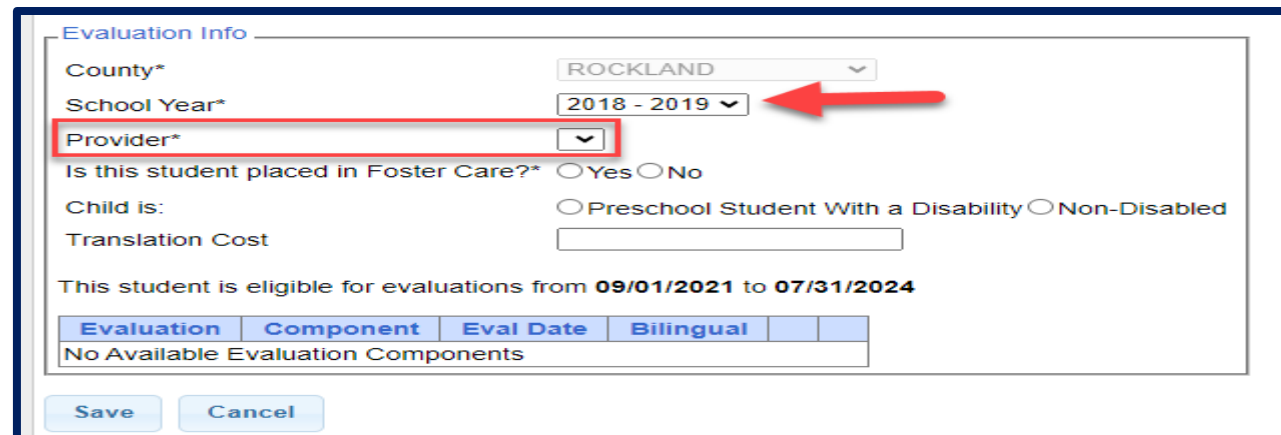
[STAC-5s](#) **[Evaluation Components](#)** [IEP Placements](#) [IEP Mandates](#) [Documents](#) [Forms](#) [Eligibility Waivers](#)

eSTACs Evaluation Number	eSTACs Evaluation Component Number	County	Provider	Component	Eval Date	Bilingual	Status	Submitted By	Submitted Date		
EV00048818	EC00145985	ROCKLAND	ARC -- PRIME TIME FOR KIDS	Psychological	9/15/2022	No	Submitted	kellyknowles	6/14/2023	Amend	Rescind
EV00048818	EC00145986	ROCKLAND	ARC -- PRIME TIME FOR KIDS	Social	9/15/2022	No	Submitted	kellyknowles	6/14/2023	Amend	Rescind
EV00048818	EC00145987	ROCKLAND	ARC -- PRIME TIME FOR KIDS	Speech/Language	9/12/2022	No	Amended			Amend	Rescind
EV00048819	EC00145988	ROCKLAND	ARC -- PRIME TIME FOR KIDS	Psychological	7/12/2023	No	Not Submitted			Edit	Delete
EV00048819	EC00145989	ROCKLAND	ARC -- PRIME TIME FOR KIDS	Social	7/12/2023	No	Not Submitted			Edit	Delete

[Add New STAC-5](#)

Evaluations Crossing Over 23/24 & 24/25 SY

- * If you have evaluations and:
 - * One evaluation was completed in the 23/24 SY – then complete paper STAC-5 for that evaluation.
 - * If the other evaluations are July 1, 2024 dates and forward – then enter those evaluations into eSTACs.
- * If you try to enter an evaluation with a date prior to July 1, 2024, you will not be able to choose a provider, since eSTACs is not set-up for your county for prior years.



The screenshot shows the 'Evaluation Info' form in the eSTACs system. The 'County*' dropdown is set to 'ROCKLAND'. The 'School Year*' dropdown is set to '2018 - 2019', with a red arrow pointing to it. The 'Provider*' dropdown is highlighted with a red box. Below these fields are radio buttons for 'Is this student placed in Foster Care?' (Yes/No) and 'Child is:' (Preschool Student With a Disability/Non-Disabled). A text field for 'Translation Cost' is also present. At the bottom, a message states 'This student is eligible for evaluations from 09/01/2021 to 07/31/2024'. A table with columns 'Evaluation', 'Component', 'Eval Date', and 'Bilingual' is shown, with the text 'No Available Evaluation Components' below it. 'Save' and 'Cancel' buttons are at the bottom.

eSTACs Uploading Documents

Documents Required for Evaluations – Ulster County

- * Ulster County requires the following documents to be uploaded, before you can sign and submit your STAC-5:
 - * **A Birth Certificate:**
 - * **An Evaluation Justification Letter:**
 - * **Only** needed if 2 evaluations need to be completed within the same school year for the same type of evaluation when completing the STAC-5.

Uploading a Document

- * Select Documents tab on Student Details screen.
- * This will also show any Missing Documents that need to be uploaded.
- * Click “Upload” button at bottom of screen or “Upload” at the end of the missing document line.

Last Name: **Mouse** First Name: **Mickey** DOB: **10/19/2019** Eligibility: **7/1/2022 - 8/31/2024**
STACID: CIN: Student Number: **5000067792** Edit Resync

STAC-5s Evaluation Components IEP Placements IEP Mandates **Documents** Forms Eligibility Waivers

Uploaded Documents

	Document Type	Uploaded Date	Applied To	Submitted Date	SubmittedUser	Status	Comments			
Select	Unidentified	03/15/2024	Student Record			NOT SUBMITTED		Edit View	Delete	
Select	Unidentified	03/15/2024	Student Record			NOT SUBMITTED		Edit View	Delete	

Missing Documents

Category	Type	DocumentDescription	Applies To		
CHILD	MEDICAID CONSENT	Medicaid Parental Consent		Show Document List	Upload
PLACEMENT	AIDE FORM	Copy of SED AIDE form for partial/shared AIDE for CB Placement	09/06/2023-06/21/2024 A STARTING PLACE-9100(J)	Show Document List	Upload
PLACEMENT	IEP	Copy of IEP for Placement	09/06/2023-06/21/2024 A STARTING PLACE-9100(J)	Show Document List	Upload

Upload Upload Multiple Documents

Uploading a Document

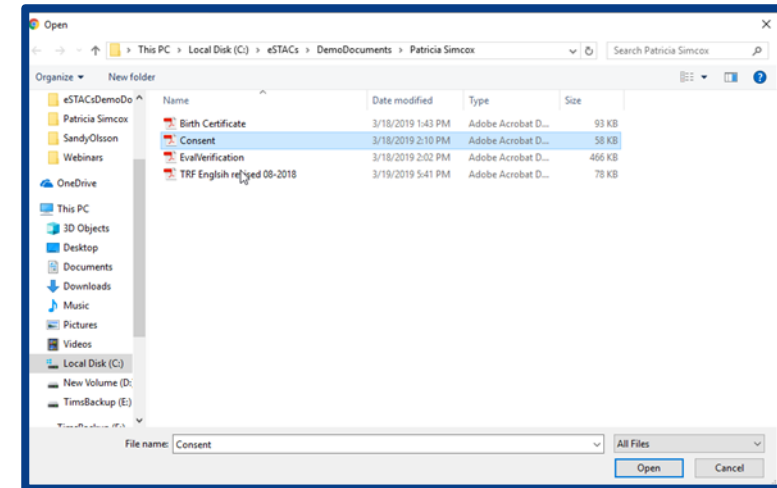
- * Click “Choose File” button.
- * Browse to the file location and select the file.
- * Click the “Open” button on the file dialog
- * The filename will appear next to “Choose File” button.
- * Click “Upload”.

CPSE: 012806060000 RYDELL CSD

Child Information

Last Name: **Rizzo** First Name: **Frank** DOB: **12/18/2016** Eligibility: **7/1/2019 - 8/31/2022**
STACID: CIN: [Edit](#)

Choose File No file chosen [Upload](#)



CPSE: 012806060000 RYDELL CSD

Child Information

Last Name: **Rizzo** First Name: **Frank** DOB: **12/18/2016** Eligibility: **7/1/2019 - 8/31/2022**
STACID: CIN: [Edit](#)

Choose File **Consent.pdf** [Upload](#)

Indicate Document Type

- * Right hand side shows the document.
- * Left hand side shows fields to specify what type of document it is, as well as other related fields specific to the type of document.

The screenshot displays the eSTACsFileHandler.ashx interface. On the left, a 'Document Type' dropdown menu is open, showing a list of document categories. A red box highlights the 'Medicaid' section, which includes options like 'Medicaid : Medicaid Parental Consent' and 'Medicaid : Parent Revoked Consent'. Below this, a 'Comments' field is visible. On the right, a preview of a 'Medicaid Consent' form is shown, including fields for 'Dear Parent/Guardian of: John Smith', 'District: ABBOT', and 'County: ROCKLAND'. The form text explains the purpose of the consent and includes a signature line for the parent/guardian.

Document Type

- Id : Birth Certificate
- Id : Passport
- Id : Adoption Papers
- Id : Legal Name Change
- Id : Child Information Change Form
- Medicaid : Medicaid Parental Consent
- Medicaid : Failed to obtain Medicaid Parental Consent
- Medicaid : Parent refused Medicaid Parental Consent
- Medicaid : Parent Revoked Consent
- Foster Care : LDSS2999
- Eval : Evaluation Verification
- Eval : Evaluation Request For Translation
- Eval : Evaluation Justification Letter
- Eval : Justification For Eval Outside Eligibility Dates
- Trans : Transportation Request Form (TRF)
- Trans : Transportation Change Form (CB2010)
- Trans : Transportation Options Form (CB2001)
- Serv : Aide
- Serv : Nurse

Comments

eSTACsFileHandler.ashx

1 / 1 | 100%

Medicaid Consent

Dear Parent/Guardian of: John Smith
District: ABBOT
County: ROCKLAND

This is to ask your permission (consent) for the listed county to bill your or your child's Medicaid Insurance Program for special education and related services that are on your child's individualized education program (IEP) and to ask you to give us your child's Client Identification Number (CIN) or allow us to obtain the CIN if you do not know it.

This consent allows the school district/county to bill Medicaid for covered health-related services and to release information to the school district's/county's Medicaid Billing Agent for that purpose.

I, _____ as the parent/guardian of John Smith
(Print Parent's Name) (Print Child's Name)

have received a written notification from the school district/county that explains my federal rights regarding the use of public benefits or insurance to pay for certain special education and related services.
I understand and agree that the school district/county may ask for a Client Identification Number (CIN), check on Medicaid eligibility, and/or access Medicaid to pay for special education and related services provided to my child.

For help, email: eSTACs@CPSEPortal.com

eSTACs Sign and Submit

Sign and Submit Evaluation – Signing Per Student

- * Once all documents have been uploaded for the evaluation (if any), you can now “Sign and Submit” the STAC-5.
- * The Status, Submitted By & Submitted Date columns will now show a status of submitted, who submitted the STAC-5, and the date submitted.
- * This will now be sent to the county for review.

CPSE: 660413020000 ABBOT

Student Information

Last Name: **Smith** First Name: **John** DOB: **1/1/2019** Eligibility: **1/1/2022 - 8/31/2024**

STACID: CIN: Student Number: **5000067785** Edit Resync

STAC-5s Evaluation Components IEP Placements IEP Mandates Documents Forms Eligibility Waivers

eSTACs Evaluation Number	County	Description	Status	Submitted By	Submitted Date						
EV00048818	ROCKLAND	ARC -- PRIME TIME FOR KIDS Sep 2022 (PSY, SOC, SPT)	Amended			Amend	Rescind	Print	Sign and Submit	Submission History	Resync
EV00048819	ROCKLAND	ARC -- PRIME TIME FOR KIDS Jul 2023 (PSY, SOC)	Not Submitted			Edit	Delete	Print	Sign and Submit		Resync

Add New Evaluation

Submitting Evaluations

Error Messages – Missing Document(s)

- * If all of your documents are not uploaded, you will not be able to sign and submit.
- * Your error will tell you what documents need to be uploaded.
- * You can also see the missing documents on the documents tab, under Missing Documents.

Student Information

Last Name: [REDACTED] First Name: [REDACTED] DOB: [REDACTED] Eligibility: 7/1/2017 - 8/31/2020
STACID: [REDACTED] CIN: [REDACTED] Student Number: [REDACTED] [Edit SED Summary](#)

[STAC-5s](#) [Evaluation Components](#) [IEP Placements](#) [IEP Mandates](#) [Documents](#) [Forms](#)

Uploaded Documents

Document Type	Uploaded Date	Applied To	Submitted Date	Submitted User	Comments			
No Documents								

Missing Documents

Category	Type	Document Description	Applies To		
CHILD	MEDICAID CONSENT	Medicaid Parental Consent		Show Document List	Upload

[Upload](#) [Upload Multiple Documents](#)

Submitting Evaluations Error Messages

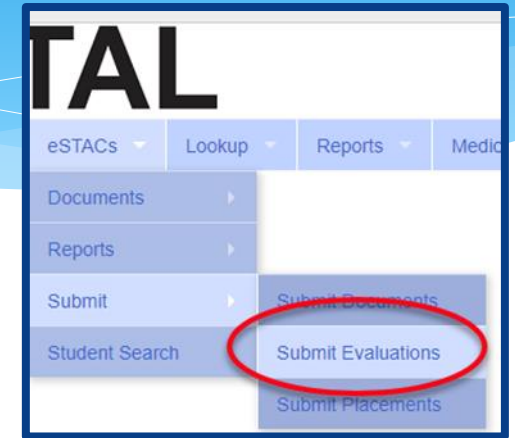
1. You did not create your first and last name.
2. You did not create a PIN for your Portal account.
3. You did not create your signature and title.
4. Your district's authorization paperwork was not sent to McGuinness or you are not listed on the paperwork to sign and submit evaluations.

The screenshot displays four error messages in a list, each with a red number on the left and a message box on the right. The messages are:

1. A warning icon (triangle with exclamation mark) followed by the text: "You do not have a person record associated with this account. Please fill in your first and last name." (Note: the text in the image is partially cut off).
2. A warning icon followed by the text: "You have not yet created your PIN. Please create your PIN now." (Note: the text in the image is partially cut off).
3. The text: "Please enter your signature title and credentials on the 'My Profile' page." (Note: the text in the image is partially cut off).
4. The text: "You are not authorized by the county to sign evaluations." (Note: the text in the image is partially cut off).

Sign and Submit Evaluations – Signing All Unsubmitted Evaluations at One Time

- * Go to **eSTACs -> Submit -> Submit Evaluations**
- * This grid displays unsubmitted evaluations based on selected filters.
- * Rows where Status = “OK To Submit” will have a checkbox.
- * Rows where Status = “Problems Found” will not have a checkbox.
- * Mark the checkbox on the rows that you wish to submit to the County or click “**Select All**”.
- * Click “**Submit**” to submit the marked evaluations to the County.



Select	Last Name	First Name	School Year	Evaluator	Components	Status
<input type="checkbox"/>		DIONNE	201819	ALL ABOUT KIDS	ALL ABOUT KIDS Mar 2019 (PSY, SOC, SPT)	OK to Submit
<input type="checkbox"/>		HARRIS	201819		ITER Feb 2019 - Mar 2019 (OCT, PHT, PSY, SOC, SPT)	OK to Submit
<input type="checkbox"/>		CLEO	201819		BEYOND Feb 2019 - Mar 2019 (PSY, SOC, SPT)	OK to Submit
		CASSIDY	201819		019 - Feb 2019 (PSY, SOC, SPT)	Problems Found
		CATHLEEN	201819		019 (PSY, SOC, SPT)	Problems Found
		OLLIE	201819		019 - Apr 2019 (EDU, PSY, SOC)	Problems Found
		NED	201819		[, PSY, SOC, SPT)	Problems Found
		ADAN	201819	ELIMINATED INC. BEYOND	BEYOND Jan 2019 - Feb 2019 (PSY, SOC, SPT)	Problems Found

Forms

Forms Tab

- * The Forms tab has a list of generic forms that when chosen, will populate with the child's information on them.

CPSE: 660413020000 ABBOT

Student Information

Last Name: **Smith** First Name: **John** DOB: **1/1/2019** Eligibility: **1/1/2022 - 8/31/2024**

STACID: CIN: Student Number: **5000067785** Edit Resync

STAC-5s Evaluation Components IEP Placements IEP Mandates Documents **Forms** Eligibility Waivers

School Year

Forms

	Form	Description
<input type="checkbox"/>	Medicaid Parental Consent	Consent to Access Medicaid
<input type="checkbox"/>	Medicaid Parental Consent (Spanish)	Consent to Access Medicaid (Spanish)
<input type="checkbox"/>	Written Order	Generic Written Order / Prescription / Referral
<input type="checkbox"/>	Unable to obtain consent	Notification of not being able to obtain Medicaid Parental Consent

Generate Forms

Forms Tab

If your County gave us a Medicaid Consent that they want you to use, your County consent will also populate here. If not, then your school district's name will populate on the top of the consent.

Medicaid Consent

Dear Parent/Guardian of: John Smith
District: ABBOT
County: ROCKLAND

This is to ask your permission (consent) for the listed county to bill your or your child's Medicaid Insurance Program for special education and related services that are on your child's individualized education program (IEP) and to ask you to give us your child's Client Identification Number (CIN) or allow us to obtain the CIN if you do not know it.

This consent allows the school district/county to bill Medicaid for covered health-related services and to release information to the school district's/county's Medicaid Billing Agent for that purpose.

I, _____ as the parent/guardian of John Smith
(Print Parent's Name) (Print Child's Name)

have received a written notification from the school district/county that explains my federal rights regarding the use of public benefits or insurance to pay for certain special education and related services. I understand and agree that the school district/county may ask for a Client Identification Number (CIN), check on Medicaid eligibility, and/or access Medicaid to pay for special education and related services provided to my child.

I understand that:

- Providing consent will not impact my child's/my Medicaid coverage;
- Upon request, I may review copies of records disclosed pursuant to this authorization;
- Services listed in my child's IEP must be provided at no cost to me whether or not I give consent to bill Medicaid and/or provide my child's CIN;
- I have the right to withdraw consent at any time; and
- The school district/county must give me annual written notification of my rights regarding this consent.

I also give my consent for the school district/county to release the following records/ information about my child to the State's Medicaid Agency for the purpose of checking Medicaid eligibility and/or billing for special education and related services that are in my child's IEP. The following records will be shared:

Records to be shared (such as records or information about services your child receives)	
Prescription	Service Provider Attendance
Referral	"Under the Direction of" Certification
Treatment Logs	"Under the Supervision of" Certification
Individualized Education Program - IEP	"Under the Direction of" Logs
Attendance Records	"Under the Supervision of" Logs
Bus Logs	Calendar
Other unnamed documents needed to support a claim to Medicaid	Evaluations

Student's CIN, if known: _____

I give my consent voluntarily and understand that I may withdraw my consent at any time. I also understand that my child's right to receive special education and related services is in no way dependent on my granting consent and that, regardless of my decision to provide this consent, all the required services in my child's IEP will be provided to my child at no cost to me.

Parent/Guardian Signature: _____ Date: _____
Print Name: _____ **Must fill-in full date**

Eligibility Waivers

Eligibility Waivers Tab

- * If you have an evaluation or services that are outside of the eligibility dates, you can choose the Date Type, enter date and click “Add”. You can then upload any supporting documentation.
- * You may need to use this when a child is transitioning from EI into Preschool.
- * Always contact the county first so see if this is an option.

The screenshot shows the CPSE portal interface for a student named Minnie Mouse. At the top, the student's information is displayed: CPSE: 660413020000 ABBOT, Last Name: Mouse, First Name: Minnie, DOB: 1/1/2020, Eligibility: 1/1/2023 - 8/31/2025, STACID, CIN, and Student Number: 5000067786. Below this is a navigation bar with tabs for STAC-5s, Evaluation Components, IEP Placements, IEP Mandates, Documents, Forms, and Eligibility Waivers. The Eligibility Waivers tab is highlighted with a red circle. Underneath, there is a 'Waivers' section with a table that has two columns: 'Date Type' and 'Date'. A dropdown menu is open under the 'Date Type' column, showing options: 'Earliest Eval Date', 'Earliest Service Date', 'Latest Eval Date', and 'Latest Service Date'. An 'Add' button is located to the right of the 'Date' column.

Date Type	Date	Add
Earliest Eval Date		
Earliest Service Date		
Latest Eval Date		
Latest Service Date		

© James M.

Closing

Ulster County Timeline

- * **April 30, 2024:**

- * McGuinness will migrate all of the children that are in the Ulster County Preschool system over into eSTACs.

- * **May 1, 2024:**

- * Ulster County school districts can begin entering 24/25 children and STACs into eSTACs.

- * **All prior year STAC's** (23/24, 22/23, 21/22 etc.), send paper STAC to the county to enter or amend in their Preschool system. Prior years will not be turned on in eSTACs and you will not be able to enter any STACs.

Getting Support

- * CPSE Portal Address (you may want to bookmark):
<https://www.cpseportal.com>
- * If you need help you can contact Kelly Knowles at Kknowles@jmcguinness.com
- * After you are familiar with the Portal, and you need help, send an email to eSTACs@CPSEPortal.com.
 - * Please include your district name, which County you work with and a description of your issue.
 - * Do **not** use child's name
 - * Use Student # or STAC ID #
- * If you would like to speak on the phone, please state so in your email along with your phone number and best times to reach you.