

**eSTACs Entering STAC-1  
Center Based and  
Center Based Related Services**

# Rockland County Timeline

- \* **October 29, 2021:**

- \* All services starting, and including **10/29/21** – send paper STAC-1 to Rockland County.

- \* **November 1, 2021:**

- \* All services starting on or after **11/1/2021** – school districts will enter STAC-1 into eSTACs. County will **no longer** accept paper STAC-1 for services starting on 11/1/21 or after!

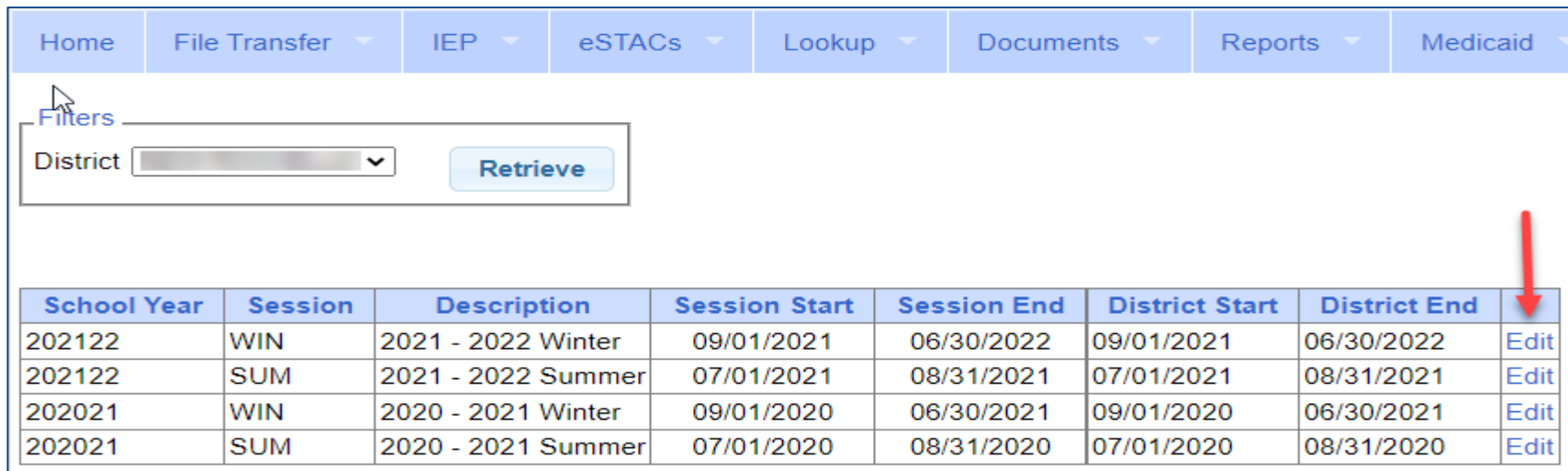
- \* **November 12, 2021:**

- \* If services began **before 11/1/2021**, November 12<sup>th</sup> is the last day that the county will accept the paper STAC-1

- \* McGuinness will transfer ALL students that are currently in the Rockland County Preschool database to eSTACs.

# Changing District School Dates

- \* School district yearly dates are defaulted to:
  - \* Summer dates: July 1 – August 31
  - \* Winter dates: September 1 – June 30
- \* Go to **eSTACs -> Maintenance -> Default Session Dates for District**

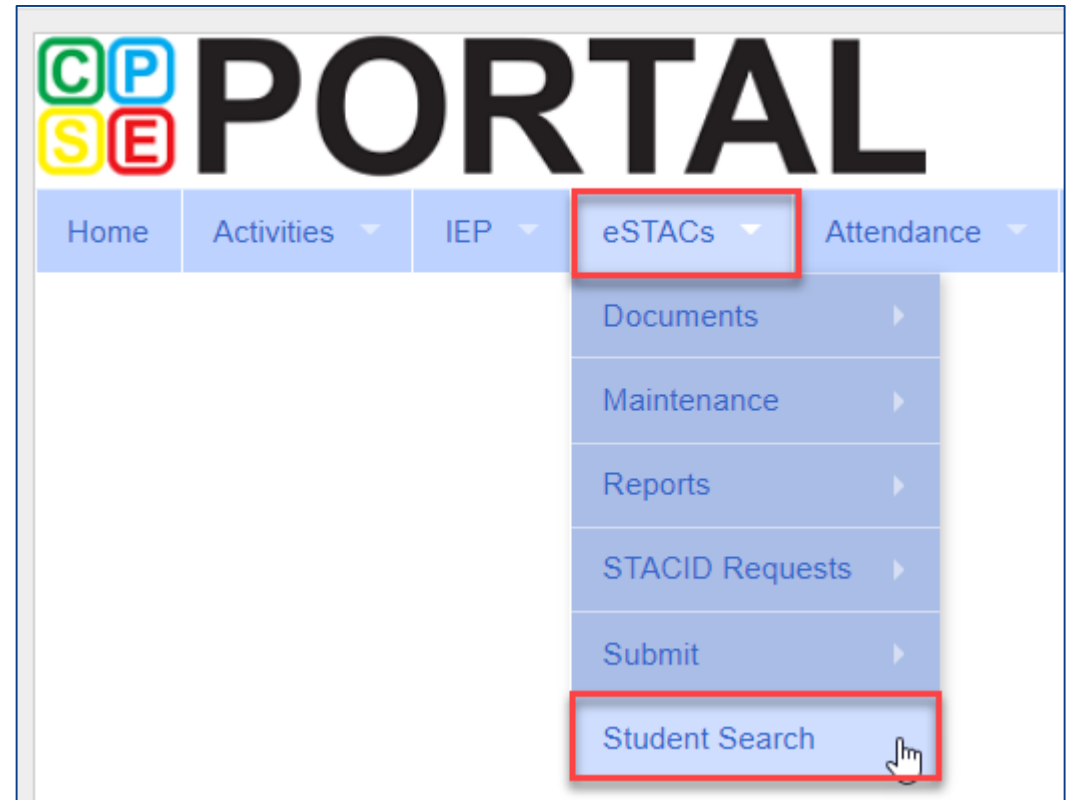


The screenshot shows the eSTACs web application interface. At the top, there is a navigation menu with the following items: Home, File Transfer, IEP, eSTACs, Lookup, Documents, Reports, and Medicaid. Below the menu, there is a search filter section labeled "Filters" with a dropdown menu for "District" and a "Retrieve" button. Below the filter, there is a table with the following columns: School Year, Session, Description, Session Start, Session End, District Start, District End, and Edit. A red arrow points to the "Edit" link in the first row of the table.

School Year	Session	Description	Session Start	Session End	District Start	District End	Edit
202122	WIN	2021 - 2022 Winter	09/01/2021	06/30/2022	09/01/2021	06/30/2022	Edit
202122	SUM	2021 - 2022 Summer	07/01/2021	08/31/2021	07/01/2021	08/31/2021	Edit
202021	WIN	2020 - 2021 Winter	09/01/2020	06/30/2021	09/01/2020	06/30/2021	Edit
202021	SUM	2020 - 2021 Summer	07/01/2020	08/31/2020	07/01/2020	08/31/2020	Edit

# eSTACs Student

\* Go to eSTACs -> Student Search



# Student Search


- \* Search for student using first and last name of student & click Retrieve

Home	Activities ▾	IEP ▾	eSTACs ▾	Attendance ▾	Billing ▾	Lookup ▾	Documents ▾	Reports ▾	Maintenance ▾	Medicaid
Filters										
ant	bar	DOB	STACID	CIN	Student Number					
County	ROCKLAND ▾									
District	CLARKSTOWN CSD ▾									
									Clear Filters	Retrieve

# View Student Details

- \* Click on Details to get to the student details page with evaluations, services, documents and forms.

Home	Activities ▾	IEP ▾	eSTACs ▾	Attendance ▾	Billing ▾	Lookup ▾	Documents ▾	Reports ▾	Maintenance ▾	Medicaid	
Filters											
<input type="text" value="ant"/>	<input type="text" value="bar"/>	<input type="text" value="DOB"/>	<input type="text" value="STACID"/>	<input type="text" value="CIN"/>	<input type="text" value="Student Number"/>						
County	<input type="text" value="ROCKLAND"/>										
District	<input type="text" value="CLARKSTOWN CSD"/>										
										<input type="button" value="Clear Filters"/>	<input type="button" value="Retrieve"/>
<input type="button" value="Add New Student"/>											
District Name	Last Name	First Name	DOB	Gender	CIN	STACID	Student Number				
CLARKSTOWN CSD	Ants	Barbara	08/17/18	F				Edit	Details		



# Adding a new CB Placement STAC-1

\* Go to the IEP Placements tab

\* Click Add CB Placement

Home Activities IEP eSTACs Attendance Billing Lookup Documents Reports

CPSE: 500101060000 CLARKSTOWN CSD

Student Information

Last Name: **Ants** First Name: **Barbara** DOB: **8/17/2018** Eligibility: **7/1/2021 - 8/31/2023**  
STACID: **J99999** CIN: Student Number: **9000099999** [Edit SED Summary](#)

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

School Year Session 2021 - 2022 Winter

School Year Session	Placement	Description	Status	Submitted By	Submitted Date				
No Placements									

[Add CB Placement](#) [Add SEIT/RS Placement](#)

# Entering Program Information

1. Check this box if the child has multiple STACs for the same time period (CB + SEIT/RS, CB morning + CB afternoon)
2. Specify school year / session
3. Indicate if the child is placed in foster care
4. Choose the Provider
5. Indicate whether the Provider is the same provider that performed the most recent evaluation
6. Select the specific program the child will attend
7. This populates with the dates and hours the selected program runs
8. Enter the dates and hours that this student will attend this program

CPSE: 012806080000 RYDELL CSD

Child Information

Last Name: DelFuego First Name: Anthony DOB: 3/12/2016 Eligibility: 1/1/2019 - 8/31/2021  
STACID: CIN: Edit

Program Aide / Nurse / Interpreter Related Services Transportation

1  Click if this is a multiple service STAC (two or more concurrent STACs)

2 School Year Session 2019 - 2020 Summer ▼

3 Is this student placed in Foster Care?  Yes  No

4 Provider HEBREW ACADEMY FOR SPEC CHLDRN ▼

5 Same as Evaluation Provider?  Yes  No

6 Program 9101(C) 07/08/19 - 08/14/19 J/A-PRESCHOOL SPECIAL CLASS OVER 2.5 NASSAU COUNTY WOODMERE ▼

	Start Date	End Date	Hours Per Day	Days per Week
7 Program	07/08/2019	08/14/2019	5.00	5
8 This Child	07/08/2019	08/14/2019	5.00	5 ▼

Save ←



# Adding Aides / Nurse / Interpreter

\* To add an aide / nurse or Interpreter

1. Select the type (Aide, LPN, RN, or Interpreter)
2. Select whether this service is shared with another student
3. Indicate the hours per day this service is provided
4. Indicate the days per week this service is provided
5. Click Add

The screenshot shows a software interface with the following elements:

- Program Tabs:** Program, Aide / Nurse / Interpreter, Related Services, Transportation.
- Form Fields:**
  - Type:** Aide (with a red '1' next to the dropdown arrow).
  - Sharing:** 1:1 (No Sharing) (with a red '2' next to the dropdown arrow).
  - Hours Per Day:** 5.00 (with a red '3' next to the input field).
  - Days Per Week:** 5 (with a red '4' next to the dropdown arrow).
  - Add:** Add (with a red '5' next to the button).
- Dropdown Menus:**
  - Type:** Aide, Aide, RN, LPN, Interpreter.
  - Sharing:** 1:1 (No Sharing), 1:1 (No Sharing), Shared with 1 other student, Shared with 2 other students, Shared with 3 other students, Shared with 4 other students.

# Adding Related Services INCLUDED in Tuition

Program	Aide / Nurse / Interpreter	Related Services	Transportation							
Service	Start Date	End Date	IND/GRP	Frequency	Minutes	Period	Location			
Occupational Therapy	07/08/2019	08/14/2019	I	2	30	WEEKLY	Therapy Room	Edit	Delete	Amend
Physical Therapy Group	07/08/2019	08/14/2019	G	3	45	WEEKLY	Gym	Edit	Delete	Amend
Speech Therapy <b>1</b>	07/08/2019 <b>2</b>	08/14/2019 <b>3</b>	I <b>4</b>	3 <b>5</b>	30 <b>6</b>	WEEKLY <b>7</b>	Classroom <b>8</b>	Edit	Delete	Amend

- 1.** The type of service
- 2.** The start date of this particular service
- 3.** The end date for this particular service
- 4.** Whether the service is Individual (I) or Group (G)
- 5.** The number of sessions per period
- 6.** The number of minutes for each session
- 7.** The period of time for this service
- 8.** Location where service will be performed

# When IEP has no Related Services

- \* If the IEP does not specify any related services, check the box at the top of the related services tab that says  
“There are no recommended related services for this student on this Placement / IEP”

Service	Start Date	End Date	IND/GRP	Frequency
<input type="text"/>	09/08/2020	06/24/2021	<input type="text"/>	<input type="text"/>

[Return to Student Details](#)

# Adding Transportation

1. A list of types of transportations indicated in IEP (Bus, Parent reimbursement, Wheelchair / modified bus)

2. Section to upload new transportation documents (TRF)

3. List of documents that have been uploaded for this placement

The screenshot shows a web application interface for adding transportation services. It is divided into three main sections, each marked with a red number:

- Section 1:** A table listing existing transportation services. The table has columns for Service, Start Date, End Date, and three action buttons: Edit, Delete, and Amend. A dropdown menu is visible under the Service column, showing 'Bus' selected.
- Section 2:** A form for uploading transportation documents. It includes a 'Document Type' dropdown, an 'Effective Date' input field, and a 'Comment' input field. Below these is a file selection area with a 'Choose File' button and the text 'No file chosen', and an 'Upload' button.
- Section 3:** A table titled 'Transportation Files' showing a list of uploaded documents. The table has columns for Uploaded date, Document Type, Comments, and Effective Date.

Service	Start Date	End Date	Edit	Delete	Amend
Bus	07/08/2019	08/14/2019	Edit	Delete	Amend
Bus	07/08/2019	08/14/2019	Add		

Upload Transportation Document

Document Type:  Effective Date:  Comment:

Choose File No file chosen

Upload

Uploaded	DocumentType	Comments	Effective Date
03/20/2019	Transportation Request Form		07/01/19
03/20/2019	Transportation Change Form	New drop off address	08/01/19

# When IEP has no Transportation

- \* If the student will not be bussed, **and** the parent will not be submitting for mileage reimbursement, check the box at the top of the transportation tab that says “The IEP does not authorize reimbursement for transportation”

The IEP does not authorize reimbursement for transportation

Service	Provider	Start Date	End Date	Submitted Date	Status			
		09/08/2020	06/24/2021			Add		

Upload Transportation Document

Document Type:  Effective Date:  Comment:

No file chosen

Transportation Files

Uploaded	DocumentType	Comments	Effective Date
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# Documents Needed to Upload

- \* Before you can sign and submit your CB Placement, you will need to upload the following documents:
  - \* IEP – current IEP showing all services created on CB Placement
  - \* Medicaid Parental Consent form
    - \* Or Refused Medicaid Parental Consent form
    - \* Or District Failed to Obtain Medicaid Parental Consent Form
  - \* Amended IEP – if services are added or increased a new IEP must be uploaded

# Documents for Aide / Nurse / Interpreter

- \* There are occasions when you will need to upload the Request For Reimbursement For Partial Aide/Nurse/Interpreter form.
- \* eSTACs will inform you when this form is needed when completing the Sign and Submit process.
- \* Go to the Aide/Nurse/Interpreter tab and click Print.
- \* Have form signed and upload form to eSTACs.

CPSE: 112806060000 RYDELL CSD

**Student Information**

Last Name: **Balmudo** First Name: **Leo** DOB: **3/19/2017** Eligibility: **1/1/2020 - 8/31/2022**  
STACID: CIN: Student Number: **5000039718** [Edit](#)

**Placement Information**

Session: From Date: **09/08/2021** To Date: **06/22/2022**  
Hrs/Day: **5.00** Days/Wk: **5** Aide/RN/LPN:  
Provider: **FRED S KELLER SCHOOL** Program: **9100**

**Program** **Aide / Nurse / Interpreter** **Related Services** **Transportation**

Type	Sharing	Start Date	End Date	Hours Per Day	Days Per Week	Submitted Date	Status				
Aide	Shared with 3 other students	09/08/2021	06/22/2022	5.00	5		Not Submitted	<a href="#">Edit</a>	<a href="#">Delete</a>		<a href="#">Print</a>
<input type="text"/>	<input type="text"/>	09/08/2021	06/22/2022	<input type="text" value="5.00"/>	<input type="text" value="5"/>			<a href="#">Add</a>			

[Return to Student Details](#)

# Comparison eSTAC to Paper Form

Program		Aide / Nurse / Interpreter		Related Services		Transportation					
Type	Sharing	Start Date	End Date	Hours Per Day	Days Per Week	Submitted Date	Status				
Aide <b>1</b>	Shared with 3 other students <b>2</b>	09/08/2021	06/22/2022	5.00 <b>3</b>	5 <b>4</b>		Not Submitted	Edit	Delete		Print
<input type="text" value="v"/>	<input type="text" value="v"/>	09/08/2021	06/22/2022	5.00	5 <input type="text" value="v"/>			Add			

**NEW YORK STATE EDUCATION DEPARTMENT  
 STAC AND SPECIAL AIDS UNIT  
 REQUEST FOR REIMBURSEMENT FOR  
 Partial 1:1 AIDE, 1:1 NURSE, 1:1 INTERPRETER**

**\*\*FOR PRESCHOOL USE ONLY\*\***

**STAC ID#** \_\_\_\_\_ (if known)

Student Name: \_\_\_\_\_ Balmudo, Leo \_\_\_\_\_ Date of Birth: \_\_\_\_\_ 03/19/17

Preschool Provider Name: \_\_\_\_\_ FRED S KELLER SCHOOL

Preschool Program Type/Name: \_\_\_\_\_ 9100

**1** **Type of 1:1:** Partial 1:1 Aide  1:1 Nurse RN \_\_\_\_\_ 1:1 Nurse LPN \_\_\_\_\_ 1:1 Interpreter \_\_\_\_\_  
 (check one)

**2** > Is this 1:1 Aide/Nurse/Interpreter Shared? NO \_\_\_\_\_ YES

If YES, Number of Students Sharing the 1:1: \_\_\_\_\_ 3

**1:1 AIDE/NURSE/INTERPRETER--FOR PRESCHOOL EDUCATION:**

Start Date of 1:1 Aide/Nurse/Interpreter: 9 / 8 / 21 Projected End Date: 6 / 22 / 22

Hours Per Day Program Runs: 5.00

Hours Per Day Student in Program: 5.00 Days Per Week Student in Prog: 5

1:1 Aide/Nurse/Interpreter Hrs/Day Requested: **3** 5.00 1:1 Days/Week Requested: **4** 5



# Signing and Submitting

- \* Once all information is entered from the IEP, you will now need to Sign and Submit the CB Placement.

CPSE: **661100010000** NEW ROCHELLE

Student Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ DOB: **6/23/2016** Eligibility: **1/1/2019 - 8/31/2021**  
STACID: \_\_\_\_\_ CIN: \_\_\_\_\_ Student Number: \_\_\_\_\_ [Edit SED Summary](#)

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

School Year Session

School Year Session	Placement	Description	Status	Submitted By	Submitted Date					
2020 - 2021 Summer	CB	07/06/2020-08/14/2020 -9100(A)	Submitted	import	8/18/2020	Amend	Rescind	Print		Submission History
2020 - 2021 Winter	CB	09/08/2020-06/25/2021 -9100(I)	Submitted	RS	12/21/2020	Amend	Rescind	Print		Submission History
2021 - 2022 Summer	CB	07/05/2021-08/13/2021 -9100(A)	Amended			Amend	Rescind	Print	<b>Sign and Submit</b>	Submission History
2021 - 2022 Summer	SEITRS	07/05/2021-08/13/2021 RS (OT(I))	Submitted	RS	8/4/2021	Amend	Rescind	Print		Submission History

[Add CB Placement](#) [Add SEIT/RS Placement](#)

# Compare CB Placement to IEP

\* Compare all of your entries on left side to IEP on right side. **Do not sign & submit if not correct.**

Student Name \_\_\_\_\_ CPSE District NEW ROCHELLE  
DOB 6/23/2016 County WESTCHESTER  
STAC ID \_\_\_\_\_  
Student # \_\_\_\_\_

School Year: 2021 - 2022 Summer Placement Type: CB Provider: \_\_\_\_\_

Show Rescinded Print STAC-1

Placements To Submit

Provider	From Date	To Date	Service Type	Frequency	Location
	7/5/2021	8/13/2021	9100-A J/A-PRESCHOOL SPECIAL CLASS OVER 2.5	5 hrs/day	Classroom
	7/5/2021	8/13/2021	Occupational Therapy Indiv <b>2</b>	2x30	Preschool
	7/5/2021	8/13/2021	Physical Therapy Indiv <b>3</b>	1x30	Preschool
	7/5/2021	8/13/2021	Speech Therapy Group <b>4</b>	1x30	Preschool
	7/5/2021	8/13/2021	Speech Therapy Indiv <b>5</b>	2x30	Preschool
	7/5/2021	8/13/2021	Transportation : Parent		

Submit

SUMMARY-SPECIAL EDUCATION PROGRAMS AND RELATED SERVICES			
<b>1</b>	Special Class: 8:1+2	07/05/2021 - 08/13/2021 5 x Weekly, 5hr. 30min.	Special Class
<b>2</b>	Occupational Therapy: Individual	07/05/2021 - 08/13/2021 2 x Weekly, 30min.	School
<b>3</b>	Physical Therapy: Individual	07/05/2021 - 08/13/2021 1 x Weekly, 30min.	School
<b>5</b>	Speech/Language Therapy: Individual	07/05/2021 - 08/13/2021 2 x Weekly, 30min.	School
<b>4</b>	Speech/Language Therapy: Small Group	07/05/2021 - 08/13/2021 1 x Weekly, 30min.	School

# LIVE TRAINING

# CB Amendments

CPSE determines	What to do
An AIDE/RN/LPN should be added to the IEP	End Placement and Create new placement with all necessary details
An AIDE/RN/LPN should be removed from the IEP	
The student should be in a different program (different provider, SC vs SCIS, half day vs full day etc.)	
The student no longer needs a particular related service	End Placement detail by amending end date of detail
The student will no longer receive a type of transportation	
The student needs an additional related service	Add additional placement details as necessary
The student will get a new type of transportation service (No transportation -> bus, bus->Bus + Parent, Bus-> Bus + AIDE)	
There should be a change to a related service (change in frequency, change from individual to group, change location)	End Placement detail by amending end date of detail, then add new placement detail
The child will change transportation (Bus->Parent, Parent->Bus)	

# Corrections

## Actions Needed to Correct Data in eSTACs by Field

Placement Type	Service Category	Requires Rescinding entire placement	Requires Rescinding single detail	Can correct data via amending
CB	CB	School Year Session Foster County Provider		Program (SC vs SCIS, half day vs full day) Start Date / End Date Hours Per Day / Days Per Week
	AIDE		Type (AIDE/LPN/RN) Sharing	Hours Per Day Days Per Week
	Related Service		Service Individual vs Group Frequency, Duration & Period	Start Date End Date
	Transportation		Service (Bus, Parent, LPN, etc.) Provider	Start Date End Date

# Corrections

## Actions Needed to Correct Data in eSTACs by Field

	Center Based (CB)				SEIT and/or Related Services	
	CB	AIDE/RN/LPN	Related Service	Transportation	SEIT	Related Services
School Year Session	Rescind Entire Placement				Rescind Entire Placement	Rescind Entire Placement
Foster Care County	Rescind Entire Placement				Rescind Entire Placement	Rescind Entire Placement
Provider	Rescind Entire Placement				Rescind Entire Placement	Rescind single detail
Program	Amend				Rescind Entire Placement	
Sharing (AIDE)		Rescind single detail				
Service		Rescind single detail	Rescind single detail	Rescind single detail		Rescind single detail
Start Date	Amend		Amend	Amend	Amend	Amend
End Date	Amend		Amend	Amend	Amend	Amend
Hours Per Day	Amend	Amend				
Days Per Week	Amend	Amend				
Ind. Vs Group			Rescind single detail		Rescind single detail	Rescind single detail
Frequency			Rescind single detail		Rescind single detail	Rescind single detail
Duration			Rescind single detail		Rescind single detail	Rescind single detail
Period			Rescind single detail		Rescind single detail	Rescind single detail
Location			Amend		Amend	Amend

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- \* **November 12, 2021:**

- \* If services began **before 11/1/2021**, November 12th is the last day that the county will accept the paper STAC-1

- \* McGuinness has uploaded all students that are currently in the Rockland County Preschool database for the 2021/2022 school year to eSTACs.

# Getting Support

- \* If you need help you can contact Kelly Knowles at [Kknowles@jmcguinness.com](mailto: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.
- \* 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.



# Upcoming Webinar

- \* Rockland County eSTACs – Entering STAC-1 for Related Services & SEIT
  - \* 10/29/21 @ 10:00 am - <https://attendee.gotowebinar.com/register/4942166646703256843>
  - \* 10/29/21 @ 1:30 pm - <https://attendee.gotowebinar.com/register/5058732471433588747>