

Special Education Reimbursement for Connecticut Charters

Training for CFOs and Special Education Directors/Coordinators

Summer, 2024

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REIMBURSEMENT MODEL - OPTION 1A

Adjust per school staff

Adjust per cycle length

Student ID	Grade	IEP Services	Billable hours per day	Comment	Hourly provider rate	Special education costs per day	Billing days	Service subtotals
Student A	6	Reading 5 hrs/week		Billable		\$0.00		\$0.00
Student A	6	Math 5 hrs/week		Billable		\$0.00		\$0.00
Student A	6	Academic support 1 hr/week		Billable		\$0.00		\$0.00
Student A	6	Counseling 0.5 hour weekly		Billable		\$0.00		\$0.00
Student B	8	Reading 5 hrs/week		Billable		\$0.00		\$0.00
Student B	8	Math 5 hrs/week		Billable		\$0.00		\$0.00
Student C	7	Reading 5 hrs/week		Billable		\$0.00		\$0.00
Student C	7	Math 5 hrs/week		Billable		\$0.00		\$0.00
Student D	4	Reading 3 hrs/week		Billable		\$0.00		\$0.00
Student D	4	Counseling 30 min/wk/x2		Billable		\$0.00		\$0.00
Student D	4	Paraprofessional 25 hours/wk		District Provider - do not bill				
Student E	5	Reading 3 hrs/week		Billable		\$0.00		\$0.00
Student E	5	Math 3 hrs/week		Billable		\$0.00		\$0.00
Student E	5	Speech - 1.5 hrs/wk in group		District Provider - do not bill				
Student E	5	OT - 1 hr/week individual		District Provider - do not bill				
Student F	7	Reading 5 hrs/week		Billable		\$0.00		\$0.00
Student F	7	Math 5 hrs/week		Billable		\$0.00		\$0.00
Student F	7	Speech - 1.5 hrs/wk in group		District Provider - do not bill				
Student G	5	Reading 4 hrs/week		Billable		\$0.00		\$0.00
Student G	5	Math 4 hrs/week		Billable		\$0.00		\$0.00
Student G	5	Speech - 1.5 hrs/wk in group		District Provider - do not bill				
Student H	6	Academic support 1 hr/week		Billable		\$0.00		\$0.00
Student H	6	Reading 5 hrs/week		Billable		\$0.00		\$0.00
Total Services:								\$0.00

Total # of students with IEPs 8

Administrative Costs:

Staff	Activity	Hours per day	Comment	Hourly provider rate	Special education admin costs per day	Billing days	Administrative subtotals
Special Educator 1	PPT Meeting prep and attendance				\$0.00		\$0.00
Counselor	PPT Meeting prep and attendance				\$0.00		\$0.00
Special Educator 2	PPT Meeting prep and attendance				\$0.00		\$0.00
Student Services Director	Coordination w/ districts, PPT Meeting prep, and attendance				\$0.00		\$0.00
Total Admin Costs:							\$0.00

FINAL TOTALS/COSTS

Per Pupil Services Total	\$0.00
Administrative Costs Total	\$0.00
Total Amount of Reimbursement Due:	\$0.00

Option 1B: Invoice example

Slide 17

Charter School Logo/Name

Address for Payment Remittance

Appropriate Contact Phone for Billing Matters

INVOICE FOR SPECIAL EDUCATION SERVICES

Invoice Number
Date Invoice Printed

Customer: Name of District Responsible for Payment

For: Name of Charter School Child Attends
Special Education Services
School Year 2024-2025

Student: Last Name, First Name (DOB: MM/DD/YYYY)

SASID: 12345

SASID	Service	IEP Hours/ Frequency	Service Period	Weeks	Service Hours	Hourly Rate ¹	TOTAL
12345	Academic Support	1.00/week	8/26/24 - 6/20/25	36	36	\$43.69	\$1,572.84
12345	Counseling	0.50/week	8/26/24 - 6/20/25	36	18	\$45.00	\$810.00
12345	Speech Therapy	1.00/week	8/26/24 - 6/20/25	36	36	\$117.50	\$4,230.00
TOTAL							\$6,612.84

¹ Adjust based on provider rate

Option 2: Invoice example

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REIMBURSEMENT MODEL - OPTION 2	
<i>Step 1:</i> Calculate total actual costs based on personnel costs <i>Step 2:</i> Subtract actual reimbursement paid by other towns <i>Step 3:</i> Divide net remainder by actual IEP minutes provided to resident students per marking period (quarter)	Inputs: 182 school days
Result is the average hourly rate for the cost of providing special education and related services to resident services	

STEP 1: CALCULATE TOTAL ACTUAL COSTS							
Last Name	First Name	Position	Total Hours	Hourly Rate	Total Pay	Taxes and Benefits (32.5%)	Total Comp
		MS SpEd Teacher	260	\$ 50.00	\$ 13,000.00	\$ 4,225.00	\$ 17,225.00
		MS Teacher--SpEd Direct Instruction (Lang. Arts)	22	\$ 50.00	\$ 1,100.00	\$ 357.50	\$ 1,457.50
		Elem SpEd Teacher	1456	\$ 35.76	\$ 52,066.56	\$ 16,921.63	\$ 68,988.19
		MS SpEd Para	1500	\$ 26.39	\$ 39,585.00	\$ 12,865.13	\$ 52,450.13
		MS Teacher--SpEd Direct Instruction (Math)	35	\$ 50.00	\$ 1,750.00	\$ 568.75	\$ 2,318.75
		MS Teacher--SpEd Direct Instruction (Writing)	8	\$ 50.00	\$ 400.00	\$ 130.00	\$ 530.00
		MS Teacher--SpEd Direct Instruction (Behavior/Study Skills)	14	\$ 50.00	\$ 700.00	\$ 227.50	\$ 927.50
			Total Hours	Hourly Rate	Total Pay	Taxes and Benefits	Total Comp
			TOTALS	3295	\$ 108,601.56	\$ 35,295.51	\$ 143,897.07

STEP 2: SUBTRACT ACTUAL REIMBURSEMENT FROM OTHER TOWNS									
COST BREAKDOWN BY DISTRICTS									
Position	Total Hours	District A	District B	Invoicing District	Total Comp	District A	District B	Invoicing District	
MS SpEd Teacher	260	26	52	182	\$17,225.00	\$1,722.50	\$3,445.00	\$ 12,057.50	
MS Teacher--SpEd Direct Instruction (Lang. Arts)	22	2	4	16	\$ 1,457.50	\$ 132.50	\$ 265.00	\$ 1,060.00	
Elem SpEd Teacher	1456	15	30	1411	\$68,988.19	\$ 710.73	\$1,421.46	\$ 66,856.00	
MS SpEd Para	1500	15	30	1455	\$52,450.13	\$ 524.50	\$1,049.00	\$ 50,876.62	
MS Teacher--SpEd Direct Instruction (Math)	35	4	8	23	\$ 2,318.75	\$ 265.00	\$ 530.00	\$ 1,523.75	
MS Teacher--SpEd Direct Instruction (Writing)	8	1	2	5	\$ 530.00	\$ 66.25	\$ 132.50	\$ 331.25	
MS Teacher--SpEd Direct Instruction (Behavior/Study Skills)	14	2	4	8	\$ 927.50	\$ 132.50	\$ 265.00	\$ 530.00	
		District A	District B	Invoicing District		District A	District B	Invoicing District	
		65	130	3100		\$3,553.98	\$7,107.96	\$133,235.12	

Total Special Education Compensation	\$ 143,897.07
Reimbursements from other districts	\$ 10,661.94
Total Costs Attributable to Invoicing District	\$ 133,235.12

STEP 3: DIVIDE NET REMAINDER BY ACTUAL IEP MINUTES PROVIDED TO RESIDENT STUDENTS PER MARKING PERIOD

Option A: Calculate proportionately by actual days

Dates	Description	Number of days	% of Yr	Billing Per Quarter
08/31/23 - 11/01/23	Quarter 1 Special Education Services	42	23%	\$ 30,746.57
11/02/23 - 01/19/24	Quarter 2 Special Education Services	45	25%	\$ 32,942.75
01/22/24 - 03/28/24	Quarter 3 Special Education Services	47	26%	\$ 34,406.87
04/01/24 - 06/14/24	Quarter 4 Special Education Services	48	26%	\$ 35,138.93
Total Invoiced				\$ 133,235.12

Option B: Calculate quarterly (total divided by 4)

Dates	Description	Billing Per Quarter
08/31/23 - 11/01/23	Quarter 1 Special Education Services	\$ 33,308.78
11/02/23 - 01/19/24	Quarter 2 Special Education Services	\$ 33,308.78
01/22/24 - 03/28/24	Quarter 3 Special Education Services	\$ 33,308.78
04/01/24 - 06/14/24	Quarter 4 Special Education Services	\$ 33,308.78
Total Invoiced		\$ 133,235.12

COST BREAKDOWN BY DISTRICTS

Position	Total Hours	Invoicing District			Total Comp	Invoicing District		
		District A	District B	Invoicing District		District A	District B	Invoicing District
MS SpEd Teacher	260	26	52	182	\$ 17,225.00	\$ 1,722.50	\$ 3,445.00	\$ 12,057.50
MS Teacher--SpPEd Direct Instruction (Lang. Arts)	22	2	4	16	\$ 1,457.50	\$ 132.50	\$ 265.00	\$ 1,060.00
Elem SpEd Teacher	1456	15	30	1411	\$ 68,988.19	\$ 710.73	\$ 1,421.46	\$ 66,856.00
MS SpEd Para	1500	15	30	1455	\$ 52,450.13	\$ 524.50	\$ 1,049.00	\$ 50,876.62
MS Teacher--SpEd Direct Instruction (Math)	35	4	8	23	\$ 2,318.75	\$ 265.00	\$ 530.00	\$ 1,523.75
MS Teacher--SpEd Direct Instruction (Writing)	8	1	2	5	\$ 530.00	\$ 66.25	\$ 132.50	\$ 331.25
MS Teacher--SpEd Direct Instruction (Behavior/Study Skills)	14	2	4	8	\$ 927.50	\$ 132.50	\$ 265.00	\$ 530.00
		District A	District B	Invoicing District		District A	District B	Invoicing District
		65	130	3100		\$ 3,553.98	\$ 7,107.96	\$ 133,235.12

Guided Practice

Slides 21-25

A speech pathologist has four students in a group, once per week, during the first quarter of SY 2023–24. They meet for 30 minutes. 3 of 4 students (Students A, B, and C) are from the same sending district, Anywhere Public Schools.

The speech pathologist's hourly rate is \$50.00, inclusive of taxes and benefits. The school year is 180 days (36 weeks) long. You are compiling the invoice for this service for reimbursement from Anywhere Public Schools.

Review the two provided invoice examples.

Identify the accurate invoice given the situation.

Why is it accurate? Why is the other inaccurate?

Which invoice model is this?

Invoice this scenario using the other invoice model.

Guided Practice Invoice A

Nutmeg State Charter School

100 Main Street
Anywhere, CT 06100
(203) 555-5555

INVOICE FOR SPECIAL EDUCATION SERVICES

Invoice Number 24-1
November 15, 2023

Customer: Anywhere Public Schools

For: Nutmeg State Charter School
Special Education Services
School Year 2023-24, Quarter 1

SASID	Service	IEP Hours/ Frequency	Service Period	Weeks	Service Hours	Hourly Rate	TOTAL
Student A	Speech Pathologist	0.5/week	08/31/23 - 11/01/23	9	4.5	\$50.00	\$225.00
Student B	Speech Pathologist	0.5/week	08/31/23 - 11/01/23	9	4.5	\$50.00	\$225.00
Student C	Speech Pathologist	0.5/week	08/31/23 - 11/01/23	9	4.5	\$50.00	\$225.00
TOTAL							\$675.00

Guided Practice Invoice B

Nutmeg State Charter School

100 Main Street
Anywhere, CT 06100
(203) 555-5555

INVOICE FOR SPECIAL EDUCATION SERVICES

Invoice Number 24-1
November 15, 2023

Customer: Anywhere Public Schools

For: Nutmeg State Charter School
Special Education Services
School Year 2023-24, Quarter 1

SASID	Service	IEP Hours/ Frequency	Service Period	Weeks	Service Hours	Hourly Rate	TOTAL
Student A	Speech Pathologist	0.5/week	08/31/23 - 11/01/23	9	1.125	\$50.00	\$56.25
Student B	Speech Pathologist	0.5/week	08/31/23 - 11/01/23	9	1.125	\$50.00	\$56.25
Student C	Speech Pathologist	0.5/week	08/31/23 - 11/01/23	9	1.125	\$50.00	\$56.25
TOTAL							\$168.75

Guided Practice Invoice C

Nutmeg State Charter School

100 Main Street
Anywhere, CT 06100
(203) 555-5555

INVOICE FOR SPECIAL EDUCATION SERVICES

Invoice Number 24-1
November 15, 2023

Customer: Anywhere Public Schools

For: Nutmeg State Charter School
Special Education Services
School Year 2023-24, Quarter 1

Service Period	Position	No. of Weeks	Hours per Week	Unit Price	TOTAL
<i>Reimbursement from other districts</i>					
Total Reimbursement Invoice					