

INDEPENDENT EDUCATIONAL EVALUATIONS
AT PUBLIC EXPENSE

The Board of Education recognizes the right of parents of a student who has, or is believed to have, a disability to receive an independent educational evaluation (IEE) at public expense if they disagree with the evaluation obtained by the Committee on Special Education (CSE).

It shall be the policy of the Board of Education to provide for the payment of an Independent Education Evaluation (IEE) under the following terms and conditions:

1. A parent may only obtain one Independent Education Evaluation (IEE) at public expense each time the District conducts an evaluation with which the parent disagrees.
2. The Board shall not authorize an IEE at public expense unless the District has conducted its own evaluation and the parent requests an IEE based on a disagreement with its results.
3. The District may ask a parent to explain the basis for the disagreement with the District's evaluation but may not require such an explanation as a prerequisite or unreasonably delay in acting upon such request.
4. The Pupil Services Director shall develop, maintain and periodically update a payment schedule for such educational evaluations based on a survey of the community cost to secure them and shall enforce a fifty (50) mile geographic limit. An IEE shall not be approved at public expense without verification that the individual proposed to conduct such testing is qualified to do so under the laws of the state in which he/she practices.
5. A waiver of the Board's Policy regarding payment and geographic limits shall be considered upon receipt of a written request that establishes that in its absence, the student, and his/her parent would be denied their rights.
6. The Pupil Services Director shall maintain and provide to any parent who requests an IEE a current list of approved evaluators.
7. The Board shall not reimburse a parent for the cost of an evaluation which does not conform to the Board's policy on reimbursement, in the absence of a waiver, and before the District conducts its own evaluation.
8. Requests for IEEs shall be reviewed by the Pupil Services Director, who shall notify the parent within fifteen (15) business days of his/her receipt of such request, of his/her decision and shall state the reasons for a denial in a prior written notice.
9. If, upon review, the Pupil Services Director determines that the request for an IEE shall be approved, the District shall offer a contract to the individual selected by the parents, upon the individual's acceptance of the Board's terms, which shall provide for payment upon the District's receipt of the final evaluation.

10. If the Pupil Services Director declines approval of a request for an IEE at public expense based on a determination that its evaluation was appropriate or that the parent's request does not conform with the criteria established pursuant to the Board's policy, the District shall notify the parent no later than twenty (20) days following the parent's request with an explanation of the reasons. Unless the parties reach another agreement and/or the parent withdraws their request, the District shall notify the parent that the Board is scheduling a hearing and the Board shall appoint a Hearing Officer.
11. If the District has not conducted its own re-evaluation within one year of the parent's request, it shall conduct a re-evaluation to consider the parent's request and shall arrange to conduct its own assessment, with parental consent, if the assessment requested is determined to be necessary.
12. In all cases, the District shall first inquire of the parent whether they are willing to use their insurance to cover any portion of the cost of the evaluation in which case, with their informed consent, the District shall offer to assume the cost of any co-pay.

Definition of Terms:

1. An Independent Educational Evaluation (IEE), as referenced in this policy, means an evaluation conducted by a qualified examiner who is not employed by the public agency responsible for the education of the student.
2. A re-evaluation constitutes a review by a group that includes the Committee on Special Education (CSE) of existing evaluation data including evaluations and information provided by the parent of the student, current classroom based assessments, local and state assessments, classroom-based observations, and observations by teachers and related service providers, with input from the parent, to determine what additional data, if any, are needed to determine:
 - a. Whether the student continues to have a disability.\
 - b. The present levels of academic achievement and related developmental needs, including physical, academic, functional, social/emotional needs and management needs.
 - c. Whether any additions or modifications to the services recommended are needed to enable the student to meet the measurable goals set out in the IEP and to participate, as appropriate in the general curriculum.

If the team concludes that no additional data is needed, the District must notify the parent of its determination and the reasons for such determination, and of the parent's right to request an assessment to determine whether the student continues to be a student with a disability and to determine the student's educational needs. The District is not required to conduct the assessment unless requested to do so by the student's parent.

SOUTH COLONIE

4321.3

Reference: 8 NYCRR §200.5(g).

Revised: May 22, 2001; March 20, 2007; September 3, 2013

INDEPENDENT EDUCATIONAL EVALUATIONS REGULATION**Requests for Independent Educational Evaluations (IEE)**

1. Parents or guardians should file a written request for an Independent Educational Evaluation with the Pupil Services Director, following receipt of the CSE or CPSE evaluation.
2. Upon receiving such request, the District will forward a letter of acknowledgment to the parent and/or independent evaluator within ten (10) calendar days. Any further information needed by the District to reach a decision regarding reimbursement will be requested in the letter.
3. After determining whether to approve or deny reimbursement, the District shall notify the parent by letter. If reimbursement is denied, the reasons therefore shall be indicated in the letter.
4. In cases where reimbursement is denied, the parent or the District have the right to initiate an impartial hearing to determine the appropriateness of an independent evaluation.

Selection of Qualified Professionals

1. Independent evaluations shall be conducted by individuals who possess a current license and/or current certification in the area of evaluation from the New York State Education Department.
2. The District will not consider for payment at public expense independent evaluators outside the Capital Region; within a fifty (50) mile radius. A parent may select any independent evaluator who, at the time the parent submits a request for an independent evaluation, provides that such professional is a certified and/or licensed evaluator. Requests for exceptions to these geographic limitations should be forwarded in writing to the District's Pupil Services Director.
3. Parents may also select a qualified professional of any other public school district or BOCES in New York State. Such licensed or certified individuals will be paid at the hourly rate currently assigned to him/her by his/her respective public school district or BOCES.

When a request for an independent evaluation is approved by the school and a qualified professional is selected by the parent/guardian, such independent evaluator shall then be responsible for contacting the District's Pupil Service Director to arrange for payment, dates of classroom visitation, and discussions with school staff.

Fees

The District shall either pay for the full cost of the approved independent evaluations or ensure that the evaluation is otherwise provided at no cost to the parent. The District has established

reasonable reimbursement rates for independent evaluations (up to \$1,800.00) which do not exceed the costs which the District would be required to pay to its own employees. The District will not pay more the amount established by the Board of Education at its Annual Reorganization Meeting, for a comprehensive Independent Educational Evaluation that would meet the requirements of the Regulations of the Commissioner.

Such evaluation may require the following:

- An individual psychological evaluation;
- A physical examination;
- A social history; and
- Other suitable examinations and evaluations as may be necessary to ascertain the physical, mental, and emotional factors which may contribute to a suspected educational disability.

Exceptions shall be granted to this fee schedule where justified by the student's unique circumstances, upon written approval by the District's Pupil Services Director.

Reference: Education Law §§4404, 4404-a
8 NYCRR §200.5(g)
34 CFR Part 300

Revised: May 22, 2001; March 20, 2007; September 3, 2013

**Letter to Confirm Agreement to Contract for an
Independent Education Evaluation**

Date:

Name and Address of Independent Contractor

Re: Agreement to Contract for IEE – *Student Name & Date of Birth*

Dear (*Name of Independent Contractor*):

Mr. and Mrs. (*Parent Name*) have asked the District to arrange to have you conduct an Independent Educational Evaluation (IEE) of their child, (*Student Name*). In order to proceed with the request I have enclosed a copy of Board of Education Policy 4321.3 – Independent Education Evaluation regarding cost, qualifications, geographic limitations and availability.

The parents have requested that you conduct the following evaluation (*identify evaluation type and specific issues to be addressed through this evaluation, if any*). According to the policy, the District has approved up to \$1,800 to secure such evaluation. As we advised the parents, if you are unable to complete the evaluation requested at the approved rate, they may submit a request for waiver to establish why a waiver is necessary to enable them to secure an appropriate evaluation. If the terms are acceptable to you, please sign the confirmation and return it to me at your earliest convenience.

Assuming you agree to conduct the IEE requested our CSE Chairperson or Pupil Services Director will contact you to discuss this student's current educational status and to identify any reports and/or evaluations that you would like the District to forward to you for review. If necessary, we will also arrange for you to conduct a classroom observation beyond the evaluation already approved.

Since your testing and report will be reviewed to determine what changes, if any, the Committee on Special Education (CSE) should adopt, we ask that you specifically address how your findings affect this student's academic achievement and functional skills, physical development, social development and management needs as defined by Part 200 of the NYS Commissioner's Regulations (enclosed). Because the recommendation for Special Education and related services is made by the CSE after a full review of current information on the student's achievement as well as new evaluations and reports, we look forward to a review of your findings.

To prepare for the Committee meeting, a member of our evaluation team may contact you to discuss your findings and may request a copy of your test protocols.

If for any reason you are unable to accept the terms offered, please contact me as soon as possible. Otherwise, please sign and return the agreement enclosed with this correspondence. Upon completion, please forward to me your evaluation along with your invoice for payment.

Thank you in advance for your cooperation. We look forward to working with you on (Student Name) behalf. Please do not hesitate to contact me should you have any questions.

Sincerely,

Director of Pupil Services

CSE Chairperson

cc: Name of Parent
Student File

Enclosure: IEE Agreement
Part 200 of the NYS Commissioner's Regulations
Policy 4321.3 – Independent Educational Evaluations

IEE Agreement

I, (Name of Evaluator), having reviewed Policy 4321.3 of the South Colonie Central School District Board of Education regarding compensation for an Independent Education Evaluation (IEE) as well as the attached letter, agree to conduct the IEE requested under the terms set forth therein.

I agree to conduct a (Type of Evaluation) for the South Colonie Central School District on (Student Name) for \$ (enter amount) which shall be completed and submitted on or before (Date).

Upon request, I agree to conduct a classroom evaluation by the District for an additional fee of \$ (enter amount).

I agree to consult with both the parent/guardian and District representatives regarding their concerns leading to this IEE.

I agree to be available to the parents and the District to explain my results and findings.

I understand that payment will be made after I submit my final written report to the District along with my invoice. I also agree to participate in a meeting, upon request, either in person or by telephone to review and discuss my report.

Signature

License/Certification Number

Date

**Availability to Conduct
Independent Educational Evaluations**

(Form to be sent to survey Psychologists for list of approved evaluators)

Name: _____

Business Address: _____

Telephone Number: _____

E-Mail Address: _____

Current Certifications and Licenses: _____

CERTIFICATION

I certify that I am a (_____) qualified by the State of New York to conduct the following educational evaluations:

I have reviewed Board of Education Policy 4321.3 for compensation of Independent Educational Evaluations (IEE) and agree that upon a request to conduct an IEE for a resident of the South Colonie Central School District, I will conduct the IEE under the terms set forth therein.

Signature

**Letter to Confirm Receipt of Request for an
Independent Education Evaluation at Public Expense**

Date:

Name and Address of Parents

Re: Confirm Receipt of Request for IEE – *Student Name*

Dear (*Name of Parents*):

I am writing to confirm receipt of your letter requesting an Independent Education Evaluation at public expense. Such requests will be approved where a parent disagrees with the District's evaluation and where the proposed evaluation complies with the District's IEE policy. Although there is no requirement that you disclose the nature of your disagreement with the Committee's evaluation as a precondition of approval, I would welcome an opportunity to speak with you directly to discuss your concerns.

In the interim, I have enclosed a copy of Board of Education Policy 4321.3 which sets forth its payment schedule, qualifications and geographic boundaries for approval of the IEE. Also enclosed for your review is a list of independent evaluators who meet District criteria and who have reviewed the District's policy and agreed to its terms and conditions.

Although you are not required to select an evaluator from this list, please be advised that anyone you choose must be willing to comply with the District's policy and must meet the qualifications required to perform the evaluation. If you would like to secure an evaluation with someone who does not appear on this list, please forward their name and contact information to my office and we will contact that individual or agency to review their credentials and confirm whether they are willing or able to comply with the District's IEE policy terms and conditions. Failure to abide by the District's policy, without securing a waiver, may result in a denial of the request for payment.

In addition, I encourage you to contact me to discuss the concerns that prompted your request for an IEE to determine whether we may reach an agreement as to how best to address them. At a minimum, please let me know as soon as possible the evaluation with which you disagree and the IEE you are seeking.

If we do not receive a response from you, the District will respond to your request for an IEE at public expense no later than (insert date) .

SOUTH COLONIE

4321.3-E4

Thank you for your anticipated cooperation. Should you have any questions, please do not hesitate to contact me at (518) 869-6759.

Sincerely,

Director of Pupil Services

CSE Chairperson

cc: Student File

Enclosure: Policy 4321.3 – Independent Educational Evaluations
Evaluator List

**Letter to Deny Request for
Independent Evaluation at Public Expense**

Date:

Name and Address of Parents

Re: Denial of Request for IEE – *Student Name*

Dear (*Name of Parents*):

I am writing in response to your request for an Independent Educational Evaluation at District expense. We have denied your request because (*select appropriate paragraph below and delete all others*).

- *The District is prepared to establish at hearing that our evaluation was appropriate.*
- *The evaluation for which you seek reimbursement is not consistent with the criteria established by Board of Education Policy 4321.3.*
- *You have not given the District permission to conduct its own evaluation.*
- *The last evaluation conducted by the District was more than a year ago and you have not requested a re-evaluation to enable the District to update its testing. The District is prepared to proceed with a re-evaluation and will send you the appropriate notice and request your consent to proceed with an updated District evaluation. If, after the District completes its re-evaluation, you disagree with the decision or the results, you may at that time renew your request for an IEE.*

In accordance with the law, if you wish to further pursue your right to secure an Independent Educational Evaluation at public expense, please contact me and I will schedule an impartial hearing or mediation, if that is your preference.

Alternatively, please contact me to discuss the possibility of having the District arrange for updated evaluations to address the concerns you have that prompted your request for an IEE.

SOUTH COLONIE

4321.3-E5

If we do not hear from you within five days of receipt of this correspondence, an impartial hearing will be scheduled.

Sincerely,

Director of Pupil Services

CSE Chairperson

cc: Student File