

# Reimbursement Matters: High Cost and Residential and Reintegration Grants

**SELDA**

**Department of Special Education  
Services and Supports**

*Nicole Croom, Program Specialist*

# Georgia's Systems of Continuous Improvement

GaDOE has adopted the Georgia Systems of Continuous Improvement as a methodology for supporting districts and schools. This methodology focuses on improving districts/schools' systems.



# Learning Targets

- Understand the purpose of the High Cost and Residential and Reintegration Grants
- Become familiar with the application criteria and process for applying
- Provide examples of students with disabilities that meet application criteria
- Identify expenses eligible for reimbursement

# Pique Your Interest

- Source of **revenue**
  - High Cost Fund Grant – federal funds
  - Residential and Reintegration Grant – state funds
- Offsets your **expenditures**
- Helps to maintain quality **programs** for all students

# High Cost Fund Grant



# Purpose of High Cost Fund Grant

Funds assist local educational agencies (LEAs) in covering the **high cost** of providing special education services to children with disabilities who meet certain criteria

34 C.F.R. § 611 (e) (3) of the IDEA 2004



# Purpose of High Cost Fund Grants (cont.)

“High Needs Child” – a student with disabilities whose special education and related services **exceed** the typical needs of a child with a disability



# Parameters for High Cost Fund Grant

- IDEA 2004 requires the eligibility for reimbursement for a high needs student be at least three times the average per pupil expenditure (approximately \$27,000)
- Number of applications cannot exceed .002 of the October special education student count ages 3-21
  - LEAs with less than 1,000 students may submit two applications
  - Maximum number of applications per LEA is available on application website



# Parameters for High Cost Fund Grant (cont.)

- Submission of a properly completed application within the time frame established
- Only seek reimbursement for appropriately incurred costs that exceed three times the state average pupil expenditure (approximately \$27,000)
  - Appropriate costs – those associated with providing direct special education instructional and related services as identified with the child's IEP

# Be Prepared to Provide Documentation!



# Proper Submission of High Cost Fund Grant Application

GEM Software

<https://www.gahcf.org>

Application Window  
January 1 – March 1

Special Education  
Director **must** sign off



Georgia Department of Education

Richard Woods, Georgia's School Superintendent  
"Educating Georgia's Future"

GRANT FOR HIGH COST FUND  
Georgia Department of Education  
Division for Special Education Services and Supports

A new login and password are required to complete and submit applications using this web site each year.

**\*\*CLICK HERE TO CREATE A NEW ACCOUNT\*\***

To access your account enter login and password below:

Login:	<input type="text"/>
Password:	<input type="password"/>
<input type="button" value="Login"/>	

The Login and Password ARE CASE SENSITIVE.

[GAHCF Technical Manual](#)

[GAHCF Technical Training Webinar](#)

For technical support call the GEM HELP DESK at 207.985.8802 or email [support@gemsoftwaredevelopment.com](mailto:support@gemsoftwaredevelopment.com)  
(Please include the name of your school district in email.)

# Proper Submission of High Cost Fund Grant Application (cont.)

**Resources available on GaDOE website at:**

*Special Education Services and Supports* → *Budgets, Grants and Consolidated Application* → *Federal Grant for High Cost Fund*

## Resources for Guidance

- High Cost and Residential and Reintegration Grant Submission
  - High Cost and Residential and Reintegration Grant Submission PowerPoint
- FY18 IDEA Budgeting Best Practices and Requirements
- Time and Effort Reporting Powerpoint
- Financial Management Complaints
- Equitable Services for Private and Home School Students Webinar
- FY20 Cross-Functional Monitoring Guidance Document
- FY20 IDEA Fiscal Monitoring Checklist for GNETS
- FY20 IDEA Fiscal Monitoring Checklist for LEAs
- Federal Programs Monitoring

## Federal Grant for High Cost Fund

- Georgia's High Cost Grant Submission Training Webinar
- Georgia's High Cost Grant Online Submission Manual
- Georgia's Plan for High Cost
- Grant for High Cost Funds - Sample Application
- Grant for High Cost Funds Q&A

# Process for the High Cost Grant Application

1

- Determine students receiving services that cost considerably more than others

2

- Carefully consider all the costs incurred for the high cost student

3

- May only request reimbursement for IEP services listed in the IEP

# Process for the High Cost Grant Application (cont.)

4

- Request reimbursement for FY20 expenditures (i.e., July 1, 2019 – June 30, 2020)
  - Specific expenses within the budget
  - Must project through June 30th

5

- May reimburse IDEA fund, General Fund or both

6

- Substantiate the expenses on the application
  - Providing actual invoices and other supporting evidence

# Provided Documentation for the High Cost Grant

- IEPs must document services listed in the application
- IEPs must cover the **entire** year of reimbursement
- IEPs need to be specific and detailed
- Must provide actual invoices and other supporting evidence

# Present Allowable Costs for Reimbursement

*All costs must be specific to the high cost student and documented on the student's IEP.*

## Special Education Services Expenditures

- Teacher
- Paraprofessional
- Speech
- ESY Teacher Costs
- ESY Paraprofessional Costs

## Related Services Expenditures

- Counselor – Direct Services
- Psychologist – Direct Services
- OT and PT
- Social Worker
- Nursing
- Bus Driver
- Bus Monitor
- AT Device – specific to student



# Unallowable Costs

- Legal fees
- Court costs or other costs associated with a cause of action brought on behalf of a child with a disability
- Unextraordinary nursing costs
- English as a Second Language instruction
- Indirect costs
- Administrative or leadership costs associated with the provision of services to the child



# Transportation Costs

- Limited to personnel, equipment or services required for the specific high need costs as identified in the child's IEP
- Must be specific to the high need student to be allowable
- Must be prorated for the high need student to be allowable
  - If including a salary for a bus driver and monitor, divide by the greatest number of students on the bus run at any one time.



# Page 1 Demographics and Summary of Costs

(1)

*Initial Grant*  
Brand new  
student

*Continuation  
Grant*  
Student that  
has already  
participated  
in the grant

**GRANT FOR HIGH COST FUND**  
 Georgia Department of Education  
 Division for Special Education Services and Supports

Return the Grant Application and Supporting Documentation to:  
 Georgia Department of Education  
 Division for Special Education Services  
 1870 Twin Towers East  
 Atlanta, GA 30334

SYSTEM: Valley School System		School Year: <input type="text"/>
System Contact: Sally Smart		Phone #: XXX XXXX-XXXX
		Email address: smart@valley.k12.ga.us
<input checked="" type="checkbox"/> Initial Grant		Ward of the State Y( ) N(X)
<input type="checkbox"/> Continuation Grant		
Student's Name: Harry Doe		Date of Birth: 8/1/2000
Student's Primary Disability: Traumatic Brain Injury (TBI) spell out disability area		Secondary Disability: Speech and Language (SL)
Father's/Guardian's/Surrogate's Full Name: John Doe		Mother's/Guardian's/Surrogate's Full Name: Mary Doe
Home Address:		Home Address:
123 Main Street (Street)	Anywhere, GA (City)	Same (Street) (City)
30000 (Zip)	706-333-5555 (Phone)	Same (Zip) (Phone)
PROVIDE THE SPECIFIC and/or PROPRATED COST BREAKDOWN TO MEET THE UNIQUE NEEDS OF THIS HIGH COST CHILD. Complete the Cost Worksheet Summary included in the grant application to calculate the amounts for the line item cost totals listed below. (Total cost of over \$27,000 should be used as the minimum to be considered in the application.		
1 Special Education Services		\$ 98,020
2 Related Services		\$ 14,543
3 Other costs		\$ 6,600
4 TOTAL COST of Child		\$ 119,163
5 Minus 3X annual cost		\$ 27,000
6 Minus third-party funds (ex. Health insurance, Medicaid) – if none indicate NA		\$ 2,500
TOTAL Allowable GHCF (Line 4 minus line 5 and 6)		\$ 89,663

(2)

Include  
primary  
and  
secondary  
disabilities  
- draw  
directly  
from the  
IEP

(3)

Enter the  
amount for  
each  
category of  
expense  
from page 2  
onward,  
here.

All invoices for any contractual or other services must be included with the grant application.



Page 2:  
List of  
services and  
detailed  
descriptions

These  
categories  
should help to  
focus your  
thoughts and  
exploration of  
costs.

COST WORKSHEET SUMMARY Use this worksheet to itemize the totals recorded on page 1 of the GHCF application. All services calculated for cost must be included in the student's IEP.		
Category of Expenditure	Description of Service Provided	Amount
1) Special Ed Services	One to One Special Education Teacher – 5 hours daily w/period of planning (190 days - Full time salary & benefits)	\$56,000
(Ex- Teacher Costs, Materials/Supplies specific to the child)	One to One behavior aide- 6.5 hours daily (Full time salary& benefits for 180 days)	\$22,500
	Assistive technology communication device ( list product names - Dynovox)	\$8,000
	Contracted Speech Therapist – 1 hour daily X 180days +2hours for May and June(12 hours) = 192 X \$60/hour	\$11,520
Total	Transfer this amount to Line 1 – Special Ed Services – Page 1	\$98,020
2) Related Services		
(Ex- Transportation, OT, PT	Contracted OT – 1 hour weekly (\$45/hour X 35 weeks) + 6 weeks for May and June	\$1,575 \$ 270
Nursing Services)	Nursing services – temperature monitored twice daily/seizure medication routine and on call for administering emergency procedures for seizures lasting more than 3 minutes (School nurse regular duties for former but due to frequency of seizures assess 10% of salary of \$80,000=1/2 day per week).	\$8000
Total	Transfer this amount to Line 2- Related Services – Page 1	\$14,543
3) Other Costs	Behavior specialist conducting FBA (30 hours)– updates 1 day(8 hours) monthly – coordinates home/school management (Hourly teacher rate is \$50/hour for 7.5 hour day=10 months X 8 hours monthly= 80+30+12 hours for May and June = 122 X \$50).	\$6,100
(Ex-Consultations, Training	Staff and parent training – for implementation of management (10 hours). Above specialist conducts training for parents, teacher, aide, and bus staff within monthly time.	\$500
Costs, Independent Evals)	Purchase of training materials specific for this child.	
Total	Transfer this amount to Line 3 – Other Costs – Page 1	\$6,600
6) Third party funds	System bills Medicaid for OT, Speech and Nursing services	\$2,500
(Ex- Health Ins., Medicaid)		
Total	Transfer this amount to Line 6- Third Party Costs - Page 1	\$2,500

Accurately  
report the cost  
of services by  
dividing the  
total by number  
of students  
served at that  
time where  
appropriate

We will want to  
see detailed  
reports that  
show that the  
LEA actually  
paid the  
expenses  
reported

1. Describe what efforts have been made to help the student be successful prior to the expensive intervention(s)

INITIAL APPLICATION Complete the following information to describe the prior programs, interventions and duration of interventions in which the student has participated.		
DESCRIBE PRIOR SPECIAL ED SERVICES	INTERVENTION (S)	DURATION OF INTERVENTION
Following the head injury the student was served in a hospital homebound model.	Eligibility determination and IEP developed – providing individualized services for 2 hours a day	3 months - Oct. 2013 - Jan. 2014
Served half day in a special education class with a one to one para/ speech and OT provided. Seizure activity increased and health plan involving nurse was developed.	Small class with individualized instruction and supports provided by one on one para. Bus aide assigned to student during transportation times. Behavior specialist completed FBA and a BIP was developed.	3 months Jan - March 2014
One to One Extended School Year Services	Extended School year services provided one to one in the home – behavioral deterioration and increase in seizures	July 2013 and June 2014

Describe the unique features of the child determined to be “high need.” (Include developmental, cognitive, social emotional and medical factors)
<p>The student was served in general education until the Summer of 2012. At that time he sustained a head injury resulting in significant trauma to the brain. As the district worked with the family and established eligibility for the student under the areas of Traumatic Brain Injury and Speech and Language, services were first provided in a hospital homebound service and then a small self contained special education classroom. Once the student was transitioned to a self contained class significant behavioral issues occurred. Even with one on one supports, completion of an FBA and a BIP the behavior s were not successfully managed in the small group setting. Safety of this student, staff and peers became an issue in the classroom and on the school bus. One to one instruction in a separate class provided the environment for a successful implementation of the BIP. The student also experienced an increase in seizure activity requiring nursing services during this time. Due to the severity of the head injury, frequent seizure activity, limited communication, significant aggressive and destructive behavior the student requires a high level of individualized programming aimed at eventual reintegration into a less restrictive setting. The student additionally requires transportation on a separate bus with 5 additional students and an aide in order to be safely transported to and from school.</p>

2. Describe in as much detail as possible why the child should be considered “high need”



The goal of these plans should be to intervene successfully and bring about a reduction in such intensive intervention in the future.

<b>Will the plan result in a reduction of services in the future?</b> If yes, describe the anticipated outcomes for the child as a result of this intensive intervention. If no, describe the chronic nature of the child's disability.
Yes, this plan is designed to support the development of the student's communication, academic and behavioral skill sets required for re-integration into a less restrictive environment. At the April IEP Review the Team will review the rate of progress on the individualized goals and make a recommendation for modifications to the program for the upcoming year. Information from medical providers will be considered to assess the stabilization of the seizure activity. It is expected that the high level of service can be modified in the 2013-2014 school year.

<b>Describe any specialized training to implement the plan for the high cost child?</b> (Include training for staff, as well as, parents or caregivers)
The behavior specialist will play a major role in the data collection and expertise required to develop a behavior management protocol to be followed in the school setting, on the bus and at home. Once the IEP Team establishes the protocol /development of the BIP. Teaching staff, SLP, OT, nurse, bus driver, bus aide and parents will receive training. The SLP will work with all school system providers, behavior specialist and parents regarding the communication system and use of assistive technology device. Additional training as needed resulting from changes in the instructional, communication or behavioral strategies will be provided.

Again, pulling from the IEP, describe any specialized training that is involved in the high needs plan.



# Residential and Reintegration Grant

# Purpose of Residential and Reintegration Grant

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Funds assist LEAs with full or partial funding for a high cost placement of a student with disabilities to a private residential program or reintegration back from a residential program.





# Priorities for Funding State Rule 160-4-7-.18

1. Children with profound and severe disabilities requiring residential services who are wards of the State.
2. Children with profound and severe disabilities requiring reintegration from a residential program.
3. Children with profound disabilities who need residential services.
4. Children with severe disabilities who need residential services.

## Parameters for Residential and Reintegration Application

- A full continuum of services has been considered before a residential placement is considered.
- Only direct special education costs, related services, and room and board for the current fiscal year (July 1 through June 30).
- Minimum amount is \$30,000.
- Documentation submitted with the application.

# Parameters for a Private Residential School

- A private residential school must:
  - Comply with the student's IEP and Georgia Rules governing special education
  - Be on the approved state list
- An LEA must first consider an in-state private residential school before an out of state school
- A private out of state school must meet the requirements of the state in which it is located

# Proper Submission of Residential and Reintegration Grant Application

Available on Special Ed  
Budget website

Application Window  
January 1 – March 1

Superintendent must  
sign application

GRANT FOR RESIDENTIAL AND REINTEGRATION SERVICES Georgia Department of Education Division for Special Education Services and Supports	
SYSTEM: _____ School Year: 201 - 201	
System Contact: _____	Phone: _____
	Email: _____
<input type="checkbox"/> Initial	<input type="checkbox"/> Parent Custody
<input type="checkbox"/> Continuation	<input type="checkbox"/> Ward of the State
Student's Name: _____	Date of Birth: _____
The Student's Primary Disability: _____	
Father's/Guardian's/Surrogate's Full Name: _____	Mother's/Guardian's/Surrogate's Full Name: _____
Home Address: _____	
(Street)	(City/State) (Zip) (Phone)
Private Residential School Name: _____	Phone: _____
For an out of state school: Submit documentation that school is on the approved list for the state in which it resides.	
Address: _____	
Contact Person: _____	
Provide the specific cost breakdown for services provided by the private residential school. Total cost of over \$30,000 should be used as the minimum to be considered in the application. <b>Invoices required.</b>	
Special Education Services	\$ _____ day/month
Related Services	\$ _____ day/month
Room and Board	\$ _____ day/month
TOTAL COST OF RESIDENTIAL PLACEMENT	\$ _____ day/month
\$ _____/Month X ____ Months OR \$ _____/Day X ____ Days	\$ _____
Need actual months or days served for educational program only	

# Proper Submission of Residential and Reintegration Grant Application (cont.)

**Resources available on GaDOE website at:**

*Special Education Services and Supports* → *Budgets, Grants and Consolidated Application* → *State Grant for Residential and Reintegration Services*

## Resources for Guidance

- High Cost and Residential and Reintegration Grant Submission
  - High Cost and Residential and Reintegration Grant Submission PowerPoint
- FY18 IDEA Budgeting Best Practices and Requirements
- Time and Effort Reporting Powerpoint
- Financial Management Complaints
- Equitable Services for Private and Home School Students Webinar
- FY20 Cross-Functional Monitoring Guidance Document
- FY20 IDEA Fiscal Monitoring Checklist for GNETS
- FY20 IDEA Fiscal Monitoring Checklist for LEAs
- Federal Programs Monitoring

## Federal Grant for High Cost Fund

- Georgia's High Cost Grant Submission Training Webinar
- Georgia's High Cost Grant Online Submission Manual
- Georgia's Plan for High Cost
- Grant for High Cost Funds - Sample Application
- Grant for High Cost Funds Q&A

## State Grant for Residential and Reintegration Services

- Grant for Residential and Reintegration Services Application
- Grant for Residential and Reintegration Services Instructions

# Proper Submission of Residential and Reintegration Grant Application (cont.)

- Use the Application Instructions and Checklist located on the Special Education website
- Complete all sections of the application
  - Make a notation of N/A or None
- Include ALL required documentation
- Submit the application between January 1<sup>st</sup> – March 1<sup>st</sup>



# Proper Submission of Residential and Reintegration Grant Application (cont.)

- Submit application by deadline in one of two ways:
  - Electronically via the **GaDOE portal email system** to designated Budget Liaison
  - OR
  - Mail to  
Georgia Department of Education  
Division for Special Education Services and Supports  
1870 Twin Towers East  
Atlanta, Georgia 30334 - 5040

# Provided Documentation for Residential and Reintegration Grant

- Current eligibility report
- IEPs covering the span of the current fiscal year
- Reintegration plan
- Actual monthly invoices from the private residential school
- Documentation of approved out of state school



**GRANT FOR RESIDENTIAL AND REINTEGRATION SERVICES**  
 Georgia Department of Education  
 Division for Special Education Services and Supports

<b>SYSTEM:</b>		<b>School Year: 201 - 201</b>	
System Contact:		Phone:	
		Email:	
<input type="checkbox"/> Initial	<input type="checkbox"/> Parent Custody		
<input type="checkbox"/> Continuation	<input type="checkbox"/> Ward of the State		
Student's Name:		Date of Birth:	
The Student's Primary Disability:			
Father's/Guardian's/Surrogate's Full Name:		Mother's/Guardian's/Surrogate's Full Name:	
Home Address:			
(Street)		(City/State) (Zip) (Phone)	
Private Residential School Name:		Phone:	
For an out of state school: Submit documentation that school is on the approved list for the state in which it resides.			
Address:			
Contact Person:			
Provide the specific cost breakdown for services provided by the private residential school. Total cost of over \$30,000 should be used as the minimum to be considered in the application. Invoices required.			
Special Education Services	\$	day/month	
Related Services	\$	day/month	
Room and Board	\$	day/month	
<b>TOTAL COST OF RESIDENTIAL PLACEMENT</b>	\$	day/month	
\$ _____/Month X _____ Months OR \$ _____/Day X _____ Days Need actual months or days served for educational program only		\$	
List source and amount of third-party funds (ex. Health insurance, Medicaid) to be utilized or indicate <b>NONE</b> if no third party funds used:			
Source:		Amount: \$	
BEGINNING DATE:		ENDING DATE:	
NOTE: These dates are necessary for calculating total cost of service and should be between July 1 and June 30.			

Application consists of two parts:

1. Services provided
2. Justification for the decision to place the student in a residential facility

Review any and all past IEPs and record past interventions in these locations.

Address every box completely to justify IEP team decision to place residentially.

INITIAL APPLICATION Complete the following information for initial residential placement. Describe the programs, intervention, and length of time in which the student participated. (Refer to Instructions for descriptions of categories below)		
PROGRAM SERVICES	INTERVENTION	LENGTH OF PLACEMENT (S)
Public School Programs:		
Regional Programs/ Shared Services:		
State-supported Programs:		
CONTINUATION APPLICATION Complete the following information for continuing residential placement. Describe the programs and length of time in which the student previously participated. Report the date of the student's initial placement into a residential program.		
In State:		
Out of State:		
Date of initial residential placement:		
The student cannot be appropriately served in a: <input type="checkbox"/> school system <input type="checkbox"/> regional program, or <input type="checkbox"/> state-supported program. All three must be checked before a grant for a private residential program will be considered.		
If the residential program is out of state, describe your efforts to find an in state program.		
Describe the specific needs of the student for placement in a private residential program. This must be documented in the placement minutes and/or the IEP.		
List the date(s) the system visited the residential program:		

This discussion should be drawn from the IEP and be detailed and specific

EXTENDED SCHOOL YEAR	
Complete this section if the IEP dates for services exceed nine school months or 180 days.	
1. Describe the need for extended year funding beyond 180 days. Attach a copy of the IEP placement minutes developed to meet the student's extended year needs.	
2. Provide an explanation of how the requested days will meet the identified needs in the private residential school.	

<p align="center"><b>REINTEGRATION PLAN</b>  <b>Required for ALL students</b>          Plan for transitioning the student into a less restrictive environment.</p>
--

Date Developed:                      Review Date(s):                     

<p>1. Describe the plan for moving the student toward a less restrictive, in-community or day program. (Include the involvement of other public and/or private agencies in this transition.)</p>
<p>2. Describe the specific timeline for this plan.</p>
<p>3. Describe the plan for assisting the student's parents in the development of the necessary skills for this transition.</p>

**Note:**  
 A reintegration plan is required here and should also be spelled out carefully in the IEP.

## KEY INFORMATION:

The Superintendent must complete the assurance statement.

### ASSURANCE STATEMENT GRANT FOR RESIDENTIAL AND REINTEGRATION SERVICES

IF THIS GRANT APPLICATION IS NOT APPROVED, I UNDERSTAND THAT THE SYSTEM IS RESPONSIBLE FOR ALL THE COSTS FOR SERVICES STATED IN THE STUDENT'S IEP.

\_\_\_\_\_  
Signature of Superintendent

\_\_\_\_\_  
Date

\_\_\_\_\_  
School System

# Final Tips for High Cost Fund and Residential and Reintegration Grants





**Start Early and  
Plan Ahead!**

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# Please be Mindful...

- Both grants are a bonus for an LEA
- Do not expect reimbursement for the whole amount of the application
- Grant period – July 1<sup>st</sup> through June 30<sup>th</sup>
- Funds must be used by **June 30<sup>th</sup>** of the current fiscal year
- Notified via the Email Blast when the board item has been approved
- LEAs who receive a High Cost Grant will receive a Grant Award Notification

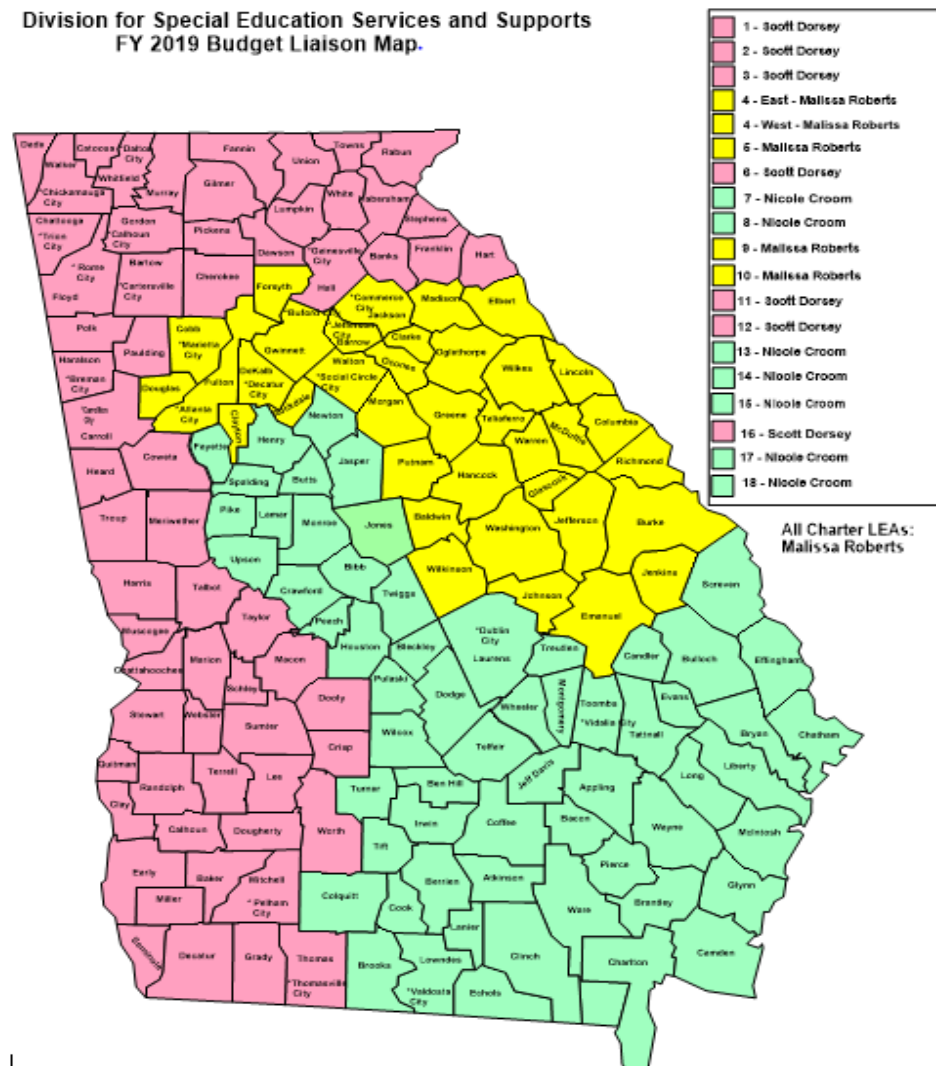


## Please be Mindful... (cont.)

- Documentation of expenses already incurred and to-be incurred must be fully supported by evidence
- Funds are granted for current year expenditures and must be used to reimburse an LEA in those same categories (or Fund Sources)
- Funds provided for reimbursement through these grants will come in a separate budget all together

# Budget Liaison Map

Division for Special Education Services and Supports  
FY 2019 Budget Liaison Map.





Questions?

# Contact Us

*We're Here to Help!*

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**Malissa Roberts**

*Program Specialist*

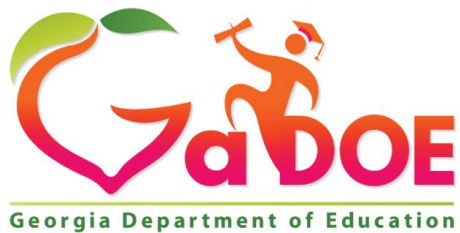
**404.656.3067**

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[www.gadoe.org](http://www.gadoe.org)

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 youtube.com/georgiadeptofed



**EDUCATING  
GEORGIA'S FUTURE**

