

Attachment IV
Rates for Preschool (4410) Evaluations
For the Period July 1, 2010 - June 30, 2011
County Alphabetical Listing
(3 pages)

County	Psychological		Social History Evaluation		Physician Evaluation (see note 1)		Non-Physician Evaluation (see note 2)	
	ENGLISH	BILINGUAL	ENGLISH	BILINGUAL	ENGLISH	BILINGUAL	ENGLISH	BILINGUAL
ALBANY	252	327	145	187	187	230	166	209
ALLEGANY	252	329	150	196	187	236	172	209
BRONX	321	419	192	251	241	300	214	268
BROOME	262	344	155	203	199	246	177	219
CATTARAUGUS	252	327	145	187	187	230	166	209
CAYUGA	244	319	147	189	182	225	166	204
CHAUTAUQUA	252	327	145	187	187	230	166	209
CHEMUNG	252	329	150	196	187	236	172	209
CHENANGO	300	388	172	223	219	274	199	246
CLINTON	252	329	150	196	187	236	172	209
COLUMBIA	252	327	145	187	187	230	166	209
CORTLAND	244	319	147	189	182	225	166	204
DELAWARE	300	388	172	223	219	274	199	246
DUTCHESS	284	368	166	215	209	262	187	236
ERIE	252	327	145	187	187	230	166	209
ESSEX	230	301	139	181	177	219	155	192
FRANKLIN	252	329	150	196	187	236	172	209
FULTON	252	327	145	187	187	230	166	209
GENESEE	252	329	150	196	187	236	172	209
GREENE	252	327	145	187	187	230	166	209

Note 1:

The physician evaluation rate must be used for the following type of evaluations: physical examination, psychiatric, neurological, psychiatric, orthopedic, optometric and any similar evaluation requiring the services of a licensed medical professional as required by the Committee on Preschool Special Education.

Note 2:

The non-physician evaluation rate must be used for the following types of evaluations: audiological, speech and language, physical therapy, occupational therapy, educational evaluation or any other similar evaluation required by the Committee on Preschool Special Education that can be performed by a non-physician appropriately licensed or certified.

Attachment IV
Rates for Preschool (4410) Evaluations
For the Period July 1, 2010 - June 30, 2011
County Alphabetical Listing
(3 pages)

County	Psychological		Social History Evaluation		Physician Evaluation (see note 1)		Non-Physician Evaluation (see note 2)	
	ENGLISH	BILINGUAL	ENGLISH	BILINGUAL	ENGLISH	BILINGUAL	ENGLISH	BILINGUAL
HAMILTON	252	329	150	196	187	236	172	209
HERKIMER	241	316	145	187	182	225	161	204
JEFFERSON	241	316	145	187	182	225	161	204
KINGS	321	419	192	251	241	300	214	268
LEWIS	241	316	145	187	182	225	161	204
LIVINGSTON	252	329	145	190	187	230	166	209
MADISON	252	327	150	192	187	236	166	209
MONROE	252	329	145	190	187	230	166	209
MONTGOMERY	252	327	145	187	187	230	166	209
NASSAU	306	396	177	230	225	279	204	252
NEW YORK	321	419	192	251	241	300	214	268
NIAGARA	252	327	145	187	187	230	166	209
ONEIDA	241	316	145	187	182	225	161	204
ONONDAGA	252	327	150	192	187	236	166	209
ONTARIO	252	329	145	190	187	230	166	209
ORANGE	300	388	172	223	219	274	199	246
ORLEANS	252	327	145	187	187	230	166	209
OSWEGO	241	316	145	187	182	225	161	204
OTSEGO	300	388	172	223	219	274	199	246
PUTNAM	284	368	166	215	209	262	187	236
QUEENS	321	419	192	251	241	300	214	268

Note 1:

The physician evaluation rate must be used for the following type of evaluations: physical examination, psychiatric, neurological, psychiatric, orthopedic, optometric and any similar evaluation requiring the services of a licensed medical professional as required by the Committee on Preschool Special Education.

Note 2:

The non-physician evaluation rate must be used for the following types of evaluations: audiological, speech and language, physical therapy, occupational therapy, educational evaluation or any other similar evaluation required by the Committee on Preschool Special Education that can be performed by a non-physician appropriately licensed or certified.

Attachment IV
 Rates for Preschool (4410) Evaluations
 For the Period July 1, 2010 - June 30, 2011
 County Alphabetical Listing
 (3 pages)

County	Psychological		Social History Evaluation		Physician Evaluation (see note 1)		Non-Physician Evaluation (see note 2)	
	ENGLISH	BILINGUAL	ENGLISH	BILINGUAL	ENGLISH	BILINGUAL	ENGLISH	BILINGUAL
RENSSELAER	252	327	145	187	187	230	166	209
RICHMOND	321	419	192	251	241	300	214	268
ROCKLAND	306	396	177	230	225	284	204	252
SARATOGA	252	327	145	187	187	230	166	209
SCHENECTADY	252	327	145	187	187	230	166	209
SCHOHARIE	252	327	145	187	187	230	166	209
SCHUYLER	252	329	150	196	187	236	172	209
SENECA	244	319	147	189	182	225	166	204
STEUBEN	252	329	150	196	187	236	172	209
ST. LAWRENCE	252	329	150	196	187	236	172	209
SUFFOLK	306	396	177	230	225	279	204	252
SULLIVAN	300	388	172	223	219	274	199	246
TIOGA	262	344	155	203	199	246	177	219
TOMPKINS	244	319	147	189	182	225	166	204
ULSTER	300	388	172	223	219	274	199	246
WARREN	230	301	139	181	177	219	155	192
WASHINGTON	230	301	139	181	177	219	155	192
WAYNE	252	329	145	190	187	230	166	209
WESTCHESTER	306	396	177	230	225	284	204	252
WYOMING	252	329	150	196	187	236	172	209
YATES	244	319	147	189	182	225	166	204

Note 1:

The physician evaluation rate must be used for the following type of evaluations: physical examination, psychiatric, neurological, psychiatric, orthopedic, optometric and any similar evaluation requiring the services of a licensed medical professional as required by the Committee on Preschool Special Education.

Note 2:

The non-physician evaluation rate must be used for the following types of evaluations: audiological, speech and language, physical therapy, occupational therapy, educational evaluation or any other similar evaluation required by the Committee on Preschool Special Education that can be performed by a non-physician appropriately licensed or certified.