



**System to Track and Account for Children (STAC) and Medicaid Unit**

**Sheila Costa, Director**

89 Washington Avenue • Room 25 EB • Albany, NY 12234

Tel: (518) 474-7116 • FAX: (518) 402-5047

STAC E-mail: [omsstac@nysed.gov](mailto:omsstac@nysed.gov)

Medicaid E-mail: [medined@nysed.gov](mailto:medined@nysed.gov)

STAC Website: <http://www.oms.nysed.gov/stac>

Medicaid Website: <http://www.oms.nysed.gov/medicaid>

**To:** County Chief Fiscal Officer

**From:** Nicholas Thayer, Education Finance Specialist 2

**Date:** August 19, 2024

**Subject:** Automated Voucher Listing (AVL) for Claims Pursuant to Section 4410 of the Education Law

The following is a list of claim documents for reimbursement of services provided to preschoolers under § 4410 of Education Law. The school years listed are closed due to Statute of Limitation, thus this release only contains records made available as a result of a change in program rate. Included in this release are:

- 2014-15 AVL #24 - § 4410 Programs and Services -- **Due September 06, 2024**
- 2015-16 AVL #23 - § 4410 Programs and Services -- **Due September 06, 2024**
- 2016-17 AVL #21 - § 4410 Programs and Services -- **Due September 06, 2024**
- 2017-18 AVL #19 - § 4410 Programs and Services -- **Due September 06, 2024**
- 2018-19 AVL #17 - § 4410 Programs and Services -- **Due September 06, 2024**
- 2019-20 AVL #15 - § 4410 Programs and Services -- **Due September 06, 2024**
- 2020-21 AVL #13 - § 4410 Programs and Services -- **Due September 06, 2024**

**Note: Not every County will receive an AVL for each school year listed.**

The AVLs for “Programs and Services” are electronic AVLs (either online or File Transfer Protocol (FTP)). A printable version is available through the SED File Transfer Manager (FTM) and may be used as a guide in the completion of your electronic AVL.

Upon completion of an AVL, a **separate email notification** for each AVL is to be sent advising this office that the AVL is complete and ready for processing. Emails should be addressed as follows:

TO: [OMSSTAC@nysed.gov](mailto:OMSSTAC@nysed.gov)

Subject: AVL information submitted (ex. 2020-21 AVL #13)

The body of each email should include:

- Name of County
- AVL information submitted (ex. 2020-21 AVL #13)
- Total amount claimed (at 100%) before SED Adjustments

Changes made after submission and notification to the STAC and Medicaid Unit will not be processed. Counties submitting AVLs online will be notified via e-mail **only** in the event of a problem. If we do not notify you within a week, assume that the online AVL has been successfully processed and submit your electronic signature. Counties submitting AVLs via FTP process should wait until they receive notification that their FTP AVL file has been successfully processed before submitting an electronic signature.

**ELECTRONIC SIGNATURES are required for all AVLs whether submitted online or via the FTP process.** Payments will not be issued until the STAC and Medicaid Unit has received a valid and complete electronic signature.

If you have questions regarding the AVL process, please contact the STAC and Medicaid Unit at (518) 474-7116.

**Important Reminder:** Only costs which have been paid by the County may be submitted for reimbursement.