



# County of Albany

Harold L. Joyce  
Albany County Office  
Building  
112 State Street - Albany,  
NY 12207

## Legislation Text

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**File #:** TMP-4596, **Version:** 1

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### REQUEST FOR LEGISLATIVE ACTION

**Description (e.g., Contract Authorization for Information Services):**

ACDMH requests contract authorization for Family & Children Services DBA Capital Counseling

Date: September 27, 2023  
Submitted By: Mark Gleason  
Department: Mental Health  
Title: Budget Analyst  
Phone: 518-447-3014  
Department Rep.  
Attending Meeting: Dr. Stephen Giordano, Director

**Purpose of Request:**

- ☐ Adopting of Local Law
- ☐ Amendment of Prior Legislation
- ☐ Approval/Adoption of Plan/Procedure
- ☐ Bond Approval
- ☐ Budget Amendment
- ☒ Contract Authorization
- ☐ Countywide Services
- ☐ Environmental Impact/SEQR
- ☐ Home Rule Request
- ☐ Property Conveyance
- ☐ Other: (state if not listed) Click or tap here to enter text.

**CONCERNING BUDGET AMENDMENTS**

**Increase/decrease category (choose all that apply):**

- ☐ Contractual
- ☐ Equipment
- ☐ Fringe
- ☐ Personnel
- ☐ Personnel Non-Individual

☐ Revenue

Increase Account/Line No.: Click or tap here to enter text.

Source of Funds: Click or tap here to enter text.

Title Change: Click or tap here to enter text.

### **CONCERNING CONTRACT AUTHORIZATIONS**

#### **Type of Contract:**

☐ Change Order/Contract Amendment

☐ Purchase (Equipment/Supplies)

☐ Lease (Equipment/Supplies)

☐ Requirements

☐ Professional Services

☐ Education/Training

☐ Grant

Choose an item.

Submission Date Deadline Click or tap to enter a date.

☐ Settlement of a Claim

☐ Release of Liability

☒ Other: (state if not listed) Pass through funding of NYS OASAS funds

#### **Contract Terms/Conditions:**

Party (Name/address):

Capital Counseling 650 Warren St. Albany NY 12208

Additional Parties (Names/addresses):

Click or tap here to enter text.

Amount/Raise Schedule/Fee: \$276,761

Scope of Services: Provides compulsive and problem gambling treatment

Bond Res. No.: Click or tap here to enter text.

Date of Adoption: Click or tap here to enter text.

### **CONCERNING ALL REQUESTS**

Mandated Program/Service: Yes ☐ No ☒

If Mandated Cite Authority: Click or tap here to enter text.

Is there a Fiscal Impact: Yes ☒ No ☐

Anticipated in Current Budget: Yes ☒ No ☐

County Budget Accounts:

Revenue Account and Line: Narcotics Addiction Control A4230.03486  
Revenue Amount: \$276,761

Appropriation Account and Line: Family & Children Services A94230.44446  
Appropriation Amount: \$276,761

Source of Funding - (Percentages)

Federal: Click or tap here to enter text.  
State: 100%  
County: Click or tap here to enter text.  
Local: Click or tap here to enter text.

Term

Term: (Start and end date) 1/1/2024-12/31/2024  
Length of Contract: 12 Months

Impact on Pending Litigation

Yes ☐ No ☒  
If yes, explain: Click or tap here to enter text.

Previous requests for Identical or Similar Action:

Resolution/Law Number: 447  
Date of Adoption: 11/14/2022

**Justification:** (state briefly why legislative action is requested)

The Department of Mental Health requests permission to enter into a contract in 2024 with Capital Counseling for the provision of compulsive and problem gambling treatment services to Albany County citizens. NYS Office of Addiction Services and Supports (OASAS) shall provide pass through funding to Capital Counseling through Albany County Department of Mental Health for \$276,761. This appropriation is anticipated in the 2024 budget. There is no County share associated with this contract.