

County of Albany

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

Legislation Text

File #: TMP-6475, Version: 1

REQUEST FOR LEGISLATIVE ACTION

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

Contract Authorization with Behavioral Health Services North, Inc. for the Provision of Residential Foster Care

Date: April 1, 2025

Department: Children, Youth and Families

Attending Meeting: Moira Manning Submitted By: Scott McNelis

Title: Contract Administrator

Phone: 7306

Purpose of Request: Contract Authorization

CONTRACT TERMS/CONDITIONS:

Party Names and Addresses:

Behavioral Health Services North, Inc.

22 US Oval, Suite 218 Plattsburgh, NY 12903

Term: (Start/end date or duration) 1/1/2025 - 12/31/2026 Amount/Raise Schedule/Fee: Maximum State Aid Rate

BUDGET INFORMATION:

Is there a Fiscal Impact:

Yes ☒ No ☐

Anticipated in Budget:

Yes ☒ No ☐

Spreadsheet attached: Yes ☐ No ☒

Source of Funding - (Percentages)

Federal: 40 County: 10 State: 50 Local: 0

County Budget Accounts:

Revenue Account and Line: AA 6119 3619/3661

Revenue Amount: Enter text.

Appropriation Account and Line: AA 6119 44405

Appropriation Amount: Maximum State Aid Rate

File #: TMP-6475,	Version:	1
-------------------	----------	---

ADDITIONAL INFORMATION:

Mandated Program/Service: Yes ⊠ No □

If Mandated, Cite Authority: NYS Social Services Law 3714 and 383 Family Court Act

1051, 352.2 and 756

Request for Bids / Proposals:

Competitive Bidding Exempt: Yes □ No ☒
of Response(s): Enter text.
of MWBE: Enter text.
of Veteran Business: Enter text.
Bond Resolution No.: Enter text.
Apprenticeship Program Yes □ No ☒

Previous requests for Identical or Similar Action:

Resolution/Law Number and Date: 18-504, 20-387, 22-433, 24-598, 25-20

11/13/18, 11/9/20, 11/14/22, 10/15/24, 2/10/25

DESCRIPTION OF REQUEST: (state briefly why legislative action is requested)

See Attached Justification