

County of Albany

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

Legislation Text

File #: TMP-2624, Version: 1		
REQUEST FOR LEGISLATIVE ACTION		
Description (e.g., Contract Authorizat Contract Authorization to Accept Early In New York State Department of Health	ion for Information Services): ntervention Administration Reimbursement from	
Date: Submitted By: Department: Title: Phone: Department Rep. Attending Meeting:	July 27, 2021 Scott McNelis Children, Youth and Families Contract Administrator 7306 Moira Manning, Commissioner	
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 a ☐ Contractual ☐ Equipment ☐ Fringe ☐ Personnel ☐ Personnel Non-Individual	all that apply):	

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☐ Revenue	
Increase Account/Line No.: Source of Funds: Title Change:	Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.
CONCERNING CONTRACT AUTHORI	<u>ZATIONS</u>
Type of Contract: ☐ Change Order/Contract Amendment ☐ Purchase (Equipment/Supplies) ☐ Lease (Equipment/Supplies) ☐ Requirements ☐ Professional Services ☐ Education/Training ☒ Grant	or tap to enter a date. Click or tap here to enter text.
Contract Terms/Conditions:	Official to the text.
Party (Name/address): NYSDOH Division of Family Health, Fiscal Unit, ESP Corning Tower - Room 878, Albany, NY 12237-0657 Additional Parties (Names/addresses):	
Click or tap here to enter text. Amount/Raise Schedule/Fee: Scope of Services: Reimbursement for Intervention Program	\$163,772 administrative costs associated with the Early
Bond Res. No.: Date of Adoption:	Click or tap here to enter text. Click or tap here to enter text.
CONCERNING ALL REQUESTS	
Mandated Program/Service: If Mandated Cite Authority:	Yes ☑ No ☐ Public Health Law Title II-A of Article 25

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Is there a Fiscal Impact:

Yes ☒ No ☐

Anticipated in Current Budget:

Yes ☒ No ☐

County Budget Accounts:

Revenue Account and Line: AA4059 03449
Revenue Amount: \$163,772

Appropriation Account and Line: AA4059 1. (See attached for specific list)

Appropriation Amount: Line(s) 1- 62,906 / 2- 39,779 / 8- 61,087

Source of Funding - (Percentages)

Federal: 0
State: 100
County: 0

Local: Click or tap here to enter text.

<u>Term</u>

Term: (Start and end date) 10/1/2021 - 09/30/2022

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: 21-19, 19-87, 17-39, 15-310, 15-83, 14-250

Date of Adoption: 2/8/21, 311-19, 2/13/17, 8/10/15, 3/9/15, 7/14/14

<u>Justification</u>: (state briefly why legislative action is requested)

Please see attached