

County Allo Year - 2024 Co

Provider FS/Program/CBR Index/Team Type	Local Contract Number		Slots	Beds	Units of Service	Total Gross Expenses
11620 - Capital Area Peer Services						
Totals For 11620 - Capital Area Peer Services	-	0.00	0.00	9	3,285	\$703,809

cation Tracker Detail Report unty - Albany (01) Letter Type - DMH mber/Date: 9 - 09/20/2024 12:41:37 PM

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<u>LGU</u> <u>Share</u>	<u>Voluntary</u> <u>Share</u>	SSI Amount	Medicaid Amount	Other Revenue	<u>Carry</u> <u>Over</u> <u>Revenue</u>	<u>Non</u> Funded	One Time Adjustment	<u>Total</u> State Air
\$0	\$0	\$93,525	\$0	\$112,204	\$0	\$0	\$0	\$498,08

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Annualized d Value

80 \$0