

County of Albany

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

Legislation Text

File #: TMP-4606, Version: 1 REQUEST FOR LEGISLATIVE ACTION Description (e.g., Contract Authorization for Information Services): ACDMH requests contract authorization for Senior Hope					
			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/Prod	cedure				
☐ 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 AMENI	<u>DMENTS</u>				
Increase/decrease category (ch	oose all that apply):				
□ Contractual					
□ Equipment					
☐ Fringe					
☐ Personnel					

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☐ Personnel Non-Individual ☐ 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 ☐ Choose an item. ☐ Submission Date Deadline Click ☐ Settlement of a Claim ☐ Release of Liability ☒ Other: (state if not listed)	or tap to enter a date. Pass through funding of NYS OASAS funds
Contract Terms/Conditions:	
Party (Name/address): Senior Hope 650 Warren Street Albany Additional Parties (Names/addresses):	NY 12208
Click or tap here to enter text.	
Amount/Raise Schedule/Fee: Scope of Services: Albany County citizens age 50 and older with su	\$255,586 For the provision of medically supervised outpatient treatment to bstance abuse and narcotic addiction related issues.
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 ⊠ Click or tap here to enter text.
Is there a Fiscal Impact: Anticipated in Current Budget:	Yes ⊠ No □ Yes ⊠ No □

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County Budget Accounts:

Revenue Account and Line: Narcotics Addiction Control A4230.03486

Revenue Amount: \$255,586

Appropriation Account and Line: Senior Hope A94230.44433

Appropriation Amount: \$255,586

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.

<u>Term</u>

Term: (Start and end date) 1/1/24-12/31/24
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: 450

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 Senior Hope Counseling for the provision of medically supervised outpatient treatment to Albany County citizens age 50 and older with substance abuse and narcotic addiction related issues. NYS Office of Addiction Services and Supports (OASAS) shall provide pass through funding to Senior Hope through Albany County Department of Mental Health for \$255,586. This appropriation is anticipated in the 2024 budget. There is no County share associated with this contract