

County of Albany

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

Legislation Text

File #: TMP-3424, Version: 1			
REQUEST FOR LEGISLATIVE ACTION	N		
Description (e.g., Contract Authorization for Information Services): Authorization to accept grant funding from NYSOFA for the Health Insurance Information Counseling and Assistance Program (HIICAP)			
Date:	6/16/2022		
Submitted By:	Patrick Dillon		
Department:	Aging		
Title:	Contract Administrator		
Phone:	518 447 7733		
Department Rep.			
Attending Meeting:	Deborah C. Riitano, 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 AMENDMENT	<u>rs</u>		
Increase/decrease category (choose a ☐ Contractual ☐ Equipment ☐ Fringe ☐ Personnel	all that apply):		

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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 AUTHOR	ZATIONS
Type of Contract: ☐ Change Order/Contract Amendment ☐ Purchase (Equipment/Supplies) ☐ Lease (Equipment/Supplies) ☐ Requirements ☐ Professional Services ☐ Education/Training ☒ Grant	
Contract Terms/Conditions:	оном стану постану пост
Party (Name/address): New York State Office for Aging Two Empire State Plaza Albany, New York 12223-1251 Additional Parties (Names/addresses): Click or tap here to enter text.	
Amount/Raise Schedule/Fee: Scope of Services: education and counseling to older adults 60 ye	\$33,637.00 The provision to provide comprehensive health insurance and Medicardars and older residing in Albany County.
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.

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Is there a Fiscal Impact:	Yes ⊠ No □	
Anticipated in Current Budget:	Yes ⊠ No □	
County Budget Accounts:		
Revenue Account and Line:	A6772.04779	
Revenue Amount:	\$33,637.00	
Appropriation Account and Line:	A6772.44046	
Appropriation Amount:	\$33,637.00	
Source of Funding - (Percentages)		
Federal:	100%	
State:	Click or tap here to enter text.	
County:		
Local:	Click or tap here to enter text.	
<u>Term</u>		
Term: (Start and end date)	4/1/2022 - 3/31/2023	
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 Sir	milar Action:	
Resolution/Law Number:	348	

Justification: (state briefly why legislative action is requested)

Date of Adoption:

To accept the Health Insurance Information Counseling and Assistance Program (HIICAP) grant from the New York State Office for Aging. This grant funding provides assistance and guidance in understanding the benefits available under Health Insurance Plans for older adults 60 years and older and their caregivers residing in Albany County. HIICAP services also include health insurance counseling and information on individual needs on Medicare, EPIC plans, Medicare Supplement coverage and Long Term Care insurance and planning.

10/12/2021