



# County of Albany

112 State Street  
Albany, NY 12207

## Legislation Text

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**File #:** TMP-1791, **Version:** 1

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### REQUEST FOR LEGISLATIVE ACTION

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

Celtic Consulting to Provide Minimum Data Set (MDS) Consulting Services

Date: July 23, 2020  
Submitted By: Larry I. Slatky  
Department: Shaker Place Rehabilitation and Nursing Center  
Title: Executive Director  
Phone: 518-213-8940  
Department Rep.  
Attending Meeting: Larry I. Slatky

**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 all that apply):**

- ☐ Contractual
- ☐ Equipment
- ☐ Fringe
- ☐ Personnel
- ☐ Personnel Non-Individual

☐ Revenue

Increase Account/Line No.: Click or tap here to enter text.

Source of Funds: Click or tap here to enter text.

Title Change: Click or tap here to enter text.

### **CONCERNING CONTRACT AUTHORIZATIONS**

#### **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 or tap to enter a date.

☐ Settlement of a Claim

☐ Release of Liability

☐ Other: (state if not listed) Click or tap here to enter text.

#### **Contract Terms/Conditions:**

Party (Name/address):

Celtic Consulting, LLC

Additional Parties (Names/addresses):

507 East Main Street

Suite 308

Torrington, CT 06790

Amount/Raise Schedule/Fee: \$198,000.00

Scope of Services: Celtic Consulting will provide Minimum Data Set (MDS) consulting and monitoring of the clinical staff to ensure accurate documentation for Medicaid and Medicare reimbursement, educate staff on Patient Driven Payment Model for CMS reimbursement. (see attachments)

Bond Res. No.: Click or tap here to enter text.

Date of Adoption: Click or tap here to enter text.

### **CONCERNING ALL REQUESTS**

Mandated Program/Service: Yes ☒ No ☐

If Mandated Cite Authority: NYSDOH

Is there a Fiscal Impact: Yes ☒ No ☐

Anticipated in Current Budget: Yes ☒ No ☐

County Budget Accounts:

Revenue Account and Line: Click or tap here to enter text.

Revenue Amount: Click or tap here to enter text.

Appropriation Account and Line: 44069

Appropriation Amount: \$198,000.00

Source of Funding - (Percentages)

Federal: Click or tap here to enter text.

State: Click or tap here to enter text.

County: 100%

Local: Click or tap here to enter text.

Term

Term: (Start and end date) 1/1/2021 - 12/31/2021

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: 463

Date of Adoption: 11/12/2019

**Justification:** (state briefly why legislative action is requested)

Celtic Consulting is responsible for the monitoring of the MDS reimbursement and documentation process. They work with the clinical staff to ensure compliance to all regulatory requirements and the accuracy of documentation and the timely submissions of all documents. This is the third year of a three year contract and we recommend the continuance of this relationship that has proven fruitful for the nursing home finances and care of our residents.