

**HEALTH AND MENTAL HEALTH COMMITTEE
AGENDA
TUESDAY, DECEMBER 11, 2018
4:00 P.M.**

HEALTH AND MENTAL HEALTH COMMITTEE MEMBERS: Mike Anagnostakis, Chair
Michael Amo, James D. O'Donnell, Janet Sutherland, Peter V. Tuohy, Kathy Stegenga, Joel Sierra, Laurie R. Tautel

**I. DR. IRINA GELMAN, COMMISSIONER OF HEALTH
CHRISTOPHER ERICSON, DEPUTY COMMISSIONER, HEALTH DEPARTMENT
MICHAEL VENTRE, DEPUTY COMMISSIONER, HEALTH DEPARTMENT**

**Request to accept and appropriate 3rd year funds in the amount of
\$225,000.00 from the New York State Department of Health AIDS Institute
for the Disease Intervention Services for the period of 1/1/19 – 12/31/19
(LR#255)**

**II. LAURENCE LADUE, COMMISSIONER, VALLEY VIEW CENTER
DONNA STRECKER, DIRECTOR OF FINANCE, VALLEY VIEW CENTER**

Monthly Financials



Jean

County of Orange LEGISLATIVE REQUEST FORM

Legislative Request #: (rev. 1/18)

2018 + 255

(County Executive Dept.'s Use Only)

DATE :*	DATE LEGISLATIVE ACTION REQUIRED : *	DEPARTMENT/DIVISION:
11/16/2018	1/3/2019	Health / Nursing
SYNOPSIS:*		
Request the legislature to appropriate 3 rd year funds in the amount of \$225,000 from the New York State Department of Health AIDS Institute for the Disease Intervention Services for the period of 1/1/19 - 12/31/19 as per the attached Schedule A. Also requesting the funds be appropriated into the operating budget.		
HD 19 DIS HD 19P DIS		
INITIAL		DATE
Ch		11/19/18

or I.

COUNTY EXECUTIVE'S CONCEPTUAL APPROVAL	
COMMENTS	
INITIAL	DATE
Honin	11/26/18

COUNTY ATTORNEY APPROVAL	
COMMENTS	
INITIAL	DATE
SLR	11/27/18

HUMAN RESOURCES - DEPARTMENT REQUEST		
TITLE:*	GRADE: *	STEP:*
DEPARTMENT COMMENTS:*		
PERSONNEL DEPARTMENT COMMENT:		
INITIAL		DATE
[Signature]		11/27/19

BUDGET					
BUDGETED:*	AMOUNT *	FUNDING - STATE: *	FUNDING - FEDERAL:*	OTHER FUNDING: *	FUNDING - COUNTY:*
<input type="checkbox"/> YES <input type="checkbox"/> NO					\$ 0.00
BUDGET COMMENTS: No county tax is required. Requesting a supplemental appropriation of \$225,000 in state grant funds for the 2019 calendar year. See attached Schedule A.					
INITIAL				DATE	
[Signature]				11/30/18	

COUNTY EXECUTIVE'S FINAL APPROVAL	
COMMENTS	
INITIAL	DATE
[Signature]	11/30/18

LEGISLATIVE ACTION: (SYNOPSISIZE VOTING AND COMMENTS)		
STATUTORY: * NAME:	DATE:	TIME:
✓ Health + mental Health	12/11/18	4:00pm
* NAME:	DATE:	TIME:
* NAME:	DATE:	TIME:
* NAME:	DATE:	TIME:
SPECIAL:** NAME:	DATE:	TIME:
acid	12/5/18	

LEGISLATIVE REQUEST SCHEDULE A

Disease Intervention Services
01/01/19-12/31/19

Award No. HD 19 DIS Special Health Programs -Disease Intervention Services \$ 225,000.00
 1010.401018.434721.0000.00000
 Project No. HD 19P DIS

	Item/Description	Budget Amount
1010.401018.560110.0000.000000	Permanent Base Salary	\$ 100,601.00
	Fringe Total	\$ 67,997.00
1010.401018.586100.0000.000000	ERS	\$ 15,608.00
1010.401018.586300.0000.000000	Social Security	\$ 7,436.00
1010.401018.586400.0000.000000	Workers Comp	\$ 3,187.00
1010.401018.586500.0000.000000	Unemployment Ins	\$ 201.00
1010.401018.586600.0000.000000	Hospital Insurance	\$ 39,986.00
1010.401018.586650.0000.000000	Dental Insurance	\$ 1,230.00
1010.401018.586660.0000.000000	Vision Insurance	\$ 115.00
1010.401018.586700.0000.000000	Employer Disability	\$ 206.00
1010.401018.586800.0000.000000	EAP Charges	\$ 28.00
1010.401018.571530.0000.000000	Xrays/Laboratory	\$ 29,000.00
1010.401018.571820.0000.000000	Contracted Services	\$ 3,600.00
1010.401018.573100.0000.000000	Office Supplies	\$ 1,000.00
1010.401018.575400.0000.000000	Radio Pager	\$ 832.00
1010.401018.575610.0000.000000	Building Rent	\$ 1,600.00
1010.401018.575750.0000.000000	MV Cty Pool	\$ 12,000.00
1010.401018.576340.0000.000000	Telephone	\$ 3,180.00
1010.401018.576640.0000.000000	Advertising	\$ 190.00
1010.401018.576760.0000.000000	Employee Mileage	\$ 3,000.00
1010.401018.577090.0000.000000	Maintenance Contract	\$ 2,000.00
	Total Disease Intervention Services	\$ 225,000.00

Created: 11/15/2018



Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

September 26, 2017

Mary Marsh, RN, BSN, MPH, CIC, AE-C
Director of Patient Services
Orange County Department of Health
124 Main Street
Goshen, NY 10924

Dear Mary Marsh:

This letter is to confirm that the New York State Department of Health, AIDS Institute, intends to enter into a contractual agreement with Orange County Department of Health to continue to support the HIV Partner Services Program for the period 10/1/2017 – 12/31/2021. Funding in the amounts listed below will be added to the current STD Disease Intervention Services contract #C31865GG.

Contract #	Budget Periods	Additional Funding for HIV Partner Services	Total with STD DIS & HIV Partner Services combined
C31865GG	10/1/17-12/31/17	\$25,000	\$150,000
	1/1/18-12/31/18	\$100,000	\$225,000
	1/1/19-12/31/19	\$100,000	\$225,000
	1/1/20-12/31/20	\$100,000	\$225,000
	1/1/21-12/31/21	\$100,000	\$225,000
	<i>Totals</i>	\$425,000	\$1,050,000

The contract process requires several approvals. The final OSC approval constitutes execution of the contract amendment and only then is the contract a legal and binding document. No funds are due and payable until after the contract is executed.

If you have any questions, please feel free to call me at (518) 473-7096.

Sincerely,

Leah M. Caola
Associate Director
Office of Administration & Contract Management
NYSDOH, AIDS Institute