

County of Albany

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



Meeting Agenda

Thursday, May 25, 2023

6:30 PM

**Harold L. Joyce Albany County Office Building
Cahill Room - First Floor**

Audit and Finance Committee

PREVIOUS BUSINESS:

1. APPROVING PREVIOUS MEETING MINUTES
2. ESTABLISHING THE USA-250 COMMISSION FOR THE CELEBRATION OF THE 250TH YEAR FOLLOWING THE AMERICAN REVOLUTION AND INDEPENDENCE OF THE UNITED STATES
3. ESTABLISHING A VOTER RIGHTS DISCLOSURE POLICY FOR ALL POLLING PLACES MANAGED BY THE ALBANY COUNTY BOARD OF ELECTIONS
4. ADOPTING A DEBT POLICY FOR ALBANY COUNTY
5. AUTHORIZING AN AGREEMENT WITH ALBANY HOUSING AUTHORITY REGARDING A SUB-LEASE OF PREMISES LOCATED AT 155 CLINTON AVENUE IN THE CITY OF ALBANY

CURRENT BUSINESS:

6. AUTHORIZING THE DISTRIBUTION OF MORTGAGE TAXES FOR THE PERIOD OCTOBER 1, 2022 THROUGH MARCH 31, 2023
7. AUTHORIZING AN AGREEMENT WITH KONICA MINOLTA REGARDING THE PURCHASE OF BALLOT PRINTERS FOR PRIMARY, GENERAL AND SPECIAL ELECTIONS
8. AMENDING THE 2022 WATER PURIFICATION DISTRICT BUDGET: BEAVER CREEK PHASE 2-A PROJECT
9. AMENDING THE 2023 ALBANY COUNTY BUDGET: NEW YORK STATE HEALTH CARE AND MENTAL HYGIENE WORKER BONUS PROGRAM – VESTING PERIOD III
10. RESCINDING THE CONVEYANCE OF REAL PROPERTY PURSUANT TO RESOLUTION NO. 398 FOR 2019 AND AUTHORIZING THE CONVEYANCE OF REAL PROPERTY LOCATED AT NEW SALEM ROAD (TAX MAP NO. 82.-2-24) IN THE TOWN OF NEW SCOTLAND

11. RESCINDING THE CONVEYANCE OF REAL PROPERTY PURSUANT TO RESOLUTION NO. 506 FOR 2017 AND AUTHORIZING THE CONVEYANCE OF REAL PROPERTY LOCATED AT 343 FIRST STREET (TAX MAP NO. 65.56-3-61) IN THE CITY OF ALBANY
12. RESCINDING THE CONVEYANCE OF REAL PROPERTY PURSUANT TO RESOLUTION NO. 481 FOR 2017 AND AUTHORIZING THE CONVEYANCE OF REAL PROPERTY LOCATED AT 17604 STEVENS ROAD (TAX MAP NO. 68.-1-59) IN THE TOWN OF KNOX

County of Albany

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



Meeting Minutes

Thursday, April 27, 2023

6:30 PM

**Harold L. Joyce Albany County Office Building
Cahill Room - First Floor**

Audit and Finance Committee

PREVIOUS BUSINESS:

Present: Wanda F. Willingham, Matthew T. Peter, Paul J. Burgdorf,
William M. Clay, Mark E. Grimm, Raymond F. Joyce,
Lynne Lekakis and David B. Mayo

Excused: Nathan L. Bruschi

1. APPROVING PREVIOUS MEETING MINUTES

A motion was made that the previous meeting minutes be approved. The motion carried by a unanimous vote.

2. ADOPTING A DEBT POLICY FOR ALBANY COUNTY

This proposal was tabled at the request of the Sponsor.

CURRENT BUSINESS:

3. ESTABLISHING A VOTER RIGHTS DISCLOSURE POLICY FOR ALL POLLING PLACES MANAGED BY THE ALBANY COUNTY BOARD OF ELECTIONS

This proposal was tabled at the request of the Sponsor.

4. ESTABLISHING THE USA-250 COMMISSION FOR THE CELEBRATION OF THE 250TH YEAR FOLLOWING THE AMERICAN REVOLUTION AND INDEPENDENCE OF THE UNITED STATES

This proposal was tabled at the request of the Sponsor.

5. AUTHORIZING AN AGREEMENT WITH ALBANY HOUSING AUTHORITY REGARDING A SUB-LEASE OF PREMISES LOCATED AT 155 CLINTON AVENUE IN THE CITY OF ALBANY

This proposal was tabled at the request of the Committee.

6. AUTHORIZING A CORRECTION TO THE TAX ROLL FOR 10 BALTIS DRIVE IN THE TOWN OF NEW SCOTLAND

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

7. AMENDING THE 2023 DEPARTMENT OF PARKS & RECREATION BUDGET: LIFEGUARD CERTIFICATION COURSE REGISTRATION FEES

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

**8. AMENDING THE 2023 SHERIFF'S OFFICE BUDGET: ADMINISTRATIVE
ADJUSTMENTS**

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

RESOLUTION NO. 150

ESTABLISHING THE USA-250 COMMISSION FOR THE CELEBRATION OF THE 250TH YEAR FOLLOWING THE AMERICAN REVOLUTION AND INDEPENDENCE OF THE UNITED STATES

Introduced: 4/10/23

By: Mr. Perlee

WHEREAS, In 2016, the “United States Semiquincentennial Commission Act” was passed by Congress and signed into Law, beginning Federal efforts to celebrate the 250th Anniversary of the establishment of our Nation, and

WHEREAS, In 2021, the New York State Legislature passed the “New York State 250th Commemoration Act”, which was signed into law on December 22nd, 2021, and

WHEREAS, The New York State 250th Commemoration act established a Statewide commission to plan, develop, coordinate, and promote activities relating to the 250th Anniversary of the American Revolution and resulting establishment of our Nation, and

WHEREAS, Discover Albany, as Albany County’s designated Tourism Promotion Agency, has recognized the importance of the 250th Anniversary of the American Revolution, and has been working to coordinate events and commemorates related to the Anniversary; and

WHEREAS, The Albany County Legislature recognizes the importance of this commemorative effort in building close ties of shared community and kinship, and views such efforts as necessary across our State and County, and

WHEREAS, At the beginning of the Seven Years’ War in June and July 1754, representatives from seven British colonies met in Albany to discuss various threats and issues shared by the colonies, during which time Benjamin Franklin proposed the Albany Plan of Union, a plan to unite the British colonies under a single representative colonial government, and while the plan failed, it was an important precursor to the later unification of the thirteen colonies as the United States, and

WHEREAS, Albany County was the focal point of many important parts of the American War of Independence, and was critically the intended end point for British forces in the decisive Saratoga Campaign which turned the tide of the conflict, and

WHEREAS, Many important leaders, political thinkers, and other individuals that took part in the American Revolution originated in or resided in what currently constitutes Albany County such as the Schuyler family, Peter Gansevoort, Abraham Ten Broeck, and many other prominent individuals, and

WHEREAS, Albany County was the scene of bitter conflict between Loyalist and Patriot militias, culminating in the Battle of the Normanskill in 1777, in which local militia and Continental Army troops, including Black troops from the 1st Rhode Island Regiment, prevented the Loyalist militias from providing aid to General Burgoyne ahead of the decisive Battle of Saratoga, and

WHEREAS, Given Albany County's critical role and relevance in the events which lead to the establishment of the United States, it is incumbent upon the County to follow the example of both the Federal Government and State of New York and establish an organized effort to commemorate the 250th Anniversary of the American Revolution and to celebrate this milestone for our Nation, now, therefore be it

RESOLVED, By the Albany County Legislature that the USA-250 Commission is hereby established in Albany County for the purposes of celebrating the 250th Anniversary of the American Revolution, and, be it further

RESOLVED, That the USA-250 Commission be comprised of eight members, one of which shall be appointed by the County Executive, one of which shall be appointed by the Chair of the Albany County Legislature, one of which shall be appointed by the Majority Leader of the Albany County Legislature, [and] one of which shall be appointed by the Minority Leader of the Albany County Legislature, and one of which shall be appointed by Chief Executive Officer of Discover Albany. [and the initial three legislative appointments] The five initially appointed members shall be responsible for identifying [and recommending to the Chair of the Legislature five] and selecting three historical societies or American Revolutionary history-related organizations in Albany County to appoint one member to the Commission each [following the acceptance of said recommendations by the Chair of the Legislature], with all such members serving for the duration of the Commission's existence; provided, however, that if the [three legislative appointments] five initially appointed members determine a specific individual not associated with a relevant historical society or organization to be especially qualified, such individual may be appointed to the Commission on the unanimous [recommendation of the three legislative appointments] agreement of the five initially appointed members, and, be it further

RESOLVED, That the Chairperson of the USA-250 Commission be elected by a majority of its members upon all seats of the Commission having been filled, and, be it further

RESOLVED, That the USA-250 Commission is authorized to take any and all actions necessary to promote the 250th Anniversary of the American Revolution in Albany County subject to available funding, and, be it further

RESOLVED, That the Chairperson of the USA-250 Commission shall be empowered to conclude a memorandum of understanding with Discover Albany for the purposes of accepting grant applications related to the 250th Anniversary and making recommendations

for said grants to the Albany County Convention & Visitors Bureau Education Foundation;
and, be it further

RESOLVED, That the USA-250 Commission shall act as an organizing resource for the various cities, towns, and villages throughout Albany County as they plan related commemoration events, and, be it further

RESOLVED, That the USA-250 Commission shall terminate on September 4th, 2033.

RESOLUTION NO. 150

ESTABLISHING THE USA-250 COMMISSION FOR THE CELEBRATION OF THE 250TH YEAR FOLLOWING THE AMERICAN REVOLUTION AND [INDEPENEDENCE] INDEPENDENCE OF THE UNITED STATES

Introduced: 4/10/23

By: Mr. Perlee

WHEREAS, In 2016, the “United States Semiquincentennial Commission Act” was passed by Congress and signed into Law, beginning Federal efforts to celebrate the 250th Anniversary of the establishment of our Nation, and

WHEREAS, In 2021, the New York State Legislature passed the “New York State 250th Commemoration Act”, which was signed into law on December 22nd, 2021, and

WHEREAS, The New York State 250th Commemoration act established a Statewide commission to plan, develop, coordinate, and promote activities relating to the 250th Anniversary of the American Revolution and resulting establishment of our Nation, and

WHEREAS, Discover Albany, as Albany County’s designated Tourism Promotion Agency, has recognized the importance of the 250th Anniversary of the American Revolution, and has been working to coordinate events and commemorates related to the Anniversary; and

WHEREAS, The Albany County Legislature recognizes the importance of this commemorative effort in building close ties of shared community and kinship, and views such efforts as necessary across our State and County, and

WHEREAS, At the beginning of the Seven Years’ War in June and July 1754, representatives from seven British colonies met in Albany to discuss various threats and issues shared by the colonies, during which time Benjamin Franklin proposed the Albany Plan of Union, a plan to unite the British colonies under a single representative colonial government, and while the plan failed, it was an important precursor to the later unification of the thirteen colonies as the United States, and

WHEREAS, Albany County was the focal point of many important parts of the American War of Independence, and was critically the intended end point for British forces in the decisive Saratoga Campaign which turned the tide of the conflict, and

WHEREAS, Many important leaders, political thinkers, and other individuals that took part in the American Revolution originated in or resided in what currently constitutes Albany County such as the Schuyler family, Peter Gansevoort, Abraham Ten Broeck, and many other prominent individuals, and

WHEREAS, Albany County was the scene of bitter conflict between Loyalist and Patriot militias, culminating in the Battle of the Normanskill in 1777, in which local militia and Continental Army troops, including Black troops from the 1st Rhode Island Regiment, prevented the Loyalist militias from providing aid to General Burgoyne ahead of the decisive Battle of Saratoga, and

WHEREAS, Given Albany County's critical role and relevance in the events which lead to the establishment of the United States, it is incumbent upon the County to follow the example of both the Federal Government and State of New York and establish an organized effort to commemorate the 250th Anniversary of the American Revolution and to celebrate this milestone for our Nation, now, therefore be it

RESOLVED, By the Albany County Legislature that the USA-250 Commission is hereby established in Albany County for the purposes of celebrating the 250th Anniversary of the American Revolution, and, be it further

RESOLVED, That the USA-250 Commission be comprised of eight members, one of which shall be appointed by the County Executive, one of which shall be appointed by the Chair of the Albany County Legislature, one of which shall be appointed by the Majority Leader of the Albany County Legislature, [and] one of which shall be appointed by the Minority Leader of the Albany County Legislature, and one of which shall be appointed by Chief Executive Officer of Discover Albany. [and the initial three legislative appointments] The five initially appointed members shall be responsible for identifying [and recommending to the Chair of the Legislature five] and selecting three historical societies or American Revolutionary history-related organizations in Albany County to appoint one member to the Commission each [following the acceptance of said recommendations by the Chair of the Legislature], with all such members serving for the duration of the Commission's existence; provided, however, that if the [three legislative appointments] five initially appointed members determine a specific individual not associated with a relevant historical society or organization to be especially qualified, such individual may be appointed to the Commission on the unanimous [recommendation of the three legislative appointments] agreement of the five initially appointed members, and, be it further

RESOLVED, That the Chairperson of the USA-250 Commission be elected by a majority of its members upon all seats of the Commission having been filled, and, be it further

RESOLVED, That the USA-250 Commission is authorized to take any and all actions necessary to promote the 250th Anniversary of the American Revolution in Albany County subject to available funding, and, be it further

RESOLVED, That the Chairperson of the USA-250 Commission shall be empowered to conclude a memorandum of understanding with Discover Albany for the purposes of accepting grant applications related to the 250th Anniversary and making recommendations

for said grants to the Albany County Convention & Visitors Bureau Education Foundation;
and, be it further

RESOLVED, That the USA-250 Commission shall act as an organizing resource for the various cities, towns, and villages throughout Albany County as they plan related commemoration events, and, be it further

RESOLVED, That the USA-250 Commission shall terminate on September 4th, 2033.

New York State Voter's Bill of Rights

As a registered voter, you have the right to:

Vote: The right to vote includes voting for candidates and questions on the ballot and having sufficient time to vote.

Have Your Votes Count: Vote on a voting system that is in working condition and that will allow votes to be accurately cast.

Secrecy in Voting: Secrecy in voting will be preserved for all elections.

Freedom in Voting: Cast your vote, free from coercion or intimidation by elections officers or any other person.

Permanent Registration: Once registered to vote, you continue to remain qualified to vote from an address within your county or city.

Accessible Elections: Non-discriminatory equal access to the election system for all voters, including the elderly, disabled, alternative language minorities, military and overseas citizens, as required by Federal and State laws.

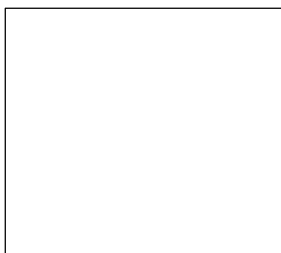
Assistance in Voting: You may request assistance to vote because of blindness, disability, or inability to read or write.

Instruction in Voting: You can view a sample ballot in this polling place prior to voting, and before entering or approaching a privacy booth, scanner or ballot marking device, you may request help in how to mark and/or cast your ballot.

Affidavit Voting: Whenever your name does not appear in the poll ledger or the voter registration or enrollment list, or you do not provide identification when required, you will be offered an affidavit ballot.

For more information related to your voting status, please visit the following website: www.albanycounty.com/voting

Or scan the QR Code:



Albany County Board of Elections: 518-487-5060
260 South Pearl Street, Albany, New York 12202

Website would include the following: (Which is copy and pasted from the State Board website).

How do I register to vote?

You may register at your [local board of elections](#) or any state agency participating in the [National Voter Registration Act](#), on any business day throughout the year. Alternatively, you can download a .pdf version of the [Voter Registration Form](#) from our website, and mail it to your [county board of elections](#). You may also submit your voter application form at the Department of Motor Vehicles, either in person or on their web site if you already have DMV-issued identification.

How do I change my name and address?

Complete the Voter Registration Form with the new information, and mail it to your county board of elections. If you are moving to a new county you will have to re-register to vote. Send your voter registration form with the new information to your new county board of elections. You can obtain a Voter Registration Form from your [local board of elections](#) or any state agency participating in the [National Voter Registration Act](#), on any business day throughout the year. Alternatively, you can [download a .pdf version of the Voter Registration Form](#) from our website.

How do I change my enrollment?

The voter registration form should be used to change your party enrollment from one party to another or to enroll for the first time in a party. A change of enrollment received up until February 14th each year will be effective immediately. Changes received on or after February 15th until seven days after the June Primary will be set aside and opened the seventh day following the June Primary and entered in the voter's registration record. Please see [Deadlines](#) referenced above.

I am a victim of domestic violence, how can I protect myself when I register to vote? What about voting at my poll site?

N.Y. Election Law (5-508) allows victims of domestic violence to apply for a confidential registration by delivering a sworn statement to their local county Board of Elections stating they are a victim of domestic violence and they wish to have their voter registration record kept confidential because of the threat of physical or emotional harm to themselves or a family or household member. Their voter registration record will be kept separate and apart from other registration records for four years and not be made available for inspection or copying by the public or any other person, except election officials acting within the course and scope of their official duties. Under a separate section of the law (11-306), they can also be excused from going to their polling place to vote and get a special ballot. For further information, please contact your local board of elections for their confidential registration and special ballot procedures.

If you wish to file a complaint or inquire about enforcement action you may contact the Enforcement Counsel at:

*Division of Election Law Enforcement
NYS Board of Elections
40 North Pearl Street
Albany, NY 12207
518-486-7858
enforcement@elections.ny.gov.*

Where do I go to vote?

[Look up your voter registration and find your polling place](#)  or contact your [county board of elections](#).

When is the next election?

The following elections will occur this year:

Local Primary Election - June 27, 2023

The Early Voting period for Local June 27th Primary will be June 17, 2023 – June 25, 2023.

General Election - November 7, 2023

The Early Voting period for the November General Election will be October 28, 2023 - November 5, 2023.

For more information regarding filing or registration dates or deadlines refer to the [Political Calendar](#).

What hours are polling places open?

Primary Elections

POLLS OPEN AT 6 AM - CLOSE AT 9 PM

General Election

POLLS OPEN AT 6 AM - CLOSE AT 9 PM

RESOLUTION NO. 152

ESTABLISHING A VOTER RIGHTS DISCLOSURE POLICY FOR ALL POLLING PLACES MANAGED BY THE ALBANY COUNTY BOARD OF ELECTIONS

Introduced: 4/10/23

By Peter, Reidy, Lekakis, A. Joyce, Feeney, McLaughlin, Cleary, Kuhn and Miller:

WHEREAS, In 2022 the New York State Legislature passed the most expansive state level voting rights act in the country, which expands access to voting by prohibiting voter dilution, suppression, intimidation, deception or obstruction, and

WHEREAS, These rights, along with those guaranteed by the Constitutions of the United States and the State of New York should be provided to voters at the place they cast their ballots, and

WHEREAS, The Albany County Board of Elections conducts the elections for all Federal, State, and County offices, and assists almost all local elections, which allows them to provide information to voters at the polling place, and

WHEREAS, The Albany County Board of Elections has agreed to assist in providing access to the New York State Voting Bill of Rights and Answers to Frequently Asked Questions (FAQ) related to voting at each polling site they manage, now, therefore be it

RESOLVED, That the Albany County Board of Elections is hereby authorized and encouraged to apply for prior approval from the New York State Board of Elections for such language in accordance with New York Election Law 8-104 (1-a), and, be it further

RESOLVED, upon receiving approval from the State Board of Elections, the election inspectors shall cause a copy of the approved Appendix A to be posted conspicuously within each polling place in the County of Albany that is managed by the Albany County Board of Elections, and, be it further

RESOLVED, That the 2023 Albany County Budget is amended to pay for the production of such fliers as follows:

Decrease Appropriation Account A1990.4 by \$5,000 by decreasing Line Item A1990 4 4999 Miscellaneous Contractual Expense \$5,000

Increase Appropriation Account A1450.4 by \$5,000 by increasing Line Item A1450 4 4046 Fees For Services by \$10,000

and, be it further,

RESOLVED, That the Clerk of the County Legislature is directed to forward certified copies of this resolution to the appropriate County Officials.



DANIEL P. MCCOY
COUNTY EXECUTIVE

M. DAVID REILLY, JR
COMMISSIONER

COUNTY OF ALBANY
DEPARTMENT OF MANAGEMENT AND BUDGET
112 STATE STREET, SUITE 1200
ALBANY, NEW YORK 12207
OFFICE: (518) 447-5525
FAX: (518) 447-5589
www.albanycounty.com

PATRICK ALDERSON
DEPUTY COMMISSIONER

March 8, 2023

Hon. Andrew C. Joyce, Chairman
Albany County Legislature
112 State St., Rm. 710
Albany, NY 12207

Dear Chairman Joyce:

Enclosed is a Request for Legislative Action from the Department of Management and Budget seeking approval/adoption of a Debt Policy.

This Policy will set parameters for the issuance of debt for Albany County going forward, ensuring that the proper amount and type of debt is issued in the most cost effective manner possible.

If you have any additional questions, please contact me at your convenience. I will be at the Committee meetings where this is discussed as well.

Sincerely,

M. David Reilly
Commissioner



County of Albany

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

Legislation Text

File #: TMP-4118, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

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

Request to approve a Debt Policy

Date: 03/07/2023
Submitted By: Sarah Cantwell
Department: Management & Budget
Title: Assistant Director of Budgetary Review
Phone: 518-447-5525
Department Rep.
Attending Meeting: David Reilly

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):

Click or tap here to enter text.

Additional Parties (Names/addresses):

Click or tap here to enter text.

Amount/Raise Schedule/Fee: Click or tap here to enter text.

Scope of Services: Click or tap here to enter text.

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: Click or tap here to enter text.

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: Click or tap here to enter text.
Appropriation Amount: Click or tap here to enter text.

Source of Funding - (Percentages)

Federal: Click or tap here to enter text.
State: Click or tap here to enter text.
County: Click or tap here to enter text.
Local: Click or tap here to enter text.

Term

Term: (Start and end date) Click or tap here to enter text.
Length of Contract: Click or tap here to enter text.

Impact on Pending Litigation

If yes, explain: Yes ☐ No ☒
Click or tap here to enter text.

Previous requests for Identical or Similar Action:

Resolution/Law Number: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

Justification: (state briefly why legislative action is requested)

The purpose of the Albany County Debt Policy (the “Debt Policy” or “Policy”) is to help ensure that all debt issued by Albany County, New York (the “County”) is issued both prudently and cost effectively. The Debt Policy sets forth comprehensive guidelines for the issuance and management of all debt financings of the County. Adherence to the Policy is essential to ensure that the County maintains a sound debt position and protects the credit quality of its obligations.

Albany County Debt Policy

Section 1 -Purpose & Overview

The purpose of the Albany County Debt Policy (the “Debt Policy” or “Policy”) is to help ensure that all debt issued by Albany County, New York (the “County”) is issued both prudently and cost effectively. The Debt Policy sets forth comprehensive guidelines for the issuance and management of all debt financings of the County. Adherence to the Policy is essential to ensure that the County maintains a sound debt position and protects the credit quality of its obligations.

Section 2 - Roles & Responsibilities

The roles and responsibilities of the various County officials and departments are briefly described as follows:

County Executive

The Albany County Executive (the “County Executive”) shall make a recommendation to the Albany County Legislature (the “Legislature”) on all requests for action on financings based on requests from elected officials or department heads or in accordance with the County’s Capital Improvement Plan (the “CIP”).

County Comptroller

The Albany County Comptroller (the “County Comptroller”), as delegated by the Legislature pursuant to the Bond Resolutions, shall determine the financing structure necessary to fund the County’s various capital needs. The County Comptroller will determine which of the following financing structures is appropriate: (a) long-term bond debt, (b) short-term note debt, or (c) alternative debt. Upon the determination of a financing structure, the County Comptroller will select a debt repayment term that is permitted under the NYS Local Finance Law and consistent with this Policy.

The County Comptroller shall coordinate and oversee the activities and services required for the issuance of debt, in consultation with required professionals and other service providers.

The County Comptroller shall represent the County in meetings and discussions with any rating agencies.

The County Comptroller shall represent the County at all closings for issuance of debt issued by the County.

The County Comptroller shall coordinate with the County Commissioner of Management & Budget (the “Commissioner”) to ensure that all debt service items are included in the annual budget.

The County Comptroller shall determine the method of sale, as outlined in Section 6 of this Policy, and the timing of such sale best suited for each issue of debt authorized by a bond resolution approved by the Legislature.

The County Comptroller shall select the municipal advisor and the bond underwriter, for negotiated sales, pursuant to a request for proposal process, consistent with the policies and procedures of the County. For competitively sold debt, the County Comptroller will make the award to the lowest, responsible bidder.

The County Comptroller shall act as the County’s liaison to the County’s municipal advisor and/or bond underwriter.

The County Comptroller shall receive any bond and note proceeds on behalf of the County and coordinate with the Commissioner to ensure that the fiscal agent receives funds for payment of debt service on or before the debt service payment date.

The County Comptroller shall coordinate with bond counsel to ensure that bond counsel has reviewed all documents related to the issuance of debt and that, in the opinion of the bond counsel, all debt to be issued by the County is issued in compliance with the Local Finance Law, other applicable New York law and all applicable tax laws.

The County Comptroller shall, pursuant to its individual duties dictated under the County Charter and other related authority, (a) monitor the County's financial status, and (b) evaluate the impact of capital spending, operations, and debt service on the financial condition of the County. The County Comptroller shall coordinate such monitoring and evaluation with the Commissioner.

The County Comptroller shall provide the County Executive and the Commissioner with appropriate information for the Commissioner's agenda items necessary to adopt debt issuance resolutions.

County Commissioner of Management & Budget

The Commissioner will prepare a cash flow analysis in connection with the CIP prepared and submitted by the County Executive and, in connection with the preparation of such analysis, will determine the amount of net proceeds needed to fund the respective projects and costs of issuance and deliver such determination to the County Comptroller. The Commissioner shall coordinate with the County Comptroller regarding the preparation of the cash flow analysis.

The Commissioner shall coordinate with the County Legislature in connection with the preparation of bond resolutions and other actions necessary to authorize the issuance of debt.

The Commissioner shall coordinate with the County Comptroller to ensure that all debt service items are included in the annual budget.

The Commissioner shall, pursuant to its individual duties dictated under the County Charter and other related authority, (a) monitor the County's financial status, and (b) evaluate the impact of capital spending, operations, and debt service on the financial condition of the County. The Commissioner shall coordinate such monitoring and evaluation with the County Comptroller.

Section 3 -Governing Principles

Any action taken in the issuance of debt must be in accordance with the authority listed below. Issuance by the County of debt is governed by the New York State Constitution and Local Finance Law and other state law.

Article VIII, Section 4 of the New York State Constitution provides that no County, city, town, village or school district shall contract indebtedness which, including existing indebtedness, shall exceed seven percent (7%) of the five-year average full valuation of taxable real estate therein.

The County will utilize long-term borrowing only for capital improvement projects that cannot be financed from current revenue sources or when short term capital debt, i.e., bond anticipation notes, are not considered a more attractive funding alternative as determined by the County Comptroller.

In connection with the consideration by the County Comptroller of funding alternatives, the County Comptroller will consider state and federal funding sources with consultation and coordination with the Commissioner. Examples of alternative funding sources include the financing programs offered by the NYS Environmental Facilities Corporation and the Dormitory Authority of the State of New York.

With the assistance of bond counsel and the County's municipal advisor, when financing capital projects through the issuance of debt, the County will pay back the debt in a period not exceeding the assigned useful life or weighted average maturity of those projects being funded.

Actions taken in the issuance of debt shall be guided by:

- (1) The County Charter
- (2) The General Municipal Law
- (3) The Local Finance Law
- (4) The County General Fund Balance Policy
- (5) The Investment Policy for the County
- (6) The Code of Ethics and Financial Disclosure Law of the County

Section 4 — Debt/Credit Rating Objectives

The County will seek to maintain the highest possible credit ratings for all categories of debt that will not compromise delivery of basic County services and achievement of the County's policy objectives. It shall be the County's goal to maintain at least one long-term general obligation bond rating in the "double-A" category by at least one of the three major credit rating agencies, namely Fitch Ratings, Moody's Investors Service or S&P Global Ratings. Any change to the minimum credit quality level goal for the County shall be established by the Legislature by resolution.

Section 5 -Purpose, Type, & Use of Debt

In the issuance and management of debt, the County shall comply with the New York State Constitution, New York State Local Finance Law and with all other legal requirements imposed by federal, state, and local rules and regulations as applicable.

General Obligation Debt ("GO") debt is secured by the full faith and credit of the County, meaning that there is an obligation to levy taxes in an amount necessary to pay debt service, principal and interest, coming due each fiscal year. Debt service is intended to be paid from General Fund revenues and taxes collected by the County.

Revenue Bonds or Obligations are used to finance construction or improvements to facilities of enterprise systems operated by the County, in accordance with a system and plan of improvements. The enterprise systems must be an established system legally authorized for operation by the County. The County must pledge revenues generated by the debt-finance asset or by the operating system of which that asset is a part.

Short Term/Capital Project Obligations consisting of short-term, capital debt (bond anticipation notes and budget notes) may be warranted if timing, market conditions or other similar circumstances make them more

attractive than a long-term bond issue as determined by the County Comptroller in consultation with the County's municipal advisor.

Short Term/Cash Flow Obligations consisting of tax anticipation notes and revenue anticipation notes and typically having a term of twelve (12) months or less, will be used for the purpose of cash flow financing.

Other Financing Arrangements may include installment financings, equipment leases, energy performance contracts or "pay-as-you-go" debt. Installment financings, for example installment purchase contracts, are agreements in which the equipment or property is acquired and periodic payments are made to finance the acquisition. Other examples include funding alternatives provided under financing programs offered by the NYS Environmental Facilities Corporation and the Dormitory Authority of the State of New York.

"Pay-as-you-go" debt includes inter-governmental grants from federal, State and other sources; current revenues and fund balances; private sector contributions; public or private partnerships; and leasing payments.

The County will avoid the use of variable-rate debt for general obligation bond issuances.

Section 6 — Method of Sale of Obligations

Public Competitive Sale

Under New York State law, bonds issued in an amount in excess of five (5) million dollars to fund a capital project, must be sold at competitive sale. Short-term notes, with a maximum maturity of twelve (12) months, may be sold via competitive sale or negotiation, at the option of the County Comptroller. Upon authorizing a Public Competitive Sale pursuant to the Local Finance Law and related authority, the County shall undertake such Public Competitive Sale in accordance with Section 57.00 of the Local Finance Law.

Private Negotiated Sale

When necessary to minimize the costs and risks of borrowing, or when the expertise of an underwriter is necessary in a volatile market or for a particularly complex issue, the County Comptroller may provide for the sale of debt by negotiating the terms and conditions of sale, including prices, interest rates, underwriting fees and other compensation, as permitted by state and federal law, with one or more underwriters.

Section 7 — Financial Considerations

The Commissioner shall consider all fiscal conditions of the County to keep the annual debt service at a reasonable and prudent level, balancing the capital and borrowing needs of the County with the resources and the ability of the County to service the debt.

Section 8 - Authorized Professionals

Authorized financial professionals should be recommended by the County Comptroller. Authorized financial professional should be selected and authorized by the Legislature through a competitive bid process or through a request for proposals ("RFP") and follow the County's RFP and contract approval processes and policies. Recommendations of authorized financial professionals may include, but is not limited to, the following:

- (1) Bond Counsel
- (2) Municipal Advisor
- (3) Underwriter
- (4) Fiscal Agent
- (5) Trustee
- (6) Verification Agent
- (7) Arbitrage Consultant

Section 9 - Refunding Obligations

Outstanding bonds may be refunded (refinanced) with proceeds of debt sold through either a “current refunding” or an “advance refunding”. Outstanding bonds can be “currently refunded” with tax-exempt bond proceeds within ninety (90) days of the outstanding bonds’ call date. Outstanding bonds can be “*advance refunded*” with *Federally taxable* bonds in advance of ninety (90) days of their call date. It shall be a goal of the County that the savings generated by an advance refunding bond issue be in an amount that is equal to or exceeds three percent (3%), on a present value basis, of the principal amount of the debt being refunded. It shall be a goal of the County that the savings generated by a *current* refunding bond issue be in an amount that is equal to or exceeds two percent (2%), on a present value basis, of the principal amount of the debt being refunded.

The IRS does not limit the number of times that the County can advance refund outstanding debt with taxable debt nor does it limit the number of times that debt can be currently refunded with tax-exempt debt.

Initiating Bond Refinancing

The County Comptroller will review, or cause the County’s municipal advisor to review, the County’s outstanding debt and recommend issues for refunding as market opportunities arise.

Deferral of Debt Service

The County will not refinance debt for the purpose of deferring scheduled debt service unless unique circumstances, are present, as determined by the County Comptroller in consultation with the County Executive. The County is aware that refinancing outstanding debt for the purpose of deferring debt service may negatively impact the County’s credit rating. Refinancing debt to generate present value savings is generally considered to have positive credit implications.

Section 10 - Investment of Bond Proceeds

In connection with the issuance of debt, the County Comptroller will provide for the establishment of funds and accounts for the deposit of the proceeds of the debt.

The Commissioner, shall determine the length of time during which the proceeds of debt are to be invested after consultation with the County Comptroller and staff.

Investment of the proceeds of debt issued by the County will be made in accordance with federal and State laws and the County's Investment Policy.

Section 11 - Other Debt-Related Duties & Obligations

Arbitrage and Tax Law Requirements

- (1) Prior to any debt issuance, the County Comptroller shall be responsible for obtaining, or shall prepare, a schedule showing the expected timing and amount of expenditures to be made from the project fund funded with bond or note proceeds. This schedule will be used to develop an Arbitrage or Tax Certificate.
- (2) The County Comptroller will keep records of the investment of bond and note proceeds and bond and note funds sufficient to develop calculations required for compliance with federal arbitrage rules and other tax law requirements.
- (3) The County Comptroller shall be responsible for compliance with federal arbitrage reporting and other tax law requirements. As such, the services of a qualified, professional firm to provide calculations relating to potential arbitrage rebate liability of the County may be retained by the County Comptroller to assist with arbitrage compliance.

Disclosure Documents

The County is required to provide disclosure, generally in the form of an Official Statement, relating to each public offering of debt in an amount in excess of \$1 million or with a term exceeding nine (9) months. The County's municipal advisor will have primary responsibility for drafting and preparing the Official Statement, which will be reviewed by the County Comptroller and bond counsel, for each transaction. The County is responsible for providing complete and accurate information included in the Official Statement, and is responsible for the overall content of the document.

Continuing Disclosure Undertakings

Pursuant to SEC Rule 15c2-12, the County is required to provide Continuing Disclosure to investors on an annual basis through the Municipal Securities Rulemaking Board's ("MSRB") Electronic Municipal Market Access ("EMMA") website. Such annual disclosure shall be generally in the form consistent with the Official Statements relating to the County's public offering of debt and its audited financial statements. Working with the County, the County's municipal advisor will have primary responsibility for drafting and preparing such annual disclosures.

In addition, the County undertakes to provide certain material event notices to investors as required under SEC Rule 15c2-12. The County's municipal advisor will prepare and file such notices once informed of the occurrence of such events by the County.



P. DAVID SOARES
DISTRICT ATTORNEY

CHERYL K. FOWLER
CHIEF ASSISTANT DISTRICT ATTORNEY

CHRISTOPHER D. HORN
DEPUTY CHIEF ASSISTANT
DISTRICT ATTORNEY

COUNTY OF ALBANY
OFFICE OF THE DISTRICT ATTORNEY
ALBANY COUNTY JUDICIAL CENTER
6 LODGE STREET
ALBANY, NEW YORK 12207
(518) 487-5460 - FAX: (518) 487-5093

April 14, 2023

Andrew Joyce
Albany County Legislature
112 State St, Room 700
Albany, NY 12207

Dear Mr. Joyce,

I am requesting legislative action to further the mission on the Office of the Albany County District Attorney. Approval is sought to:

- Retroactively reaffirm the prior extension of the SUB-LEASE of premises at 155 Clinton Avenue between Albany Housing Authority and Albany County on Behalf of the Albany County District Attorney from March 1, 2019 to the last day of February 2024.

Attached is a copy of the Agreement to Re-Affirm and Extend Sub-Lease. If you have any questions, please feel free to contact me at 518-487-5460.

Thank you for your assistance.

Sincerely,

P. David Soares
Albany County District Attorney
Cc: Rebekah Kennedy, Majority Counsel
Cc: Arnis Zilgme, Minority Counsel

REQUEST FOR LEGISLATIVE ACTION

Retroactively reaffirming the prior extension of the SUB-LEASE of premises at 155 Clinton Avenue between Albany Housing Authority and Albany County on Behalf of the Albany County District Attorney from March 1, 2019 to the last day of February 2024.

Date:	04/14/2023
Submitted By:	David Soares
Department:	1165- District Attorney
Title:	District Attorney
Phone:	518-275-4701
Department Rep.	
Attending Meeting:	David Soares, Christopher Horn

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) Retroactively reaffirming the prior extension of the SUB-LEASE of premises at 155 Clinton Avenue between Albany Housing Authority and Albany County on Behalf of the Albany County District Attorney from March 1, 2019 to the last day of February 2024. 155 Clinton Avenue houses the Community Justice Outreach Center (CJOC) the purpose of which is to empower our community through outreach efforts, re-entry services, and community justice practice. The CJOC's community justice efforts are a collaboration between local law enforcement offices, public officials, community-based organizations, and community members. The Center is strategically placed in Arbor Hill in order to provide outreach directly in the community where help is needed most. Outreach and Program Efforts include: - Criminal and community justice programs - Hosting a variety of workshops - Providing outreach/referrals for community members - Computers for job and education assistance - Offering re-entry support for formerly incarcerated persons - Services for youth and seniors - Crime prevention tools - Neighborhood resources - The Community Accountability Board - Community Service - Re-entry Outreach - All of the District Attorney Community Initiatives.

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) _____

Contract Terms/Conditions:

Party (Name/address):

Additional Parties (Names/addresses):

Click or tap here to enter text.

Amount/Raise Schedule/Fee:

Click or tap here to enter text.

Scope of Services:

Click or tap here to enter text.

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: Click or tap here to enter text.

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: A91165 44046
Appropriation Amount: \$10,824

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) March 1, 2019 to last day of February 2024.
Length of Contract: 5 years with an option to renew for another 5 years.

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: 22-495
Date of Adoption: 12/5/22

Justification: (state briefly why legislative action is requested)

Retroactively reaffirming the prior extension of the SUB-LEASE of premises at 155 Clinton Avenue between Albany Housing Authority and Albany County on Behalf of the Albany County District Attorney from March 1, 2019 to the last day of February 2024.

155 Clinton Avenue houses the Community Justice Outreach Center (CJOC) the purpose of which is to empower our community through outreach efforts, re-entry services, and community justice practice. The CJOC's community justice efforts are a collaboration between local law enforcement offices, public officials, community-based organizations, and community members. The Center is strategically placed in Arbor Hill in order to provide outreach directly in the community where help is needed most.

Outreach and Program Efforts include: - Criminal and community justice programs - Hosting a variety of workshops - Providing outreach/referrals for community members - Computers for job and education assistance - Offering re-entry support for formerly incarcerated persons - Services for youth and seniors - Crime prevention tools - Neighborhood resources - The Community Accountability Board - Community Service - Re-entry Outreach - All of the District Attorney Community Initiatives.

AGREEMENT TO RE-AFFIRM AND EXTEND SUB-LEASE
OF PREMISES AT
155 CLINTON AVENUE, ALBANY, NY

BETWEEN

ALBANY HOUSING AUTHORITY
AND
ALBANY COUNTY ON BEHALF OF THE ALBANY COUNTY DISTRICT
ATTORNEY

WHEREAS, the parties heretofore on or about February 1, 2014 entered into a SUB-LEASE of certain premises located at 155 Clinton Avenue, Albany, New York for an initial term of five years expiring on February 28, 2019 with an option allowing the SUB-LESSEE to, upon approval of the Albany County Legislature, extend said SUB-LEASE for one additional Renewal Term of five years; and;

WHEREAS, the SUB-LESSEE, due to the legal confusion resulting from the COVID-19 pandemic laws and regulations, failed to obtain approval of the Albany County Legislature to extend said SUB-LEASE for one additional Renewal Term of five years continued in possession of the premises with the consent of the SUB-LESSOR from March 1, 2019 to the date of this Agreement; and

WHEREAS, the parties have expressed the desire and willingness to, subject to approval of the Albany County Legislature, retroactively reaffirm said SUB-LEASE and allow the SUB-LESSEE to exercise the option to renew and extend said SUB-LEASE for an additional term of five years to expire on the last day of February, 2024; and

WHEREAS, said SUB-LEASE provides that the rent during said Renewal term shall reflect market value and be negotiated between the parties; and

WHEREAS, the parties have agreed that the rent during said Renewal Term shall be Ten Thousand (\$10,000.00) dollars for the first year with an escalation of 2% for each successive year;

NOW, THEREFORE, by reason of and in consideration of the foregoing, it is mutually agreed by and between the parties hereto as follows:

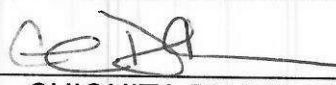
1. SUB-LESSOR Albany Housing Authority and SUB-LESSEE County of Albany on behalf of the Albany County District Attorney hereby agree to retroactively reaffirm said SUB-LEASE and allow the SUB-LESSEE to exercise said option to renew and extend said SUB-LEASE, a copy of which is attached hereto and incorporated herein.
2. The Renewal Term of the said SUB-LEASE shall be deemed to have commenced as of March 1, 2019 and continue through and including the last day of February, 2024.

3. The SUB-LESSEE shall pay to the SUB-LESSOR during the first year of said renewal term of said SUB-LEASE the sum of Ten Thousand (\$10,000.00) dollars which may, at the option of the SUB-LESSEE, be paid in equal monthly installments of \$833.33 payable, in advance, on the first day of each month; which annual rent shall increase at the rate of 2% each successive year, so that the annual rent for the period of March 1, 2023 through February 28, 2024 shall be Ten Thousand Eight Hundred Twenty-Four dollars (\$10,824.00) to be paid in equal monthly installments of \$902.00 payable, in advance, on the first day of each month.
4. All other terms of the said retroactively reaffirmed and renewed SUB-LEASE shall continue in effect through and including the last day of February, 2024.
5. SUB-LESSOR acknowledges receipt of all rent due under this reaffirmed and renewed SUB-LEASE through February 28, 2023.

IN WITNESS WHEREOF, the parties hereto have hereunto set their hands and seals on the day set forth below.

PREMISES SUB-LESSOR:
ALBANY HOUSING AUTHORITY

Dated: _____

By: 
CHIQUITA D'ARBEAU
Executive Director

PREMISES SUB-LESSEE:
COUNTY OF ALBANY ON BEHALF OF
ALBANY COUNTY DISTRICT ATTORNEY

Dated: _____

By: _____
DANIEL P. MCCOY
Albany County Executive

Above Agreement acknowledged and consented to this _____ day of _____, 2023, by the undersigned Premises Owner and Lessor

PREMISES OWNER AND LESSOR:
SWAN STREET MIXED USE LLC

By: 
CHIQUITA D'ARBEAU
Secretary

ACKNOWLEDGEMENTS

STATE OF NEW YORK)
) SS:
COUNTY OF ALBANY)

On the 2nd day of March, 2023, before me, the undersigned, personally appeared CHIQUITA D'ARBEAU personally known to me, or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that she executed the same in her stated capacity, and that by her signature on the instrument, the individual or the person on behalf of ~~which the person acted, executed the instrument.~~

CHRISTINA NOGUERA
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01NO6226049
Qualified in Albany County
Commission Expires AUGUST 02, 2026

Christina Noguera
NOTARY PUBLIC

STATE OF NEW YORK)
) SS:
COUNTY OF ALBANY)

On the _____ day of _____, 2023, before me, the undersigned, personally appeared DANIEL P. MCCOY personally known to me, or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his stated capacity, and that by his signature on the instrument, the individual or the person on behalf of which the person acted, executed the instrument.

NOTARY PUBLIC



Department of Taxation and Finance

May 12, 2023

Mr. Bruce A. Hidley
Albany County Clerk
16 Eagle Street
Albany, NY 12207-1077

Re: Semi-Annual Report for the period October 1, 2022, through March 31, 2023.

Dear Mr. Hidley,

Your joint Semi-Annual Report, NY Form AU-202, which we received on May 10, 2023, is approved. The net amount of \$4,254,067.77 due to the respective tax districts is recognized. The report may be submitted to your County Legislative Body for their action, pursuant to Section 261 of the Tax Law.

Sincerely yours,

Joseph Mayer

Joseph Mayer
Excise Tax Technician 2
Telephone: (518) 862-6074

New York State Mortgage Tax Semi-Annual Report

Part II

County of Albany for the period: 10/1/2022 through 3/31/2023
Cash Statement for Taxes Collected Pursuant to Article 11

DISTRIBUTION STATEMENT: Columns 1 through 5: The taxes collected shown in column 2 were produced by mortgages covering real property in the respective tax districts. Additions and deductions to make adjustments and to correct errors are recorded in columns 3 and 4 respectively. Authority for these additions and deductions is given by the orders of the Tax Department noted on the bottom of this part.

CREDIT STATEMENT: Column 6: This column is the net amount due each tax district, for which the County of Albany shall issue its warrants.

1 Tax Districts	2 Taxes Collected	3 Additions*	4 Deductions*	5 Amount of "Taxes Collected" as adjusted and corrected	6 Net Amount due each tax district
City of Albany	\$ 918,335.65			\$ 918,335.65	\$ 901,631.67
Town of Berne	\$ 28,453.50			\$ 28,453.50	\$ 27,935.95
Town of Bethlehem	\$ 919,249.77			\$ 919,249.77	\$ 902,529.16
Town of Coeymans	\$ 89,875.00			\$ 89,875.00	\$ 88,240.23
City of Cohoes	\$ 160,633.76			\$ 160,633.76	\$ 157,711.93
Town of Colonie	\$ 1,482,403.97			\$ 1,482,403.97	\$ 1,455,439.93
Town of Green Island	\$ 26,473.99			\$ 26,473.99	\$ 25,992.44
Town of Guilderland	\$ 417,736.48			\$ 417,736.48	\$ 410,138.10
Town of Knox	\$ 29,277.99			\$ 29,277.99	\$ 28,745.44
Town of New Scotland	\$ 125,109.50			\$ 125,109.50	\$ 122,833.83
Town of Rensselaerville	\$ 22,369.83			\$ 22,369.83	\$ 21,962.94
City of Watervliet	\$ 80,040.33			\$ 80,040.33	\$ 78,584.44
Town of Westerlo	\$ 32,920.50			\$ 32,920.50	\$ 32,321.70
Total tax districts: 13					
TOTALS:	\$ 4,332,880.27	\$	\$	\$ 4,332,880.27	\$ 4,254,067.77

*see refund, adjustment, and special adjustment orders of Commissioner of Taxation and Finance, case numbers:



Albany County Board of Elections

COMMISSIONERS OF ELECTION
Rachel L. Bledi (R)
Kathleen Donovan (D)

260 S. PEARL ST.
ALBANY, NEW YORK 12202
OFFICE HOURS: 8:30 A.M. TO 4:30 P.M.
TELEPHONE: (518) 487-5060
FAX: (518) 487-5077
WWW.ALBANYCOUNTY.COM /VOTE/

MEMO

TO: Andrew Joyce, Chairman of the Legislature
Dennis Feeney, Majority Leader
Frank Mauriello, Minority Leader
Dave Reilly, Commissioner of Management & Budget

FROM: Rachel Bledi, Board of Elections Republican Commissioner
Kathleen Donovan, Board of Elections Democratic Commissioner

RE: Acquisition of Ballot Printers

DATE: 05/01/2023

Please be advised that the Albany County Board of Elections is seeking approval for the acquisition of ballot printers to print Primary, General and Special Election Ballots as part of our in-house ballot production operation. We received a quote from Konica Minolta, listed as a National Cooperative Contract under Sourcewell, Contract #030321-KON, for \$153,672.93. The price includes three (3) high-speed printers: 2 Monochrome Printers and 1 Color Printer, along with periphery software and a service contract.

The printers will be replacing aging equipment, originally purchased in 2013. The in-house ballot production operation has saved the county over \$1 million in ballot printing costs. Due to these ongoing savings, the cost of the ballot printers will recoup in two election cycles. Funding for the printers was appropriated in the 2023 budget.

REQUEST FOR LEGISLATIVE ACTION

Contract Authorization with Konica Minolta for Board of Elections for Purchase of Ballot Printers

Date: 05/01/2023
Submitted By: Rachel Bledi and Kathleen Donovan
Department: Board of Elections
Title: Commissioners of Elections
Phone: 518-487-5070
Department Rep.
Attending Meeting: Rachel Bledi and Kathleen Donovan

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) _____
-

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):

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

Increase Account/Line No.:

Source of Funds:

Title Change: _____

CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:

- ☐ Change Order/Contract Amendment
- ☒ Purchase (Equipment/Supplies)
- ☐ Lease (Equipment/Supplies)
- ☐ Requirements
- ☒ Professional Services
- ☐ Education/Training
- ☐ Grant

Submission Date Deadline

- ☐ Settlement of a Claim
 - ☐ Release of Liability
 - ☐ Other: (state if not listed)
-

Contract Terms/Conditions:

Party: Konica Minolta, 475 Kilvert St., Warwick, RI 02866

Additional Parties (Names/addresses):

Amount/Raise Schedule/Fee: \$153,672.93

Scope of Services: The Albany County Board of Elections is seeking approval for the acquisition of ballot printers, used to print Primary, General and Special Election Ballots as part of our in-house ballot production operation. We received a quote from Konica Minolta, listed as a National Cooperative Contract under Sourcewell, Contract #030321-KON, for \$153,672.93. The price includes three (3) high-speed printers: 2 Monochrome Printers and 1 Color Printer, along with periphery software and a service contract.

Bond Res. No.:

Date of Adoption:

CONCERNING ALL REQUESTS

Mandated Program/Service: Yes ☐ No ☒

If Mandated Cite Authority:

Is there a Fiscal Impact: Yes ☒ No ☐

Anticipated in Current Budget: Yes ☒ No ☐

County Budget Accounts:

Revenue Account and Line:

Revenue Amount:

Appropriation Account and Line: A1450 22001

Appropriation Amount: \$235,000

Source of Funding – (Percentages)

Federal:
State:
County: 100%
Local:

Term

Term: (Start and end date) 06/01/2023- 06/01/2025
Length of Contract: 2 years

Impact on Pending Litigation Yes ☐ No ☒
If yes, explain:

Previous requests for Identical or Similar Action:

Resolution/Law Number:
Date of Adoption:

Justification: (state briefly why legislative action is requested)

The Albany County Board of Elections is seeking approval for the acquisition of ballot printers, used to print Primary, General and Special Election Ballots as part of our in-house ballot production operation. We received a quote from Konica Minolta, listed as a National Cooperative Contract under Sourcewell, Contract #030321-KON, for \$153,672.93. Given the cost is above \$100,000, legislative approval is required for the purchase. The price includes three (3) high-speed printers: 2 Monochrome Printers and 1 Color Printer, along with periphery software and a service contract.



Konica Minolta Professional Color and Monochrome Printing Proposal

Prepared Exclusively For:

Albany County Board of Elections

The information presented in this proposal is confidential. Distribution of any information contained herein is prohibited without written permission of Konica Minolta Business Solutions, Inc.

Confidential

Prepared by:

Jim Bender
Senior Account Executive

Joe Urbanski
Production Solutions Consultant

Mike Chaisson
Sr Production Print Executive

Date Presented:
April 19, 2023



April 19, 2023

Debora Banks
Albany County Board of Elections
260 South Pearl Street
Albany, NY 12202

Dear Debora,

Thank you for the opportunity to present the Konica Minolta proposal to address the color and black & white production printing requirements of the Albany County Board of Elections. Based on our meeting of last week, there were a few changes to the configuration that added to the total cost as compared to the previous proposal. In addition, as we discussed, I have included 2 years of Print Shop mail. Our proposal provides the Albany County Board of Elections with new, best-in-class print technology and is **under Sourcewell Cooperative Contract #030321-KON**.

Also – note, the C4070 needs three (3) 15 amp outlets and one (1) 30 amp outlet. The 6036 needs two (2) 15 amp outlets and one (1) 30 amp outlet (per device).

Comprehensive service program and full training **is included** in the below pricing.

Konica Minolta is pleased to offer the Albany Board of Elections the following products to accommodate your critical applications and production requirements.

Color Production Device: Konica Minolta AccurioPress C4070

Operating at speeds up to 70 ppm and supporting a maximum duty cycle of 864K impressions per month, the Konica Minolta AccurioPress C4070 represents game-changing technology in this class of digital color print technology.

Expanding your capabilities is simple with the AccurioPress C4070. This versatile and scalable digital press allows you to take advantage of the widest variety of paper stocks critical in the production of marketing collateral, business cards, etc. The AccurioPress C4070 produces stunning quality to impress your constituents with every printed page. The AccurioPress C4070 will run at full-rated speeds on media from 62 –216 gsm. Our 4th generation Simitri High Definition Enhanced toner enables best-in-class image quality while opening up a larger gamut of colors. Registration accuracy is improved through a new registration mechanism that improves both customer productivity and parts life. A new static-elimination unit greatly reduces static electricity that can occur in the digital printing

process, providing your organization with the opportunity to develop more creative marketing applications on new types of media.

Our proposed Konica Minolta C4070 is configured with a 3-drawer vacuum paper feed deck with air assistance. Vacuum paper feeding allows for the reliable feeding of a variety of substrates up to 350 gsm, or 16 pt. substrate. This robust paper feed unit provides over 4,600 sheets of input capacity. Coupled with the 2 paper drawers located in the main engine, this configuration will support a total of approximately 6,100 sheets through 5 trays. The vacuum paper feed deck will accommodate up to 13 x 19" paper.

Monochrome Production Device: Konica Minolta AccurioPress 6136

The Konica Minolta 6136 features many innovations that produce unmatched print quality. Those innovations include the extremely precise LED print head with impressive 1200 dpi resolution, advanced transfer belt technology and Konica Minolta's unique enhanced screening technology that sharply boosts detailed text and screen gradation quality.

The AccurioPress 6136 features ultra-precise front-to-back registration adjustment allowing operators to control image rotation and adjust for skew.

With a maximum monthly duty cycle of over 3 million impressions per month, the AccurioPress 6136 brings quality, durability and speed to address your most urgent print demands. Specification sheet is attached.

Thank you again for allowing Konica Minolta the opportunity to present our recommendations to the Albany Board of Elections. We greatly appreciate the time you have afforded us. We look forward to working with you and expanding our partnership with you.

Sincerely,

Jim Bender
Major Account Executive
Konica Minolta Business Solutions
475 Kilvert Street
Warwick, RI 02886
(617) 549-6605

All pricing is valid for a period of 30 days from date of proposal.

Recommended Equipment

Konica Minolta AccurioPress C4070 COLOR DEVICE



The equipment configuration listed below was prepared exclusively for the production color printing requirements of Albany Board of Elections. Our recommended Konica Minolta AccurioPress C4070 includes the following:

- 70ppm Color Digital Press with Document Feeder
- EFI Fiery Controller with video interface controller
- PF-707 Vacuum Feed Paper Unit with 3 trays totaling approx. 4,600 sheets
- 2 paper trays in main body for a total of 1,500-sheet capacity. Substrate weights from 62 – 256 gsm.
- Static elimination unit for improving in-line and off-line finishing operations
- FS-532 Staple Finisher,
- All required power filters
- Delivery and Konica Minolta Professional Installation and **Training** Services Included.

Pricing / Configuration:

Konica Minolta AccurioPress C4070 – Color Device

Sourcewell Main Item #AC58011 AccurioPress C4070

AAMPWY1 – Auto Duplex Document Feeder (DF-713)
 ACMHWY1 – HDD (UK-112)
 A55CWY3 – Paper Feed Unit (PF-707M)
 A9CEWY2 – Relay Unit with Banner Output (RU-518)
 A4F3WY6 – Staple Finisher (FS-532M)
 A0H0W12 – Multi Folding Unit (FD-503)
 A0H2WY3 – Saddle Stitch Unit (SD-506)
 A4FCWY2 – Relay Unit (RU-510)
 ACAXWY2 – EFI Fiery Server Controller (IC-317)
 45206712 – Fiery Impose without ACRBT-PTSTP
 45219823 – Adobe Acrobat Pro 2020 for Fiery Makerdy
 ACMKWY1 – Video Interface for Controller (VI-515)
 45202146 – Kit Option ES-3000 Hardware Only
 7640020218 - Expert Color Production Training
 7640012602 – Professional Services
 W1000015120 - PowerFilter w/Noise & Surge Protect 120V/15A (qty 3)
 P350030240SIG – IP Enabled Intrfc wsigsenseMOD 240V/30A

AccurioPress C4070 Purchase Price

\$69,152.33

All Inclusive Service Contract; Includes:

All parts, labor, maintenance, installation, training, delivery and supplies (Excludes Paper)

Color pages billed @ .040

B & W pages billed @ .010

Monthly Service Charge for Saddle Stitch Finisher of \$70/month

Recommended Equipment

Konica Minolta AccurioPress 6136 – Black & White Device



The equipment configuration listed below was prepared exclusively for the production monochrome printing requirements of the Albany Board of Elections. Our recommended Konica Minolta AccurioPress 6136 includes the following:

- 136ppm Monochrome Digital Press with Document Feeder
- PF-710 Vacuum Feed Paper Unit with 3 trays totaling approx. 5,000 Sheets
- 2 paper trays in main body for a total of 3,000-sheet capacity and By-pass Tray
- Handling substrate weights from 62 – 350 gsm.
- Static elimination unit for improving in-line and off-line finishing operations
- FS-532 Staple Finisher, FS-525 Hole Punching (on one device) and SD-510 Booklet Making Capability
- All required power filters
- Delivery and Konica Minolta Professional Installation and **Training** Services

Pricing / Configuration:

Konica Minolta AccurioPress 6136 (Qty of 2) Black & White Device

Sourcewell Main Item #A9JT011 AccurioPress 6136

A9JXWY1 – Paper Feed Unit (PF-710)

A9CEWY2 – Relay Unit (RU-518M)

A4F3WY6 – 100 Sheet Staple Finisher (FS-532M)

A4FCWY2 – Relay Unit (RU-510)

AC8UW11 – Punch Kit (PK-525) – Only on ONE (1) machine

7640012599 – Professional Services

W1000015120 - PowerFilter w/Noise & Surge Protect 120V/15A (qty 2)

P350030240SIG – IP Enabled Intrfc wsigsenseMOD 240V/30A

AccurioPress 6136 withOUT Hole Punch Purchase Price:	\$38,628.17
AccurioPress 6136 WITH Hold Punch:	\$38,903.43

All Inclusive Service Contract; Includes:

All parts, labor, maintenance, installation, training, delivery and supplies (Excludes Paper),

B & W pages billed @ .0039

Single click per impression up to 13" x 19"

Total Investment Summary

	<u>Purchase Price</u>
➤ One (1) Konica Minolta AccurioPress C4070 (Color)	\$ 69,152.33
➤ One (1) Konica Minolta AccurioPress 6136 (Monochrome)	\$ 38,628.17
➤ One (1) Konica Minolta AccurioPress 6136 (Monochrome)	\$ 38,903.43
➤ Print Shop Mail Renewal and Re-entry (2 years)	<u>\$ 6,989.00</u>
Total Price	\$153,672.93

The Konica Minolta Service Team

The Konica Minolta Service Team provides:

- ✓ Superior disciplined practices and tools
- ✓ Superior technical ability from training and tenure
- ✓ Konica Minolta ESP as a platform for the next decade in service
- ✓ Support in a customer centric culture



Konica Minolta has implemented state-of-the-art mobile technology to better serve our customers. The ESP device enables KMBS service technicians the ability to provide real-time service dispatch and scheduling, on-site access to customer account info and parts availability as well as product information and user guides that ultimately allow KMBS to provide an enhanced service experience that is second to none.

The ESP Platform consists of:

- ✓ Full function handheld device
- ✓ Custom designed software
- ✓ Server interface infrastructure
- ✓ Management tools
- ✓ Functionality designed to support the service delivery process

The usage of this tool allows KMBS to provide increased customer satisfaction and a more complete service delivery driven by a better-informed technician. With the ESP, your KMBS service technician will have access to spare parts information and quick part searches, real time call updates from and to the technician so you know the status of your request at all times and the technician is able to finish the call while at the customer site by gathering an electronic customer signature and generating an email of the service order report in real time.

Clean Planet

A smaller eco-footprint is to everyone's advantage

Count on Konica Minolta for products, programs, policies and results that benefit our customers and protect our planet. We're a worldwide technology leader. And with over 37,000 employees in 40 countries, our collective goal is to conduct business activities in harmony with our global vision for social responsibility. To that end, we've taken bold steps to protect the environment.

- ✓ Promoting recycling by paying all costs ourselves
- ✓ Reducing CO2 emissions by up to 20% in 2015 – and up to 70% by 2050
- ✓ Minimizing pollutants in manufacturing processes
- ✓ Creating products that save energy in operation
- ✓ Committing to programs that safeguard the planet for generations to come

Our industry awards and environmental certification achievements have proved that we're making a difference.

The Konica Minolta Clean Planet Recycling Program

A cost-free plan for our clients

Our Clean Planet Recycling Program covers all consumables from every Konica Minolta product – not just spent toner cartridges but waste toner boxes, imaging units, developer or developer units and drums too. The program is designed to keep these recycling materials out of landfills and off the road as much as possible, and it's the industry's first **cost-free plan!**

We provide you with recycling containers and pay for the return shipping one of our many regional recycling centers. Whether you have a single Konica Minolta desktop printer, an entire fleet of bizhub MFPs, bizhub PRO or AccurioPress production print equipment, you'll be able to recycle your consumables in a simple way:

- ✓ **For our small and home office customers** – Single consumable items are recycled by printing a postage-paid UPS label downloaded from www.cleanplanetus.com. Simply apply it to the new box containing the used consumable item and ship via UPS.
- ✓ **For our mid-sized customers** – Clean Planet Recycling Containers designed to hold 10 - 15 items are ordered from www.cleanplanetus.com. Just assemble a box and reusable lid and place it in your office. When the box is full, simply print out a UPS label from www.cleanplanetus.com, apply it to the box and ship via UPS.
- ✓ **For our high-volume customers** – we can arrange for the delivery and pickup of recycling pallets that hold a larger quantity of consumable items.

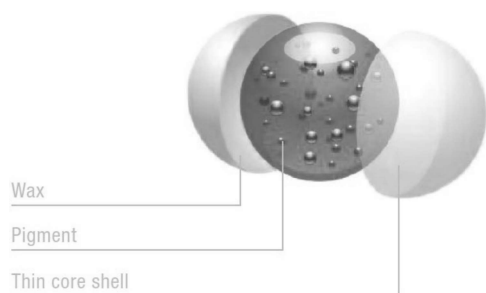


to

Wondering what address to put on your shipping label? No worries – we've automated the process so it's easy for you. Rather than have you ship your consumables to one centralized recycling location, we've partnered with several approved facilities across the country. So

when you print out a shipping label it already contains the address for the closest facility to your location. Our approach minimizes energy and fuel use associated with the transport and shipping of your recyclables, thus further limiting the carbon footprint impact!

Simitri HD High Definition Polymerized Toner with Biomass



SIMITRI HD TONER: The thin core shell allows toner particles to fuse more quickly.

Simitri HD

Simitri with biomass – a better way to make an impression

Konica Minolta introduced Simitri® toner in 2000. Right from the start, it was produced using plant-based “biomass,” a renewable organic resource that has less environmental impact than conventional toners. Further, Simitri toner was also the world’s first polymerized toner, designed for low-temperature fusing with smaller, more uniform particles. Smaller particles and more efficient low-temperature fusing increase image resolution while reducing environmental impact. And because low-temperature fusing consumes less energy, it reduces your power consumption, thus protecting the environment, and protecting your bottom line.

Finally, the production process that creates Simitri toner generates nearly 40% less carbon dioxide – reducing output of a gas that contributes to global warming.

The Konica Minolta CSR Report



Corporate Social Responsibility

Our management policies are dynamic – and Konica Minolta continues to move forward with new environmental initiatives that cover a wide range of corporate activities. In addition to regular environmental reports made available on our corporate website, we produce a comprehensive Corporate Social Responsibility (CSR) report that summarizes environmental policies, energy-saving innovations, product safety enhancements, emission-reduction programs, recycling initiatives, social welfare programs and many other CSR activities. To obtain a copy of this report, as well as other

comprehensive environmental information, please visit:

<http://www.konicaminolta.com/about/environment>

Introducing the ONE GUARANTEE That Puts The Customer First.



KONICA MINOLTA

CUSTOMER ONE GUARANTEE

We believe the best customer experience comes from not only how our products perform and how easy they are to use, but also from giving our customers the peace of mind to know that our MFP are backed by the best guarantee in the industry. So when your new MFP arrives, you'll know you are getting the latest technology, superior service and support and a lease-long guarantee, direct from the manufacturer.

"It Works or It Walks"

We are so confident in the quality of our products that we guarantee your Konica Minolta MFP will (1) meet factory specifications and (2) be compatible with your network, or we'll replace it with an equivalent model:

- First two years: replacement will be a brand new MFP
- After two years: replacement may be new or refurbished
- Plus, Konica Minolta will also provide a \$1,000 credit towards your next Konica Minolta MFP as a way to say "we're sorry for the inconvenience."

We've Got You Covered

The best customer experience is one that avoids problems altogether which is why we've established remote monitoring and a rapid response process in conjunction with your local sales representative.

- Our Solutions & Support team will proactively monitor our installed MFP's performance, looking to identify potential issues before they become problems for our customers.
- Should a problem arise, our technical support, local service manager and advanced diagnostics team members are all empowered to authorize a replacement, allowing for a fast and easy resolution.

To learn more about the Konica Minolta Customer One Guarantee, contact your local sales representative.





DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
WATER PURIFICATION DISTRICT
1 CANAL ROAD, SOUTH
ALBANY, NEW YORK 12204
REMITTANCE: 112 STATE ST., BASEMENT, ALBANY, NY 12207
PHONE: (518) 447-1611 FAX: (518) 433-0369
www.albanycounty.com

COMMISSION
DENNIS RIGOSU
CHAIRMAN

JOHN W. BISHOP, JR.
NICHOLAS W. FOGLIA
MAGGIE ALIX
CHARLES G. CARLUCCIO

ANGELO GAUDIO, P.E.
EXECUTIVE DIRECTOR

April 26, 2023

Hon. Andrew Joyce
Chairman
Albany County Legislature
112 State Street – Suite 710
Albany, New York 12207

**Re: Budget Amendment – Sluice Gate Replacement
Beaver Creek Phase 2A – Change Order**

Dear Mr. Joyce

The Albany County Water Purification District (District) is requesting approval of a budget amendment for the transfer of \$343,740 from the District's Fund Balance to the Equipment Repair Line to pay for change order work associated with the installation of new sluice gates under the Beaver Creek Phase 2A project. During the installation of the new gates it was discovered that existing wetwell wall did not match the existing record drawings and custom stainless steel mounting plates needed to be fabricated to allow installation of the gates. The requested transfer amount is to cover the change order costs of the new fabricated mounting plates, a water valve repair, bypass pumping and associated labor. A summary of the transfer request is as follows:

Budget Transfer:

<i>Decrease Fund Balance:</i>	<i>\$ 343,740</i>
<i>Increase Equipment Repair Line (8130.4.4070)</i>	<i>\$ 343,740</i>

The new sluice gates have been successfully installed and will allow the District to move forward with critical valve and pump repairs to the South Plants influent pump station. As the Albany Water Board holds the construction contract, the money associated with the gate installations and change orders will be paid to the Albany Water Board as a pass-through payment to the contractor.

If you have any questions or concerns you may reach me at (518) 447-1617.

Sincerely,

Angelo Gaudio, P.E.
Executive Director

cc: Dennis A. Feeney, Majority Leader
Rebekah Kennedy, Majority Counsel
Frank Mauriello, Minority Leader
Arnis Zilgme, Minority Counsel

Enc: Budget Amendment Form



CITY OF ALBANY
DEPARTMENT OF WATER & WATER SUPPLY
10 NORTH ENTERPRISE DRIVE
ALBANY, NY 12204
TELEPHONE (518) 434-5300 | FAX (518) 434-5332

KATHY M. SHEEHAN
MAYOR

JOSEPH E. COFFEY, JR., P.E.
COMMISSIONER

CHANGE DIRECTIVE/FIELD ORDER			
Date:	April 20, 2023	Change Directive #:	CD - 2a - 04
Contractor Name:	Wm. J Keller & Sons Construction	Description:	Second Bypass Pumping
Contact:	Jameson Phillips	Project Name:	Beaver Creek Clean River Phase 2a
Address:	1435 Route 9 Castleton, NY 12033	Project Location:	ACWPD South Treatment Plant 209 Church St, Albany, NY
Basis of Change:		Cost Basis:	
☐ Error/Omission ☒ Differing Site Condition ☐ Owner Request ☐ Field Resolution ☐ Value Engineering ☐ _____		☒ Time & Material Not to Exceed ☐ Fixed Price ☐ Unit Price	
Funding Source for the Change:			
☐ Allowance		☒ Change Order	CO - 2a - 03
Total Allowance:	\$	Add:	\$ 136,175.00
Allowance Less Previous Change:	\$	Deduct:	\$ 0.00
Allowance Used for this Change:	\$	Adjustment to Contract Time:	
Remaining Allowance:	\$	☒ No Change ____ Days Added ____ Days Deduct	
Your company is authorized and directed to proceed with the following: Leave bypass system in place on standby during the manufacture of the gate modification pieces. Rent and fuel equipment to perform all activities to run bypass through a second construction period to complete the work. Reclean the wet well.			
Justification: During the first bypass operation the wet well gates could not be installed as manufactured and a modification piece was necessary, additionally issues with the first bypass made it difficult to work. A month of standby time and an additional 10 days of bypass was necessary to complete the work. Three days of pump time are attributed to bid work in the estimate.			
Attachment:	Change 2a-04	Number of Pages:	5
<i>This Change Directive identifies satisfaction of all compensation and time adjustments related to the change in the Work.</i>			

Engineer Name: Joshua LaPlante Signature: _____ Date: _____

Owner: Name: Rebecca Caldon Signature:  Digitally signed by Rebecca Caldon
Date: 2023.04.20 15:26:05 -04'00' Date: 04/20/23

Contractor: Name: _____ Signature: _____ Date: _____



CITY OF ALBANY
DEPARTMENT OF WATER & WATER SUPPLY
10 NORTH ENTERPRISE DRIVE
ALBANY, NY 12204
TELEPHONE (518) 434-5300 | FAX (518) 434-5332

KATHY M. SHEEHAN
MAYOR

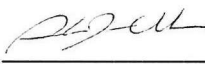
JOSEPH E. COFFEY, JR., P.E.
COMMISSIONER

CHANGE DIRECTIVE/FIELD ORDER			
Date:	April 20, 2023	Change Directive #:	CD - 2a - 05
Contractor Name:	Wm. J Keller & Sons Construction	Description:	Additional Labor Second Bypass
Contact:	Jameson Phillips	Project Name:	Beaver Creek Clean River Phase 2a
Address:	1435 Route 9 Castleton, NY 12033	Project Location:	ACWPD South Treatment Plant 209 Church St, Albany, NY

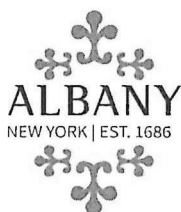
Basis of Change:	Cost Basis:
☐ Error/Omission ☒ Differing Site Condition ☐ Owner Request ☐ Field Resolution ☐ Value Engineering ☐ _____	☒ Time & Material Not to Exceed ☐ Fixed Price ☐ Unit Price

Funding Source for the Change:			
☐ Allowance		☒ Change Order	CO - 2a - 03
Total Allowance:	\$	Add:	\$ 88,792.00
Allowance Less Previous Change:	\$	Deduct:	\$ 0.00
Allowance Used for this Change:	\$	Adjustment to Contract Time:	
Remaining Allowance:	\$	☒ No Change ____ Days Added ____ Days Deduct	
Your company is authorized and directed to proceed with the following: Bill for the labor associated with the installation and maintenance of the second bypass operation, the installation of the modification pieces for the wet well gates, and the change in location for the flowmeter.			
Justification: The original project was planned under a single bypass operation but due to the need to manufacture modification pieces for the wet well gates the bypass was shut down to manufacture the pieces. Additional work was also performed to install the additional pieces, and other additional work. This was calculated as a percentage of total work during that bypass.			
Attachment:	Change 2a-05	Number of Pages:	9
<i>This Change Directive identifies satisfaction of all compensation and time adjustments related to the change in the Work.</i>			

Engineer Name: Joshua LaPlante Signature: _____ Date: _____

Owner: Name: Rebecca Caldon Signature:  Digitally signed by Rebecca Caldon
Date: 2023.04.20 14:13:51 -04'00' Date: 04/20/23

Contractor: Name: _____ Signature: _____ Date: _____



CITY OF ALBANY
DEPARTMENT OF WATER & WATER SUPPLY
10 NORTH ENTERPRISE DRIVE
ALBANY, NY 12204
TELEPHONE (518) 434-5300 | FAX (518) 434-5332

KATHY M. SHEEHAN
MAYOR

JOSEPH E. COFFEY, JR., P.E.
COMMISSIONER

CHANGE DIRECTIVE/FIELD ORDER			
Date:	April 20, 2023	Change Directive #:	CD - 2a - 05
Contractor Name:	Wm. J Keller & Sons Construction	Description:	Slide Gate Adapter Plates
Contact:	Jameson Phillips	Project Name:	Beaver Creek Clean River Phase 2a
Address:	1435 Route 9 Castleton, NY 12033	Project Location:	ACWPD South Treatment Plant 209 Church St, Albany, NY

Basis of Change: ☐ Error/Omission ☒ Differing Site Condition ☐ Owner Request ☐ Field Resolution ☐ Value Engineering ☐ _____	Cost Basis: ☐ Time & Material Not to Exceed ☒ Fixed Price ☐ Unit Price
--	--

Funding Source for the Change:			
☐ Allowance		☒ Change Order	CO - 2a - 03
Total Allowance:	\$	Add:	\$ 104,170.00
Allowance Less Previous Change:	\$	Deduct:	\$ 0.00
Allowance Used for this Change:	\$	Adjustment to Contract Time:	
Remaining Allowance:	\$	☒ No Change ____ Days Added ____ Days Deduct	

Your company is authorized and directed to proceed with the following:

Manufacture and supply modification pieces for the two (2) wet well slide gates inside the sewer treatment facility. This change is for the production and delivery of the modification pieces with the installation labor represented in CD-2a-04.

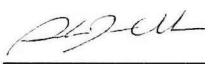
Justification:

The wall of the wet well was shown with a bump out below the effluent level. The gate was shown attached to the bumped out concrete wall in the plant drawing. Once under bypass it was determined that the wall jogged back and the manufactured gates would not fit on the existing wall as planned.

Attachment: Change 2a-06	Number of Pages: 9
---------------------------------	---------------------------

This Change Directive identifies satisfaction of all compensation and time adjustments related to the change in the Work.

Engineer Name: Joshua LaPlante Signature: _____ Date: _____

Owner: Name: Rebecca Caldon Signature:  Digitally signed by Rebecca Caldon
Date: 2023.04.20 14:02:11 -04'00' Date: 04/20/23

Contractor: Name: _____ Signature: _____ Date: _____



CITY OF ALBANY
DEPARTMENT OF WATER & WATER SUPPLY
10 NORTH ENTERPRISE DRIVE
ALBANY, NY 12204
TELEPHONE (518) 434-5300 | FAX (518) 434-5332

KATHY M. SHEEHAN
MAYOR

JOSEPH E. COFFEY, JR., P.E.
COMMISSIONER

CHANGE DIRECTIVE/FIELD ORDER			
Date:	April 20, 2023	Change Directive #:	CD - 2a - 03
Contractor Name:	Wm. J Keller & Sons Construction	Description:	Plant Water Valve Replacement
Contact:	Jameson Phillips	Project Name:	Beaver Creek Clean River Phase 2a
Address:	1435 Route 9 Castleton, NY 12033	Project Location:	ACWPD South Treatment Plant 209 Church St, Albany, NY

Basis of Change:		Cost Basis:	
☐ Error/Omission	☐ Differing Site Condition	☒ Time & Material Not to Exceed	
☐ Owner Request	☒ Field Resolution	☐ Fixed Price	
☐ Value Engineering	☐ Contract Spec Change	☐ Unit Price	

Funding Source for the Change:			
☐ Allowance		☒ Change Order	CO - 2a - 03
Total Allowance:	\$	Add:	\$ 14,603.00
Allowance Less Previous Change:	\$	Deduct:	\$ 0.00
Allowance Used for this Change:	\$	Adjustment to Contract Time:	
Remaining Allowance:	\$	☒ No Change ____ Days Added ____ Days Deduct	

Your company is authorized and directed to proceed with the following:

Purchase and perform work to replace the plant water valve and any associated pipe that is in poor condition at the grit driveway in front of the administration building. The valve broke when it was used to isolate the cut in for the new hydrant.

Justification:

During operation of the valve to perform bid work the valve started leaking excessively. The County did not have the personnel or equipment too perform the work so the work was planned with Keller on a T&M basis.

Attachment: Change 2a-03	Number of Pages: 12
---------------------------------	----------------------------

This Change Directive identifies satisfaction of all compensation and time adjustments related to the change in the Work.

Engineer Name: Joshua LaPlante Signature: _____ Date: _____

Owner: Name: Rebecca Caldon Signature: Date: 04/20/23

Contractor: Name: _____ Signature: _____ Date: _____

Digitally signed by Rebecca
Caldon
Date: 2023.04.20 14:46:16 -04'00'

RESOLUTION NO. 442

AMENDING THE 2021 WATER PURIFICATION BUDGET: EQUIPMENT REPAIR

Introduced: 11/8/21

By Audit and Finance Committee:

WHEREAS, The Director of the Water Purification District has indicated that the installation of two new sluice gates at the South Plant's wetwell will be necessary as part of the Beaver Creek Phase II Project, and

WHEREAS, The Director has requested a budget amendment in order to continue with the Beaver Creek Phase II Project, now, therefore, be it

RESOLVED, By the Albany County Legislature, that the 2021 Water Purification Budget is hereby amended as follows:

Decrease Appropriation Account G8130.4 by \$125,000 by decreasing Line Item G8130 4 4101 Electric by \$125,000

Increase Appropriation Account G8130.4 by \$125,000 by increasing Line Item G8130 4 4070 Equipment Repair by \$125,000

and, be it further

RESOLVED, That the Clerk of the County Legislature is directed to forward certified copies of this resolution to the appropriate County Officials.

Adopted by unanimous vote – 11/8/21

State of New York
County of Albany

This is to certify that I, the undersigned, Clerk of the Albany County Legislature, have compared the foregoing copy of the resolution and/or local law with the original resolution and/or local law now on file in the office, and which was passed by the Legislature of said County on the 8th day of November, 2021, a majority of all members elected to the Legislature voting in favor thereof, and that the same is a correct and true transcript of such original resolution and/or local law and the whole thereof.



IN WITNESS THEREOF, I have hereunto set my hand and the official seal of the County Legislature this 9th day of November, 2021.

A handwritten signature in cursive script, reading "Nicole Chamberlain", is written over a horizontal line.

Clerk, Albany County Legislature



County of Albany

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

Legislation Text

File #: TMP-4247, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

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

Budget amendment for the transfer of fund balance funds to cover costs associated with the Beaver Creek Phase 2A project that is being done in conjunction with the Albany Water Board.

Date: 4/27/23
Submitted By: Angelo Gaudio
Department: Water Purification District
Title: Executive Director
Phone: 518-447-1624
Department Rep. Angelo Gaudio
Attending Meeting: Angelo Gaudio

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.: 8130.4.4070 (Equipment Repair Line)
Source of Funds: Undesignated Fund Balance
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):
Click or tap here to enter text.

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee: Click or tap here to enter text.
Scope of Services: Click or tap here to enter text.

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: Click or tap here to enter text.

Is there a Fiscal Impact: Yes ☒ No ☐
Anticipated in Current Budget: Yes ☐ No ☒

County Budget Accounts:

Revenue Account and Line: Appropriate Fund Balance
Revenue Amount: \$343,740

Appropriation Account and Line: G8130.4.4070 Equipment Repair
Appropriation Amount: \$343,740

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) Click or tap here to enter text.
Length of Contract: Click or tap here to enter text.

Impact on Pending Litigation

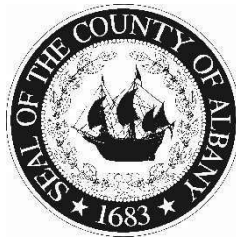
If yes, explain: Yes ☐ No ☐
Click or tap here to enter text.

Previous requests for Identical or Similar Action:

Resolution/Law Number: Resolution 442 of 21
Date of Adoption: 11/8/21

Justification: (state briefly why legislative action is requested)

Transfer amount is to cover cost associated with change orders associated with the Beaver Creek Phase 2A project that is be administered by the Albany Water Board under the Albany Pool Long Term Control Plan. Change orders cover cost associated with the fabrication of custom sluice gate mounting plates, bypass pumping, and valve repair work that was need to complete the gate installation work.



DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
DEPARTMENT OF MANAGEMENT AND BUDGET
112 STATE STREET, SUITE 1200
ALBANY, NEW YORK 12207
OFFICE: (518) 447-5525
FAX: (518) 447-5589
www.albanycounty.com

PATRICK ALDERSON
DEPUTY COMMISSIONER

M. DAVID REILLY, JR.
COMMISSIONER

May 1, 2023

Honorable Andrew Joyce, Chairman
Albany County Legislature
112 State Street, Room 710
Albany, New York 12207

Dear Chairman Joyce,

As part of the State FY2023 budget, New York State created a Health Care and Mental Hygiene Worker Bonus (HWB) Program, allocating \$1.2 billion in funding for the payment of bonuses for certain frontline healthcare workers. The NYS HWB Program allows for bonus payments to "recruit, retain, and reward health care and mental hygiene workers" who meet specific eligibility requirements as set forth in Part ZZ of Chapter 56 of the Laws of 2022. Bonus amounts are commensurate with the number of hours worked by eligible workers covered by the HWB Program during designated vesting periods, up to a total of \$3,000 per covered worker.

Some County Departments are "eligible employers" due to the nature of their work. County Departments determine whether their operations met the qualifying employer criteria and identify eligible employees based on titles prescribed by NYS. Departments then submit claims on behalf of eligible employees to NYS by the due date for the vesting period – for the third vesting period, claims are due 5/1/2023. For this vesting period, County Departments submitted 83 claims on behalf of employees for a total of \$105,000 in bonus payments. Additionally, the County is anticipating receiving reimbursement for FICA contributions at 7.65%, equivalent to \$8,041. In total, Albany County departments are anticipating receiving \$113,041 from NYS for the third vesting period of the HWB program. Currently NYS is reviewing the claims submitted on behalf of County employees and will remit payment to the eligible County Departments. Once the County has received payment from NYS, we must pay bonuses to employees no later than 30 days afterwards.

This request to amend the 2023 County Budget adds the necessary personnel non-individual and fringe appropriations and revenue lines to each respective department's budget in anticipation of prompt payment of the NYS HWB bonus for vesting period 3 (October 1, 2022 – March 31, 2023) to eligible employees. Departments who weren't able to file on behalf of eligible employees for the first or second vesting periods, were able to submit those claims during this cycle, which are reflected in this request for legislative action.

Should you have any questions, please don't hesitate to reach out.

Sincerely,

M. David Reilly
Commissioner, Management & Budget

cc: Hon. Dennis A. Feeney, Majority Leader
Hon. Frank A. Mauriello, Minority Leader
Rebekah Kennedy, Majority Counsel
Arnis Zilgme, Minority Counsel



County of Albany

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

Legislation Text

File #: TMP-4243, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Health Care Worker Bonus Program: Vesting Period 3

Date: 4/25/2023
Submitted By: Zak Smetana
Department: Management and Budget
Title: Budget Analyst
Phone: 518-447-7031
Department Rep.
Attending Meeting: Zak Smetana and David Reilly

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.: See attached Budget Amendment
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):
Click or tap here to enter text.

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee: Click or tap here to enter text.
Scope of Services: Click or tap here to enter text.

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: Click or tap here to enter text.

Is there a Fiscal Impact: Yes ☒ No ☐
Anticipated in Current Budget: Yes ☐ No ☒

County Budget Accounts:

Revenue Account and Line: See attached Budget Amendment
Revenue Amount: \$113,041.00

Appropriation Account and Line: See attached Budget Amendment
Appropriation Amount: \$113,041.00

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.

Term

Term: (Start and end date) Click or tap here to enter text.
Length of Contract: Click or tap here to enter text.

Impact on Pending Litigation

If yes, explain: Yes ☐ No ☒
Click or tap here to enter text.

Previous requests for Identical or Similar Action:

Resolution/Law Number: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

Justification: (state briefly why legislative action is requested)

We are requesting to amend the budgets for Department of Children, Youth & Families, Mental Health, Health, Shaker Place Rehabilitation and Nursing Center, and the Sheriff's Office to accommodate the New York State Health Care and Mental Hygiene Worker Bonus Program for the third vesting period.

Employers are required to submit claims for bonus payments for their qualified employees. The State then issues bonus payments to employers, who then distribute the bonus payments to the qualified employees.

The third vesting period was October 1, 2022 - March 31, 2023. A qualified employee is eligible for up to two vesting periods per employer. The maximum any employee may receive is \$3,000.

APPROPRIATIONS

ACCOUNT NO.		RESOLUTION DESCRIPTION	INCREASE	DECREASE	UNIT COST	DEPARTMENT NAME
A9	4059	1 9916	NYS HC & MH Worker Bonus Prg	6,000.00	6,000.00	Children, Youth and Families
A9	4059	8 9030	Social Security	460.00	96,419.00	Children, Youth and Families
A9	6119	1 9916	NYS HC & MH Worker Bonus Prg	3,000.00	3,000.00	Children, Youth and Families
A9	6119	8 9030	Social Security	230.00	810,206.00	Children, Youth and Families
A9	4310	1 9916	NYS HC & MH Worker Bonus Prg	18,000.00	18,000.00	Mental Health
A9	4310	8 9030	Social Security	1,380.00	498,219.00	Mental Health
A9	4010	1 9916	NYS HC & MH Worker Bonus Prg	3,000.00	3,000.00	Health
A9	4010	8 9030	Social Security	231.00	531,493.00	Health
NH9	6020	1 9916	NYS HC & MH Worker Bonus Prg	66,000.00	66,000.00	Shaker Place Rehabilitation and Nursing Center
NH9	6020	8 9030	Social Security	5,050.00	1,371,740.00	Shaker Place Rehabilitation and Nursing Center
A9	3110	1 9916	NYS HC & MH Worker Bonus Prg	9,000.00	9,000.00	Sheriff
A9	3110	8 9030	Social Security	690.00	1,337,295.00	Sheriff
			TOTAL Appropriations	113,041.00	0.00	

ESTIMATED REVENUES

ACCOUNT NO.		RESOLUTION DESCRIPTION	DECREASE	INCREASE	UNIT COST	DEPARTMENT NAME
A3	4059	0 3455	NYS HC & MH Worker Bonus Prg	6,460.00	6,460.00	Children, Youth and Families
A3	6119	0 3455	NYS HC & MH Worker Bonus Prg	3,230.00	3,230.00	Children, Youth and Families
A3	4310	0 3455	NYS HC & MH Worker Bonus Prg	19,380.00	19,380.00	Mental Health
A3	4010	0 3455	NYS HC & MH Worker Bonus Prg	3,231.00	3,231.00	Health
NH3	6020	0 3455	NYS HC & MH Worker Bonus Prg	71,050.00	71,050.00	Shaker Place Rehabilitation and Nursing Center
A3	3110	0 3455	NYS HC & MH Worker Bonus Prg	9,690.00	9,690.00	Sheriff
			TOTAL INCREASE	0.00	113,041.00	
			GRAND TOTALS	113,041.00	113,041.00	

1371740

Department	Avg Weekly Hours Per Vesting Period	Bonus Amount Per Vesting Period	Eligible Employees Claimed	Total Bonus Per Avg Weekly Hours Category	FICA (7.65%), Round Up	Notes
ACDCYF	20 - 30 hours	\$ 500.00		\$ -	\$ 690.0000	4059: 4 employees 6119: 2 employees
	30-35 hours	\$ 1,000.00		\$ -		
	35+ hours	\$ 1,500.00	6	\$ 9,000.00		
ACDMH - V2	20 - 30 hours	\$ 500.00		\$ -	\$ 116.0000	
	30-35 hours	\$ 1,000.00		\$ -		
	35+ hours	\$ 1,500.00	1	\$ 1,500.00		
ACDMH - V3	20 - 30 hours	\$ 500.00		\$ -	\$ 1,264.0000	
	30-35 hours	\$ 1,000.00		\$ -		
	35+ hours	\$ 1,500.00	11	\$ 16,500.00		
ACDOH	20 - 30 hours	\$ 500.00		\$ -	\$ 231.0000	
	30-35 hours	\$ 1,000.00		\$ -		
	35+ hours	\$ 1,500.00	2	\$ 3,000.00		
SPRNC	20 - 30 hours	\$ 500.00	14	\$ 7,000.00	\$ 5,050.0000	
	30-35 hours	\$ 1,000.00	11	\$ 11,000.00		
	35+ hours	\$ 1,500.00	32	\$ 48,000.00		
DGS	20 - 30 hours	\$ 500.00		\$ -		
	30-35 hours	\$ 1,000.00		\$ -		
	35+ hours	\$ 1,500.00	0	\$ -		
ACSO	20 - 30 hours	\$ 500.00		\$ -	\$ 690.0000	
	30-35 hours	\$ 1,000.00		\$ -		
	35+ hours	\$ 1,500.00	6	\$ 9,000.00		
Bonus TOTAL			83	\$ 105,000.00		
FICA TOTAL		7.65%	\$105,000.00	\$8,032.50	\$8,041.00	
			Aggregate	\$ 113,032.50	\$113,041.00	

NYS Healthcare Worker Bonus Program Frequently Asked Questions (FAQ)

Last Updated 4/7/2023

FAQ Table of Contents

General
Attestation
Eligibility (Qualified Employers)
Education Sector Employers
Tax Questions
Payment Issuance
Eligibility (Employees)
Portal Registration and Claims Submission
Employee Separation
Enforcement
Employee Help
Help and Support

General

Q. What is the Healthcare Worker Bonus (HWB) Program?

A. As part of the 2022-2023 enacted New York State Budget, Governor Hochul and the State Legislature allocated \$1.2 billion in funding to the NYS **Healthcare Worker Bonus (HWB)** program for the payment of bonuses for certain frontline healthcare workers as Part ZZ of Chapter 56 of the Laws of 2022.

The HWB Program provision allows for the payment of bonuses to “*recruit, retain, and reward health care and mental hygiene workers*” meeting certain eligibility requirements.

Q. Where can I find the details of the HWB Program?

A. Please see Part ZZ of Chapter 56 of the Laws of 2022.

Q. Who is eligible for a health care worker bonus?

A. *Health care and mental hygiene workers that meet each of the following criteria will be eligible for the bonus:*

- The employee works for a qualified employer. A qualified employer is defined in SOS §367-w(2)(b) and (c).
- Assuming an employee works for a qualified employer, the eligible employee must:
 - Be in an eligible title listed in SOS §367-w(2)(a)(i)-(iii).
 - Receive an annual base salary of \$125,000 or less (excluding any bonus or overtime pay paid by the employer).
 - Be employed by an eligible provider during the entire “vesting period.”
 - Not be suspended or excluded from participation in the Medicaid program.

- Work for a qualified employer for the required number of hours during the vesting period to be eligible for the bonus.

The **employer** must evaluate and attest to whether they and/or any of their employees meet the eligibility criteria.

Q. Is the data I submit to the HWB Portal kept secure?

A. Yes. The HWB portal is compliant with New York State and Federal Security Standards. Data submitted to the HWB portal will be kept within a secure environment for up to seven (7) years. After the retention period, the Department of Health will be required to destroy the data and obtain a Certificate of Destruction from an IT Asset Disposition (ITAD) service provider ensuring the data has been destroyed in compliance with all applicable laws and industry standards.

Q. Should Governmental entities that are not State entities submit bonus claims in the portal for their eligible employees?

A. Yes, governmental entities that are not State entities (i.e. County nursing homes) and do not employ State employees should submit claims in the portal for their eligible employees.

Attestation

Q. What is the employer attestation process?

A. The bonus claim process requires all qualified employers to electronically sign an attestation that acknowledges they understand and have determined that each employee the employer included in the claiming process is eligible to receive the Healthcare Worker Bonus. Those requirements are found in section 367-w of the Social Services Law, and other guidance pertaining to the HWB.

Employers must download a copy of the [HWB Employer Attestation](#), which can also be found on the [HWB Program Portal](#).

Q. What is the Employee Attestation Process?

A. The bonus claim process requires all qualified employees to sign an attestation that confirms their wages from all sources in connection with their eligibility for the workforce bonus.

Employers must download a copy of the [HWB Employee Attestation](#), which can also be found on the [HWB Program Portal](#). An employee attestation for each employee must be signed by the employee and maintained by the employer.

Q. Can employee attestations be submitted electronically to the employer?

A. Yes, employee attestations may be submitted electronically.

Q. Could the Department provide additional guidance regarding the employee attestation?

A. The information below offers further details on employee attestations:

- Employers must collect employee attestations prior to submitting a bonus claim for the employee.
- Employers must retain the signed attestations from employees, but do not need to submit to the State unless explicitly requested to do so.

- If an employee fails to or refuses to sign the attestation but are otherwise eligible, employers should retain the documentation on why the employee is eligible and retain documentation that the employee declined to provide the signed attestation.
- Employers, if they choose, may collect employee attestations covering October 2021 – September 2022 to allow those employees to only attest once.
- Employers should submit claims for employees under the MMIS ID that is most appropriate for their employment situation. Therefore, the employee attestation should indicate the MMIS ID where the employee primarily works.

Eligibility (Qualified Employers)

Q. Who is a qualified employer?

A. Please refer to the [Qualified Employer Section](#) of the Department of Health HWB Program website for additional information.

Q. What employees working for qualified employers are eligible to receive the bonus?

A. A list of qualified employees and worker titles has been posted [here](#).

Q. If an employee lives outside of New York State, are they eligible for the bonus?

A. A qualified employee who works for a qualified employer is eligible for the bonus regardless of state residency.

Q. Is the bonus for the Home Attendants/Aides? Are any staff for CHHAs, LHCSAs and FIs included?

A. Homecare aides are not an eligible title for the Bonus Program as they will be eligible for increased minimum wage payments pursuant to PHL 3614-f. As such, employees of Article 36 entities that fall under such titles (e.g., home health Aide, Personal Care assistant, home maker, etc.) are not eligible for the Bonus. However, certain Article 36 entities, such as Certified Home Health Agencies (CHHAs) and Licensed Home Care Services Agencies (LHCSAs), may employ eligible titles (e.g., Nurses, PT/OT Therapists, Speech Pathologists, etc.) that provide hands-on services, and may be eligible for the bonus if they meet all of the employee eligibility requirements. Fiscal Intermediaries under SOS section 365-f do not employ eligible titles that provide hands-on services, and so are not subject to the requirements under the Bonus program.

Q. I am a non-Medicaid provider, am I eligible for a bonus?

A. According to [Part ZZ of Chapter 56 of the Law of 2022](#), eligible employers are those who include certain providers with at least one employee, and that bill for services under the Medicaid state plan or a home or community-based services (HCBS) waiver, providers that have a provider agreement to bill for Medicaid services provided or arranged through a managed care organization or a managed long term care plan, and certain educational institutions and other funded programs. These include certain providers, facilities, pharmacies, and school-based health centers licensed under the state Public Health Law, Mental Hygiene Law, and Education Law, as well as certain programs funded by the Office of Mental Health (OMH), Office for the Aging, Office of Addiction Services and Supports (OASAS), and the Office for People with Developmental Disabilities (OPWDD).

If your organization does not pertain to the above, you are unfortunately not eligible at this time.

Q. Would a provider enrolled in the medical assistance program (e.g. hospital, nursing home) (“provider”), who enters into a contract with the supplemental staffing agency (“staffing agency”), be considered an Employer (under the statute), with respect to those front-line healthcare workers (agency staff) who are assigned by the staffing agency to work at the provider’s facility on a temporary basis?

A. No. Qualified Employers should submit claims for bonuses only for individuals they employ directly or indirectly on a permanent basis. Contracted temporary staff that are employed or contracted by a staffing agency or other intermediary entity on a temporary basis are not eligible for the HWB program.

See the Question *“Q. Are contract staff eligible for the bonus? If they are, who is responsible for submitting these staff for a bonus? For example, if a hospital employs staff that fall under one of the eligible titles but are co-employed with a non-healthcare entity, are they eligible for the bonus?”*, for more details.

Q. Please clarify the criteria necessary for an employer to be subject to the Healthcare Workforce Bonus (HWB) Program?

A. The HWB statute provides two separate definitions of qualified employers, both of which are subject to the requirements of the HWB program.

- See SOS § 367-w(2)(b) and (c)

Under paragraph (2)(b), an employer is subject to the HWB program if they meet all the four following criteria:

1. They are a Medicaid enrolled provider.
2. They bill for Medicaid services (either through FFS, managed care, or a 1915(c) waiver).
3. Employ at least one eligible employee.
4. **A. Are included in the list of provider and facility types in the statute, OR
B. Are subject to a certificate of need (CON) process, OR
C. The provider serves at least 20% Medicaid enrollees.**

The Department of Health is not prescribing a specific methodology to determine the 20% Medicaid threshold criteria. Employers must determine whether their organization complies with this requirement as part of the employer attestation required for HWB claim submission.

Q. Please clarify the types of employers eligible for the HWB Program?

A. Paragraph (2)(b) identifies employers eligible for the program, and are limited to:

- Providers and facilities licensed, certified, or otherwise authorized under:
 - articles 28, 30, 36 or 40 of the public health law
 - articles 16, 31, 32 or 36 of the mental hygiene law
 - article 7 of the social services law
- Pharmacies registered under §6808 the education law
- School-based health centers
- Programs funded by the OMH, OASAS, Office of the Aging, or OPWDD, AND

- Other provider types determined by the commissioner and approved by the director of the budget (***at this time no other provider types have been determined***).

If the provider is subject to a certificate of need (CON) process OR the provider serves at least 20% Medicaid enrollees, they are not limited to this list defined in Paragraph(2)(b).

Q. What employer types are subject to the Certificate of Need (CON) process, and thus not required to meet the 20% threshold, but still required to be actively enrolled Medicaid providers?

A. Below is a list of employer types subject to the CON process:

Employer Types Subject to the CON Process
<i>Hospitals</i>
<i>Nursing Homes</i>
<i>Diagnostic and Treatment centers</i>
<i>Midwifery Birth Centers</i>
<i>Ambulatory Surgery Centers</i>
<i>Dialysis Providers</i>
<i>Certified Home Health Agencies</i>
<i>Licensed Home Care Services Agencies</i>
<i>Long Term Home Health Care Programs</i>
<i>Hospices</i>
<i>Adult Care Facilities</i>

Q. I am not enrolled to receive payments from eMedNY. Am I subject to the HWB program?

A. Paragraph (2)(c) of the statute identifies employers subject to the HWB program even if they are not eligible to receive payments from eMedNY. Entities with at least one eligible employee with programs identified in statute such as OMH, OPWDD, OASAS, OCFS or Municipalities may be subject to the HWB program.

Q. I am an employer who is not enrolled to receive payments from eMedNY and am not funded through OMH, OASAS, OCFS or OPWDD, am I subject to the HWB program?

A. With the exception of education and state-operated facilities, who will be eligible in the fall for the bonus program, employers who do are not enrolled to receive payments from eMedNY and are not funded by OMH, OASAS, OCFS or OPWDD are not likely eligible for the program.

Q. I am an Employer who is enrolled in eMedNY but in a non-payable status, am I subject to the HWB program.

A. Enrolled Medicaid providers who meet the eligibility criteria for the HWB but are enrolled with a non-payable status in eMedNY, this includes Managed Care Only and OPRA (Ordering, Prescribing, Referring, Attending) enrollment status, may be subject to the HWB program. Additional information on submitting for bonus will be provided.

Q. Are Providers whose practices that see at least twenty (20) percent Medicaid population qualified providers for the HWB?

A. Yes. Providers are Qualified Employers so long as the employer meets the 20% Medicaid threshold and all other eligibility requirements are met.

Q. Why was the second submission period extended?

A. In order to allow appropriate time for all Employers to submit claims for Vesting Period 1 and 2, the Department kept the HWB Program Portal open to claims for the second submission period until November 30, 2022. Qualified Employers were permitted to submit claims for eligible employees during that time. Please be advised that, in accordance with SOS § 367-w(4)(f), claims submitted after October 31, 2022 for Vesting Period 1 and 2 were technically late for filing purposes.

The Department is aware of several technical issues during the initial submission periods for Vesting Periods 1 and 2 that may have impeded the ability of certain Qualified Employers to submit claims. All Employers should document and retain information regarding the reason for any late submission for audits and investigation purposes relating to the submission of claims for the HWB Program.

Q. Are traveling nurses and temporary staff eligible for the bonus?

A. Qualified employers are responsible for identifying which of their staff are hired on a temporary or traveling basis. Contracted temporary staff that are employed or contracted by a staffing agency or other intermediary entity on a temporary basis are not eligible for the HWB program

Q. Are fire districts qualified employers?

A. Yes, fire districts and departments are municipalities and are considered Employers under the HWB program. These Employers should determine if they have eligible employees and submit HWB claims as appropriate. If a fire district needs an SFS ID or sees an error message when attempting to register for the HWB Portal, please contact NYSWorkersBonus@health.ny.gov.

Q. Are employers overseen by OCFS eligible for the bonus program?

A. Qualified employers overseen by OCFS that are licensed by the Department of Health under Article 29-I that have an MMIS ID and meet the other necessary requirements should select DOH in the Agency drop down when submitting their employees via the portal, as they are billing via Medicaid and will receive bonus remittance payments via eMedNY.

Education Sector Employers

Q. Does "Other Direct Care Staff" includes aides and assistants in schools?

A. No. The Mental Hygiene titles listed in the statute at SOS § 367-w(2)(a)(ii) are taken from the title series in the Consolidated Fiscal Reporting and Claiming Manual (CFR), which includes

additional descriptions of the referenced titles. The relevant description for titles under the CFR can be found here in [Appendix R](#).

Q. Are employees in educational settings that serve in roles that align with titles under “All Other Health Care Support Workers” (like a front office building attendant or custodian) eligible?

A. No. Such workers must support patient-facing care provided within a patient care unit of a hospital or nursing home in support of treating and caring for patients.

Q. Titles used in educational settings are different from those used in traditional healthcare settings. If the title does not match exactly, is the worker ineligible?

A. The titles listed in the statute describe the role the worker served. If the role served by the employee in an educational setting is consistent with the definition of the job title, the employee may be eligible assuming all other requirements are met.

The definition of each [BLS job title](#) is available on [O*Net Online](#). See ***“Q. Is there a definition for each job title?”*** under section [Eligibility \(Employees\)](#).

Employers will be required to identify which eligible title the employee qualifies under when submitting the employee in the HWB Portal. Employers should document and retain information justifying their determination that the employee qualified under the specified title for purposes of audits, investigations, and reviews of employers submitting claims for the HWB Program.

Q. Is there any guidance that compares school district job titles against those outlined in SOS Section 367-w(2)(a)(iii)?

A. The intent of HWB Program is to provide for the payment of bonuses to recruit, retain, and reward health care and mental hygiene workers. Educational institutions were included as an eligible employer because some employ health care and mental hygiene workers that are patient-facing and provide clinical care. The titles in SOS §367-w(2)(a)(i)-(iii) should therefore either be consistent with eligible employees in educational institutions or very closely align with the definitions of those job titles.

Q. Will there be any specific guidance/training for school districts?

A. All program guidance included on this website is consistent for all eligible employer types.

Q. If a district claims money, will there be a listing of which positions were approved so they will know who they can pay the funds out to?

A. Yes, employers will receive remittance advice when they receive payment. See ***“Q. Will employers be notified when payments will be made out of SFS and eMedNY and will a remittance be provided?”*** under section [Payment Issuance](#).

Q. Can educational employers submit their eligible employees from Vesting Period 1 during Submission Period 2?

A. Yes. See the prior FAQ regarding the administrative flexibility offered for the Vesting Period 1 and 2 submissions. This applies to all employers, including the education sector.

Q. I am a qualified employer within the education sector, looking to submit claims for eligible employees. How do I register for the HWB Program Portal?

A. School districts, charter schools, nonpublic schools, approved preschool programs for students with disabilities, BOCES, and private institutions of higher education, should register for the HWB Portal utilizing a Statewide Financial System (SFS) ID.

School districts, charter schools, nonpublic schools, approved preschool programs for students with disabilities and BOCES that do not have an SFS ID should contact SED at ChiefFinancialOfficer@nysed.gov. Private institutions of higher education that do not have an SFS ID should contact HESC at HWB@hesc.ny.gov.

Q. What steps do I need to take before logging in to the Portal?

A. Before logging into the Portal, Employers need to register. If the employer still issues accessing the Portal after registering, they should reset their password. Then the employer should be able to successfully login and submit their eligible employees for bonus payment.

Q. I am a qualified employer within the education sector, what vesting period should I begin submitting employee claims?

A. Education sector employers may begin submitting claims in Vesting Period 2. The Department acknowledges some providers may not be able to complete Vesting Period 2 claims by the close of the second vesting period (October 31, 2022). Where this is the case, they may submit for claims when Vesting Period 3 opens on April 1st, 2023.

Q. I am a qualified employer submitting claims for a school district's eligible salaried employees. Are 10-month employees considered continuously employed during a vesting period that overlaps with their 2-months off?

A. Yes. For purposes of the HWB Program, qualified salaried employees of a school district will be considered continuously employed for 12 months regardless of how their salary is paid (over 10 months or over 12 months). Districts do not need to pro rate average hours worked for salaried employees.

Q. Will the state be providing an updated qualified list for this program?

A. No. The titles in SOS §367-w(2)(a)(i)-(iii) should therefore either be consistent with eligible employees in educational institutions or very closely align with the definitions of those job titles.

Q. Is the word "patient" inter-changeable with "student"?

A. No. The word "patient" describes a person receiving clinical or behavioral health care from a health care provider. For purposes of bonus claiming, a "student" becomes a "patient" when a health care/mental hygiene worker employed by an eligible education sector employer provides clinical or behavioral health care in an educational setting.

Q. Do schools need to have a licensed medical facility to qualify?

A. No. Per SOS §367-w(2)(c), the definition of employer also includes a public and non-public school, a BOCES program, an approved preschool program for student with disabilities, and an institution of higher education.

Q. Do we have to bill Medicaid directly to qualify?

A. No. If you do not have an MMIS ID, meaning you are not enrolled in the NYS Medicaid system, you will need to verify that you have a Statewide Financial System (SFS) ID.

The agencies with providers who may not be in NYS Medicaid (eMedNY) system may include: Office of Mental Health, Office for People With Developmental Disabilities, Office of Children and Family Services, Office of Addiction Services and Supports and the New York State Education Department.

Once you have confirmed that you are actively enrolled or your SFS ID is active, you can prepare information for submission of reimbursement for eligible employees. More details, including a *Technical User Guide*, can be found within the [HWB Program Portal](#).

Q. Is there a modified version of the attestation for a school district?

A. No. The Employer and Employee attestation is consistent across all qualified employers.

Q. I am a qualified employer submitting claims for a school district's eligible hourly employees. How do I calculate hours for hourly employees of the school district who are not required to be available during the summer months?

A. For purposes of the HWB Program, school based hourly employees are eligible for the bonus based on the average number of hours worked during the vesting period in which they were continuously employed. Some school based hourly employees are still employed but are not required to be available to work during the summer months. So long as those employees are still employed but not obligated to report—and are otherwise ineligible for unemployment benefits during the summer months—those employees are considered continuously employed during vesting period(s).

Time which the employee is employed but did not work any hours because the school was closed for summer recess does not need to be factored into hourly employees' average hours worked as this can be counted as "other leave". For example, employee A is an hourly worker who on average works 40 hours per week from September through June each year. During July and August, the average hours worked is zero. When calculating average hours worked, these two months can be disregarded.

However, if employee A was not required to be available during July and August but **was** entitled to unemployment compensation, that employee would **not** be entitled to the bonus during that 6-month vesting period because they were not continuously employed.

Q. Are guidance counselors eligible for the bonus?

A. Guidance Counselor as listed in the [Consolidated Fiscal Report](#) (CFR) is not an eligible title. Guidance counselors may be eligible for the bonus if they are working in the capacity of another title on the list of [eligible titles](#) as defined in the CFR during the applicable vesting period, so long as they meet all other eligibility criteria including appropriate licensure. Employers should select the applicable title from the list of [eligible titles](#) for employees working in this capacity.

Q. Please confirm the process for medical schools to submit the HWB program portal.

A. The process follows the existing process for all other health care employers eligible for the bonus program. There is no distinct process for medical schools.

Tax Questions

If an employer or employee has a tax question not answered below, the Department recommends that you contact the NYS Department of Taxation and Finance for additional guidance.

Q. I am an employee, what are the tax implications of the bonus? Is the bonus considered taxable income?

A. Bonus payments paid to a New York State (NYS) resident are not subject to NYS personal income tax. To determine how the bonus payment may affect your specific situation, please consult with a tax professional.

Q. Would HWB Program bonus payments impact an employee's public benefits or other public assistance?

A. No.

Q. Are employees who were out on disability, FMLA, COVID Leave, etc. during the vesting period, but still an active employee, still eligible for the bonus?

A. The use of accruals or other leave, including but not limited to sick, vacation, or time used under the Family Medical Leave Act (FMLA), shall be credited towards and included in the calculation of the average number of hours worked per week over the course of the vesting period.

Q. I am an Employer, what obligation do I have to pay former employees who were otherwise eligible for a bonus and vested while in my employment?

A. Employers may be obligated to pay former employees that are eligible and vested while in their employment *provided that* the employee did not terminate his or her employment with the employer prior to the due date for payment of the bonus. In other words, if the Employer fails to pay the bonus within 30 days of receipt of payment on the bonus claim, the Employee may leave the Employer but the Employer will still be obligated to pay the bonus to the Employee. Please see the [Employee Separation FAQs](#) for more information.

Q. Do the bonuses have to be paid out as payroll or can they be 1099. If they can be 1099, will a form 1099 issued to the employee (under the employee's social security number) for any payment as Federal income tax will most likely be owed?

A. For federal income tax purposes, bonuses are considered supplemental wages and are required to be included as wages on the employee's W-2. See [IRS Publication 15, Employer's Tax Guide](#), and [IRS publication 525, Taxable and Nontaxable Income](#), for more information.

Q. Will the state reimburse employer costs incurred for releasing HWB Program bonus payments such as FICA and payroll taxes?

A. Yes, employers will receive reimbursement for FICA and payroll taxes.

Q. What is the appropriate Federal tax to assign to HWB Program bonus payments to employees?

A. The Department of Tax and Finance (DTF) recommends employers reference the Internal Revenue Service (IRS) Tax Code – Supplemental Wage Guidance on Page 20 of [2022 Publication 15 \(irs.gov\)](#).

Q. Are HWB Program bonus payments exempt from New York State and local income tax?

A. Yes, the HWB Program bonus payments to employees is exempt from both NYS and local income tax (in municipalities such as New York City).

Q. With the knowledge that HWB Program bonus payments are exempt from NYS and local income tax, how should I reflect that on the check to my employee?

A. As there is no state withholding requirement for employees, employers should coordinate with their payroll vendor to remove state/local taxes for the bonus payments.

Q. Are HWB Program bonus payments subject to federal or other state taxes?

A. The bonus payment is not exempt from Federal or other State taxes.

Q. We are aware that HWB Program bonus payments to employees are exempt from NYS income tax for NYS residents. Does the same apply for employees that do not live in NYS but are eligible for the program?

A. Yes, the HWB Program bonus payments made to eligible employees who live out-of-state are exempt from NYS income taxes.

Q. Should Governmental entities, that meet the definition of qualified employers, but are not State entities submit bonus claims in the portal for their eligible employees?

A. Yes, governmental entities (i.e. County nursing homes), who meet the definition of qualified employers, but are not State entities and who do not employ qualified State employees should submit claims in the portal for their eligible employees.

Q. Is the HWB Program payment subject to the health facility cash receipts assessment (including the nursing home cash assessment)?

A. No. HWB Program payments are not subject to the health facility cash receipts assessments.

Q. How should employees ensure their HWB Program bonus remain exempt from NYS taxes when filing their 2022 taxes, as W-2 income for Federal and State taxes must match?

A. Eligible employees should complete [Form IT-225](#), and submit with their NYS tax return.

Q. When reporting employee earnings, what box on the W-2 should the HWB Program bonus be listed?

A. The HWB Program bonus should be recorded in Box 14 of the W-2.

Payment Issuance

Q. I am a qualified employer. How will I be issued the bonus payments?

A. Medicaid Employers (MMIS ID): Bonuses will be paid as a lump sum and included in qualified employer's weekly Medicaid cycle payment from eMedNY. The bonus payment due to eligible employees will appear under reason code **"HWB"**.

Additionally, the employer share of FICA, calculated at 7.65% of the total bonus amount will appear separately under reason code **"FTX"**.

Non-Medicaid Employers (SFS Vendor ID): Bonuses will be paid to the employer via the State Financial System.

Q. I am a qualified employer. May I keep any portion of the bonus payment?

A. No. A qualified employer shall not keep any portion of the bonus amount. Please note that the FICA portion is not due to the employee but must be remitted on behalf of the employee.

Q. Will employers be notified when payments will be made out of SFS and eMedNY and will a remittance be provided?

A. The HWB Program Portal will notify employers when payment information is available and offer an employee-level remittance for employers via the email employers registered to sign in to the HWB portal. A reason will be provided for any submitted employee whose bonus amount was reduced or rejected during processing. Remittance advice information will also be available on the HWB Program Portal.

Q. I'm an eligible Employer, I submitted for vesting period two, when should I receive payment?

A. If you submitted for vesting period two, please see the table below for payment information. This table will be updated as information becomes available.

Submission Period	MMIS Submission	SFS Submission
One (8/03/2022 – 9/02/2022)	eMedNY Cycle 2352	10/5/2022
Two (10/01/2022-11/30/2022)	eMedNY Cycle 2366	01/11/2023

****Please Note: SED Providers will begin receiving payments on 1/13/2023***

Q. I am an employer. If I provided a bonus to my eligible employees prior to receipt of payment on the bonus claim, does this satisfy the requirement to pay a bonus under the HWB program?

A. No. An employer must identify eligible employees, submit a claim and receive payment from the HWB payment first. Bonuses as required by [Part ZZ of Chapter 56 of the Laws of 2022](#) can only be paid to employees **after** claims are received, reviewed and payment is received by the employer through eMedNY or SFS.

Q. What should I do if I notice or suspect a mistake in an employee's bonus amount?

A. DOH and OMIG are developing procedures for employers to follow if they identify an overpayment. Please continue to check the FAQ for an update to this Q&A. Please continue to submit claims related inquiries to: NYSWorkersBonus@health.ny.gov.

Q. What happens if I recognize an error during the submission period?

A. While the applicable claiming period is open, the HWB Portal includes a delete function to remove submissions made in error. Once an erroneous submission is deleted, a corrected submission can be loaded into the HWB portal.

Q. If an employer identifies an error in a bonus claim where they claimed a lower bonus amount for an eligible employee that they should have, how can the employer amend a submission to ensure the employee receives the correct amount?

A. Effective April 1st, a correction process is available. Instructions on how to submit corrections to modify either an employee's salary or hours worked from a previous submission can be found within the HWB Portal End User Guide available within the HWB Portal. The correction process is for employers to correct awarded bonuses ranging from \$0.00 to \$1000.00 which were determined by the Employer to have been lower than they should have been. Correction payments will be paid as a lump sum and included in qualified employer's weekly Medicaid cycle payment from eMedNY. Cycle information published once available.

Q. What happens if I identify an overpayment after a submission period is closed?

A. Please note this process is for **EMPLOYERS** only. Employers are required to report, return, and explain any overpaid HWB funds received. Additional information, including directions on reporting and returning your overpayment can be found here: [Office of the Medicaid Inspector General - Self Disclosure of HWB Program Payments](#).

Please Note: Employers are prohibited from recovering bonuses paid to Employees under the HWB program even if the payment is later identified as an overpayment. See "**Q. Can an Employer take back the HWB bonus from and Employee?**".

Q. What happens if I recognize an underpayment after a submission period is closed?

A. An amended submission process is under development for identified underpayments. This process will allow employers to amend previous submissions and receive an additional payment for the underpaid portion of the previous submitted claim. Further guidance is forthcoming on this process.

Q. In the event that I am unable to issue payment to a former employee, or later determine a submitted employee to be ineligible, how do I return an overpayment of HWB bonus to the State?

A. Employers who have received a bonus payment for an ineligible employee, regardless of the reason, must return the HWB to the State. Employers' participation is subject to audit, investigation and review of paid claims by the Office of Medicaid Inspector General. Overpayments must be returned to OMIG. For more information on how employers should return HWB overpayments please see: [Self-Disclosure of Health Care Worker Bonus Payments | Office of the Medicaid Inspector General \(ny.gov\)](#).

Q. What happens when a submission period has closed, and an employer mistakenly applied for an employee who is not qualified for the bonus or applied for a larger value bonus than the employee should have received?

A. Employers who have received a bonus payment for an ineligible employee, regardless of the reason, must return the HWB to the State. Employers' participation is subject to audit, investigation, and review by the Office of Medicaid Inspector General. Overpayments must be returned to OMIG. For more information on how employers should return HWB overpayments please see: [Self-Disclosure of Health Care Worker Bonus Payments | Office of the Medicaid Inspector General \(ny.gov\)](#).

If the submission period is still open See "Q: What happens if I recognize an error during the submission period?"

Q. What is the appeals process for an employee who had their submitted bonus amount reduced by the State in the HWB Program portal?

A. There is no appeals process required for the HWB Program. Qualified employers who have questions about their bonus payments should submit questions directly to the State to understand payment amounts and associated reductions.

Q. If an employer identifies an error in a bonus claim where they claimed a lower bonus amount for an eligible employee that they should have, how can the employer amend a submission to ensure the employee receives the correct amount?

A. Additional guidance is forthcoming.

Q. Should bonus payments be reduced for any wage garnishment liabilities (e.g., for child support)?

A. HWB program bonus payments must be offset by a qualified employer in compliance with any legally enforceable order against an eligible employee's wages, which includes the HWB bonus payment.

A previous version of this Q&A indicated that the HWB program should not be reduced for any wage garnishment liabilities. This was incorrect.

An employer who failed to withhold as required by a legally enforceable order against an employee's wages, which includes the HWB payment should review the legally enforceable order for the remedies required if such withholding was not made.

Eligibility (Employees)

Q. I am an employee; how can I find out if I am eligible?

A. Employees should contact their employer to determine their eligibility status. In addition, a list of qualified employees and worker titles has been posted [here](#).

Q. Are Medical Residents and Medical Fellows eligible titles for the bonus?

A. Yes, Medical Residents and Medical Fellows have been determined to be eligible titles under the authority provided by SOS § 367-w(2)(a)(iii).

Q. What does "All Other Health Care Support Workers" mean?

A. "All Other Health Care Support Workers" refers to workers that support the provision of health care services to patients in front-line settings for these titles. Such workers must provide

patient-facing care provided within a patient care unit of a hospital or other institutional medical setting in support of treating and caring for patients.

This includes:

- Hospitals and Nursing Homes (Article 28 of Public Health Law)
- OMH Psychiatric Centers (Article 7 of Mental Hygiene Law)
- OASAS Addiction Treatment Centers (Article 19 of Mental Hygiene Law)
- Residential programs operated or certified by OPWDD, OMH, and OASAS (Articles 16, 31, and 32 of Mental Hygiene Law)
- Medicaid Assisted Living Programs (PHL Article 46-B)
- Hospice Residences (PHL Article 40)

These titles are included below:

All Other Patient Facing Care Support Workers in Article 28 Facilities:
Admitting Clerk
Admitting Clerk Cashier
Ward Clerk
Critical Care Clerk
Discharge Control Clerk
Emergency Services Clerk
Front Desk Clerk
Lead Intake Specialist
Operating Room Clerk
Unit Clerk
Ward Clerk
Admitting Clerk
Registration Clerk
Unit Secretary
Unit Associate
Unit Coordinator
Unit Receptionist
Unit Secretary
Unit Assistant
Unit Associate
Ward Clerk
Dietary Aide
Food Prep/Service Worker
Dietary Worker
Dining Assistant
Dining Aide
Dietary Worker
Food & Nutrition Aide
Food Prep/Service Worker

<i>Building Attendant</i>
<i>Building Service Aide</i>
<i>Building Service Worker</i>
<i>Custodian</i>
<i>Environmental Services Worker</i>
<i>Floor Maintenance Worker</i>
<i>Maintenance/Physical Plant workers</i>
<i>Sanitation Worker</i>
<i>Service Worker</i>
<i>Environmental Service Aide/Tech</i>
<i>Maintenance/Physical Plant workers</i>
<i>Support Services Worker</i>
<i>Floor Maintenance Worker</i>
<i>Housekeeping Worker and Maids</i>
<i>Security Guards</i>
<i>Peace Officers</i>

Q. What does “various mental hygiene workers” mean?

A. The Mental Hygiene titles listed in the statute at SOS § 367-w(2)(a)(ii) are taken from the title series in the Consolidated Fiscal Reporting and Claiming Manual (CFR), which includes additional descriptions of the referenced titles. The relevant description for titles under the CFR can be found in [Appendix R](#).

Q. Which employers are included in the education sector, which will participate in the October rollout?

A. For school districts, charter schools, nonpublic schools, approved preschool programs for students with disabilities, BOCES, and private institutions of higher education, the healthcare worker bonus portal will open on October 1, 2022.

Q. Are Nursing Homes not enrolled in Medicaid Qualified Employers?

A. Nursing Homes who are not currently enrolled in the Medicaid program would only be Qualified Employers if they have a Vendor ID (and receive payments) through the Statewide Financial System (SFS).

Q. Is there a definition for each job title?

A. The majority of the job titles are pulled directly from the Bureau of Labor Statistics (BLS). The definition of each [BLS job title](#) is available on [O*Net Online](#).

The Mental Hygiene titles listed in the statute at SOS § 367-w(2)(a)(ii) are taken from the title series in the Consolidated Fiscal Reporting and Claiming Manual (CFR), which includes additional descriptions of the referenced titles. The relevant description for titles under the CFR can be found here in [Appendix R](#).

Q. Please clarify the ‘All Other Health Care Support Workers’ section in the eligible title list found on the DOH website https://health.ny.gov/health_care/medicaid/providers/hwb_program/#titles?

A. Employees with titles on this list working in a hospital or institutional setting who **provide patient-facing care** provided within a patient care unit and meet all other criteria for the HWB program are eligible for HWB bonus.

- Employees in titles such as Coders, Billers, Call Center and Security are not eligible
- Clerical/office staff within Certified Home Health are not eligible under the ‘All Other Healthcare Support Workers’ title, which is limited to article 28 institutional facilities.

Q. Is there a threshold of hours an employee must work in a ‘hands-on clinical’ environment to be eligible?

A. No, if the employee has an eligible title and meets all other statutory requirements, they are eligible.

Q. I am an employer with staff who support patients via telehealth. Are they eligible?

A. Employees that work remotely but serve patient-facing roles are eligible for the bonus assuming they meet all other statutory requirements.

Q. Are employees who used accruals such as sick, vacation or Family Medical Leave Act (FMLA) eligible for the bonus? How should I calculate their average hours?

A. Employers should calculate accruals as hours worked when loading data in the HWB Portal.

Q. Are employees who resigned prior to the payment of the HWB bonus eligible?

A. Employers may be obligated to pay former employees that are eligible and vested provided that the employee did not terminate employment prior to the due date to pay the bonus.

Q. Can DOH provide guidance on the standard calculation for average weekly hours worked?

A. Employees must have worked 20 hours on average during the 6-month vesting period. Employers should calculate accruals as hours worked when loading data in the HWB Portal. For example, if an employee used 40 hours of vacation accruals during a week, those 40 hours would count towards their average weekly hours. Employers should exclude overtime hours when calculating the average weekly hours (**however employers should include weekend or holiday hours worked, regardless of the rate of pay, so long as the total hours worked remains under overtime thresholds, see 12 NYCRR 142-2.2**). Additional examples will be provided prior to the submission close date, but some common examples have been included below:

Period	Salaried Employees	Hourly Employees
Vesting Period for Employee Attestation	Example Method: Base Salary = Annual Salary divided in half – any bonuses or overtime pay received in the vesting period	Example Method: Base Salary = [Hourly Wage * (Average Hours Worked in Vesting Period – Overtime Hours) * 26 weeks – any bonuses or overtime pay received in the vesting period]

	Example: Annual Salary = 50K Employers should report Salary as 25K during 6-month vesting period	Example: Earns \$25/Hour and worked 35 Hours per week excluding overtime over the six-month period = \$22,750 (25*35*26)
Annual Salary for Submission on HWB Template	Annual Salary	Vesting Period Earnings * 2

Q. How should Employers calculate the annualized base salary for a vesting period (See Vesting Schedule)?

A. If an Employee is salaried, Employer should divide their annual salary in half. For example, if employee makes \$50,000 a year their salary during a vesting period would be \$25,000. If an employee is hourly, Employer should use moment in time calculation, for example, employer should calculate salaried earned across all pay periods that occurred during a vesting period.

Q. If an eligible employee makes \$125,000 or less annually but more than \$62,500 during one given vesting period, are they still eligible?

A. The intent of the HWB Program is to fund bonus payments to eligible employees that make \$125,000 or less annually.

For Qualified employers submitting claims for more than one vesting period at the same time (e.g., submitting employee claims for both vesting periods 1 and 2 during the October 2022 claiming window), employers should determine their employees' eligibility based on whether their employees' gross wages for both vesting periods were \$125,000 or less. For example, if an employee made \$60,000 in vesting period 1 and \$63,000 in vesting period 2, the employee would be eligible for the bonus for both vesting periods because their gross wages were \$123,000.

Note, where an employee makes *more* than \$125,000 during the first two vesting periods, but meets the income eligibility during a single vesting period (e.g. \$67,000 and \$60,000 for vesting periods 1 and 2, respectively), and the employee is otherwise eligible, the employer should submit a claim for the vesting period in which the employee met the criteria (in this example, for vesting period 2).

Q. If an employee is paid per diem and their rate of pay exceeds the requirement of \$125,000 annual base salary, but the employee did not work enough to earn the full \$125,000 annual pay, should the employer submit a claim for the bonus where the employee is otherwise eligible?

A. Yes. An employee's annual base salary is based on the employee's gross wages during the vesting period, not the employee's rate of pay. Employers are expected to obtain the employee attestation and review payroll records to determine if employees' gross wages for the relevant period meets the eligibility requirements.

Q. Please confirm that nursing certification, shift differential payments (paid as one-time lump-sum payments or as an add-on) should not be considered as part of base salary.

A. Differentials are part of gross wages and *should* be considered in the calculation of an employee's annualized base salary.

Q. Can an eligible employee that works across multiple employers earn more than \$1,500 in total across all employers from one vesting period?

A. No. Please see ***“Q. How much is the bonus to which eligible employees are entitled?”*** under section Portal Registration and Claims Submission.

Q. If an eligible “other healthcare support staff” worker is employed by an article 28 institution but works in a non-patient care building, are they eligible?

A. No these employees would not be eligible under the “other healthcare support staff” titles as they work in a setting where patient care is not provided.

Q. If employees do not have an SSN or ITIN, but their SSN is pending, are these staff eligible?

A. Employees must have an SSN or ITIN to be eligible for a bonus. If the employee's SSN or ITIN is pending, the Employer may submit their bonus claim once their SSN or ITIN is active.

Q. Do mental hygiene worker titles (e.g., program site director) also apply to staff types with similar functions in non-mental hygiene settings?

A. The titles under section 367-w(2)(a)(ii) only apply to employers subject to the reporting requirements identified in the Consolidated Fiscal Report (CFR). The CFR manual provides definitions of each title such that an employee that may be classified in a definition of a title may be characterized as that title.

Q. Are “other healthcare support workers” that work at an eligible physician practice eligible for the bonus?

A. No. Workers must provide patient-facing care provided within a patient care unit of a hospital or other Article 28 institutional medical setting in support of treating and caring for patients.

Q. Are volunteers eligible for the bonus, assuming they meet all the other criteria?

A. No. Volunteers are not considered eligible employees under the statute.

Q. Are contract staff eligible for the bonus? If they are, who is responsible for submitting these staff for a bonus? For example, if a hospital employs staff that fall under one of the eligible titles but are co-employed with a non-healthcare entity, are they eligible for the bonus?

A. Permanent, contract staff in eligible titles may receive the HWB assuming all other requirements are met. For the purposes of the HWB program, qualified employers that have engaged in staffing arrangements to obtain workforce services (PEOs and other third-parties) for employees engaging in front-line hands on health care services in eligible employee titles are eligible for the HWB. The qualified employer, not the contracted agencies, must submit bonus claims for staff that perform work for the qualified employer under such arrangements and that otherwise meet the eligibility criteria to be an eligible employee.

The qualified employer is required to maintain records that demonstrate the employee was employed for the full vesting period. All qualified Medicaid employers must maintain contemporaneous records tracking all claims submitted for no less than six (6) years. The qualified employer must furnish such records upon request to the department, the Office of Medicaid Inspector General (OMIG), the US Department of Health and Human Services, and the deputy attorney general for Medicaid Fraud.

Q. Are medical residents eligible for the bonus?

A. Yes. As reflected in the prior FAQ regarding the administrative flexibility offered for the Vesting Period 1 and 2 submissions, and in recognition that residents move to other residencies or attending roles around June/July, these employees would be considered eligible under Vesting Periods: 1, 2, 3 and 5. The only vesting period that would present inconsistencies with seasonal changes in employment for residents would be Vesting Period 4.

Q. Our system is comprised of multiple employers versus only one employer. An employee who leaves one employer (part of our network) to go to another employer within our network, the employee would not be qualified due to not having continuous employment with the same employer. Is that accurate?

A. If the health system has an MMIS ID that is linked to the other employers within the health system, the employee will be eligible even if they transition to another employer within the same health system.

Please see response to ***“Q. I am an employer with employees who support multiple MMIS ID’s across our organization, how should I report this employee in the HWB Portal?”*** for additional information.

Q. Are management and supervisors, such as nursing, tech supervisors, dietary supervisors, that otherwise meet all eligible staff criteria eligible for bonuses?

A. Management and supervisors that also work under an eligible title and otherwise meet all criteria for eligibility may be eligible for the bonus. Management and supervisory responsibilities alone do not disqualify an employee from eligibility.

Q. Should State agencies use the online portal to apply for bonuses for their employees, and should State employees complete the employee attestation?

A. State employees should not complete the employee attestation included on this website. The process for payment of bonuses to eligible New York State employees are detailed in the Budget Bulletin issued by the Division of the Budget.

State agencies should not use this portal to apply for bonuses for their employees. The Budget Bulletin from the Division of the Budget provides comprehensive instructions to ensure eligible State employees are paid promptly.

Q. Who is responsible to claim for a Resident that vested during vesting period 1, but graduated in June/July 2022 and is no longer employed by the Employer they were with during vesting period 1?

A. The Qualified Employer that employed the Resident during vesting period 1 is responsible for claiming and paying the bonus. Employers *will* be able to submit claims for Vesting Period 1 during Vesting Period 2.

Please see ***“Q. I am a qualified employer who was unable to complete my submission of qualified employees during a prior vesting period. Can I submit employees eligible for a bonus for Vesting Period 1 and/or 2 at a later date?”*** under section Portal Registration and Claims Submission for more information.

Q. What payments and compensation are considered part of an employee’s base salary?

A. Base salary is defined to include an employee’s gross wages less any bonuses or overtime. Gross wages are defined under Labor Law Section 517 and 20 NYCRR § 2380.4.

Q. Does any additional pay outside of an employee’s base salary count as bonus or overtime? For example, if a salaried employee picks up an additional shift at a different rate than their salary, is this considered overtime?

A. Overtime under the HWB program refers to any statutory overtime required to be compensated at 1 ½ times the regular rate of pay pursuant to New York State Minimum Wage Orders or the federal Fair Labor Standards Act (FLSA).

Q. Should I include unpaid leave or accruals in calculating Employee hours?

A. Employers should include any allowable leave or accruals that were used by the employee during the vesting period, whether or not the time off is paid or unpaid.

Q. Does an employee’s title alone qualify them for a bonus? For example, an RN working in “Employee Health” unit and does not interact with patients that are general members of the public.

A. The “patient-facing” function or role of an eligible employee is only relevant for workers who qualify under the “All Other Health Care Support Workers” category in institutional settings. Registered Nurses, for example, are eligible for the bonus regardless of function with a Qualified Employer assuming the employee meets the other eligibility criteria.

Q. If an employee is out on disability receiving statutory disability pay, should this time be counted towards their hours worked?

A. Yes.

Q. I am an employee and did not receive my health worker bonus, but believe I am eligible. What should I do?

A: You should first contact your employer and ask why you were not submitted for the bonus. If you believe your employer made a mistake in their determination of your eligibility, and the period for submitting claims is still open, please attempt to resolve the matter with your employer.

The Office of the Medicaid Inspector General (OMIG) is developing a process for employees to submit allegations that their employer has not complied with the requirements of the HWB program. If you cannot reach a resolution with your employer, and wish to file an allegation, you will be required to complete a form that includes (1) your title, (2) your period of employment and average hours worked during the applicable vesting period, (3) your earnings excluding bonuses

and overtime, and other pertinent information. This process will be launched soon, please check back for updates.

Portal Registration and Claims Submission

Q. I am an Employer with multiple MMIS IDs, which should I use to submit for the health care worker bonus?

A. Within the [HWB Program Portal](#), a provider will have the ability to link an MMIS ID to a user account, the provider can then link other associated MMIS IDs to that user account. A provider will then have the ability to submit employees for the bonus based on the associated MMIS ID that best fits the employee's situation. Employers with multiple MMIS IDs should only use one MMIS ID on the HWB Portal system to claim bonus payments.

Q. Should Providers use their MMIS ID to register for the HWB Portal or their SFS Vendor ID?

A. Employers who are enrolled to receive payments from eMedNY and meet all other requirements to be eligible for the HWB Program, should utilize their New York State Medicaid Management Information System (MMIS) ID to register for the HWB Portal and claim for employees meeting the 20% Medicaid threshold, regardless of the status of their SFS ID.

Employers who are not enrolled to receive payments from eMedNY, but meet all other requirements to be eligible for the HWB Program, should utilize their State Fiscal System (SFS) Vendor ID should refer to FAQ's below.

A brief video on registration is available [here](#).

Q. Should I use an SFS ID to register on the HWB Portal?

A. If you are seeking to claim bonuses for eligible staff employed in programs that provide Medicaid services funded by: the Office for People with Developmental Disabilities (OPWDD), Office of Mental Health (OMH), Office for the Aging, and Office of Addiction Services and Supports (OASAS) you should utilize your Medicaid Management Information System number (MMIS ID) to submit claims for Medicaid services.

However, you should utilize your SFS ID to submit claims for eligible staff employed in programs that provide non-Medicaid services, or if you don't have a MMIS ID.

If you are not funded through the above agencies, you should utilize your Medicaid Management Information System (MMIS ID) number. You can verify your MMIS is active by calling the eMedNY Call Center at (800) 343-9000. Call center representatives are available from 8:00AM to 5:00PM, Monday through Friday.

Please note that the education and state operated facility portion of the bonus program will rollout in Fall. **If the above scenarios do not apply to you, you are likely not an eligible employer according to [Part ZZ of Chapter 56 of the Law of 2022](#).**

Q. I operate under the Office of Mental Health (OMH) how do I obtain my SFS vendor ID?

A. To receive payments from NYS, entities are required to obtain access to the NYS Statewide Financial System (SFS) and have an SFS Vendor ID#.

To obtain an SFS Vendor ID#, please complete the Substitute W-9 Form found here [New York State Substitute Form W-9](#). Once completed please double check that the legal name and TIN fields are accurate, as discrepancies in these fields will cause processing delays. After you double check the information in the form, please send the signed form to OMHLocalAdminServices@omh.ny.gov for processing. Processing the form in the system should take about a week, and then you will receive your SFS user name and password by email. If you do not receive an email within 7 business days, please check your junk folder, and if it is not there please contact OMHLocalAdminServices@omh.ny.gov for a status update.

After the login information is received, SFS functions as a self-service portal where banking information, additional users and additional addresses can be added. For information on the self-service functionality, please see the SFS vendor page found at <https://www.sfs.ny.gov/index.php/vendors> contact the SFS helpdesk at helpdesk@sfs.ny.gov or (518) 457-7717 or (855) 233-8363 toll-free.

Q. I operate under Office of Addiction Services and Supports (OASAS), how do I obtain my SFS ID?

A. To receive payments from NYS, entities are required to obtain access to the NYS Statewide Financial System (SFS) and have an SFS Vendor ID#.

To obtain an SFS Vendor ID#, please complete the Substitute W-9 Form found here [New York State Substitute Form W-9](#). Once completed please double check that the legal name and TIN fields are accurate, as discrepancies in these fields will cause processing delays. After you double check the information in the form, please send the signed form to the OASAS mailbox B1184Requests@oasas.ny.gov for processing. Processing the form in the system should take about a week, and then you will receive your SFS user name and password by email. If you do not receive an email within 7 business days, please check your junk folder, and if it is not there please contact B1184Requests@oasas.ny.gov for a status update.

After the login information is received, SFS functions as a self-service portal where banking information, additional users and additional addresses can be added. For information on the self-service functionality, please see the SFS vendor page found [Homepage \(ny.gov\)](#) or contact the SFS helpdesk at helpdesk@sfs.ny.gov or (518) 457-7717 or (855) 233-8363 toll-free.

Q. I operate under Office for People with Developmental Disabilities (OPWDD), how do I obtain my SFS ID?

A. All OPWDD providers who receive payments other than Medicaid from NYS already have a Statewide Financial System (SFS) Vendor ID#. This is required for your agency to access SFS and receive payments. If you would like to confirm your SFS Vendor ID#, please contact central.operations@opwdd.ny.gov. Please use MH Worker Bonus in the subject of the email to ensure a timely response.

If you deliver non-Medicaid supports and services and don't already have an SFS Vendor ID#, you can obtain one by completing the [New York State Substitute W-9 Form](#). Once completed please double check that the legal name and TIN fields are accurate, as discrepancies in these fields will cause processing delays. After you double check the information in the form, please

send the signed form to central.operations@opwdd.ny.gov for processing. Processing the form in the system should take about a week, and then you will receive your SFS username and password by email. If you do not receive an email within 7 business days, please check your junk folder, and if it is not there, please contact central.operations@opwdd.ny.gov for a status update.

After the login information is received, SFS functions as a self-service portal where banking information, additional users and additional addresses can be added. For information on the self-service functionality, please see the SFS vendor page found at: <https://www.sfs.ny.gov/index.php/vendors> or contact the SFS helpdesk at helpdesk@sfs.ny.gov or (518) 457-7717 or (855) 233-8363 toll-free.

Q. Will I receive a remittance advice or information on approved payments?

A. Providers/Employers will see the HWB bonus as a Lump Sum (HWB-HW Bonus) line item on their Medicaid remittance at the same time they normally receive their remittance for an eMedNY claim cycle, whether it's an electronic or a paper remittance. If they receive electronic remittances, they will see the remittance prior to receiving payment. If they receive a paper remit, the paper will accompany the remittance.

In addition, there may be information about the payment on the [HWB Program Portal](#).

Q. I am a qualified employer. Do we need to submit additional documents from employees to receive the HWB program bonus?

A. Employers are required to submit their qualified employees' data in a specified data format that will be provided by the department. All qualified Medicaid employers must maintain contemporaneous records tracking all claims submitted for no less than six (6) years. An employer must furnish such records upon request to the department, the Office of Medicaid Inspector General (OMIG), the US Department of Health and Human Services (HHS) and the deputy attorney general for Medicaid Fraud.

Q. I am an Employer with eligible employees, what should I do next?

A. You will need to utilize the following web portal to make the claim. Please go to www.NYSWorkerBonus.com and begin reviewing important instructional information.

Providers enrolled in the NYS Medicaid (eMedNY) system:

Before you do so, please verify that you have an active Medicaid Management Information System (MMIS ID). You can verify your MMIS is active by calling the eMedNY Call Center at (800) 343-9000. Call center representatives are available from 8:00AM to 5:00PM, Monday through Friday.

Providers who are NOT enrolled in the NYS Medicaid (eMedNY) system:

If you do not have an MMIS ID, meaning you are not enrolled in the NYS Medicaid system, you will need to verify that you have a Statewide Financial System (SFS) ID.

The agencies with providers who may not be in NYS Medicaid (eMedNY) system may include: Office of Mental Health, Office for People With Developmental Disabilities, Office of Children and Family Services, Office of Addiction Services and Supports and the New York State Education

Department. Once you have confirmed that you are actively enrolled or your SFS ID is active, you can prepare information for submission of reimbursement for eligible employees. More details, including a *Technical User Guide*, can be found within the [HWB Program Portal](#).

Education Sector Employers:

The healthcare worker bonus portal will open for education sector employers on October 1, 2022.

NOTE: Qualified employers that employ workers paid by the State **should not** claim through the HWB Program Portal and should instead work through their respective State agency for more details. See section [Education Sector Employers](#) for additional information.

Q. What should an eligible Medicaid employer do when they can't register with their Medicaid Management Information System (MMIS ID), or do not have an MMIS ID?

A. Please call the HWB Call Center at 1-866-682-0077. The operating hours are Monday through Friday, 8:00 AM until 5:00 PM.

Q. I am a qualified employer, what is the timeline for submitting for bonus payments for eligible employees?

A. Employers must submit claims for bonus payments within 30-days after the completion of each vesting period as defined by the schedule published by the Department. For the first vesting period, the 30-day claim filing deadline begins on the date the vesting schedule is published. Employers are required to pay bonuses within 30-days of receipt of payment on a claim for each qualified employee. Although employees may be eligible for vesting periods worked in the past (e.g. 10/1/21 to 3/31/22), the bonuses are not payable until the employer claims and receives payment. Advance payments are not permitted.

Q. I am a qualified employer may I keep any portion of the bonus payment?

A. No. A qualified employer shall not keep any portion of the bonus and any bonus amount not paid to an employee must be returned to the department.

Q. I am a qualified employer and have applied for health care worker bonuses on behalf of my qualified employee(s). I should have received the bonus payment for distribution, who can I call to check on the status of my payment?

A. You may log onto the [HWB Program Portal](#) and review the status of the claims submitted. If additional information is necessary, please call the HWB Call Center at 1-866-682-0077.

Q. I am a qualified employer. When will I be able to claim a bonus for my qualified employee(s)?

A. Please refer to the vesting schedule posted [here](#).

Q. Can you elaborate more on the vesting periods? Is it just any 6-month time period?

A. The “vesting period” is defined in SOS section 367-w(2)(d) as a six-month period between the dates of October 1, 2021 and March 31, 2024 included in a vesting schedule published by the Commissioner. Upon completion of six-months of consecutive employment by an employee with a qualified employer that ends within a vesting period established in the Vesting Schedule, the employer has thirty-days from the end of the vesting period to submit a claim for the bonus payment. See [Vesting Schedule](#).

Q. Is an employer required to provide a bonus to an otherwise eligible employee who has been terminated for cause, whether prior to or after the deadline for the employer's payment of the bonus?

A. Employers may be obligated to pay former employees who are eligible and vested while in their employment *provided that* their employment was not terminated within thirty (30) days of the Employer receipt of bonus funds. As such, if the employee was terminated after the employer's payment of the bonus, the employer is still required to pay the bonus to the employee.

Q. What is the employer's obligation in relation to the bonus, if an employee is promoted within a vesting period from an eligible title to an ineligible title?

A. Upon completion of six-months of consecutive employment by an eligible employee with a qualified employer that ends within a vesting period established in the Vesting Schedule, the employer has thirty-days from the end of the vesting period to submit a claim for the bonus payment. See the [Vesting Schedule](#).

Q. How much is the bonus to which eligible employees are entitled?

A. Employers will pay bonus amounts to qualified employees based on the number of hours worked during the vesting period.

- Qualified employees who work at least 20 hours but no more than 30 hours per week are eligible for a bonus of \$500.
- Qualified employees who work at least 30 hours but no more than 35 hours per week are eligible for a bonus of \$1,000.
- Qualified employees who work at least 35 hours per week are eligible for a bonus of \$1,500.

A qualified employee is eligible for only two vesting periods per employer in an amount equal but not greater than \$3,000 across all employers.

Q. I am an employer with multiple facilities and MMIS ID's. Can I register them together?

A. The HWB Portal is designed to allow multi-site entities with multiple MMIS ID's to register all associated MMIS ID's under a single account. There is no limit on the number of MMIS ID's an employer can register to an account. Reimbursement from eMedNY will be made to the account (EFT)/location (paper check) designated by each MMIS ID registered under that account.

Separately, entities with multiple MMIS ID's do have the option should they choose of using a single MMIS for all employee bonus claims.

Q. I am an employer with employees who support multiple MMIS ID's across our organization, how should I report this employee in the HWB Portal?

A. Employees should be submitted once under the MMIS ID where the employee worked the majority of hours in the vesting period. The hours worked at other MMIS ID's should be included in the single submission. Multiple submissions for the employee by the same organization will result in system rejections for duplication.

Large employers with employees who work across multiple tax IDs within (or directly affiliated to) their health system should consider those employees as vested/eligible if they met all the eligibility requirements and were employed for the entire vesting period by the health system. The health

system should claim these employees under the applicable tax ID where the employee worked the majority of the time during the applicable vesting period.

Q. I am an employer with an employee that has both an SSN and ITIN, which should I use?

A. Employers should never submit separate claims with the ITIN on one and SSN on the other. An ITIN should only be submitted when the employee does not have a valid SSN.

Q. Will employers be notified when payments will be made out of SFS and eMedNY and will a remittance be provided?

A. The HWB Portal will notify employers when payment information is available and offer an employee-level remittance for employers.

Q. As an employer, once I receive payment from SFS or eMedNY, what are my obligations?

A. Employers must reimburse their eligible employees within 30 days of receipt of the HWB payment from the state. Employers have no requirement to release the bonus payments as separate checks, so long as they bonus payment is identifiable to the employee and can be verified on audit.

Q. I am a qualified employer who was unable to complete my submission of qualified employees during a prior vesting period. Can I submit employees eligible for a bonus for Vesting Period 1 and/or 2 at a later date?

A. Providers/Employers who were not able to or did not complete submission of qualified employees within 30 days of the end of the Vesting Period when the employee was eligible are able to file a late submission.

Employers **will** be able to submit claims for any prior vesting period during any submission period. For example, during Submission Period 5, employers will be permitted to submit claims for any of the five Vesting Periods.

- Employers should make every attempt to submit claims as soon as the employee is eligible.
- Employers must validate that employee(s) met all other qualifying criteria during the respective vesting period.
- This flexibility does not change the criteria that a qualified employee is eligible for only two vesting periods per employer in an amount equal but not greater than \$3,000 across all employers.

Please be advised that, in accordance with SOS § 367-w(4)(f), claims submitted more than 30 days after the respective Vesting Period are technically late for filing purposes. All Employers should document and retain information regarding the reason for any late submission for audits and investigation purposes relating to the submission of claims for the HWB Program.

Employee Separation

Q. Are employers obligated to pay the HWB bonus to former employees?

A. Employers may be obligated to pay former employees that are eligible and vested while in their employment provided that the employee did not terminate his or her employment with the

employer prior to the due date for payment of the bonus. The following table shows when the employer must provide the bonus payment.

Separation Facts	Employee is eligible	Employee is not eligible
The employee vested, was employed at the time of the claim, and the employee continues to be employed when the employer receives the bonus payment.	✓	
The employee vested, was employed at the time of the claim, and stays with the employer for at least 30 days after the employer received the bonus payment. The employer fails to pay the bonus within 30 days of receipt, then the employee leaves.	✓	
The employee vested and before the employer submits a claim the employee is terminated by the employer.	✓	
The employee vested, was employed at the time of the claim, and then the employee is terminated by the employer.	✓	
The employee vested but the employee quits the employer prior to the bonus being claimed.		✓
The employee vested, was employed at the time of the claim but the employee left before the employer receives the bonus payment.		✓
The employee vested, was employed at the time of the claim and when the employer received the payment, but the employee leaves less than 30 days after the employer received the payment.		✓

Q. If an employee retires, are they entitled to a bonus payment?

A. An employee retirement is analogous to the employee quitting or leaving their employer. See the above table for guidance on whether the employee is entitled to the bonus payment depending upon when they separated from the employer.

Q. If an employee passes away, is the employee or the employee's estate entitled to a bonus payment?

A. When an employee passes away, the employment relationship ends similar to when the employee quits or leaves their employer. See the above table for guidance on whether the employee or the employee's estate is entitled to the bonus payment depending upon when the employment relationship ends.

Q. Is an employer required to provide a bonus to an otherwise eligible employee who has been terminated for cause, whether prior to or after the deadline for the employer's payment of the bonus?

A. Employers may be obligated to pay former employees who are eligible and vested while in their employment ***provided that*** their employment was not terminated within thirty (30) days of the Employer receipt of bonus funds. As such, if the employee was terminated after the employer's payment of the bonus, the employer is still required to pay the bonus to the employee.

Enforcement

Q. Will the employer's determination of employee eligibility be subject to review?

A. Yes. SOS §367-w (3)(d) requires employers to maintain contemporaneous records to substantiate claims submitted and such records must be submitted upon request to the Department, OMIG, DOL, HHS and MFCU. SOS §367-w (5) permits OMIG, in consultation with the Department, to conduct audits, investigations, and reviews of employers submitting claims for the HWB.

Q. What if I am a qualified employer but do not apply for the bonus on behalf of my eligible employees?

A. If a qualified employer fails to identify, claim, or pay a bonus to an eligible employee they are subject to sanction, up to and including exclusion from the Medicaid program, and may be subject to penalty. See SOS §367-w (5).

Q. What happens if an employer mistakenly applied for an employee who is not qualified for the bonus or applies for a larger value bonus than the employee should have received?

A. If the employer receives a bonus for an employee who is not eligible to receive a bonus or an amount in excess of what the employee is qualified for that bonus amount must be returned to the Department. An employer is not entitled to retain any portion of the bonus payment.

Q. What if an employer fails to pay a HWB claimed and received on behalf of an eligible employee?

A. Any employer who fails to pay any part of the bonus payment to a designated employee shall remain liable to pay that bonus to the eligible employee regardless of any sanction or penalty OMIG may impose. See SOS §367-w (5)(c).

Q. If an employer improperly claims and pays a bonus to an ineligible employee will OMIG recover the payment from the employee?

A. No. All recovery of inappropriately paid bonus payments shall be recovered from the employer and the employer does not have the right to recover any inappropriately paid bonus from the employee. See SOS §367-w (5)(d).

Employee Help

Q. I am an employee and did not receive my health worker bonus, but believe I am eligible. What should I do?

A. First, please review these Q&A and the HWB webpage to see if you may be an eligible Employee. If you think you meet the criteria AND you worked for an entire vesting period, you may be entitled to a HWB bonus payment. Employers are responsible for determining which employees are eligible for the bonus. Therefore, you are encouraged to work with your employer

to see if a resolution can be reached. Please note that your Employer has **about 90 days** after the end of your vesting period to pay you the bonus.

As such, you should first contact your employer and ask why you were not submitted for the bonus. If you believe your employer made a mistake in their determination of your eligibility, and the period for submitting claims is still open, please attempt to resolve the matter with your employer.

The Office of the Medicaid Inspector General (OMIG) is developing a process for employees to submit allegations that their employer has not complied with the requirements of the Healthcare Worker Bonus program. If you cannot reach a resolution with your employer, and wish to file an allegation, you will be required to complete a form that includes (1) your title, (2) your period of employment and average hours worked during the applicable vesting period, (3) your earnings excluding bonuses and overtime, and other pertinent information. This process will be launched soon, please check back for updates.

Q. Can an Employer take back a HWB bonus payment from an Employee?

A. No. Once an Employer pays a bonus to an Employee under the HWB program, the Employer may not take back any portion of that bonus payment from the Employee, *even if* the claim is determined inappropriately paid and recovered by the Office of Medicaid Inspector General (OMIG). See SOS § 367-w(5)(d). If an Employer pays a bonus under the HWB program, and then attempts to take back any portion of the bonus payment from the Employee, the Employee should contact the **New York State Department of Labor** at **(888) 469-7365**.

Help and Support

Q. How do I contact the State if I have any questions or concerns on the HWB Program?

A. The fastest way to obtain an answer is to review the published guidance and FAQs the Department has posted to its website:

- [HWB Program Website and Guidance](#)
- [HWB Program Frequently Asked Questions \(FAQs\)](#)

If your specific inquiry is not addressed in the provided guidance, The Department is committed to updating the information as new questions come in and are answered. To this end, the Department has established an email address, NYSWorkersBonus@health.ny.gov, dedicated to the HWB program. Please direct your inquiry to this inbox to make sure your questions are received and processed.

If your question is pertaining to the online claim's portal and technical assistance questions on how to submit your claims, The Department has established the **HWB Program Call Center which can be reached at 1 (866) 682-0077**. Operating hours are Monday through Friday, 8:00 AM until 5:00 PM.

Q. How do I stay informed of changes or updates to this and other programs? And how do I sign up for Provider ListServ to ensure I have up to date information?

A. The [HWB Program Portal](#) will be updated regularly with program updates and/or the most up to date information for employers. Please visit the [eMedNY ListServ page](#) to subscribe to applicable Listservs.

Q. How can I find more information regarding the Healthcare Worker Bonus (HWB) Program and Claim Portal?

A. Please visit the [HWB Program Portal](#). For additional questions please contact the HWB Program Call Center at 1 (866) 682-0077. The operating hours are Monday through Friday, 8:00 AM until 5:00 PM. Additional information is also provided on the [Department of Health HWB Program website](#).



DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
DEPARTMENT OF MANAGEMENT AND BUDGET
112 STATE STREET, ROOM 1200
ALBANY, NEW YORK 12207
PHONE: (518) 447-5525 FAX: (518) 447-5589
www.albanycounty.com

M. DAVID REILLY, JR
COMMISSIONER

April 5, 2023

Honorable Andrew Joyce
Chair, Albany County Legislature
112 State St., Rm. 710
Albany, NY 12207

Dear Chairman Joyce:

Legislative authorization is requested to transfer a tax-foreclosed property located in the Town of New Scotland known as New Salem Road to the New Salem Volunteer Fire Department, Inc.

If you have any questions regarding this request, I can make myself available at your earliest convenience. Thank you for your consideration.

Sincerely Yours,

M. David Reilly, JR
Commissioner

cc:

Hon. Dennis Feeney, Majority Leader
Hon. Frank Mauriello, Minority Leader
Majority Counsel
Minority Counsel



County of Albany

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

Legislation Text

File #: TMP-4191, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

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

Requesting Legislative Action to Authorize the Conveyance of Tax Delinquent Foreclosed Property located in the Town of New Scotland known as New Salem Road

Date:	April 6, 2023
Submitted By:	David Reilly
Department:	Management and Budget
Title:	Commissioner
Phone:	518-447-7040
Department Rep.	David Reilly
Attending Meeting:	David Reilly/Michael McLaughlin

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):
Click or tap here to enter text.

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee: Click or tap here to enter text.
Scope of Services: Click or tap here to enter text.

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: Click or tap here to enter text.

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: Click or tap here to enter text.

Appropriation Amount: Click or tap here to enter text.

Source of Funding - (Percentages)

Federal: Click or tap here to enter text.

State: Click or tap here to enter text.

County: Click or tap here to enter text.

Local: Click or tap here to enter text.

Term

Term: (Start and end date) Click or tap here to enter text.

Length of Contract: Click or tap here to enter text.

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: Click or tap here to enter text.

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

Justification: (state briefly why legislative action is requested)

Requesting legislative action to rescind the previous authorization to convey property located in the Town of New Scotland known as New Salem Road (Tax Map 82.-2-24) per ABL Res No. 398 of 2019 to the Albany County Land Bank Corporation and convey this property for \$1.00 to the New Salem Volunteer Fire Department, Inc. 694 New Salem Road, Voorheesville, NY 12186

As the fire department is not on a main road in Town of New Scotland, due to this property's location being on the corner of Route 85 and Route 85A , the fire department indicates by acquiring the property it will help in their mission to keep residents safe by displaying pertinent information or any activities the fire department conducts on it.



694 New Salem Road
Voorheesville, New York 12186
www.newsalemfire.com

April 4, 2023

Hon. Daniel P. McCoy
Albany County Executive
112 State Street
Albany, NY 12207

RE: FORECLOSED PROPERTY

Dear Hon. Daniel P. McCoy:

The New Salem Volunteer Fire Department recently found out that a piece of property on the corner of Route 85 and Route 85A in New Salem was foreclosed.

The volunteers at the New Salem Fire Department have been using and maintaining this property for years. Currently, we have our flag pole and sign on this property and we would be interested in acquiring this parcel for our continued use.

If this property is something that our Volunteer Fire Company could acquire, it would help in our mission to keep the residents safe and informed, as the location of our fire department is not located on a main road. The sign helps us keep our district residents and other people that use those main roads informed of any pertinent information or any activities that the fire department advertises.

Any assistance you or your office could provide would be greatly appreciated.

Thank you so much for your time and attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Steve Ayers".

Steve Ayers
Chief
New Salem Fire Department

(1 of 2)

Land Parcels (2022)

Municipality: Town of New Scotland
Parcel Location: New Salem Rd
Land Parcel: 82.-2-24
Owner Name: Carl Apartments Inc
Property Class Code: 311
Property Class Description: Residential/Vacant Land
Year Built:
School District Code: 013403
School District: Voorheesville CSD
Acres: 0.08 ac.
Deed Reference: NOT AVAILABLE
Land Assessment: \$9,000.00
Total Assessment: \$9,000.00

[PDF Tax Map](#)

[Google Maps](#)

[Zoom to](#)

Department of State

Division of Corporations

Entity Information

[Return to Results](#)[Return to Search](#)

Entity Details



ENTITY NAME: NEW SALEM VOLUNTEER FIRE DEPARTMENT, INC.	DOS ID: 69852
FOREIGN LEGAL NAME:	FICTITIOUS NAME:
ENTITY TYPE: DOMESTIC NOT-FOR-PROFIT CORPORATION	DURATION DATE/LATEST DATE OF DISSOLUTION:
SECTION OF LAW: -	ENTITY STATUS: ACTIVE
DATE OF INITIAL DOS FILING: 03/05/1947	REASON FOR STATUS:
EFFECTIVE DATE INITIAL FILING: 03/05/1947	INACTIVE DATE:
FOREIGN FORMATION DATE:	STATEMENT STATUS: NOT REQUIRED
COUNTY: ALBANY	NEXT STATEMENT DUE DATE:
JURISDICTION: NEW YORK, UNITED STATES	NFP CATEGORY:

[ENTITY DISPLAY](#) [NAME HISTORY](#) [FILING HISTORY](#) [MERGER HISTORY](#) [ASSUMED NAME HISTORY](#)

Service of Process on the Secretary of State as Agent

The Post Office address to which the Secretary of State shall mail a copy of any process against the corporation served upon the Secretary of State by personal delivery:

Name:

Address:

Electronic Service of Process on the Secretary of State as agent: Not Permitted

Chief Executive Officer's Name and Address

Name:

Address:

Principal Executive Office Address

Address:

Registered Agent Name and Address

Name:

Address:

Entity Primary Location Name and Address

Name:

Address:

Farmcorpflag

Is The Entity A Farm Corporation: NO

Stock Information

Share Value	Number Of Shares	Value Per Share

COUNTY OF ALBANY



Parcel Find

LOCATION: ** MULTIPLE			PARCEL: 0800000040		TAX DEED - 2013	
NAME: *** \			0000		EFF DATE: 04/05/2023	
EAR	CAT	BILL	#SC REFERENCE	BILLED/ADJ	UNPAID BAL	DUE NOW
2022	RE-A	75 Y	0 NEW SALEM RD	282.74	282.74	325.15
2021	TL-A	534 Y	0 NEW SALEM RD	65.57	65.57	83.27
2013	TD-R	87 Y	726 NEW SALEM RD	2,277.88	2,277.88	2,277.88
TOTAL DUE NOW					2,686.30	
TOTAL UNPAID					2,626.19	

**



DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
DEPARTMENT OF MANAGEMENT AND BUDGET
112 STATE STREET, ROOM 1200
ALBANY, NEW YORK 12207
PHONE: (518) 447-5525 FAX: (518) 447-5589
www.albanycounty.com

M. DAVID REILLY, JR
COMMISSIONER

April 5, 2023

Honorable Andrew Joyce
Chair, Albany County Legislature
112 State St., Rm. 710
Albany, NY 12207

Dear Chairman Joyce:

Legislative authorization is requested to transfer a tax-foreclosed property located in the City of Albany, 343 First Street.

If you have any questions regarding this request, I can make myself available at your earliest convenience. Thank you for your consideration.

Sincerely Yours,

M. David Reilly, JR
Commissioner

cc:

Hon. Dennis Feeney, Majority Leader
Hon. Frank Mauriello, Minority Leader
Majority Counsel
Minority Counsel



County of Albany

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

Legislation Text

File #: TMP-4192, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

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

Requesting Legislative Action to Authorize the Conveyance of Tax Delinquent Foreclosed Property located in the City of Albany 343 First Street

Date:	April 6, 2023
Submitted By:	David Reilly
Department:	Management and Budget
Title:	Commissioner
Phone:	518-447-7040
Department Rep.	Michael McLaughlin
Attending Meeting:	David Reilly/Michael McLaughlin

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):
Click or tap here to enter text.

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee: Click or tap here to enter text.
Scope of Services: Click or tap here to enter text.

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: Click or tap here to enter text.

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: Click or tap here to enter text.

Appropriation Amount: Click or tap here to enter text.

Source of Funding - (Percentages)

Federal: Click or tap here to enter text.

State: Click or tap here to enter text.

County: Click or tap here to enter text.

Local: Click or tap here to enter text.

Term

Term: (Start and end date) Click or tap here to enter text.

Length of Contract: Click or tap here to enter text.

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: Click or tap here to enter text.

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

Justification: (state briefly why legislative action is requested)

Requesting Legislative Action rescinding the prior authorization to convey the delinquent tax foreclosed property located at 343 First Street (Tax Map No. 65.56-3-61) in the City of Albany per ABL Res No. 506 of 2017 to the Albany County Land Bank Corporation and to instead authorize conveyance of this property to Juan D. Albarracin, 174 Ridge Street, Newark, New Jersey, 07104-113 for the sum of \$20,328.14.

Due to confusion as to ownership of 343 First Street resulting from the Land Bank not have taken title to it from the County as authorized by ABL Res No. 506 of 2017 this property was erroneously deeded by a third party to Mr. Albarracin thereby resulting in a title dispute between himself and the County. To solve this dispute he has offered to pay all delinquent taxes and any out of pocket expenses the County has incurred on 343 First Street in return for a Quitclaim deed to the property from the County to him.

Attached is a suggested draft resolution for this matter reviewed by the Department of Law.

The following will be part of the sale of this property and is requested to be stated in the approval resolution of sale:

Mr. Juan D. Albarracin will pay all delinquent taxes and any out of pocket expenses the County has incurred on 343 First Street in return for a Quitclaim Deed to the property from the County. He will also be responsible for payment of all closing costs and the 2023 Property Tax Bill.

April 4, 2023

Via Certified Mail

Mr. Jeffrey Neal
Director of Finance
Albany County Department of Management and Budget Division of Finance
112 State Street, Room 1340
Albany, NY 12207-2021

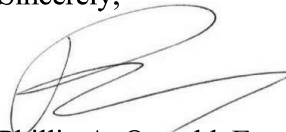
Dear Mr. Neal:

Re: **For Settlement Purposes Only; Subject to the Protections of CPLR 4547;
Without Prejudice; All Rights Reserved**
Juan Albarracin v. County of Albany
Index No.: 909409-22
Our File No.: 4536.32077

This firm represents Mr. Juan D. Albarracin in the above-referenced matter. I am enclosing a check with this letter that is being tendered on behalf of my client, Mr. Juan D. Albarracin, for deposit in escrow pending approval or disapproval by the County Legislature of a proposed settlement agreement relating to litigation regarding title to the property located at 343 First Street in the City of Albany, NY. I have previously been in correspondence with the County of Albany's attorney, Mr. Rutnik, regarding the proposed settlement, and he is copied on this letter as well.

Thank you, and please feel free to contact me at the phone number or email address listed above should you want to discuss this matter further.

Sincerely,



Phillip A. Oswald, Esq.

Encl.

cc: Gregory A. Rutnik, Esq. {via electronic mail only – Greg.Rutnik@albanycountyny.gov}
Assistant County Attorney
County of Albany

COUNTY OF ALBANY
DIVISION OF FINANCE

DEPOSIT TRANSMITTAL

Division of Finance, Cash Receipts, 112 State Street, Suite 800, Albany, New York 12207
Office: (518) 447-7070, Fax: (518) 447-5516
PLEASE PRINT OR TYPE INFORMATION

DEPARTMENT: DEPARTMENT OF LAW

ADDRESS: ROOM 900 112 STATE STREET

Total Number of Checks: 1

Total Amount of Checks: \$20,328.14

Total Amount of Cash: \$0.00

Total Deposit: \$20,328.14

[illegible]

VERIFIED BY: Jeff Neal DATE: 4/6/2023

TITLE: Director of Finance

If Problems with Deposit, Contact: Jeff Phone: 4912

FOR OFFICE USE ONLY: DIVISION OF FINANCE

PAID RECEIPT STAMP

RECEIVED BY (Initial):



DANIEL P. McCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
DEPARTMENT OF MANAGEMENT AND BUDGET
FINANCE DIVISION
112 STATE STREET, ROOM 1340
ALBANY, NEW YORK 12207-2021
(518) 447-7070 - FAX (518) 447-5516
www.albanycounty.com

M. DAVID REILLY, JR.
COMMISSIONER

JEFFREY NEAL
DIRECTOR OF FINANCE

MEMORANDUM

To: Greg Rutnik, Assistant County Attorney
From: Jeff Neal, Director of Finance
Date: March 28, 2023
Re: 343 First Street, City of Albany, County Foreclosed Parcel

Mr. Phillip A. Oswald assertions in his March 14, 2023 communication regarding payments made by his client are incorrect, per review of the current public record:

Albany County has a long-standing policy to pay Real Property Tax bills on non-exempt County-owned parcels in January (Property) and September (School) each year.

In the specific instance of this inquiry, the County paid the September 2022 School Tax bills by check number 3134171 in the amount of \$105,470.28. That check was cashed by the Albany City School District in September 2022 and payments applied as directed by copies of the tax bills attached to that check.

According to our records, a sum of \$354.53 was applied in September 2022 to the 343 First Street parcel:

CITY OF ALBANY	343	FIRST ST	65.56-3-61	City of Albany	\$354.53
----------------	-----	----------	------------	----------------	----------

Any duplicate payments received by Towns, Cities or School Districts on County foreclosed parcels are refunded to the payor by that tax office. If Mr. Albarracin has a cancelled check from September 2022 showing payment made to the Albany City School District, I can verify those funds were returned to him.

In regards to the second payment noted in Mr. Oswald's letter, the attached receipt from the County Tax Collections office notes receipt of payment by Legacy Title Service. That amount was previously removed from the amounts listed as due in our last communication.

The total amount of Albany County extinguished and tax bills paid on this property pre-2023 is \$20,328.14 (Twenty-Thousand, Three-Hundred Twenty-eight dollars and 14 cents) as detailed in the chart below.

343 First, County Owned Oct 2017--Issued/Extinguished Tax Bills			
Year	Property	School	Amount
2011-2016	\$14,390.70		\$14,390.70
2017	\$937.87	\$350.00	\$1,287.87
2018	\$832.80	\$350.00	\$1,182.80
2019	\$675.77	\$346.04	\$1,021.81
2020	\$597.17	\$352.77	
2021	\$1,004.68	\$353.22	\$1,357.90
2022	\$732.53	\$354.53	\$1,087.06
			\$20,328.14

Receipt record of the Legacy Title Payment in July 2021:

COUNTY OF ALBANY

TAX BILLING RECEIPT 300394

07/06/21 12:46: 2020 Real Estate

CLERK : rhall

PROPERTY: 06505600030610000000 CUST #: 344136

LOCATION: 343 FIRST ST

	PRINCIPAL	INTEREST
HIGH DWIGHT		
ALBANY PRO	216.35	43.27
ALBANY WAT	229.72	45.94
OTHER CHAR	77.76	15.55
5 PERCENT	26.19	0.00

Paid by/Ref:

# of Checks: 1	Check #: 0985	Check Amount:	654.78
		Cash Amount :	0.00
		Total Amount:	654.78
		Change Due :	0.00
		New Balance	0.00

RECEIPT OF TAXES ALBANY COUNTY DIVISION OF TAXES

IF ANY PARCEL REMAINS SUBJECT TO ONE OR 06/30/21

PAYMENT YOU HAVE MADE WILL NOT 344136

HIGH DWIGHT

252 GRAFTON ST

BROOKLYN, NY 11212

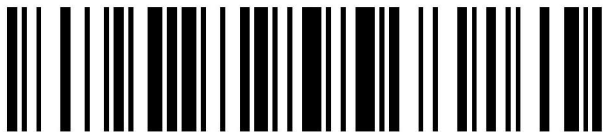
Finally, I note that per the above referenced Policy and Procedures, the County has now paid and additional sum of \$563.67 due on this parcel for the 2023 Property Tax due in January 2023.



ALBANY COUNTY – STATE OF NEW YORK
BRUCE A. HIDLEY COUNTY CLERK
16 EAGLE STREET, ALBANY, NEW YORK 12207

COUNTY CLERK'S RECORDING PAGE

THIS PAGE IS PART OF THE DOCUMENT – DO NOT DETACH



INSTRUMENT #: R2021-24393

Receipt#: 20210475882

Clerk: TR

Rec Date: 08/13/2021 10:01:13 AM

Doc Grp: D

Descrip: DEED

Num Pgs: 3

Rec'd Frm: LEGACY TITLE SERVICES, LLC

Party1: EFN PROPERTIES LLC
IHRP LLC

Party2: ALBARRACIN JUAN D

Muni: ALBANY CITY

Recording:

Cover Page	5.00
Recording Fee	30.00
Cultural Ed	14.25
Records Management - Coun	1.00
Records Management - Stat	4.75
TP584	5.00
Notice of Transfer of Sal	10.00
RP5217 Residential/Agricu	116.00
RP5217 - County	9.00

Sub Total: 195.00

Transfer Tax
Transfer Tax - State 168.00

Sub Total: 168.00

Total: 363.00

**** NOTICE: THIS IS NOT A BILL ****

***** Transfer Tax *****

Transfer Tax #: 275

Transfer Tax

Transfer Tax - State 168.00

Total: 168.00

Record and Return To:

LEGACY TITLE SERVICES, LLC
1407 ROUTE 9
CLIFTON PARK, NY 12065

THIS PAGE CONSTITUTES THE CLERK'S
ENDORSEMENT, REQUIRED BY SECTION 316-a (5)
& 319 OF THE REAL PROPERTY LAW OF THE
STATE OF NEW YORK.

Bruce A. Hidley
Albany County Clerk

This Indenture, made the 10th day of August, 20 21

Between **EFN PROPERTIES, LLC and IHRP, LLC**, as New York State limited liability companies doing business at 20 Gail Ave., Colonie, New York 12205,

parties of the first part and

JUAN D. ALBARRACIN, 174 Ridge St., Newark, New Jersey 07104-113,

party of the second part

WITNESSETH, that the parties of the first part, in consideration of ONE DOLLAR and 00/100 (\$1.00), lawful money of the United States, paid by the party of the second part, do hereby grant and release unto the party of the second part, his heirs, successors and/or assigns forever,

ALL THAT CERTAIN PLOT, PIECE, OR PARCEL OF LAND, situate, lying and being in the City of Albany, County of Albany, and State of New York, bounded and described as follows:

Beginning at a point in the northerly line of First Street 100 feet east of the easterly line of Judson Street and running thence easterly along said northerly line of First Street about 28 feet 8 inches to the southwesterly corner of the premises known as No. 341 First Street; thence northerly along the westerly line of said premises No. 341 First Street about 68 feet 4 inches to the northeast corner of Lot No. 15 on a map made by R.H. Bingham, City Surveyor, dated October 18, 1867 and filed in the Albany County Clerk's Office; thence westerly along the northerly line of said Lot No. 15 about 28 feet 8 inches to the easterly line of the lands now or formerly of Thomas J. Mullin and wife; thence southerly on a line parallel to the east line of Judson Street about 25 feet to a point in the southerly line of Lot No. 15; thence easterly along said southerly line of Lot No. 15 about 3 feet 8 inches to the northeasterly corner of the premises now or formerly owned by John H. Schulz and known as No. 19 Judson Street; thence southerly along the easterly line of said Schulz about 21 feet to the southeasterly corner of said Schulz lot; thence westerly along the southerly line of said Schulz lot about 3 feet 8 inches to the northeasterly corner of premises No. 17 Judson Street; thence southerly along the easterly line of said premises No. 17 Judson Street about 22 feet 4 inches to the point or place of beginning.

SUBJECT to any and all enforceable covenants, conditions, easements and restrictions of record affecting the premises.

BEING the same premises conveyed to the party of the first part by deed from DWIGHT HIGH dated 06/25/2021 and recorded with Albany County Clerk's Office on 07/07/2021 as Instrument #R2021-19986.

TOGETHER with all right, title and interest, if any, of the parties of the first part in and to any streets and roads abutting the above described premises to the center lines thereof; TOGETHER with the appurtenances and all the estate and rights of the parties of the first part in and to said premises,

TO HAVE AND TO HOLD the premises herein granted unto the party of the second part, the heirs or successors and assigns of the party of the second part forever.

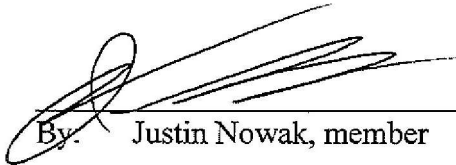
AND the party of the first part, in compliance with Section 13 of the Lien Law, covenants that the party of the first part will receive the consideration for this conveyance and will hold the right to receive such consideration as a trust fund to be applied first for the purpose of paying the costs of the improvement and will apply the same first to the payment of the cost of the improvement before using any part of the total of the same for any other purpose.

AND the party of the first part covenant as follows: FIRST. That the party of the second part shall quietly enjoy the said premises; SECOND. That said party of the first part will forever warrant the title to said premises.

The word "party" shall be construed as if it read "parties" whenever the sense of this indenture so requires.

IN WITNESS WHEREOF, the party of the first part has duly executed this deed the day and year first above written.

EFN PROPERTIES, LLC

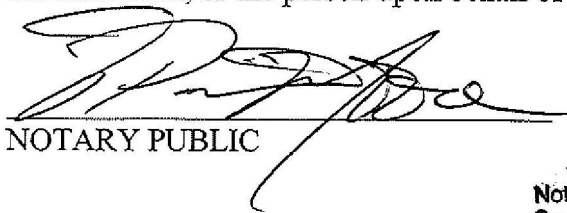

By: Justin Nowak, member

IHRP, LLC


By: Penny Tisko, member

STATE OF NEW YORK
COUNTY OF SARATOGA

On this 10th day of August, in the year 2021 before me, the undersigned, a Notary Public in and for said State, personally appeared JUSTIN NOWAK and PENNY TISKO, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) are/is subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity, and that by his/her/their signature(s) on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.


NOTARY PUBLIC

T. PADRIC MOORE
Notary Public, State of New York
Qualified in Schenectady County
No. 02MO6122302
Commission Expires Feb. 07, 2025

RESOLUTION NO.

**AMENDING RESOLUTION NO. 506 FOR 2016 BY RESCINDING THE
CONVEYANCE OF 343 FIRST STREET (TAX MAP NO. 65.56-3-61) IN THE
CITY OF ALBANY AND AUTHORIZING THE CONVEYANCE OF THIS
PROPERTY TO ANOTHER GRANTEE**

Introduced:

By Audit and Finance Committee:

WHEREAS, By Resolution No. 506 for 2017, this Honorable Body authorized the conveyance of various parcels of real property acquired by the County through "in rem" delinquent tax foreclosure to the Albany County Land Bank Corporation including 343 First Street (Tax Map No. 65.56-3-61) in the City of Albany, and

WHEREAS, Due to confusion as to ownership of 343 First Street resulting from the Land Bank not taken record title to it as authorized by Legislative resolution 506 of 2017, this property was erroneously deeded by a third party to Juan D. Albarracin thereby resulting in a title dispute between himself and the County, which dispute he is agreeable to resolving by his paying the County all expenses it has incurred with respect to this property in return for the County giving him a Quitclaim Deed to this property, and

WHEREAS, Under the circumstances it is in the best interest of the County to convey this property to Juan D. Albarracin and thereby recoup all the delinquent taxes and out of pocket expenses incurred by the County with respect to it amounting to \$20,328.14 now, therefore be it

RESOLVED, By the Albany County Legislature, that Resolution No. 506 for 2017 is hereby amended by rescinding the authorization to convey 343 First Street (Tax Map No. 65.56-3-61) in the City of Albany to the Albany County Land Bank Corporation, and be it further

RESOLVED, That the County Executive is authorized to execute on behalf of the County any documents necessary to convey 343 First Street (Tax Map No. 65.56-3-61) in the City of Albany to Juan D. Albarracin, 174 Ridge Street, Newark, New Jersey, 07104-113 for the amount of all delinquent taxes and out of pocket expenses amounting to \$20,328.14 incurred by the County with respect to this property in return for the County giving him a Quitclaim Deed to the property and, be it further

RESOLVED, That Juan D. Albarracin shall be responsible for all closing costs and the 2023 Property Tax Bill for 343 First Street, and be it further

RESOLVED, That the County Attorney is authorized to approve said conveyance as to form and content, and, be it further

RESOLVED, That the Clerk of the County Legislature is directed to forward certified copies of this resolution to the appropriate County Officials.



DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
DEPARTMENT OF MANAGEMENT AND BUDGET
112 STATE STREET, ROOM 1200
ALBANY, NEW YORK 12207
PHONE: (518) 447-5525 FAX: (518) 447-5589
www.albanycounty.com

M. DAVID REILLY, JR
COMMISSIONER

April 27, 2023

Honorable Andrew Joyce
Chair, Albany County Legislature
112 State St., Rm. 710
Albany, NY 12207

Dear Chairman Joyce:

Legislative authorization is requested to rescind the authorization to transfer tax foreclosed property located in the Town of Knox, 17604 Stevens Road to the Albany County Land Bank Corporation pursuant to ABL Resolution No. 481 of 2017 and convey this property to an abutting property owner John A Wright.

This transfer is in accordance with Resolution No. 29 of 2019 which states "Properties which will be discretionally conveyed by the County to individuals or entities who own abutting or adjacent parcels".

If you have any questions regarding this request, I can make myself available at your earliest convenience. Thank you for your consideration.

Sincerely Yours,

M. David Reilly, JR
Commissioner

cc:

Hon. Dennis Feeney, Majority Leader
Hon. Frank Mauriello, Minority Leader
Majority Counsel
Minority Couns



County of Albany

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

Legislation Text

File #: TMP-4246, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

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

Requesting Legislative Action to Authorize the Conveyance of Tax Delinquent Foreclosed Property located in the Town of Knox 17604 Stevens Road

Date:	April 27, 2023
Submitted By:	David Reilly
Department:	Management and Budget
Title:	Commissioner
Phone:	518-447-7040
Department Rep.	Michael McLaughlin
Attending Meeting:	David Reilly/Michael McLaughlin

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):
Click or tap here to enter text.

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee: Click or tap here to enter text.
Scope of Services: Click or tap here to enter text.

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: Click or tap here to enter text.

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: Click or tap here to enter text.

Appropriation Amount: Click or tap here to enter text.

Source of Funding - (Percentages)

Federal: Click or tap here to enter text.

State: Click or tap here to enter text.

County: Click or tap here to enter text.

Local: Click or tap here to enter text.

Term

Term: (Start and end date) Click or tap here to enter text.

Length of Contract: Click or tap here to enter text.

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: 389

Date of Adoption: October 11, 2022

Justification: (state briefly why legislative action is requested)

Legislative authorization is requested to rescind the authorization to transfer tax-foreclosed property located in the Town of Knox, 17604 Stevens Road Tax Map No. 68.-1-59 to the Albany County Land Bank Corporation pursuant to ABL Resolution No. 481 of 2017 and convey this property to an abutting property owner John A Wright, 11 Stevens Road, Bene, NY 12023 for \$1,000.

John A Wright per his submission has indicated he plans to clean up this property and combine it with his at 11 Stevens Road.

This transfer is in accordance with Resolution No. 29 of 2019, which states "Properties which will be discretionally conveyed by the County to individuals or entities who own abutting or adjacent parcels ".

As part of this sale, John A Wright will be subject to:

All closing costs

A pro-rated share of any current real property taxes which are owed on the property as of the closing

Att. Albany County executive

Mr Dan McCoy, 12th floor

Albany ny 12207

My name is John Wright residing at 11 Stevens Road Berne NY 12023 . I am writing regarding 17604 Stevens Rd located in the Town of Knox.

I am abutting owner of this property, and I have been maintaining the grass around it for almost 10 years, as it was becoming an eyesore to me. It is a very small chunk of property with a little block building that is in poor shape sitting on it. I am offering to pay \$1000 to buy the property to have and keep so I can clean up the area and it and join it with my property. I have spoken with Mrs. Brown regarding the property several times in the past and she has no interest in it. Please let me know what we can do to move forward on this.

Sincerely,

John A Wright

518-764-2622



DEPARTMENT OF MANGEMENT AND BUDGET

Purchaser Review

PROPERTY INFORMATION

Municipality — Town of Knox

Address of Properties — 17604 Stevens Road

Tax Map Number-68.-1-59

Property Description-Residential Land with Small Improvement

BIDDER NAME AND PROPERTIES OWNED BY PROSPECTIVE BUYER

Purchaser-John A Wright

Town of Knox-4 Line Road

CODE ENFORCEMENT INFORMATION

There are no outstanding violations-Verified Knox Code Enforcement Officer 4/27/2023

DELINQUENT TAX INFORMATION

No delinquent taxes-Verified with Albany County Tax Records Supervisor 4/27/2023

COUNTY FORECLOSURE INFORMATION

Not Applicable as properties were never delinquent

Signed- ¹

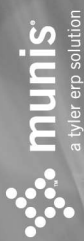
ANTHONY DILELLA

Property Manager

DATE---April 27, 2023



COUNTY OF ALBANY



Parcel Find

PARCEL: 0680000000105900000000
LOCATION: 17604 STEVENS RD
NAME: ** VARIOUS **

TAX DEED - 2011
EFF DATE: 04/27/2023

YEAR	CAT	BILL	#SC	REFERENCE	BILLED/ADJ	UNPAID BAL	DUE NOW
2022	RE-9	497	Y	17604 STEVENS RD	984.34	984.34	1,131.99
2021	TL-9	367	Y	17604 STEVENS RD	235.32	235.32	298.86
2020	RE-9	1203	Y	17604 STEVENS RD	224.67	0.00	0.00
2019	RE-9	103	Y	17604 STEVENS RD	1,006.49	0.00	0.00
2018	RE-9	304	Y	17604 STEVENS RD	982.42	0.00	0.00
2017	TL-9	243	Y	17604 STEVENS RD	968.03	0.00	0.00
2016	TL-9	568	Y	17604 STEVENS RD	820.97	0.00	0.00
2015	TL-9	233	Y	17604 STEVENS RD	823.43	0.00	0.00
2014	TL-9	77	Y	17604 STEVENS RD	836.46	0.00	0.00
2013	TL-9	256	Y	17604 STEVENS RD	554.10	0.00	0.00
2012	TL-9	141	Y	17604 STEVENS RD	826.51	0.00	0.00
2011	TD-R	109	Y	17604 STEVENS RD	9,182.31	9,182.31	9,182.31
TOTAL DUE NOW						10,613.16	
TOTAL UNPAID						10,401.97	