AGENDA

HEALTH COMMITTEE

JULY 24, 2019

PREVIOUS BUSINESS:

APPROVING PREVIOUS MEETING MINUTES

1. LOCAL LAW NO. “S” FOR 2018: A LOCAL LAW TO REQUIRE HOSPITALS TO POST THEIR POLICIES ON REPRODUCTIVE HEALTHCARE, NON-DISCRIMINATION, CHARITY CARE AND ADMISSIONS IN ALBANY COUNTY

2. RESOLUTION NO. 494 FOR 2018: PUBLIC HEARING ON PROPOSED LOCAL LAW NO. “S” FOR 2018

3. LOCAL LAW NO. “E” FOR 2019: A LOCAL LAW OF THE COUNTY OF ALBANY, NEW YORK, PROHIBITING THE SALE OF FLAVORED TOBACCO PRODUCTS

CURRENT BUSINESS:

4. AMENDING RESOLUTION NO. 259 FOR 2018: EXTENDING AN AGREEMENT WITH HEALTH RESEARCH, INC. REGARDING THE PUBLIC HEALTH EMERGENCY PREPAREDNESS PROGRAM

5. AUTHORIZING AN AGREEMENT WITH THE NEW YORK STATE GOVERNOR'S TRAFFIC SAFETY COMMITTEE REGARDING THE
GENERAL HIGHWAY SAFETY GRANT PROGRAM AND AMENDING THE 2019 HEALTH DEPARTMENT BUDGET
Honorable Andrew Joyce and Members of the Albany County Legislature:

LADIES AND GENTLEMEN:

The Health Committee of the Albany County Legislature met on June 26, 2019. Chairman R. Joyce, Messrs. Drake, Cahill, Ward, Hogan, Mss. Lekakis and Willingham were present. Mr. Domalewicz, and Ms. McLean Lane were excused. The following items were discussed and/or acted upon:

Approving Previous Meeting Minutes: Unanimously Approved.

1. **Local Law No. “S” for 2018**: A Local Law to Require Hospitals to Post Their Policies on Reproductive Healthcare, Non-Discrimination, Charity Care and Admissions in Albany County: Tabled at the request of the Sponsor.


3. **Local Law No. “E” for 2019**: A Local Law of the County of Albany, New York, Restricting the Sale of Flavored Tobacco Products: The Commissioner of the Albany County Department of Health said that the public health crisis regarding youth use of electronic cigarettes is driven by flavored products and that research is showing that kids who start smoking flavored products using electronic delivery systems have a higher likelihood of eventually smoking regular cigarettes. The Commissioner noted that unlike FDA-approved smoking cessation aids, e-cigarettes do not provide a clear exit strategy and that a majority of people who use e-cigarettes to quit smoking continue to vape after one year. Discussing the health effects of the chemicals used in e-cigarettes, the Commissioner said that according to early research, flavored e-liquids have been shown to be respiratory irritants in addition to damaging cardiovascular cells. The Commissioner concluded her remarks by conveying the Albany County Board of Health's endorsement of the proposed local law. After further discussion, the Committee voted 6-1 to move the proposal forward for legislative action with a favorable recommendation with Mr. Drake opposed.

Respectfully Submitted,
THE HEALTH COMMITTEE

RAYMOND F. JOYCE, Chairperson
TODD A. DRAKE
CHARLES CAHILL JR.
GARY DOMALEWIECZ

WANDA F. WILLINGHAM
ALISON MCLEAN LANE
SEAN WARD
BRIAN HOGAN
LOCAL LAW NO. “S” FOR 2018

A LOCAL LAW TO REQUIRE HOSPITALS TO POST THEIR POLICIES ON
REPRODUCTIVE HEALTHCARE, NON-DISCRIMINATION, CHARITY
CARE AND ADMISSIONS IN ALBANY COUNTY

Introduced: 9/12/18
By Ms. McLean Lane:

BE IT ENACTED by the Albany County Legislature as follows:

Section 1. Legislative Intent.

The Legislature finds that hospitals should post their policies on reproductive healthcare, end-of-life care, non-discrimination, charity care and admissions so that patients are informed whether the medical service they are seeking will be provided to them.

Section 2. Definitions

As used in this Local Law, the following terms shall have the meanings indicated:

(a) “Hospital” shall have the same meaning as provided in the relevant section of the New York State Law.

Section 3. Requirements.

A hospital located in Albany County shall publicly post on their web site their policies on reproductive healthcare, end-of-life care, non-discrimination, charity care and admissions.

Section 4. Rules and Regulations.

The Albany County Department of Health may promulgate such rules and regulations as it deems necessary to implement and enforce the provisions of this Local Law.

Section 5. Applicability.

This article shall apply to all actions occurring on or after the effective date of this Local Law.

Section 6. Severability.

If any clause, sentence, paragraph, subdivision, section or part of this Local Law or the application thereof to any person, individual, corporation, firm,
partnership, entity or circumstance shall be adjudged by any court of competent jurisdiction to be invalid or unconstitutional, such order or judgment shall not affect, impair or invalidate the remainder thereof, but shall be confined in its operation to the clause, sentence, paragraph, subdivision, section or part of this Local Law, or in its application to the person, individual, corporation, firm, partnership, entity or circumstance directly involved in the controversy in which such order or judgment shall be rendered.

Section 7. Effective Date.

This Local Law shall take effect within ninety (90) days of its filing with the Secretary of State.

*Referred to Law and Health Committees– 9/12/18*
RESOLUTION NO. 494

PUBLIC HEARING ON PROPOSED LOCAL LAW NO. “S” FOR 2018

Introduced: 10/9/18
By Ms. McLean Lane

RESOLVED, By the County Legislature of the County of Albany that a public hearing on proposed Local Law No. “S” for 2018, “A LOCAL LAW TO REQUIRE HOSPITALS TO POST THEIR POLICIES ON REPRODUCTIVE HEALTHCARE, NON-DISCRIMINATION, CHARITY CARE AND ADMISSIONS IN ALBANY COUNTY” be held by the County Legislature in the William J. Conboy II Legislative Chambers, Albany County Courthouse, Albany, New York at 7:15 p.m. on Tuesday, October 23, 2018, and the Clerk of the County Legislature is directed to cause notice of such hearing to be published containing the necessary information in accordance with the applicable provisions of law.

Referred to Law and Health Committee - 10/9/18
LOCAL LAW NO. "E" FOR 2019

A LOCAL LAW OF THE COUNTY OF ALBANY, NEW YORK [PROHIBITING] RESTRICTING THE SALE OF FLAVORED TOBACCO PRODUCTS

Introduced: 3/11/19
By Messrs. Miller, Clay, Ms. Cunningham, Messrs. Cahill, Commissio, Frainier, Mss. McKnight, Willingham, Messrs. Mayo, Domalewicz, Mss. Lekakis, McLean Lane, Plotsky, Messrs. Reinhardt, R. Joyce and Simpson:

BE IT ENACTED, by the Legislature of the County of Albany as Follows:

The Legislature of Albany County hereby finds and declares that:

Section 1: Findings and Intent

This Legislature finds that 81% of youth who have ever used a tobacco product report that the first tobacco product they used was flavored. Flavored tobacco products promote youth initiation of tobacco use and help young occasional smokers to become daily smokers by reducing or masking the natural harshness and taste of tobacco smoke and thereby increasing the appeal of tobacco products. As tobacco companies well know, menthol, in particular, cools and numbs the throat to reduce throat irritation, and make the smoke feel smoother, making menthol cigarettes an appealing option for youth who are initiating tobacco use. Tobacco companies have used flavorings such as mint and wintergreen in smokeless tobacco products as part of a “graduation strategy” to encourage new users to start with tobacco products with lower levels of nicotine and progress to products with higher levels of nicotine. It is therefore unsurprising that young people are much more likely than adults to use menthol-, candy- and fruit-flavored tobacco products, including not just cigarettes but also cigars[,] and cigarillos[, and hookah].

Tobacco use causes death and disease and continues to be an urgent public health threat as evidenced by the fact that every year 480,000 people die prematurely in the United States from smoking-related diseases and 28,000 people die prematurely from second hand smoke making tobacco use the leading cause of preventable death. Tobacco use can cause disease in nearly all organ systems and is responsible for 87 percent of lung cancer deaths, 79 percent of all chronic obstructive pulmonary disease deaths, and 32 percent of coronary heart disease deaths.

The 2018 National Youth Tobacco Survey cites research showing that youth and young adults identify flavors as a primary reason for e-cigarette use. Given the highly addictive nature of nicotine, it is not surprising that high school students who were current flavored e-cigarette users reported an increase in their frequency of vaping.
Some brands have particularly high levels of nicotine in that one single e-cigarette may contain as much nicotine as a pack of 20 cigarettes.

Much as youths disproportionately use flavored tobacco products, the same can be said of certain minority groups. According to the Food and Drug Administration (FDA), 85% of African American smokers, 44% of Hispanic smokers, 38% of Asian smokers and 28% of White smokers smoke menthol cigarettes. Native Americans, people who identify as LGBT, and young adults with mental health problems also have disproportionately high rates of smoking menthol cigarettes. Menthol products are more addictive, and both youth and racial/ethnic minorities find it harder to quit smoking menthol cigarettes.

According to the NAACP, “for decades, data has shown that the tobacco industry has successfully and intentionally marketed mentholated cigarettes to African Americans and particularly African American women as “replacement smokers”. The recognition of this harsh reality led the NAACP to adopt a unanimous resolution at their 2016 National Convention supporting state and local efforts to restrict the sale of menthol cigarettes and other flavored

Younger smokers are more likely than older smokers to try these products. When Congress enacted the FSPTCA, it found that the use of tobacco products by the nation’s children is a “pediatric disease of considerable proportions” that results in new generations of tobacco dependent children and adults.

Although the manufacture and distribution of flavored cigarettes (excluding menthol) are banned by federal law, neither federal law nor New York State law restricts the sale of menthol cigarettes or flavored non-cigarette tobacco products, such as cigars, cigarillos, smokeless tobacco, [hookah,] electronic smoking devices and the solutions used in these devices.

According to the 2018 Surgeon General’s Advisory Regarding the E-cigarette Epidemic Among Youth, e-cigarettes entered the U.S. marketplace around 2007, and since 2014, they have been the most commonly used tobacco product among U.S. youth. E-cigarette use among U.S. middle and high school students increased 900% during 2011-2015. During the past year, current e-cigarette use increased 78% among high school students from 12% in 2017 to 21% in 2018. More than 3.6 million U.S. youth, including 1 in 5 high school students and 1 in 20 middle school students currently use e-cigarettes.

Also according to the Surgeon General, nicotine exposure during adolescence can harm the developing brain that continues to develop until about age 25. Nicotine exposure during adolescence can impact learning, memory, and attention. Using nicotine in adolescence can also increase the risk for future addiction to other drugs. In addition to nicotine, the aerosol that users inhale and exhale from e-cigarettes can
potentially expose both themselves and bystanders to other harmful substances including heavy metals, volatile organic compounds, and ultrafine particles that can be inhaled deeply into the lungs.

Since the industry will not reveal what chemicals are in the flavorings in the vapor products, it may be years before we know the full negative impact of the explosive increase in the use of e-cigarettes. Scientists have discovered that cinnamon, vanilla, and cherry flavors react with propylene glycol, a main ingredient in many vape juices, to create entirely new chemicals, according to a study published in the journal Nicotine & Tobacco Research. Oct 18, 2018.

The federal government’s National Institute on Drug Abuse reported that teen use of e-cigarettes soared in 2018. The survey, which polled 8th, 10th and 12th graders across the country, found the rise in nicotine vaping was the largest spike for any substance recorded by the study in 44 years.

Flavors appeal to youth and drive youth experimentation with tobacco products:
- Beyond improving palatability, perceptible flavor provides an avenue for youth marketing;
- Youth tobacco users typically begin with flavored products and, overall, use flavored products at higher rates than their older peers;

Flavored tobacco products promote youth tobacco initiation and drive young occasional smokers to daily smoking; Consumers incorrectly perceive flavored tobacco products to be less harmful:
- The presence of characterizing flavors signals product palatability, which incorrectly associated with lower relative harm, influencing consumer brand preference and use;
- Adolescents are more likely to believe that fruit and chocolate or other sweet flavors are less harmful than flavors like alcohol, tobacco, and spice flavors;
- Youth e-cigarette users perceive lower harm from flavored e-cigarettes than from unflavored e-cigarettes despite research documenting harmful constituents present in e-cigarette flavoring.
- The majority of youth who use tobacco choose flavored tobacco products;

Price is a major factor impacting tobacco product initiation and cessation:
- The availability of inexpensive tobacco products leads to an increase in the number of smokers, particularly among younger populations;
- Lower priced cigars are among the products used as a substitute for cigarettes;
- Higher product prices lead to reduced smoking initiation among youth, reduced consumption among current tobacco users, and an increase in cessation with fewer relapses among former smokers.
E-cigarettes can also be used to deliver other drugs including marijuana. In 2016, one-third of U.S. middle and high school students who ever used e-cigarettes had used marijuana in e-cigarettes.

Albany County has a substantial and important interest in ensuring that existing state and local tobacco sales regulation is effectively enforced:

- Although it is unlawful to sell tobacco products to minors, 5 percent of New York retailers sold to minors between 2010 and 2012;
- A local tobacco retail licensing system will help ensure that tobacco sales comply with the Adolescent Tobacco Use Prevention Act, other tobacco control laws, and the business standards of Albany County;
- Licensing laws in other communities have been effective in reducing the number of illegal tobacco sales to minors;

A local licensing system for retailers of tobacco products, electronic cigarettes, and other products regulated by Article 13-F of New York State Public Health Law is necessary and appropriate for the public health, safety, and welfare of our residents;

Neither federal nor New York law restricts the sale of menthol cigarettes or flavored non-cigarette tobacco products, such as cigarillos, cigars, smokeless tobacco, [shisha,] e-cigarettes or e-cigarette solutions. It is the intent of Albany County to implement effective measures through this Bill to restrict access to flavored iterations of these products, and thus reduce tobacco experimentation, promote successful cessation, and narrow tobacco-related health disparities; prevent the sale or distribution of contraband tobacco products, and facilitate the enforcement of tax laws and other applicable laws relating to tobacco products.

**Section 2: Definitions**

As used in this Bill, the following terms shall have the meanings indicated:

ACCESSORY means any product that is intended or reasonably expected to be used with or for the human consumption of a Tobacco Product or Electronic Aerosol Delivery System; does not contain tobacco and is not made or derived from tobacco; and meets either of the following: (1) is not intended or reasonably expected to affect or alter the performance, composition, Constituents, or characteristics of a Tobacco Product or Electronic Aerosol Delivery System; or (2) is intended or reasonably expected to affect or maintain the performance, composition, Constituents, or characteristics of a Tobacco Product or Electronic Aerosol Delivery System but solely controls moisture and/or temperature of a stored Tobacco Product or Electronic Aerosol Delivery System.
APPLICANT means an individual, partnership, Limited Liability Company, corporation, or other business entity seeking a Tobacco Retail License.

COMMISSIONER means the Commissioner of the Albany County Department of Health.

COMPONENT OR PART means any software or assembly of materials intended or reasonably expected: (1) to alter or affect the Tobacco Product’s or Electronic Aerosol Delivery System’s performance, composition, Constituents, or characteristics; or (2) to be used with or for the human consumption of a Tobacco Product or Electronic Aerosol Delivery System. Component or Part excludes any Constituent and any Accessory, and includes, but is not limited to e-liquids, cartridges, certain batteries, heating coils, programmable software, rolling papers and flavorings for Tobacco Products or Electronic Aerosol Delivery Systems.

CONSTITUENT means any ingredient, substance, chemical or compound, other than tobacco, water, or reconstituted tobacco sheet, which is added by the manufacturer to a Covered Product during the processing, manufacture, or packing of the Covered Product. This term shall include smoke and aerosol constituent.

COVERED PRODUCT means a Tobacco Product, Electronic Aerosol Delivery System, or another product regulated by Article 13-F of the New York State Public Health Law.

DEPARTMENT means the Albany County Health Department.

ELECTRONIC AEROSOL DELIVERY SYSTEM means an electronic device that, when activated, produces an aerosol that may be inhaled, whether or not such aerosol contains nicotine. Electronic Aerosol Delivery System includes any Component or Part but not Accessory, and any liquid or other substance to be aerosolized, whether or not separately sold. Electronic Aerosol Delivery System does not include drugs, devices, or combination products authorized for sale by the state or U.S. Food and Drug Administration, as those terms are defined in the Federal Food, Drug and Cosmetic Act.

EMISSION means any substance, chemical, or compound released or produced during use of a Covered Product. This term shall include, but is not limited to, smoke, aerosol, saliva, sputum.

FLAVORED PRODUCT means any Covered Product containing a Constituent that imparts a Perceivable taste or aroma different from tobacco or produces an Emission or byproduct that imparts a Perceivable taste or aroma different from tobacco, either before or during use of the Covered Product. A Covered Product is presumed to be a
Flavored Product if a Tobacco Retailer, manufacturer, or a manufacturer’s agent or employee has:

i. made a statement or claim directed to consumers or the public, whether expressed or implied, that the Covered Product, Emission, or byproduct of the Covered Product smells or tastes different from tobacco, or

ii. Taken action that would be reasonably expected to result in consumers receiving the message that the Covered Product, Emission, or byproduct of the Covered Product smells or tastes different from tobacco.

No product shall be determined to be a Flavored Product solely because of the use of additives or flavorings or the provision of ingredient information.

NEW TOBACCO RETAIL LICENSE means any Tobacco Retail License that is not a Renewed Tobacco Retail License.

PERSON means any natural person, company, corporation, firm, partnership, business, organization, or other legal entity.

PIPE TOBACCO means any tobacco which, because of its appearance, type, packaging, or labeling, is suitable for use and likely to be offered to, or purchased by, consumers as tobacco to be smoked in a pipe.

PERCEPTIBLE means perceivable by the sense of taste or smell.

PREMIUM CIGAR means a cigar that weighs more than 6 pounds per 1,000 cigars, and is wrapped in whole tobacco leaf, and has a retail price (after any discounts or coupons) of no less than $10 per cigar.

RENEWED TOBACCO RETAIL LICENSE means a Tobacco Retail License issued to an Applicant for the same location at which the Applicant possessed a valid Tobacco Retail License during the previous 12 months.

TOBACCO PRODUCT means any product made or derived from tobacco or which contains nicotine, marketed or sold for human consumption, whether consumption occurs through inhalation, or oral or dermal absorption. Tobacco Product includes any Component or Part, but not Accessory. Tobacco Product does not include drugs, devices, or combination products authorized for sale by the state or U.S. Food and Drug Administration, as those terms are defined in the Federal Food, Drug and Cosmetic Act.

TOBACCO RETAILER means a retailer licensed pursuant to this Bill.

TOBACCO RETAIL LICENSE means a license issued by the Department to a Person to engage in the retail sale in Albany County of a Covered Product.
SHISHA means any product made primarily of tobacco or other leaf, or any combination thereof, smoked or intended to be smoked in a hookah or water pipe.

Section 3: Requirement for Tobacco Retail License

(A)(1) No Person shall sell, offer for sale, or permit the sale of a Covered Product by retail within Albany County, without a valid Tobacco Retail License. A Tobacco Retail License is not required for a wholesale dealer who sells products to retail dealers for the purpose of resale only and does not sell a Covered Product directly to consumers.

(A)(2) Notwithstanding the requirements set forth in Section 3(A)(1), this Bill shall not apply to registered organizations pursuant to Title V-A of Article 33 of New York Public Health Law.

(B) A Tobacco Retail License issued pursuant to this Bill is nontransferable and nonassignable and valid only for the Applicant and the specific address indicated on the Tobacco Retail License. A separate Tobacco Retail License is required for each address where a Covered Product is sold or offered for sale. A change in business ownership or business address requires a New Tobacco Retail License.

Section 4: License Application and Application Fee

(A) An application for a New Tobacco Retail License or Renewed Tobacco Retail License shall be submitted to the Department in writing upon a form provided by the Department and shall contain information as required by the Department. The Department may require such forms to be signed and verified by the Applicant or an authorized agent thereof.

(B) Each application for a Tobacco Retail License shall be accompanied by a nonrefundable application fee of $50, or as determined by the Commissioner.

(C) Upon the receipt of a completed application for a Tobacco Retail License and the application fee required by Section 4(B), the Department shall inspect the location at which tobacco sales are to be permitted. The Department may ask the Applicant to provide additional information that is reasonably related to the determination of whether a license may issue.

Section 5: Issuance of Licenses

(A) No Tobacco Retail License shall be issued to any seller of a Covered Product that is not in a fixed, permanent location.

(B) The issuance of a Tobacco Retail License pursuant to this Bill is done in Albany
County's discretion and shall not confer upon licensee any property rights in the continued possession of such a license.

(C) The Department shall collect from the Applicant the Tobacco Retail License fee proscribed in Section 6 prior issuing the Tobacco Retail License.

(D) The Department may refuse to issue a Tobacco Retail License to an Applicant if it finds that one or more of the following bases for denial exists:

(1) The information presented in the application is incomplete, inaccurate, false, or misleading;

(2) The fee for the application has not been paid as required;

(3) The Applicant does not possess valid certification of registration or licensure required by state or federal law for the sale of a Covered Product;

(4) The Department has previously revoked a Tobacco Retail License issued under this Bill to the Applicant;

(5) The Department has previously revoked a Tobacco Retail License issued under this Bill for the same address or location;

(6) The Applicant has been found by a court of law or administrative body to have violated any federal, state, or local laws pertaining to (a) trafficking in contraband Tobacco Products or illegal drugs, (b) the payment or collection of taxes on a Covered Product, (c) the display of a Covered Product or of health warnings pertaining to a Covered Product, or (d) the sale of a Covered Product;

(7) The Applicant has not paid to Albany County outstanding fees, fines, penalties, or other charges owed to Albany County, including the fee for the Tobacco Retail License required by Section 6; or

(8) The Department determines, in accordance with written criteria established to further the purposes of this Bill, that the Applicant is otherwise not fit to hold a Tobacco Retail License.

Section 6: License Term and Annual License Fee

(A) A Tobacco Retail License issued pursuant to this Bill shall be valid for no more than One year and shall expire on the thirty-first day of December of the calendar year for which it is issued. As set forth in Section 8, a Tobacco Retail License may be revoked for cause by the Department prior to its expiration for cause.
(B) The Department shall charge an annual Tobacco Retail License fee of $250 or as determined by the Commissioner.

(C) The Commissioner may discount the Tobacco Retail License fee required by Section 6(B) for an application received within ten [10] months of the expiration date.

(D) Beginning two years from the effective date of this Bill, the Department may, on an annual basis, modify the Tobacco Retail License fee required pursuant to Section 6(B). The Tobacco Retail License fee shall be calculated so as to recover the cost of administration and enforcement of this Bill, including, for example, issuing a license, administering the license program, hiring and training staff, identifying Flavored Products, retailer and community education, retailer inspection and compliance checks, documentation of violations, and prosecution of violators, but shall not exceed the cost of the regulatory program authorized by this Bill. All fees and interest upon proceeds of fees shall be used exclusively to fund the program. Fees are nonrefundable except as may be required by law.

Section 7: License Display

(A) A Tobacco Retail License issued pursuant to this Bill shall be conspicuously displayed at the location where a Covered Product is sold so that it is readily visible to customers.

(B) Selling, offering for sale, or permitting the sale of any Covered Product without a valid Tobacco Retail License displayed in accordance with Section 7(A) constitutes a violation of this Bill.

Section 8: Sale of Flavored Products [Restricted] Prohibited

(A)(1) No Tobacco Retailer shall distribute without charge, sell, offer for sale, or possess with intent to sell, [offer for sale,] or distribute without charge a Flavored Product. This applies to remote transactions, including but not limited to internet or mail-order sale, by a Tobacco Retailer licensed pursuant to this law.

Exceptions:

i. The sale, offer for sale, or possession with intent to sell a Premium Cigar or Pipe Tobacco by a Tobacco Retailer that, as of July 8, 2019, operates as a retail tobacco businesses as defined by section 1399-n(7) of the public health law, does not permit entry to persons below age 21 years, and does not expand its size or change location on or after that date.

ii. The sale, offer for sale, or possession with intent to sell Shisha by a Tobacco Retailer solely for on-premises consumption, provided the Tobacco Retailer does not permit entry to persons below age 21 years, has been offering Shisha for sale for on-
premises consumption since at least July 8, 2019, and has not expanded its size or changed location on or after that date.

Section 9: Revocation of Licenses

(A) The Department may suspend or revoke a Tobacco Retail License issued pursuant to this Bill for violations of the terms and conditions of this Bill or for violation of any federal, state, or local law or regulation pertaining to (a) trafficking in contraband Tobacco Products or illegal drugs, (b) the payment or collection of taxes on Covered Products, (c) the display of Covered Products or of health warnings pertaining to Covered Products, or (d) the sale of a Covered Product.

(B) The Department may revoke a Tobacco Retail License if the Department finds that one or more of the bases for denial of a license under Section 5 existed at the time application was made or at any time before the license issued.

Section 10: Violations and Enforcement

(A) The Department or its authorized designee(s) shall enforce the provisions of this Bill. The Department may conduct periodic inspections to ensure compliance with this Bill.

(B) In addition to the penalties provided for in Section 8, any Person found to be in violation of this Bill shall be liable for civil penalty of not more than $500 for the first violation, not more than $1000 for the second violation within a two-year period, and not more than $5000 but no less than $1500 for the third and each subsequent violation within a two-year period, or as determined by the Commissioner. Each day on which a violation occurs shall be considered a separate and distinct violation. These fines will be used for County anti-smoking/anti-vaping public health efforts.

Section 11: Rules and Regulations

The Department may issue and amend rules, regulations, standards, guidelines, or conditions to implement and enforce this Bill.

Section 12: Severability

The provisions of this Local Law E [Bill] are declared to be severable, and if any section of this law [Bill] is held to be invalid, such invalidity shall not affect the other provisions of this law [Bill] that can be given effect without the invalidated provision.

Section 13: Effective Date
The effective date of this ordinance shall be 120 days subsequent to its filling with the Office of the Secretary of State.

*Referred to Law and Health Committees - 3/11/19*
*Without Recommendation Law Committee - 6/24/19*
*Favorable Recommendation Health Committee – 6/26/19*
*Referred to Law and Health Committees – 7/8/19*
July 3, 2019

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

Dear Chairman Joyce:

Enclosed is a Request for Legislative Action (RLA) for the August meeting of the Legislature. Albany County Department of Health (ACDOH) has been notified of an extension to the Public Health Emergency Preparedness program. This extension is only for the use of the Opioid Crisis funding. Funding was provided to 24 local health departments in high burden areas of NYS to address the opioid crisis in their communities. Funding is to be used on evidence based interventions and can be used to enhance the quality and timeliness of local data and surveillance by improving syndromic surveillance data.

ACDOH is requesting approval for the amended contract with an updated end date of August 31, 2019. This is a no cost extension.

Please don’t hesitate to contact me if you have any questions or need additional information.

Sincerely,

Elizabeth F. Whalen, MD, MPH
Commissioner of Health

CC: Hon. Dennis Feeney, Majority Leader
     Hon. Frank A. Mauro, Minority Leader
     Kevin Cannizzaro, Majority Counsel
     Minority Counsel

Enclosures
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Request to amend contract with NYS Dept Of Health/Health Research Inc. regarding the Public
Health Emergency Preparedness Program

Date: 07/02/2019
Submitted By: Dr. Elizabeth Whalen
Department: Health
Title: Commissioner of Health
Phone: 518-447-4584
Department Rep.
Attending Meeting: Dr. Elizabeth Whalen

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
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):
NYS Dept of Health/HRI
150 Broadway, Suite 560
Menands, NY 12204

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

Amount/Raise Schedule/Fee: $504,040
Scope of Services: To provide enhanced services in the five focus areas of planning and assessment, surveillance, information & communication technology, risk communication and education and training of staff.

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: 100%
County: Click or tap here to enter text.
Local: Click or tap here to enter text.

Term
Term: (Start and end date) 7/1/2018 - 8/31/2019
Length of Contract: Click or tap here to enter text.

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

Previous requests for Identical or Similar Action:
Resolution/Law Number: 259/2018
Date of Adoption: June 11, 2018

Justification: (state briefly why legislative action is requested)
Albany County Department of Health (ACDOH) has been notified of an extension to the Public Health Emergency Preparedness program. This extension is only for the use of the Opioid Crisis funding. Funding was provided to 24 local health departments in high burden areas of NYS to address the opioid crisis in their communities. Funding is to be used on evidence based interventions and can be used to enhance the quality and timeliness of local data and surveillance by improving syndromic surveillance data. ACDOH is requesting approval for the amended contract with an updated end date of August 31, 2019. This is a no cost extension.
July 30, 2018

Elizabeth F. Whalen, MD, MPH
Albany County Department of Health
175 Green Street
Albany, NY 12202

RE: Opioid Crisis Funding

Dear Dr. Whalen:

We are pleased to inform you that Albany County Department of Health has been selected to receive a contract award in the amount of $75,000 for implementing evidence based interventions to address the opioid epidemic New York State is facing.

Funding is being provided to twenty-four (24) local health departments (LHDs) in high burden areas of the state to address the opioid crisis in their communities. The intent of this funding is to accelerate and enhance current and proposed activities to allow recipients to surge their response to this crisis by obtaining high quality and timely data, surging evidence-based response strategies at the local level, improving surge support to medical providers and health systems, and improving linkages to care. LHDs are funded to implement and expand evidence-based interventions utilizing a harm reduction and trauma-informed care approach.

The following information provides an overview of allowable and suggested activities.

This Opioid Crisis funding is to be used on evidence based interventions. Funding can be used to increase access to Naloxone and Buprenorphine for community members that are at high-risk of experiencing an overdose, including individuals who have presented at an emergency department with an opioid-related event, individuals returning to the community following a period of incarceration or inpatient drug treatment, women of childbearing age at risk of unintended pregnancy, and high-risk adolescents. Funding can be used to provide targeted provider education and technical assistance to co-prescribe naloxone to patients at risk of overdose, adopt CDC Opioid Prescribing guidelines, increase Buprenorphine prescribing in primary care, emergency departments, and correctional facilities, and increase access to naloxone through pharmacies utilizing programs such as the Naloxone Co-Payment Assistance Program (N-CAP).

This Opioid Crisis funding can be used to build linkages to health services, harm reduction programs, and other substance use treatment. A focus on harm-reduction and trauma-informed care approaches that provide ongoing care for those referred from emergency departments, law enforcement, correctional settings and other emergency services is essential. These activities can include creating robust referral
mechanisms to the local NYSDOH Drug User Health Hubs and developing post overdose peer responder/navigator protocols and response teams for follow-up care for those at high-risk of overdose. This Opioid Crisis funding can be used to enhance the quality and timeliness of local data and surveillance by improving syndromic surveillance data (ODMAP). Activities can include working with emergency departments on capturing and coding data; working with coroner and medical examiners to improve quality of death data including toxicology testing and /or working with EMS agencies to improve E-PCR data. This funding will fund LHDs to implement evaluation mechanisms to measure the impact of the adopted interventions as part of this Opioid Crisis funding.

Please note that funds cannot be used for purchase of treatment, tests, or naloxone kits. The contract will be awarded utilizing the existing emergency preparedness grants. The contract award will be for the period of September 1, 2018 to June 30, 2019.

A kick-off call with all funded counties will be held within the next two weeks. Call-in information will be sent separately by NYSACHO.

Points of contact and detailed instructions will be communicated via email within the next few days.

We look forward to working with you on this very important initiative.

Sincerely,

Kitty Gelberg, PhD, MPH
Principal Investigator
Director, Bureau of Occupational Health and Injury Prevention
Empire State Plaza, Corning tower, Room 1315
Albany, NY 12237

cc: Glynnis Hunt, NYSDOH, Center for Environmental Health
Marie Desrosiers, NYSDOH, Grants Administration
Stephen Crowe, NYSDOH, AIDS Institute
AMENDMENT #1

This Agreement, made this 13th day of July, 2019 by and between HEALTH RESEARCH, INC., hereinafter referred to as "HRI," a domestic not-for-profit corporation, and ALBANY COUNTY DEPARTMENT OF HEALTH, hereinafter referred to as "Contractor."

WHEREAS, heretofore on or about the 8th day of August, 2018, the parties hereto entered into a certain agreement regarding "Public Health Emergency Preparedness Program", HRI Contract Number 1581-13; and,

WHEREAS it is now desired to amend that provisions of such contract designated as "Contract End Date", and to attach Exhibit "D" Addition.

NOW THEREFORE, it is mutually agreed by both parties that "Contract End Date" of Agreement HRI Contract Number 1581-13 will be 8/31/19. The extension period of 7/01/19 to 8/31/19 will be for Opioid Crisis expenditures only.

It is further agreed, by and between the parties hereto, that said Agreement in all portions thereof, as heretofore and herein amended, shall remain in full force and effect in accordance with the terms thereof.

IN WITNESS WHEREOF, the parties hereto have agreed and executed this amendment.

HEALTH RESEARCH, INC.                             ALBANY COUNTY DEPARTMENT OF HEALTH

Michelle S. Tonkin                             Name: __________________________
Director, Subcontract Unit                      Title: __________________________

Signature: __________________________
EXHIBIT D  

ADDITION  

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Centers for Disease Control and Prevention  
CDC Office of Financial Resources  
1600 Clifton Road  
Atlanta, GA 30329  

NOTICE OF AWARD  
AUTHORIZATION (Legislation/Regulations)  
SEC391(A)/317(3)OPHS42U.S.C.SEC241A 247B  

GRANT NO. 6U10DP0921396-01-D  
6a. ACTION TYPE Post Award Amendment  

PROJECT PERIOD  
From 09/01/2016  
Through 08/31/2016  

FEDERAL PROJECT OFFICER  
Ms. Brandi Barnes  
1600 Clifton Rd NE  
Atlanta, GA 30329-4018  
Phone: 404-292-7453  

Grantee Name and Address  
Health Research, Inc.  
150 Broadway Ste 560  
Menands, NY 12204-2719  

Grantee Authorizing Official  
Ms. Cheryl Nater  
150 BROADWAY  
HEALTH RESEARCH, INC.  
ALBANY, NY 12204-2719  

Public Health Carls Response to New York State  

Approved Budget  

<table>
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<th>Category</th>
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<th>Year 2</th>
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<th>Year 4</th>
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<td>Total Approved Budget</td>
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15. Program Office shall use in awarding grants of the following:  

- Rationale and Justification  
- Additional Costs  
- Other Reimbursement Requirements  
- Other Terms and Conditions  

REMARKS: (Other Terms and Conditions Attached - YES/NO)  

YES  


GRANTS MANAGEMENT OFFICIAL:  
Brenda Andrus-Rowe, Grants Management Officer  
2500 Memorial Drive  
Mailstop A110  
Atlanta, GA 30324-5568  
Phone: 770-488-2711  

[Table of data]
## Direct Assistance

<table>
<thead>
<tr>
<th>BUDGET CATEGORIES</th>
<th>PREVIOUS AMOUNT (A)</th>
<th>AMOUNT THIS ACTION (B)</th>
<th>TOTAL (A + B)</th>
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<tr>
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<td>Fringe Benefits</td>
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<tr>
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<tr>
<td>Other</td>
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<tr>
<td>Total</td>
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</table>
AWARD ATTACHMENTS

Health Research, Inc.

1. T&C budget revision

6 NU90TP821994-01-04
The purpose of this amended Notice of Award is to approve the redirection request submitted by your organization dated February 28, 2019. Funds have been distributed as indicated in the approved budget of this Notice of Award.

The purpose of this amended Notice of Award is to approve submitted budget revision information.

Please be advised that recipient must exercise proper stewardship over Federal funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable, and reasonable.

All the other terms and conditions issued with the original award remain in effect throughout the budget period unless otherwise changed, in writing, by the Grants Management Officer.

PLEASE REFERENCE AWARD NUMBER ON ALL CORRESPONDENCE

GMS Contact:
Julie Davis, Grants Management Specialist
Centers for Disease Control and Prevention
2950 Brandywine Rd Stanford E-01
Atlanta, GA 30341
Email: xyg6@cdc.gov Phone: 770-488-2936
DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
CDC Office of Financial Resources
1600 Clifton Road
Atlanta, GA 30329

NOTICE OF AWARD
AUTHORIZATION (Legislation/Regulations)
SEC391A(3)17(K)(FFHS432U.S.C.9204A 2470

9a. GRANTEE NAME AND ADDRESS
HEALTH RESEARCH INC.
150 BROADWAY STE 560
MEANANS, NY 12204-2719

10a. GRANTEE AUTHORIZING OFFICIAL
Ms. Cheryl Matha
150 BROADWAY Suite 560
MEANANS, NY 12204-2719
Phone: 518-431-1200

ALL AMOUNTS ARE SHOWN IN USD

<table>
<thead>
<tr>
<th>11. APPROVED BUDGET (Excludes Direct Assistance)</th>
<th>12. AWARDS COMPARISON</th>
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<tbody>
<tr>
<td>a. Salaries and Wages</td>
<td>a. Amount of Federal Financial Assistance (from line 1)</td>
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<td>b. Fringe Benefits</td>
<td>b. Less Un obligated Balance From Prior Budget Period</td>
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<tr>
<td>c. Total Personnel Costs</td>
<td>c. Less Cumulative Prior Award(s) This Budget Period</td>
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<tr>
<td>d. Equipment</td>
<td>d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION</td>
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<td>e. Supplies</td>
<td>15. Total Federal Funds Awarded to Date for Project Period</td>
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<tr>
<td>f. Travel</td>
<td>4,182,276.00</td>
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<tr>
<td>g. Construction</td>
<td>14. RECOMMENDED FUTURE SUPPORT</td>
</tr>
<tr>
<td>h. Other</td>
<td>(Subject to the availability of funds and satisfactory progress of the project):</td>
</tr>
<tr>
<td>i. Contractal</td>
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<td>j. TOTAL DIRECT COSTS</td>
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<td>k. INDIRECT COSTS</td>
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<tr>
<td>m. Federal Share</td>
<td>e. 6</td>
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<tr>
<td>n. Non-Federal Share</td>
<td>f. 7</td>
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18. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO AND AS APPROVED BY THE FEDERAL AWARDING AGENCY ON THE ABOVE TITLE PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED HEREIN OR BY REFERENCE IN THE FOLLOWING:

19. DUNS: 002365001
20. CONSL DIST: 00

GRANTS MANAGEMENT OFFICIAL:
Brownie Anderson-Ruma, Grants Management Officer
Centers for Disease Control and Prevention
CDC ATTN:
Atlanta, GA 30341
Phone: 718-866-2771

17,082  41.51  1141-0215A1  141-0215S  18s. EIN  141-0215S  19. DUNS  002365001  20. CONSL DIST: 00

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## Direct Assistance

<table>
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<tr>
<th>BUDGET CATEGORIES</th>
<th>PREVIOUS AMOUNT (A)</th>
<th>AMOUNT THIS ACTION (B)</th>
<th>TOTAL (A + B)</th>
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<tr>
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<tr>
<td>Fringe Benefits</td>
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<tr>
<td>Travel</td>
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<tr>
<td>Equipment</td>
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<td>Supplies</td>
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<tr>
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<tr>
<td>Total</td>
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</table>
Health Research, Inc.

1. T&C TR response budget revision
The purpose of this amended Notice of Award is to approve the response to the Technical Review submitted by your organization October 1, 2018.

The purpose of this amended Notice of Award is to approve budget revision information submitted. Recipient must provide the following missing information:

- **Salaries:** Provide the names and job descriptions of all staff noted as TBD in the budget. All vacant staff positions must be filled in a timely manner. Costs are proposed to support positions identified as “To Be Determined” (TBD), grant funds must match effort.

Please be advised that recipient must exercise proper stewardship over Federal funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable, and reasonable.

All other terms and conditions issued with the original award remain in effect throughout the budget period unless otherwise changed, in writing, by the Grants Management Officer.

**PLEASE REFERENCE AWARD NUMBER ON ALL CORRESPONDENCE**

**GMO Contact:**
Brownie Anderson-Rana, Grants Management Officer  
Centers for Disease Control and Prevention  
2960 Brandywine Rd Stanford E-01  
Atlanta, GA 30341  
Email: BAndersonRana@cdc.gov Phone: 770-488-2771

**GMS Contact:**
Julie Davis, Grants Management Specialist  
Centers for Disease Control and Prevention  
2960 Brandywine Rd Stanford E-01  
Atlanta, GA 30341  
Email: xxg6@cdc.gov Phone: 770-488-2936
**DEPARTMENT OF HEALTH AND HUMAN SERVICES**
Centers for Disease Control and Prevention
CDC Office of Financial Resources
2920 Brannan Way
Atlanta, GA 30341

**NOTICE OF AWARD**
AUTHORIZATION (Legislation/Regulations)
SEC391(A)(3)(7)(K)
CFPHS/42U.S.C.SEC241A 247B

---

**1a. SUPERSSEDES AWARD NOTICE dated** except that any additions or revisions previously imposed remain in effect unless specifically rescinded

**4. GRANT NO.**
1 N90079213894-01-00

**6. ACTION TYPE**
New

**7. BUDGET PERIOD**
From 09/01/2018 Through 08/31/2019

**15. RECOMMENDED FUTURE SUPPORT**
(This includes availability of funds and satisfactory progress of the project)

---

**11. APPROVED BUDGET** (Excludes per diem assistance)

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<td>Total Direct Costs</td>
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**13. AWARD COMPUTATION**

<table>
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<th>Amount</th>
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<tbody>
<tr>
<td>a. Amount of Federal Financial Assistance (loan item 15b)</td>
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<tr>
<td>b. Less Unliquidated Balance Prior To Budget Period</td>
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<td>d. Amount of Financial Assistance This Period</td>
<td>4,182,276.00</td>
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**15. This Notice is Based Upon Application Submitted To, and As Approved By, The Federal Awarding Agency On the Date Stated Above**

---

**GRANTS MANAGEMENT OFFICIAL:**
Balzac Phillips

---

**17. OBJ CLASS**
41.5

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<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>FY ACCOUNT NO</th>
<th>DOCUMENT NO</th>
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<td>a.</td>
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<td>a.</td>
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### Direct Assistance

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<th>BUDGET CATEGORIES</th>
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<td>Equipment</td>
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<td>Contracted</td>
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</table>
AWARD ATTACHMENTS

Health Research, Inc.

1. New York Terms and Conditions TP921984
2. Health Research, Inc. CSELS Tech Review
3. Health Research, Inc. NCHHSTP Tech Review
4. Health Research, Inc. NCIPC Tech Review
5. Health Research, Inc. Tech Review Special
Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at https://www.cdc.gov/grants/federalregulationspolicies/index.html, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number TP18-1602, entitled Cooperative Agreement for Emergency Response: Public Health Crisis Response – 2018 Opioid Crisis Cooperative Agreement, and application dated December 06, 2017, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Approved Funding: Funding in the amount of $4,182,276 is approved for the Year 01 budget period, which is September 1, 2018 through August 31, 2019. All future year funding will be based on satisfactory programmatic progress and the availability of funds.

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third party in-kind contribution when applicable.

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

Financial Assistance Mechanism: Cooperative Agreement

Substantial Involvement by CDC: This is a cooperative agreement and CDC will have substantial programmatic involvement after the award is made. Substantial involvement is in addition to all post-award monitoring, technical assistance, and performance reviews undertaken in the normal course of stewardship of federal funds.

CDC will provide substantial involvement beyond regular performance and financial monitoring during the project period. Substantial involvement means that applicants can expect federal programmatic partnership in carrying out the effort under the award. CDC will work in partnership with awardees to ensure the success of the cooperative agreement by:

- Providing cross-site and awardee-specific surveillance technical assistance such as providing tools to identify drug poisonings using ICD-9-CM, ICD-10, text searches and ICD-10-CM, if implemented during the award period;
- Providing technical assistance to revise annual work plans;
- Assisting in advancing program activities to achieve project outcomes;
- Providing scientific subject matter expertise and resources;
- Collaborating with awardees to develop evaluation plans that align with CDC evaluation activities; Providing technical assistance on awardee’s evaluation and performance measurement plan; Providing technical assistance to define and operationalize performance measures;
- Facilitating the sharing of information among grantees;
• Participating in relevant meetings, committees, conference calls, and working groups related to the cooperative agreement requirements to achieve outcomes;

• Coordinating communication and program linkages

• Coordinating communication and program linkages with other CDC programs and Federal agencies, such as Centers for Medicare and Medicaid Services (CMS), Food and Drug Administration (FDA), the National Institutes of Health (NIH), the Substance Abuse and Mental Health Services Administration (SAMHSA), and the HHS Office of the National Coordinator for Health Information Technology (ONC)

• Translating and disseminating lessons learned through publications, meetings, surveillance measures and other means on promising and best practices to expand the evidence base.

CDC program staff will assist, coordinate, or participate in carrying out effort under the award, and recipients agree to the responsibilities therein, as detailed in the NOFO.

Technical Review Statement Response Requirement: The review comments on the strengths and weaknesses of the proposal are provided as part of this award. A response to the weaknesses in these statements must be submitted to and approved, in writing, by the Grants Management Specialist/Grants Management Officer (GMS/GMO) noted in the CDC Staff Contacts section of this NoA, no later than 30 days from the budget period start date. Failure to submit the required information by the due date, October 1, 2018, will cause delay in programmatic progress and will adversely affect the future funding of this project.

Budget Revision Requirement: By October 1, 2018 the recipient must submit a revised budget for the following:

Salaries: All vacant staff positions (Opioid Crisis Program Coordinator, Syndromic Surveillance Coordinator, Program Research Specialist, Evaluation Specialist, Program Research Specialist, Hourly Student/Epidemiologist, Project Coordinator/Manager, Buprenorphine Program Coordinator, EDes/Jail Technical Specialist, Health Program Administrator, Assistant Health Program Administrator, Data Manager/Epidemiologist, Program Aide, Opioid Program Coordinator, Research Scientist-Health Informatics, Evaluation Specialist) must be filled in a timely manner. All vacant staff positions must be filled in a timely manner. Costs are proposed to support positions identified as "To Be Determined" (TBD) at a 100% for a proposed 12 months. Grant funds must match the effort. To fund the position for a proposed 12 months would be considered forward funding and would therefore lead to an unobligated balance. Please notify OGS if the position has been filled since the submission of the application or if the position will be filled by the budget period start date of September 01, 2018, if the position remains vacant please notify OGS of the anticipated start date and reduce the proposed 12 months by to number of months it will take to fill the position and apply the difference to support current activities. If not, CDC may use these unobligated funds to offset subsequent year's funding.
Travel Costs: Dollars requested in the Travel category should be for recipient staff travel only.

In-state and Out-of-state travel costs to support the 2018 Opioid Overdose Crisis Cooperative Agreement Program, in the amount of $20,030 for travel is pending the below items. Your submission is requested within 30 days of this award. The required travel items:

For In-State Travel, provide a narrative justification describing the travel staff members will perform. List proposed location for each travel request to be undertaken, who will be making the trips, and approximate dates. If mileage is to be paid, provide the number of miles and the cost per mile. If travel is by air, provide the estimated cost of airfare. If per diem/lodging is to be paid, indicate the number of days and amount of daily per diem, as well as the number of nights and estimated cost of lodging. Include the cost of ground transportation, when applicable.

For Out-of-State Travel, provide a narrative justification including the same information requested above. Include CDC meetings, conferences, and workshops, if required by CDC. Itemize Out-of-State Travel in the format described above for In-State Travel.

NOTE: The recipient organization must have current internal policies and procedures in place that clearly describe the process. Internal policies and procedures must be in compliance with the OMB circulars, GSA per diem regulations and 45 CFR Part 75.474. Additionally, the recipient is required to ensure all grant funds are properly tracked.

Supplies: $2,686 An itemized list of all proposed supply expenditures must be provided along with method of calculation.

Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the CDC Staff Contacts section of this notice before the due date.

Program Income: Any program income generated under this grant or cooperative agreement will be used in accordance with the Addition alternative.

Note: The disposition of program income must have written prior approval from the GMO.

**Funding Restrictions and Limitations**

Financial Management Requirements and Exceptions

1. This is one-time funding, and funds must be spent/ expended within the performance and budget period. There is no provision for the payment of unliquidated obligations following the last day of the budget/performance period.

2. Recipients are required to coordinate activities funded under this guidance with all other CDC-funded and federally funded opioid prevention activities to ensure alignment and reduce duplication. Specifically, recipients are encouraged to coordinate plans as applicable with the single state agencies for substance use disorder services in their jurisdictions.

3. Public Health Crisis NOFO activities are structured within the six domains listed below. Recipients are expected to align budgets and work plans with respective domains outlined below. The Department of Health and Human Services and CDC will provide
ongoing oversight and monitoring of this cooperative agreement funding during the performance period.

Direct Assistance
Direct assistance (DA) is not available through this cooperative agreement. Overlap in projects, budget items, or commitment of effort:
- Funds cannot be used for items covered by other federal sources.
- Funds cannot be used to match funding on other federal awards.

Unallowable Costs
- Research
- Purchase of naloxone
- Purchase of syringes
- Drug disposal programs (drop-boxes, bags or other devices, and/or take-back events) are not permissible under this funding opportunity
- Clinical care (except as allowed by law)
- Publicity and propaganda (lobbying)
  - Funds cannot be used for the preparation, distribution, or use of any material (publicity/propaganda) or to pay the salary or expenses of grants, contract recipients, or agents that aim to support or defeat the enactment of legislation, regulation, administrative action, or executive order proposed or pending before a legislative body, beyond normal, recognized executive relationships. See Section VI. Revised Work Plan and Budget Narrative Submission for more information.


The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.

Indirect costs are approved based on the Indirect Cost Rate Agreement dated May 12, 2017, which calculates indirect costs as follows, a Provisional is approved at a rate of 24.6% of the base, which includes, direct salaries and wages including all fringe benefits. The effective dates of this indirect cost rate are from April 1, 2018 to March 31, 2020. Cap on Salaries (Div. G, Title II, Sec. 203): None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II.

**REPORTING REQUIREMENTS**

Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuities violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information
related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services
Corey D. Taylor, Grants Management Specialist
Centers for Disease Control and Prevention
OD, Environmental, Occupational Health & Injury Prevention Services Branch
2960 Brandywine Rd.
Atlanta GA 30341
Email: WVE3@cdc.gov (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services
Office of the Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator
330 Independence Avenue, SW
Cohen Building, Room 5527
Washington, DC 20201
Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or
Email: MandatoryGranteeDisclosures@oig.hhs.gov

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

Additional Reporting Requirements: Recipients must report fiscal and programmatic progress to determine if programs are meeting the timelines, goals, and objectives in their approved work plans.

Fiscal reports as defined in REDCap will be required on a monthly basis. CDC may adjust the frequency of these reports as necessary. For instance, jurisdictions functioning at the performance levels projected in approved work plans may move to quarterly reporting. Performance reports are required on a quarterly basis.

PAYMENT INFORMATION:

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and

Page 5 of 7
cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

Corey D. Taylor, Grants Management Specialist
Centers for Disease Control and Prevention, OFR, OD, Environmental, Occupational Health & Injury Prevention Services Branch
2960 Brandywine Road, Mail Stop E01
Atlanta, GA 30341-4148

Payment Management System Subaccount: Funds awarded in support of approved activities have been obligated in a newly established subaccount in the PMS, herein identified as the "P Account". Funds must be used in support of approved activities in the NOFO and the approved application. All award funds must be tracked and reported separately.

This award contains funding from multiple components. The grant document number identified at the bottom of Page 1 of the Notice of Award must be known in order to draw down funds.

Component: NCIPC
Document Number: 1 NU90TP921994OPCE

Component: CSELS
Document Number: 1 NU90TP921994OPOE

Component: NCHHSTP
Document Number: 1 NU90TP921994OPPS

**PROGRAM OR FUNDING SPECIFIC CLOSEOUT REQUIREMENTS**

The final programmatic report format required is the following.

**Final Performance Progress and Monitoring Report (PPMR):** This report should include the information specified in the NOFO and is submitted 90 days following the end of the period of performance via www.grantsolutions.gov. At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant,
- List of publications resulting from the project, with plans, if any, for further publication.

Additional guidance may be provided by the GMS and found at:

Page 6 of 7
Grants Management Specialist: The GMS is the federal staff member responsible for the day-to-day management of grants and cooperative agreements. The GMS is the primary contact of recipients for business and administrative matters pertinent to grant awards.

GMS Contact:
Corey D. Taylor, Grants Management Specialist
Centers for Disease Control and Prevention
Centers for Disease Control and Prevention OD, Environmental, Occupational Health & Injury Prevention Services Branch
2960 Brandywine Rd
Atlanta GA 30341
Telephone: 770-488-2730
Email: WVE3@cdc.gov

Program/Project Officer: The PO is the federal official responsible for monitoring the programmatic, scientific, and/or technical aspects of grants and cooperative agreements, as well as contributing to the effort of the award under cooperative agreements.

Programmatic Contact:
Juliann Hudak, MPH
Public Health Advisor
Division of State and Local Readiness (DSLR)
Office of Public Health Preparedness and Response
Centers for Disease Control and Prevention
1600 Clifton Road, MS D-29
Telephone: 470-270-0841
E-Mail: JHudak@cdc.gov

Grants Management Officer: The GMO is the federal official responsible for the business and other non-programmatic aspects of grant awards. The GMO is the only official authorized to obligate federal funds and is responsible for signing the NoA, including revisions to the NoA that changes the terms and conditions. The GMO serves as the counterpart to the business officer of the recipient organization.

GMO Contact:
Shicann M. Phillips, Grants Management Officer
Centers for Disease Control and Prevention
OD/Environmental, Occupational Health & Injury Prevention Services Branch
2960 Brandywine Road, MS: E-01
Atlanta, Georgia 30341
Telephone: 770-488-2809
Email: IBQ7@cdc.gov
July 3, 2019

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

Dear Chairman Joyce:

Enclosed is a Request for Legislative Action (RLA) for the August meeting of the Legislature. Albany County Department of Health (ACDOH) has been notified of grant funding in the amount of $31,555 to participate in the Governor’s Traffic Safety Committee 2020 General Highway Safety Grant Program. ACDOH is requesting approval to contract with NYS and amend the 2019 Health Department budget. The remainder of the grant funding will be placed in the 2020 budget. Presently, ACDOH’s 2019 General Highway Safety Grant Program addresses pedestrian safety for the Central Avenue corridor in the City of Albany. Our intent for the 2020 grant cycle is to:

- Expand scale of public awareness activities
- Expand geographic “footprint” of program - i.e. extend along Rt. 5 (Central Avenue) into Town of Colonie, Village of Colonie
- Directly complements Complete Streets activities (City of Albany)

Please don’t hesitate to contact me if you have any questions or need additional information.

Sincerely,

Elizabeth F. Whalen, MD, MPH
Commissioner of Health

CC: Hon. Dennis Feeney, Majority Leader
    Hon. Frank A. Maturiello, Minority Leader
    Kevin Cannizzaro, Majority Counsel
    Minority Counsel
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Request to enter into contract with NYS Governor's Traffic Safety Committee for the Highway Safety Grant Program and amend the 2019 Health Dept Budget

Date: 07/02/2019
Submitted By: Dr. Elizabeth Whalen
Department: Health
Title: Commissioner of Health
Phone: 518-447-4584
Department Rep.
Attending Meeting: Dr. Elizabeth Whalen

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
CONCERNING CONTRACT AUTHORIZATIONS

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

New
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):
NYS Governor’s Traffic Safety Committee
6 Empire State Plaza, Room 410B
Albany, NY 12228

Additional Parties (Names_addresses):
Click or tap here to enter text.

Amount.Raise Schedule/Fee: $31,555
Scope of Services:
Presently, the Albany County Department of Health 2019 General
Highway Safety Grant Program addresses pedestrian safety for the Central Avenue corridor in the City of Albany. Our intent for the 2020 grant program is to expand activities of the existing initiative.

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: A44010.0.4401
Revenue Amount: $787

Appropriation Account and Line: Various .4
Appropriation Amount: $787

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) 10/01/2019 - 9/30/2020
Length of Contract: 12 months

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

Previous requests for Identical or Similar Action:
Resolution/Law Number: 186/2019
Date of Adoption: May 13, 2019

Justification: (state briefly why legislative action is requested)
Albany County Department of Health (ACDOH) has been notified of grant funding in the amount of $31, 555 to participate in the Governor's Traffic Safety Committee 2020 General Highway Safety Grant Program. ACDOH is requesting approval to contract with NYS and amend the 2019 Health Department budget. The remainder of grant funding will be placed in the 2020 budget. Presently, ACDOH's 2019 General Highway Safety Grant Program addresses pedestrian safety for the Central Avenue corridor in the City of Albany. Our intent for the 2020 grant cycle is to:

- Expand scale of public awareness activities
- Expand geographic “footprint” of program - i.e. extend along Rt. 5 (Central Avenue) into Town of Colonie, Village of Colonie
- Directly complements Complete Streets activities (City of Albany)
June 13, 2019

Charles Welge
Director of Public Health Planning and Education
Albany County Department of Health
175 Green St
Albany, NY 12202-2011

Re: HS1-2020-Albany Co DOH-00183-(001)
See! and Be Seen! Albany County
DMV01-T006538-3700393
CFDA #: 20.616
EFFECTIVE DATE: October 1, 2019

Dear Director of Public Health Planning and Education Charles Welge:

On behalf of the Governor's Traffic Safety Committee, I am pleased to notify you that the Albany County Department of Health has been awarded $31,555 to participate in New York State's Highway Safety Program. Our goal is to reduce the number of crashes, injuries and deaths on New York's roads.

The two contracts enclosed must be signed by an authorized representative for the County, City, Town or Village, and notarized, then returned to our office. Once the contract has been signed by the New York State Governor's Traffic Safety Committee, one contract will be returned to you for your records. Contracts will be effective only upon final approval by the New York State Office of the State Comptroller.

Please note, contracts are with the County, City, Town or Village, not your specific agency. An authorized representative who has legal authority to sign contracts may not be the project director. Please ensure that a legal signatory of your municipality or organization signs the contracts. For municipalities, this will likely be someone from the City, County, Town or Village.

Before incurring any project related expenses, login to eGrants to review your approved budget as it may have been reduced or otherwise changed from what was requested. Crucial documents regarding your grant, the claims process, equipment, and other grant related topics can be found by visiting http://safety.ny.gov/currentgrantees.htm.

Thank you for participating in New York State's Highway Safety Program. I wish you success in your efforts. If you have any questions, please contact the Governor's Traffic Safety Committee at (518) 474-5111.

Sincerely,

Charles R. DeWeese
Assistant Commissioner

CRD:bp
c: Shanna Witherspoon
   Suzanne Swan

Department of Motor Vehicles
STATE OF NEW YORK MASTER CONTRACT FOR GRANTS FACE PAGE

<table>
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<th>BUSINESS UNIT/DEPT. ID: DMV01 / 3700393</th>
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<tr>
<td>New York State Governor's Traffic Safety Committee 6 Empire State Plaza, Room 410B Albany, NY 12228</td>
<td>CONTRACT NUMBER: T006538</td>
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<td>175 Green St Albany, NY 12202</td>
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Contract Number: # T006538
Page 1 of 2
Master Grant Contract, Face Page
STATE OF NEW YORK MASTER CONTRACT FOR GRANTS FACE PAGE

CURRENT CONTRACT TERM:
From: 10/01/2019 To: 09/30/2020

CURRENT CONTRACT PERIOD:
From: 10/01/2019 To: 09/30/2020

AMENDED TERM:
From: To:

AMENDED PERIOD:
From: To:

CONTRACT FUNDING AMOUNT
(Multi-year - enter total projected amount of the contract; Fixed Term/Simplified Renewal - enter current period amount):

CURRENT: $31,555

AMENDED:

FUNDING SOURCE(S)
- [ ] State
- [✓] Federal
- [ ] Other

FOR MULTI-YEAR AGREEMENTS ONLY - CONTRACT PERIOD AND FUNDING AMOUNT:
(Out years represent projected funding amounts)

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<tr>
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ATTACHMENTS PART OF THIS AGREEMENT:

- [✓] Attachment A: A-1 Program Specific Terms and Conditions
- [✓] Attachment B: B-1 Expenditure Based Budget
- [✓] Attachment B: B-2 Performance Based Budget
- [✓] Attachment B: B-3 Capital Budget
- [✓] Attachment B: B-4 Net Deficit Budget
- [✓] Attachment B: B-1(A) Expenditure Based Budget (Amendment)
- [✓] Attachment B: B-2(A) Performance Based Budget (Amendment)
- [✓] Attachment B: B-3(A) Capital Budget (Amendment)
- [✓] Attachment B: B-4(A) Net Deficit Budget (Amendment)
- [✓] Attachment C: Work Plan
- [✓] Attachment D: Payment and Reporting Schedule
- [ ] Other:

Contract Number: # T906538
Page 2 of 2
Master Grant Contract, Face Page
IN WITNESS THEREOF, the parties hereto have executed or approved this Master Contract on the dates below their signatures.

<table>
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<tr>
<th>CONTRACTOR:</th>
<th>STATE AGENCY:</th>
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<tr>
<td>ALBANY COUNTY OF</td>
<td>New York State Governor's Traffic Safety Committee</td>
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<tr>
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<tr>
<td>Mary Arthur</td>
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<thead>
<tr>
<th>Title:</th>
<th>Title: Program Manager</th>
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STATE OF NEW YORK

County of ____________________________

On the _____ day of ____________, 2023, before me personally appeared _________________________, to me known, who being by me duly sworn, did depose and say that he/she resides at _________________________, that he/she is the _________________________ of the _________________________, the contractor described herein which executed the foregoing instrument; and that he/she signed his/her name thereto as authorized by the contractor named on the face page of this Master Contract.

(Notary) ________________________________

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**TOTAL APPROPRIATIONS**

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**TOTAL ESTIMATED REVENUES**

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**GRAND TOTALS**

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