OSC Use Only:	
Reporting Code:	
Category Code:	
Data Contract Approved:	

FORM A

State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term

State Agency Name: Stony Brook University Hospital

Agency Code: SNY013320215

Contractor Name: Ciox Health, LLC

Contract Number: C011418

Contract Start Date: 2 / 1 / 2021

Contract End Date: 1/31/ 2026

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Ambulatory Surgery			\$8,062.50
Cardiac Cath & EPS			\$8,625.00
Endoscopy			\$6,750.00
Infusion Therapy			\$23,750.00
Emergency Observation Visits			\$54,000.00
Hospital Observation Visits (Inpatient Complexity)			\$55,500.00
Total this page	6 FTEs	140 hours per week	\$156,687.50
Grand Total			\$792,187.50

Name of person who prepared	ared this i	eport: ι	Lori Keel
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Title: Chief Financial Officer

Phone #: (770) 670-2147

Preparer's Signature:

Date Prepared: 9/30/2020

(Use additional pages, if necessary)

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