SUNY - Upstate Medical University 3320211

FORM B

OSC Use Only:	,	
Reporting Code:		
Category Code:		

State Consultant Services Contractor's Annual Employment Report

Contracting State Agency Name: SUN	NY Upstate Medical U	Iniversity A	gency Code: 28110
Contract Number: C-504091		-	
Contract Term: <u>9/1/2019</u> to			
Contractor Name: University OBGYN	N Associates, Inc		
Contractor Address: 736 Irving Avenu	ue - 3 West Tower Syr	racuse, NY 13210	
Description of Services Being Provide	d Medical Director (Jencer Center Ge	netics
			<u>-</u>
Scope of Contract (Choose one that	best fits):		
Analysis Evaluation			Training [
=	Computer Programm		Other IT consulting
Engineering Architect Serv		~ _	nvironmental Services
Health Services Accounting Auditing		ealth Services Legal Legal	Other Consulting [
Accounting Auditing	r araiegai	Legai	Other Consulting
P. 1	Number of	Number of Ho	urs Amount Payable
Employment Category	Employees	Worked	Under the Contract
29-1218.00	1	312	\$82,500.00
Total this page	1	312	\$82,500.00
Grand Total	1	312	\$82,500.00
Name of person who prepared this rep	art. Liga MaNich		
	OIL. LISA WICHISH		
Preparer's Signature: Wat V.)	ic rusri		
Title: Practice Administrator		Phone #: <u>315</u> -	470-7903
Date Prepared: <u>5/3/2023</u>			. •
Use additional pages if necessary)			Page 1 of 1

Fax: 18589265657 To:

Fax: (518) 474-8030 Page: 2 of 4 05/09/2023 12:23 PM

OSC Use Only: Reporting Code: Category Code:

FORM B

State Consultant Services Contractor's Annual Employment Report

Contractor's Annual Employment Report Penert Boried, April 1, 2022 to Moveb 21, 2022			
Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: C-504258 AOA #1 Contract Term: 4/1/2022 to 4/30/2022 Contractor Name: Aya Healthcare Contractor Address: 5930 Cornerstone Ct W Sulte 300, San Dlego, CA 92121 Description of Services Being Provided Healthcare Staffing			
Scope of Contract (Choose one that Analysis	on	ing	Training IT consulting nmental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
CNA/Nurse Assistant	3	644	\$48,782.25
Laboratory	1	171	\$20,374.20
Radiology/Cardiology	6	948	\$120,075.75
Registered Nurse	30	3,477	\$584,745.75
Respiratory/Neuro Diagnostics	4	452	\$57,142.80
		A	
Total this page	44	5,693.25	\$831,120.75
Grand Total			
Name of person who prepared this rep Preparer's Signature:	ort: Emily Hazen		
Title: <u>EVP</u> , <u>Process Optimization</u> Phone #: <u>858.9263.1158</u>			
Date Prepared: <u>5/4/2023</u>			
Use additional pages if necessary)			Page 1 of 1

FORM B

x: 18589265657	To:	Fax: (518) 474-8030	Page: 2 of 4	05/09/2023 12:23 PM

OSC Use Only: Reporting Code: Category Code:

State Consultant Services Contractor's Annual Employment Report			
	riod: April 1, 2022 to	•	
Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: C-504258 AOA #1 Contract Term: 4/1/2022 to 4/30/2022 Contractor Name: Aya Healthcare Contractor Address: 5930 Cornerstone Ct W Suite 300, San Diego, CA 92121 Description of Services Being Provided Healthcare Staffing			
Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing Computer Programming Other IT consulting Engineering Architect Services Surveying Environmental Services Health Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting			
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
CNA/Nurse Assistant	3	644	\$48,782.25
Laboratory	1	171	\$20,374.20
Radiology/Cardiology	6	948	\$120,075.75
Registered Nurse	30	3,477	\$584,745.75
Respiratory/Neuro Diagnostics	4	452	\$57,142.80
m . lali	4.6	F 000 0F	#001 100 ME
Total this page	44	5,693.25	\$831,120.75
Grand Total			
Name of person who prepared this report: Emily Hazen Preparer's Signature:			
Title: EVP, Process Optimization Phone #: 858.9263.1158			
Date Prepared: <u>5/4/2023</u>			
Use additional pages if necessary)			Page 1 of 1

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University			
Contract Number: C 504621		Agency Business Ur	
Contract Term: 02/20/2018 to 02/20/2023 Agency Department ID: 28110			
Contractor Name: Psychiatry Faculty Practice, Inc.			
Contractor Address: 719 Harrison Str	reet, Syracuse, N	NY 13210	
Description of Services Being Provide	ed: Assistant Me	edical Direction	entre e e e e e e e e e e e e e e e e e e
		** **	
Scope of Contract (Choose one that b			
		ining	
Data Processing Computer Pro		Other IT consulting	0
☐ Engineering ☐ Architect Services		☐ Environmental	Services
Health Services Mental Health			ran in the second s
Accounting Auditing Pa	ralegal	al Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29-1066.00	1.00	104.00	\$12,666.25
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	104.00	\$12,666.25
Grand Total	1.00	104	\$12,666.25
	<u> </u>		
Name of person who prepared this re	port: Alice Mirar	nda	
Title: Practice Manager			315-464-3119
\sim \sim \sim \sim	<i>'</i>	i none #.	
Preparer's Signature:			

(Use additional pages, if necessary)

Date Prepared: 05/09/2023

New York State Consultant Services Contractor's Annual Employment Report

Contracting State Agency Name: SU	NY Upstate Med	dical University	
Contract Number: C-504276		Agency Business U	nit: SNY01
Contract Term: 01/05/2017 to 04/30/2022 Agency Department ID: 3320211			
Contractor Name: Sunbelt Staffing Ll	_C		
Contractor Address: 501 Brooker Cre	ek Blvd, Suite A	\-400, Oldsmar FL 34	677
Description of Services Being Provide	ed: Temporary	Staffing Services	
San a figure at 10 has a single that h			
Scope of Contract (Choose one that b	<u> </u>	ining	
☐ Data Processing ☐ Computer Pro		1	
☐ Engineering ☐ Architect Services			Services
☐ Health Services ☐ Mental Health	, ,		00171000
	ralegal Leg	gal 🔲 Other Consul	tina
	Number of	Number of	
Employment Category	Employees	Hours Worked	Amount Payable Under the Contract
Registered Nurse - Emergency Dept	1.00	157.25	\$32,550.75
Registered Nurse - Intensive Care Unit	1.00	109.50	\$22,666.50
Cardiac Sonographer	1.00	30.75	\$3,487.05
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
·	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
·	0.00	0.00	\$0.00
• •	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	3.00	297.50	\$58,704.30
Grand Total			
Name of person who prepared this re	port: Jena Zande	r	
Title: Director, Contracts and Compliance	e 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Phone #:	813-792-3467
Preparer's Signature:	2	<u>, , , , , , , , , , , , , , , , , , , </u>	A SECTION OF THE PARTY OF THE
Date Prepared: 04/10/2023			A Maria de Agresa de Agres

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2020 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University			
Contract Number: C 504389		Agency Business Ur	
Contract Term: 07/1/2017 to 6/30/	2022	Agency Department	ID: 28110
Contractor Name: Psychiatry Faculty Practice, Inc.			
Contractor Address: 719 Harrison Str	eet, Syracuse, I	NY 13210	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Description of Services Being Provide	ed: Psychiatric	Nurse Practitioner Se	rvices
And the second s	•		
Scope of Contract (Choose one that b			
Analysis Evaluation Res		ining	, a marina di si
Data Processing Computer Pro	-	Other IT consulting	
Engineering Architect Services		☐ Environmental	Services
Health Services Mental Health			
Accounting Auditing Pa	ralegal	gal	ting
. The state of the	Number of	- Number of	Amount Payable
Employment Category	Employees	Hours Worked	Under the Contract
Nurse Practitioner - 29-1171.00	1.00	3,328.00	\$317,618.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
e amin'an in the state of the s	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
State of the state	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
and the second s	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	3,328.00	\$317,618.00
Grand Total	1.00	3,328	\$317,618.00
Name of person who prepared this re	port: Alice Mirar	nda	
<u> </u>			
Preparer's Signature:	10()	i none #.	J,J-707-J, , /
Preparer's Signature: While Will	~~		

(Use additional pages, if necessary)

Date Prepared: 05/11/2022

New York State Consultant Services Contractor's Annual Employment Report

		·	
Contracting State Agency Name: SUNY Upstate Medical University			
Contract Number: C 504393		Agency Business Unit:	
Contract Term: 10/1/2017 to 9/30/2022		Agency Department ID: 28110	
Contractor Name: Psychiatry Faculty Practice, Inc.			
Contractor Address: 719 Harrison Sti			
Description of Services Being Provide	ed: Adult and Cl	hild Psychiatric Servic	ces
		·	
On the first of Contract (Change and that h	oot fito\:		
Scope of Contract (Choose one that b Analysis Evaluation Re		ining	
Data Processing Computer Pro		Other IT consulting	
Engineering Architect Services			Services
Health Services Mental Health			
	ralegal Leg	al 🔲 Other Consul	ting
3	Number of	Number of	Amount Payable
Employment Category	Employees	Hours Worked	Under the Contract
Psychiatrist - 29-1066.00	1.00	520.00	\$61,123.50
124 8	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
·	0.00	0.00	\$0.00
:	0.00	0.00	\$0.00
· .	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	520.00	\$61,123.50
Grand Total	1.00	. 520	\$61,123.50
· · · · · · · ·	<u></u>		
Name of person who prepared this re	port: Alice Mirar	nda	
Title: Practice Manager			315-464-3119
Preparer's Signature: Olive M	wal		
Date Prepared: 05/11/2023			
Date FileDateu US/11/20/3			

New York State Consultant Services Contractor's Annual Employment Report

Contracting State Agency Name: SUNY Upstate Medical University Contract Number: C 504401 Agency Business Unit: Contract Term: 12/1/2017 to 11/30/2022 Agency Department ID: 28110 Contractor Name: Psychiatry Faculty Practice, Inc. Contractor Address: 719 Harrison Street, Syracuse, NY 13210 Description of Services Being Provided: Weekend Rounding 4B Scope of Contract (Choose one that best fits):			
	search Tra	ining Other IT consulting	
☐ Engineering ☐ Architect Services		☐ Environmental	Services
☐ Health Services ☐ Mental Health	Services		en e e e e e e e e e e e e e e e e e e
☐ Accounting ☐ Auditing ☐ Pa	ralegal	gal 🔲 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Nurse Practitioner - 29-1171.0	5.00	700.00	\$106,486.67
colors and	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
10 (Sept 140 million 12 to 15 million 15 mil	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
. 6	0.00	0.00	~ \$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	5.00	700.00	\$106,486.67
Grand Total	5.00	700.00	\$106,486.67
Name of person who prepared this retitle: Practice Manager Preparer's Signature: Date Prepared: 05/11/2023	eport: Alice Mirar		315-464-3119

New York State Consultant Services Contractor's Annual Employment Report

Contracting State Agency Name: SUNY Upstate Medical University			
Contract Number: C/X 504402 Agency Business Unit:			
Contract Term: 06/01/2018 to 05/	31/2023	Agency Department	ID: 28110
Contractor Name: Psychiatry Faculty	Practice, Inc.		
Contractor Address: 719 Harrison St			· 1.1
Description of Services Being Provid	ed: Inpatient Ch	nild Consultation	
			No.
			1. 2. 2.
Scope of Contract (Choose one that b		ining	
Data Processing Computer Pr		Other IT consulting	
Engineering Architect Services	• •	-	
☐ Health Services ☐ Mental Health		Land Chymony, Tonghongan	
Accounting Auditing Pa		gal	tina
Accounting Madating Madating	I		3, , , .
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Clinical Psychologist 19-3031.02	1.00	2,080.00	\$188,378.83
100 1 65 TO 100	0.00	0.00	<u>૾૾૽૱૱</u> \$0.00
	0.00	0.00	\$0.00
392011 40124 1 1 1 1 1 1 1	0.00	0.00	\$0.00
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.00	0.00	\$0.00
37454 010 b 1 c 2 c 2	0.00	0.00	\$0.00
The Award dis	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
and the second of the second o	0.00	0.00	⁷ +3 \$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	. \$0.00
Total this Page	1.00	2,080.00	\$188,378.83
Grand Total	1.00	2,080	\$188,378.83
Landing to the second s			
Name of person who prepared this re	eport: Alice Mira	nda	Sign of the second seco
Title: Practice Manager Phone #: 315-464-3119			
Preparer's Signature: Que Mu			
Date Prepared: 05/11/2023		A. Milk	
Date Frepared, 03/11/12023			

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Keportrei	10d. April 1, 2022 to	7 March 31, 2023	n.p.s.	
Contracting State Agency Name: SUNY Upstate Medical University Contract Number: C-504424 AOA #1 Agency Code: 28110				
Contract Term: <u>11/1/2020</u> to				
Contractor Name: University OBGYN				
Contractor Address: 736 Irving Avenu				
Description of Services Being Provide	d Lactation Consulta	ınt		
, <u>, , , , , , , , , , , , , , , , , , </u>	<u></u>			
C	14 C 4-).	· · · · · · · · · · · · · · · · · · ·		
Scope of Contract (Choose one that		mals [Training [
Analysis Evaluation			Training [
	Computer Programm	=	IT consulting mental Services	
Engineering Architect Serv		ving Enviror ealth Services	imental Services [
Health Services \(\sum_{\text{Auditing}} \)			Other Consulting	
Accounting Auditing	Paralegai	Legal [Other Consulting	
	Number of	Number of Hours	Amount Payable	
Employment Category	Employees	Worked	Under the Contract	
29-1141.00	1	607	\$31,705.64	
29-1141.00	I.	007	Ψ51,105.04	
Total this page	1	607	\$31,705.64	
Grand Total	1	607	\$31,705.64	
AT 6 1 1.41				
Name of person who prepared this rep	ort: Lisa Michish			
Preparer's Signature: War W	1ch mari		_	
		Phone #: 315-470-	7903	
Title: Practice Administrator		Filolic #: <u>313-470-</u>	1 300	
Date Prepared: <u>5/3/2023</u>	•			
Has additional magas if magazara			Page 1 of 1	
Use additional pages if necessary)			Tage FOI F	

New York State Consultant Services Contractor's Annual Employment Report

Contracting State Agency Name: SUNY Upstate Medical University Contract Number: C 504428			
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29-1066.00	1.00	140.00	\$18,764.25
A CONTRACTOR OF THE STATE OF TH	0.00	0.00	\$0.00
the state of the s	0.00	0.00	\$0.00
Top merka of series of the	0.00	0.00	\$0.00
27 22 22	0.00	. 0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
: :	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	140.00	\$18,764.25
Grand Total	1.00	140	18,764.25
Name of person who prepared this report: Alice Miranda Title: Practice Manager Preparer's Signature: Date Prepared: 5/09/2023			

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Contractor's Annual Employment Report			
Report Period: April 1, 22 to March 31, 23			
Contracting State Agency Name: SUI Contract Number: C-504438 Contract Term: 1/1/2018 to Contractor Name: Physical Medicine Contractor Address: 750 East Adams Description of Services Being Provide	12/31/22 and Rehabilitation MS Street, Syracuse, New	SG, LLP	
Scope of Contract (Choose one that Analysis	on Resea Computer Programm rices Survey Mental He	ealth Services	Training IT consulting Immental Services Other Consulting
Employment Category	Number of	Number of Hours	Amount Payable
29-129.04	Employees 5	Worked 2,964	Under the Contract \$540,773.27
Total this page Grand Total	-		\$540,773.27
Grand Total	<u> </u>	<u></u>	\$540,773.27
Name of person who prepared this rep Preparer's Signature:	ort: Christopher L. I		
Title: Business Manager		Phone #: <u>315-464-</u>	<u> </u>
Date Prepared: <u>05/05/2023</u>			
Use additional pages if necessary)			Page 1 of 1

New York State Consultant Services Contractor's Annual Employment Report

Contracting State Agency Name: SL Contract Number: C 504450 Contract Term: 7/1/2018 to 6/30/2 Contractor Name: Psychiatry Faculty Contractor Address: 719 Harrison Str Description of Services Being Provide Scope of Contract (Choose one that b Analysis Evaluation Res	023 Practice, Inc. reet, Syracuse, I ed: Adolescent est fits): search	Agency Business Ur Agency Department NY 13210 Psychiatric Hospitalis ining	ID: 28110
☐ Engineering ☐ Architect Services	-		Services
☐ Health Services ☐ Mental Health		•	
	ralegal 🔲 Leg	gal Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29-1066.00	1.00	2,080.00	\$335,856.00
C 1600 L	0.00	0,00	000 \$0.00 000
	0.00	0.00	\$0.00
The are 18 ben at the 19	0.00	7. de 0.00	\$0.00
season of the control	0.00	0.00	\$0.00
To Applicate the Control	0.00	0.00	\$0.00
1.644	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
and the second s	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	2,080.00	\$335,856.00
Grand Total	1.00	2,080	\$335,856.00
Name of person who prepared this re Title: Practice Manager Preparer's Signature:			315-464-3119

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUN Contract Number: C-504517 Contract Term: 4/6/2018 to Contractor Name: University OBGYN Contractor Address: 736 Irving Avenu Description of Services Being Provide	4/5/2023 N Associates, Inc ue - 3 West Tower Syr	racusė, NY 13210	Code: <u>28110</u>
Scope of Contract (Choose one that Analysis	on Resear Computer Programmices Survey	ing Other: ring Enviror alth Services	Training IT consulting Imental Services Other Consulting
Employment Category	Number of	Number of Hours	Amount Payable Under the Contract
29-1218.00	Employees	Worked 416	\$45,600.00
			·
Total this page Grand Total	1 1	416 416	\$45,600.00 \$45,600.00
Name of person who prepared this rep Preparer's Signature: Title: Practice Administrator Date Prepared: 5/3/2023	ort: Lisa McNish	Phone #: <u>315-470-</u>	
Use additional pages if necessary)			Page 1 of 1

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Contracting State Agency Name: SUN	NY Upstate Medical U	Iniversity Agency	Code: 28110
Contract Number: C-504579			,
Contract Term: 7/1/2018 to			
Contractor Name: University OBGYN	N Associates, Inc	. XXI 10010	
Contractor Address: 736 Irving Avenu	ue - 3 West Tower Syr	acuse, NY 13210	- 0- XX7
Description of Services Being Provide	d Medical Director F	'erinatai Center Service	es & women's Health
Services			
			~~·.
			-
Scope of Contract (Choose one that		. 🗖	
Analysis Evaluation			Training [
<u> </u>	Computer Programmi		IT consulting mental Services
Engineering Architect Serv		alth Services	imental services
Accounting Auditing			Other Consulting
/tocounting	T aranogar		
Employment Catagom:	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
29-1218.00	22	1,040	\$140,375.00
		,	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
			·
			,
Total this page	2	1040	\$140,375.00
Grand Total	2	1,040	\$140,375.00
Name of person who prepared this rep	ort: Lisa McNish		
· • • • • • • • • • • • • • • • • • • •	19WM		
	1-100/		_
Title: Practice Administrator		Phone #: <u>315-470-</u>	7903
Date Prepared: <u>5/3/2023</u>			
Use additional pages if necessary)	•		Page 1 of 1

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SU	INY Upstate Med	dical University	
Contract Number: C 504599	,	Agency Business Ur	
Contract Term: 07/01/2018 to 06/30/2023		Agency Department	ID: 28110
Contractor Name: Psychiatry Faculty	Practice, Inc.	• •	,
Contractor Address: 719 Harrison Str		NY 13210 T	1
Description of Services Being Provide	ed: On Call Psy	chiatry Coverage Ser	vices
Scope of Contract (Choose one that b			· · · · · · · · · · · · · · · · · · ·
Analysis Evaluation Res		ning	
Data Processing Computer Pro		Other IT consulting	Camilaga
☐ Engineering ☐ Architect Services		Environmental	Services
Health Services Mental Health		on Conquis	lina
Accounting Auditing Pa	ralegal	al Other Consul	ung
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29-1066.00	33.00	9,634.00	\$1,015,100.00
Lance Control of the	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	.0.00	\$0.00
Total this Page	33.00	9,634.00	\$1,015,100.00
Grand Total	33.00	9,634	\$1,015,100.00
Name of person who prepared this re	eport: Alice Mirar		315-464-3119

Date Prepared: 05/12/2023

New York State Consultant Services Contractor's Annual Employment Report

Contracting State Agency Name: SL	JNY Upstate Me	dical University		
Contract Number: C 504720 Agency Business Unit:				
Contract Term: 08/1/2018 to 07/3	1/2023	Agency Department	ID: 28110	
Contractor Name: Psychiatry Faculty			garan da kalanda da kasala da kalanda da kal Kalanda da kalanda da k	
Contractor Address: 719 Harrison Str		NY 13210	and the second second second	
Description of Services Being Provide				
			4)	
Scope of Contract (Choose one that b	est fits):		ا المنظم الله الله الله الله الله الله الله الل	
_ , _		ining.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
☐ Data Processing ☐ Computer Pro		Other IT consulting	en e	
☐ Engineering ☐ Architect Services	Surveying	Environmental	Services	
☐ Health Services ☐ Mental Health			gen de la companya de	
Accounting Auditing Pa	ralegal Leg	gal	ting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Psychiatrist - 29-1066.00	1.00	104.00	\$13,350.00	
Clinical Psychologist - 19-331.02	1.00	312.00	\$15,398,00	
omnoarr syone sgist 10 come	0.00	0.00	\$0.00	
TERRY BOOK OF SECTION AND SECT	0.00	0.00	\$0.00	
Barrage 1	0.00	- 0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
San de la	0.00	0.00	* \$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	2.00	416.00	\$28,748.00	
Grand Total	2.00	416	\$28,748.00	
	<u> </u>	I,		
Name of person who prepared this re	eport: Alice Mira	nda		
Title: Practice Manager			315-464-3119	
00: 101				
Date Prepared: 05/11/2023				

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023				
Report I ci	iou. April 1, 2022 to	March 51, 2025		
Contracting State Agency Name: SUN Contract Number: C-504757 Contract Term: 3/30/2020 to 6/30/202 Contractor Name: Upstate University Me Contractor Address: 750 E. Adams Street Description of Services Being Provided	5_ edical Associates at Syracet, Syracuse, NY 13210	cuse, Inc.	Code: 28110	
Scope of Contract (Choose one that Analysis Evaluation Data Processing Engineering Architect Services Health Services Accounting Auditing	on	ng Other I ing Environ alth Services	Training T consulting mental Services Other Consulting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
31-9092.00 Medical Assistants	3	6,195	\$ 214,129	
43-6013.00 Medical Sec & Admin Asst	13	25,441	\$ 654,931	
,				
,				
	10	31,636	\$ 869,060	
Total this page Grand Total	16 16	31,636	\$ 869,060	
Name of person who prepared this rep Preparer's Signature:				
Title: Sr. Administrative Coordinator		Phone #:(315	5) 464-6853	
Date Prepared: <u>5/11/2023</u>				
Use additional pages if necessary)			Page 1 of 1	

Area: Neurosurgery Mail/Send Date: 5/12/23

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUN Contract Number: C-504775 Contract Term: 1/1/2019 to 12/31/20 Contractor Name: Upstate University Me Contractor Address: 750 E. Adams Stree	IY Upstate Medical U 23 edical Associates at Syrac et, Syracuse, NY 13210	niversity Agency	Code: <u>28110</u>
Description of Services Being Provided	d Staff leasing of health	service professionals	
Scope of Contract (Choose one that I Analysis	on Resear Computer Programmi ices Survey Mental He Paralegal	ng Other I ing Environ alth Services Legal C	Training T consulting mental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1141.00 Registered Nurses	2	2,164	\$ 94,585
31-9092.00 Medical Assistants	9	16,460	
43-6013.00 Medical Sec & Admin Asst	25	44,363	\$ 1,539,797
			4 2 100 004
Total this page	36	62,987	\$ 2,108,094
Grand Total	36	62,987	\$ 2,108,094
Name of person who prepared this rep	ort: Christine C. Sauv		
Title: Sr. Administrative Coordinator	· · · · · · · · · · · · · · · · · · ·	Phone #:(315	5) 464-6853
Date Prepared: <u>5/9/2023</u>			•
Use additional pages if necessary)	· *		Page 1 of 1

Area: Urology Mail/Send Date: 5/12/23

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Suny Upstate Medical Universit	Co	ontracting	State	Agency	Name:	Sunv	Upstate:	Medical	Universit	V
---	----	------------	-------	--------	-------	------	----------	---------	-----------	---

Contract Number: C-504859

Agency Business Unit: 28110

Contract Term: 10/01/2022 to 09/30/2024

Agency Department ID: 34132236

Contractor Name: Upstate Orthopedics, LLP

Contractor Address: 6620 Fly Road, Ste 200 East Syracuse, NY 13057

Description of Services Being Provided: Medical Direction of Orthopedic Services, Orthopedic

Spine Surgery and Orthopedic Hand Surgery Programs

Scope of Contract (Choose one that best fits):					
☐ Analysis ☐ Evaluation ☐ Research ☐ Training					
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting					
☐ Engineering ☐ Architect Services	Surveying	Environmental	Services		
☐ Health Services ☐ Mental Health Services					
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	jal 🔲 Other Consul	ting		
	Number of	Number of	Amount Payable		
Employment Category	Employees	Hours Worked	Under the Contract		
Physician Managers	0.00	0.00	\$0.00		
11-9111.00/29-1242.00	0.30	624.00	\$361,737.00		
11-9111.00/29-1242.00	0.10	208.00	\$97,479.00		
11-9111.00/29-1242.00	0.07	146.00	\$48,735.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
Total this Page	0.47	978.00	\$507,951.00		
Grand Total	0.47	978	\$507,951.00		

Name of person who prepared this report: Cynthia Morris

Title: Accountant

Phone #: 315-464-8197

Preparer's Signature:

Date Prepared: 05/03/2023

(Use additional pages, if necessary)

Page 1 of 1

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services					
Contrac	ctor's Annual Employ	yment Report	•		
Report Per	riod: April 1, 2022 to	March 31, 2023			
Contracting State Agency Name: SUN	NY Upstate Medical U	niversity Agency	Code: <u>28110</u>		
Contract Number: C-504969					
Contract Term: 1/1/2020 to 12/31/20					
Contractor Name: Upstate University M		cuse, Inc.			
Contractor Address: 750 E. Adams Street					
Description of Services Being Provide	d Medical Directorship				
		· .			
Scope of Contract (Choose one that	best fits):				
Analysis Evaluation			Training 🔲		
	Computer Programmi		T consulting		
Engineering Architect Serv	ices 🗌 Survey		mental Services		
Health Services 🗸		alth Services			
Accounting Auditing Auditing	Paralegal	Legal 📙 🤇	Other Consulting		
Employment Catagony	Number of	Number of Hours	Amount Payable		
Employment Category	Employees	Worked	Under the Contract		
29-1217.00 Neurologists	1	100	\$ 39,750		
29-1218.00 Obstetricians & Gynecologists	1	150	\$ 120,050		
29-1229.00 Physicians, All Other	18	1,750	\$ 636,813		
29-1229.03 Urologists	1	150	\$ 70,650		
29-1249.00 Surgeons, All Other	6	823	\$ 362,418		
			,		
	`				
Total this page	27	2,973	\$ 1,229,681		
Grand Total	27	2,973	\$ 1,229,681		
Name of person who prepared this rep	ort: <u>Christine C Sauve</u>	2	•		
Preparer's Signature: (Midine (Saire_		_		
Title: Sr. Administrative Assistant		Phone #:(315) 464-6853		
Date Prepared: 5/8/2023					
Use additional pages if necessary)	•		Page 1 of 1		

Area: Cancer Center Co-Mgt

Mail/Send Date: 5/15/2023

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services

Contractor's Annual Employment Report				
Report Period: April 1, 22 to March 31, 23				
Contracting State Agency Name: SUI Contract Number: C-505064 Contract Term: 8/1/2019 to Contractor Name: Physical Medicine Contractor Address: 750 East Adams Description of Services Being Provide	7/31/24 and Rehabilitation M Street, Syracuse, New	SG, LLP	Code: 28110	
Scope of Contract (Choose one that Analysis	on Resea Computer Programm ices Survey Mental He	ing Other : ving Environ ealth Services	Training IT consulting Imental Services Other Consulting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
29-129.04	1	2,080	\$378,875.60	
Total this page			#270 075 CO	
Grand Total			\$378,875.60	
Name of person who prepared this rep Preparer's Signature:	ort: <u>Christopher L. I</u>	alone		
Title: Business Manager	WWW. Va.	Phone #: 315-464-2	2240	
Date Prepared: <u>05/05/2023</u>				
Use additional pages if necessary)			Page 1 of 1	

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Contractor's Annual Employment Report Report Period: April 1, to March 31,				
			G 1 20110	
Contract Number:	NY Upstate Medical U	<u>niversity</u> Agency	Code: <u>28110</u>	
Contract Term:to				
Contractor Name:				
Contractor Address: Description of Services Being Provide				
Description of Services Being Flovide	u			
Scope of Contract (Choose one that	heet fite).			
Analysis Evaluation	on Resear		Training	
Data Processing	Computer Programmi	ing Other	IT consulting	
Engineering Architect Serv Health Services	ices Survey	ring	mental Services	
Accounting Auditing			Other Consulting	
		8		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Total this page				
Grand Total				
Name of person who prepared this rep	ort:			
Preparer's Signature: Midyl	K. N		_	
Title:)	Phone #:		
Date Prepared:				
Use additional pages if necessary)			Page of	

Area: Mail/Send Date:

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SL Contract Number: C 505159 Contract Term: 01/20/2020 to 01/ Contractor Name: Psychiatry Faculty Contractor Address: 719 Harrison Str Description of Services Being Provide Scope of Contract (Choose one that b	19/2023 Practice, Inc. reet, Syracuse, Ned: Psychiatric I	Agency Business Ur Agency Department NY 13210	ID: 28110	
l ' '		ining	•	
		Other IT consulting		
	0 —		Services	
☐ Engineering ☐ Architect Services ☐ Health Services ☐ Mental Health				
	ralegal	al Other Consult	tina · · · · ·	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Nurse Practitioner - 29-1171.00	2.00	780.00	\$59,301.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Na transfer in the second of t	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
The second secon	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	2.00	780.00	\$59,301.00	
Grand Total	2.00	780	\$59,301.00	
Name of person who prepared this report: Alice Miranda Title: Practice Manager Preparer's Signature: Property Prop				

Date Prepared: 05/12/2023
(Use additional pages, if necessary)

New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University Contract Number: C 505170 Agency Business Unit: Contract Term: 12/30/2019 to 12/29/2022 Agency Department ID: 28110 Contractor Name: Psychiatry Faculty Practice, Inc. Contractor Address: 719 Harrison Street, Syracuse, NY 13210 Description of Services Being Provided: Weekend Rounding 7W				
Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing Computer Programming Other IT consulting Engineering Architect Services Surveying Environmental Services Health Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Nurse Practitioner - 29-1171.00	3.00	624.00	¹ 45417.75	
	0.00	0.00	- \$0.00	
	0.00	0.00	\$0.00	
Tagging of Arthurst Committee Committee Committee	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
The group of the second second	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	3.00	624.00	\$45,417.75	
Grand Total	3.00	624	\$45,417.75	
Name of person who prepared this report: Alice Miranda Title: Practice Manager Phone #: 315-464-3119				

Preparer's Signature: Oliver My

Date Prepared: 05/11/2023

Use additional pages if necessary)

Page

of

Exhibit Y		OSC Use Reporting		
FORM B		Category		
	State Consultant Se	rvices		
Contract	tor's Annual Emplo	yment Report		
Report Peri	od: April 1, 2022 to	March 31, 2023		
Contracting State Agency Name: SUN Contract Number: C-505177 Contract Term: 07/01/2021 to Contractor Name: Upstate Orthopedics Contractor Address: 6620 Fly Road, St Description of Services Being Provided	06/30/2022 s, LLP_ te 200 East Syracuse	, NY 13057	Code: 28110	
Scope of Contract (Choose one that best fits): Analysis				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Physician Managers				
11-9111.00 / 29-1242.00	3	840	\$500,000.00	
Total this page		840	500,000.00	
Grand Total		840	\$500,000.00	
Name of person who prepared this report Preparer's Signature: Title: Accountant Date Prepared: 05/03/2023	A . (C) 1	O Phone #: <u>315-464-</u>	8197	

New York State Consultant Services Contractor's Annual Employment Report

Contracting State Agency Name: SUNY Upstate Medical University Contract Number: C 505183 Agency Business Unit: Contract Term: 01/1/2020 to 12/31/2024 Agency Department ID: 28110 Contractor Name: Psychiatry Faculty Practice, Inc. Contractor Address: 719 Harrison Street, Syracuse, NY 13210 Description of Services Being Provided: Ambulatory Psychiatry Services				
Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing Computer Programming Other IT consulting Engineering Architect Services Surveying Environmental Services Health Services Mental Health Services Accounting Paralegal Legal Other Consulting				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Psychiatrist - 29-1066.00	1.00	877.00	\$175,400.00	
Nurse Practitioner - 29-1171.00	2.00	84.00	\$7,980.00	
Transcer Tabellorier 25 117 1.55	0.00	0.00	\$0.00	
21,20 g (21,20 g)	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
d the state of the	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
46.5	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	. 0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	3.00	961:00	\$183,380.00	
Grand Total	3.00	. 961	\$183,380.00	
Name of person who prepared this report: Alice Miranda Title: Practice Manager Preparer's Signature: Date Prepared: 05/09/2023				

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name:	SUNY Upstate	Medical University
--------------------------------	--------------	--------------------

Contract Number: C-505214 Agency Business Unit: 28110

Contract Term: 07/01/2020 to 08/31/2024 Agency Department ID: 3320211

Contractor Name: Press Ganey Associates LLC (d/b/a Press Ganey Associates, Inc.)

Contractor Address: 1173 Ignition Drive, South Bend, IN 46601
Description of Services Being Provided: Patient Experience Services

Scope of Contract (Choose one that b	est fits):				
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Tra	ining			
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting					
☐ Engineering ☐ Architect Services ☐ Surveying ☐ Environmental Services					
☐ Health Services ☐ Mental Health	Services				
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🛛 Other Consul	ting		
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract					
43-4051.00 (Cust Serv Rep)	2.00	210.00	\$100,157.00		
43-901.00 (Data Entry Keyers)	100.00	210.00	\$6,677.00		
43-9051.00 (Mail Clerk and Mail)	25.00	84.00	\$4,451.00		
41-3099.99 (Sales Rep)	1.00	23.00	\$14,293.00		
43-3021.02 (Billing Cost Clerk)	4.00	2.00	\$111.00		
19-3099.99 (Social Sceince and Related Worker)	4.00	21.00	\$11,129.00		
************* please note that we do not operate our business in the manner where hours are specifically allocated per person on an account basis. The information provided is best information available	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
Total this Page	136.00	550.00	\$136,818.00		
Grand Total					

Name of person who prepared this report: Christopher Smith

Title: Senior Manager, Finance
Phone #: 800-232-8032
Preparer's Signature:

5/11/27

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Contractor's Annual Employment Report Report Period: April 1, to March 31,			
Contract Number:	NY Upstate Medical U	Iniversity Agency	Code: <u>28110</u>
Contract Term:to			
Contractor Name:			
Contractor Address: Description of Services Being Provide	.d		
Scope of Contract (Choose one that	hast fits).		1
Analysis Evaluation		rch 🗌	Training
Data Processing	Computer Programmi	ing 🔲 Other	IT consulting
Engineering Architect Serv Health Services	ices Survey	ring	mental Services
Accounting Auditing			Other Consulting
		20gm 🗀	outer components [
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Total this page			
Grand Total			
Name of person who prepared this rep	ort:		
Preparer's Signature: Friday	K. N		_
Title:	0	Phone #:	
Date Prepared:			
Use additional pages if necessary)			Page of

Area:

Mail/Send Date:

FORM B

OSC	Use	Only:
n	4.	0.1

Reporting Code: Category Code:

State Consultant Services

Contractor's Annual Employment Report				
Report Period: April 1, 2022 to March 31, 2023				
Contract Number: <u>C-505347</u> Contract Term: <u>7/1/2020</u> to <u>6/30/202</u>	Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: C-505347 Contract Term: 7/1/2020 to 6/30/2024			
Contractor Name: Upstate University Me		cuse, Inc.		
Contractor Address: 750 E. Adams Stree		isa professionals		
Description of Services Being Provided	a_Staff leasing of fleaith	service professionals		
	,			
Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing Computer Programming Other IT consulting Engineering Architect Services Surveying Environmental Services Health Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
31.9092.00 Medical Assistants	1	1,977	\$ 65,733	
43-6013.00 Medical Sec & Admin Asst	3	5,135	\$ 173,683	
·				
			, ,	
			·	
	`	- And the second		
3				
			,	
		, ,		
Total this page	4	7,112	\$ 239,416	
Grand Total	. 4	7,112	\$ 239,416	
Name of person who prepared this rep Preparer's Signature:	ort: Christine C. Sauv			
		Phone #:(315	5) 464- <u>6853</u>	
Date Prepared: <u>5/8/2023</u>				
Use additional pages if necessary)			Page 1 of 1	

Area: ENT Mail/Send Date: 5/12/2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University			
Contract Number: C 505397 Agency Business Unit:			
Contract Term: 8/1/2020 to 7/31/2025 Agency Department ID: 28110			
Contractor Name: Psychiatry Faculty Practice, Inc.			
Contractor Address: 719 Harrison Str			4
Description of Services Being Provide	ed: Child Psych	iatrist - IOP	3.7
		· . · . · . · . · . · . · . · . · . · .	<u> </u>
	4 64-1		
Scope of Contract (Choose one that b		ining	
		ining	
☐ Data Processing ☐ Computer Pro		Other IT consulting	0
Engineering Architect Services		☐ Environmental	Services
Health Services Mental Health			
Accounting Auditing Pa	ralegal Leg	gal	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29-1066.00	3.00	988.00	\$136,535.75
and the second s	0.00	0.00	\$0.00
the state of the s	0.00	0.00	\$0.00
And Annual Control of the Control of	0.0.0	0.00	\$0.00
1	0.00	0.00	\$0.00
S. A.	0.00	0.00	\$0.00
AMARIN III III III III III III III III III	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
• • • • • • • • • • • • • • • • • • • •	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	3.00	988.00	\$136,535.75
Grand Total	3.00	988	\$136,535.75
Name of person who prepared this report: Alice Miranda			

Title: Practice Manager

Preparer's Signature: Ulue Mua

Phone #: 315-464-3119

Date Prepared: 05/11/2023

(Use additional pages, if necessary)

(Use additional pages, if necessary)

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Contracting State Agency Name: SUNY Upstate Medical University			
Contract Number: C 505398 Agency Business Unit:			
Contract Term: 8/1/2020 to 7/31/2022 Agency Department ID: 28110			
Contractor Name: Psychiatry Faculty	Practice, Inc.	www.	ا الله القواهية والمؤرد المراجع الله الله المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المر المراجع المراجع المراج
Contractor Address: 719 Harrison Str	eet, Syracuse, I	NY 13210	1
Description of Services Being Provide			
		and the second s	
Scope of Contract (Choose one that b	est fits):	1	in the second se
☐ Analysis ☐ Evaluation . ☐ Res	search 🔲 Tra	ining	ر کار در در استخداد در در به استوالید در در در استخداد در در به استوالید در در د
☐ Data Processing ☐ Computer Pro	ogramming .	Other IT consulting	1, 4, 4, 4, 4, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
☐ Engineering ☐ Architect Services	Surveying	g Environmental	Services
☐ Health Services ☐ Mental Health	Services	· · · · · · · · · · · · · · · · · · ·	
Accounting Auditing Pa	ralegal 🔲 Leg	gal	ting
	Number of	Number of	Amount Pavable
Employment Category	Employees	Hours Worked	Under the Contract
Psychiatrist - 29-1066.00	1.00	138.67	\$20,339.68
4.4864	0.00	0.00	\$2.0\$0.00
	0.00	0.00	\$0.00
SHOW IN THE RESERVE OF THE SHOW	0.00	0.00	\$0.00
77 C. 24 C. 10 C.	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
That are a second secon	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Additional transfer of the control o	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	138.67	\$20,339.68
Grand Total	1.00	138.67	\$20,339.68
Name of person who prepared this re	port: Alice Mirai	nda	·
Title: Practice Manager Phone #: 315-464-3119			
Tropulor o oignataro.			
Date Prepared: 05/11/2023			

New York State Consultant Services Contractor's Annual Employment Report

<u> </u>			
Contracting State Agency Name: SUNY Upstate Medical University			
Contract Number: C 505399 Agency Business Unit:			
Contract Term: 8/1/2020 to 7/31/2	025	Agency Department	ID: 28110
Contractor Name: Psychiatry Faculty Practice, Inc.			
Contractor Address: 719 Harrison Str		NY 13210	A COLUMN TO THE RESERVE OF THE PARTY OF THE
Description of Services Being Provide			
and the second of the second o			The second party and the secon
Scope of Contract (Choose one that b	·		
		ining	
☐ Data Processing ☐ Computer Pro	• •	Other IT consulting	
☐ Engineering ☐ Architect Services		☐ Environmental	Services
☐ Health Services ☐ Mental Health			
Accounting Auditing Pa	ralegal Leg	gal	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29-1066.00	2.00	988.00	\$151,260.00
	0.00	0.00	436 18 \$0.00
	0.00	0.00	\$0.00
MANAGE STORY	0,00	0.00	\$0.00
i et i sa	0.00	0.00	\$0.00
1 15 37 5 1 200	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	2.00	988.00	\$151,260.00
Grand Total	2.00	988	\$151,260.00
Name of person who prepared this re	port: Alice Mira	nda	
Title: Practice Manager Phone #: 315-464-3119			
ΛΛ ~ .Λι	rd)	1 110110 11.	
	~		
Date Prepared: 05/11/2023			

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Contrac	ctor's Annual Emplo	yment Report				
Report Period: April 1, to March 31,						
Contracting State Agency Name: SUN Contract Number: Contract Term:to			Code: <u>28110</u>			
Scope of Contract (Choose one that best fits): Analysis						
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
Total this page Grand Total						
Name of person who prepared this report:						
Preparer's Signature: fructy k		Phone #:				
Date Prepared:						
Use additional pages if necessary)			Page of			

Area: Mail/Send Date:

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Pe	riod: April 1, 2022 to	o March 31, 2023	
Contracting State Agency Name: <u>SU</u> Contract Number: <u>C</u> 505556	NY Upstate Medical I	University Agency	Code: 28110
	04/04/0006	ı	
Contractor Name: First Choice Staffi	04/04/2026		,
Contractor Address: 7525 Margar D.	ng 1 T' 1 NW 10	.000	
Contractor Address: 7525 Morgan Ro	oad, Liverpool, NY 13	090	
Description of Services Being Provide	ed Temporary Clerica	al, Administrative and (Other Support
Personnel Services			
Scope of Contract (Choose one that	best fits):		
Analysis 🗌 Evaluati		rch 🗌	Training [
Data Processing	Computer Programm	ing Other	IT consulting
Engineering Architect Serv			nmental Services
Health Services	Mental He	ealth Services	
Accounting Auditing	Paralegal	Legal 🔲	Other Consulting 🛛
Employment Category	Number of	Number of Hours	Amount Payable
	Employees	Worked	Under the Contract
Medical Secretaries and			
Administrative Assistants	23	4,008	\$109,983.29
<u> </u>			
	-		
Tatalahi			
Total this page			
Grand Total	23	4,008	\$109,983.29
Name of person who prepared this rep	oxt: Karen Nabinger	,	
Preparer's Signature: Han Ma			
Title: Supervisor		D1 " 2	_
		Phone #: 315-453-	5533
Date Prepared: <u>05/01/2023</u>			
Use additional pages if necessary)			Daga 1 of 1

FORM B

Use additional pages if necessary)

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: C-505569 Contract Term: 1/1/2021 to 12/31/2025 Contractor Name: University OBGYN Associates, Inc. Contractor Address: 736 Irving Avenue - 3 West Tower Syracuse, NY 13210 Description of Services Being Provided OBGYN Chief of Service & Quality Officer - Community Campus Scope of Contract (Choose one that best fits): Analysis [Evaluation Research [Training [Data Processing Computer Programming Other IT consulting Environmental Services Surveying Engineering Architect Services Health Services Mental Health Services Other Consulting Paralegal Legal Accounting Auditing [Number of Hours Amount Payable Number of **Employment Category** Worked Under the Contract **Employees** 624 \$84,738.00 29-1218.00 624 \$84,738.00 Total this page 624 \$84,738.00 **Grand Total** Name of person who prepared this report: Lisa McNish Bux morush Preparer's Signature Title: Practice Administrator Phone #: 315-470-7903 Date Prepared: 5/3/2023

Page 1 of 1

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University Contract Number: C 505570 Agency Business Unit:				
	Contracting State Agency Name: SUNY Upstate Medical University			
1	Contract Number: C 505570 Agency Business Unit:			
Contract Term: 1/1/2021 to 12/31/2023 Agency Department ID: 28110				
Contractor Name: Psychiatry Faculty Practice, Inc.				
Contractor Address: 719 Harrison Street, Syracuse, NY 13210				
Description of Services Being Provided: Medical Direction - IOP	• .			
Scope of Contract (Choose one that best fits):				
Analysis Evaluation Research Training	•			
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting				
☐ Engineering ☐ Architect Services ☐ Surveying ☐ Environmental Services				
Health Services Mental Health Services				
Accounting Auditing Paralegal Legal Other Consulting	<u></u>			
Number of Number of Amount Payal Employment Category Employees Hours Worked Under the Cont				
Psychiatrist - 29-1066.00 2.00 416.00 \$68,34	4.25			
	0.00			
0.00 0.00	0.00			
0.00 0.00	0.00			
0.00 0.00	0.00			
0.00 0.00	0.00			
0.00 0.00	0.00			
0.00 0.00	0.00			
0.00 0.00	0.00			
0.00 0.00	0.00			
0.00 0.00	0.00			
	0.00			
0.00 0.00				
	0.00			
0.00 0.00	4.25			
0.00 0.00 9 Total this Page 2.00 416.00 \$68,32	4.25			
0.00 0.00 9 Total this Page 2.00 416.00 \$68,34 Grand Total 2.00 416 \$68,34	4.25			
Total this Page 2.00 416.00 \$68,34 Grand Total 2.00 416 \$68,34 Name of person who prepared this report: Alice Miranda	4.25			
0.00 0.00 9 Total this Page 2.00 416.00 \$68,34 Grand Total 2.00 416 \$68,34	4.25			

FORM B

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Reporting Code:
Category Code:

Contractor's Annual Employment Report				
Report Period: April 1, 2022 to March 31, 2023				
Contracting State Agency Name: SUN Contract Number: C-505635 Contract Term: 5/1/2021 to 4/30/202 Contractor Name: Upstate University Me Contractor Address: 750 E. Adams Street Description of Services Being Provided	6_ edical Associates at Syrac et, Syracuse, NY 13210	cuse, Inc.	Code: <u>28110</u>	
	,			
Scope of Contract (Choose one that I Analysis	on Resear Computer Programmi ices Survey	ng Other I ing Environ alth Services	Training T consulting mental Services Other Consulting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
43-6013.00 Medical Sec & Admin Asst	. 2	4,173	\$ 143,234	
Total this page Grand Total Name of person who prepared this rep	ort: Christine C. Sauv	4,173 4,173	\$ 143,234 \$ 143,234	
Preparer's Signature: (Misting (Saure	(215		
Title: Sr. Administrative Coordinator	·	Phone #:(315) 464-6853	
Date Prepared: 5/10/2023		•	Page 1 of 1	
Use additional pages if necessary)	1	,	1 450 1 01 1	

Area: OB/GYN

Mail/Send Date: 5/12/2023

FORM B

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	State Consultant Sertor's Annual Employ	*		
Report Period: April 1, 2022 to March 31, 2023				
Contracting State Agency Name: SUN Contract Number: C-505668 Contract Term: 7/1/2021 to 6/30/202 Contractor Name: Upstate University Mc Contractor Address: 750 E. Adams Street Description of Services Being Provided	6_ edical Associates at Syrac et, Syracuse, NY 13210	cuse, Inc.	Code: 28110	
Scope of Contract (Choose one that Analysis Evaluation Data Processing Architect Service Health Services Accounting Auditing Auditing	on Resear Computer Programmi ices Survey	ng Other I ing Environ alth Services	Training T consulting mental Services Other Consulting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract \$ 315,041	
43-6013.00 Medical Sec & Admin Asst	7	13,188	\$ 315,041	
Total this page Grand Total	7	13,188 13,188	\$ 315,041 \$ 315,041	
Name of person who prepared this rep Preparer's Signature: Title: Sr. Administrative Coordinator Date Prepared: 5/11/2023 Use additional pages if necessary)		e	- 5) 464-6853 Page 1 of 1	

Area: Ophthalmology Mail/Send Date: 5/12/23

FORM B

OSC Use Only: Reporting Code: Category Code:

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023				
,				
Contracting State Agency Name: SUN	NY Upstate Medical U	niversity Agency	Code: <u>28110</u>	
Contract Number: C-505695		.' .		
Contract Term: 7/1/2021 to 6/30/202		n.,		
Contractor Name: Upstate University Me		cuse, Inc	·	
Contractor Address: 750 E. Adams Stree	et, Syracuse, NY 13210			
Description of Services Being Provided	d Staff leasing of health	service professionals		
		, particular particula	· · · · · · · · · · · · · · · · · · ·	
Scope of Contract (Choose one that			· 	
Analysis Evaluation			Fraining	
	Computer Programmi	S <u>=</u>	T consulting	
Engineering Architect Servi		· · · · · · · · · · · · · · · · · · ·	mental Services	
Health Services 🗸		alth Services	Other Consulting	
Accounting Auditing	Paralegal	Legal 🗌 (Other Consulting	
	Number of	Number of Hours	Amount Payable	
Employment Category	Employees	Worked	Under the Contract	
11-9111.00 Medical & Health Services	1	2,080	\$ 149,172	
29-1141.00 Registered Nurses	5	7,035	\$ 424,674	
31-9092.00 Medical Assistants	4	6,057		
43-6013.00 Medical Sec & Admin Asst	. 41	66,627	\$ 1,842,757	
·		•	•	
,			,	
1.				
•				
		·		
			·. · _	
Total this page	51	81,799	\$ 2,640,462	
Grand Total	: 51	81,799	\$ 2,640,462	
Name of person who prepared this rep	ort: Christine C. Sauv	<u>e</u>		
Preparer's Signature: (Widin	« ('Sawe			
Title: Sr. Administrative Coordinator		Phone #:(315	5) 464-6853	
Date Prepared: <u>5/8/2023</u>			•	
Use additional pages if necessary)		V	Page 1 of 1	
		•		

Area: Medicine

Mail/Send Date: 5/12/2023

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023					
0 0	Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110				
Contract Number: <u>C-505696</u>			· · · · · · · · · · · · · · · · · · ·		
Contract Term: <u>7/1/2021</u> to <u>6/30/202</u>					
Contractor Name: Upstate University Me		cuse, Inc.	· · · · · · · · · · · · · · · · · · ·		
Contractor Address: 750 E. Adams Stree					
Description of Services Being Provided	d_Staff leasing of health	service professionals			
Scope of Contract (Choose one that		. []	rinin = [
Analysis 🗌 — Evaluatio		=	Fraining		
	Computer Programmi	~ _ _	T consulting [
Engineering Architect Servi			mental Services		
Health Services 🗸		alth Services			
Accounting Auditing	Paralegal 🗌	Legal 🗌 🤇	Other Consulting		
	Number of	Number of Hours	Amount Payable		
Employment Category	Employees	Worked	Under the Contract		
21-1022.00 Healthcare Social Workers	1	2,089	\$ 55,645		
29-1129.00 Therapists, All Other	12	16,446	\$ 511,944		
29-1141.00 Registered Nurses	3	4,711	\$ 297,558		
29-2072.00 Medical Records Specialists	1	2,080	\$ 74,031		
31-9092.00 Medical Assistants	4	4,382	\$ 142,894		
43-6013.00 Medical Sec & Admin Asst	12	21,194	\$ 675,471		
·					
Total this page	33	50,902	\$ 1,757,543		
Grand Total	33	50,902	\$ 1,757,543		
Name of person who prepared this report: Christine C. Sauve					
Preparer's Signature: (Midding C Sawe					
Title: Sr. Administrative Coordinator Phone #: (315) 464-6853					
Date Prepared: <u>5/10/2023</u>		-			
Use additional pages if necessary)			Page 1 of 1		

Area: Pediatrics . Mail/Send Date: 5/12/23

FORM B

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Reporting Code: Category Code:

Contrac	ctor's Annual Employ	yment Report	ľ
Report Period: April 1, 2022 to March 31, 2023			
Troport x v.		, , , , , , , , , , , , , , , , , , , ,	
Contracting State Agency Name: <u>SUN</u> Contract Number: C-505697	NY Upstate Medical U	niversity Agency	Code: <u>28110</u>
Contract Term: 10/1/2021 to 9/30/202	26_		
Contractor Name: Upstate University M			· · · · · · · · · · · · · · · · · · ·
Contractor Address: 750 E. Adams Stree			. ·
Description of Services Being Provide	d Staff leasing of health	service professionals	
			· ·
Scope of Contract (Choose one that Analysis	on Resean Computer Programmi ices Survey	ing Other I ing Environ alth Services	Training T consulting mental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1141.00 Registered Nurses	1	2,241	\$ 157,917
31-9092.00 Medical Assistants	3	9,655	\$ 278,016
43-6013.00 Medical Sec & Admin Asst	14	23,025	\$ 726,971
	`		
·			
T (14)	10	34,921	\$ 1,162,904
Total this page Grand Total	18 18	34,921	\$ 1,162,904
Grand Total	10	34,321	3 1,102,304
Name of person who prepared this rep	ort: Christine C. Sauv	e	· · · · · · · · · · · · · · · · · · ·
Preparer's Signature: (Misline C.	lawe		-
Title: Sr. Administrative Coordinator Phone #:(315) 464-6853			
Date Prepared: <u>5/8/2023</u>			
Use additional pages if necessary)			Page 1 of 1

Area: Family Medicine

Mail/Send Date: 5/12/2023

FORM B

Reporting Code:
Category Code:

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023					
Contracting State Agency Name: SUN Contract Number: C-505701 Contract Term: 10/1/2021 to 9/30/202 Contractor Name: Upstate University M Contractor Address: 750 E. Adams Street Description of Services Being Provide	6_edical Associates at Syraet, Syracuse, NY 13210	cuse, Inc.	Code: 28110		
Scope of Contract (Choose one that Analysis Evaluation		rch 🗌	Fraining		
Data Processing	Computer Programmi	· — .	T consulting [
Engineering Architect Serv		<u>ت ب</u>	mental Services 🗌 📋		
Health Services 🗸		alth Services	Other Consulting [
Accounting Auditing Auditing	Paralegal	Legal (Julei Consulting		
	Number of	Number of Hours	Amount Payable		
Employment Category	Employees	Worked	Under the Contract		
29-1141.00 Registered Nurses	2	2,086	\$ 166,306		
31-9091.00 Dental Assistants	<u> </u>	2,410	\$ 65,617		
31-9092.00 Medical Assistants	. 4	6,117	\$ 156,475		
43-6013.00 Medical Sec & Admin Asst	. 19	28,961	\$ 827,498		
		a	,		
:					
Total this page	26	39,574	\$ <u>1,215,896</u>		
Grand Total	26	39,574	\$ 1,215,896		
Name of person who prepared this rep	ort: Christine C. Sauv	e	·		
Preparer's Signature: Winding (Sawe_		<u>.</u> .		
Title: Sr. Administrative Coordinator Phone #:(315) 464-6853					
Date Prepared: <u>5/8/2023</u>					
		•	D 1 . £ 1		
Use additional pages if necessary)	•	-	Page 1 of 1		

Area: Surgery
Mail/Send Date: 5/12/2023

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services

Contractor's Annual Employment Report						
Report	Period: April 1, 22 to	March 31, 23				
Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: C-505723 Contract Term: 7/1/2021 to 6/30/26 Contractor Name: Physical Medicine and Rehabilitation MSG, LLP Contractor Address: 750 East Adams Street, Syracuse, New York 13210 Description of Services Being Provided Concussion Management Services						
Scope of Contract (Choose one that Analysis	on Resea Computer Programm ices Survey Mental He	ing Other : ving Environ ealth Services	Training IT consulting Imental Services Other Consulting			
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
29-129.04	2	1,664	\$268,938.30			
	,					
Total this page						
Grand Total			\$268,938.30			
Name of person who prepared this rep	Name of person who prepared this report: Christopher L. Lalone					
Preparer's Signature:						
Title: Business Manager		Phone #: <u>315-464-2</u>	2240			
Date Prepared: <u>05/05/2023</u>						
Use additional pages if necessary)			Page 1 of 1			

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services	
Contractor's Annual Employment Report	t

Contractor's Annual Employment Report						
Report Per	Report Period: April 1, 2022 to March 31, 2023					
Contracting State Agency Name: <u>SUN</u> Contract Number: <u>C-505724</u>	IY Upstate Medical U	niversity Agency	Code: <u>28110</u>			
Contract Term: 7/1/2021 to 6/30/202 Contractor Name: Upstate University Me Contractor Address: 750 E. Adams Stree	edical Associates at Syra	cuse, Inc.				
Description of Services Being Provided	d Staff leasing of health	service professionals				
Scope of Contract (Choose one that I Analysis	on Resear Computer Programmi ices Survey	ng Other I ing Environ alth Services	Training T consulting mental Services Other Consulting			
Employment Category	Number of, Employees	Number of Hours Worked	Amount Payable Under the Contract			
43-6013.00 Medical Sec & Admin Asst	11	17,761	\$ 544,279			
·			•			
			,			
Total this page Grand Total	11	17,761 11,761	\$ 544,279 \$ 544,279			
Name of person who prepared this rep Preparer's Signature:						
Title: Sr. Administrative Coordinator		Phone #:(31!	5) 464-6853			
Date Prepared: <u>5/11/2023</u> Use additional pages if necessary)			Page 1 of 1			

Area: Neurology Mail/Send Date; 5/12/2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting Sta	te Agency Nam	e: Suny Upstat	e Medical	University
-----------------	---------------	----------------	-----------	------------

Contract Number: C-505731

Agency Business Unit: 28110

Contract Term: 07/01/2021 to 06/30/2026

Agency Department ID: 34132236

Contractor Name: Upstate Orthopedics, LLP

Contractor Address: 6620 Fly Road, Ste 200 East Syracuse, NY 13057

Description of Services Being Provided: Quality Officier Physican Services for the Upstate

Hospital's Orthopedic Surgery Services Program

Scope of Contract (Choose one that be	est fits):						
☐ Analysis ☐ Evaluation ☐ Res	search 🔲 Trai	ining					
☐ Data Processing ☐ Computer Pro	ogramming 🔲	Other IT consulting					
☐ Engineering ☐ Architect Services	☐ Surveying	☐ Environmental	Services				
☐ Health Services ☐ Mental Health	Services						
☐ Accounting ☐ Auditing ☐ Par	ralegal	al 🗌 Other Consul	ting				
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract							
Physician Manager	0.00	0.00	\$0.00				
11-9111.00/29-1242.00	0.20	416.00	\$92,511				
	0.00	0.00	\$0.00				
	0.00 0.00 \$0.00						
	0.00 0.00 \$0.00						
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
0.00 0.00 \$0.00							
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
Total this Page	0.20	416.00	\$92,511.00				
Grand Total	0.20	312	\$92,511.00				

Name of person who prepared this report: Cynthia Morris

Title: Accountant

Phone #: 315-464-8197

Preparer's Signature:

Date Prepared: 05/03/2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

		1	
Contracting State Agency Name: SL Contract Number: C505748 Contract Term: 04/01/2021 to 03/3 Contractor Name: Psychiatry Faculty Contractor Address: 719 Harrison Str Description of Services Being Provide Scope of Contract (Choose one that b	31/2024 Practice, Inc. reet, Syracuse, Ned: Psychiatric F	Agency Business Ur Agency Department NY 13210 Hospitalists Services	the state of the s
Analysis. Devaluation Re	search 🔲 Trai	ning	
☐ Data Processing ☐ Computer Pro	ogramming 🔲	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	Environmental	Services
☐ Health Services ☐ Mental Health		and a second of the second	
	ralegal Leg	al Dther Consul	ting
			1
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29-1066.00	6.00	1,820.00	\$207,554.75
1 14 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.00	0.00	##### \$ 9.00
<u> </u>	0.00	0.00	\$0.00
1988 tal. 1 (4.6 × 10.1)	0.00	0.00	\$0.00
State Control of the State Con	0.00	0.00	. 44.4 \$0.00
	0.00	0.00	\$0.00
realization for the second second	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Carlo Car	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	6.00	1,820.00	\$207,554.75
Grand Total	6.00	1,820	\$207,554.75
Name of person who prepared this re Title: Practice Plan Administrator Preparer's Signature:			315-464-3119

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SU Contract Number: C 505749 Contract Term: 6/1/2021 to 5/31/2 Contractor Name: Psychiatry Faculty Contractor Address: 719 Harrison Str Description of Services Being Provide	4 Practice, Inc. eet, Syracuse, I ed: Medical Dire	Agency Business Ur Agency Department NY 13210	
Scope of Contract (Choose one that be Analysis Evaluation Res	search 🔲 Tra	ining	
☐ Data Processing ☐ Computer Pro	• •	Other IT consulting	
		g Environmental	Services
Health Services Mental Health		Charles Canada	**************************************
Accounting Auditing Pa	ralegal		T 31 22
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29-1066.00	6.00	1,560.00	294,427,23
the state of the s	0.00	0.00	4\$0.00
	0.00	0.00	\$0.00
Kara da had	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
1,18 April 118	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	6.00	1,560.00	\$294,427.23
Grand Total	6.00	1,560	\$294,427.23
Name of person who prepared this retitle: Practice Manager Preparer's Signature: Olive W Date Prepared: 05/11/2023			315-464-3119

New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Suny Upstate Medical University

Contract Number: C-505773

Agency Business Unit: 28110

Contract Term: 07/01/2021 to 06/30/2022

Agency Department ID: 34132236

Contractor Name: Upstate Orthopedics, LLP

Contractor Address: 6620 Fly Road, Ste 200 East Syracuse, NY 13057

Description of Services Being Provided: MSG Physician Service Agreement Rajin Shahriar,

MD Orthopedic Surgery

Scope of Contract (Choose one that best fits):						
🔲 Analysis 🔲 Evaluation 🔲 Re	search 🔲 Tra	ining				
☐ Data Processing ☐ Computer Pr	ogramming 🗀	Other IT consulting				
☐ Engineering ☐ Architect Service	s 🔲 Surveying	Environmental	Services			
☑ Health Services ☐ Mental Health	Services					
☐ Accounting ☐ Auditing ☐ Pa	aralegal 🔲 Leç	gal 🔲 Other Consul	ting			
	Number of	Number of	Amount Payable			
Employment Category	Employees	Hours Worked	Under the Contract			
Physician	0.00	0.00	\$0.00			
29-1242.00	1.00	520.00	\$128,403.51			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
,	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
0.00 0.00 \$0.00						
Total this Page	1.00	520.00	\$128,403.51			
Grand Total 0.00 520.00 \$128,403.51						
			1			

Name of person who prepared this report: Cynthia Morris

Title: Accountant

Phone #: 315-464-8197

Preparer's Signature:

Date Prepared: 05/03/2023

(Use additional pages, if necessary)

Page 1 of 1

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Contract Number: C-505794 Contract Term: 07/01/2021 to 06/3 Contractor Name: Psychiatry Faculty Contractor Address: 719 Harrison Str Description of Services Being Provide	Practice, Inc. reet, Syracuse, Ned: Psychiatric (Agency Business Ur Agency Department New York 13210	ID: 28110
		ning	
☐ Data Processing ☐ Computer Pro☐ Engineering ☐ Architect Services		Other IT consulting Environmental	Services
☐ Health Services ☐ Mental Health		El Elivioliniental	
	ralegal	al Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29.1066.00	1.00	728.00	\$129,664.50
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	728.00	\$129,664.50
Grand Total	1.00	728	\$129,664.50
Name of person who prepared this report: Alice Miranda Title: Practice Plan Administrator Preparer's Signature: Olive Muco			

Page 1 of 1

Date Prepared: 05/11/2023

New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Suny Upstate Medical University

Contract Number: C-505797

Agency Business Unit: 28110

Contract Term: 01/01/2022 to 12/31/2026

Agency Department ID: 34162536

Contractor Name: Upstate Orthopedics, LLP

Contractor Address: 6620 Fly Road, Ste 200 East Syracuse, NY 13057

Description of Services Being Provided: Orthopedic Trauma On Call for Community Hospital

Scope of Contract (Choose one that b	est fits):				
☐ Analysis ☐ Evaluation ☐ Research ☐ Training					
🔲 Data Processing 🔲 Computer Pro	ogramming 🔲	Other IT consulting			
☐ Engineering ☐ Architect Services	Surveying	Environmental	Services		
	Services				
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	jai 🔲 Other Consul	ting		
Employment Category	Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract				
	0.00	0.00	\$0.00		
29-1242.00 Trauma Coverage	1.00	8,760.00	\$365,000.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
0.00 0.00 \$0.00					
Total this Page 1.00 8,760.00 \$365,000.00					
Grand Total	1.00	2,160	\$365,000.00		

Name of person who prepared	this report:	Cynthia Morris
-----------------------------	--------------	----------------

Title: Accountant

Phone #: 315-464-8197

Preparer's Signature:

Date Prepared: 05/03/2023

AC 3272-S (Effective 4/12)

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Suny Upstate Medical University

Contract Number: C-505797

Agency Business Unit: 28110

Contract Term: 01/01/2022 to 12/31/2026

Agency Department ID: 34132236

Contractor Name: Upstate Orthopedics, LLP

Contractor Address: 6620 Fly Road, Ste 200 East Syracuse, NY 13057

Description of Services Being Provided: Orthopedic Trauma On Call, Spinal Trauma On Call

and Pedicatri Orthopedic Trauma On Call Coverage for University Hospital

Scope of Contract (Choose one that best fits):				
☐ Analysis ☐ Evaluation ☐ Research ☐ Training				
☐ Data Processing ☐ Computer Pro	ogramming 🔲	Other IT consulting		
☐ Engineering ☐ Architect Services	Surveying	Environmental	Services	
	Services			
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting	
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract				
	0.00	0.00	\$0.00	
29-1242.00 Trauma Coverage	1.00	8,760.00	\$438,000.00	
29-1242.00 Spine Coverage 1.00 8,760.00 \$100,000.0				
29-1243.00 - Pediatric Coverage	1.00	1.00 8,760.00 \$182,500.0		
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	3.00	26,280.00	\$720,500.00	
Grand Total	3.00	6,480	\$720,500.00	

Name of person who prepared this report: Cynthia Morris

Title: Accountant

Phone #: 315-464-8197

Preparer's Signature:

Date Prepared: 05/03/2023

(Use additional pages, if necessary)

Page 1 of 1

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110				
Contract Number: C-505810				
Contract Term: <u>11/11/2021</u> to				
Contractor Name: First Choice Staffin			· · · · · · · · · · · · · · · · · · ·	
Contractor Address: 7525 Morgan Ro				
Description of Services Being Provide		r SUNY Standardized P	atient Program and	
ATLS Program				
·				
Scope of Contract (Choose one that			=	
Analysis Evaluati			Training [
Data Processing	Computer Programm		IT consulting	
Engineering Architect Serv		ving Enviror	mental Services	
Accounting Auditing			Other Consulting 🖂	
	i didiogai 🔝	Legal	outer consuming [2]	
Employment Category	Number of	Number of Hours	Amount Payable	
	Employees	Worked	Under the Contract	
Education, Adminstrators, All				
others	4	21	\$2,690.80	
Education, training, & Library	00	11.600	0057.051.50	
workers, All others milage	89 5	11,628 330	\$257,351.59	
mnage	3	330	\$2,599.52	
Tractation	*			
Total this page		11.070	026264101	
Grand Total	98	11,979	\$262,641.91	
Name of person who prepared this rep	ort: Karen Nabinger			
Preparer's Signature:				
Title: Supervisor Phone #: 315-453-5533				
Date Prepared: <u>05/01/2023</u>				

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, to March 31,				
Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: Contract Term: to Contractor Name: Contractor Address: Description of Services Being Provided				
Scope of Contract (Choose one that best fits): Analysis				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Total this page Grand Total				
Name of person who prepared this report: Preparer's Signature: Manual Total				
Title: Date Prepared: Use additional pages if necessary)	8	Phone #:	Page of	
ose additional pages if necessary)			1 450 01	

Area: Mail/Send Date:

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University Contract Number: C 505925 Agency Business Unit: Contract Term: 9/1/2021 to 6/30/2022 Agency Department ID: 28110 Contractor Name: Psychiatry Faculty Practice, Inc. Contractor Address: 719 Harrison Street, Syracuse, NY 13210 Description of Services Being Provided: Adolescent Psychiatric Hospitalist Services Scope of Contract (Choose one that best fits):				
Analysis Evaluation Re	search 🔲 Trai	ning	The second secon	
Data Processing Computer Pr	ogramming 🔝 🔲	Other IT consulting	4	
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services	
☐ Health Services ☐ Mental Health				
	ralegal 🔲 Leg	al Other Consul	ting	
	Number of	Number of	Amount Payable	
Employment Category	Employees	Hours Worked	Under the Contract	
Psychiatrist - 29-1066.00	1.00	1,473.00	\$244,424.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Harris Andrews Comment	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	1.00	1,473.00	\$244,424.00	
Grand Total	1.00	1,473	\$244,424.00	
Name of person who prepared this report: Alice Miranda Title: Practice Manager Preparer's Signature: Date Prepared: 05/11/2023				

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University				
Contract Number: C 506016 Agency Business Unit:				
Contract Term: 01/01/2022 to 12/31/2024 Agency Department ID: 28110				
Contractor Name: Psychiatry Faculty				
Contractor Address: 719 Harrison Str		NY 13210	A	
Description of Services Being Provide			vices	
Scope of Contract (Choose one that b				
		ining		
☐ Data Processing ☐ Computer Pro		Other IT consulting		
Engineering Architect Services	•	☐ Environmental S	Services	
☐ Health Services ☐ Mental Health				
Accounting Auditing Pa	ralegal Leg	gal Other Consult	ting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Nurse Practitioner - 29-1171.00	1.00	2,600.00	\$189,634.50	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Terfacilities and the second	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	1.00	2,600.00	\$189,634.50	
Grand Total	1.00	2,600	\$189,634.50	
Name of person who prepared this report: Alice Miranda Title: Practice Manager Preparer's Signature: Date Prepared: 05/12/2023 Phone #: 315-464-3119				

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Suny Upstate Medical University			
Contract Number: C-506085	Agency Business Unit: 28110		
Contract Term: 04/01/2022 to 03/31/2025	Agency Department ID: 34132236		

Contractor Name: Upstate Orthopedics, LLP

Contractor Address: 6620 Fly Road, Ste 200 East Syracuse, NY 13057

Description of Services Being Provided: MSG Physician Service Agreement Allyson M

Zakzrewski, MD Orthopedic Surgery

Scope of Contract (Choose one that b	est fits):			
☐ Analysis ☐ Evaluation ☐ Research ☐ Training				
☐ Data Processing ☐ Computer Pro	ogramming [Other IT consulting		
☐ Engineering ☐ Architect Services	s ☐ Surveying	☐ Environmental	Services	
	Services			
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal	ting	
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract				
Physician	0.00	0.00	\$0.00	
29-1242.00	1.00	2,080.00	\$547,370.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
0.00 0.00 \$0.0				
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
0.00 0.00 \$0.00				
Total this Page	1.00	2,080.00	\$547,370.00	
Grand Total	0.00	2,080	\$547,370.00	

Name of person who prepared this report: Cynthia
--

Title: Accountant () Phone #: 315-464-8197

Preparer's Signature: _______

Date Prepared: 05/03/2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University Contract Number: C 506138 Agency Business Unit: Contract Term: 7/1/2022 to 6/30/25 Agency Department ID: 28110 Contractor Name: Psychiatry Faculty Practice, Inc. Contractor Address: 719 Harrison Street, Syracuse, NY 13210 Description of Services Being Provided: AMedical Direction - Inpatient Adolescent Unit at				
Hutchings				
Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing Computer Programming Other IT consulting Engineering Architect Services Surveying Environmental Services				
☐ Health Services ☐ Mental Health	Services			
		gal	ina	
Accounting Auditing Pa	ralegal Leg		.!!! 9	
Employment Category	Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract			
Psychiatrist - 29-1066.00	1.00	312.00	\$54,425.25	
	0.00	0.00	\$0.00	
·	0.00	0.00	\$0.00	
1.3.1	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	1.00	312.00	\$54,425.25	
Grand Total	1.00	312	\$54,425.25	
Name of person who prepared this report: Alice Miranda Title: Practice Manager Phone #: 315-464-3119				

Preparer's Signature: Olive Mud

Date Prepared: 05/11/2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University Contract Number: C 506139 Agency Business Unit: Contract Term: 4/1/2022 to 7/31/2022 Agency Department ID: 28110 Contractor Name: Psychiatry Faculty Practice, Inc. Contractor Address: 719 Harrison Street, Syracuse, NY 13210 Description of Services Being Provided: Adolescent Psychiatric Hospitalist Services				
Scope of Contract (Choose one that b			State of the second	
☐ Analysis ☐ Evaluation ☐ Res		ining		
☐ Data Processing ☐ Computer Pro	ogramming [Other IT consulting		
☐ Engineering ☐ Architect Services	Surveying	Environmental	Services	
☐ Health Services ☐ Mental Health	Services			
Accounting Auditing Pa	ralegal 🔲 Leg	gal	ting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Psychiatrist - 29-1066.00	1.00	208.00	\$27,995.33	
Service Control of the Control of th	0.00	0.00	\$ 17.7\$0.00	
and the state of t	0.00	0.00	\$0.00	
ALIGNATURE SERVICE	. 0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
g Grant Const.	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	1.00	208.00	\$27,995.33	
Grand Total	1.00	208	\$27,995.33	
Name of person who prepared this report: Alice Miranda Title: Practice Manager Preparer's Signature: Date Prepared: 05/11/2023 Prepared: 05/11/2023				

FORM B

OSC	Use	On	ly:

Reporting Code: Category Code:

State Consultant Services			
	tor's Annual Employ		
Report Per	iod: April 1, 2022 to	March 31, 2023	
Contracting State Agency Name: SUN Contract Number: C-506143 Contract Term: 6/1/2022 to 5/31/202 Contractor Name: Upstate University Metals	, . <u>7</u>		Code: 28110
Contractor Address: 750 E. Adams Stree	et, Syracuse, NY 13210	•	
Description of Services Being Provide	d Staff leasing of health	service professionals	
Scope of Contract (Choose one that best fits): Analysis			
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
31-9092.00 Medical Assistants	, 0	0	
43-6013.00 Medical Sec & Admin Asst	. 0	,0	\$ 0
		•	
			•
Total this page	0	0	\$ 0
Grand Total	. 0	0	\$ 0
Name of person who prepared this report: Christine C. Sauve Preparer's Signature: Dayle Title: Sr. Administrative Coordinator Phone #: (315) 464-6853			
Title. St. Nathinistative coordinates			
Date Prepared: <u>5/12/2023</u>			
Use additional pages if necessary) Page 1 of 1			

Area: Phys Med & Rehab

Mail/Send Date: 5/12/2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: The State University of New York				
Contract Number: C-506197 Agency Business Unit: SNY01				
Contract Term: 10/01/2022 to 9/3	0/2025	Agency Department	ID: 3320211	
Contractor Name: Mayo Clinic Labor	atories			
Contractor Address: 3050 Superior D	rive NW, Roche	ester, MN 55905		
Description of Services Being Provide	ed: Reference 1	Festing Services	•	
Scope of Contract (Choose one that b	·	inina		
	- 	ining		
Data Processing Computer Pro		Other IT consulting	Oi	
Engineering Architect Services	, , ,	g	Services	
☐ Health Services ☐ Mental Health				
Accounting Auditing Pa	ralegal	gal	ting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Medical and Clinical Laboratory	0.34	351.90	\$455931.70	
Technologists (29-2011.00)	0.00	0.00		
	0.00	0.00	\$0.00 \$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	0.34	0.00	\$455,931.70	
Grand Total	0.34	351.90	\$455,931.70	

Name of person who prepared this report: Steven J. Kruisselbrink

Title: Sr. Director, Operations

Preparer's Signature: Sm J. Malle

Date Prepared: 5/8/2023

Phone #: 507-266-5700

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University Contract Number: C506200 Agency Business Unit: Contract Term: 07/01/2022 to 03/31/2023 Agency Department ID: 28110 Contractor Name: Psychiatry Faculty Practice, Inc. Contractor Address: 719 Harrison Street, Syracuse, NY 13210 Description of Services Being Provided: Psychiatric Hospitalists Services Scope of Contract (Choose one that best fits): Analysis			
Accounting Auditing Pa	ralegal Leg	gal Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29-1066.00	6.00	5,772.00	\$1,092,385.50
1 -	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
en e in a segui	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	, 0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	6.00	5,772.00	\$1,092,385.50
Grand Total	6.00	5,772	\$1,092,385.50
Name of person who prepared this report: Alice Miranda Title: Practice Plan Administrator Preparer's Signature: Olice WWW Preparer's Signature:			

(Use additional pages, if necessary)

Date Prepared: 5/11/2023

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services				
Contractor's Annual Employment Report				
Report Peri	od: April 1, 2022 to	March 31, 2023		
Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: C-506304 Contract Term: 10/1/2022 to 9/30/2027 Contractor Name: Upstate University Medical Associates at Syracuse Inc. Contractor Address: 750 E. Adams Street, Syracuse, NY 13210 Description of Services Being Provided Staff leasing of health service professionals				
Scope of Contract (Choose one that best fits): Analysis				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
46.6013.00 Medical Sec & Admin Asst 0 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$				
Total this page Grand Total	0	0	\$ O	
Name of person who prepared this report Preparer's Signature: Title: Sr. Administrative Coordinator Date Prepared: 5/12/2023 Use additional pages if necessary)	ort: Christine C. Sauv	7) 464-6853 Page 1 of 1	

Area: Patient Access Services

Mail/Send Date: 5/12/2023

O	SC Use Only:	
Re	eporting Code:	
Ca	ategory Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 22 to March 31, 23				
Contracting State Agency Name: SUR Contract Number: C-506321 Contract Term: 1/1/2023 to Contractor Name: Physical Medicine Contractor Address: 750 East Adams Description of Services Being Provide	12/31/27 and Rehabilitation MS Street, Syracuse, New	SG, LLP		
Scope of Contract (Choose one that best fits): Analysis				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Total this page	5	988	\$182,931.00	
Total this page Grand Total			\$182931	
Name of person who prepared this rep Preparer's Signature: Title: Business Manager Date Prepared: 05/05/2023 Use additional pages if necessary)	ort: <u>Christopher L. L</u>	_alone Phone #: <u>315-464-</u>		

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Suny Upstate Medical University				
Contract Number: C-600963 Agency Business Unit: 28110				
Contract Term: 09/01/2020 to 08/31/2025 Agency Department ID: 34132236				
Contractor Name: Upstate Orthopedi		, igono, zoponanion		
Contractor Address: 6620 Fly Road,		racuse. NY 13057		
Description of Services Being Provide			for Orthopedics	
` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `				
Scope of Contract (Choose one that b	est fits):			
☐ Analysis ☐ Evaluation ☐ Re		ining		
☐ Data Processing ☐ Computer Pro		Other IT consulting		
Engineering Architect Services		Environmental	Services	
☐ Health Services ☐ Mental Health		_		
☐ Accounting ☐ Auditing ☐ Pa	ralegal Leg	gal	ting	
	Number of	Number of	Amount Payable	
Employment Category	Employees	Hours Worked	Under the Contract	
11-9111.00/29-1242.00	1.00	48.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	1.00	48.00	\$ 0.00	
Grand Total	1.00	48	\$0.00	
Name of person who prepared this report: Cynthia Morris Title: Accountant Preparer's Signature: Date Prepared: 05/03/2023 Prepared: 05/03/2023				

FORM B

OSC Use Only:	-
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110			
Contract Number: CM03681 Contract Term: October 21, 2020	to Ootobou 20	2025	
		, 2023	:
Contractor Name: Hogan Lovells US Contractor Address: 555 13th Street N	W Washington DC 2	20004	
Description of Services Being Provide			
Description of Services Being Provide	d Legal Services		
		· · · · · · · · · · · · · · · · · · ·	
Scope of Contract (Choose one that	best fits):		
Analysis Evaluation		rch 🗌	Training 🗌
	Computer Programmi		IT consulting
Engineering Architect Serv			nmental Services
Health Services		alth Services	
Accounting Auditing	Paralegal	Legal 🔯	Other Consulting 🔲
			<u> </u>
Employment Catagory	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
23-2011.0 Partners	12	377	\$336,016.92
23-2011.0 Sr. Associates	9	408	\$274,625.11
23-2011.0 Associates	11	288	\$148,806.71
23-2911.0 Paralegals	8	253	\$154,101.49
		•	
		·	
•			:
		•	
Total this page			
Grand Total	40	1,326	\$913,550.23
Name of person who prepared this rep	ort: Jeffrev G. Schn	eider	
Preparer's Signature:	-		
• • •			_
Title: Partner		Phone #: <u>212-918-</u>	3503
Date Prepared: <u>5//04/2023</u>			•
Use additional pages if necessary)			Page 1 of 1

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Upstate Medical University				
Contract Number: NC 057594C Agency Business Unit:				
Contract Term: 11/28/2022 to / / Agency Department ID: 28110		The same of the sa		
Contractor Name: HOLT Architects, PC				
Contractor Address: 619 W State Street Ithaca NY 14850				
Description of Services Being Provided: Adult Ed Triaage Code				
2000, prioritorio de consessione de la consession		•		
Scope of Contract (Choose one that b				
	search 🔲 Trai	•		
Data Processing Computer Pro		Other IT consulting		
Engineering Architect Services		☐ Environmental	Services	
Health Services Mental Health				
Accounting Auditing Pa	ralegal 🔲 Leg	al	ting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
11-9041.00	1.00	4.50	\$612.95	
N/A	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0,00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	1.00	4.50	\$ 612.95	
Grand Total	1.00	4	\$612.92	

Name of person who prepared this report: Allison Iv. Short

Title: Business Manager | Preparer's Signature: _

Phone #: 607-273-7600 Ext 155

Date Prepared: 5//5//2023

New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Up	state Medical Un	iversity	
Contract Number: PO 051800B	DB Agency Business Unit: N/A		
Contract Term: 4/07/2022 to /	1	Agency Department	ID: 28110
Contractor Name: HOLT Architects, I	PC		
Contractor Address: 619 W State Str	eet Ithaca NY 1	4850	
Description of Services Being Provid	ed: Neuro		
Scope of Contract (Choose one that b		tala a	
		ining	
☐ Data Processing ☐ Computer Pr	0	Other IT consulting	Candaaa
☐ Engineering ☐ Architect Services		⊠ Environmental	Services
Health Services Mental Health		l Dothan Camard	4:
Accounting Auditing Pa	ralegal 🔲 Leg	al Other Consul	ung
	Number of	Number of	Amount Payable
Employment Category	Employees	Hours Worked	Under the Contract
17-3011.00	2.00	31.50	\$2,376.09
17-2141.00	2.00	19.00	\$2,301.50
17-2071.00	1.00	9.00	\$1,368.00
43-9199.00	3.00	8.00	\$906.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	8.00	67.50	\$6,951.59
Grand Total	8.00	67	\$6,951.59
	THE RESERVE THE PROPERTY OF THE PARTY OF THE		

Name of person who prepared this repo	OIT.	Amson	L 2nort
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Title: Business Manager

Preparer's Signature:

Phone #: 607-273-7600 Ext.155

Date Prepared: 5//4/2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

	the second secon		
Contracting State Agency Name: Up	state Medical Un	iversity	
Contract Number: PO 056255 Agency Business Unit:		nit:	
Contract Term: 4/14/2021 to / / Agency Department ID: 28		ID: 28110	
Contractor Name: HOLT Architects, I	PC	•	
Contractor Address: 619 W State Str	eet Ithaca NY 1	4850	
Description of Services Being Provide	ed: Prisoner Un	it Room	
Scope of Contract (Choose one that b		turturu.	
		ining	
Data Processing Computer Pro	· · ·	Other IT consulting	Camilaga
☐ Engineering ☐ Architect Services		☐ Environmental	Services
Health Services Mental Health		Consul	4: m m
Accounting Auditing Pa	ıralegal 🔲 Leg	gal Other Consul	ting
	Number of	Number of	Amount Payable Under the Contract
Employment Category	Employees	Hours Worked	
17-3011.00	1.00	65.50	\$6,402.76
17-2141.00	2.00	26.25	\$3,535.25
17-2071.00	1.00	7.00	\$1,064.00
43-9199.00	1.00	14.25	\$1,125.75
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	5.00	113.00	\$12,127.76
Grand Total	5.00	113	\$12,127.76

Name of person who prepared this report: Allison L. Short

Title: Business Manager
Preparer's Signature:

Date Prepared: 5//5//2023

Phone #: 607-273-7600 Ext 155

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Upstate Medical University Contract Number: PO 056259 Agency Business Unit: Contract Term: 4/16/2021 to / / Agency Department ID: 28110 Contractor Name: HOLT Architects, PC				
Contractor Address: 619 W State Street Ithaca NY 14850 Description of Services Being Provided: 3 West UH Storage Study				
Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing Computer Programming Other IT consulting Engineering Architect Services Surveying Environmental Services Health Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
17-3011.00	2.00	22.50	\$1,958.90	
17-2141.00	3.00	12.50	\$2,180.00	
	0.00	0.00	\$0.00	
- A-	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Tatal this Dans			\$0.00	
Total this Page	5.00	35.00	\$4,138.90	
Grand Total 5.00 35 4138.90				

Name of person who prepared	d this report: Allisom)	Shor
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Title: Business Manager Preparer's Signature:

Date Prepared: 5//19/2023

Phone #: 607-273-7600 Ext 155

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Up	state Medical Un	niversity	4 4 5 7
Contract Number: PO 057091C		Agency Business Ur	nit:
Contract Term: 07/19/2022 to /	1	Agency Department	ID: 28110
Contractor Name: HOLT Architects, I	PC		
Contractor Address: 619 W State Str	eet Ithaca NY 1	4850	1 7 7-4
Description of Services Being Provid	ed: SLC Daycar	е	gis to
Scope of Contract (Choose one that b		::	
	search 🔲 Tra	•	
Data Processing Computer Pr			Comicos
☐ Engineering ☐ Architect Services		☐ Environmental	oervices
Health Services Mental Health		□ 0# - 0 0 0 mm.	Co. a
Accounting Auditing Pa	ıralegal 🔲 Leç	gal	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
11-1011.00	1.00	10.50	\$2,375.92
11-9041.00	1.00	55.00	\$6,974.75
17-3011.00	2.00	32.25	\$2,978.11
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	4.00	97.75	\$12,328.78
Grand Total	4.00	97	\$12,328.78

Name of person who prepared this report: Allisøn L. Short

Title: Business Manager Preparer's Signature:

Phone #: 607-273-7600 Ext 155

Date Prepared: 5//5//2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Upstate Medical University				
Contract Number: PO 057197				
Agency Business Unit:				
Contract Term: 8/6/2021 to / /		Agency Department	ID: 28110	
Contractor Name: HOLT Architects, PC				
Contractor Address: 619 W State Str				
Description of Services Being Provide	ed: Adult Behav	ior Door		
Scope of Contract (Choose one that b	est fits):			
	search	ining		
☐ Data Processing ☐ Computer Pro	ogramming 🔲	Other IT consulting		
☐ Engineering ☐ Architect Services		☐ Environmental	Services	
☐ Health Services ☐ Mental Health	Services			
Accounting Auditing Pa	ıralegal 🔲 Leg	gal	ting	
	Number of	Number of	Amount Payable	
Employment Category	Employees	Hours Worked	Under the Contract	
11-9041.00	1.00	17.00	\$1,915.27	
13-1051.00	1.00	1.50	\$145.68	
17-2071.00	3.00	13.00	\$1,949.00	
43-9199.00	3.00	10.50	\$692.50	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0:00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	8.00	42.00	\$4,702.45	
Grand Total	8.00	42	\$4,702.45	
	-			

Name of person who prepared this report: Allison L. Short

Title: Business Manager Preparer's Signature:

Date Prepared: 5//5//2023

Phone #: 607-273-7600 Ext 155

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Upstate Medical University Contract Number: PO 057203C Agency Business Unit: Contract Term: 08/19/2022 to / / Agency Department ID: 28110 Contractor Name: HOLT Architects, PC Contractor Address: 619 W State Street Ithaca NY 14850 Description of Services Being Provided: 3W Study				
Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing Computer Programming Other IT consulting Engineering Architect Services Surveying Environmental Services Health Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting				
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract				
11-1011.00	1.00	4.50	\$1,093.59	
17-3011.00	2.00	89.50	\$8,758.65	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	3.00	94.00	\$9,852.24	
Grand Total	3.00	94	\$9,852.24	

Name of person who prepared this report: Allison L. Short

Title: Business Manager Preparer's Signature:

Phone #: 607-273-7600 Ext 155

Date Prepared: 5//5//2023

New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Up:	חוו וכאואפועו בזכזם			
Contracting State Agency Name: Upstate Medical University				
Contract Number: PO057484C Agency Business Unit:				
Contract Term: 10/05/2022 to / / Agency Department ID: 28110				
Contractor Name: HOLT Architects, PC				
Contractor Address: 619 W State Street Ithaca NY 14850				
Description of Services Being Provide	ed: Jacobsen C	arpet		
Scope of Contract (Choose one that b	ant fital:		,	
•		ining		
Data Processing Computer Pro		Other IT consulting		
☐ Bata Flocessing ☐ Computer 1 to ☐ Computer	-		Services	
Health Services Mental Health			00111000	
	ralegal	al Other Consul	tina	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
11-9041.00	1.00	3.50	\$455.00	
17-3011.00	1.00	12.00	\$960.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0,00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	2.00	15.50	\$1,415.00	
Grand Total	2.00	15	\$1,415.00	

Name of person who prepared this report: Allison L. Short

Title: Business Manager Preparer's Signature:

Phone #: 607-273-7600 Ext 155

Date Prepared: 5//5//2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Upstate Medical University				
Contract Number: PO 057600B		Agency Business Ur	nit:	
Contract Term: 10/28/2021 to /	1	Agency Department	ID: 28110	
Contractor Name: HOLT Architects, PC				
Contractor Address: 619 W State Street Ithaca NY 14850				
Description of Services Being Provid	ed: Cancer Brad	chytherapy		
	4 614)			
Scope of Contract (Choose one that b		inina		
		ining		
☐ Data Processing ☐ Computer Pr		Other IT consulting Environmental	Santiaga	
☐ Engineering ☐ Architect Services ☐ Mental Health			Services	
		gal 🔲 Other Consul	tina	
Accounting Auditing Pa		Jai Other Consul		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
17-3011.00	1.00	9.00	\$834.13	
17-2141.00	2.00	14.75	\$2,466.25	
43-9199.00	1.00	0.50	\$39.50	
43-9199.00	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	4.00	24.25	\$3,339.88	
Grand Total	4.00	24	\$3,339.88	

Name of person who prepared this report: Allison L. Short

Title: Business Manager Preparer's Signature:

Phone #: 607-273-7600 Ext 155

Date Prepared: 5//5//2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

		·		
Contracting State Agency Name: Upstate Medical University				
Contract Number: PO 058438B Agency Business Unit:				
Contract Term: 4/11/2022 to / / Agency Department ID: 28110				
Contractor Name: HOLT Architects, PC				
Contractor Address: 619 W State Str	eet Ithaca NY 1	4850		
Description of Services Being Provided: SIM Center Door				
2 COUNTY OF THE STATE OF THE ST				
Scope of Contract (Choose one that b Analysis Evaluation Re		ning		
Data Processing Computer Pro		Other IT consulting		
☐ Bata Processing ☐ Computer Fine ☐ Computer	-	•	Sarvicas	
Health Services Mental Health	_ , ,		00111003	
	ralegal	al 🗌 Other Consul	tina	
Accounting Additing Life				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
17-3011.00	4.00	50.75	\$3,743.21	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	4.00	50.75	\$3,743.21	
Grand Total	4.00	50	\$3,743.21	

Name of person who prepared this report: Autson 4.	. Short
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Title: Business Manager Preparer's Signature:

Phone #: 607-273-7600 Ext 155

Date Prepared: 5//5//2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Upstate Medical University Contract Number: PO058572B Agency Business Unit:				
Contract Term: 05/18/2022 to / / Agency Department ID: 28110				
Contractor Name: HOLT Architects, PC				
Contractor Address: 619 W State Street Ithaca NY 14850				
Description of Services Being Provide				
Scope of Contract (Choose one that b			•	
		ining		
Data Processing Computer Pro		Other IT consulting		
Engineering Architect Services		☐ Environmental	Services	
Health Services Mental Health				
Accounting Auditing Pa	ralegal	gal	ting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
17-3011.00	2.00	57.50	\$5,247.50	
17-2141.00	2.00	9.75	\$1,227.00	
17-2071.00	1.00	11.50	\$1,748.00	
43-9199.00	2.00	52.25	\$609.75	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	7.00	131.00	\$8,832.25	
Grand Total	7.00	131	\$8,832.25	

Name of person who prepared this report: Allison L. Short

Title: Business Manager Preparer's Signature:

Phone #: 607-273-7600 Ext 155

Date Prepared: 5//5//2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

		· · · · · · · · · · · · · · · · · · ·			
Contracting State Agency Name: Upstate Medical University					
Contract Number: PO 956110 Agency Business Unit: N/A					
Contract Term: 3/24/2020 to / / Agency Department ID: 28110					
Contractor Name: HOLT Architects, PC					
Contractor Address: 619 W State Street Ithaca NY 14850					
Description of Services Being Provide	ed: Fast Track A	Adult Ed			
Scope of Contract (Choose one that b	•	ining			
		J			
	•	Other IT consulting Environmental	Sorvices		
⊠ Engineering			Services		
	r services Iralegal 🔲 Leg	gal 🔲 Other Consul	tina		
AccountingAuditingPa			ung		
Faraloum and Catagonia	Number of	Number of	Amount Payable Under the Contract		
Employment Category	Employees	Hours Worked			
11-1011.00	1.00	0.50	\$114.63		
11-9041.00	1.00	1.00	\$128.49		
17-3011.00	1.00	1.35	\$124.29		
13-1051.00	2.00	50.50	\$4,494.04		
17-2141.00	2.00	25.25	\$3,274.00		
17-2071.00	2.00	12.50	\$1,844.00		
43-9199.00	3.00	12.00	\$1,214.50		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
Total this Page	12.00	103.10	\$11,193.95		
Grand Total	12 00	103	\$11.193.95		

Name of person who prepared this report: Allison L. Short

Title: Business Manager
Preparer's Signature:

Phone #: 607-273-7600 Ext 155

Date Prepared: 5//5//2023

New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Upstate Medical University				
Contract Number: PO 956139		Agency Business Ur	nit:	
Contract Term: 5//07/2020 to /	1	Agency Department	ID: 28110	
Contractor Name: HOLT Architects, I	PC			
Contractor Address: 619 W State Street Ithaca NY 14850				
Description of Services Being Provided: UMU Phase 4 Lobby Reno				
			¥ .	
Scope of Contract (Choose one that b	•	• • • • •		
		ining		
☐ Data Processing ☐ Computer Pro		Other IT consulting	O-mil	
☐ Engineering ☐ Architect Services		Environmental	Services	
Health Services Mental Health		ral Débas Canavi	tina	
Accounting Auditing Pa	ralegal	gal	ung	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
17-3011.00	2.00	34.00	\$2,470.20	
17-3011.00 17-2141.00	2.00	34.00 64.25	\$2,470.20 \$7,879.00	
17-2141.00	2.00	64.25	\$7,879.00	
17-2141.00 17-2071.00	2.00 1.00	64.25 31.00	\$7,879.00 \$4,712.00	
17-2141.00 17-2071.00	2.00 1.00 3.00	64.25 31.00 16.00	\$7,879.00 \$4,712.00 \$1,380.00	
17-2141.00 17-2071.00	2.00 1.00 3.00 0.00	64.25 31.00 16.00 0.00	\$7,879.00 \$4,712.00 \$1,380.00 \$0.00	
17-2141.00 17-2071.00	2.00 1.00 3.00 0.00 0.00	64.25 31.00 16.00 0.00 0.00	\$7,879.00 \$4,712.00 \$1,380.00 \$0.00	
17-2141.00 17-2071.00	2.00 1.00 3.00 0.00 0.00	64.25 31.00 16.00 0.00 0.00	\$7,879.00 \$4,712.00 \$1,380.00 \$0.00 \$0.00 \$0.00	
17-2141.00 17-2071.00	2.00 1.00 3.00 0.00 0.00 0.00	64.25 31.00 16.00 0.00 0.00 0.00	\$7,879.00 \$4,712.00 \$1,380.00 \$0.00 \$0.00 \$0.00 \$0.00	
17-2141.00 17-2071.00	2.00 1.00 3.00 0.00 0.00 0.00 0.00	64.25 31.00 16.00 0.00 0.00 0.00 0.00	\$7,879.00 \$4,712.00 \$1,380.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
17-2141.00 17-2071.00	2.00 1.00 3.00 0.00 0.00 0.00 0.00 0.00	64.25 31.00 16.00 0.00 0.00 0.00 0.00 0.00	\$7,879.00 \$4,712.00 \$1,380.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
17-2141.00 17-2071.00	2.00 1.00 3.00 0.00 0.00 0.00 0.00 0.00	64.25 31.00 16.00 0.00 0.00 0.00 0.00 0.00 0.00	\$7,879.00 \$4,712.00 \$1,380.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
17-2141.00 17-2071.00	2.00 1.00 3.00 0.00 0.00 0.00 0.00 0.00 0	64.25 31.00 16.00 0.00 0.00 0.00 0.00 0.00 0.00	\$7,879.00 \$4,712.00 \$1,380.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	

Name of person who prepared this report: Allison L. Short

Title: Business Manager Preparer's Signature: Phone #: 607-273-7600 Ext 155

Date Prepared: 5//5//2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University					
Contract Number: T504961 Agency Business Unit:					
Contract Term: 07/01/2019 to 12/31/2022 Agency Department ID: 28110					
Contractor Name: Psychiatry Faculty Practice, Inc.					
	Contractor Address: 719 Harrison Street, Syracuse, NY 13210				
Description of Services Being Provided: Psychotherapy Training					
	4.624				
Scope of Contract (Choose one that b	and the same of th	ning	الجارية المستقد المارية المار		
, _	search Trai	=	e de la composición del composición de la composición de la composición de la composición del composición de la composición del composición de la composición de la composición del composició		
☐ Data Processing ☐ Computer Pr	-		Continue		
Engineering Architect Services		☐ Environmental	Services		
☐ Health Services ☐ Mental Health		al Other Consul	iliaan ahaan a		
Accounting Auditing Pa	ralegal Leg	al Other Consul			
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
Mental Health Social Worker - 21-	1.00	35.00	\$5,250.00		
Superior to the superior to th	0.00	0.00	SF 2\$0.00		
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	0.00	0.00	\$0.00		
EXPLOYED THE CHARLES OF LINE	0.00	0.00	\$0.00		
Elite. Proceedings	0.00	0.00.	\$0.00		
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	0.00	0.00	\$0.00		
Lee Matrice Co., 1 Co.,	0.00	0.00	\$0.00		
1 2 2 2 3 2 3 2 3 2 3 2 3 3 3 3 3 3 3 3	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
Total this Page	1.00	35.00	\$5,250.00		
Grand Total	1.00	35	\$5,250.00		
Grand Fotal	1.00		* - 1		
Name of person who prepared this report: Alice Miranda Title: Practice Manager Preparer's Signature: Phone #: 315-464-3119					

Date Prepared: 05/11/2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University					
Contract Number: T-505963		Agency Business Ur	nit:		
Contract Term: 11/29/2022 to 11/		Agency Department	ID:		
Contractor Name: First Choice Staffing					
Contractor Address: 7525 Morgan Ro	oad, Liverpool, N	NY 13090			
Description of Services Being Providence	ed: Temporary	Staffing for Materials	Expediter		
	. ,	3 ************************************			
Scope of Contract (Choose one that best fits):					
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Tra	ining			
☐ Data Processing ☐ Computer Pro	ogramming [Other IT consulting			
☐ Engineering ☐ Architect Services		-	Services		
☐ Health Services ☐ Mental Health		-			
☐ Accounting ☐ Auditing ☐ Paralegal ☐ Legal ☒ Other Consulting					
	Number of	Number of	Amount Payable		
Employment Category	Employees	Hours Worked	Under the Contract		
Laborers and Freight, Stock, and Material Movers, Hand	3.00	2,290.50	\$71,292,24		

Additing Additing	Paralegal Lec	gal 🛛 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Laborers and Freight, Stock, and Material Movers, Hand	3.00	2,290.50	\$71,292.24
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
,	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	3.00	2,290.50	\$71,292.24
Grand Total	3.00	2,290	\$71,292.24

Name of person who prepared this report: Karen Nabinger

Title: Supervisor

Phone #: 315-453-5533

Exhibit Y

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUI	NY Upstate Medical U	Jniversity Agency	Code: <u>28110</u>
Contract Number: T-505880	1 21 2022		
Contract Term: 2.1.2022 to			
Contractor Name: AMN Healthcare, Contractor Address: 12400 High Blut		A 02120	
Description of Services Being Provide			
Description of Services Being Flovide	a remporary ricarm	care Starring	
		<u>, , , , , , , , , , , , , , , , , , , </u>	
Scope of Contract (Choose one that	hest fits):		
Analysis Evaluation		rch 🗌	Training
Data Processing	Computer Programm		IT consulting
Engineering Architect Serv			nmental Services
Health Services 🖂		ealth Services	
Accounting Auditing	Paralegal	Legal 🔲	Other Consulting
		_	
Employment Cotocom	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
Registered Nurse - ICU Float	5	2,054	\$343,233.77
Registered Nurse - Psych	1	388	\$57,266.96
Registered Nurse - Tele Float	. 1	45	\$7,286.61
CT Tech	5	1,510	\$241,606.40
Echo Tech	6	2,428	\$385,137.30
EEG Tech	7	2,632	\$345,916.91
Mammography Tech	1	399	\$45,885.00
Medical Tech	2	928	\$132,767.50
Nuclear Medicine	2	926	\$123,075.30
Physical Therapist	1	499	\$41,957.37
Radiation Tech	7	2,143	\$281,140.00
Reg Respiratory Therapist	7	3,035	\$440,489.45
Speech Language Pathologist	5	2,232	\$301,442.85
Total this page	-50	21,707	2,747,905.45
Grand Total	57	23,634	\$3,063,998.65
Name of person who prepared this rep	ort: Debbie Nance		
Preparer's Signature:			_
Title: Senior Coordinator, Sales Su	pport	Phone #: 800.282.03	300
Date Prepared: <u>5/04/2023</u>	-		
Use additional pages if necessary)			Page 1 of 2

Exhibit Y

FORM B

OSC Use Only:	··· · · · · · · · · · · · · · · · · ·
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Contractor's Annual Employment Report			
Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUR Contract Number: T-505880 Contract Term: 2.1.2022 to Contractor Name: AMN Healthcare, i Contractor Address: 12400 High Bluf Description of Services Being Provide		A 92130	Code: 28110
Scope of Contract (Choose one that Analysis	on Resea Computer Programm ices Survey Mental He	ing Other ing Enviror ealth Services	Training IT consulting Imental Services Other Consulting
Employment Category	Number of	Number of Hours	Amount Payable
* · · · · · · · · · · · · · · · · · · ·	Employees	Worked	Under the Contract \$316,093.20
Ultrasound Tech	7	1,927	\$310,093.20
	~		
		——————————————————————————————————————	
		,	
Total this page	7	1927	\$316,093.20
Grand Total	57	23,634	\$3,063,998.65
Orang Total			1 +-,,
Name of person who prepared this rep-	ort: Debbie Nance		
- The state of the			
Preparer's Signature:	Maring and the second		-
Title: Senior Coordinator, Sales Support Phone #: 800.282.0300			
Date Prepared: <u>5/04/2023</u>			
Use additional pages if necessary)			Page 2 of 2

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OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services

Contractor's Annual Employment Report			
Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUN Contract Number: T-505881 AOA #1 Contract Term: 2/1/2023 to Contractor Name: Aya Healthcare Contractor Address: 5930 Cornerston Description of Services Being Provide	NY Upstate Medical U 3/31/2023 e Ct W Suite 300, San	Iniversity Agency Diego, CA 92121	
Scope of Contract (Choose one that Analysis	on Resear Computer Programm ices Survey Mental He	ing	Training IT consulting Imental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
CNA/Nurse Assistant	1	325	\$20,826.72
Laboratory	1	344	\$32,544.40
LVN/LPN	2	296	\$23,443.20
Radiology/Cardiology	1	312	\$33,777.00
Registered Nurse	82	17,785	\$2,478,899.70
Respiratory/Neuro Diagnostics	9	2,355	\$249,545.88
Surgical Services	2	343	\$20,581.20
Therapy/Rehabilitation	1	343	\$32,670.00
Total this page	99	22,106.44	\$2,892,288.10
Grand Total			
Name of person who prepared this report: Emily Hazen Preparer's Signature: Phone #: 858.263.1158			
Date Prepared: 5/4/2023			
Use additional pages if necessary)			Page of

Exhibit Y		OSC Use	Only:
Reporting Code:		g Code:	
FORM B Category Code:			Code:
	State Consultant Ser	rvices	
Contrac	ctor's Annual Employ	yment Report	
Report Per	riod: April 1, 2022 to	March 31, 2023	
Contracting State Agency Name: SUN	IY Upstate Medical U	niversity Agency	Code: 28110
Contract Number: T505882	•		
Contract Term: Feb 1, 2022 to			
Contractor Name: CEDAR PARK GR			
Contractor Address: 2 LAWSON AVE			
Description of Services Being Provide	a TEMPUKAKY ME	DICAL STAFFING	
		MA	
Analysis □ Evaluati Data Processing □ Engineering □ Architect Serv	Computer Programm	rch □ ing □ Other ying □ Enviro	Training □ IT consulting □ nmental Services □
Health Services ⊠ Accounting □ Auditing □	Mental He	alth Services □	Other Consulting
Health Services ⊠ Accounting □ Auditing □	Mental He Paralegal □ Number of	alth Services □ Legal □ Number of Hours	Other Consulting Amount Payable
Health Services ⊠ Accounting □ Auditing □ Employment Category	Mental He Paralegal □ Number of Employees	alth Services □ Legal □ Number of Hours Worked	Other Consulting Amount Payable Under the Contract
Health Services ⊠ Accounting □ Auditing □ Employment Category RESPIRATORY THERAPIST	Mental He Paralegal □ Number of Employees	alth Services □ Legal □ Number of Hours Worked 434	Other Consulting Amount Payable Under the Contract \$45,648.75
Health Services ⊠ Accounting □ Auditing □ Employment Category RESPIRATORY THERAPIST CNA	Mental He Paralegal □ Number of Employees 1 1	alth Services □ Legal □ Number of Hours Worked 434 76	Other Consulting ☐ Amount Payable Under the Contract \$45,648.75 \$4,298.00
Health Services ⊠ Accounting □ Auditing □ Employment Category RESPIRATORY THERAPIST	Mental He Paralegal □ Number of Employees	alth Services □ Legal □ Number of Hours Worked 434	Other Consulting Amount Payable Under the Contract \$45,648.75
Health Services ⊠ Accounting □ Auditing □ Employment Category RESPIRATORY THERAPIST CNA	Mental He Paralegal □ Number of Employees 1 1	alth Services □ Legal □ Number of Hours Worked 434 76	Other Consulting ☐ Amount Payable Under the Contract \$45,648.75 \$4,298.00
Health Services ⊠ Accounting □ Auditing □ Employment Category RESPIRATORY THERAPIST CNA	Mental He Paralegal □ Number of Employees 1 1	alth Services □ Legal □ Number of Hours Worked 434 76	Other Consulting ☐ Amount Payable Under the Contract \$45,648.75 \$4,298.00
Health Services ⊠ Accounting □ Auditing □ Employment Category RESPIRATORY THERAPIST CNA	Mental He Paralegal □ Number of Employees 1 1	alth Services □ Legal □ Number of Hours Worked 434 76	Other Consulting ☐ Amount Payable Under the Contract \$45,648.75 \$4,298.00
Health Services ⊠ Accounting □ Auditing □ Employment Category RESPIRATORY THERAPIST CNA	Mental He Paralegal □ Number of Employees 1 1	alth Services □ Legal □ Number of Hours Worked 434 76	Other Consulting ☐ Amount Payable Under the Contract \$45,648.75 \$4,298.00
Health Services ⊠ Accounting □ Auditing □ Employment Category RESPIRATORY THERAPIST CNA	Mental He Paralegal □ Number of Employees 1 1	alth Services □ Legal □ Number of Hours Worked 434 76	Other Consulting ☐ Amount Payable Under the Contract \$45,648.75 \$4,298.00
Health Services ⊠ Accounting □ Auditing □ Employment Category RESPIRATORY THERAPIST CNA	Mental He Paralegal □ Number of Employees 1 1	alth Services ☐ Legal ☐ Number of Hours Worked 434 76	Other Consulting ☐ Amount Payable Under the Contract \$45,648.75 \$4,298.00
Health Services ⊠ Accounting □ Auditing □ Employment Category RESPIRATORY THERAPIST CNA	Mental He Paralegal □ Number of Employees 1 1	alth Services ☐ Legal ☐ Number of Hours Worked 434 76	Other Consulting ☐ Amount Payable Under the Contract \$45,648.75 \$4,298.00
Health Services ⊠ Accounting □ Auditing □ Employment Category RESPIRATORY THERAPIST CNA	Mental He Paralegal □ Number of Employees 1 1	alth Services ☐ Legal ☐ Number of Hours Worked 434 76	Other Consulting ☐ Amount Payable Under the Contract \$45,648.75 \$4,298.00
Health Services ⊠ Accounting □ Auditing □ Employment Category RESPIRATORY THERAPIST CNA	Mental He Paralegal □ Number of Employees 1 1	alth Services ☐ Legal ☐ Number of Hours Worked 434 76	Other Consulting ☐ Amount Payable Under the Contract \$45,648.75 \$4,298.00

rame of person who propage and report.	! Carri Car
Preparer's Signature:	
Title: PRESIDENT	Phone #: 5165350613

Date Prepared: <u>05/03/2023</u>

(Use additional pages, if necessary)

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUNY Upstate Medical University			
Contract Number: T-505905		Agency Business Unit: SNY01	
Contract Term: 02/01/2022 to 01/3	31/2024	Agency Department	ID: 3320211
Contractor Name: Sunbelt Staffing Ll	_C		
Contractor Address: 501 Brooker Cre	eek Blvd, Suite A	k-400, Oldsmar FL 34	677
Description of Services Being Provide	ed: Temporary	Staffing Services	
Same of Contract (Observe and that h	ont 6:40\.		
Scope of Contract (Choose one that b Analysis Evaluation Res	·	ining	
☐ Data Processing ☐ Computer Pro		Other IT consulting	
☐ Engineering ☐ Architect Services			Services
☐ Health Services ☐ Mental Health			001 11000
	ralegal	gal 🔲 Other Consul	tina
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Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Licensed Practical Nurse	2.00	1,751.00	\$153,144.00
Radiation Therapist	1.00	336.00	\$40,521.60
Radiology Technologist	1.00	295.25	\$31,887.00
Registered Nurse - Intensive Care Unit	2.00	1,641.25	\$327,763.80
Registered Nurse - Med Surg	5.00	3,704.00	\$693,223.65
Registered Nurse - Operating Room	1.00	1,799.75	\$377,017.20
Registered Nurse - Pediatrics	1.00	163.50	\$33,844.50
Registered Nurse - Procedures	1.00	893.50	\$175,887.90
Registered Nurse - Emergency Dept	3.00	1,770.50	\$353,368.05
Respiratory Therapist	2.00	844.75	\$114,048.00
	-	,	
	r		
Total this Page	19.00	13,199.50	\$2,300,705.70
Grand Total	19.00	13,199	\$2,300,705.70
Name of person who prepared this re	port: Jena Zande	r	Professional Company
Title: Director, Contracts and Compliance	se	Phone #:	813-792-3467
Preparer's Signature:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	in the second of	The second secon
Date Prepared: 04/10/2023	7 192 W 18	\$1500 P. C. 1800	the state of the s

Page 1 of 1

Page: 2 of 3 2023-05-17 14:23:20 GMT

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From: 14435372571

Exhibit Y	,
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FORM	P
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OSC Use	Only:
Reporting	gCode:
Category	Code:

	State Consultant Se		and the state of t
Contractor's Annual Employment Report			
Report Pe	riod: April 1, ²⁰²³ t	o March 31, 2024	
Contracting State Agency Name: SUB Contract Number: T-506089 Contract Term: 4/1/23 to 3/31/24 Contractor Name: NuVasive Clinical State Contractor Address: 10275 Little Paraxe Description of Services Being Provide	ervices Monitoring, Inc. nt Pkwy, #300, Columbia.	MD 21044	Code: 28110
Scope of Contract (Choose one that	(gooding		
Analysis ☐ Evaluati Data Processing ☐	on Resea Computer Programm		Training [] IT consulting []
Engineering Architect Serv		al second	in consulting
Health Services 🗔	Constant of the Constant of th	alth Services	entrustant stud transf
Accounting Auditing	Paralegai 🗍	Legal 🗍	Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-2011 Medical and Clinical Laboratory Tech		I(X) approximately	5701880
	The state of the s	· · · · · · · · · · · · · · · · · · ·	
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		ikakuutuutututa 19-19-19-19-19-19-19-19-19-19-19-19-19-1	
Total this page			
Grand Total			
Name of person who prepared this rep	and the second of the second o		ξ
Preparer's Signature:	Order Carl Glover	ulumanianidida (a. 1 1 1 1 2 1 2 2.	
Title: Vice PRESIDENT	- ************************************	Phone #: 858-6	<u> </u>
Date Prepared: 5/14/2023			
Use additional pages if necessary)			Page of

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

			<u> </u>
Contracting State Agency Name: SL Contract Number: T506108 Contract Term: 03/01/2022 to 02/2 Contractor Name: Psychiatry Faculty Contractor Address: 719 Harrison Str Description of Services Being Provide	28/2027 Practice, Inc. eet, Syracuse, I	Agency Business Ur Agency Department NY 13210	
	4 6 :4-\.		The state of the s
Scope of Contract (Choose one that b		in in m	
Analysis Evaluation Re		ining.	راً المحالة الله المراجعة الله المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجع المراجعة المراجعة ال المراجعة المراجعة ا
Data Processing Computer Pro	• •	Other IT consulting	
Engineering Architect Services		j ∐ Environmental	Services
Health Services Mental Health			ادر المحمد ا المحمد المحمد المحم المحمد المحمد المحم
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29-1066.00	1	91.00	\$18,941.81
Clinical Psychologist - 19-3031.02	1.00	91.00	\$10,676.46
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Resource in the second	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	+ ¹ u + \$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	2.00	182.00	\$29,618.27
Grand Total	2.00	182	\$29,618.27
Name of person who prepared this re Title: Practice Manager Preparer's Signature:			315-464-3119

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SU	NY Upstate Med	lical University	
Contract Number: T-506121 Agency Business Unit: SNY01			nit: SNY01
Contract Term: 5/16/2022 to 5/15/	2023	Agency Department ID: 3320211	
Contractor Name: First Choice Staffir	ng		
Contractor Address: 7525 Morgan Ro	oad, Liverpool, N	IY 13090	
Description of Services Being Provide	ed: Temporary (Clerical, Administrativ	e and Other Support
Personnel Services Contract		•	
Scope of Contract (Choose one that b	·		
		ining	
☐ Data Processing ☐ Computer Pro	•	Other IT consulting	
☐ Engineering ☐ Architect Services	_ , ,	☐ Environmental	Services
☐ Health Services ☐ Mental Health			
☐ Accounting ☐ Auditing ☐ Pa	ralegal	al 🛛 Other Consul	ting
	Number of	Number of	Amount Payable
Employment Category	Employees	Hours Worked	Under the Contract
Medical Secretaries and Administrative Assistants	56.00	47,799.86	\$1,748,883.76
Orderlies	3.00	1,492.50	\$46,290.17
Janitors and Cleaners	1.00	253.50	\$4,401.62
Supplemental Benefits	1.00	90.75	\$783.18
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	61.00	49,636.61	\$1,800,358.73
Grand Total	-	·	
Name of person who prepared this re	port: Karen Nabi	nger	

Title: Supervisor
Preparer's Signature: Maca M

Phone #: 315-453-5533

Date Prepared: 05/01/2023

Exhibit Y		OSC Use	
FORM B		Reporting Category	
	State Consultant Ser		
Contrac	state Consultant Sei ctor's Annual Employ		
	riod: April 1, 2022 to	•	
			the man of the state of the sta
Contracting State Agency Name: SUN	IY Upstate Medical Ur	niversity Agency	Code: 28110
Contract Number: T506151			
Contract Term: Feb 1, 2022 to Contractor Name: CEDAR PARK GR	Jan 31, 2024 OUR INC		
Contractor Name: CEDAR PARK GR Contractor Address: 2 LAWSON AVE		F ROCK AWAY NV 11	51 8
Description of Services Being Provided			
	· · · · · · · · · · · · · · · · · · ·		
Scope of Contract (Choose one that I	pest fits):		
Analysis 🗆 Evaluati	on □ Resea	rch 🗆	Training
Data Processing □	Computer Programm	ing □ Other	IT consulting □
Engineering □ Architect Services □ Surveying □ Environmental Services □		nmental Services	
Health Services □		alth Services □	
Accounting □ Auditing □	Paralegal □	Legal □	Other Consulting
	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
HVAC TECH	2	1,080	\$100,527.90
			-
	, , , , , , , , , , , , , , , , , , , ,		
Total this page	2	1080	100527.90
Grand Total	2	1,080	\$100,527.90
Name of person who prepared this repo	ort: SAMANTHA TE	RLINE	
	we are seed to the telephone	,	
Preparer's Signature:		<u> </u>	-
Title: PRESIDENT		Phone #: 51653506	313

Date Prepared: <u>05/03/2023</u>

Exhibit Y		OSC Use	· Only:
		Reporting	*
FORM B		Category	
	State Consultant Se	rvices	,
Contrac	ctor's Annual Emplo	yment Report	
Report Per	iod: April 1, 2022 to	March 31, 2023	
Contracting State Agency Name: <u>SUN</u>	Y Upstate Medical U	niversity Agency	Code: 28110
Contract Number: T506283 Contract Term: Feb 1, 2022 to	Ian 31 2024		
Contractor Name: CEDAR PARK GR	•		
Contractor Address: 2 LAWSON AVE			518
Description of Services Being Provided	1 TEMPORARY STA	AFFING	
		and the second s	
<u>, , , , , , , , , , , , , , , , , , , </u>			
Scope of Contract (Choose one that b	est fits):	-	
Analysis □ Evaluatio	•	ırch □	Training □
Data Processing □	Computer Programm		IT consulting □
Engineering ☐ Architect Servi Health Services ☐	•	ying □ Environ alth Services □	nmental Services □
Accounting □ Auditing □			Other Consulting
		<u> </u>	
Employment Category	Number of	Number of Hours	Amount Payable
HVAC TECH	Employees 2	Worked 1,129	Under the Contract \$124,172.26
		<u> </u>	1 V 1 Z 1,1 / Z Z V
	, , , , , , , , , , , , , , , , , , ,		
	, , , , , , , , , , , , , , , , , , ,		
Total this page	2	1129	124172.26
Grand Total	2	1,129	\$124,172.26
Name of person who prepared this repo	ort: SAMANTHA TE	RLINE	
Preparer's Signature:			······································
Title: PRESIDENT		Phone #: 51653506	812

Date Prepared: <u>05/03/2023</u>

Exhibit Y

FORM B

OSC	Use	Only
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Reporting Code: Category Code:

State Consultant Services Contractor's Annual Employment Report

Report Per	iod: April 1, 2022 to	March 31, 2023	
	YX Y Y		Codo: 20110
Contracting State Agency Name: <u>SUN</u>	NY Upstate Medical U	niversity Agency	Code: <u>28110</u>
Contract Number: T-506380	- ft ú - minstins of the C	vocutivo Ordoro includina	ovtonsions
Contract Term: 1/4/2023 to 180 days	after expiration of the E	xecutive Orders, including	extensions
Contractor Name: Upstate University M	edical Associates at Syrac	cuse, inc.	
Contractor Address: 750 E. Adams Stree	d. Dhysisian Carrisos		
Description of Services Being Provide	aPhysician Services		
·			·
Scope of Contract (Choose one that	hest fits):		
Analysis Evaluation		rch 🗍	Training
	Computer Programmi		IT consulting
Engineering Architect Serv		~ <u>—</u>	mental Services
Health Services 🗸		alth Services	
Accounting Auditing	Paralegal 🗌		Other Consulting
	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
29.1212.00 Cardiologists			\$ 7,436,007
29.1229.00 Physicians, All Other			\$ 3,201,160
29.1249.00 Surgeons, All Other			\$ 838,587
	,		
			,
,			
	·	,	,
·			
		•	·
·			
Total this page			\$ 11,475,754
Grand Total			\$ 11,475,754
	Christian C Sau		
Name of person who prepared this rep	ort: <u>Christine C. Sauv</u>	<u>'e</u> `	
Preparer's Signature:	4 Clarke		_ ,
Title: Sr. Administrative Assistant	· C. sour C	Phone #:(31	5) 464-6853
Date Prepared: <u>5/15/2023</u>			
Use additional pages if necessary)			Page 1 of 1

Area: Emergency Funding

Mail/Send Date: 5/15/2023

Exhibit Y		OSC Use	
FORM B		Reporting Category	
	State Consultant Ser	rvices	
Contrac	ctor's Annual Emplo	yment Report	
Report Per	riod: April 1, 2022 to	March 31, 2023	
Contracting State Agency Name: SUN Contract Number: T506441 Contract Term: Feb 1, 2022 to Contractor Name: CEDAR PARK GR Contractor Address: 2 LAWSON AVE Description of Services Being Provided	Jan 31, 2024 OUP INC ENUE SUITE 11 EAS	T ROCKAWAY NY 11	
Scope of Contract (Choose one that)	nast fits).		
Analysis □ Evaluati Data Processing □ Engineering □ Architect Serv Health Services □ Accounting □ Auditing □	on □ Resea Computer Programm ices □ Survey Mental He	ving □ Environalth Services □	Training □ IT consulting □ nmental Services □ Other Consulting ⊠
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
BOILER OPERATIONS	1	174	\$16,228.98
Total this page	1	174	16228.98
Grand Total	1	174	\$16,228.98
Name of person who prepared this repo	ort: SAMANTHA TE	RLINE	
Title: PRESIDENT		Phone #: <u>51653506</u>	813

Date Prepared: <u>05/03/2023</u>

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Upstate Medical University

Contract Number: T550281 Agency Business Unit; N/A
Contract Term: 1/14/2020 to 12/31/2023 Agency Department ID: N/A

Contractor Name: HOLT Architects, PC

Contractor Address: 619 W State Street Ithaca NY 14850
Description of Services Being Provided: Hyperbaric Expansion

Scope of Contract (Choose one that be	est fits):			
☐ Analysis ☐ Evaluation ☐ Research ☐ Training				
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting				
☐ Engineering ☐ Architect Services	⊠ Engineering			
☐ Health Services ☐ Mental Health	Services			
☐ Accounting ☐ Auditing ☐ Pai	ralegal 🔲 Leg	gal	ting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
11-1011.00	1.00	23.50	\$5,412.79	
17-3011.00	2.00	500.50	\$46,315.16	
11-9041.00	1.00	9.25	\$1,081.77	
19-2041.00	2.00	24.00	\$1,129.65	
19-1011.00	1.00	4.00	\$188.28	
11-1021.00	1.00	1.00	\$47.07	
17-2071.00	1.00	15.50	\$1,903.43	
17-3013.00	1.00	1.50	\$106.39	
17-3023.00	1.00	77.00	\$6,593.52	
17-2141.00	4.00	86.25	\$11,199.62	
43-9199.00	3.00	295.00	\$34,658.54	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	18.00	1,037.50	\$108 <u>,</u> 636.22	
Grand Total	18.00	1,037	\$108,636.22	

Name of person wh	o prepared t	this report	A-Hison I	Short
-------------------	--------------	-------------	-----------	-------

Title: Business Manager
Preparer's Signature: _

Phone #: 607-273-7600 Ext.155

Date Prepared: 5//17/2023

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report	eriou: April 1, 2022 i	o March 31, 2023	
Contracting State Agency Name: SUCOntract Number: T550283 Contract Term: 03/13/2020 to Contractor Name: IBC Engineering Contractor Address: 3445 winton Planescription of Services Being Provide	INY Upstate Medical 03/31/2023 PC ace Suite 219 Rocheste	University Agenc	y Code: <u>28110</u> y (19-035)
Scope of Contract (Choose one that Analysis	ion Resea Computer Programm vices Survey Mental He	ying	Training IT consulting Immental Services Other Consulting
Employment Category 17-2141.00 Mechanical Engineer	Number of Employees 2	Number of Hours Worked 170	Amount Payable Under the Contract \$22,100.00
17-3023.00 Electrical Engineer	1	89	\$11,570.00
11-021.00 General Operations Ma 11-1011 Chief Executive	The state of the s	44	\$5,720.00
17-3013.00 Mechanical Drafter	1	12	\$2,160.00
17-3012.02 Electrical Drafter	2	74	\$6,660.00
		62	\$5,756.00
Total this page			
Grand Total	8	451	\$53,966.00
Name of person who prepared this repo	ort: Andrew J Jarosz		
Title: Associate		Phone #: <u>585-233-6</u>	834
Date Prepared: <u>5/15/2023</u>			
Use additional pages if necessary)			Page of

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: 3	30	J	ľ	١
----------------------------------	----	---	---	---

NY Upstate Medical University

Agency Code: 28110

Contract Number: T550283

Contract Term: 03/17/2020 to 03/31/2023

Contractor Name: Watts Architecture & Engineering

Contractor Address: 95 Perry Street, Suite 300, Buffalo, NY 14203

Description of Services Being Provided: (15110/1246) Family Medicine Residency (19-035)

Scope of Contract (Choose one	e that best fits):		
Analysis Evaluation Resea	arch Training		
Data Processing Computer P	rogramming Other IT consulting	1	
Engineering Architect Ser	_	nental Services	
Health Services Mental Health	1 Services	11011ta1 00141069	
Accounting Auditing Parale	egal Legal Other Consulting		
Note: Use the Tab ke	by to navigate through the table portion of the fo	orm to ensure that the formulas calculate co.	B. CALLY THE THE HE THERE IS NOT THE
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the
17-2081.00 Environmental Engieers	1		
47 0044 00 4 17 1		19.50	3,152.52
17-3011.00 Architectural and Civil Drafters	1	0.25	
		0.25	28.73
	l l	-]	
			0.00
			0.00
·			
			0
			0
			0
			0
Total this page			
Grand Total	2	19.75	3,181.25
<u> </u>	2	19.75	3 181 25

Name of person who prepared this report:	Linda Butcher			
D. a				
Preparer's Signature: Sunta Butch	iev			
Title: Sr. Project Accountant	Phone #:	(716) 206-5128		
5/9/2023		(1.10) 200 0120		
Use additional pages if necessary)			Page 1 of 1	

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

		o Hartin DI, EVEO	
Contracting State Agency Name :SU	NY Upstate Medical	University Agen	cy Code: 28110
Contract Term: 03/13/2020	02/21/2022	,	
Contract Term: 03/13/2020 to Contractor Name: Trophy Po	03/31/2023		
Contractor Address: 4588 Sc	outh Park Ave Blasde	11 NV 14210	
Description of Services Being Provid	ed (15110/1246) Far	nily Medicine Residen	cv (10-035)
			cy (17-033)
			····
Scope of Contract (Choose one that	best fits):	· · · · · · · · · · · · · · · · · · ·	
Analysis Evaluati	ion 🗌 Resea	ırch 🗌	Training [
Data Processing	Computer Programm	ing Other	r IT consulting
Engineering Architect Serv		ying Enviro	onmental Services
Accounting Auditing	Mental He Paralegal	ealth Services	04 0 11 57
3	i araicgai [_]	Legal [Other Consulting 🖂
Employment Category	Number of	Number of Hours	Amount Payable
No Work Performed	Employees	Worked	Under the Contract
No work Performed			
Total this page			No Work Performed
Grand Total		· · · · · · · · · · · · · · · · · · ·	140 WOLK FEITOFILED
Nama	_ ·		
Name of person who prepared this repo	ort: <u>Peter Trzybinski</u>	<u> </u>	
Preparer's Signature: It fight			
Title: Director of Finance		Phone #: 716-823-	_ 0006
Date Prepared: <u>5/5/2023</u>			-
Use additional pages if necessary)			Page 1 of 1

Page 1 of 1

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

		10 March 31, 2023	
Contracting State Agency Name: SL Contract Number: T550283 Contract Term: 03/13/2020 to Contractor Name: Dwyer Architectu Contractor Address: 120 E Washingt Description of Services Being Provid	NY Upstate Medical 03/31/2023 ral, LLC ton Street, Suite 822 S	vracuca NV 12202	y Code: <u>28110</u>
Scope of Contract (Choose one that Analysis	ion	ying	Training IT consulting nmental Services Other Consulting
Employment Category	Number of	Number of Hours	Amount Payable
17-1011.00 Architects, Except Landscape and Naval (Dwyer) 17-3011.01 Architectural Drafters	Employees 1	Worked 10.5	Under the Contract \$1,521.45
(Dwyer)	2	216	\$14,396.40
43-6014.00 Secretaries & Admin Assistants, Except Lega, Medical and Executive (Dwyer)	1	84.5	\$4,897.62
Total this page	3	211	# 000 017 17
Grand Total	3	311 311	\$20,815.47
Name of person who prepared this report Preparer's Signature: Title: Office Manager			\$20,815.47
Date Prepared: 05/05/2023			

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

		30 1/101 O1 , LOLO	
Contracting State Agency Name :SI	INIVII.	Y 7	·
Contracting State Agency Name: <u>SU</u> Contract Number: <u>T550294</u>	ONY Opstate Medical	University Agenc	y Code: 28110
Contract Term: 01/15/2021 to	06/24/2024		
Contractor Name: Dwyer Architectu			
Contractor Address: 120 E. Washing	ton St. Suite 822 Suna	10000 NV 12202	
Description of Services Being Provid	ed 151067/1112 2 11	HILL ID Cuite Dans d'	(10.101)
	151007/1112.2 ()	off in Suite Renovation	ns (19-101)
SCG			
Scope of Contract (Choose one that	best fits):		
Analysis Evaluat	10000	arch 🗌	Training [
Data Processing Engineering Architect Serv	Computer Programm		IT consulting
Engineering Architect Serv		ying ∐ Enviro	nmental Services
<u> </u>		ealth Services	
Accounting Auditing	Paralegal [Legal 🗌	Other Consulting 🔲
P. 1	Number of	Nol CTY	
Employment Category	Employees	Number of Hours Worked	Amount Payable
17-1011.00 Architects, Except	2mpley ces	worked	Under the Contract
Landscape and Naval (Dwyer)	1	15	\$2,173.50
17-3011.01 Architectural Drafters (Dwyer)	_		Ψ2,173.30
43-6014.00 Secretaries & Admin	1	21.50	\$1,246.14
Assistants, Except Lega, Medical			
and Executive (Dwyer)	1	23.50	f1 770 70
		23.30	\$1,770.73
Total this page	3	60	\$5,190.37
Grand Total	3	60	\$5,190.37
Name of person who many data	. 17		Ψυ,170.37
Name of person who prepared this repo	rt: Kristen Zdrojews	ski	
Preparer's Signature:	<u> </u>		
Title: Office Manager		Dhono # 505 404 4	774
		Phone #: <u>585-461-4</u>	//1
Date Prepared: <u>05/05/2023</u>			
Too additional to			

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

2000111	criou. April 1, 2022	to March 31, 2023	· · · · · · · · · · · · · · · · · · ·
Contracting State Agency Name: SU University Contract Number: T55029 Contract Term: 01/15/2021 to	06/24/2024	Agen	cy Code: <u>28110</u>
Contractor Name: Trophy Po	int, LLC		
Contractor Address: 4588 Sc	outh Park Ave, Blasde	ll, NY 14219	
Description of Services Being Provid	ed 151067/1112.2 U	UH IR Suite Renovation	ons (19-101)
Scope of Contract (Choose one that	best fits):		
Analysis	ion Resea Computer Programm vices Survey	ying Environal E	Training r IT consulting onmental Services Other Consulting
Employment Category	Number of	Number of Hours	Amount Payable
No Work Performed	Employees	Worked	Under the Contract
110 WORK 1 CHOINICU			
Total this name			
Total this page			No Work Performed
Grand Total			·
Name of person who prepared this repo	ort: <u>Peter Trzybinski</u>		
Title: Director of Finance		DI # 740 000	_
		Phone #: 716-823-0	0006
Date Prepared: <u>5/5/2023</u>			
Use additional pages if necessary)			Daga 1 of 1

OSC Use Only:	
Reporting Code:	
Category Code	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contract Name: T550294 Contract Number: T550294 Contract Term: 01/15/2021 to 06/24/2024 Contractor Name: Ravi Engineering & Land Surveying, P.C. Contractor Name: 2110 South Clinton Avenue, Suite 1, Rochester, NY 14618 Description of Services Being Provided 151067/1112.2 UUH IR Suite Renovations (19-101) Scope of Contract (Choose one that best fits): Analysis		210d. 71pin 1, 2022		
Contract Term: 01/15/2021 to 06/24/2024 Contractor Name: Ravi Engineering & Land Surveying, P.C. Contractor Address: 2110 South Clinton Avenue, Suite 1, Rochester, NY 14618 Description of Services Being Provided 151067/1112.2 UUH IR Suite Renovations (19-101)	Contracting State Agency Name :SI	NY Upstate Medical	T Inivancia.	O 1
Contract Term: 01/15/2021 to 06/24/2024 Contractor Name: Ravi Engineering & Land Surveying, P.C. Contractor Address: 2110 South Clinton Avenue, Suite 1, Rochester, NY 14618 Description of Services Being Provided 151067/1112.2 UUH IR Suite Renovations (19-101) Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Other IT consulting Engineering Architect Services Surveying Environmental Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting	Contract Number: T550294	TYT Opstate Medical	Offiversity Agenc	y Code: 28110
Contractor Name: Ravi Engineering & Land Surveying, P.C.	Contract Term: 01/15/2021 to	06/24/2024		
Contractor Address: 2110 South Clinton Avenue, Suite 1, Rochester, NY 14618	Contractor Name: Ravi Engin	eering & Land Survey	ing, P.C.	
Scope of Contract (Choose one that best fits): Analysis	Contractor Address: 2110 South	Clinton Avenue Suit	e 1 Rochester NV 1461	8
Scope of Contract (Choose one that best fits): Analysis	Description of Services Being Provide	ed 151067/1112.2 U	UH IR Suite Renovation	ne (10, 101)
Analysis Evaluation Research Training Other IT consulting Engineering Architect Services Surveying Environmental Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting Employment Category Number of Employees Worked Under the Contract 17-3019.00 Drafter 1				13 (19-101)
Analysis Evaluation Research Training Other IT consulting Engineering Architect Services Surveying Environmental Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting Employment Category Number of Employees Worked Under the Contract 17-3019.00 Drafter 1				
Analysis Evaluation Research Training Other IT consulting Engineering Architect Services Surveying Environmental Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting Employment Category Number of Employees Worked Under the Contract 17-3019.00 Drafter 1				
Analysis Evaluation Research Training Other IT consulting Engineering Architect Services Surveying Environmental Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting Employment Category Number of Employees Worked Under the Contract 17-3019.00 Drafter 1	Scope of Contract (Choose one that	host fits).		
Data Processing	Analysis Evaluati		urah [7]	.
Engineering Architect Services Surveying Environmental Services Mental Health Services Mental M	Data Processing	Computer Programm		Training
Mental Health Services Accounting Auditing Paralegal Legal Other Consulting	Engineering Architect Serv	ices Survey		II consulting [
Accounting Auditing Paralegal Legal Other Consulting Employment Category Number of Employees Worked Under the Contract 17-3019.00 Drafter 1 6 \$414.00 17-3022.00 Civil Engineer 2 48 \$3,734.28 Technician 2 48 \$3,734.28 Total this page 54 9862.44 Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070	Health Services [_]	Mental He	ealth Services	illelital Services [X]
Employment Category Number of Employees Worked 17-3019.00 Drafter 1 6 \$414.00 Technician 2 48 \$3,734.28 Total this page Grand Total Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Proparer's Signature: Proparer's Signature: Proparer's Signature: Phone #: 5857643070	Accounting Auditing			Other Consulting [
### Employees Worked Under the Contract				Other Consulting [
17-3019.00 Drafter	Employment Category		Number of Hours	Amount Pavable
1		Employees	Worked	Under the Contract
Technician 2 48 \$3,734.28 Total this page 54 9862.44 Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070		1	6	
Total this page 54 9862.44 Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070	Technician			
Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070	TOGRIFCIAN	2	48	\$3,734.28
Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070				
Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070				
Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070				
Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070				
Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070				
Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070				· · · · · · · · · · · · · · · · · · ·
Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070				
Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070				
Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070				
Grand Total 54 \$9,862.44 Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070				
Name of person who prepared this report: JoAnna Sheridan Preparer's Signature: Phone #: 5857643070	Total this page		54	9862.44
Name of person who prepared this report: <u>JoAnna Sheridan</u> Preparer's Signature: <u>Phone #: 5857643070</u>	Grand Total			
Preparer's Signature: Phone #: 5857643070	Name of person who proposed this			ΨΣ,002.44
Title: compliance officer Phone #: 5857643070	1	rt: JoAnna Sherida	<u>n</u>	
1 Hole #. <u>5657645070</u>	Preparer's Signature:			
	Title: compliance officer		Phone #: 58576430	70
	Date Prepared: 05/09/2023		<u>00070400</u>	
Use additional pages if necessary)	Use additional pages if necessary)			

OSC Use Only:	Alekston ender an
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Po	eriod: April 1, 2022	to March 31, 2023	
Contracting State Agency Name: SU Contract Number: T550294 Contract Term: 01/15/2021 to Contractor Name: IBC Engineering I Contractor Address: 3445 winton Pla Description of Services Being Provid	06/24/2024 PC ace Suite 219 Rochest	or NV 14622	ey Code: <u>28110</u> ons (19-101)
Scope of Contract (Choose one that Analysis	on Research	arch Other	Training IT consulting
Engineering Architect Serv Health Services Accounting Auditing	vices Survey Mental He	ying Enviro	nmental Services Other Consulting
Employment Category	Number of Employees	Number of Hours	Amount Payable
17-2141.00 Mechanical Engineer	2	Worked 680	Under the Contract
17-3023.00 Electrical Engineer	1	310	\$88,400.00
11-1021.00 General Operations Mg	r 1	160	\$41,524.00
11-1011 Chief Executive	1	70	\$20,800.00
17-3013.00 Mechanical Drafter	2	190	\$12,600.00
17-3012.02 Electrical Drafter	1	120	\$17,100.00 \$10,800.00
Total this page			
Grand Total	8	1.630	
Name of person who prepared this repo		1,530	\$191,224.00
Preparer's Signature:			The officer and the second sec
Title: Associate		Phone #: <u>585-233-6</u>	834
Date Prepared: <u>5/15/2023</u>			A STATE OF THE PARTY OF THE PAR
Use additional pages if necessary)			Page \of \

New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name	Upstate Medical University
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Agency Business Unit: N/A Contract Number: T550295 Agency Department ID: N/A Contract Term: 11/10/2020 to 01/9/2022

Contractor Name: HOLT Architects, PC

Contractor Address: 619 W State Street Ithaca NY 14850 Description of Services Being Provided: Flouro Room 3626

Scope of Contract (Choose one that b	est fits):				
☐ Analysis ☐ Evaluation ☐ Re	☐ Analysis ☐ Evaluation ☐ Research ☐ Training				
☐ Data Processing ☐ Computer Pr	ogramming 🗌	Other IT consulting			
⊠ Engineering	Surveying	☐ Environmental	Services		
☐ Health Services ☐ Mental Health	Services				
☐ Accounting ☐ Auditing ☐ Pa	ralegal Leg	gal . Other Consul	ting		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
17-3011.00	2.00	2.00	\$144.86		
17-2141.00	2.00	2.00	\$231.00		
43-9199.00	1.00	0.25	\$20.75		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
Total this Page	5.00	4.25	\$ 396.61		
Grand Total	5.00	4	\$396.61		

Name of person who prepared this report: Allison L Short

Title: Business Manager Preparer's Signature:

Phone #: 607-273-7600 Ext.155

Date Prepared: 5//4/2023

OSC Use Only:	
Reporting Code:	
Category Code:	•

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

		10 March 51, 2025	
Contracting State Agency Name: SU Contract Number: T550301 Contract Term: 12/18/2020 to Contractor Name: Dwyer Architectur Contractor Address: 120 E Washingt Description of Services Being Provide	03/31/2024 ral, LLC	Puse NV 12202	y Code: <u>28110</u>
Scope of Contract (Choose one that Analysis	ion Resea Computer Programm vices Survey Mental He	ying	Training IT consulting Imental Services Other Consulting
Employment Category	Number of	Number of Hours	Amount Payable
17-1011.00 Architects, Except	Employees	Worked	Under the Contract
Landscape and Naval (Dwyer)	1	24	#2 477 co
17-3011.01 Architectural Drafters			\$3,477.60
(Dwyer)	3	159	\$11,999.49
43-6014.00 Secretaries & Admin Assistants, Except Legal, Medical and Executive (Dwyer)	1	62	\$3,636.99
Total this page Grand Total	5 5	· 246 246	\$19,114.08
Name C			\$19,114.08
Name of person who prepared this repo	ort: <u>Kristen Zdrojews</u>	ski	
Preparer's Signature:	<u> </u>		
Title: Office Manager		Phone #: 585.461.47	771
Date Prepared: <u>05/05/2023</u>	-		
Use additional pages if necessary)			

Exhibit Y

FORM B

OSC Use Only:	
Reporting Code:	
Category Code	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

		o March 31, 2023	
Contracting State Agency Name :SL	INY Unstate	. A con-	C1 20110
Medical University Contract Number	ical University Contract Number: T550301 Agency Code: 28110		by Code: <u>28110</u>
Contract Term: 12/18/2020 to	03/31/2024		
Contractor Name: Trophy Po	int II C		
Contractor Address: 4588 Sc	outh Park Ave Blasde	II NY 14219	
Description of Services Being Provid	ed 1247 UCH 3 E He	emodialysis Unit (20-0	32)
		20-0	32)
G ag			
Scope of Contract (Choose one that			
Analysis Evaluati	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		Training
Data Processing	Computer Programm		IT consulting
Engineering Architect Serv	/ices ∐ Survey	ing Enviro	nmental Services
		ealth Services	
Accounting Auditing	Paralegal	Legal 🔲	Other Consulting
	N. 1 C		
Employment Category	Number of	Number of Hours	Amount Payable
No Work Performed	Employees	Worked	Under the Contract
110 WORK FEHOLINE			
Total this page			
			No Work Performed
Grand Total			
Name of person who prepared this repo	ort: Peter Trzybinski		
	ore. I eter HZybiriSKI		
Preparer's Signature: Lat fighish			_ ·
Title: Director of Finance		Phone #: 716-823-0	0006
Date Prepared: <u>5/5/2023</u>			
Use additional pages if necessary)			Page 1 of 1

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Contracting :	State Agency Name:	SUNY Upstate Medical University	Agency Code: 2811
Cantan at \$1		i i i i i i i i i i i i i i i i i i i	AGEILLY COURT AND IN

Contract Number: T550301

Contract Term: 12/18/2020 to 03/13/2022

Contractor Name: Watts Architecture & Engineering

Contractor Address: 95 Perry Street, Suite 300, Buffalo, NY 14203

Description of Services Being Provided: 1247 UCH 3 E Hemodialysis / 20-032

Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing **Computer Programming** Other IT consulting Engineering **Architect Services** Surveying **Environmental Services** Health Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting Note: Use the Tab key to navigate through the table portion of the form to ensure that the formulas calculate correctly. **Employment Category** Amount Payable Under the Number of Employees Number of Hours Worked Contract 17-2051.00 Civil Engineers 21.25 2,829.60 17-2081.00 Environmental Engineers 8.00 962.80 17-3011.00 Architectural and Civil Drafters 2.00 171.10 Total this page 31.25 3,963.50 **Grand Total**

Name of person who prepared this report:	Linda Butcher		
Preparer's Signature:	eV		
Title: Sr. Project Accountant 5/9/2023	Phone #:	(716) 206-5128	•
Use additional pages if			

Use additional pages if necessary)

3,963.50

31.25

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Cate & TyCode:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023 Contracting State Agency Name: SUNY Upstate Medical University -Agency Code: 28110 ___ Contract Number: T550301 Contract Term: 12/08/2020 _to -03/31/2024Contractor Name: IBC Engineering PC Contractor Address: 3445 winton Place Suite 219 Rochester, NY 14623 Description of Services Being Provided 1247 UCH 3 E Hemodialysis Unit (20-032)_ Scope of Contract (Choose one that best fits): Analysis Evaluation Research [Training [Data Processing Computer Programming Other IT consulting Engineering | Architect Services Surveying Environmental Services Health Services Mental Health Services Accounting Auditing [Paralegal Legal [Other Consulting Employment Calegory Number of Employees Number of Hours Amount Payable Worked Under the Contract 17-2141.00 Mechanical Engineer 220 \$28,600.00 17-3023.00 Electrical Engineer 130 \$16,900.00 11-1021.00 General Operations Mgr 1 80 \$10,400.00 11-1011 Chief Executive 1 21 \$3.854.00 17-3013.00 Mechanical Drafter 2 110 \$9,700.00 17-3012.02 Electrical Drafter 85 \$7,650.00 Total this page **Grand Total** 8 646 \$77.104.00 Name of person who prepared this report. Andrew J 12052 Preparer's Signature: Title: Associate Phone #: 585-233-6834. Date Prepared: 5/15/2023

Use additional pages if necessary)

Page \ of \

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency I	Name: Upstate	Medical University
----------------------------	---------------	--------------------

Contract Number: T-550304

Agency Business Unit: N/A

Contract Term: 1/15/2021 to 4//10/2022

Agency Department ID: N/A

Contractor Name: HOLT Architects, PC

Contractor Address: 619 W State Street Ithaca NY 14850 Description of Services Being Provided: UMU UCCCT

Scope of Contract (Choose one that b	est fits):				
☐ Analysis ☐ Evaluation ☐ Research ☐ Training					
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting					
□ Engineering □ Architect Services □ Surveying □ Environmental Services					
☐ Health Services ☐ Mental Health Services					
Accounting Auditing Pa	ralegal 🔲 Leg	al 🔲 Other Consul	ting		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
17-3011.00	2.00	3.00	\$223.57		
17-2141.00	1.00	2.25	\$265.50		
43-9199.00	1.00	0.50	\$39.50		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
Total this Page	4.00	5.75	\$ 528.57		
Grand Total	4.00	5	\$528.57		

Name of person who prepared this report: Allison L Short

Title: Business Manager
Preparer's Signature:

Phone #: 607-273-7600 Ext 155

Date Prepared: 5/11/2023

(Use additional pages, if necessary)

New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2022 to March 31, 2023

Contract Number: T550334

Agency Business Unit:

Contract Term: 06/27/2022 to 4/30/2024

Agency Department ID: 28110

Contractor Name: HOLT Architects, PC

Contractor Address: 619 W State Street Ithaca NY 14850 Description of Services Being Provided: Cardiac Cath Lab

Scope of Contract (Choose one that b	est fits):			
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Trai	ning		
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting				
☐ Health Services ☐ Mental Health	Services			
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	al Other Consul	ting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
11-1011.00	1.00	15.50	\$3,614.61	
17-3011.00	4.00	149.50	\$12,259.19	
11-9041.00	1.00	3.25	\$380.09	
13-1051.00	10.00	113.50	\$10,776.05	
17-2051.00	2.00	25.00	\$3,091.00	
17-2141.00	2.00	106.00	\$14,034.50	
17-2071.00	2.00	94.35	\$12,533.15	
43-9199.00	2.00	31.25	\$2,775.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	24.00	538.35	\$59,463.59	
Grand Total	24.00	538	\$59,463.59	

Name of person who prepared this report: Allison L. Short

Title: Business Manager

Phone #: 607-273-7600 Ext 155

Preparer's Signature:

Date Prepared: 5/17/2023

New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2022 to March 31, 2023

Contracting State A	gency Name:	Upstate	Medical	University
---------------------	-------------	---------	---------	------------

Contract Number: T550341

Agency Business Unit:

Contract Term: 09/28/2022 to 08/30/2023

Agency Department ID: 28110

Contractor Name: HOLT Architects, PC

Contractor Address: 619 W State Street Ithaca NY 14850 Description of Services Being Provided: Community POB MRI

Scope of Contract (Choose one that b	est fits):						
☐ Analysis ☐ Evaluation ☐ Research ☐ Training							
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting							
☐ Health Services ☐ Mental Health Services							
Accounting Auditing Pa	ralegal 🔲 Leg	gal	ting				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract				
11-1011.00	1.00	23.50	\$5,650.09				
11-9041.00	2.00	3.00	\$412.50				
17-3011.00	4.00	493.50	\$43,218.81				
17-2141.00	3.00	114.00	\$15,475.00				
17-2071.00	2.00	38.50	\$5,047.50				
43-9199.00	1.00	5.75	\$778.00				
17-2051.00	2.00	14.00	\$1,922.43				
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
	0.00 0.00 \$0.00						
Total this Page	15.00	692.25	\$72,504.33				
Grand Total	15.00	692	\$72,504.33				

Name of person who prepared this report: Allison L. Sh	Vame	of nerson	who r	prepared	this	report:	Allison	L. Sho
--	------	-----------	-------	----------	------	---------	---------	--------

Title: Business Manager Preparer's Signature:

Phone #: 607-273-7600 Ext 155

Date Prepared: 5/17/2023

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Up	state Medical Un	iversity	
Contract Number: T550344		Agency Business Ur	nit:
Contract Term: 11/08/2022 to 9/4	/2023	Agency Department	ID: 28110
Contractor Name: HOLT Architects,	PC		
Contractor Address: 619 W State Str	eet Ithaca NY 1	4850	
Description of Services Being Provid	ed: 6W Endovas	scular	
e e			
Scope of Contract (Choose one that b			
		ining	163
Data Processing Computer Pr			
Engineering Architect Service	_ , ,	☐ Environmental	Services
Health Services			
Accounting Auditing Pa	aralegal 🔲 Leg	gal 🔲 Other Consul	ting
	Number of	Number of	Amount Payable
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Employment Category 11-1011.00			
	Employees	Hours Worked	Under the Contract
11-1011.00	Employees 1.00	Hours Worked 4.50	Under the Contract \$1,093.59
11-1011.00 13-1051.00	1.00 1.00	Hours Worked 4.50 10.00	\$1,043.00 \$1,043.00
11-1011.00 13-1051.00 17-3011.00	1.00 1.00 3.00	Hours Worked 4.50 10.00 211.25	\$1,093.59 \$1,043.00 \$19,997.24
11-1011.00 13-1051.00 17-3011.00 17-2141.00	1.00 1.00 3.00 2.00	Hours Worked 4.50 10.00 211.25 88.50	\$1,093.59 \$1,043.00 \$19,997.24 \$12,390.00
11-1011.00 13-1051.00 17-3011.00 17-2141.00 17-2071.00	1.00 1.00 3.00 2.00 2.00	Hours Worked 4.50 10.00 211.25 88.50 121.60	\$1,093.59 \$1,043.00 \$19,997.24 \$12,390.00 \$15,199.50
11-1011.00 13-1051.00 17-3011.00 17-2141.00 17-2071.00 43-9199.00	1.00 1.00 3.00 2.00 2.00 2.00	Hours Worked 4.50 10.00 211.25 88.50 121.60 23.00	\$1,093.59 \$1,043.00 \$19,997.24 \$12,390.00 \$15,199.50 \$1,719.00
11-1011.00 13-1051.00 17-3011.00 17-2141.00 17-2071.00 43-9199.00 17-2051.00	1.00 1.00 3.00 2.00 2.00 2.00 3.00	Hours Worked 4.50 10.00 211.25 88.50 121.60 23.00 85.50	\$1,093.59 \$1,043.00 \$19,997.24 \$12,390.00 \$15,199.50 \$1,719.00 \$16,029.18
11-1011.00 13-1051.00 17-3011.00 17-2141.00 17-2071.00 43-9199.00 17-2051.00	1.00 1.00 3.00 2.00 2.00 2.00 3.00 9.00	Hours Worked 4.50 10.00 211.25 88.50 121.60 23.00 85.50 100.00	\$1,093.59 \$1,043.00 \$19,997.24 \$12,390.00 \$15,199.50 \$1,719.00 \$16,029.18 \$9,368.00
11-1011.00 13-1051.00 17-3011.00 17-2141.00 17-2071.00 43-9199.00 17-2051.00	1.00 1.00 3.00 2.00 2.00 2.00 3.00 9.00 0.00	Hours Worked 4.50 10.00 211.25 88.50 121.60 23.00 85.50 100.00 0.00	\$1,093.59 \$1,043.00 \$19,997.24 \$12,390.00 \$15,199.50 \$1,719.00 \$16,029.18 \$9,368.00 \$0.00

0.00

23.00

23.00

Name of person who prepared thi	is report:/Allison l	L. Short
---------------------------------	----------------------	----------

Title: Business Manager

Preparer's Signature:

Phone #: 607-273-7600 Ext 155

0.00

644

644.35

Date Prepared: 5//17/2023

\$0.00

\$76,839.51

\$76,839.51

Total this Page

Grand Total

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1 2022 to M.

	criou. April 1, 2022	to March 31, 2023	
Contracting State Agency Name: SI	JNY Upstate Medical	University Acces	ny Code: 20110
Contract Number: 1550348		Onversity Agenc	cy Code: 28110
Contract Term: <u>12/02/2022</u> to			
Contractor Name: Dwyer Architectu	ıral, LLC		
Contractor Address: 120 E Washing	ton St, Suite 822 Syra	cuse, NY 13202	
Description of Services Being Providence	ded #151153/1151 UI	MU ED X-Ray Room R	Replacement (22-051)
		· · · · · · · · · · · · · · · · · · ·	1 (-2 001)
Scope of Contract (Choose one tha	t best fits):		**************************************
Analysis Evaluat	. —	arch 🗍	Troinin -
Data Processing	Computer Programm		Training IT consulting
Engineering Architect Ser			nmental Services
Health Services	Mental He	ealth Services	Services
Accounting Auditing	Paralegal 🗌	Legal 🔲	Other Consulting
	T	T	
Employment Category	Number of	Number of Hours	Amount Payable
11-9041.00 Architectural and	Employees	Worked	Under the Contract
Engineering Managers (Dwyer)	1	46.5	DC 525 05
17-1011.00 Architects, Except		40.3	\$6,737.85
Landscape and Naval (Dwyer)	1	3	\$356.46
17-3011.01 Architectural Drafters (Dwyer)			Ψ330.40
43-6014.00 Secretaries & Admin	3	162	\$12,206.70
Assistants, Except Legal, Medical			
and Executive (Dwyer)	1	8	\$462.60
			\$463.68
Transfer			
Total this page	. 6	219.5	\$19,764.69
Grand Total	6	219.5	\$19,764.69
Name of person who prepared this rep	out. Vaint 771		
	Ort: Kristen Zdrojewsl	(1	
Preparer's Signature:	DARK		
Title: Office Manager		Phone #: <u>585.461.47</u>	71
Date Prepared: <u>05/05/2023</u>			, ,
Use additional pages if necessary)	•		

OSC Use Only:	
Reporting Code:	
Category Code	

Keport Po	eriod: April 1, 2022	to March 31, 2023	
Contracting State Agency Name: SU	INV Unstate Medical	I Y	
Contract Number: T550348	on i Opsiale Medical	University Agenc	y Code: 28110
Contract Term: <u>12/02/2022</u> to			
Contractor Name: Trophy Po	int LLC		
	outh Park Ave, Blasde	II NY 14210	
Description of Services Being Provid	ed #151153/1151 IIA	MIED V Day D	
	od #151155/1151 ON	ALC ED A-Kay Koom R	eplacement (22-051)
G G			
Scope of Contract (Choose one that			
Analysis Evaluati	~~~~	ırch 🗌	Training
Data Processing	Computer Programm	ing Other	IT consulting
Engineering Architect Serv			nmental Services
Health Services	Mental He	ealth Services	
Accounting Auditing	Paralegal 🔲	==	Other Consulting 🔀
Employment Category	Number of	Number of Hours	Amount Payable
- ·	Employees	Worked	Under the Contract
13-1051.00	6	59	\$7,144.00
·			
·			
Total this page	6	59	\$7,144.00
Grand Total			Ψ1,111100
Name			
Name of person who prepared this repo	ort: <u>Peter Trzybinski</u>		
Preparer's Signature:			
Title: Director of Finance			•
		Phone #: <u>716-823-0</u>	006
Date Prepared: <u>5/5/2023</u>			•
Use additional pages if necessary)			Page 1 of 1

F	O	R	M	R

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2022 to March 31, 2023						
Contracting State Agency Name: Contract Number: T550348 Contract Term: 12/02/2022 to Contractor Name: John P. Stope Contractor Address: 450 S. Salin Description of Services Being Provide	n Engineering, LLP	NUON NIV 42224 2222	ency Code: 28110			
Data Processing ☐ Computer Pro Engineering ☒ Architect Services Health Services ☐ Mental Health S Accounting ☐ Auditing ☐ Para	earch	☐ er IT consulting ☐ Environmental Service Other Consulting ☐	es 🗌			
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
11-1011 1 10.00 \$3,579.00						
Total this page	1	10.00	\$3,579.00			
Grand Total	1	10.00	\$3,579.00			
Name of person who prepared this Preparer's Signature Title: Accounting Date Prepared: 05/08/2023	& Jummer	er 				

OSC Use Only:	
Reporting Code:	
Category Code:	

Report P	eriod: April 1, 2022	to March 31, 2023	
Contracting State Agency Name: <u>SU</u> Contract Number: <u>T550348</u>	JNY Upstate Medical	University Ag	ency Code: 28110
Contract Torme 12/00/0000			
	ngineering & Land Sur	vovin n D C	
	outh Clinton Avenue,	veying, P.C.	Y 1.610
Description of Services Being Provid	ed #151152/1151 ID	Suite 1, Rochester, N	Y 14618
	10 1511/551151# po	MUED X-Ray Roon	n Replacement (22-051)
Scope of Contract (C)			
Scope of Contract (Choose one that Analysis Evaluation	.		
Analysis Evaluati Data Processing		Patricia	Training [
Engineering Architect Serv	Computer Programm		ner IT consulting
Health Services		ying Env	ironmental Services X
Accounting Auditing	Paralegal	ealth Services	
	I di di Ogai 📋	Legal [Other Consulting [
Employment Category	Number of	Number of Hours	Amount Payable
	Employees	Worked	Under the Contract
			Onder the Contract
no services provided			
no dervices provided			
		T	
Total this page			
Grand Total			
Vame of person who			
Name of person who prepared this repo	rt: JoAnna Sheridar	1	
Preparer's Signature:	>		
litle: compliance officer		Dhone #, 505 704	
Date Prepared: <u>05/09/2023</u>		Phone #: <u>585-764</u>	-30/0
Jse additional pages if necessary)			Page of

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OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name :SL	JNY Upstate Medical	University Agenc	y Code: 28110
Contract Number: 1550348		7.80110	y Code. <u>20110</u>
Contract Term: <u>12/02/2022</u> to	11/10/2024		
Contractor Name: IBC Engineering	PC		
Contractor Address: 3445 winton Plan	ace Suite 219 Rocheste	er. NY 14623	
Description of Services Being Providence	ed #151153/1151 UN	MU ED X-Ray Room R	enlacement (22,051)
			(22-051)
Scope of Contract (Choose one that	L-ACAN		
		. ~	
Analysis _		arch 🔲	Training
Engineering Architect Serv	Computer Programm		IT consulting [
Health Services		ying Enviro	nmental Services
Accounting Auditing		ealth Services	
Additing [Paralegal 🗌	Legal 🗌	Other Consulting
The second secon	Number of		
Employment Category	Employees	Number of Hours	Amount Payable
17-2141.00 Mechanical Engineer	2	Worked	Under the Contract
17-3023.00 Electrical Engineer	1	120	\$15,600.00
11-1021.00 General Operations Mg	r 1	70	\$9,100.00
11-1011 Chief Executive	1	16	\$2,080.00
17-3013.00 Mechanical Drafter	2	4	\$720.00
17-3012.02 Electrical Drafter	1	40	\$3,200.00
		34	\$3,165.00
·			
the second secon			
And the state of t			-
	The species of the first of the species of the spec		
Total this page			
Grand Total	6		
Grand Total	8	284	\$33,865.00
Name of person who prepared this reason	M. Andrew Liarnes	?	
	- Indiger of deligation	The state of the s	The state of the s
Preparer's Signature:			2
Title: Associate		Phone #: <u>585-233-6</u>	834
Date Prepared: <u>5/15/2023</u>			
Use additional pages if necessary)			Page of \

OSC Use Only:	······································
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SU Contract Number: T550308 AOA#2 Contract Term: 10/06/2022 to	11/10/2024	University Agenc	y Code: 28110
Contractor Name: Dwyer Architectu	ral, LLC		
Contractor Address: 120 E Washingt	on St. Suite 822 Syra	cuse. NY 13202	
Description of Services Being Provid	ed #151067/1400 LII	IH 5W Renovation A	mand #2 (22, 022)
	, = = = = = = = = = = = = = = = =	on varion - A	mena #2 (22-033)
Scope of Contract (Choose one that	book Ct.)		
Analysis Evaluat	. — '	. —	
Data Processing		irch 🔲	Training [
	Computer Programm		IT consulting
Engineering Architect Serv		ying Environ	nmental Services
Health Services	Mental He	ealth Services	
Accounting Auditing	Paralegal 🗌		Other Consulting
	· -	<i>0</i>	other consuming [
Employment Cata	Number of	Number of Hours	Amount Dougla
Employment Category	Employees	Worked	Amount Payable
17-1011.00 Architects, Except		W OI KEU	Under the Contract
Landscape and Naval (Dwyer)	1	36	07.016.40
17-3011.01 Architectural Drafters		30	\$5,216.40
(Dwyer)	2	106.5	Ø7.407.00
43-6014.00 Secretaries & Admin		100.3	\$7,407.08
Assistants, Except Legal, Medical	•		
and Executive (Dwyer)	1	11.75	0.01.00
		11./3	\$681.03
		<u> </u>	
T-4-141.*			
Total this page	4	154.25	\$13,304.51
Grand Total	4	154.25	\$13,304.51
Name of person who prepared this repo	ort: Kristen Zdrojews		Ψ13,30 4 .31
Preparer's Signature:	/		
Title: Office Manager)	Phone #: <u>585.461.47</u>	71
Date Prepared: <u>05/05/2023</u>			
TT 111.1 · · · · ·			

Use additional pages if necessary)

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contractor Name:Trophy Po	11/10/2024 int, LLC outh Park Ave, Blasde led #151067/1400 Ut best fits): ion Resea	II, NY 14219 UH 5W Rnovation - A	Training [
	Computer Programm		r IT consulting 🔲
Engineering Architect Services Health Services		ying Enviro	onmental Services
Accounting Auditing		ealth Services	
/ Additing	Paralegal	Legal 🗌	Other Consulting 🛛
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable
No Work Performed		Worked	Under the Contract
Total this page			No Work Performed
Grand Total			
Name of person who prepared this repo	ort: Peter Trzybinski		
Preparer's Signature:			
Title: Director of Finance		Phone #: 716-823-	_ 0006_
Date Prepared: <u>5/5/2023</u>			
Use additional pages if necessary)			Page 1 of 1

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OSC Use Only:	
Reporting Code:	
Category Code:	i

Report Pe	eriod: April 1, 2022	to March 31, 2023	
Contracting State Agency Name: Contract Number: T550308 AOA Contract Term: 10/06/2022 to 11/	\#2	ical University Ag	ency Code: 28110
Contractor Name: John P. Stoper Contractor Address: 450 S. Salin Description of Services Being Pro	n Engineering, LLP	cuse NY 13201-0029 0 UUH 5W Renovation	n Amend#2(22-033)
Scope of Contract (Choose one tha	nt best fits):		
Analysis ☐ Evaluation ☐ Rese Data Processing ☐ Computer Pro Engineering ☒ Architect Services Health Services ☐ Mental Health S	earch	Triconsulting Carlos Environmental Service Other Consulting Carlos	es 🗌
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
11-1011 17-3029	1	35.00	\$6,031.25
17-0020	1	24.50	\$1,932.75
Total this name			
Total this page	2	59.50	\$7,964.00
Grand Total	2	59.50	\$7,964.00
Name of person who prepared this	report: Carol Zimm	er	
	& Jummer	_	
Title: Accounting Date Prepared: 05/08/2023	Pho	ne #: 315-472-5238	
lse additional pages if pages and			

OSC Use Only:	The street of th
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Contract Term: 10/06/2022 to 11/10/2024 Contractor Name: IBC Engineering PC Contractor Address: 3445 winton Place Suite 219 Rochester, NY 14623 Description of Services Being Provided #151067/1400 UUH 5W Renovation - Amend #2 (22-033)	Contracting State Agency Name: SUNY Upstate Medical University Contract Number: T550308 AOA #2	Agency Code: 28110
Contractor Name: IBC Engineering PC	Contract Term: 10/06/2022 to 11/10/2024	
Contractor Address: 3445 winton Place Suite 219 Rochester, NY 14623	Contractor Name: IBC Engineering PC	
Description of Services Being Provided #151067/1400 UUH 5W Renovation - Amend #2 (22-033)_	Contractor Address: 3445 winton Place Suite 219 Rochester, NY 14623	
	Description of Services Being Provided #151067/1400 UUH 5W Renov	vation - Amend #2 (22-033)_

Scope of Contract (Choose one that	best fits):		
Analysis Evaluat		rch 🗍	Training [
Data Processing	Computer Programm		IT consulting
Engineering Architect Serv			nmental Services
Health Services		ealth Services	
Accounting Auditing	Paralegal	Legal 🗌	Other Consulting
Employment C	Number of	Number of Hours	Amount Payable
2proyon	Number of Employees	Worked	Under the Contract
17-2141.00 Mechanical Engineer	2	50	\$6,500.00
17-3023.00 Electrical Engineer	1	28	\$3,500.00
11-1021.00 General Operations Mg	1	12	\$1,664.00
11-1011 Chief Executive	1	4	\$720.00
17-3013.00 Mechanical Drafter	2	10	\$800.00
17-3012.02 Electrical Drafter	1	10	\$800.00
And the second s			
			and the same of th
Total this page			
Grand Total	8	114	\$13,984.00

Name of person who prepared this report: Andrew J Jaroez

Preparer's Signature:

Title: Associate

Phone #: 585-233-6834

Date Prepared: <u>5/15/2023</u>

Use additional pages if necessary)

Page of

OSC Use Only:	
Reporting Code:	
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State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2022

	11041 11, 2022	10 March 31, 2023	
Contracting State Agency Name: SU	INV Ungtoto Madia 1	TT • •.	
Contract Number: T550308	ON I Opstate Medical	University Agenc	y Code: 28110
Contract Term: <u>02/10/2021</u> to	02/09/2024		
Contractor Name: Dwyer Architectu	ral IIC		
Contractor Address: 120 E Washingt	ton St, Suite 822 Syrac	cuse, NY 13202	
Description of Services Being Provid	ed 151128-1345 UC	C Linear Accelerator (2	1-020)
Samuel Co.			
Scope of Contract (Choose one that Analysis Evaluation			
Analysis Evaluati Data Processing			Training
Engineering Architect Serv	Computer Programming Other IT consulting Computer Surveying Environmental Services		
Health Services	Mental He	ealth Services	imental Services [_]
Accounting Auditing	Paralegal 🔲		Other Consulting 🔲
Employment Category	Number of Employees	Number of Hours	Amount Payable
17-1011.00 Architects, Except	Limployees	Worked	Under the Contract
Landscape and Naval (Dwyer)	1	28.5	\$4,129.65
17-3011.01 Architectural Drafters (Dwyer)	1	101	
43-6014.00 Secretaries & Admin		131	\$8,731.15
Assistants, Except Legal, Medical			
and Executive (Dwyer)	1	27.5	\$1,593.90
	·		
Total this page	3	187	¢14.454.70
Grand Total	3	187	\$14,454.70 \$14,454.70
Name of rouse and			Ψ14,434.70
Name of person who prepared this repo	rt: Kristen Zdrojews	ski	
Preparer's Signature:	<u> </u>		
Title: Office Manager		Phone #: <u>585.461.47</u>	771
Date Prepared: <u>05/05/2023</u>			
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State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 20

	, 2022 to March 31, 2023
Contracting State Agency Name: SUNY Upstate M	Andical II.:
Contract Number: T550308	Agency Code: 28110
Contract Term: 02/10/2021 to 02/09/2024	
Contractor Name: Trophy Point, LLC	
Contractor Address: 4588 South Park Ave	Blasdell, NY 14219
Description of Services Being Provided 1551128-	1345 UUC Linear Accelerator (21-020)
Scope of Contract (Choose one that best fits):	
Analysis Evaluation	Research Training
Data Processing Computer Pro	Research Training Other IT consulting Other IT consulting
Engineering Architect Services	Surveying Environmental Services
Health Services M	ental Health Services
Accounting Auditing Parale	gal D Legal Other Consulting 🖂
Employment Category Number	Amount Fayable
No Work Performed Employe	es Worked Under the Contract
Total this man	
Total this page	No Work Performed
Grand Total	
Name of person who prepared this report: Peter Trz	vhineki
Preparer's Signature: La Japanile.	YUITISKI
Title: Director of Finance	Phone #: 716-823-0006
Date Prepared: <u>5/5/2023</u>	
Use additional pages if necessary)	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: University at Albany Agency Code: 28110

Contract Number: T550308 SUNY Upstate Medical University

Contract Term: 02/10/2021 to 02/09/2024 Contractor Name: Watts Architects & Engineers

Contractor Address: 95 Perry Street, Suite 300, Buffalo, NY 14203

Description of Services Being Provided: 151228-1345 UCC Linear Accelerator (21-020)

Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing Computer Programming Other IT consulting Engineering Architect Services Surveying Environmental Services Health Services Mental Health Services Accounting Paralegal Auditing Legal Other Consulting Note: Use the Tab key to navigate through the table portion of the form to ensure that the formulas calculate correctly. **Employment Category** Amount Payable Under the Number of Employees Number of Hours Worked Contract 17-2051.00 Civil Engineers 14.75 2,313.00 0.00 0.00 0.00 Total this page 14.75 2,313.00 Grand Total 14.75 2,313.00

Name of person who prepared this repo	rt: Linda Butcher		
L.	ude Butcher		
	LAL BUTCHEC		
Title: Sr. Project Accountant Date Prepared: 5/9/2023	Phone #:	(716) 206-5128	
Use additional pages if necessary)			Page 1 of 1

Parket Street Commencer Co	Market San Laboratory and Market
OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name :SUNY Upstate Medical University Agency Code: 28110 Contract Number: T550308 Contract Term: 02/10/2021 to 02/09/2024 Contractor Name: IBC Engineering PC Contractor Address: 3445 winton Place Suite 219 Rochester, NY 14623 Description of Services Being Provided 151128-1345 UCC Linear Accelerator (21-020)				
Scope of Contract (Choose one that Analysis	ion Resea Computer Programm vices Survey Mental He	ying	Training IT consulting Imental Services Other Consulting	
Employment Cal 17-2141.00 Mechanical Engineer 17-3023.00 Electrical Engineer 11-1021.00 General Operations M 11-1011 Chief Executive 17-3013.00 Mechanical Drafter 17-3012.02 Electrical Drafter	2	Number of Hours Worked 80 70 16 8 30 20	Amount Payable Under the Contract \$10,400.00 \$8,918.00 \$2,080.00 \$1,440.00 \$2,600.00 \$1,800.00	
Total this page Grand Total Name of person who prepared this representation of person who prepared this representation. Preparer's Signature: Title: Associate Date Prepared: 5/15/2023	ort: Andrew Jacos	224 Phone #: <u>585-233-6</u>	\$27,238.00	
Use additional pages if necessary)			Page \ of \	

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Reporting Code: Category Code:

State Consultant Services

Contractor's Annual Employment Report					
Report Period: April 1,2022 to March 31, 2023					
Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: X-504598 Contract Term: 1-1-2018 to 6-30-2023 Contractor Name: Upstate University Radiation On cology Contractor Address: 750 East Adams Freet Syrange My 13210 Description of Services Being Provided Nurse Practitional					
Scope of Contract (Choose one that best fits): Analysis					
Employment Category	Number of Employees	Number of Hours	Amount Payable		
Murge Practitoner Employees Worked Under the Contract [040 969,995.08					
Total this page					
Grand Total		1040	69,995 oc		
Name of person who prepared this rep Preparer's Signature: Title: Date Prepared: 5/22/2013 Use additional pages if necessary)	ort: Jeff & Rub 13bator	Phone #: 315-4			

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1,2022 to March 31, 2023				
Report Feriou. April 1, 222 to Marcii 31, 2020				
Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: X - 505587 Contract Term: 3-1-21 to 2-28-24 Contractor Name: Upstate University Radiation Oncology Contractor Address: 750 Fast Adams Street, Syracuse, My. 13210 Description of Services Being Provided Dominator Services				
Scope of Contract (Choose one that best fits): Analysis				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Medical Dosimetrists 3 416 35,057				
	-			
		•		
			·	
			:	
Total this page				
Grand Total	5	416	35,057	
Name of person who prepared this report: Buckmax				
Preparer's Signature: Such				
Title: Phone #: 215-464-2020				
Date Prepared: 5/2003				
Use additional pages if necessary)			Page of	

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2022 to March 31, 2023				
Contracting State Agency Name: SUI Contract Number: X - SOS610 Contract Term: 7-15-21 to 2-14-2 Contractor Name: Upsto Contractor Address: 75 Description of Services Being Provide	26	University Agency Ladvatron Orcology St. Syracas 1 Practitioner Serv	V. Code: 28110	
Scope of Contract (Choose one that best fits): Analysis				
Employment Category Nurse Practitionar	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
			,	
Total this page			B	
Grand Total	l	1,664	118,836	
Name of person who prepared this report: Preparer's Signature: Title: Phone #: 315-464-2020 Date Prepared: 5/22/2023 Use additional pages if necessary) Page of				
• ,			· · ·	

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Suny Upstate Medical University Contract Number: X-505773 Agency Business Unit: 28110 Contract Term: 07/01/2021 to 06/30/2022 Agency Department ID: 34132236 Contractor Name: Upstate Orthopedics, LLP Contractor Address: 6620 Fly Road, Ste 200 East Syracuse, NY 13057 Description of Services Being Provided: MSG Physician Service Agreement Rajin Shahriar, MD Orthopedic Surgery						
Scope of Contract (Choose one that b	*	ining				
☐ Data Processing ☐ Computer Pr	ogramming 🗀	Other IT consulting				
☐ Engineering ☐ Architect Services		· · · · · · · · · · · · · · · · · · ·	Services			
☑ Health Services ☐ Mental Health	_ , ,	,				
-	ıralegal ∐Leç	gal 🔲 Other Consul	ting			
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
Payable to Hospital	0.00	0.00	\$0.00			
29-1242.00	1.00	500.00				
	1.00	520.00	\$105,000.00			
	0.00	0.00	\$105,000.00 \$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00 0.00	\$0.00 \$0.00			
	0.00 0.00 0.00	0.00 0.00 0.00	\$0.00 \$0.00 \$0.00			
	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00			
	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00			
	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00			
	0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00			
	0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00			
	0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00			

1.00

Name of person who prepared this report: Cynthia Morris

Title: Accountant

Phone #: 315-464-8197

520

Preparer's Signature: _

Date Prepared: 05/03/2023

(Use additional pages, if necessary)

Grand Total

\$105,000.00

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Sur	ny Upstate Medic	cal University			
Contract Number: X-505773	(-504085	Agency Business Ur	nit: 28110		
Contract Term: 04/01/2022 to 03/31/2025 Agency Department ID: 34132236					
Contractor Name: Upstate Orthopedi	cs, LLP				
Contractor Address: 6620 Fly Road,	Ste 200 East Sy	racuse, NY 13057			
Description of Services Being Provide		cian Service Agreeme	nt Allyson M.		
Zakzrewski, MD Orthopedic Surgery					
Scope of Contract (Choose one that b Analysis Evaluation Res	·	ining			
Data Processing Computer Pro		Other IT consulting			
☐ Engineering ☐ Architect Services			Services		
☐ Health Services ☐ Mental Health	_ , .		30,11000		
	ralegal	gal	tina		
	Number of	Number of			
Employment Category	Employees	Hours Worked	Amount Payable Under the Contract		
Payable to Hospital	0.00	0.00	\$0.00		
29-1242.00	1.00	2,080.00	\$480,000.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
Total this Page	1.00	2,080.00	\$480,000.00		
Grand Total	1.00	2,080	\$480,000.00		

Name of person who prepared this report: Cynthia Morris

Title: Accountant

Phone #: 315-464-8197

Preparer's Signature: _

Date Prepared: 05/03/2023

(Use additional pages, if necessary)

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: Sur	ny Upstate Medi	cal University	
Contract Number: X-506085		Agency Business Ur	nit: 28110
Contract Term: 04/01/2022 to 03/3	31/2025	Agency Department	ID: 34132236
Contractor Name: Upstate Orthopedi	cs, LLP	,	
Contractor Address: 6620 Fly Road,	Ste 200 East Sy	racuse, NY 13057	
Description of Services Being Provide		cian Service Agreeme	nt Allyson M.
Zakzrewski, MD Orthopedic Surgery	,		•
Scope of Contract (Choose one that b	_	inina	
	·	ining	
Data Processing Computer Pro	• • –	Other IT consulting	Camilaaa
☐ Engineering ☐ Architect Services		g Environmental	Services
☐ Health Services ☐ Mental Health		and Dothan Compart	4:
Accounting Auditing Pa	ralegal 🔲 Leç	gal	ung
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Payable to Hospital	0.00	0.00	\$0.00
29-1242.00	1.00	2,080.00	\$480,000.00
20 12 12.00	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	2,080.00	\$480,000.00
Grand Total	1.00	2,080	\$480,000.00
Name of person who prepared this re	eport: Cynthia Mo	orris	
Title: Accountant	•	4	315-464-8197
Preparer's Signature:	ua &Ma	$\mathcal{N}_{\mathcal{N}}\mathcal{O}$	
	Mr. A Os		
Date Prepared: 05/03/2023			

OSC Use Only:	
Reporting Code:	
Category Code:	

Contractor's Annual Employment Report						
Report Period: April 1,2022 to March 31, 2023						
Contracting State Agency Name: SUI Contract Number: X-506 188 Contract Term: 12-1-2020 11-30. Contractor Name: 1405 145 145 145 145 145 145 145 145 145 14	2024		Code: 28110			
Scope of Contract (Choose one that Analysis	on Resea Computer Programm rices Survey Mental He Paralegal	ving	Training IT consulting Immental Services Other Consulting			
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
1 hysicists	3	278	41,460			
Total this page Grand Total	3	278	4(,46)			
Name of person who prepared this rep Preparer's Signature:	ort: Jeff Struk vidrator	Buckmen				

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: <u>SUN</u>		Iniversity Agency	Code: <u>28110</u>
Contract Number:to			
Contract Term:to			
Contractor Name: Pediatric Service G		12010	
Contractor Address: 750 East Adams	. •	13210	
Description of Services Being Provide	a		
			······································
		,	
Scope of Contract (Choose one that	best fits):	 -	
Analysis Evaluation	on Resear	<u></u>	Training [
Data Processing			IT consulting
Engineering Architect Serv	ices Survey	ving D Enviror ealth Services D	mental Services
Health Services ⊠ Accounting ☐ Auditing ☐			Other Consulting
Accounting Auditing	raialegai [_]	Legai 🔛	Omer Consuming [
E1	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
29-1221.00	1 .	416	\$52,954.00
Total this page	1	416	\$52,954.00
Grand Total	1	416	\$52,954.00
Nome of narron who meaned this to-	ort. Earrah Mallaha	an .	
Name of person who prepared this rep	pit, Parrair Miciviano	JII	le controlle (in
Preparer's Signature:	VUNUMA		
Title: Practice Administrator		Phone #: 315-464-	5450
Date Prepared: <u>5//14/2023</u>			
Use additional pages if necessary)			Page 1 of 1

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUN Contract Number: 504488 Contract Term: 4/1/2018 to Contractor Name: Pediatric Service G Contractor Address: 750 East Adams Subscription of Services Being Provider	3/31/2023 roup, LLP_ Street, Syracuse, NY	13210	Code: 28110
Scope of Contract (Choose one that Analysis	on Resear Computer Programmi ices Survey Mental He	ing Other ing Enviror alth Services	Training IT consulting Immental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1221.00	8	12,480	\$1,860,947.00
Total this page	8	12,480	\$1,860,947.00
Grand Total Name of person who prepared this rep Preparer's Signature: Title: Practice Administrator Date Prepared: 5//15/2023 Use additional pages if necessary)	ort: Farrah McMaho	12,480 on Phone #: 315-464-	\$1,860,947.00

FORM B

OSC Use Only:	
Reporting Code:	
Category Code	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023

Report Per	iod: April 1, 2022 to	March 31, 2023	,
Contracting State Agency Name: SUN Contract Number: 504612 Contract Term: 4/1/2018 to	3/31/2023	niversity Agency	Code: 28110
Contractor Name: Pediatric Service G			
Contractor Address: 750 East Adams	Street, Syracuse, NY	13210	
Description of Services Being Provided	d Clinical Psycholog	ist Pediatric Services Pr	rogram
Scope of Contract (Choose one that Analysis Evaluation Evaluation	on Resear		Training IT consulting
	Computer Programmi	° =	mental Services
Engineering Architect Serv			illietitai pei vices [_]
Health Services 🛛		alth Services	040
Accounting Auditing	Paralegal	Legal [_]	Other Consulting [
			T 4 . D 11
Employment Category	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
19-3033.00	1	1,560	\$101,340.00
	-		
		1.500	¢101 240 00
Total this page	1	1,560	\$101,340.00
Grand Total	1	1,560	\$101,340.00
Name of person who prepared this rep	ort: Farran McMan	on	
Preparer's Signature:) MINVAMP	L	
\bigvee	V V · · · · · · · · · · · · · · · · · ·	DI // 04E 404	— E 1 E O
Title: Practice Administrator		Phone #: <u>315-464-</u>	·040U
Date Prepared: <u>5//15/2023</u>			•
			Page 1 of 1
Use additional pages if necessary)			rage I of I

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State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Keputter	iou. April 1, 2022 to	Wai Cli 51, 2020	
C / / C / C / C / C / C / C / C / C / C	TS7 TT4-4- N #- 4!1 TT		Codo: 20110
Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: 504626			
	11/30/2023		
Contractor Name: Pediatric Service G			
Contractor Address: 750 East Adams	<u> </u>	13210	
Description of Services Being Provide			
Scope of Contract (Choose one that	best fits):		
Analysis Evaluation		rch 🗌	Training 🗌
	Computer Programmi	~ _	T consulting
Engineering Architect Serv		<u> </u>	mental Services
Health Services		alth Services	
Accounting Auditing	Paralegal 🗌	Legal 🗌 🤇	Other Consulting
	Number of	Number of Hours	Amount Devoble
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1221.00	Employees 1	624	\$62,919.00
20 1221.00		<u> </u>	402,515100
T-4-141:	1	624	\$62.010.00
Total this page	1	624	\$62,919.00
Grand Total	1	624	\$62,919.00
Name of person who prepared this rep	ort: Farrah McMaho	on	
- Land all	1) // // // ah a	1	-
Preparer's Signature:	y vyavyava		_
Title: Practice Administrator Phone #: 315-464-5450			5450
Date Prepared: <u>5//14/2023</u>			
Use additional pages if necessary)			Page 1 of 1

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUN	NY Upstate Medical U	niversity Agency	Code: 28110
Contract Number: 504806			
	11/30/2023		
Contractor Name: Pediatric Service G		10010	
Contractor Address: 750 East Adams			d Chairmanan
Description of Services Being Provide Medical Records Committee	d lyledical Direction	Cimical informatics an	d Champerson
Wiedical Records Committee			
Same of Contract (Change are that	hast fits).		
Scope of Contract (Choose one that Analysis Evaluation		rch 🗍	Training 🔲
, <u> </u>	Computer Programm		IT consulting [
Engineering Architect Serv			mental Services
Health Services 🛛		ealth Services	
Accounting Auditing	Paralegal 🔲	Legal 🔲	Other Consulting 🔲 📗
Employment Category	Number of	Number of Hours	Amount Payable
29-1221.00	Employees	Worked 1,040	Under the Contract \$188,623.00
29-1221.00	l .	1,040	\$188,023.00
Total this page	1	1,040	\$188,623.00
Grand Total	1	1,040	\$188,623.00
		, , , , , , , , , , , , , , , , , , , ,	
Name of person who prepared this rep	ort: Farrah McMaho	on	
Preparer's Signature:	U VWWWAY	<u>/</u>	_
Title: Practice Administrator		Phone #: 315-464-	5450
Date Prepared: <u>5//14/2023</u>			
Use additional pages if necessary)			Page 1 of 1

FORM B

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OSC Use Only:	•	
Reporting Code:		
Category Code:		

Report Per	iod: April 1, 2022 to	March 31, 2023	
Contracting State Agency Name: SUN Contract Number: 504831 Contract Term: 1/1/2019 to Contractor Name: Pediatric Service G Contractor Address: 750 East Adams Description of Services Being Provide	12/31/2022 roup, LLP_ Street, Syracuse, NY	13210	Code: 28110
Scope of Contract (Choose one that Analysis	on Resear Computer Programmi ices Survey	ng Other I ing Environ alth Services	Training Training Training Training The consulting The co
Employment Category 19-3033.00	Number of Employees 1	Number of Hours Worked 1,170	Amount Payable Under the Contract \$61,194.00
Total this page	1	1,170	\$61,194.00 \$61,194.00
Grand Total Name of person who prepared this rap Preparer's Signature: Title: Practice Administrator	ort: Farrah McMaho	1,170 on Phone #: <u>315-464-</u>	
Date Prepared: 5//15/2023 Use additional pages if necessary)			Page 1 of 1

OSC Use Only:	
Reporting Code:	
Category Code:	

Contracting State Agency Name: SI	JNY Upstate Medical U	Iniversity Agency	y Code: 28110
Contract Number: 504875	C 10 0 10 00 1		
	6/30/2024		
Contractor Name: Pediatric Service		12010	
Contractor Address: 750 East Adam Description of Services Being Provi			1 Dadiatrias Dragram
Description of Services Being Provi	ded iviedical Direction	of Neurodevelopmend	ii rediatrics riogram
Scope of Contract (Choose one tha		.1 🗔	m:
	ntion Resea		Training IT consulting
Data Processing Engineering Architect Se	Computer Programm	<u> </u>	nmental Services
Engineering ☐ Architect Se Health Services ⊠		ealth Services	illitelital Services [
Accounting Auditing	_		Other Consulting
AccountingAdditing			Office Consuming [_]
Employment Category	Number of	Number of Hours	Amount Payable
	Employees	Worked	Under the Contrac
19-3039.00	11	312	\$55,542.00
			,
	· · · · · · · · · · · · · · · · · · ·		
·			
Total this page	1	312	\$55,542.00
Grand Total	1	312	\$55,542.00
Name of person who prepared this	eport: <u>Farran Ivicivlan</u>	OU	
Preparer's Signature:	UVYVVall		
Title: Practice Administrator Phone #: 315-464-5450		-5450	
Date Prepared: <u>5//13/2023</u>			
•			_ , _ ,
Use additional pages if necessary)			Page 1 of 1

FORM B

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Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: <u>SUN</u>	Y Upstate Medical U	Iniversity Agency	Code: 28110
Contract Number: 504877			
Contract Term: 7/1/2019 to	6/30/2024		
Contractor Name: Pediatric Service G			
Contractor Address: 750 East Adams			
Description of Services Being Provide	d Medical Direction	of Pediatrics Program_	·
Scope of Contract (Choose one that	best fits):		
Analysis Evaluation		rch 🗌	Training 🔲
Data Processing	Computer Programm	ing Other	T consulting
Engineering Architect Serv	ices 🗍 💢 Survey	ing Environ	mental Services
Health Services 🔀		ealth Services	
Accounting Auditing	Paralegal 🗌	Legal 🔲	Other Consulting 🔲
	_		· · · · · · · · · · · · · · · · · · ·
Employment Category	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
29-1221.00	1	1,040	\$281,110.00
Total this page	1	1,040	\$281,110.00
Grand Total	1	1,040	\$281,110.00
Name of person who premired this rep	ort: Farrah McMaho	nn .	
Name of person who prepared this report: Farrah McMahon			
Preparer's Signature:	1 Majvan Gr	~	-
Title: Practice Administrator		Phone #: 315-464-	5450
Date Prepared: <u>5//14/2023</u>			
TT 111/2 1			D 1 -£ 1

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FORM B

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Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

		······································		
Contracting State Agency Name: <u>SUN</u> Contract Number: <u>504878</u>		niversity Agency	Code: 28110	
Contract Term: 9/1/2019 to 8/31/2024				
Contractor Name: Pediatric Service G				
Contractor Address: 750 East Adams	Street, Syracuse, NY	13210		
Description of Services Being Provide	d Medical Direction	of University Pediatric	Multi-Specialty	
Center and Pediatric Gastroenterology	Services			
·		•		
Scope of Contract (Choose one that		. 🗀		
Analysis Evaluati			Training [
Data Processing	Computer Programm	ing U Other	IT consulting	
Engineering Architect Serv	ices Survey	ving Envirorealth Services	mental Services	
Health Services ⊠ Accounting ☐ Auditing ☐		—	Other Consulting	
Accounting Auditing Auditing	rarategat [regai [_]	Office Consuming [
	Number of	Number of Hours	Amount Payable	
Employment Category	Employees	Worked	Under the Contract	
29-1221.00	1	728	\$92,527.00	
Total this mass	1	728	\$92,527.00	
Total this page Grand Total	1 .	728	\$92,527.00	
Uand Total	1 1	120	ψ,2,321.00	
Name of person who prepared this rep	ort: Farrah McMaho	on		
Preparer's Signature:	() ////////////////////////////////////	_		
1 100000	y volvo	Phone #: 315-464-	 5450	
Title: Practice Administrator		FHORE #. <u>515-404-</u>	0-100	
Date Prepared: <u>5//14/2023</u>				
Use additional pages if necessary)	•		Page 1 of 1	

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Reporting Code:	
Category Code:	

Report Period: April 1, 2022 to March 31, 2023				
Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: 504944 Contract Term: 10/1/2019 to 9/30/2022 Contractor Name: Pediatric Service Group, LLP Contractor Address: 750 East Adams Street, Syracuse, NY 13210 Description of Services Being Provided Quality Officer Pediatric Services Program				
Scope of Contract (Choose one that best fits): Analysis				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
29-1221.00	1	520	\$52,647.50	
Total this page	1	520	\$52,647.50	
Name of person who prepared this repreparer's Signature: Title: Practice Administrator Date Prepared: 5//15/2023 Use additional pages if necessary)	1 Ort: Farrah, McMaho	520 on Phone #: <u>315-464-</u>	\$52,647.50 	

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUN Contract Number: 505025 Contract Term: 1/1/2020 to Contractor Name: Pediatric Service G. Contractor Address: 750 East Adams S. Description of Services Being Provided	12/31/2022 roup, LLP_ Street, Syracuse, NY	13210	Code: 28110
Scope of Contract (Choose one that Analysis	on Resear Computer Programmi ices Survey Mental He Paralegal	ng Cother I ing Environ alth Services Legal C	Training IT consulting Imental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1221.00	1	1,560	\$150,714.75
Total this page	1	1,560	\$150,714.75
Grand Total	11	1,560	\$150,714.75
Name of person who prepared this representation of person who prepared this representation.	Port: Farrah McMaho		
Title: Practice Administrator		Phone #: <u>315-464-</u>	040 U
Date Prepared: <u>5//15/2023</u>			Dage 1 of 1
Use additional pages if necessary)			Page 1 of 1

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2022 to March 31, 2023				
Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: 505045 Contract Term: 7/1/2018 to 6/30/2022 Contractor Name: Pediatric Service Group, LLP Contractor Address: 750 East Adams Street, Syracuse, NY 13210 Description of Services Being Provided Pediatric Endocrinologist Servcies				

Scope of Contract (Choose one that Analysis	on	ing Other : ring Environ alth Services	Training IT consulting Imental Services Other Consulting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
29-1221.00 Total this page	1 1	520 520	\$37,092.75	
Total this page Grand Total	1	520	\$37,092.75	
Name of person who prepared this report. Farrah McMahon Preparer's Signature: Phone #: 315-464-5450				
Date Prepared: <u>5//13/2023</u> Use additional pages if necessary)			Page 1 of 1	

FORM B

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Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report 1 cm			
Contracting State Agency Name (SITA)	IV Unctate Medical III	niversity Agency	Code: 28110
Contracting State Agency Name: <u>SUN</u> Contract Number: 505065	i i Opsiale Medical O	myershy Agency	20110
Contract Term: <u>7/1/2019</u> to	6/30/2024		
Contractor Name: Pediatric Service G	roup, LLP		
Contractor Address: 750 East Adams	Street, Syracuse, NY	13210	
Description of Services Being Provided	d General Pediatricia	n Services	
Scope of Contract (Choose one that	best fits):		
Analysis Evaluation	on Resear		Training [_]
Data Processing	Computer Programmi	ing Other	IT consulting
Engineering Architect Serv	ices Survey		mental Services
Health Services		ealth Services	Other Consulting
Accounting Auditing	Paralegal 🗌	Legal [Other Consulting
	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
29-1221.00	1	2,080	\$210,400.50
Total this page	1	2,080	\$210,400.50
Total this page Grand Total	1	2,080	\$210,400.50
Grand Total		2,000	7
Name of person who prepared this re	porty <u>Farrah McMah</u>	on	
Preparer's Signature:	1/LIMANIA		 .
,	1 0 0 0 0 0 0 1	Phone #: 315-464	-5450
Title: Practice Administrator		1 Mone // 0.0 10.	
Date Prepared: <u>5//13/2023</u>			
Use additional pages if necessary)			Page 1 of 1

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OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUN Contract Number: 505378 Contract Term: 7/1/2019 to Contractor Name: Pediatric Service G Contractor Address: 750 East Adams Description of Services Being Provide	6/30/2024 roup, LLP_ Street, Syracuse, NY	13210	Code: 28110
Scope of Contract (Choose one that best fits): Analysis			
Employment Category	Number of Employees 74	Number of Hours Worked 8.760	Amount Payable Under the Contract \$109,500.00
29-1221.00 Total this mage	74	8,760	\$109,500.00
Total this page Grand Total	74	8,760	\$109,500.00
Name of person who prepared this rep Preparer's Signature: Title: Practice Administrator		· · · · · · · · · · · · · · · · · · ·	5450
Date Prepared: <u>5//13/2023</u> Use additional pages if necessary)	,		Page 1 of 1

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Category Code:	

State Consultant Services Contractor's Annual Employment Report

Keport Per	iou: April 1, 2022 to	March 31, 2023	
			0 1 20110
Contracting State Agency Name: SUN	IY Upstate Medical U	niversity Agency	Code: 28110
Contract Number: 505379	6/20/2025		
	6/30/2025		
Contractor Name: Pediatric Service G	roup, LLPNV	12210	
Contractor Address: 750 East Adams Description of Services Being Provide	Street, Syracuse, N I	on Infusion and Transf	ision Physician
	d Pedianic Ambulan	ory illiusion and riansi	usion i nysician
Services			
		· · · · · · · · · · · · · · · · · · ·	
Scope of Contract (Choose one that	best fits):	. 🗂	m · · [77]
Analysis Evaluation			Training [
	Computer Programm	~ 	IT consulting
Engineering Architect Serv			nmental Services
Health Services	,	ealth Services	04 0141
Accounting Auditing Auditing	Paralegal 🗌	Legal 🗌	Other Consulting [_]
	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
	Employees	VV OI KCU	\$288,436.25
29-1221.00 Contract is based on billable			Ψ200,130.23
volume, not FTEs			
,			
Total this page			\$288,436.25
Grand Total			\$288,436.25
	. Camala NA-NA-I-	an .	
Name of person who prepared this rep	port: Farran Ivicivian		
Preparer's Signature:	U VWWWW	<u> </u>	_ _
Title: Practice Administrator		Phone #: 315-464	-5450
Date Prepared: 5//13/2023	-		
•			Page 1 of 1
Use additional pages if necessary)			Page 1 of 1

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Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUN	IV Unctate Medical II	Iniversity Agency	Code: 28110
Contract Number: 505380	VI Opsiale Medical O	<u>inversity</u> Agency	Code. <u>28110</u>
Contract Term: 7/1/2020 to	6/30/2025		
Contractor Name: Pediatric Service G			
Contractor Address: 750 East Adams	1	13210	
Description of Services Being Provide			C) Physician Clinical
Services			, ,
Scope of Contract (Choose one that	best fits):		
Analysis Evaluation		rch 🗍	Training
, <u> </u>	Computer Programmi		IT consulting [
Engineering Architect Serv			mental Services
Health Services 🛛		ealth Services	
Accounting Auditing	Paralegal 🗌	Legal 🗌	Other Consulting 🗌 📗
Employment Category	Number of	Number of Hours	Amount Payable
<u> </u>	Employees	Worked	Under the Contract
29-1221.00	2	624	\$87,710.00
Total this page	2	624	\$87,710.00
Grand Total	2	624	\$87,710.00
Urand Total	4	1 024	ψο / , / 10.00
Name of person who prepared this rep	ort: Farrah McMaho	on	
Preparer's Signature: WMM O. VANDO			
1	V V V V V V	DI # 045 404	
Title: Practice Administrator		Phone #: <u>315-464-</u>	5450
Date Prepared: <u>5//14/2023</u>			
Use additional pages if necessary)			Page 1 of 1

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Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUN Contract Number: 505381 Contract Term: 7/1/2020 to Contractor Name: Pediatric Service G Contractor Address: 750 East Adams Description of Services Being Provide	6/30/2025 roup, LLP Street, Syracuse, NY	13210	Code: 28110
Scope of Contract (Choose one that Analysis	on Resea Computer Programm ices Survey Mental He	ing	Training IT consulting Immental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1221.00	1	208	\$29,277.00
Total this page Grand Total	1 1	208 208	\$29,277.00 \$29,277.00
Name of person who prepared this rep Preparer's Signature:	ort: <u>Farrah McMaho</u> O MUMAWA	<u>, </u>	
Title: Practice Administrator Date Prepared: 5//14/2023	· · · · · · · · · · · · · · · · · · ·	Phone #: <u>315-464-</u>	5450
Date Prepared: 5//14/2023 Use additional pages if pages arry)			Page 1 of 1

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Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Robott Lor	10d. 21pm 1, 2022 to		<u>-</u>
Contracting State Agency Name: SUN	Y Upstate Medical U	Iniversity Agency	Code: 28110
Contract Number: 505382	6/20/2025		
Contract Term: 7/1/2020 to			
Contractor Name: Pediatric Service G		12210	
Contractor Address: 750 East Adams			Ctarroadahin and
Description of Services Being Provide			Stewardship and
Consultative Services Program			,
		······································	
Scope of Contract (Choose one that	hast fits).		
Analysis Evaluation		rch 🗌	Training 🗌
Data Processing	Computer Programm		IT consulting
Engineering Architect Serv	ices Survey	√ing ☐ Enviror	mental Services
Health Services		ealth Services	
Accounting Auditing			Other Consulting
	<i>2</i> —	-	
Employment Cotegory	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
29-1221.00	1	208	\$36,231.00
			<u> </u>
Total this page	1	208	\$36,231.00
Grand Total	1	208	\$36,231.00
Name of person who prepared this rep	ort: Earrah McMah	on	
The state of the s	MINIMA)	
Preparer's Signature:	X VUNUOUU	1	<u> </u>
Title: Practice Administrator		Phone #: 315-464-	5450
Date Prepared: <u>5//14/2023</u>			
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Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Contracting State Assess Name : SI	INIV I Instate Medical I	Inixaraita Aganar	Code: 28110
Contracting State Agency Name: <u>SI</u> Contract Number: 505383	ONY Opstate Medical C	<u>Iniversity</u> Agency	Code: 28110
•	6/30/2025		
Contractor Name: Pediatric Service			
Contractor Address: 750 East Adam	s Street, Syracuse, NY		
Description of Services Being Provi	ded Medical Direction	of Pediatric Dedicated	AIDS Center
PDAC) Program			
			,
Scope of Contract (Choose one tha	nt best fits):	,,, ,, ,, ,, , , , , , , , , , , , , ,	
			Training 🗌
Data Processing	Computer Programm		IT consulting
Engineering Architect Se		ying ☐ Enviror ealth Services ☐	mental Services
Health Services ⊠ Accounting ☐ Auditing ☐			Other Consulting
Accounting Auditing		Legal [Other Consuming
Employment Category	Number of	Number of Hours	Amount Payable
	Employees	Worked	Under the Contrac
29-1221.00	1	520	\$90,577.00
m . 1.41		500	400.555.00
Total this page	1 1	520	\$90,577.00
Grand Total	1	520	\$90,577.00
Name of person who prepared this r	eport:// Farrah McMah	on	
Preparer's Signature:	1 Vallamon		_
Title: Practice Administrator		Phone #: 315-464-	5450
Date Prepared: <u>5//14/2023</u>			
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FORM B

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Reporting Code:	
Category Code:	

Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUN Contract Number: 505385 Contract Term: 7/1/2020 to Contractor Name: Pediatric Service Grant Contractor Address: 750 East Adams Sun Description of Services Being Provided	6/30/2025 roup, LLP_ Street, Syracuse, NY	13210	Code: 28110 ontrol Program
Scope of Contract (Choose one that Analysis	on	ng Other : ing Environ alth Services Legal	Training IT consulting Imental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1221.00	1	416	\$46,039.00
Total this page	1	416 416	\$46,039.00 \$46,039.00
Name of person who prepared this rep Preparer's Signature: Title: Practice Administrator Date Prepared: 5//13/2023 Use additional pages if necessary)	<u></u>		

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Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

C. 4. 4. C4.4. A	TX/ II	-iit Access	Codo: 20110
Contracting State Agency Name: <u>SUN</u> Contract Number: 505388	Y Opsiale Medical O	inversity Agency	Code: <u>28110</u>
Contract Term: 7/1/2020 to 6/30/2025			
Contractor Name: Pediatric Service G			
Contractor Address: 750 East Adams		13210	
Description of Services Being Provide			
	J	1	
Same of Contract (Change one that	host Stale		
Scope of Contract (Choose one that Analysis Evaluation Evaluation		roh 🗍	Training 🗌
	Computer Programmi		IT consulting [
Engineering Architect Serv		ring Environ	mental Services
Health Services		alth Services	
Accounting Auditing			Other Consulting 🗌
Treetaning	I manogan 🗀	208	
Templeyment Catagony	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
29-1221.00	11	21,240	\$1,710,088.11
Total this page	11	21,240	\$1,710,088.11
Grand Total	11	21,240	\$1,710,088.11
Grand Total	<u> </u>	21,270	Ψ1,710,000.11
Name of person who prepared this rep	ort: Farrah McMaho	on	
Preparer's Signature:	1/LM/alne		
	1 MV VO 4 CC	71 // 045 404	
Title: Practice Administrator		Phone #: <u>315-464-</u>	040U
Date Prepared: <u>5//13/2023</u>			
Use additional pages if necessary)			Page 1 of 1

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Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUN Contract Number: 505407 Contract Term: 7/1/2020 to Contractor Name: Pediatric Service G Contractor Address: 750 East Adams Description of Services Being Provide	6/30/2023 roup, LLP_ Street, Syracuse, NY	13210	Code: 28110
Scope of Contract (Choose one that Analysis	on	ing Other 2 ving Environ ealth Services Legal	Training IT consulting Imental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1221.00	1	416	\$58,346.00
Total this page	1	416	\$58,346.00
Grand Total	1	416	\$58,346.00
Name of person who prepared this rep Preparer's Signature: Title: Practice Administrator Date Prepared: 5//14/2023	ort: Farrah McMaho	Phone #: <u>315-464-</u>	_

FORM B

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Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUN Contract Number: 505408 Contract Term: 11/1/2020 to Contractor Name: Pediatric Service G Contractor Address: 750 East Adams Description of Services Being Provided	IY Upstate Medical U 10/31/2025 roup, LLP_ Street, Syracuse, NY	niversity Agency	Code: <u>28110</u>
Scope of Contract (Choose one that Analysis	on	ing Other or Other call Carlo	Training IT consulting Imental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1221.00	1	2,080	\$262,046.75
Total this page	1	2,080	\$262,046.76
Grand Total	11	2,080	\$262,046.75
Name of person who prepared this rep Preparer's Signature:	Parrah McMaho		
Title: Practice Administrator		Phone #: <u>315-464-</u>	5450
Date Prepared: <u>5//13/2023</u>			
Use additional pages if necessary)			Page 1 of 1

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OSC Use Only:	
Reporting Code:	
Category Code	

Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUN Contract Number: 505409 Contract Term: 7/1/2020 to Contractor Name: Pediatric Service Gontractor Address: 750 East Adams Subscription of Services Being Provided	6/30/2023 roup, LLP_ Street, Syracuse, NY	13210	Code: <u>28110</u>
Scope of Contract (Choose one that Analysis Evaluation Data Processing Architect Services Accounting Auditing Auditing	on	ng Other ing Enviror Enviror Legal	Training IT consulting Imental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1221.00	1	416	\$52,954.00
Total this page	1	416 416	\$52,954.00 \$52,954.00
Grand Total Name of person who prepared this rep Preparer's Signature: Title: Practice Administrator Date Prepared: 5//14/2023 Use additional pages if necessary)	<u> </u>		

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Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report 1 or	104.11p.11.2, =0== 35		· · · · · · · · · · · · · · · · · · ·
Contracting State Agency Name: <u>SUN</u> Contract Number: <u>505611</u>		niversity Agency	Code: 28110
Contract Term: <u>3/1/2021</u> to	2/29/2024		
Contractor Name: Pediatric Service G	roup, LLP		
Contractor Address: 750 East Adams	Street, Syracuse, NY	13210	
Description of Services Being Provide	d Medical Direction	of Utilization Managen	nent and Clinical
Documentation Improvement Program			
Scope of Contract (Choose one that	best fits):		m · ·
Analysis Evaluati	on Resear	rch 🔲	Training [
Data Processing	Computer Programmices Survey	ing U Other	IT consulting mental Services
Engineering Architect Serv	ices Survey	ing Enviror	imental Services
Health Services		alth Services	Other Consulting
Accounting Auditing	Paralegal [_]	Legal [Offici Consuming [_]
	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
29-1221.00	1	520	\$49,963.00
Tetal this mage	1	520	\$49,963.00
Total this page Grand Total	1	520	\$49,963.00
Grand Total	<u> </u>	020	
Name of person who prepared this rep	oort: Farrah McMah	on	·
Preparer's Signature:	1) VIMILAN		
		Di #- 215 464	 5450
Title: Practice Administrator		Phone #: <u>315-464-</u>	3430
Date Prepared: <u>5//13/2023</u>			
Use additional pages if necessary)			Page 1 of 1

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Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Contracting State Agency Name: SUN Contract Number: 505751 Contract Term: 7/1/2021 to Contractor Name: Pediatric Service G Contractor Address: 750 East Adams Description of Services Being Provide	IY Upstate Medical Use 6/30/2026 roup, LLPStreet, Syracuse, NY	13210	Code: 28110
Scope of Contract (Choose one that Analysis	on Resear Computer Programmi ices Survey Mental He	ing Other I ring Environ ealth Services	Training Training Tronsulting mental Services Other Consulting
Employment Category	Number of	Number of Hours	Amount Payable
	Employees 1	Worked 104	Under the Contract \$9,616.00
29-1221.00	<u> </u>	104	Ψ2,010.00
		·	
		104	\$0.616.00
Total this page	1	104	\$9,616.00 \$9,616.00
Grand Total] 1	104	1 \$3,010.00
Name of person who prepared this rep Preparer's Signature:	port: Farrah McMah	on L	
Title: Practice Administrator		Phone #: 315-464-	5450
Date Prepared: <u>5//13/2023</u>			
Use additional pages if necessary)			Page 1 of 1

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Contracting State Agency Name: SUN	NY Upstate Medical U	niversity Agency	Code: <u>28110</u>
Contract Number: 505768	6/20/2026		
	6/30/2026		
Contractor Name: Pediatric Service G Contractor Address: 750 East Adams		12210	
Description of Services Being Provide			
Description of Services being Flovide	d rediante riovidei-	Dased Cliffic Services_	
		•	
Scope of Contract (Choose one that			
Analysis 🗌 🔃 Evaluati			Training
Data Processing	Computer Programmi	U - <u></u>	IT consulting [
Engineering Architect Serv			nmental Services
Health Services		alth Services	0.1 0 10 🗆
Accounting Auditing	Paralegal 🗌	Legal 🗌	Other Consulting
	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
29-1221.00	46	95,947	\$722,830.00
29-1171.00	9	18,754	\$116,577.00
19-3033.00	7	14,561	\$77,038.00
		-	
Total this page	62	129,262	\$916,445.00
Grand Total	62	129,262	\$916,445.00
Name of person who prepared this rep	Ort: Farrah McMaho	on	
Preparer's Signature:	UMUMA		
Title: Practice Adminsitrator		Phone #: 315-464-	5450
Date Prepared: <u>5//15/2023</u>			
Use additional pages if necessary)			Page 1 of 1

FORM B

OSC Use Only:	
Reporting Code:	
Category Code	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2022 to March 31, 2023

Contract Number: 505788
Contract Term: <u>7/1/2021</u> to <u>6/30/2026</u>
Contractor Name: Pediatric Service Group, LLP
Contractor Address: 750 East Adams Street, Syracuse, NY 13210
Description of Services Being Provided Medical Direction of University Pediatric and Adolescent
Center ("UPAC")

Scope of Contract (Choose one that	best fits):		
	on 🗌 🐪 Resea:	rch 🗌	Training
	Computer Programm	ing Other	IT consulting
Engineering Architect Serv			nmental Services
Health Services 🛛		alth Services	
Accounting Auditing Auditing	Paralegal 🗌	Legal 🔲	Other Consulting [
	r		
Employment Category	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
29-1221.00	1	624	\$106,966.00
Total this page	1	624	\$106.966.00
Grand Total	1	624	\$106,966.00

Name of person who prepared this report: <u>Farrah McMahon</u>	
Name of person who prepared this report: Farrah McMahon Preparer's Signature: WWW O WWW	
Title: Practice Administrator	Phone #: 315-464-5450

Date Prepared: <u>5//14/2023</u>

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Per	iod: April 1, 2022 to	March 31, 2023	
Contracting State Agency Name: SUN Contract Number: 505795 Contract Term: 7/1/2021 to Contractor Name: Pediatric Service G Contractor Address: 750 East Adams Description of Services Being Provide Pediatric Intensive Care Unit	6/30/2024 roup, LLP_ Street, Syracuse, NY	13210	Code: 28110
Scope of Contract (Choose one that Analysis	on Resea Computer Programm ices Survey Mental He	ing Other : ving Enviror ealth Services	Training IT consulting Imental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1221.00	1	416	\$65,463.00
Total this page Grand Total	1	416 416	\$65,463.00 \$65,463.00
Name of person who prepared this rep Preparer's Signature: Title: Practice Administrator Date Prepared: 5//14/2023	<u> </u>		_

Exhibit Y FORM B		OSC Use Reporting Category	g Code:
	State Consultant Se	rvices	1.01.00
Contr	ractor's Annual Emplo	yment Report	
Report I	eriod: April 1, 2022 to	March 31, 2023	
Contracting State Agency Name: Secontract Number: 505800 Contract Term: 7/1/2021 to Contractor Name: Pediatric Services Contractor Address: 750 East Adam Description of Services Being Provinces	o6/30/2023 c Group, LLP ns Street, Syracuse, NY	13210	Code: 28110 Services
Scope of Contract (Choose one the Analysis Evaluate Data Processing Architect Scheduler Accounting Auditing Scope of Contract (Choose one the Analysis Evaluate School Architect School Auditing Auditing Evaluate Scoon Auditing Evaluate School Auditing Evaluate Scoon Auditing Evaluate School Auditing Evaluate School Evaluate	ation	ing Other ying Enviro ealth Services	Training IT consulting nmental Services Other Consulting
Employment Category	Number of	Number of Hours	Amount Payable Under the Contract
29-1221.00	Employees 1	Worked 166	\$24,756.00
Z9-1221.00			
	<u></u>		
	1111		
			1
			<u> </u>
		1.00	924.756.00
Total this page	1	166 166	\$24,756.00 \$24,756.00
Grand Total	<u> </u>	100	Ψ2,7-0.00

Preparer's Signature: Much Prepared this report: Farran McManon	
Preparer's Signature:	
Title: Practice Administrator	Phone #: 315-464-5450

Date Prepared: <u>5//13/2023</u>

Use additional pages if necessary)

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FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Contracting State Agency Name: SUN Contract Number: 506049 Contract Term: 9/1/2021 to Contractor Name: Pediatric Service G Contractor Address: 750 East Adams Description of Services Being Provided	8/3/2024 roup, LLP Street, Syracuse, NY	13210	Code: <u>28110</u>
Scope of Contract (Choose one that Analysis	on Resear Computer Programmi ices Survey Mental He	ing Other : ring Enviror ealth Services	Training IT consulting Imental Services Other Consulting
Employment Category	Number of	Number of Hours	Amount Payable
	Employees	Worked	Under the Contract
29-1221.00	1	2,080	\$255,644.00
			·
Total this page	1	2,080	\$255,644.00
Grand Total	1	2,080	\$255,644.00
Name of person who prepared this rep	port: Farrah McMah		
Title: Practice Administrator Phone #: 315-464-5450			5450
Date Prepared: <u>5//13/2023</u>			
Use additional pages if necessary)			Page 1 of 1

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OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2022 to March 31, 2023			
Contracting State Agency Name: SUN	NY Upstate Medical U	niversity Agency	Code: 28110
Contract Number: 506111 Contract Term: 3/14/2022 to	3/13/2025	,	
Contract Term: 3/14/2022 to Contractor Name: Pediatric Service G			
Contractor Address: 750 East Adams	•	13210	
Description of Services Being Provide			
Scope of Contract (Choose one that		-	
Analysis Evaluation			Training
Data Processing Engineering Architect Serv	Computer Programmi		IT consulting mental Services
Health Services		alth Services	michtai Services [_]
Accounting Auditing Auditing			Other Consulting [
0 = 0 =			
Employment Category	Number of	Number of Hours	Amount Payable
<u> </u>	Employees	Worked	Under the Contract
29-1126.00	1	832	\$41,499.93
Total this page	1	832	\$41,499.93
Grand Total	1	832	\$41,499.93
Name of person who prepared this/rep	oort:⊿ <u>Farrah</u> McMaho	on	
Preparer's Signature: WWW O VWWWWW			
Title: Practice Administrator		Phone #: <u>315-464-</u>	5450
Date Prepared: <u>5//13/2023</u>			
Use additional pages if necessary)			Page 1 of 1

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OSC Use Only:	-
Reporting Code:	
Category Code:	

Contractor's Annual Employment Report				
Report Period: April 1, 2022 to March 31, 2023				
Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: 506137 Contract Term: 3/31/2022 to 3/30/2025 Contractor Name: Pediatric Service Group, LLP Contractor Address: 750 East Adams Street, Syracuse, NY 13210 Description of Services Being Provided Dual Diagnosis Program Direction				
Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Training Other IT consulting Engineering Architect Services Surveying Environmental Services Health Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting Othe				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
19-3039.00	1	1,040	\$203,388.00	
		1.040	#202.288.00	
Total this page	1	1,040	\$203,388.00	
Grand Total	1	1,040	\$203,388.00	
Name of person who prepared this report: Farrah McMahon Preparer's Signature: Phone #: 315-464-5450				
Date Prepared: 5//13/2023				
Use additional pages if necessary)			Page 1 of 1	

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2022 to March 31, 2023				
Contracting State Agency Name: SUNY Upstate Medical University Agency Code: 28110 Contract Number: 506189 Contract Term: 7/1/2022 to 6/30/2027 Contractor Name: Pediatric Service Group, LLP Contractor Address: 750 East Adams Street, Syracuse, NY 13210 Description of Services Being Provided Pediatric Endocrinologist Services				
Scope of Contract (Choose one that Analysis	on Resear Computer Programmi ices Survey Mental He	ing Other ring Enviror alth Services	Training IT consulting Immental Services Other Consulting	
Employment Category	Number of	Number of Hours Worked	Amount Payable Under the Contract	
	Employees 1	1,560	\$112,220.25	
29-1221.00	<u> </u>	1,500	Ψ112,220.23	
		-		
Total this page	1	1,560	\$112,220.25	
Grand Total	1	1,560	\$112,220.25	
Name of person who prepared this report: Farrah McMahon Preparer's Signature: Way ()				
Title: Practice Administrator		Phone #: 315-464-	5450	
Date Prepared: <u>5//13/2023</u>				
Use additional pages if necessary)			Page 1 of 1	

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Acport 1 cr				
Contracting State Agency Name: SUN Contract Number: 506298 Contract Term: 8/29/2022 to Contractor Name: Pediatric Service Gr Contractor Address: 750 East Adams Subscription of Services Being Provided	8/28/2027 roup, LLP_ Street, Syracuse, NY	13210	Code: 28110	
Scope of Contract (Choose one that Analysis	on Resear Computer Programmi ices Survey Mental He	ing Other I ring Environ alth Services	Training Training Training Training The consulting The co	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
29-1221.00	1	1,213	\$148,003.33	
		1 212	\$149,002,22	
Total this page	1	1,213	\$148,003.33	
Grand Total	1	1,213	\$148,003.33	
Name of person who prepared this report: Farrah McMahon Preparer's Signature: MWM (WWW)				
Title: Practice Administrator Phone #: 315-464-5450				
Date Prepared: <u>5//13/2023</u>				
Use additional pages if necessary)			Page 1 of 1	