

AC 3271-S (Effective 4/12)

FORM A

**New York State Consultant Services
Contractor's Planned Employment**
From Contract Start Date Through the End of the Contract Term

State Agency Name: OCFS

State Agency Department ID: 3400000

Agency Business Unit: CFS01

Contractor Name: Medrite LLC

Contract Number: C030363

Contract Start Date: 9/1/2023


Contract End Date: 8/31/2028

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Downstate PA 29-1071.00	5.00	1,304.00	\$173,053.84
Downstate NP 29-1171.00	3.00	1,453.00	\$189,413.08
Downstate LMSW 21-1022.00	2.00	3,760.00	\$239,512.00
Downstate LP 19-3033.00	2.00	3,760.00	\$420,142.40
Downstate RN 29-1141.00	9.00	2,800.00	\$243,712.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	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	21.00	13,077.00	\$1,265,833.32
Grand Total	21.00	13,077.00	\$1,265,833.32

Name of person who prepared this report: Bill Miller

Title: Senior Vice President

Phone #:

Preparer's Signature: 

Date Prepared: 10/20/2024

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(Use additional pages, if necessary)