OSC Use Only:

Reporting Code: Category Code:

Date Contract Approved:

## FORM A

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

State Agency Name: Department of Corrections & Community
Supervision Agency Code: 10160 Contractor Name: RubiconMD, Inc
Contract Number:
Contract Start Date: 4/1/24 (estimated)
Contract End Date: 3/31/27

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-1229-00	257	We charge per eConsult - Proposal request up to 1,800 eConsults/mth	\$100/eConsult - min monthly commitment 300 eConsults
		,	

Total this page	257	We don't charge hourly, just per eConsult - Proposal request up to 1,800 eConsults/mth	\$100/eConsult
Grand Total	257		Min. Commitment \$30,000/mth

\$510,000 AM

Name of person who prepared this report: Jessica Duryea

Title: Phone #: 330-620-8469 Preparer's Signature:

Date Prepared:1/24/24

(Use additional pages, if necessary) Page of

## FORM B

OSC Use Only:

Reporting Code: Category Code:

State Consultant Services
Contractor's Annual Employment Report

Report Period: April 1, to March 31,