

Attachment I - Request for Proposals

FORM A

OSC Use Only:

Reporting Code:

Category Code:

Date Contract Approved:

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

State Agency Name: OASAS
Contractor Name: The Mental Health
Association of New York City dba
Vibrant Emotional Health

Agency Code: 3670000

Contract Number:

Contract Start Date: September 1,
2024

Contract End Date: August 31, 2029

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
21-1019.00	18.70	170170	\$5,201,525.27
19-3033.00	1.70	15470	\$794,304.02
21-1019.00	2.00	18200	\$297,190.27
19-3033.00	0.50	4550	\$183,071.70
19-3033.00	1.00	9100	\$490,068.87
21-1019.00	0.05	455	\$18,267.55
21-1019.00	0.40	3640	\$217,326.34
11-9151.00	0.15	1365	\$67,538.96
11-3051.01	0.05	455	\$25,420.09
19-4099.02	0.03	273	\$12,212.84
13-1151.00	0.05	455	\$17,399.18
11-1021.00	0.05	455	\$11,080.43
11-1021.00	0.05	455	\$11,047.79
15-2031.00	0.05	455	\$19,678.49
21-1019.00	0.05	455	\$32,724.43
15-2031.00	0.05	455	\$18,307.17
15-1299.09	0.03	273	\$9,294.43
Total this page	24.91	226,681	\$7,426,457.81
Grand Total	25.09	228,319	\$13,343,039.00

Name of person who prepared this report:

Title: *Interim CEO & President*

Phone #:

Preparer's Signature: *Mary Alison Lewis*

Date Prepared: *5/4/2024*

(Use additional pages, if necessary)

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2024

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Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
27-2012.04	0.03	273	\$13,181.16
13-1082.00	0.05	455	\$34,380.72
11-9151.00	0.10	910	\$55,658.68
Total this page	0.18	1638	\$ 103,220.56
Grand Total	25.09	228319	\$13,343,039.0

Name of person who prepared this report:

Title: *Interim CEO & President*

Phone #:

Preparer's Signature: *Mary Alison Lewis*

Date Prepared: *5/4/2024*

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2024

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Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Contractual			\$428,748.00
Space/Properties/Utilities			\$557,756.46
Operating Expenses			587,665.78
Indirect Costs/Admin			\$2,130,880.42
Fringes			\$2,108,309.95
Total this page			\$5,813,360.61
Grand Total			\$13,343,039

Name of person who prepared this report:

Title: *Interim CEO & President*

Phone #:

Preparer's Signature: *Mary Alison Lewis*

Date Prepared: *5/4/2024*

(Use additional pages, if necessary)

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