

Hudson Valley Developmental
Disabilities Service Office
3660236

FORM B

New York State Consultant Services
Contractor's Annual Employment Report
 Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: NYS OPWDD Hudson Valley DDSOO

Contract Number: C0SHV00568

Agency Business Unit: 51210

Agency Department ID: 3660236

Contract Term: 5/1/2023 to 4/30/2028

Contractor Name: Dominion Temp Services Inc.

Contractor Address: 718 Walt whitman RD., Suite 1413, Melville, NY

11747 Description of Services Being Provided: Patient Companion

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
COMPANION	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	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	0.00	0.00	\$ 0.00
Grand Total			

Name of person who prepared this report: Margaret Salisu

Title: President

Phone #: 5165245030

Preparer's Signature: Margaret Salisu

Date Prepared: 5/13/2025

Report Period: April 1, 2024 to March 31, 2025

Description of Services Being Provided: Patient Companion

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	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	0.00	0.00	\$ 0.00
Grand Total	0.00	0	\$0.00

Preparer's Signature: [Signature]

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: NYS OPWDD Hudson Valley DDSOO

Contract Number: C0SHV00573

Agency Business Unit: 51210

Agency Department ID: 3660236

Contract Term: 5/1/2023 to 4/30/2028

Contractor Name: Cedar Park Group, Inc.

Contractor Address: 2 Lawson Ave. Suite 11, East Rockaway, NY 11518

Description of Services Being Provided: Patient Companion

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
PATIENT COMPANIONS	2	45	1440
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	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	0.00	0.00	\$ 0.00
Grand Total	2	45	1440

Name of person who prepared this report: SAMANTHA TERLINE

Title: PRESIDENT

Phone #: 5165350613

Preparer's Signature: 

Date Prepared: 04/03/2025

FORM B

New York State Consultant Services
Contractor's Annual Employment Report
 Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: NYS OPWDD Hudson Valley DDSOO
 Contract Number: C0SHV00575
 Agency Business Unit: 51210
 Agency Department ID: 3660236
 Contract Term: 5/1/2023 to 4/30/2028
 Contractor Name: Clinical Staffing Resources Corp
 Contractor Address: 420 Broadway, 3rd Floor, Brooklyn, NY 11211
 Description of Services Being Provided: Patient Companion

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
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	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	0.00	0.00	\$ 0.00
Grand Total			

Name of person who prepared this report:

Title:

Preparer's Signature:

Date Prepared:

Phone #:

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 24 to March 31, 25

Contracting State Agency Name: NYS OPWDD HUDSON VALLEY DDSOO
 Contract Number: COSHV00571 Agency Business Unit: 51210
 Contract Term: 05/01/2023 to 04/30/2028 Agency Department ID: 3660236
 Contractor Name: UNITED STAFFING
 Contractor Address: 1385 BROADWAY SUITE 1005, NY, NY 10018
 Description of Services Being Provided: PATIENT COMPANION

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
	19.00	451.75	\$14,752.50
	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
	0.00	0.00	\$0.00
Total this Page	19.00	451.75	\$ 0.00
Grand Total	19.00	451.75	14,752.50

Name of person who prepared this report: Tracey Fox

Title: VP Operations

Phone #: 212.743.0238

Preparer's Signature: 

Date Prepared: 4/10/2025

FORM B

**New York State Consultant Services
Contractor's Annual Employment Report**
Report Period: April 1, 24 to March 31, 25

Contracting State Agency Name: NYS OPWDD HUDSON VALLEY DDSOO
 Contract Number: COSHV00624 Agency Business Unit: 51210
 Contract Term: 09/01/23 to 08/31/28 Agency Department ID: 3660236
 Contractor Name: VIRTUAL MEDICAL CARE
 Contractor Address: 1219 NORTH FOREST RD. WILLIAMSVILLE, NY 14221
 Description of Services Being Provided: TELEPHONE TRIAGE

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
Registered Nurses	27	0.00	\$0.00
Administration	4.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	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	31.00	0.00	\$ 0.00
Grand Total	31.00		

Name of person who prepared this report: Annette Phillips RN

Phone #: 716-395-3533

Title: Vice President Clinical Services

Preparer's Signature: Annette Phillips RN

Date Prepared: 04/07/2025

FORM B

**New York State Consultant Services
Contractor's Annual Employment Report**
Report Period: April 1, 24 to March 31, 25

Contracting State Agency Name: NYS OPWDD HUDSON VALLEY DDSOO
 Contract Number: TOSHV00785 Agency Business Unit: 51000
 Contract Term: 08/01/2024 to 07/31/2025 Agency Department ID: 3660200
 Contractor Name: ELITE PHARMACY CONSULTING SERVICES INC
 Contractor Address: 1225 FRANKLIN AVENUE, STE 325, GARDEN CITY, NY 11530
 Description of Services Being Provided: MEDICATION REVIEW

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
INDEPENDENT CONSULTANT @\$30/REVIEW AUG.24 (179 REVIEWS)	0.00	0.00	\$5,370.00
@\$30/REVIEW SEPT.24 (70 REVIEWS)	0.00	0.00	\$2,100.00
@\$30/REVIEW OCT.24 (9 REVIEWS)	0.00	0.00	\$270.00
@\$30/REVIEW DEC.24 (6 REVIEWS)	0.00	0.00	\$180.00
@\$30/REVIEW JAN.25 (32 REVIEWS)	0.00	0.00	\$960.00
@\$30/REVIEW FEB.25 (1 REVIEW)	0.00	0.00	\$30.00
@\$30/REVIEW APR.25 (10 REVIEWS)	0.00	0.00	\$300.00
@\$30/REVIEW MAY.25 (45 REVIEWS)	0.00	0.00	\$1,350.00
@\$30/REVIEW JUN.25 (45 REVIEWS)	0.00	0.00	\$1,350.00
@\$30/REVIEW JUL.25 (45 REVIEWS)	0.00	0.00	\$1,350.00
@\$30/REVIEW AUG.25 (45 REVIEWS)	0.00	0.00	\$1,350.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	0.00	0.00	\$14,610.00
Grand Total			

Name of person who prepared this report: RITA AMIGDALOS

Title: PRESIDENT

Phone #: (516) 512.8958

Preparer's Signature: _____



Report Period: April 1, 24 to March 31, 25

Contracting State Agency Name:	NYS OPWDD HUDSON VALLEY DDSOO		
Contract Number: TOSHV00785	Agency Business Unit: 51000		
Contract Term: 08/01/2024 to 07/31/2025	Agency Department ID: 3660200		
Contractor Name: ELITE PHARMACY			
Contractor Address: NO ADDRESS ON FILE			
Description of Services Being Provided:	MEDICATION REVIEW		

☐ 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
Independent consultant Pharmacist med	0.00	0.00	\$0.00
reun	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	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	0.00	0.00	\$ 0.00
Grand Total			\$18,420.00

Date Prepared: / /