


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: Department of Health | |
| State Agency Department ID: 3450000 | Agency Business Unit: DOH01 |
| Contractor Name: Panha Solutions Inc | Contract Number: PH68620 |
| Contract Start Date: 11/17/2025 | Contract End Date: 11/16/2027 |

| Employment Category | Number of Employees | Number of Hours to be Worked | Amount Payable Under the Contract |
|--|---------------------|------------------------------|-----------------------------------|
| Software Architect (Expert) Hourly Bill Rate: \$98.71 | 1.00 | 4160.00 | \$410,633.60 |
| | 0.00 | 0.00 | \$0.00 |
| | 0.00 | 0.00 | \$0.00 |
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| | 0.00 | 0.00 | \$0.00 |
| | 0.00 | 0.00 | \$0.00 |
| Total this Page | 0.00 | 0.00 | \$ 0.00 |
| Grand Total | 1.00 | 4160.00 | \$410,633.60 |

Name of person who prepared this report: Philip Whittingum
 Title: Project Coordinator Phone #: 518-485-2122
 Preparer's Signature: 
 Date Prepared: 11/13/2025