

CONTRACTOR DISCLOSURE FORM A

AC 271-S (Effective 4/12)

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

State Agency Name: NYS Workers' Compensation Board
 State Agency Department ID: 3560000
 Agency Business Unit: WCB01
 Contractor Name: OptumInsight
 Contract Start Date: 09/01/2018

Contract Number:
C140374
Contract End Date: 08/31/2023

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
27-3041.00 (editors)	3	120	\$0, please see contract
43-9031.00 (desktop publishers)	1	30	\$0, please see contract
15-2041.02 (clinical data manager)	1	40	\$0, please see contract
11-1021.00 (GMs/ Operation Mgrs)	2	100	\$0, please see contract
Total this page	7	290	\$0, please see contract
Grand Total	7	290	\$0, please see contract

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Preparer's Signature: 
 Date Prepared: 11/30/2018

Use additional pages if necessary