OSC	Use	Onl	v

Reporting Code:

Category Code:

Date Contract Approved:

Form A

State Consultant Services – Contractor's Planned Employment From Contract State Date Through the End of the Contract Term

State Agency Name: <u>SUNY Upstate Medical University</u>

Agency Code:

28110

Contractor Name:

Upstate Family and Preventive

Contract Number:

C-505243

Medicine, Inc.

Contract Start Date

7/1/2020

Contract End Date:

6/30/2025

Employment Category/Description	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
43-3021.02 Billing Clerk	1.0	2080	\$389,239
43-9061.00 Clerk	2.34	4867	\$978,739
31-9091.00 Dental Assistant	1.34	2787	\$511,185
29-2021.00 Dental Hygienist	1.0	2080	\$673,570
31-9092.00 Medical Assistant	2.0	4160	\$836,529
29-2061.00 LPN	3.0	6240	\$1,533,560
29-1141.00 RN	3.0	6240	\$2,020,715
43-1011.00 Administrative Coordinator	1.0	2080	\$673,570
29-1031.00 Dietician/Nutritionist	1.0	2080	\$663,329
21-1091.00 Diabetic Educator	.40	832	\$368,475
21-1021.00 Family Advocate	1.0	2080	\$418,264
21-1022.00Social Worker	1.0	2080	\$663,329
29-1171.00 NP	3.0	6240	\$2,763,543
Total This Page			
Grand Total			\$12,494,048

Name of person who prepared this report Cara Dailey

Title:

Phone #:

315-464-4682

Preparer's Signature

Date Prepared: