OSC Use Only:

Reporting Code: Category Code:

Date Contract Approved:

FORM A

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

State Agency Name: NYS Department of Health Agency Code: 12000

Contractor Name: Island Peer Review Organization, Inc. Contract Number: C033822

Contract Start Date: 10/01/2019 Contract End Date: 09/30/2024

	Number of	Number of hours	Amount Payable
Employment Category	Employees	to be worked	Under the Contract
19-1041.00 Epidermiologist			
Year 1 – Hourly rate \$64.56	4	7744	\$499,953
Year 2 – Hourly rate \$66.01	4	7574	\$499,960
Year 3 – Hourly rate \$67.49	6	9452.5	\$637949
Year 4 – Hourly rate \$69.01	6	11250	\$776,363
Year 5 – Hourly rate \$70.57	6	11250	\$793,913
Total this page		46952.5	\$ 3,187,499
·			<u> </u>
Grand Total		46952.5	\$ 3,187,499

Name of person who prepared this report:

Title: Sr. Vice President and Chief Financial Officer

Preparer's Signature:

Date Prepared: 2/22/2022

(Use additional pages, if necessary)

Page 1 of 1

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