

ATTACHMENT H Consultant Disclosure Form A

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 Office of Mental Health
Contractor Name: Precision Health, Inc.

Agency Code: 3650000
Contract Number: OMH01-
C201710-3650547

Contract Start Date: 12/1/2022

Contract End Date: 11/30/2027

Employment Category ¹	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-1224.00	1	9750	\$426,000.00
29-2034.00	1	9,750	\$213,000.00
Total this page	0	0	
Grand Total	2	19,500	\$639,000.00

Name of person who prepared this report: Nate Wise
Title: Contract Management Specialist Trainee II

Phone #: (518) 473-2258

Preparer's Signature: *Nate Wise*

Date Prepared: 11/22/2022

(Use additional pages, if necessary)

1. (Note: Access the O*NET database, which is available through the US Department of Labor's Employment and Training Administration, on-line at online.onetcenter.org to find a list of occupations.)