## 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: Health State Agency Department ID: 3450000 Contractor Name: Essey, LLC Contract Start Date: 10/01/2021

Agency Business Unit: DOH01 Contract Number: C035805 Contract End Date: 09/30/2022

| Employment Category                   | Number of<br>Employees | Number of Hours<br>to be Worked | Amount Payable<br>Under the Contract |
|---------------------------------------|------------------------|---------------------------------|--------------------------------------|
| 29-1141.04 Clinical Specialist        | 130.00                 | 1,092.50                        | \$65,471,581.50                      |
| 29-2072.00 Medical Records Specialist | 325.00                 | 1,006.25                        | \$71,795,431.50                      |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
|                                       | 0.00                   | 0.00                            | \$0.00                               |
| Total this Page                       | 455.00                 | 2,098.75                        | \$137,267,013.00                     |
| Grand Total                           |                        |                                 |                                      |

Name of person who prepared this report: Doug Arms

Title:

Preparer's Signature: \_ Date Prepared: 10/22/2021

Phone #: 212-916-0894

(Use additional pages, if necessary)

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