


AC 3271-S (Effective 4/12)

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: NYS Office for People With Developmental Disabilities
State Agency Department ID: 3660243 Agency Business Unit: OPD01 Contract
Contractor Name: Mobile Health Medical Services, PC Number: C0SCO0071
Contract Start Date: January 1, 2024 Contract End Date: December 31, 2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
29-1216.00	1	780	\$37,000
29-1171.00	1	1,560	\$101,500
29-1141.04	1	1,560	\$59,000
11-1011.00	2	3,120	\$340,000
11-3012.00	5	9,360	\$608,400
41-3091.00	1	1,560	\$52,500
43-6013.00	8	12,480	\$262,400
43-6014.00	9	24,960	\$499,200
Total this Page	28	55,380	\$1,960,000
Grand Total	28	55,380	\$1,960,000

Name of person who prepared this report: Andrew Shulman
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Date Prepared: 1/26/2024