Upstate Medical University

3320211

OSC Use Only:	
Reporting Code:	
Category Code:	

Keport P	eriod: April 1, 2015	to March 31, 2016	
Contracting State Agency Name: <u>SL</u> Contract Number: <u>C-502461</u>		University Agend	cy Code: 281XX 3320211
Contract Term: 8/1/2010 to Contractor Name: Department of Me at Syracuse, Inc	edicine Medical Service	ce Group at the SUNY	Health Science Center
Contractor Address: 750 East Adams Description of Services Being Provid	s Street, Syracuse, NY ed EKG Reading	13210	
Scope of Contract (Choose one that Analysis	ion Resea Computer Programm vices Survey Mental He		Training [] IT consulting [] Inmental Services [] Other Consulting []
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Total this page		693	\$61,750.00
Grand Total			\$61,750.00
Name of person who prepared this report of Preparer's Signature:	Matthew Hutz		····
Title: Chief Administrator Date Prepared: 5/13/2016		Phone #: <u>315-464-</u> 8	282
Use additional pages if necessary)			Page of

Exhibit Y

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Pe	riod: April 1, 2015 to	March 31, 2016	
Contracting State Agency Name: SUI Contract Number: C-502543 Contract Term: 1/1/2014 to Contractor Name: Upstate Urology Ir Contractor Address: 750 East Adams Description of Services Being Provide	12/31/2018 nc Street, Syracuse, NY		7 Code: XXIX 3320211
Scope of Contract (Choose one that Analysis Evaluati Data Processing Engineering Architect Serv Health Services \(\subseteq \) Accounting Auditing	on Resea Computer Programm rices Survey Mental He	ing Other /ing Environ calth Services	Training IT consulting nmental Services Other Consulting
Employment Category 29-1063.00	Number of Employees 0	Number of Hours Worked 120	Amount Payable Under the Contract \$19,900.00 \$0.00
Total this page Grand Total Name of person who prepared this rep	ort: Matthew Hutz		\$19,900
Preparer's Signature: Title: Chief Administrator Date Prepared: 5/13/2016 Use additional pages if necessary)	ort: Maπnew Hutz	Phone #: <u>315-464-</u>	8282 Page of

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Po	eriod: April 1, 2015 (to March 31, 2016	
Contracting State Agency Name: SU Contract Number: C-502736 Contract Term: 5/1/2013 to Contractor Name: Department of Me at Syracuse, Inc Contractor Address: 750 East Adams Description of Services Being Provid	4/30/2015 edicine Medical Services Street, Syracuse NV	e Group at the SUNY	
Scope of Contract (Choose one that Analysis Evaluati Data Processing E Engineering Architect Serv Health Services Accounting Auditing E	ion Resea Computer Programm rices Survey Mental He		Training Training Troonsulting nmental Services Other Consulting
Employment Category 29-1063.0	Number of Employees 0	Number of Hours Worked 34	Amount Payable Under the Contract \$5,534.00
Total this page Grand Total Name of person who prepared this repo			\$5,534.00
Title: Chief Administrator Date Prepared: 5/13/2016 Use additional pages if necessary)		Phone #: 315-464-8	Page of

OSC Use Only:	
Reporting Code:	
Category Code:	

Report	eriou: April 1, 2015	to March 31, 2016	<u>.</u>
Contracting State Agency Name: SL Contract Number: C-502753 Contract Term: 1/1/2015 to Contractor Name: Department of Moat Syracuse, Inc. Contractor Address: 750 East Adams Description of Services Being Provid	12/31/2015 edicine Medical Services NV	ce Group at the SUNY	
			-
Scope of Contract (Choose one that Analysis	ion Resea Computer Programm rices Survey Mental Ho Paralegal P	ying Enviro calth Services Legal	Training IT consulting Immental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable
29-1063.0	3	6,084	Under the Contract \$953,964,00
Total this page			
Grand Total			
Name of person who prepared this repo	ort: Matthew Hutz		\$953,964
Title: Chief Administrator		Phone #: 315-464-8	- 1282
Date Prepared: <u>5/13/2016</u>			
Use additional pages if necessary)			Page of

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EXHIBIT Y		OSC Use Only Reporting Coo	le:
FORM B		Category Code	<u> </u>
State C	onsultant Services		
	nnual Employment R		
Report Period: April	11, ACV to March	31, <u>0</u> 767 6	
Business Unit State of NY Department Name Contract No:	Upstate Medical U	niversity Departm	nent ID#: 3320211
Contract Term: 711/7010 to 61-2012	<u>v/s</u>		
Contractor Name: 400114 Mel	ICINE MED	ical sin	100 OKOKO, CLP
Contractor Address: 475 11 UIVIS ALL	and, surc	200, SUN	DCUST, 1741-8210
Description of Services Being Provided CNY 6H-CC	Medical	Directo	7
Scope of Contract (Choose one that best Fits)			
Analysis	Research	T	raining []
Data Processing	Other	IT Consulting	
Engineering Architect Services	Surveying	Environmental	Services
Health Services Mental	Health Services		
Accounting Auditing Paraleg	al 🗌 Legal	☐ Oth	er Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Hedical Services/		OLOFTE	\$137.312
Hedreal Dweetin	<u>J</u> _	¥ 2080	/u/
1-Commun procession		= 12,001	'''''''''''''''''''''''''''''''''''''
		12-18/	
		t _N	,
		Arz mis	A13/1005
Total This Page		1	
Grand Total	\mathcal{L}	2012	#34,328
Name of Person who Prepared This Report: Prepared Signature: Title: Date Prepared: Use additional pages if necessary Phone #: Phone #: Page			

EXHIBIT Y		OSC Use Only	
FORM B		Reporting Cod Category Code	
State C	Consultant Services		
	nnual Employment Re		
Report Period: Apri	1 1, 20\ Sto March 3	11, <u>201</u> 6	
Business Unit State of NY Department Name	Upstate Medical Uni	iversity. Departn	nent ID#: 3320211
Contract No: C-303X/4	W5 4 2 1 3 2	<u> </u>	<u> </u>
19(1)	2015		<u> </u>
Contractor Name: Family Notif in	- • -	WICE BYON	PICER
Contractor Address: 475 170 M2, 100	ane, suite 20	o, entracc	181, NY 13210
Description of Services Being Provided	1) Cetyly SIN	unat en	indaga ration
Scope of Contract (Choose one that best Fits)			
Analysis	Research	Te	raining
Data Processing	Other I	IT Consulting	
Engineering Architect Services	Surveying [Environmental	Services
Health Services			
Accounting Auditing Parales	gal 🗌 Legal	☐ Oth	er Consulting
Employment Category	Number of	Number of	Amount Payable
VPM195- HOLMIN + Clinical	Employees	Hours Worked	Under the Contract
Support of Health CAV.	~ w 10 50	40 10 W. 40	
, , , , , , , , , , , , , , , , , , ,	•	~ 30 k 7080	TOLIO K- SESOID/MO.
3		1-17 mas	1600 11
		12100	010 01 0-11
		** 5 mus	and to the state of
, and the second			MACOCOCO 12 /PA.
		1	#1/12 x 2 mus
Total This Page	4.20	1	- I dry was
Grand Total	000	15,600	W to 20220 CM
Name of Person who Prepared This Report HWO 600 Preparer's Signature: Title: Date Prepared: Phone #: Phone #:			
Use additional pages if necessary		Page	of

EXHIBIT Y		OSC Use Only	/3
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FORM B		Category Cone	3 .
State C	Consultant Services		
	nnual Employment P		
Report Period: Apri	il 1, 2015 to March	31, 2016	
Business Unit State of NY Department Name	Upstate Medical U	niversity Departn	nont ID#: 3320211
Contract Term: 7/1/2010 to (220)) 05		
Contractor Name: Family wedicie	ne medica	SCHOLE C	NULP CLP
Contractor Address: 1575 / VING 40	eaux, suk	Lev, Syra	ente My 15HO
Description of Services			had it
Being Provided TWGi(1017) 5(voices at 0	rundaga	Nation Health
Scope of Contract (Choose one that best Fits)			Cent
Analysis	Research	Ti	raining 🔲
Data Processing Computer Programming	; 🔲 Othe	r IT Consulting	
Engineering Architect Services Surveying Environmental Services			
Health Services Mental Health Services			
Accounting Auditing Paraleg	gal 🗌 Lega	l 🗌 Oth	er Consulting
Employment Category	Number of	Number of	Amount Payable
100	Employees Property of the Employees	Hours Worked	Under the Contract
Marca Physilan Sven	1.65 178	34/32	*************************************
		1,65 FTE	- 2010, J.4 // M
		¥ 7080	1.12005
		12	* 3/14 /3
		for 3mis	
		70.0,,,,	
Total This Page			···
Grand Total	1,65	858	76562
Name of Person who Prepared This Report AML ROUT Preparer's Signature: Title: Date Prepared: Phone #:			
Use additional pages if necessary		Page	

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Nan Contract Number: C-502890	ne : <u>SUNY Upstate Medica</u>	University Agend	y Code: XXXX
Contract Term: 1/20/2011	to 12/21/2015	•	3320211
Contractor Name: Department	t of Medicine Medical Servi	ica Croup at the Oliver	** ** - · -
at Syracuse, Inc		ice Group at the SUNY	Health Science Center
Contractor Address: 750 East Description of Services Being	Adams Street, Syracuse, N	Y 13210	
Description of Services Being	Provided Nurse Practitions	ers	
Scope of Contract (Chan			
Scope of Contract (Choose on Analysis E			
Data Processing	Computer Programs	arch []	Training [
Engineering Archite	et Services Surve		IT consulting mmental Services
Health Services Accounting Auditi	Mental H	calth Services	idinental Belvices [_]
Auditi	ng 🗌 Paralegal 🗌	Legal 🔲	Other Consulting [
Employment Category	Number of	Number of Hours	A
	Employees	Worked	Amount Payable Under the Contract
29-1071.00	1	1,559	\$208,885.00
, , , , , , , , , , , , , , , , , , , ,			
Total this page Grand Total			
			\$272,985.00
Name of person who prepared the	is proort: Matthew Hutz		
Preparer's Signature:	18		<u> </u>
Title: Chief Administrator			
Date Prepared: <u>5/13/2016</u>		Phone #: 315-464-8;	282
2/12/1010			

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016

	21.04. April 1, 2013	D MINITED 31, 2016	
Contracting State Agency Name: SU Contract Number: C-503026	JNY Upstate Medical	University Agend	cy Code: 280 X0
1 Contract Mulliper, C-303026			3320211
Contract Term: 7/1/2011 to	<u>6/30/2016</u>		
Contractor Name: Department of Me at Syracuse, Inc	edicine Medical Servic	e Group at the SUNY	Health Science Center
Contractor Address: 750 East Adams	Street, Syracuse, NY	13210	
Description of Services Being Provid	ed Physician services		
Scope of Contract (Choose one that			
Analysis Evaluati		_, <u> </u>	
Data Processing	ion Resear Computer Programmi	. =	Training
Engineering Architect Serv			IT consulting
Health Services		alth Services	nmental Services 🔲
Accounting Auditing	Paralegal [Legal	Od C
		Degai [Other Consulting
Employment Category	Number of	Number of Hours	Amount Payable
29-1063.00	Employees	Worked	Under the Contract
29-1063.00	7	15,204	\$1,806,624.00
29-10/1.00	6	13,728	\$805,481.00
Total this page			
Grand Total			
		· · · · · · · · · · · · · · · · · · ·	\$2,612,105.00
Name of person who prepared the repo	rt: <u>Matthew Hutz</u>		
Preparer's Signature:		-	<u> </u>
Title: Chief Administrator		Phone #: 315-464-8	282
Date Prepared: <u>5/13/2016</u>	.		
Use additional pages if necessary)			Page of

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

C		T	
Contracting State Agency Name: <u>SUI</u>	<u>NY Upstate Medical L</u>	Juiversity Agenc	y Code: XXXX
Contract Number: <u>C-503037</u>	c lan lant c		3320211
Contract Term: 7/1/2011 to	6/30/2016	- Character CIDICI	T-14-C to G
Contractor Name: Department of Med at Syracuse, Inc	dicine Medical Service	e Group at the SUNY	Health Science Center
Contractor Address: 750 East Adams	Street Syroonce MV	12210	11 -
Description of Services Being Provide	of Staff Services	13210	
	o bian bervices		
		_,	
A THE COLUMN TO			
6		,	
Scope of Contract (Choose one that Analysis Evaluation		r. [" "]	- -
Data Processing		rch 🔲	Training
Engineering Architect Serv	Computer Programm		IT consulting
Health Services		alth Services	nmental Services 🔲
Accounting Auditing			Other Consulting
	i alalogai []	Legai [_]	Onler Consuming [
Employment Category	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
	0	0	\$0.00
43-9061.00 - office clerks	44	91,520	\$1,869,643.00
31-9092.00 - Medical Assit	7	14,560	\$211,153.00
29-2061.00 - LPN	6	12,480	\$300,023.00
29-2012.00 - Medical Tech	2	4,160	\$78,976.00
29-1111.00 - RN	7	14,560	\$387,764.00
43-6013.00 - Medical Sec	23	47,840	\$726,116.00
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Total this page			
Grand Total			\$2,847,562.00
Name of pareon who present this same		W , , , , , , , , , , , , , , , , , , ,	\$2,0 F7,5 V2.00
Name of person who prepared this rape			
Preparer's Signature:	HV		
Title: Chief Administrator Phone #: 315-464-8282			- B282
Date Prepared: 5/13/2016		· · · · · · · · · · · · · · · · · · ·	
Use additional pages if necessary)			Page of

OSC Use Only:	
Reporting Code:	
Category Code	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name :SU	NV Unstate Medical	T.7 *	
[~~		University Ager	cy Code: XXXX
Contract Term: 5/1/2012	4/30/2017		3320211
Contractor Name: Department of Me	edicine Medical Service	e Group of the SI fary	IIW a : -
at Syracuse, Inc		o Group at tile 2014 X	Health Science Center
Contractor Address: 750 East Adams Description of Services Being Provide	s Street, Syracuse, NY	13210	<u>, , , , , , , , , , , , , , , , , , , </u>
Description of Services Being Provid	ed Hospitalist		
İ			
	<u> </u>		
Scope of Contract (Choose one that	host Stale		
[Analysis] Evaluati		rch 🗍	
Data Processing	Computer Programm		Training [
Engineering Architect Serv	/ices [7] Survey		r IT consulting 🔲
Health Services 🔀		alth Services	onmental Services 🔲
Accounting Auditing	Paralegal 🔲	Legal [Other Consulting [
		Over [1]	Other Consulting [
Employment Category	Number of	Number of Hours	Amount Payable
29-1063.0	Employees	Worked	Under the Contract
29-1003.0	15	31,200	\$4,813,470.00
			1 134.10.00
		· · · · · · · · · · · · · · · · · · ·	
Total this page			
Grand Total			
			\$4,813,470.00
Name of person who prepared this repo	rt: Matthew Hutz		
Preparer's Signature:	1/		
	<u></u>		-
Title: Chief Administrator		Phone #: 315-464-8	1282
Date Prepared: <u>5/13/2016</u>			
Jse additional pages if necessary)			Page of
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OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name :SI	JNY Upstate Medical (<u>Jniversity</u> Agenc	y Code: XXXX
Contract Number: C-503306 Contract Term: 7/1/2011 to	6/20/2016		3320211
Contractor Name: Department of M	0/30/2016	• 67• 41 CIT IN 18.6 1	
l af Syracuse Inc			
Contractor Address: 750 East Adam	s Street, Syracuse, NY	13210	•
Description of Scrvices Being Provide	led ACE Team		
Scope of Contract (Choose one tha	·	. 🗔	
Analysis		rch 🔲	Training
Engineering Architect Ser	Computer Programm		IT consulting
Health Services	Mental He	alth Services 🗌	nmental Services
Accounting Auditing	Paralegal 🔲	Legal [Other Consulting [
Emularum + C-+	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
29-1063.00	.65	1,352	\$166,479.00
29-1071.00	1	2,080	\$113194.00
	, <u></u>		
,			
	<u> </u>		
	, , , , , , , , , , , , , , , , , , , ,		
Total this page			·
Grand Total			#0.70 tag
	<u> </u>		\$279,673
Name of person who prepared this rep	ort: Matthew Hutz		
Preparer's Signature:			
Title: Chief Administrator		Phone #: <u>315-464</u> -8	- 3282
Date Prepared: <u>5/13/2016</u>			
Use additional pages if necessary)			Page of

OSC Use Only:	
Reporting Code:	
Category Code:	

	riod: April 1, 2015 to	^	
Keport Fe	100: April 1, 2015 to	1 MINION 51, 2010	
Contracting State Agency Name: SUI Contract Number: C-503347 Contract Term: 4/4/2011 to Contractor Name: Upstate Urology In Contractor Address: 750 East Adams Description of Services Being Provide	3/31/2016 ic Street, Syracuse, NY	13210	
Scope of Contract (Choose one that Analysis Evaluati Data Processing Engineering Architect Serv Health Services Accounting Auditing	on Resear Computer Programmi ices Survey Mental He Paralegal	ing Other ring Environ alth Services Legal	Training IT consulting Immental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1063.00	0	124	\$42,984.00
			\$0.00
	<u> </u>		
100			
Total this page			'
Grand Total			\$42,984.00
Name of person who prepared this rep	ort: Matthew Hutz		
Preparer's Signature:	- International Flores		
Title: Chief Administrator Phone #: 315-464-8282			- 8282
Date Prepared: 5/13/2016			or the or the
Use additional pages if necessary)			Page of

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Po	eriod: April 1, 2015 :	to March 31, 2016	
Contracting State Agency Name: <u>SU</u> Contract Number: <u>C-503350</u> Contract Term: <u>1/1/2012</u> to Contractor Name: Department of Me	12/31/2016	•	cy Code: 281/19 3320211 Health Science Center
Contractor Address: 750 East Adams	Street, Syracuse, NY	13210	
Description of Services Being Provide	ed Cardiology On-Ca	ali Coverage	
Scope of Contract (Choose one that	best fits):	"	· · · · · · · · · · · · · · · · · · ·
Analysis Evaluati		=	Training 🗌
Data Processing Engineering Architect Serv	Computer Programm		IT consulting
Engineering Architect Serv		ying Enviro	nmental Services [
Accounting Auditing		ealth Services	
	Paralegal 🗌	Legal 🔲	Other Consulting 🔲
Employment Category	Number of	Number of Hours	Amount Payable
	Employees	Worked	Under the Contract
29-1063.0	8	17,520	\$73,000.00
Total this page			
Grand Total			\$720,000,00
None of a second			\$730,000.00
Name of person who prepared this repo	ort: Matthew Hutz		<u> </u>
Preparer's Signature:			
Title: Chief Administrator		Phone #: 315-464-8	-
Date Prepared: <u>5/13/2016</u>		7 Holle #, <u>3 3-404-</u> 6	202
Use additional pages if necessary)			Page of

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Reporting Code:	
reporting code,	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

		0 March 51, 2010	
Contracting State Agency Name: SU Contract Number: C-503365		University Agenc	y Code: XXIXX
Contract Term: 7/1/2013 to Contractor Name: Department of Me at Syracuse, Inc	6/30/18 edicine Medical Servic	e Group at the SUNY I	Health Science Center
Contractor Address: 750 East Adams	Street Syraouse NV	12210	<u>, </u>
Description of Services Being Provide	ed Multispecialty Me	edical Direction	
Scope of Contract (Choose one that Analysis Evaluati	_ ′		
Data Processing	Computer Programm	ırch 🔲	Training [
Engineering Architect Serv	rices T Summer		IT consulting
Health Services		ealth Services	nmental Services 🔲
Accounting Auditing	Paralegal [- =	Other Consulting [
Employment Category	Number of Employees	Number of Hours	Amount Payable
29-1063.0	5	Worked	Under the Contract
43-6011.00	1	10,088	\$1,307,025.00
	<u> </u>	2,600	\$65,769.00
		<u> </u>	<u> </u>
	<u> </u>		- -
	<u> </u>		
	<u>-</u> -	<u> </u>	
		<u> </u>	<u> </u>
	<u>.</u> .		
Total this page			
Grand Total			\$1,270,704,00
Name of person who prepared this pepo	nrt: Matthew Hut-	<u> </u>	\$1,372,794.00
Preparer's Signature:	, wattrew rutz	<u> </u>	
Title: Chief Administrator		Phone #: <u>315-464-8</u>	282
Date Propared: <u>5/13/2016</u>		<u> </u>	
Use additional pages if necessary)			Page of

OSC Use Only:	
Reporting Code:	
Category Code:	

Keport Per	riod: April 1, 2015 to	March 31, 2016	
Contracting State Agency Name :SUR	NY Unstate Medical C	Iniversity Agency	/ Code: XXXX
			3320211
Contract Term: 1/1/2014 to 12/31/2018			
Contractor Name: Upstate Urology Inc			
Contractor Address: 750 East Adams	Street, Syracuse, NY	13210	
Description of Services Being Provide	d Staff Services		
		URINAU	
Scope of Contract (Choose one that		- 191411 1-11	
Analysis Evaluation		rch 🔲	Training 🔲
Data Processing	Computer Programm:	ing 🔲 Other	IT consulting [
Engineering Architect Serv	ices 🗌 Survey		nmental Services 🔲
Health Services		alth Services 🔲	
Accounting Auditing	Paralegal 🔙	Legal 🗀	Other Consulting
E-valorement Catagory	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
29-2061.00 - LPN	1	2,080	\$56,816.00
31-9092.00 - MOA	4	8,320	\$185,428.00
43-6013.00 - Medical Sec	19	39,520	\$93,283,800.00
29-1141.00 - RN	4	8,320	\$325,861.00
29-1171.00 - NP	2	4,160	\$249,838.00
	· · · · · · · · · · · · · · · · · · ·		
			111 111 1111
	,, , , , , , , , , , , , , , , , , , ,		
Total this page			
Grand Total			\$1,750,783
			ψ1,750,765
Name of person who prepared this rep	ort: Mattnew Hutz		1.11
Preparer's Signature:			_
Title: Chief Administrator Phone #: 315-464-8282			3282
Date Prepared: 5/13/2016			
Use additional pages if necessary)			Page of

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: SU	NY Upstate Medical V	University Agency	y Code: 281x10
Contract Number: C-503473		3320211	
Contract Term: 7/1/2013 to	6/30/18		
Contractor Name: Department of Me at Syracuse, Inc	edicine Medical Servic	e Group at the SUNY I	lealth Science Center
Contractor Address: 750 East Adams	Street Surgause NV	12210	
Description of Services Being Provid	ed Clinical Care - A	IDS clinic	
	out out out	123 OmiQ	
Scope of Contract (Choose one that	hest fits):		1000
Analysis 🗍 Evaluat	ion 🔲 Resea	arch 🗌	Training 🔲
Analysis	Computer Programm		IT consulting [
Engineering Architect Ser	vices 🔲 — Survey	ying 🔲 Enviro	nmental Services
Health Services	Mental He	ealth Services 🔲	
Accounting Auditing	Paralegal 🔲	Legal 🗌	Other Consulting 🔲
	Number of	Number of Hours	A #3 # 1 1
Employment Category	Employees	Worked	Amount Payable Under the Contract
29-1063.0	1	1,809	\$221,811.00
	0	0	\$0.00
			Ψ0.00
, , , , , , , , , , , , , , , , , , ,			
	<u> </u>	10.4.0	
Total this page			
Grand Total	"		\$221,811
		<u> </u>	Ψ221,011
Name of person who prepared this rep	ort: Matthew Hutz		
Preparer's Signature:	<u> </u>		_
Title: Chief Administrator		Phone #: 315-464-8	- 3282
Date Prepared: 5/13/2016	" "	<u> </u>	
Use additional pages if necessary)			Page of

OSC Use Only:	
Reporting Code:	
Category Code	

Page

of

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name :SI	JNY Upstate Medical	University A -	
		CHIVEISHY Ag	ency Code: XXIXIX
Contract Term: <u>10/1/2013</u> to	9/30/18		3320211
Contractor Name: Department of Me	edicine Medical Service	ce Group at the SLIN	TV Uselli Seite
at Syracuse, Inc		or order at the BON	r rieann Science Center
Contractor Address: 750 East Adam	s Street, Syracuse, NY	13210	
Description of Services Being Providence	led Palliative Care se	rvices	
Scope of Contract (Change			
Scope of Contract (Choose one that Analysis Evaluat			•
Analysis Evaluat Data Processing		uch 🔲	Training 🔲
Engineering Architect Serv	Computer Programm		her IT consulting [
Health Services		yıng∐ Env	ironmental Services
Accounting Auditing	Mental Ho	ealth Services 🔲	- -
	Paralegal 🔙	Legal 🔲	Other Consulting [
	Number of		
Employment Category	Employees	Number of Hour	
29-1063.0	0	Worked	Under the Contract
43-6011.00		1,768	\$262,780
		624	\$15,360.00
		<u></u>	
Total this page			
Grand Total			
			\$278,140.00
Name of person who prepared this repo	ort: Matthew Hutz		
Preparer's Signature:			
			<u>. </u>
itle: Chief Administrator		Phone #: ¹ 315-464	I_8282
Date Prepared: 5/13/2016		<u>0 10-40-</u>	<u> </u>
Jse additional pages if necessary)			D

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contract Number: C503721

Agency Business Unit: SNY01

Contract Term: 08/01/2015 to 7/31/2020

Agency Department ID: X8XXXX

Contractor Name: Psychiatry Faculty Practice, Inc.

Contractor Address: 713 Harrison Street, Syracuse, NY 13210

Description of Services Being Provided: Psychiatry Consultation Services

☐ Data Processing ☐ Computer Pr☐ Engineering ☐ Architect Services ☐ Health Services ☐ Mental Health	search	g Environmental	
Accounting Auditing Pa Employment Category	Number of Employees	Qai Other Consul Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29.1066.00	1.00	1,040.00	\$84,405.00
	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
<u> </u>	0.00	0.00	\$0.00
Total this Page	1.00	1,040.00	\$84,405.00
Grand Total	1.00	1,040	\$84,405.00

Name of person who prepared this report: Barbara A. Svoboda

Title: Practice Plan Administrator Carbare a Leoboke

Phone #: 315-464-3119

Preparer's Signature: 🕒

Date Prepared: 05/05/2016

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April	l, 2015 to	March	31, 2016
			"

Contracting Steel	** **			
Contracting State Ag	cncy Name : <u>SU</u>	NY Upstate Medical	<u>University</u> Agenc	y Code: <u>X2X X</u> 1X0
Contract Term: 9/1/2	014 to	9/21/2010		3320211
Contractor Name: D	epartment of Me	dicine Medical Socia	e Group at the SUNY I	
Contractor Address:	750 East Adams	Street, Syracuse, NY	13210	
Description of Service	es Being Provide	d Quality Officer_	13210	
	<u> </u>			
				· ——
Scope of Contract (C	Choose one that			
Analysis	Evaluatio		rch 🔲	Training [
Data Processin	'g ∐ ^bitt €	Computer Programmices Survey	ing 🔲 Other	IT consulting [
Engineering Health Services	Architect Serv	ices Survey	ing Environ	umental Services 🔲
Accounting	Auditing [Mental He	alth Services	
	Additing [Paralegal 🗌	Legal 🗌	Other Consulting
Employment C	lategory	Number of	Number of Hours	Amount Payable
	, de 2500, y	Employees	Worked	Under the Contract
29-1063.0		0	1,040	\$147,000.00
		· <u> </u>		
,			,	
		<u> </u>		
				<u> </u>
Total this p	age		<u> </u>	
Grand Tot	al			\$147,000.00
Name of person who p	renared t ide reno	rt: Matthew Huta		VX 17,000.00
Preparer's Signature:	11 2	L IVIALITIEW HUIZ		
Title: Chief Administr	rator		***	
Date Prepared: 5/13/2			Phone #: <u>315-464-8</u>	282
Use additional pages if				
Pages II	vvssaiy)			Page of

EXHIBIT Y		OSC Use Only			
FORM B		Reporting Cod Category Code			
State C	Consultant Services				
	anual Employment I				
Report Period: Apr	il 1, <u>40'</u> 5 to Marci	h 31, <u>/ 0 l</u> / 0			
Contract No: C-503756					
Contract Term: 7/1/20/(to 1/35/76		, , , , , , , , , , , , , , , , , , ,			
Contractor Name: Family Nuclean			oup, CIP		
Contractor Address: 475 1500 3	and suite	wo, syrace	W. ny 13214		
Description of Services Being Provided 514 10000	BERLING CE.	nes at or	udaza		
Scope of Contract (Choose one that best Fits)					
Analysis	Research	T	raining 🗀		
Data Processing Computer Programming	g 🔲 Othe	er IT Consulting			
Engineering Architect Services	Surveying [Environmental	Services		
Health Services Menta	l Health Services				
Accounting Auditing Parale	gal 🗌 Legs	al 🗌 Oth	er Consulting		
Employment Category	Number of	Number of	Amount Payable		
WARTOS - AT MIN + CLIVITAL	Employees	Hours Worked	Under the Contract		
SameN+ IN Health Ctv	~ wp to	wp to	WAS IN THE		
, , , , , , , , , , , , , , , , , , , ,	 3 0	62,400	\$40 000 -		
		~30 × 2080	\$ 80,00 no		
- W W.			1/04/1/20 1		
	<u> </u>	,	# envolones +		
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	when benefits		
			or pard		
Total This Page Grand Total	Wp +0 20	W to 102 10	1100 11 11 1111		
		1 7/1 02/90	Lugar La - 11 /		
Name of Person who Prepared This Report	ne ROUT				
		4. 4.16.1	/64=700		
Date Prepared:	Phone		1 W 7 - 1 U I U		
Use additional pages if necessary		Page	e of		

OSC Use Only:	
Reporting Code:	
Category Code:	

Page

of

xeport Fo	riog: April 1, 2015	to March 31, 2016	
Contracting State Agency Name: SU Contract Number: C-503790 Contract Term: 7/1/2015 to Contractor Name: Department of Me at Syracuse, Inc Contractor Address: 750 East Adams Description of Services Being Provide	6/30/2018 dicine Medical Service	e Group at the SUNY	
Description of Services Being Provide	ed Cardiologist recru	itment	
Scope of Contract (Choose one that Analysis Evaluati Data Processing Architect Serv Engineering Architect Serv Health Services Accounting Auditing	on Resea Computer Programm ices Survey	alth Services 🔲	Training IT consulting nmental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable
29-1063.0	1	2,080	Under the Contract \$163,374.00
			\$105,574.00
	<u>.</u>		
			,,
Total this page			
Grand Total			
Name of person who prepared this report	rt: Matthew Hutz		\$163,374.00
Fitle: Chief Administrator		TM	
Date Prepared: <u>5/13/2016</u>		Phone #: 315-464-8	282
Use additional pages if necessary)			PageC

EXHIBIT Y

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services	
Contractor's Annual Employment Report	
Report Period: April 1, _2015 to March 31,2016	

Report Period: April 1, _2015 to March 31,2016						
Business Unit	State of N	Y Depa	rtment Name	Upstate Medical U	University Depar	tment ID#: 3320211
Contract No:	<u>C-503817</u>					
Contract Term:	t Term: 10/1/2015 to 9/30/2020					
Contractor Name: CPS Recruitment						
Contractor Add		4 7 th North S verpool, NY				
Description of S Being Provided	ervices	Temporary	Staffing			
Scope of Contra	ct (Choose	one that be	est Fits)			
Analysis] 1	Evaluation		Research	Т	raining
Data Processing		Computer	Programming	Othe	r IT Consulting	
Engineering	Ar	chitect Serv	ices	Surveying	Environmenta	l Services
Health Services			Mental I	Health Services		
Accounting	Audi	iting	Paralega	l Lega	ıl 🗌 Otl	ner Consulting X
Eı	mployment	Category		Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
(Calculation	Clerk 1		2	889.25	12,453.35
	Clean	er		9	4,384.50	57,102.90
	Clerk	1		3	3,110.75	39,656.55
	Clerk			1	1,870.50	24,890.02
	Drive			3	1,832.25	24,348.72
		Services Cle	rk	42	42,349.50	592,752.09
	eyboard Sp	the state of the s		4	3,534.75	45,837.93
	eyboard Sp			2	1,582.50	21,829.16
N /	1' 1000	VED A COMPANY OF THE SEA OF THE SECOND		7	C 020 25	00 005 04

Medical Office Assistant 5,930.25 99,095.24 Motor Vehicle Operator 5 3,147 42,570.36 Patient Transport 3 2,538.25 31,296.92 **Total This Page** 71,169.50 991,833.24 **Grand Total** Name of Person who Prepared This Report: Jennifer Silverio

Preparer's Signature:		
Title: System Specialist	Phone #:	315-883-5481
Date Prepared: 5/11/16		
Use additional pages if necessary		Page _1 of _2

OSC Use Only: **EXHIBIT Y** Reporting Code: Category Code: FORM B **State Consultant Services** Contractor's Annual Employment Report Report Period: April 1, 2013 to March 31, 2014 State of NY Upstate Medical University | Department ID#: 3320211 **Business Unit** Department Name Contract No: C-503817 9/30/2020 10/1/2015 **Contract Term:** to **Contractor Name: CPS** Recruitment 904 7th North Street **Contractor Address:** Liverpool, NY 13088 **Description of Services** Temporary Staffing **Being Provided** Scope of Contract (Choose one that best Fits) Analysis Evaluation Research Training Data Processing Computer Programming Other IT Consulting Engineering **Architect Services** Surveying **Environmental Services** Health Services Mental Health Services Accounting Auditing Legal Other Consulting X Paralegal **Employment Category** Number of Number of Amount Payable Under the Contract Hours Worked **Employees** Secretary 1 6 4,970.75 78.504.34 229.75 2,791.46 Sterile Supply Tech 1 Stores Clerk 1 16 13,107.25 164,269.75 Supply Assistant 12,665.50 157,664.30 16

Name of Person who Prepared This Report: Jennifer Silverio
Preparer's Signature:

Title: System Specialist
Date Prepared: 5/11/16

Phone #: 315-883-5481

Use additional pages if necessary

Total This Page

Grand Total

Page __2__ of _2__

403,229.85

1,395,063.09

30,973.25

102,142.75

			new	
EXHIBIT Y		OSC Use Only	1	
		Reporting Cod	le:	
FORM B		Category Code	9;	
Stat	e Consultant Services			
	Annual Employment I			
Report Period: A	pril 1, <u>30</u> Sto Marci	h 31, <u>40/</u> 6	,	
Business Unit State of NY Department National Contract No: (-5)	me Upstate Medical U	Iniversity Departm	nent ID#: 3320211	
Contract Term: 7/11 2015 to (4.35)	12020	· · · · · · · · · · · · · · · · · · ·		
Contractor Name: Family Medic	one medica	1 Service	Evoup, CAR	
Contractor Address: 475 HVING	lue, suite Ju	N Syrace	1,14/3210	
Description of Services Being Provided CAV DHCO	wedical bin	estim		
Scope of Contract (Choose one that best Fits)				
Analysis	Research	T's	raining 🗀	
Data Processing Computer Programm		or IT Consulting		
Engineering Architect Services	Surveying	Environmental	Services	
Health Services Me	ntal Health Services		****	
Accounting Auditing Para	alegal 🗌 Lega	al 🗌 Oth	er Consulting	
Employment Category	Number of	Number of	Amount Payable	
	Employees	Hours Worked	Under the Contract	
Medical gives Medical	1 1	0,600	-1411451/W	
Direction .		* 2060		
		12/10/14/		
,		124816		
	,			
		<u>'</u>		
Total This Page	1	12:11	11-11-11-1	
Grand Total	<u> </u>	1240	141,451	
Name of Person who Prepared This Report: White Phone #:				
Date Prepared:	Phone		7	
Use additional pages if necessary		Page	:/ of/	

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: SUNY Upstate Medical University

Contract Number: C503821 Agency Business Unit: SNY01

Contract Term: 06/01/2011 to 5/31/2016 Agency Department ID: 28(1) 10

Contractor Name: Psychiatry Faculty Practice, Inc. 3320211

Contractor Address: 713 Harrison Street, Syracuse, NY 13210 Description of Services Being Provided: Medical Direction

Scope of Contract (Choose one that best fits): Analysis						
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
Psychiatrist - 29-1066.00	4.00	1,040.00	\$156,187.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
0.00 0.00 \$0.0 0.00 0.00 \$0.0						
						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	4.00	1,040.00	\$156,187.00			
Grand Total	4.00	1,040	\$156,187.00			

Name of person who prepared this report: Barbara A. Svoboda

Title: Practice Plan Administrator

Phone #: 315-464-3119

Preparer's Signature: Taubau a Jordode

Date Prepared: 05/05/2016

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: SUNY Upstate Medical University

Contract Number: C503822 Agency Business Unit: SNY01

Contract Term: 07/01/2013 to 06/30/2016 Agency Department ID: 28/4/3

Contractor Name: Psychiatry Faculty Practice, Inc.

3320211

Contractor Address: 713 Harrison Street, Syracuse, New York 13210

Description of Services Being Provided: Psychiatry On Call Coverage Services

Scope of Contract (Choose one that b	est fits):					
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Trai	ning				
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting						
☐ Engineering ☐ Architect Services	Surveying	Environmental	Services			
☐ Health Services ☑ Mental Health	Services					
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	al 🔲 Other Consul	ting			
Employment Category	Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract					
Psychiatrists - 2-1066.00	10.00	5,148.00	\$390,000.00			
	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						
	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	10.00	5,148.00	\$390,000.00			
Grand Total	10.00	5,148	\$390,000.00			

Name of person who prepared this report: Barbara A. Svoboda

Title: Practice Plan Administrator

Phone #: 315-464-3119

Preparer's Signature: <u>barbare</u> Quobarle

Date Prepared: 05/05/2016

FORM B

New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: SUNY Upstate M	edical Univesity
Contract Number: C503823	Agency Business Unit: SNY01
Contract Term: 01/01/2011 to 12/31/2015	Agency Department ID: 28/14/5
Contractor Name: Psychiatry Faculty Practice, Inc.	3320211
Contractor Address: 713 Harrison Street, Syracuse,	NY 13210
Description of Services Being Provided: Medical Di	rection

Scope of Contract (Choose one that b	est fits):		
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Tra	ining	
☐ Data Processing ☐ Computer Pro	ogramming 🔲	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	_	Services
☐ Health Services ☐ Mental Health			
Accounting Auditing Pa	ralegal 🔲 Leg	al 🔲 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Clinical Psychologist - 19-3031.02	1.00	312	\$24,953.25
	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	1.00	312.00	\$24,953.25
Grand Total	1.00	312	\$24,953.25

Name of person who	prepared	this report: Barbar	ra A. Svoboda
--------------------	----------	---------------------	---------------

Title: Practice Plan Administrator

Phone #: 315-464-3119

Preparer's Signature: Daubau a Cobode

Date Prepared: 05/05/2016

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: SUNY Upstate Medical Univesity

Contract Number: C503824

Agency Business Unit: SNY01

Contract Term: 01/01/2012 to 12/31/2016

Agency Department ID: XXXXX

Contractor Name: Psychiatry Faculty Practice, Inc.

3320211

Contractor Address: 713 Harrison Street, Syracuse, NY 13210

Description of Services Being Provided: Psychiatric Hospitalists Services

Scope of Contract (Choose one that b	est fits):		
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Tra	ining	
☐ Data Processing ☐ Computer Pro	ogramming 🗀	Other IT consulting	
Engineering	Surveying	☐ Environmental	Services
☐ Health Services ☑ Mental Health	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal Leg	gal 🔲 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29-1066.00	6.00	5,200.00	\$625,173.00
	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	6.00	5,200.00	\$625,173.00
Grand Total	6.00	5,200	\$625,173.00

Name of person who prepared this report: Barbara A. Svoboda

Title: Practice Plan Administrator

Phone #: 315-464-3119

Preparer's Signature: Sauvana O Woods

Date Prepared: 05/05/2016

FORM B

New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: SUNY Upstate Me	edical Univesity
Contract Number: C503825	Agency Business Unit: SNY01
Contract Term: 01/01/2012 to 12/31/2016	Agency Department ID: 281XX
Contractor Name: Psychiatry Faculty Practice, Inc.	3320211

Contractor Address: 713 Harrison Street, Syracuse, NY 13210 Description of Services Being Provided: Psychiatry Consultation Services

Scope of Contract (Choose one that b	est fits):		
☐ Analysis ☐ Evaluation ☐ Re	esearch 🗌 Trair	ining	
☐ Data Processing ☐ Computer ☐ C	ogramming	Other IT consulting	
☐ Engineering ☐ Architect Services			Services
☐ Health Services ☐ Mental Health	Services		
☐ Accounting ☐ Auditing ☐ Pa	aralegal Lega	al Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Psychiatrist - 29-066.00	1.00	798.00	\$99,950.00
	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
<u> </u>	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	1.00	798.00	\$99,950.00
Grand Total	1.00	798	\$99,750.00

Name of person who prepared this report: Barbara A. Svoboda

Title: Practice Plan Administrator

Phone #: 315-464-3119

Preparer's Signature: Dallace

Date Prepared: 05/05/2016

State Consultant Services Category Code: Contractor's Annual Employment Report Report Period: April 1, 20 to March 31, 20 Contract No: Contract No: Contract No: Contract No: Contract Term: Dil 20 Contract Term: Dil 20 Contract Term: Dil 20 Contract No: Contractor Name: Dil 20 Contract No: Contract No
State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 30/5 to March 31, 30/6 Business Unit
Contractor's Annual Employment Report Report Period: April 1, 201 to March 31, 201 Business Unit State of NY Department Name Upstate Medical University Department ID#: 3320211 Contract No: C-503833 Contract Term: Ill 2016 to Id 2017070 Contractor Name: Payrilly Medicine Mayrille Contractor Address: 475 YYM2 Medicine Type Typ
Report Period: April 1, 2015 to March 31, 2016 Business Unit State of NY Department Name Upstate Medical University Department ID#: 3320211 Contract No: C-50383:3 Contract Term: Ill 2016 to 105017770 Contractor Name: Ill Milly Mill (MILL) Mill (MILL) Gloup Lift Contractor Address: 475 YVM & MULLIU FY (MILL) Gloup Lift Description of Services Ill Gloup Gloup Mill Gloup Mill Gloup Mill Scope of Contract (Choose one that best Fits) Analysis Evaluation Research Training Train
Business Unit State of NY Department Name Upstate Medical University Department ID#: 3320211 Contract No:
Contract No:
Contract No:
Contract Term:
Contractor Name: Flaming My My My My My My My M
Contractor Address: 475 YVM WWW JULW JYACUS 19 13219 Description of Services Being Provided ALLW HALL CALL CALL CALL CALL CALL CALL CALL
Description of Services Being Provided Scope of Contract (Choose one that best Fits) Analysis Evaluation Research Training
Scope of Contract (Choose one that best Fifs) Analysis
Analysis
Data Processing Computer Programming Other IT Consulting
Engineering Architect Services Surveying Environmental Services
Health Services Mental Health Services
Accounting Auditing Paralegal Legal Other Consulting
Employment Category Number of Number of Amount Payable
Employees Hours Worked Under the Contract
Wedital/ Hugivan 165 FTE 3432 25,520,59/m
70,000
7000
208074.5
1 1
Total This Page
Grand Total U(1) 5902 4000,847
Grand Total U(1) 5902 4000,847
Name of Person who Prepared This Report: AWALKW
Grand Total U(1) 5902 4000,847

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: SUNY Upstate Me	edical University
Contract Number: C503837	Agency Business Unit: SNY01
Contract Term: 07/01/2010 to 05/31/2015	Agency Department ID: 🐉🙌
Contractor Name: Psychiatry Faculty Practice, Inc.	3320211

Contractor Address: 713 Harrison Street, Syracuse, New York 13210 Description of Services Being Provided: Staffing Services - Admin.

□ Data Processing □ Computer Pr □ Engineering □ Architect Services □ Health Services □ Mental Health	esearch	Environmental	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Administrative Assistant-43-6011.00	1.00	156.00	\$12,604.25
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
<u> </u>	0.00	0.00	\$0.00
- <u> </u>	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	1.00	156.00	\$12,604.25
Grand Total	1.00	156	\$12,604.25

Name of person who prepared this report: Barbara A. Svoboda

Title: Practice Plan Administrator Phone #: 315-464-3119

Preparer's Signature: Daubau al Surboke

Date Prepared: 05/05/2016

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Acpoint 1	a roa: April 1, 2015 i	o March 31, 2016	
Contracting State Agency Name: SU Contract Number: C-503863		University Agenc	y Code: \(\frac{28\(\frac{10}{2}\)}{2320211}\)
Contract Term: 6/1/2015 to	5/31/2020		
Contractor Name: Department of Me	dicine Medical Servic	e Group at the SUNY I	Health Science Center
I an aviacuse. Inc			
Contractor Address: 750 East Adams Description of Services Being Provide	s Street, Syracuse, NY	13210	
	od Intel(3) (13t3		
-	11 11 11 11 11 11 11 11 11 11 11 11 11		
Scope of Contract (Choose one that	best fits):	···	
Analysis 💹 Evaluati	ion 🗌 Resea	ırch 🔲	Training [
Data Processing	Computer Programm		IT consulting
Engineering Architect Services 🔀		ying Enviro	nmental Services
Accounting Auditing	Mental He Paralegal	ealth Services	O4
	· araicgai []	Legal 🔲	Other Consulting [
Employment Category	Number of	Number of Hours	Amount Payable
29-1063.00	Employees	Worked	Under the Contract
27-1005.00	2	977	\$279,070.00
			<u></u>
Total this page			
Grand Total			
			\$279,070
Name of person who prepared this rep	Matthew Hutz		
Preparer's Signature: Mr. Ki			
Title: Chief Administrator		Phone #: 315-464-8	- 1282
Date Prepared: <u>5/13/2016</u>	- 	<u></u>	
Use additional pages if necessary)			Page of

			OSC USE Only	y:
FORM B			Reporting Cod	le:
			Category Code	:
	State C	Consultant Services	,,,	
	Contractor's A	nnual Employment	Report	
	Report Period: Apri	11, <u>2015</u> to Marc	h 31, <u>2016</u>	
SNY0				
Business Unit States Contract No:	XXX Department Name	Upstate Medical	University Departn	neat LD#: 332021
Contract Term: O	5010015 to 0413012	0100		TO THE STATE OF TH
Contractor Name:	Associated Gasta		15th OFCNY	<u> </u>
Contractor Address:		BlVd, Sout	·	
	Camillus	NY 1303.	/	
Description of Services Being Provided	Gastro enterolo	gy on call	services a	+ commune
	······································			Talley.
Scope of Contract (Cho	ose one that best Fits)			
<u></u>	ose one that best Fits) Evaluation	Research	Tī	raining 🔲
Analysis 🔲			Tr er IT Consulting	raining 🗌
Analysis Data Processing	Evaluation [
Analysis Data Processing Engineering	Evaluation Computer Programming Architect Services	Oth	er IT Consulting	
Analysis Data Processing Engineering Health Services	Evaluation Computer Programming Architect Services	Oth Surveying	er IT Consulting Environmental	
Analysis Data Processing Engineering Health Services	Evaluation Computer Programming Architect Services Mental	Oth Surveying	er IT Consulting Environmental	Services
Analysis Data Processing Engineering Health Services Accounting A	Evaluation Computer Programming Architect Services Mental	Oth Surveying Health Services Leg Number of	er IT Consulting Environmental al Oth	Services er Consulting Amount Payable
Analysis Data Processing Engineering Health Services Accounting Employm	Evaluation Computer Programming Architect Services Mental Auditing Parales	Oth Surveying Health Services Leg	er IT Consulting Environmental al Oth	Services er Consulting
Analysis Data Processing Engineering Health Services Accounting Employm	Evaluation Computer Programming Architect Services Mental Auditing Parales	Oth Surveying Health Services Leg Number of	er IT Consulting Environmental al Oth	Services er Consulting Amount Payable
Engineering Health Services Accounting Employm 29-1069,	Evaluation Computer Programming Architect Services Mental Auditing Parales	Oth Surveying Health Services Leg Number of Employees	er IT Consulting Environmental al Oth Number of Hours Worked	Services er Consulting Amount Payable Under the Contra
Analysis Data Processing Engineering Health Services Accounting Employm	Evaluation Computer Programming Architect Services Mental Auditing Parales	Oth Surveying Health Services Leg Number of Employees	er IT Consulting Environmental al Oth Number of Hours Worked	Services er Consulting Amount Payable Under the Contra
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Analysis Data Processing Engineering Health Services Accounting Employm	Evaluation Computer Programming Architect Services Mental Auditing Parales	Oth Surveying Health Services Leg Number of Employees	er IT Consulting Environmental al Oth Number of Hours Worked	Services er Consulting Amount Payable Under the Contra
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Analysis Data Processing Engineering Health Services Accounting Accounting Amploym 29-1069, All ofte	Evaluation Computer Programming Architect Services Mental Auditing Parales	Oth Surveying Health Services Leg Number of Employees	er IT Consulting Environmental al Oth Number of Hours Worked	Services er Consulting Amount Payable Under the Contra

EXHIBIT Y		OSC Use Only:
FORM B		Reporting Code:
FORM B		Category Code:
State Consultant Services		
Contractor's Annual Employment Report		
Report Period: April 15 CVS to March 31, 20 6		
Business Unit State of NY Department Name Upstate Medical University Department ID#: 3320211 Contract No: C-503847		
Contract Term:		
Contractor Name: Family Medical School School Contractor		
Contractor Address: 475 Wing Quelity, Suik 200, Syrallist, 191320		
Description of Services Physican Scrous of Wostak Career Center Being Provided for Integrated Medicile		
Scope of Contract (Choose one that best Fits)		
Analysis		
Data Processing Computer Programming Other IT Consulting		
Engineering Architect Services Surveying Environmental Services		
Health Services Mental Health Services		
Accounting Auditing Paralegal Legal Other Consulting		
Employment Category	Number of	Number of Amount Payable
Oliver College and the second	Employees	Hours Worked Under the Contract
physician services		4 N/5/WK ~ \$500/00
		* t/4 west
A STATE OF THE STA		- yy
		2051
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Total This Page		176 ~5000/gr
Grand Total		176
Name of Person who Prepared This Report Preparer's Signature: Title: Date Prepared! Use additional pages if necessary Phone #: Phone #: Page of		

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FORM B			Category Code	
	State C	onsultant Services		
		inual Employment R	enort	
			- ASC	
	Report Period: April	1, 15 to March	31, 6	
Business Unit _SNY		Upstate Medical U	niversity Departn	nent ID#: 3320211
	-1503948	1		
Contract Term: 10	1115 to 9130	116		
Contractor Name:	DATTOS INC		_1,	
Contractor Address:	LOGO BASKET RE	153 A		
Description of Services	webster NY 1	4580	**************************************	
Being Provided	Staffing 5	envices		
Scope of Contract (Choose	se one that best Fits)			
Analysis	Evaluation	Research	Tr	raining
Data Processing	Computer Programming	Other	r IT Consulting	
Engineering	Architect Services	Surveying	Environmental	Services
Health Services	Mental	Health Services		
Accounting	aditing Paraleg	al 🗌 Legal	Oth	er Consulting
Employme	ent Category	Number of	Number of	Amount Payable
		Employees	Hours Worked	Under the Contract
	DI TOTAL DE LA CONTRACTOR DEL CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR		territor".	
- 1977 - 1982 - 1982 - 1983 - 1983 - 1983 - 1983 - 1983 - 1983 - 1983 - 1983 - 1983 - 1983 - 1983 - 1983 - 1983				
	his Page		0	
Grand	d Total	0		0
Name of Person who Preparer's Signature: Title: Diochy Date Prepared:	ared This Report: WE	NDY JONES Phone	#: _ 585-3	265-1780

AC 3272-S (Effective 4/12)

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: State University of New York Contract Number: \$600,774X C600844 Agency Business Unit: 281X0X Contract Term: 1/1/2013 to 12/31/2017 Agency Department ID: 3320211 Contractor Name: Cerner Health Services Contractor Address: 51 Valley Stream Parkway, Malvern, PA 19356 Description of Services Being Provided: IT Consulting Services					
Scope of Contract (Choose one that be Analysis	search	Other IT consulting Environmental	ling		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
Computer Analyst	1	4.00	\$800.00		
	0.00	4.00	4 200 00		
Total this Page	0.00	4.00	\$ 800.00		
Grand Total	0.00	0	\$0.00		
Name of person who prepared this re Title: Director, Finance Proparer's Signature:	port: Mary Jane une Valoin		610-219-3275		

(Use additional pages, if necessary)

Date Prepared: 05/13/2016

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OSC Use Only:	
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State Consultant Services

Contra	ctor's Annual Empl	50.0 CT (T) T (T) T (T)	
1000		5 to March 31,2016	,
	- 1	KSTATE W	5-DV3 11
Contracting State Agency Name: Contract Number: CM00901 & cm Contract Term: 411 12015 to 31. Contractor Name: Dentons US Contractor Address: 233 Scoth M Description of Services Being Pro	State University of 100958 New York 3112016 LLP Vocker Drive, Chica Wided:	Agency Code: go, TL 60606-630	3320211
Data Processing ☐ Computer Processing ☐ Architect Services Health Services ☐ Mental Health	earch	☐ er IT consulting ☐ Environmental Service Other Consulting ☐	es 🗌
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Partner Counsel Associate	15	77.80 2.10 51.10	\$ 159,689.00 \$1 3,410.00 \$1 66,400.00
Total this page	23	131	\$1229,499.00
Grand Total	23 /	131	\$1229,499.00
Name of person who prepared thi Preparer's Signature: Title: Partner Date Prepared: 5 Izolio	ryine	one #: 303-408-9	1106

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FORM B		Category Code	:		
64-4-	Consultant Services				
	Annual Employment R				
Report Period: Apr	rll 1, <u>20/</u> Sto March	31, <u>201</u> 6			
		<u>-</u>			
Business Unit State of NY Department Name	e Upstate Medical U	niversity Departn	nent ID#: 3320211		
Contract No: 7-503675					
Contract Term: 7/1/3010 to 6/30	2015	•			
Contractor Name: Family Medic	THE MUNICO	A Clivia	Crosupile -		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Contractor Address: 475 // VY / V	while, sure	· ruo, syra	11.11x 114 13510		
Description of Services MIRICAL OV	ersixict, at	the THIN	Anga nahau		
Belng Provided	Health Co	MIN	0		
Scope of Contract (Choose one that best Fits) Analysis Evaluation	Research	Tr	raining 🔲		
Data Processing Computer Programmin	_				
		r IT Consulting	□ <u> </u>		
Engineering Architect Services	Surveying [Environmental	Services		
Health Services Menta	al Health Services		•		
Accounting Auditing Parale	egal 🗌 Legal	l 🗌 Oth	er Consulting		
Employment Category	Number of	Number of	Amount Payable		
A A A A A A A A A A A A A A A A A A A	Employees	Hours Worked	Under the Contract		
Physician Services	1/1/201-1-1-1-1	1.05 FTE	~7668		
	(0.05 F12-)	* 7.080	412		
			-, ILMUS		
		~104 h/3			
		1-1-1-1	4 DMW2		
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	<u> </u>	1777UU			
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		,,,,,,			
Total This Page Grand Total		210	#101-7		
	<u>.</u>				
Name of Person who Prepared This Report	Name of Person who Prepared This Report AML ROUT				
Preparer's Signature:					
		,, 2/(- /	LH2U-7(1)3		
Date Prepared:	Phone	#: 3/5-0	//₆//-7/W 3		

FORM B

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Category Code:	

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State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016

· · · · · · · · · · · · · · · · · · ·			
Contracting State Agency Name :SL	NY Upstate Medical	University Agend	cy Code: 28/1/0
Contract Number: <u>1-5034</u> 24		- Agent	3320211
Contract Term: 7/1/2015 to	6/30/2015		
Contractor Name: Department of Me	edicine Medical Service	e Group at the SUNY	Health Science Center
Contractor Address: 750 East Adams	Street, Syracuse, NY	13210	
Description of Services Being Provid	ea Sieep Center Dire	ctor	
Scope of Contract (Choose one that	best fits):		
Analysis 🔛 Evaluati	on 🗌 Resea	rch	Training [
Data Processing	Computer Programm	ing 🔲 Other	TT consulting
Engineering Architect Serv	rices 🔛 — Survey	ving 🗌 Enviro	nmental Services
Health Services Auditing	Menta <u>i H</u> e	ealth Services	
Accounting Auditing	Paralegal 🔙	Legal 🔲	Other Consulting
Employment Category	Number of	Number of Hours	Amount Payable
29-1063.00	Employees 0	Worked	Under the Contract
	0	25	\$4,500.00
		1100	
	<u> </u>		
			, <u> </u>
Total this page			<u></u>
Grand Total	····	· · · · · · · · · · · · · · · · · · ·	£4.500.00
NI			\$4,500.00
Name of person who prepared this repo	rt: <u>Matthew Hutz</u>		
Preparer's Signature:			·
Title: Chief Administrator			•
		Phone #: <u>315-464-8</u>	282
Date Prepared: <u>5/13/2016</u>			
Use additional pages if necessary)			-
			Page of

FORM B

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Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report 1	Period:	April 1	, 2015	to M:	arch 31	, 2016

	· • • • • • • • • • • • • • • • • • • •		
Contracting State Agency Name :SU	NY Upstate Medical t	Jniversity Agency	Code: XXXXX
Contract Number: T-503725			3320211
Contract Term: 7/1/2014 to	6/30/2015		
Contractor Name: Department of Me	dicine Medical Servic	e Group at the SUNY I	lealth Science Center
at Syracuse, Inc	Street Samoure MV	12210	H 11 H 11 H
Description of Services Being Provide	ed. Antibiotic consult	13210	
Scope of Contract (Choose one that	heet fite):		
Analysis Evaluati	·	rch 🔲	Training [
Data Processing	Computer Programm	ing Other	IT consulting
Engineering Architect Serv	rices 🔲 Survey	ing Environ	mental Services
Health Services	Mental He	ealth Services 🛄	_
Accounting Auditing	Paralegal 🛄	Legal 🔲	Other Consulting [
F1	Number of	Number of Hours	Amount Payable
Employment Category	Employees	Worked	Under the Contract
29-1063.0	0	296	\$36,389.00
	<u></u>		
Total this page			
Grand Total			\$26.280.00
			\$36,389.00
Name of person who prepared this repe	ort: Matthew Hutz		
Preparer's Signature:	<u> </u>		_
Title: Chief Administrator		Phone #: 315-464-8	- 3282
Date Prepared: 5/13/2016			, , , , , , , , , , , , , , , , , , ,
Use additional pages if necessary)			Page of

OSC Use Only:	
Reporting Code:	
Category Code:	

Page

of

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name :SU	JNY Upstate Medical	University Agend	cy Code: XXXX
Contract Nulliber: 1-503862			3320211
Contractor Name: Daniel Contra	<u>6/30/2016</u>		
Contractor Name: Department of Me at Syracuse, Inc	edicine Medical Service	ce Group at the SUNY	Health Science Center
Contractor Address: 750 East Adams Description of Services Being Provid	Street Company	10010	
Description of Services Being Provid	ed Sleep Center Disc	13210	
	an proch certici Dite	CLOT	
	····		
Scope of Contract (Choose one that	hant Etc.)		
Analysis Evaluati	— 1	arch 🗍	—
Data Processing	Computer Programm	. =	Training [
Engineering Architect Serv	ices Survey	ying Enviro	TT consulting mental Services
Health Services [X]	Mental He	ealth Services	nmental Services
Accounting Auditing	Paralegal 🔲	Legal 🔲	Other Consulting
			Owner Courselling [
Employment Category	Number of	Number of Hours	Amount Payable
29-1063.00	Employees	Worked	Under the Contract
22-1003.00	0	100	\$13,500.00
		, <u></u>	
			<u> </u>
Total this page			
Grand Total			\$13,500.00
Name of person who prepared this repo	et. Matthew Hutz		
Preparer's Signature:	Watthew Hutz		
itle: Chief Administrator		Phone #: <u>315-464-8</u>	282
Date Prepared: <u>5/13/2016</u>			-
Jse additional pages if necessary)			Dom - C

EXHIBIT Y		OSC Use Only		
FORM B		Reporting Cod Category Code	e:	
State C	onsultant Services	•	N N	
	nual Employment R	eport		
Report Period: April	1, <u>20/5</u> to March	31, <u>2016</u>		
Business Unit State of NY Department Name Contract No: 7-50-5%4-7	Upstate Medical Ur	<u>iiversity</u> . Departn	nent ID#: <u>3320211</u>	
Contract Term: 7/1/20/6 to 6/30/2	2020			
Contractor Name: Fo Miles Medic		of Scrone	Courp CLP	
Contractor Address: 475 WING A	verue sult	C 200, 50	rause ny 13411	
Description of Services Maical Que	VERIAL FOR	## 100 LON	d cisca	
Being Provided	n Pleast	enter		
Scope of Contract (Choose one that best Fits)			1	
Analysis	Research	Tr	eining 🔲 :::	
Data Processing Computer Programming	Other	IT Consulting		
Engineering Architect Services	Surveying [Environmental	Services 💭	
Health Services Mental Health Services				
Accounting Auditing Paraleg	ai 🗌 Legal	Cth	er Consulting	
Employment Category	Number of	Number of	Amount Payable	
4	Employees	Hours Worked	Under the Contract	
Mujsician Savals		0.05 FTE	4668	
		~107/h/s		
1				
		_	<u>.</u>	
			79	
Total This Page				
Total This Page Grand Total	1	104	7668-	
Name of Person who Prepared This Reports AMAL BOY Preparer's Signature: Title: Date Prepared: 10-1-16				
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ГОРМ В		Category Code		
State Co.	nsultant Services			
	nual Employment R	-		
Report Period: April	1, <u>2015</u> to March	131, <u>2016</u>		
Contract Term: 4112015 to 351/2	Upstate Medical U		ment ID#: 3320211	
	ornersarce	Bivd		
<u>Roca Raton O, E</u>	<u> 33487.</u>	-1-		
Description of Services Being Provided	redical 1	<u>Chersonnel</u>		
Scope of Contract (Choose one that best Fits)		<u></u>		
Analysis				
Employment Category	Number of	Number of	Amount Payable	
	Employees	Hours Worked	Under the Contract	
Temporcery Medical Personnel		1 = 2 + = 2 = 7 = 3		
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1.0000000000000000000000000000000000000				
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Total This Page				
Grand Total	2_8	115,245	<u> </u>	
Name of Person who Prepared This Report. Date Prepared: 5 3 6. Use additional pages if necessary	Khargi	Page	e of	

EXHIBIT Y			y: le:
FORM B		Category Cod	
State (Consultant Services		V
	unual Employment R	7	
Report Period: Apr	11 1, <u>201</u> to March	<u>ما /0/</u> ي.31	
Contractor Address: 475 / VILZ Address: Contract Choose one that best Fits)	2020 Ne Medical Ne, Suk 2 of Family	Services 6 Or, Syrau Nedrone	Connundy
Analysis	Research		raining 🔲
Data Processing Computer Programming		IT Consulting	
Engineering Architect Services Health Services Menta	Surveying [Environmental	Services
Health Services Menta Accounting Auditing Parale	l Health Services [gal	Ott∩	er Consulting
Employment Category Medical FCCCVAG F West SAF	Number of Employees	Number of Hours Worked VOVI 40	Amount Payable Under the Contract #1000 6 hv d on h CUNICAL NO TARAS
Name of Person who Prepared This Report: Preparer's Signature: Title: Date Prepared;	AL ROUT	4: 315-C	\$15,530 164-7003
Use additional pages if necessary		Page	:

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Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016

Contracting State Age	ency Name: SU	NY Upstate I	Medical University	Agency Code:
Contract Number:	T550086			3320211
Contract Term:	1/7/2013	to	6/30/2017	330,0311
Contractor Name:	Fisher Associa	ates, P.E., L.	S., L.A., D.P.C.	
Contractor Address:	135 Calkins Ro	oad, Suite A,	Rochester, NY 14623	
		a. Gumpuo G	Site Improvements at Ups	tato modical offivoroity
Scope of Contract (Choose one that	t best fits):		
Analysis Evaluatio	n 🗆 Research 🗈	☐ Training ☐]	
Data Processing □ (Computer Program	mming Ot	her IT Consulting	

Engineering ☑ Architect Services □ Surveying □ Environmental Services □

Accounting □ Auditing □ Paralegal □ Legal □ Other Consulting □

Health Services ☐ Mental Health Services ☐

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
17-1012.00 - Landscape Architects	9	1454.75	\$140,771.96
17-2051.00 - Civil Engineers	9	222.00	\$25,723.80
17-2041.00 - Mechanical Engineers	4	214.00	\$26,035.00
17-3022.00 - Civil Engineering Technicians	3	544.50	\$35,470.08
27-1024.00 - Graphic Designers	1	0.50	\$20.70
17-1011.00 - Architects, Except Landscape and Nava	2	171.00	\$20,690.28
17-3011.01 - Architectural Drafters	4	414.25	\$20,994.58
11-9041.00 - Architectural & Engineering Managers	1	36.00	\$5,162.58
17-3019.99 - Drafters, All Other	1	139.00	\$9,015.54
17-1022.00 - Surveyors	1	8.00	\$945.92
17-3031.00 - Surveying & Mapping Technicians	1	13.00	\$1,003.23
17-3031.01 - Surveying Technicians	2	31.00	\$1,821.60
Total this page	38	3248.00	\$287,655.27
Grand Total	38	3248.00	\$287,655.27

Name of person who prepared this report Preparer's Signature:	Lynn M. Peck
Title: Billing Administrator	Phone #: (585) 334-1310
Date Prepared: 4/29/2016	

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016

Scope of Contract (Choose one that best fits): Analysis					
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
17-1011.00	2	78.5	\$16,035.20		
17-3011.01	2	335.75	\$11,414.40		
7					
Total this page 414 \$47,196.51					
Grand Total 414 \$47,196.51					

Name of person who prepared this report? Sandra Landau Preparer's Signature:	
Title: Business Finance Manager Phone #: 585-388-6710	
Date Prepared: 04/28/16	

Use additional pages if necessary)

Page 1 of 1

State Consultant Services Contractor's Annual Employment Report

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성당하다 2000년 1000년 100	a3/31/2016 ang ar's Landing, Syracus vided: Engineering s at best fits): earch ☐ Training ☐	se, NY 13202 ervices	ncy Code: 550000
Engineering Architect Services		Environmental Service	s 🗌
Health Services Mental Health			
Accounting Auditing Para	alegal D Legal D	Other Consulting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Deciment Floatrical	1	12	900
Designer i - Electrical		1	000
Designer 1 - Electrical Administrative	1	1	
			100
Administrative	1	1	\$1000 1000
Total this page Grand Total	2 2	13	\$1000
Total this page Grand Total Name of person who prepared thi	1 2 2 2 2 s report:	13	\$1000
Total this page Grand Total Name of person who prepared thi	s report:	13	\$1000

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: SU	INY Upstate Medical			
Contract Number: T550138 Agency Business Unit: SNYO I				
Contract Term: 04/01/2015 to 03/31/2016 Agency Department ID: 3320211		0: 3320211		
Contractor Name: HOLT Architects, P.C.				
Contractor Address: 619 W State Street, Ithaca NY 14850				
Description of Services Being Provid	ed: Architectural and C	Consultant Design Serv	ices	
Scope of Contract (Choose one th	at best fits):			
☐ Analysis ☐ Evaluation	Research] Training		
☐ Data Processing ☐ Compu	ter Programming	Other IT consulting		
☐ Engineering ☐ Architect Se	ervices Survey	ring Environm	ental Services	
☐ Health Services ☐ Mental I	lealth Services			
☐ Accounting ☐ Auditing	☐ Paralegal ☐	Legal	Consulting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
27-3042.00	1	62.25	\$ 5,838.83	
47-4011.00	1	7.50	809.89	
17-3011.00	1	4.00	209.76	
17-3011.01	17-3011.01 1 7.50 379.20			
17-1011.00 6 617.00 62,631.73				
17-2071.00 2 250.50 41,154.82				
17-2141.00 3 67.75 9,856.14				
17-3011.00 1 92.75 5,840.04				
17-3023.03 1 7.50 640.1				
17-3027.00 3 425.00 47,350.9				
17-3027.00			47,350.51	
17-3027.00 17-2051.00				
150 0000000000	3	425.00	47,350.51	
17-2051.00	3	425.00 44.00	47,350.51 6,770.00	

Title: Business Manager

Phone #: 607-273-7600

Date Prepared: 5/9/2016

Preparer's Signature:

(Use additional pages, if necessary)

Page 1 of 2

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: SU	NY Upstate Medical			
Contract Number: T550138	nber: T550138 Agency Business Unit: SNY O I			
Contract Term: 04/01/2015 to 03/31	/2016	Agency Department ID: '3320211		
Contractor Name: HOLT Architects, I	P.C.			
Contractor Address: 619 W State Str	eet, Ithaca NY			
14850 Description of Services Being Providence	ed: Architectural and (Consultant Design Servi	ices	
Description of Services being 1 rovid	ca. Architecturar and c	Joneanant Boolgii Golivi		
	tine something			
Scope of Contract (Choose one th				
☐ Analysis ☐ Evaluation	Research	Training		
☐ Data Processing ☐ Compu	ter Programming	Other IT consulting		
☐ Engineering ☐ Architect Se	ervices Surve	ying Environme	ental Services	
☐ Health Services ☐ Mental H	Health Services			
☐ Accounting ☐ Auditing	☐ Paralegal ☐	Legal Other	Consulting	
	Number of	Number of	Amount Payable	
Employment Category	Employees	Hours Worked	Under the Contract	
17-3025.00	2	103.00	\$ 6,829.00	
17-3029.99	1	19.50	1,582.00	
43-6014.00	1	1.50	114.00	
11-1011.00	1	2.50	200.20	
11-2021.00 1 6.00 480.48				
17-2051.00	1	.25	20.02	
43-3021.00	1	.50	40.04	
43-4171.00	1	.25	20.02	
15-1199.09	1			
11-9041.00	1	30.00	5,310.00	
25-9011.00	2	121.50	11,433.00	
Total this page	13	308.00	\$ 29,455.76	
Grand Total				
ASSERTATION OF THE PROPERTY OF		TO A POST OF THE PARTY OF THE P		

luan Lort

Title: Business Manager

Preparer's Signature:

Date Prepared: 5/9/2016

(Use additional pages, if necessary)

Phone #: 607-273-7600

Page 2 of 2

New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: SUNY Upstate Medical					
Contract Number: T550138 Agency Business Unit: SNY01					
Contract Term: 04/01/2015 to 03/31/2016 Agency Department ID: XXXX 3320211					
Contractor Name: Convergent Technologies Design Group, Inc.					
Contractor Address: 4849 Middletown Dr. Lockport, NY 14094					
Description of Services Being Provide	ed: Telecom, AV, Sec	urity			
Scope of Contract (Choose one that	at best fits):				
☐ Analysis ☐ Evaluation	Research [☐ Training			
☐ Data Processing ☐ Comput	ter Programming	☐Other IT consulting			
☐ Engineering ☐ Architect Se	rvices	ying 🗌 Environm	ental Services		
☐ Health Services ☐ Mental F	Health Services				
☐ Accounting ☐ Auditing	☐ Paralegal [☐ Legal ☐ Other	Consulting		
Employment Category Number of Number of Hours Worked Number of Hours Worked Amount Payable Under the Contract					
Project Manager	1	23	3427		
Principal	1	30	5310		
AV	1	41.5	4233		
Design	1	1 80 720			
Total this page 5 174.50 \$ 20,169.00					
Grand Total					
Name of person who prepared this report: Kimberly Castle					

Title: Bookkeeper Phone #: 410-532-2395 A 2000

Preparer's Signature:

Date Prepared: 04/21/2016

(Use additional pages, if necessary)

Page 1 of 1

F			

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Per	iod: April 1, 2015 t	o March 31, 2016	
Contracting State Agency Name: Contract Number: 45095 Contract Term: / / to Contractor Name: VDA (Van Deus Contractor Address: 120 Eagle Ro Description of Services Being Prov and 20 in Weiskotten Hall	ock Avenue, Suite 3	c.) 10. East Hanover, NJ	3202(1 07936
Engineering Architect Services Health Services Mental Health Secounting Accounting Paral	arch	r IT consulting Environmental Service Other Consulting	S Amount Payable Under
Employment Category 11-9041-00 — Architectural and	Number of Employees	Number of Hours Worked	the Contract
Engineering Managers	1	12.50	2,404.33
Total this page	1	0	\$ 2,404.33
Grand Total	1	12.50	2,404.33
Name of person who prepared this Preparer's Signature: Title: Billing Rep. Date Prepared: 4/28/2016		ck one #: 973-994-9220	