Medicaid Inspector General

3460000

AC 3272-S (Effective 4/12)

FORM B

New York State Consultant Services
Contractor's Annual Employment Report
Report Period: April 1, 2014 to March 31, 2015

Contracting State Agency Name: Office of the Medicaid Inspector General
Contract Number: C 201301 Agency Business Unit: MIG01
Contract Term: 8/30/2013 to 8/29/2018 Agency Department ID: 3460000
Contractor Name: Trooper Tech, Inc DBA Gold Shld Investigations
Contractor Address: 300 E. Merrick Road, #207 Lynbrook, NY 11563
Description of Services Being Provided: Medicaid Investigative Services

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 ☐ Paralegal ☐ Legal ☑ Other Consulting

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
33-9021 Investigative Services	6	6041.50	$ 224,292.92
Total this Page	0.00	0.00	$ 0.00
Grand Total	6	$ 6041.50	$ 224,292.92

Name of person who prepared this report: William M McGoldrick
Title: Vice President Phone #: 800-290-8728
Preparer's Signature: [signature]
Date Prepared: 4/16/15

(Use additional pages, if necessary)

AC 3272-S (Effective 4/12)

FORM B

New York State Consultant Services
Contractor's Annual Employment Report
Report Period: April 1, 2014 to March 31, 2015

Contracting State Agency Name: Office of the Medicaid Inspector General
Contract Number: C 201302 Agency Business Unit: MIG01
Contract Term: 05/01/2013 to 04/30/2018 Agency Department ID: 3460000
Contractor Name: Summit Security Services, Inc
Contractor Address: 390 RXR Plaza, Uniondale, NY 11556
Description of Services Being Provided:
Medicaid Fraud Detection/Investigation

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 ☐ Paralegal ☐ Legal ☒ Other Consulting

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Investigator	4	5,025.50	$187,199.88
Total this Page	0.00	0.00	$ 0.00
Grand Total	4	5,025.50	$187,199.88

Name of person who prepared this report:
Title: Operations Supervisor Phone #: 516.240.2445
Preparer's Signature:
Date Prepared: 4/23/2015

(Use additional pages, if necessary) Page of

AC 3272-S (Effective 4/12)

FORM B

New York State Consultant Services
Contractor's Annual Employment Report
Report Period: April 1, 2014 to March 31, 2015

Contracting State Agency Name: Office of the Medicaid Inspector General
Contract Number: C201303 Agency Business Unit: MIG01
Contract Term: 08/30/2013 to 08/29/2018 Agency Department ID: 3460000
Contractor Name: MSA Investigations
Contractor Address: 9 Murray Street, 2nd Floor, New York, NY 10007
Description of Services Being Provided: Medicaid Fraud Investigative Services

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 ☐ Paralegal ☐ Legal ☒ Other Consulting

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
13-2099.04 Fraud Exaiminers/Investigator	6.00	9,934.50	$434,083.31
Total this Page	6.00	9,934.50	$434,083.31
Grand Total	6.00	9,934	$434,083.31

Name of person who prepared this report: Stephen Heskett
Title: Senior Manager Phone #: 212-480-4050 ext 238
Preparer's Signature:
Date Prepared: 05/14/2015

(Use additional pages, if necessary)

AC 3272-S (Effective 4/12)

FORM B

New York State Consultant Services
Contractor's Annual Employment Report
Report Period: April 1, 2014 to March 31, 2015

Contracting State Agency Name: Office of the Medicaid Inspector General
Contract Number: C201401 Agency Business Unit: MIG01
Contract Term: 03/15/2014 to 03/14/2019 Agency Department ID: 3460000
Contractor Name: Karl Heiner Statistical Consulting, Ltd
Contractor Address: 1739 Athol Road, Schenectady, NY 12308
Description of Services Being Provided: Statistical consulting

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 ☐ Paralegal ☐ Legal ☐ Other Consulting

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Statistician	1.00	312.80	$62,560.00
Total this Page	1.00	312.80	$62,560.00
Grand Total	1.00	312	$62,560.00

Name of person who prepared this report: Karl Heiner
Title: President Phone #: (518) 374-3689
Preparer's Signature: _____
Date Prepared: 05/08/2015

(Use additional pages, if necessary)

FORM B

New York State Consultant Services
Contractor's Annual Employment Report
Report Period: **April 1, 2014 to March 31, 2015**

Contracting State Agency Name: OMIG

Contract Number: CMR524B

Agency Business Unit:

Contract Term: 3/18/2013 to 9/30/2016

Agency Department ID: **3460000**

Contractor Name: **New York State Technology Enterprise Corporation (NYSTEC)**
Contractor Address: **500 Avery Lane, Suite A Rome, NY 13441**

Description of Services Being Provided: Medpass Compliance

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 ☐ Paralegal ☐ Legal ☐ Other Consulting

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
11-3021.00 Computer and Information Systems Managers	10	11950	1185151.30
Total this page	10	11950	1185151.30
Grand Total	10	11950	1185151.30

Name of person who prepared this report: Jana S. Behe

Title: Director of Contracts & General Counsel

Phone #: 518.431.7031 –desk
315.717.7202 – cell
behe@nystec.com

Preparer's Signature: JBehe

Date Prepared: 5/11/2015

(Use additional pages, if necessary)

TA0434

FORM B

New York State Consultant Services
Contractor's Annual Employment Report
Report Period: April 1, 2014 to March 31, 2015

Contracting State Agency Name: NYS Office of Medicaid Inspector General

Contract Number: PH65771(HBITS)
Agency Business Unit: MIG01
Contract Term: 11/12/2012 to 10/31/2017
Agency Department ID: 3460000
Contractor Name: GCOM Software Inc.
Contractor Address: 24 Madison Avenue Ext., Albany NY 12203
Description of Services Being Provided: Consultant

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 ☐ Paralegal ☐ Legal ☐ Other Consulting

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
15-1151	1	1914	142573.87
Total this page	1	1914	142573.87
Grand Total	1	1914	142573.87

Name of person who prepared this report: Holly Savarese
Title: VP of Operations
Phone #: 518-869-1671
Preparer's Signature: Holly Savarese
Date Prepared: 4/27/15
(Use additional pages, if necessary)

FORM B

OSC Use Only:
Reporting Code:
Category Code:

State Consultant Services
Contractor's Annual Employment Report
Report Period: April 1, 2014 to March 31, 2015

Contracting State Agency Name: Office of the Medicaid Inspector General
Agency Code: 12200
Contract Number: PH65780
Contract Term: 11/1/12 to 10/31/17
Contractor Name: MVP Consulting Plus, Inc.
Contractor Address: 435 New Karner Road Albany, NY 12205
Description of Services Being Provided: Computer Consulting (Various)

MiG01
346 0000

Scope of Contract (Choose one that best fits):
Analysis ☐ Evaluation ☐ Research ☐ Training ☐
Data Processing ☐ Computer Programming ☐ Other IT consulting X
Engineering ☐ Architect Services ☐ Surveying ☐ Environmental Services ☐
Health Services ☐ Mental Health Services ☐
Accounting ☐ Auditing ☐ Paralegal ☐ Legal ☐ Other Consulting ☐

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
15-1199.09	1	1932.5	$157,692.00
15-1151.00	1	2076	$179,574.00
	1	1856.75	$160,608.88
Total this page	3	5865.25	$497,874.88
Grand Total	3	5865.25	$497,874.88

Name of person who prepared this report: Ilakumari N. Patel
Preparer's Signature: INPatel
Title: CEO.CFO Phone #: 518-218-1700
Date Prepared: 4/21/2015

Use additional pages if necessary)

FORM B

OSC Use Only:
Reporting Code:
Category Code:

State Consultant Services
Contractor's Annual Employment Report
Report Period: April 1, 2014 to March 31, 2015

Contracting State Agency Name: **NYS Office of the Medicaid Inspector General** MiGOI
Agency Code: **12200** 3460000
Contract Number: **PH 65782**
Contract Term: **11/01/2012 to 10/30/2017**
Contractor Name: **PSI INTERNATIONAL Inc.**
Contractor Address: **4000 Legato Road, Suite 850 Fairfax VA 22033**
Description of Services Being Provided: **IT Services**

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 ☐ Paralegal ☐ Legal ☐ Other Consulting ☐

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Programmer - Senior	1	1,888.50	$ 123,885.60
Total this page	1	1,888.50	$ 123,885.60
Grand Total	1	1,888.50	$ 123,885.60

Name of person who prepared this report: Prakash Mehta
Preparer's Signature: _____
Title: CFO Phone #: 703-621-5840
Date Prepared: 04/21/15

(Use additional pages if necessary)