SNYC1-C504489-3320211

Exhibit X		OSC Use Only: Reporting Code: Category Code: Date Contract Approved:	
FORM A	5		
State Consultant	Services - Contrac	ctor's Planned Employme	ent
From Contract Star	t Date Through Tl	ne End Of The Contract	Γerm
Department Name: SUNY Upstate Medical University Contractor Name:		Department ID#: 3320211 Contract Number:	
Contract Start Date: 71/2018 Co		ntract End Date: 6 36 2023	
Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Physician Services			
(Child Neurology)		16,380	393,120
52 whends/yr x 5 yrs x 63 hrs/when			
Physician Services	1	43,800	1,314,000
CCGH on Call)	- ACCUMINATION OF THE PROPERTY		
1 doc covering 24hr/day x 365 days/yrx syrs			
Physician Services	1	43,800	912,500
(Neurologists - 1 Ck		1	
Physic van Services	1	43,800	912,500
(Neuro Strike)		19,800	1300
			10000000000000000000000000000000000000
Total this page		147,780	3,532,126
Grand Total		147,780	3,532,120
Name of person who prepared this reportitle: Fractice Administration Preparer's Signature:	strator		315)464-501
Date Prepared: 7/31/18			

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(Use additional pages, if necessary)