Helen Hayes Hospital 3450237

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OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2019 to March 31, 2020

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Contracting State Agency Name: Helen Hayes Hospital Agency Code:	
Contract Number: C000534	
Contract Term: 07/01/15 to 06/30/20 543 005/	
Contractor Name: Comprehensive Pharmacy Services	
Contractor Address: 6409 Quail Hollow Road, Memphis, TN 38120	•
Description of Services Being Provided: Pharmacy Services	

Scope of Contract (Choose one that best fits):					
Analysis Evaluation Research Training					
Data Processing Computer Programming Other IT consulting					
Engineering Architect Services			es 🗆		
Health Services X☐ Mental Health			- -		
		Other Consulting			
]			÷.		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
Pharmacists	· 11	13,605.25	\$ 1,363,750.80		
Technicians	6	6,799.50	\$ 204,734.86		
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	•	,			
Total this page	17	20,404.75	\$ 1,568,485.66		
Grand Total	17	20,404.75	\$ 1,568,485.66		

Name of person who prepared this report: Preparer's Signature: <u>Marcene Froeman</u>	<u> </u>
Title: Director, Operations Finance	Phone #: 763-354-1226
Date Prepared: 5/4/2020	

Use additional pages if necessary)

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2019 to March 31, 2020

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Contracting State Agency Name: Helen Hayes Hospital Agency Code: Contract Number: C000541 Contract Term: 01/01/17 – 12/31/21 Contractor Name: NJPR Medical Transcription Services, Inc. Contractor Address: 80 E. Ridgewood Ave., 4 th Fl., Paramus, NJ 07652 Description of Services Being Provided: Coding & Documentation Consultant				
Data Processing	arch] r IT consulting ☐ Environmental Service Other Consulting ☑		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Health Information		405.75	\$ 62,596.13	
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Total this page	0_	<u> </u>	\$ 0.00	
Grand Total		405.75	162,596.13	
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Name of person who prepared this report:				
Preparer's Signature: Millimite Millimite				
Title: PRESIDE TO CED Phone #: 973-334-3443				
Date Prepared: 041/012020				
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State Consultant Services Contractor's Annual Employment Report Period: April 1, 2019 to March 31, 202

Keport Per	<u>rioa: April 1, 2019 t</u>	o march 31, 2020	
Contracting State Agency Name: R Contract Number: C000546 Contract Term: 6/1/17-5/31/22 Contractor Name: Ramapo Radio Contractor Address: 255 Lafayette Description of Services Being Prov	logy Associates, PC e Avenue, Suffern, N	Y 10901	3450237
	·		· · · · · · · · · · · · · · · · · · ·
Data Processing ☐ Computer Pro Engineering ☐ Architect Services Health Services ☒ Mental Health S	arch ☐ Training ☐ gramming ☐ Othe ☐ Surveying ☐ Services ☐] r IT consulting Environmental Service Other Consulting	-
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
RADiologists.	14	2408	242,285
Technologists.	3	2080	110,000
TRANSCEIMON:	3	2080	A1 000
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Total this page	0	. 0	\$ 0.00
Grand Total	•		
Name of person who prepared this rep	oort:	· · · · ·	
Preparer's Signature: W We	·C W MV	my	- 2.14
Title: Manager	Pho	one #: USUS 516	3664 1401
Date Prepared: 5/5/2020			1401

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Reporting Code:	·
Category Code:	

State Consultant Services Contractor's Annual Employment Report				
Report Period: April 1, 2019 to March 31, 2020				
·			3	
Contracting State Agency Name: Helen Hayes Hospital Agency Code: Contract Number: C000556 Contract Term: 05/10/18 - 05/09/23 Contractor Name: Jandee Anesthesiology Partners PLLC Contractor Address: 25 Main St., Suite 103, Hackensack, NJ 07508 Description of Services Being Provided: Anesthesiology Services				
Scope of Contract (Choose one that best fits): Analysis				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
thatth Services.	_7	488	146,524.10	
Total this page 7 以8 数 数 4 4 6 5 3 4 . 1 2 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3				
Name of person who prepared this report: Preparer's Signature: Title: Administrative Boordinator Phone #: Date Prepared: // 201-962-7382				

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			Reporting Co	ode:
			Category Co	de:
R	State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2019 to March 31, 2020			
Contracting State Agency Name: Helen Hayes Hospital Agency Code: Contract Number: PO#0069607 Contract Term: 10/1/18 - 09/30/19 Contractor Name: DESCO Contractor Address: PO Box 6787, Providence, RI 02940 Description of Services Being Provided: Biomedical Engineering Technician Support				
	<u> </u>			<u> </u>
Scope of Contract (Choose one that best fits): Analysis				
Employment Category Number of Employees Number of Hours Worked Amount Payable Under the Contract				
FIELD Service Tel	miciens	3	453	39530.10
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Total this page	 	3.4	453 0	39,530,10 \$-0.00
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Name of person who prepa	ned this re	port:		
Preparer's Signature:	Lan	Mr. Slay	Els	
Title: EFO		Pho	one#:	
Date Prepared: 4 1/0/ 20	20	·	508-298	-3071
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Reporting Code:	
Category Code:	

Report Period: April 1, 2019 to March 31, 2020

Contracting State Agency Name: R Contract Number: PO # 0071073 Contract Term: 04/01/19 – 03/31/2 Contractor Name: Bonadio & Co, Contractor Address: 6 Wembley C Description of Services Being Prov	20 LLP ourt, Albany, NY 12	205	3420237
Data Processing ☐ Computer Pro Engineering ☐ Architect Services Health Services ☐ Mental Health S	arch ☐ Training ☐ gramming ☐ Othe ☐ Surveying ☐ Services ☐	er IT consulting	es 🗌
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Partner / Principal	1	45	\$9,000
Manager	1	70	9,900
Supervisory Staff	_1	125	14,000
Staff	2	140	17.000

Name of person who Preparer's Signature:	prepared this report:	APPROVED By Kennath McGivnoy at 3:38 pm, May 05, 2020	
Title: Partner	•	Phone #:	518-464-4080
Date Prepared: /	/ 5/6/2020	<u> </u>	

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Grand Total

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\$49,900

\$ 0.00

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Reporting Code:		
Category Code:		

Report Period: April 1, 2019 to March 31, 2020

Contracting State Agency Name:	Helen Hayes Hospita	al Agency Code:	
Contract Number: PO#0071572		• •	3450237
Contract Term: 04/01/19 –03/31/2			\$ 15 -00/
Contractor Name: Marsden Medic Contractor Address: 15 Decker La			
Description of Services Being Pro			•
Degenption of Corridor Doing . To		NOISE COI VICOS	. •
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		<u></u>	
Scope of Contract (Choose one tha			•
· \ -	earch Training T	-	•
-		r IT consulting Environmental Service	
Engineering ☐ Architect Services Health Services ☑ Mental Health		Environmental Service	
_		Other Consulting	
			· · · · · · · · · · · · · · · · · · ·
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
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Health Services	3	40 Ce	
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Total this page	0	0	\$ 0.00
Grand Total			11,200
Name of person who prepared this re	eport:		•
Preparer's Signature:	n.l		_
Title: Pras, Jent	Ph	one #:	~ ~ ~ 6
Date Prepared: 3 /20/ 20		973 831	5079
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Reporting Code:	•
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2019 to March 31, 2020

	<u> </u>			
Contracting State Agency Name: F Contract Number: PO#0071185 Contract Term: 04/01/19 –03/31/20 Contractor Name: Vitalware, LLC. Contractor Address: 1200 Chester Description of Services Being Prov	ly Drive, Suite 260,	Yakima, WA 98902	3 4 7 0 2 3 7	
		•	• •	
	·			
Scope of Contract (Choose one that best fits): Analysis				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Consultant	3	224	\$32,500	
·	<u> </u>			
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			•	
Total this page	0	0	\$ 0.00	
Grand Total	3	224	\$32,500	
Name of person who prepared this rep				
Preparer's Signature: Wandy		# 055 40'4 0040		
Title: Director, Revenue Integrily Serv	ices // Pho	one #: 855-464-2310 ex	t /3/	
Date Prepared: 4/14/2020				

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2019 to March 31, 2020

Contracting State Agency Name: Helen Hayes Hospital Agency Code: Contract Number: PO#0073299 Contract Term: 04/01/19 –03/31/20 (service started in Oct 2019 through 3/31/2020) Contractor Name: NJHA Healthcare Business Solutions Inc. Contractor Address: 760 Alexander Road, CN-1, Princeton, NJ 08543 Description of Services Being Provided: Coding Services

Scope of Contract (Choose one that best fits): Analysis				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Outpatient Coder	2	612.75	\$31,250.25	
Inpatient Coder	2	258.5	\$16,027.00	
Quality Manager	1	20	0	
Office Manager	1	. 10	· O_	
Contract Manager	1	. 30	0	
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Total this page	. 7	931.25 0	\$ 47,277.25	
Grand Total	7	931.25 0	\$ 47,277.25	

		<u> </u>
Name of person who prepared the		
Preparer's Signature:	Digitally signed by Tim Keough DN: cn=Tim Keough, o=NJHA, ou=HIS, email=tkeough@njha.com, c=US Date: 2020:05 06 14:15-48-04/00'	
Title: VP Health Information Serv		•
Date Prepared: 5/1/2020		
	·	

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