

**PERFORMANCE BASED CONTRACT GUIDELINES
SCHEDULE B**

| Consultant: | MONSEY LICENSED BEHAVIOR ANALYST SERVICES | | | | |
|---------------------------------------|--|--------------------|-----------------------|-------------------|---------------------|
| Contract Dates: | July 1 2024 to June 30, 2025 | | | | |
| Federal ID: | 473-909-770 | | | | |
| | | | | | |
| Description of Services | School/Site | Hourly Rate | Number of Days | Est. Hours | Amount |
| Behavior Technician | Home | 108 | | 450 | \$ 48,600.00 |
| Behavior Certified Technician Analyst | Home | 150 | | 135 | \$ 20,250.00 |
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | \$ - |
| | | | Total: | | \$ 68,850.00 |



Yellow Bus BA

MONSEY LICENSED BEHAVIOR ANALYST SERVICES, PLLC

SCHOOL BASED SERVICES FEE SCHEDULE – School Discount for '24-'25 year
(Provided on school premises during school hours)

BIS: ABA METHODOLOGY

| | |
|----------------------------------|-------------------|
| Behavior Technician | \$30/pr 15 min |
| Board Certified Behavior Analyst | \$37.50/pr 15 min |

HOME BASED SERVICES FEE SCHEDULE – School Discount for '24-'25 year
(Provided in member's home)

BIS: ABA METHODOLOGY

| | |
|----------------------------------|-------------------|
| Behavior Technician | \$27/pr 15 min |
| Board Certified Behavior Analyst | \$37.50/pr 15 min |

CENTER BASED SERVICES FEE SCHEDULE – School Discount for '24-'25 year

BIS: ABA METHODOLOGY

| | |
|----------------------------------|-------------------|
| Behavior Technician | \$30/pr 15 min |
| Board Certified Behavior Analyst | \$37.50/pr 15 min |

MONSEY LICENSED BEHAVIOR ANALYST SERVICES FEE SCHEDULE
(Updated 8/8/23)

BIS: ABA METHODOLOGY

| | |
|----------------------------------|--------------------|
| Behavior Technician | \$100.14/pr 15 min |
| Board Certified Behavior Analyst | \$106.92/pr 15 min |
| Assessment | \$172.50/pr 15 min |

I agree to the fee schedule indicated above. Services will be based on BCBA recommendation.

Name of School/School District: _____

Signature of Authorized Representative: _____

Name of Representative (printed): _____

Email Address: _____