



West Virginia Department of Health and Human Resources

The Bureau for Medical Services

BMS Request for Proposal MED12001

Attachment C: Cost Sheet

Cost information below as detailed in the RFP and submitted in a separate sealed envelope. Cost should be clearly marked. Vendor will propose an all inclusive annual amount for each year of the proposed contract.

Table with 5 columns: ASO Program, Year 1, Option Year 1, Option Year 2, Total. Rows include Development/Start-Up Cost, Waiver Operations, and Grand Total for All Services.

Optional Services:

Optional Services as specified in Section 2.4.5 shall be bid as an all-inclusive hourly rate and shall require Bureau approval of a Statement of Work and submission of a related Cost Estimate.

Hourly Rate: Year 1 \$125.00

Hourly Rate: Option Year 1 \$125.00

Hourly Rate: Option Year 2 \$125.00

Notes to Cost Bid Sheet:

The cost bid should be inclusive of all anticipated training, travel and related expenses, including supplies.

The "Grand Total for All Services" for the (3) three year period will be used for purposes of bid evaluation. Optional services will not be considered in the determination and award of cost points.

The vendor will invoice monthly in arrears in twelve (12) equal monthly installments.

Signature: [Handwritten Signature] Title: Chief Financial Officer Date: 9-14-2011