**ATTACHMENT A COST PROPOSAL**

RFP 6056 Z1

Form A

Aging Information System Software Solution

Bidder to complete the following cost proposal, including all costs associated with each section.

|  |  |
| --- | --- |
| **DESCRIPTION** | **COST** |
| Project Planning which includes the following:1. Detailed Project Work Plan
2. Testing Methodology
3. Risk Management. Issue Management, Organizational Change Control, Work Management, and Change Control procedures.
4. Status Reporting Plan
5. Project Status Meetings Protocol
6. Electronic Project Library
7. Security Plan
8. Business Continuity Plan/Disaster Recovery Plan
 | $ |
| Requirements Analysis which includes the following:1. Requirements Validation Documents
2. Fit/Gap Analysis
3. Pilot/Prototype
 | $ |
| Design which includes the following:1. Detailed System Design Documentation
2. Testing Plan
 | $ |
| Development, Interfaces, and Integration which includes the following:1. Software Development Plan
2. Development/Customization
3. Software Development Summary Report
4. Schedule of Interface Development Efforts
5. Interface Environment Setup
6. Interface Development and Testing
 | $ |

FIRM Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_-

|  |  |
| --- | --- |
| Data Conversion which includes the following:1. Data conversion Plan and Guide
2. Conversion Results Report
 | $ |
| Testing which includes the following:1. User Acceptance Plan and Testing
2. User Acceptance Testing Results
 | $ |
| Training which includes:1. Training Plan
2. Training Sessions
3. Training Manuals
 | $ |
| Implementation which includes the following:1. Implementation Plan
2. Final Readiness Assessment
3. Documentation
4. Problem Resolution Plan
5. System Go-Live
 | $ |

**FIRM NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ATTACHMENT A COST PROPOSAL**

RFP 6056 Z1

Form B

Aging Information System Software Solution

Bidder to complete the following Cost Proposal.

**Please note that the sum of the percentage of payment prior to completion of implementation cannot exceed 35%**.

**SAMPLE COST PROPOSAL WITH PERCENTAGES**

|  |  |  |  |
| --- | --- | --- | --- |
| **DESCRIPTION** | **Percentage****Of Total Cost** | **COST** |  |
| Project Planning | 2% | $20,000 | The percentages for these 7 Milestone cannot total up to more than 35% of the Total Cost from Form A. |
| Requirements Analysis | 3% | $30,000 |
| DesignSAMPLE | 10% | $100,000 |
| Development, Interfaces, and Integration | 11% | $110,000 |
| Data Conversion | 5% | $50,000 |
| Testing | 2% | $20,000 |
| Training | 2% | $20,000 |
| Implementation | 65% | $650,000 |  |
| **Totals** | 100% | $1,000,000 |  |

Firm Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The total cost cannot exceed the total cost on Form A. Please complete per the sample above.

|  |  |  |
| --- | --- | --- |
| **DESCRIPTION** | **Percentage****Of Total Cost** | **COST** |
| Project Planning | % | $ |
| Requirements Analysis | % | $ |
| Design | % | $ |
| Development, Interfaces, and Integration | % | $ |
| Data Conversion | % | $ |
| Testing | % | $ |
| Training | % | $ |
| Implementation | % | $ |
| **Totals** | 100% | $ |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Description | License Type(e.g. Concurrent, Unlimited, etc.) | Cost Per User  | Initial Contract Period Year One | Initial Contract Period Year Two | Initial Contract Period Year Three | Initial Contract Period Year Four |
| Software License Fee for 200 Licenses |  |   |  |  |  |  |

Please note any Tier pricing available for Software licenses.

Please note all applicable License types that would be used.

Firm Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Description | Initial Contract Period Year One | Initial Contract Period Year Two | Initial Contract Period Year Three | Initial Contract Period Year Four |
| Hosting Fee  |  |  |  |  |
| Travel Expense  |  |  |  |  |
| Operations and Maintenance |   |   |   |   |
| Any additional costs not included above and list what those costs are for. |  |  |  |  |

**Renewal Costs:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Description | License Type(e.g. Concurrent, Unlimited, etc.) | Cost Per User  | First Optional Renewal Period – Year One | First Optional Renewal Period – Year Two | First Optional Renewal Period – Year Three |
| Software License Fee: 200 Licenses |  |   |  |  |  |
| Hosting Fee  |  |  |  |
| Travel Expenses  |  |  |  |
| Operations and Maintenance |  |  |  |
| Any additional costs not included above and list what those costs are for. |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Description | Second Optional Renewal Period – Year One | Second Optional Renewal Period – Year Two | Second Optional Renewal Period – Year Three |
| Hosting Fee  |  |  |  |
| Travel Expenses  |  |  |  |
| Operations and Maintenance |  |  |  |
| Any additional costs not included above and list what those costs are for. |  |  |  |

**Firm Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Optional Costs:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Description | Initial Contract Period Year One | Initial Contract Period Year Two | Initial Contract Period Year Three | Initial Contract Period Year Four |
| Ombudsman Long Term Care Database |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Description | First Optional Renewal Period – Year One | First Optional Renewal Period – Year Two | First Optional Renewal Period – Year Three |
| Ombudsman Long Term Care Database |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Description | Second Optional Renewal Period – Year One | Second Optional Renewal Period – Year Two | Second Optional Renewal Period – Year Three |
| Ombudsman Long Term Care Database |  |  |  |

Please list all Job Titles that pertains to this contract where the State of Nebraska would be charged an Hourly Rate

|  |  |
| --- | --- |
| **Description By Job Title** |  **Rate Per Hour** |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |

Bidder may add additional lines as needed

**Firm Name: ­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**