**REVISED COST PROPOSAL**

**ATTACHMENT B**

**RFP #5864 Z1**

BIDDER NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| DESCRIPTION | Initial Contract Period Year One | Initial Contract Period Year Two | Initial Contract Period Year Three | Initial Contract Period Year Four | Initial Contract Period Year Five | Initial Contract Period Year Six |
| Set-up fee Matrix Design, and Benefit System load  |  |  |  |  |  |  |
| Administrative Fee per Claim (must be fixed amount)  |  |  |  |  |  |  |
| Total |  |  |  |  |  |  |

**OPTIONAL RENEWALS**

|  |  |  |
| --- | --- | --- |
| DESCRIPTION | First Optional Renewal Period Year One | First Optional Renewal Period Year Two |
| Administrative Fee per Claim (must be fixed amount) |  |  |
| Total |  |  |