ATTACHMENT B

COST PROPOSAL
RFQ # C043779

Medical Director and Physician Support Staff Services
Total Contract Life: Five (5) Years

Instructions to Bidders

Bidders must complete all sections of this cost proposal template. Costs should be provided in **U.S. dollars** and reflect the **total all-inclusive cost** over the full five (5) year contract term. All exclusions, and dependencies must be clearly stated. Failure to complete all sections may result in disqualification.

Vendor Information

- Vendor Name:_____
- Primary Contact Name & Title: _____
- Email Address _____
- Phone Number: _____

MINIMUM REQUIREMENTS EVALUATION TOOL	
Minimum Requirements	**Rating** Place an 'X' in the appropriate box.
Bidder must be a medical practice or an agency having a minimum of three (3) years' experience with, or placement of, Medical Directors, Physicians and Advanced Practice Providers (APPs) who possess a license and current registration to practice medicine in New York State and,	☐ Yes ☐ No
Bidder must be a medical practice or an agency, having three years' experience with, or placement of Medical Directors who have at least two (2) years of experience acting in a medical administrative or supervisory capacity	☐ Yes ☐ No
Physicians (other than the Medical Director) and APPs must have at least one year of post licensure medical experience in a skilled nursing facility or hospital based skilled nursing/long term care unit.	☐ Yes ☐ No

SECTION 1: MEDICAL DIRECTOR SERVICES

Year	Monthly Rate	Annual Cost
1		
2		
3		
4		
5		
Total Cost		

- Monthly rate shall be fully burdened (inclusive of all administrative, travel, and overhead costs unless otherwise specified).
- Services include but are not limited to regulatory oversight, QA/QAPI participation, policy review, and on-site presence, as well as on-call needs.

SECTION 2: PHYSICIAN SUPPORT STAFF SERVICES

Year	*Estimated Average Resident Population	Estimated Annual Cost ($)
1	**60**	
2	**60**	
3	**60**	
4	**60**	
5	**60**	
Total Cost		

Instructions to Bidders:

1. Pricing:
    - Bidders must provide a fixed price for each contract year.
      *Estimated average resident population is based on historical values as listed in Section 4C of the RFQ.
    - Pricing must include all labor, materials, overhead, administrative costs, and any other applicable expenses.
2. Total Bid Price:
    - The Total Bid Price will be calculated as the sum of all estimated annual costs.
3. Assumptions:
    - No additional fees or charges outside of this pricing structure will be accepted unless explicitly stated.
4. Required Breakdown:
    - Costs must be clearly presented on a per-year basis, reflecting the full annual cost of all services combined.
    - Each year must be completed; leaving blanks may result in disqualification.

5. Evaluation:
    - Award will be based on the lowest responsive and responsible total cost.

SECTION 3: TOTAL CONTRACT COST

	Section 1 -Total Cost ($)	**Section 2-Total Cost ($)**	**Total Proposed Contract Cost ($)**
Totals			

Instructions to Bidders:

Bidders shall complete this section by consolidating all costs from Section 1: Medical Director Services and Section 2: Provider Support Staff Services to present a complete and transparent total contract cost.

1. Total Proposed Contract Cost:
    - Bidders must calculate a Total Contract Cost by summing the Total Costs proposed in Section 1 and Section 2.
    - This total represents the bidder's all-inclusive cost to perform the services for the full contract term.
2. Consistency Requirement:
    - All amounts entered in this section must directly correspond to and reconcile with the values provided in Sections 1 and 2.
    - Any inconsistencies, mathematical errors, or deviations may result in the bid being deemed non-responsive.
3. All-Inclusive Pricing:

- The Total Proposed Contract Cost must include all costs necessary to perform the services, including but not limited to labor, supervision, administrative expenses, travel (if applicable), and overhead.
- No additional costs outside of those reflected in Sections 1, 2, and this summary will be permitted.

4. Evaluation:
   - The Total Contract Cost identified in this section will be used as the primary cost figure for evaluation purposes.

By signing below, the bidder certifies that all pricing provided is complete, accurate, and binding for 365 days from the proposal due date.

Authorized Signature: _____

Name & Title: _____

Date: _____