

**Attachment IV  
Cost and Pricing Template**

PROPOSER:
ADDRESS:
CITY, STATE, ZIP CODE:

Proposal shall include all anticipated costs of successful implementation of all deliverables outlined for one (1) CCN-P and one (1) CCN-S.

**Year 1 Requirements for one CCN-P**

-	Readiness Reviews
-	Review of CCN compliance with standards
-	Assessment of Systems Information Capabilities
-	Encounter Data Validation
-	Technical Assistance

**Year 2 and 3 Requirements for one CCN-P**

-	Desk Review and On-site Visit
-	PIP Validation
-	Performance Measure Validation
-	Review of CCN compliance with standards
-	Assessment of Systems Information Capabilities
-	Encounter Data Validation
-	Technical Assistance
-	Determination of MLR Quality Activites
-	Validation of Consumer and Provider Surveys

<b>TOTAL PROPOSED COST FOR ONE CCN-P</b>	<b>COST</b>
YEAR 1	
YEAR 2	
YEAR 3	
<b>TOTAL COST FOR ONE CCN-P</b>	

**Year 1 Requirements for one CCN-S**

-	Readiness Reviews
-	Review of CCN compliance with standards
-	Technical Assistance

**Year 2 and 3 Requirements for one CCN-S**

-	Desk Review and On-site Visit
-	PIP Validation
-	Performance Measure Validation
-	Review of CCN compliance with standards
-	Technical Assistance

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- Validation of Consumer and Provider Surveys
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<b>TOTAL PROPOSED COST FOR ONE CCN-S</b>	<b>COST</b>
YEAR 1	
YEAR 2	
YEAR 3	
TOTAL COST FOR ONE CCN-S	

<b>TOTAL PROPOSED Cost For CCN-P and CCN-S</b>	<b>COST</b>
YEAR 1 - TOTAL COST	
YEAR 2- TOTAL COST	
YEAR 3 - TOTAL COST	
TOTAL COST FOR CCN-P and CCN-S	

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**Attachment IV  
COMMENTS**

Additional Comments

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