1. **IMPLEMENTATION FEES:**
	1. The Offeror shall propose pricing for Implementation activities. The Offeror shall propose implementation fees broken down by the five (5) milestones listed in Scope of Work:
		1. Requirements Analysis
		2. Development
		3. Testing
		4. Training
		5. Deployment
	2. The Contractor shall invoice AHCCCS for the implementation fees only upon successful completion of each milestone. Successful completion will be determined in writing by AHCCCS.
2. **FIXED ANNUAL FEE:**
	1. Offeror is required to propose pricing for activities Post-Implementation by fixed annual fee. The fee shall be paid on a pro-rated quarterly basis after award. The fee shall be inclusive of all costs associated with the delivery of the service and includes staff time, mileage, insurance, and administrative cost. No additional fees will be paid by AHCCCS.
	2. AHCCCS will begin making quarterly payments after the program has been up and running for one (1) full month following user acceptance testing.
	3. Offerors shall enter a Fixed Price Annual Fee for its base solution as well as any optional elements offered (listed in the scope of work or not). For all Optional Elements, Offerors may 1.) Enter a price; 2.) Enter a statement that it is included in base solution; or 3.) Enter a statement that the optional element is not available. Offerors may enter additional optional elements offered, and AHCCCS may include them with an offer at AHCCCS’ sole discretion.

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| --- | --- | --- |
| Contract Year | Years 1 - 3 (Initial Contract Term) | Years 4 - 5 (Extension) |
| **Proposed Solution with all Required Elements**  | **$ Per year** | **$ Per year** |
| **Optional Element # 4.24**The system should leverage agency and vendor data where possible to evaluate member eligibility determinations to analyze potential accuracy or risk. Areas of risk include but are not limited to date of death, incarceration, out of state residency, inappropriate asset ownership and income. | **$ Per year** | **$ Per year** |
| **Optional Element # 4.25** The system should analyze the appropriateness and cost effectiveness of care as defined by health care guidelines such as Milliman and InterQual, and report any associated issues for the AHCCCS user to research. | **$ Per year** | **$ Per year** |
| **Optional Element # 4.26**The system should provide access to and keyword searching of AHCCCS policies, Arizona Revised Statutes (A.R.S.), Arizona Administrative Code (A.A.C.), Centers for Medicare and Medicaid Services (CMS) guidelines and policies, and the Code of Federal Regulations (C.F.R.) to support AHCCCS OIG investigations. | **$ Per year** | **$ Per year** |
| Offeror’s Optional Element  |  |  |
| Offeror’s Optional Element  |  |  |