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## **Technical Assistance and Program Support for Iowa Medicaid (RFP MED-19-011)**

Iowa Department of Human  
Services

### **COST PROPOSAL**

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Attachment F Cost Proposal Worksheet

Off-site Hourly Rate (Hours incurred while not at DHS facilities) (Note: DHS does not pay for travel time)	Estimated Quantity *	Hourly Rate SFY 19	Hourly Rate SFY 20	Hourly Rate SFY 21	Hourly Rate SFY 22	Hourly Rate SFY 23	Hourly Rate SFY24	Total for All Fiscal Years
Blended Rate	750	\$ 325.00	\$ 341.25	\$ 358.31	\$ 376.23	\$ 395.04	\$ 414.79	\$ 1,657,966.25
<b>On-site Lump-sum Per Person</b> (days spent at DHS facilities having meetings - Inclusive of all travel costs, including but not limited to airfare, care rentals, hotel charges and meals.)		On-site Visit SFY 19	On-site Visit SFY 20	On-site Visit SFY 21	On-site Visit SFY 22	On-site Visit SFY 23	On-site Visit SFY 24	
One Work Day	8	\$ 3,425.00	\$ 3,555.00	\$ 3,691.50	\$ 3,834.83	\$ 3,985.32	\$ 4,143.33	\$ 181,079.79
Two Work Days	2	\$ 6,350.00	\$ 6,610.00	\$ 6,883.00	\$ 7,169.65	\$ 7,470.63	\$ 7,786.66	\$ 84,539.89
Three Work Days	3	\$ 9,275.00	\$ 9,665.00	\$ 10,074.50	\$ 10,504.48	\$ 10,955.95	\$ 11,430.00	\$ 185,714.76
Four Work Days	8	\$ 12,200.00	\$ 12,720.00	\$ 13,266.00	\$ 13,839.30	\$ 14,441.27	\$ 15,073.33	\$ 652,319.15
Five Work Days	2	\$ 15,125.00	\$ 15,775.00	\$ 16,457.50	\$ 17,174.13	\$ 17,926.58	\$ 18,716.66	\$ 202,349.73
<b>Grand Total**</b>								\$ 2,963,969.57

**NOTE: This form may not be marked as confidential or proprietary.**

**Pricing information cannot be shielded from the public or other bidders under Iowa law.**

\* These units are for comparison purposes only. They are not indicative of an estimate of hours for the contract.

\*\* This total will be used to compare bidders' bid as indicated in the RFP Section 4.3