

**REVISED #2 ATTACHMENT J
PRICE SHEET**

**(MANDATORY)
(TO BE COMPLETED BY RESPONDENT)**

An Attachment J – Price Sheet must be submitted for each circuit proposed.

Enter the Circuit Number For Which Rates (Prices) Are Being Proposed: _____

Column 1	Column 2	Column 3	Column 4	Column 5	Column 6
Service Type	Service Unit	Maximum Available Rate	Rate Proposed or N/A	Weight %	Weighted Rate per Service Type
Diagnostic Mental Health, Substance Abuse, and/or Integrated Mental Health and Substance Abuse Evaluation Report	1 per youth	N/A		40%	
Individualized Mental Health, Substance Abuse, and/or Integrated Mental Health and Substance Abuse Treatment Plan	1 per youth	N/A		30%	
Individualized Treatment Plan Review	1 per youth every 30 days	N/A		20%	
Mental Health, Substance Abuse, and/or Integrated Mental Health and Substance Abuse Individual Counseling per sixty (60) minute session <i>(Outpatient Services in Office)</i>	1 session	N/A		30%	
Mental Health and/or Substance Abuse Family Counseling per sixty (60) minute session	1 session	N/A		10%	
Mental Health and/or Substance Abuse Group Counseling per sixty (60) minute session (not to exceed ten youth per group)	4 session 1 youth	N/A		10%	

Column 1	Column 2	Column 3	Column 4	Column 5	Column 6
Service Type	Service Unit	Maximum Available Rate	Rate Proposed or N/A	Weight %	Weighted Rate per Service Type
Clinical Case Management (four times per month as defined in this RFP)		\$50.00			
**All treatment sessions provided shall be sixty (60) minutes in duration with fifty (50) minutes of counseling and provided by a licensed professional or a non-licensed clinical staff person meeting the requirements outlined in Attachment I, Section III., C., Staffing/Personnel.					
Discharge Plan	1 per youth	\$20.00			
Residential Mental Health Inpatient Bed	1 per day	N/A		5%	
Residential Substance Abuse Inpatient Bed	1 per day	N/A		5%	
Drug Testing/Urinalysis	1 each	\$35.00			
Youth Monthly Progress Report (1 per youth every thirty (30) days)	1 per youth every 30 days	\$5.00			
Grand Total Weighted Rate (Price)**					

****THIS GRAND TOTAL WEIGHTED RATE IS FOR BIDDING PURPOSES ONLY AND WILL BE USED FOR PRICE POINT AWARDS. ACTUAL RATES PROPOSED BY THE RESPONDENT WILL PREVAIL.**

Respondents MUST submit a rate (price) for as many of the services listed above that they are able to provide. The Department reserves the right not to award contracts based solely upon proposed rates that exceed competitive market rates.

It is **MANDATORY** that the Respondent shall provide a price (rate) for services they are able to provide by returning a completed copy of the Department's REVISED Attachment J – Price Sheet. The rate evaluated for price award points will be the Grand Total Weighted Rate (Price), as specified above. The rates (prices proposed) must include all services, material and labor necessary to complete the Services to be Provided in Attachment I, as described in this RFP and the Respondent's proposal. The rates shall be expressed as two decimal number rates. Any proposal without a completed REVISED Attachment J – Price Sheet for the circuit being proposed shall be rejected.

Instructions:

In column 4, the Respondent shall enter in the "Rates Proposed".
Next, multiply each rate proposed in column 4 by the Weighted % in column 5, if applicable.
In column 6, the Respondent shall enter in the weighted rate proposed for each Service Type (column 4 x column 5 = column 6)
The "Grand Total Weighted Rate (Price)" is the sum of all the rates in column 6.

By submission of, and signature on, this form, the Respondent signing below has the authority to bind the Respondent and agrees to all terms and conditions of this RFP and commits the Respondent to the price (rate) as stated in this REVISED Attachment J – Price Sheet.

Printed Name: _____

Title: _____

Signature:

Date: