

ATTACHMENT 20



Department of
Civil Service

**Data Provider Start-up Fee Form - RFP
entitled: "New York State Health Insurance
Program Decision Support System"**

Offeror Name: _____

Per Data Provider Start-Up Fee \$ _____

Quote in the space provided the cost to cover all of the Offeror's costs to add a Data Provider(s) or replace an existing Data Provider(s) to the DSS during the term of the Contract once Implementation activities have been completed and accepted by the Department and the DSS is fully operational.

An Offeror must quote a fixed, all-inclusive fee that shall remain in effect for the duration of the Contract after the Implementation Period. The Department will not accept fees with any variables or contingencies. An Offeror must fill in the quote in the space provided.

The Department will not accept modifications to this exhibit.