

Attachment 3
Detailed Cost Form
NYS Tobacco Control Program Smokers' Quitline

Instructions

Please use the form below in detailing your cost proposal. For Year 1, please indicate start up costs where applicable. Please make copies of the form and fill in the year for each subsequent years' costs. The cost for each year should then be included in the Total Cost table along with the Total Cost for 5 years.

The value of this contract will be adjusted according to call volume and type of call serviced by the contractor and the number of registered users of the Quitsite. Bidders should clearly offer the following:

- a price per call for the types of calls described in this RFP for the Call Center;
- a price per call for the types of calls described in this RFP for the Quitline.
- the cost of storing and mailing the nicotine replacement therapy (bidders should **not** include in the financial proposal or the price per call, estimates of nicotine replacement medications which will be purchased under a separate contract);
- the costs for conducting the client satisfaction surveys;
- the cost of printing, storing and mailing the informational material; and the per registration cost for the Quitsite

Please refer to Section C. Detailed Specifications for specific details on all project deliverables.

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NYS Tobacco Control Program Smokers' Quitline**

Bidder Name: _____

Year: _____

(Indicate start up costs for Year 1 where applicable.)

Program Deliverable 1--Call Center	Cost per Call	Total Cost
Incoming calls Based on 200,000 calls per year		
Outgoing calls (Fax-to-Quit and responses to www.BeSmokeFreeNY.com inquiries) Based on 10,000 Fax-to-Quit referrals per year		
Total Program Deliverable 1 Cost		

Program Deliverable 2—Quitline	Cost per Call		Total Cost
Basic Quitline service (includes callers with private health insurance and known coverage of tobacco dependence treatment by the health insurance plan based on 140,000 persons per year).	Intake Call	_____	
	Call 2 (Quit Date)	_____	
	Call 3 (NRT Receipt)	_____	
Tobacco users who already quit (relapse prevention) based on 10,000 callers per year			
Total Program Deliverable 2 Cost			

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Bidder Name: _____

Year: _____

Program Deliverable	Cost
Deliverable 3—NYS Cessation Website	
Deliverable 4—NYS Smokers Quitsite <ul style="list-style-type: none"> • 50,000 registrations per year 	
Deliverable 5—Collaborative Marketing and Outreach Plan	
Deliverable 6—Materials Development and Fulfillment Services 1. cost of printing, storing and mailing informational materials 2. cost of storing and mailing NRT for up to 200,000 New Yorkers per year	
Deliverable 7—Data and Reports	
Deliverable 8—Evaluation <ul style="list-style-type: none"> • Monthly satisfaction surveys 	
Deliverable 9—Quality Improvement Plan	
<i>Total Cost Deliverables 3-9 For Year _____</i>	
<i>Total Cost ALL Deliverables For Year _____</i>	

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Bidder Name: _____

Year 1 Total Cost	
Year 2 Total Cost	
Year 3 Total Cost	
Year 4 Total Cost	
Year 5 Total Cost	
Total Cost For 5 Years	