

Attachment A – RFP Cover Page and Declaration

The Vendor must complete and submit this Attachment. This Attachment shall be the cover page for the Vendor’s Proposal.

Request for Proposal	0900000331
RFP Name	Pharmacy Benefit Consulting Services

Vendors Name:	
Address:	
City:	
State:	
Zip Code:	
Point of Contact for this RFP:	
Phone:	
Fax:	
Email:	

The following documents are required for this proposal (please mark off each document to acknowledge that you have submitted the document in the proper format):

- Attachment A RFP Cover Page
- Attachment B Fill in all required information on Cost Proposal Form
- Attachment C Fill in all required information on Contract Schedule
- Attachment D Complete and submit the Project Capability Checklist which includes: Level of Expertise, Risk Assessment, and Value Added.
- Attachment E Complete and submit Level of Expertise Capability Information. Submit references for each LE claim listed.
- Attachment F Complete and submit Risk Assessment Information
- Attachment G Complete and submit Value Added Information