

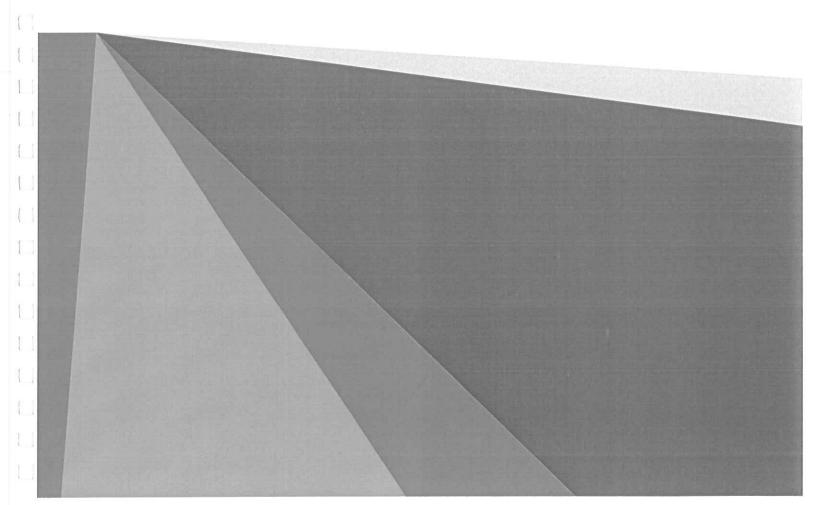
RESPONSE TO

REQUEST FOR PROPOSAL

RFP # INS12001 - COST PROPOSAL

WEST VIRGINIA OFFICES OF THE INSURANCE COMMISSIONER

Oliver Wyman Actuarial Consulting, Inc. 411 East Wisconsin Avenue, Suite 1600, Milwaukee, WI 53202-4419
Phone: 414 223 7988 Fax 414 223 3244
Tammy P. Tomczyk, FSA, MAAA tammy.tomczyk@oliverwyman.com



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OLIVER WYMAN

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Attachment C: Cost Sheet

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Cost Information below as detailed in the Request for Proposal and submitted in a separate sealed envelope. Cost should be clearly marked.

Name of Proposir	ng Firm: Oliver Wyman Actuarial Consulting, Inc.	Proposed Bid (flat fee)
Section 2.4.1	Background Research	\$1468,000
Section 2.4.2	Exchange Design Options	\$ 45,000
Section 2.4.3	Exchange Organizational and Impact Assessment	\$ 195,000
	Section 2.4.1, 2.4.2 and 2.4.3	SUBTOTAL 1 \$ 708,000
Section 2.4.4	Ad Hoc Services in Support of Continued Exchange Planning	Composite Hourly Rate = \$350.
	Section 2.4.4	Estimated Number of hours 1,500 SUBTOTAL 2 \$ 525,000
		TOTAL (SUBTOTAL 1+2\$, 233,000

If applicable, sign and submit the attached Resident Vendor Preference Certificate with the proposal.