

## QUESTIONS & ANSWERS – RFP #200807

The following questions/requests have been submitted concerning RFP #200807 – Dental Coverage. None of the questions (below) received indicated a need for a change to the RFP document. Thus, no Addenda will be issued. All questions received have been answered:

1. Do you all currently have a network with your Dental Plan? And, if so, what network? Asking for a report with the following information: Office Name, Provider Name, Address, City, State, Zip, Tax ID, NPID?

The District's current dental plan does not utilize a network. Please see the DATA FOR PROPOSERS for the file "ECSD Providers. xlsx" which lists all providers and the EIN.
2. Do you have the census and supporting documents for this group and bid?

All information regarding the Dental RFP can be found on the ECSD Purchasing website.
3. I would like to confirm if the only document that was uploaded to DemandStar is the Request for Proposal and Proposal Acknowledgement. If so, will you be providing the Dental COCs, census of eligible employees, current rates and experience in DemandStar as well or will these be available in another manner?

The District's procurement website contains all documents.
4. Just looking for a bit of clarification on the current dental arrangement. Would you consider the current arrangement an indemnity plan where members can essentially go anywhere they would like and will simply be reimbursed for the expenses? Today there is no network in place...correct?

Yes, you are correct there is no network currently in use.
5. On page 10 of the RFP, the Scope of Work states that the District would like to review continuing its current direct reimbursement dental plan model plus two additional options. We are unable to offer the District a direct reimbursement dental plan option at this time. Is the District open to receiving bids with ONLY alternate options that do NOT include a direct reimbursement model? Are there any specific additional plan model options the District has in mind?

Firms are eligible to respond to any or all three described in the Scope of Work. No additional options have been requested.
6. Can the RFP be extended slightly? It does not have to be a long extension, but two or three days would be very helpful. We are really excited about this opportunity, but due to print and shipping deadlines, October 7th will be a tough date to meet. I think this will be true for all carriers. If you could extend the RFP to Wednesday the 9th or Thursday the 10th, I think this would yield a more optimal response from the market.

No extension can be granted.
7. I have a quick question for you on the Excel file for Escambia County School District. That file lists that the workbook should contain the following tabs:

Tab #	Worksheet Description	Name of Worksheet Tab
1	Introduction	Introduction
2	Minimum Requirements	Min. Requirements
3	Plan Administration and Service Capabilities	Plan Administration and Service Capabilities
4	Net Cost Consideration	Net Cost Consideration

5 Fees Tab Fees  
6 Plan Design Questionnaire Plan Design  
7 Plan Design and Rates Tab Quoted Plan Designs and Rates  
8 Option #1 Current Plans Option #1  
9 Option #2 Alternative Plan Option #2  
10 Option #3 - Network Access and Disruption Option #3 Questions  
11 GEO Access GEO Access  
12 Related Experience and References Related Experience and References  
13 Optional Considerations Optional Considerations  
14 Reporting Tab Reporting  
15 Performance Guarantees Performance Guarantees  
16 Explanation Explanation  
17 Officer Statement Officer

However, only the following tabs are included:

- Introduction
- Dental Questionnaire
- Fees
- Plan Designs & Rates
- Reporting
- Geo Access Request Standards
- Performance Guarantees
- Explanation
- Officer Statement

Could you please confirm that we are not missing any tabs?

Also, we need to provide the following: Please attach a chart of your Reasonable and Customary Charge Levels. Attach and name the file: "[Your Organization's Name]\_Dental Charge Level Chart". Could you please what I should request for this? Top 20 procedure codes for a certain ZIP or all of FL? I wasn't sure what to request for this.

You are not missing any tabs. The Tab # fields should read as:

1 Introduction  
2 Minimum Requirements  
2 Plan Administration and Service Capabilities  
2 Net Cost Consideration  
2 Plan Design Questionnaire  
2 Option #1 Current Plans  
2 Option #2 Alternative Plan  
2 Option #3 - Network Access and Disruption  
2 Related Experience and References  
2 Optional Considerations  
3 Fees Tab  
4 Plan Design and Rates Tab  
5 Reporting Tab  
6 GEO Access  
7 Performance Guarantees  
8 Explanation  
9 Officer Statement

Please respond with stating the percentile limit level for R&C (usually between 50<sup>th</sup> & 95<sup>th</sup>) charges .

8. From the Dental Questionnaire tab:

- Line 15: requirements relative to attendance at client and open enrollment meetings. Are there specific requirements you would like us to agree to, or would you prefer that we respond with our capabilities?
- Line 23: data warehouse requirements. Are there specific requirements you would like us to agree to, or would you prefer that we respond with our capabilities?
- Line 24: member communication requirements. Are there specific requirements you would like us to agree to, or would you prefer that we respond with our capabilities?
- Line 26: transition management requirements. Are there specific requirements you would like us to agree to, or would you prefer that we respond with our capabilities?
- Are there specific requirements you would like us to agree to, or would you prefer that we respond with our capabilities?
- Line 347: "Hold Harmless" worksheet. We can review and respond to the Hold Harmless section in the RFP document. Will this be sufficient, or will you provide a separate Hold Harmless worksheet?

Other questions from the RFP:

- The RFP specifies that Escambia County School District would like to review the current direct reimbursement arrangement and 2 options. If we are unable to administer the current direct reimbursement arrangement are we able to submit options or will our proposal only be considered if we are quoting the current arrangement?
- If we are able to provide options, are there specific plan designs Escambia County School District would like to review or is this left to our discretion?
- Is an extension to the due date possible?

Line 15: There are no specific requirements other than agreeing to attend meetings with the client to include open enrollment meetings. If you agree to attend all then select Yes

Line 23: Please disregard the question referencing data warehousing. Please do not provide an answer in the drop-down field

Line 24: Member Communication funding can be found at the bottom of the Dental Questionnaire tab under "Optional Considerations". If you choose to include funding in your proposal for Communication, please select Yes and then also do the same for the Optional Consideration section.

Line 26: Please disregard the question referencing transition management. Please do not provide an answer in the drop-down field.

Line 347: Yes, please respond in the Hold Harmless Section - no separate worksheet will be provided.

Firms are eligible to respond to any or all of the three described in the Scope of Work.

Plan Designs are contained in the RFP - no changes or additional options have been requested.

Extension to deadline - No extension can be granted.

9. Questions

1. Confirm that the plan year runs January 1 through December 30, not December 31.

Yes, the plan year is 1/1-12/31

2. Please provide the requirements for the following "Minimum Requirements" from the Dental Questionnaire:

a. You have reviewed and accept the requirements relative to attendance at client and open enrollment meetings.

There are no specific requirements other than agreeing to attend meetings with the client to include open enrollment meetings. If you agree to attend all then select Yes

b. You have reviewed and accept the data warehouse requirements.

Please disregard the question referencing data warehousing. Please do not provide an answer in the drop-down field

c. You have reviewed and accept the member communication requirements.

Member Communication funding can be found at the bottom of the Dental Questionnaire tab under "Optional Considerations". If you choose to include funding in your proposal for Communication, please select Yes and then also do the same for the Optional Consideration section.

d. You have reviewed and accept the transition management requirements.

Please disregard the question referencing transition management. Please do not provide an answer in the drop-down field.

3. The Dental Questionnaire requests a copy of our most recent annual financial statement, or other documentation reflecting financial performance. Please confirm that an annual report will satisfy this request.

Yes, providing an Annual report suffices.

10. Consumer Price Index (CPI) (page 14) – this section states that any rate adjustment shall be based on the change in CPI Index for a renewal year – is this to only apply to the ASO Fee that the administrator charges for the administration of the plan?

Yes

ECSD Providers Report –

1. Is the Tax ID Number listed in Column A on this report?

Yes If not, can you provide this to us? It is provided

2. Can we get the provider's address (Street Address, City, State, Zip) included on the provider report?

No, the provider list provided is all we have.

3. Does ECSD have access to a PPO Network for their plans today? No

If so, can you provide an indicator on the provider report that identifies whether the provider is in the PPO network that is being used by ECSD today?

No, there isn't a PPO Network currently used

ECSD Dental RFP Final

1. Does ECSD require printed booklets and ID cards or can we provide only electronic versions of both the ID cards and Employee Certs to the participating members?

No

2. If paper certs and ID cards are required, will ECSD require that the administrator awarded this program be required to mail both the ID cards and Certs to the member's home addresses?

Not necessary

ECSD Provider Disruption Claims Report

1. This report appears to provide us with claims by incurred date and paid date. We noticed that this report only covers the time period of the calendar year 2018. Is it possible to obtain an additional report that includes claims through July or August of calendar year 2019?

We had a few issues in how we received the claim reports so we cleaned it up as much as we could.

2. Under the column labeled employee, is that the amount paid under the current plan by the provider?

We had a few issues in how we received the claim reports so we cleaned it up as much as we could.

3. Can you provide definitions for the Type Codes under column C on this report?

We had a few issues in how we received the claim reports so we cleaned it up as much as we could.

4. Can you provide definitions for the diagnostic codes listed under column Q on this report?

We had a few issues in how we received the claim reports so we cleaned it up as much as we could.

5. Does ESCD have access to a PPO Network with their current administrator? No If so, what PPO Network do they have access to today?

N/A

6. If there is a PPO Network available today, can we get a field added to the Provider Disruption Report indicating whether the provider is or was an in-network PPO Provider when the claim was paid?

There is no current network

7. Can we get the provider's TIN added to the Provider Disruption Claims report along with their address or zip code where the provider is located?

No

8. For your claim's reimbursement, can you provide us with the UCR Percentile used to pay the out of network providers if a network is being utilized today?

There is no OON because there isn't a network.

If no network is being used, what UCR Percentile is being used to pay the current providers?

This is a Direct Reimbursement plan so there isn't a percentile used. Claims are paid per the plan design and when the member hits their maximum there is no further benefit.

ECSD Dental RFP Final

1. Does ECSD require printed booklets and ID cards or can we provide only electronic versions of both the ID cards and Employee Certs to the participating members?

2. If paper certs and ID cards are required, will ECSD require that the administrator awarded this program be required to mail both the ID cards and Certs to the member's home addresses?

We require a Plan Doc but electronic is fine. We do not currently require ID cards since we are a direct reimbursement plan that requires payment in full, and since most dentist know we have a direct reimbursement program but if we participate in a network in the future, then cards would be required.

Can an the provider file be updated to include the provider address, City, State, Zip Code and TIN, so that the most accurate disruption results can be provided.

The file provided does contain the provider name and EIN/TIN, you should be able to work from that.