

**Request for Proposal (RFP) for the
State of Delaware’s Voluntary Dental Benefit Program**

Responses to Questions (Q&A)

July 24, 2015

No.	Question:	Answer:
1	Is the upcoming 7/1/2016 Delta renewal available for review?	No, the upcoming 7/1/2016 Delta Dental contract is not available for review. The contract is in its fifth and final year through 6/30/2016. The contract that is subject of this RFP is effective 7/1/2016.
2	Regarding Attachment 1 "Delta Dental Benefit Summary (PPO)" - Is a more detailed full plan certificate available in-order to more closely match current benefits?	No, a more detailed plan certificate is not available. The current evidence of coverage with past riders has been provided. Additionally, the complete plan design information is available on the Statewide Benefits Office website at: http://ben.omb.delaware.gov/dental/index.shtml .
3	Page 9, D. e. – Please clarify the State’s estimated scope for the carrier’s required communication support (i.e. posters, flyers, newsletters, brochures and other types of media along with occasional direct mailings to eligible employees).	The scope for the carrier’s required communication support includes all those listed. The bidder should consider proposing a communication strategy to the State that includes all of the types of communications listed.
4	Page 19, “Offshore Vendor Activity” – Please clarify the term “activity central to the Scope of Services”. It would be helpful to have a better idea of what the State of Delaware includes in this category.	An example of an activity central to the Scope of Services would be that the corporate office and account management personnel reside in the United States so that, if desired, State personnel can visit the location. Though excellent customer service and accurate processing of claims are core functions, if those personnel are located offshore, the State would evaluate the methods used to ensure a secure data exchange and make a determination on a case-by-case basis. Please respond with a detailed description of the location and services provided. (Please note that there is a separate requirement in the Technical and Data Security Requirement section that data storage cannot be offshore.)

5	Page 26, #5 – What does the State estimate as a required frequency for providing regular information concerning dental health and articles and other communications?	What does the bidder recommend, keeping in mind the diversity of the State’s population and need for different types of media due to the different types of employees as well as retiree population.?
6	Page 27, #15 - Who is administering COBRA?	The State of Delaware’s COBRA vendor is Ceridian HMC, Inc.
7	Page 30, #29 - What is the premium reconciliation method? We understand the enrollment side, but what happens when an employee leaves the company in the middle of the month?	The eligibility rules state that an Active employee receives coverage until the end of the month in which the employee terminates employment. Employees who are on long-term disability status must affirmatively elect to continue coverage.
8	The PPO claims reports seem to be monthly averages. Is it possible to get actual paid claims by month?	We are not able to provide that information. The paid claims would probably not deviate significantly from month to month.
9	Please provide 2015 enrollment and claims data.	The enrollment and claims data for 2015 is not available. In order to prepare your proposal, it is not necessary to have this information.
10	Please provide Delta’s network utilization and savings reporting.	In order to prepare your proposal, it is not necessary for Delta’s network utilization and savings information to be provided.
11	Please provide the current and renewal rates.	The current rates are available at http://ben.omb.delaware.gov/dental/index.shtml . There are no renewal rates because the contract is in its fifth and final year through 6/30/2016. The contract that is subject of this RFP is effective 7/1/2016.
12	VI. Technical Standards and Security Requirements, subsection 3. Security and Encryption, b: Appendix N is the Employing Delawareans Report. Should the question read Appendix P, which is the Technology Exception Tracking Chart?	It should be Appendix R, the form itself as part of your response to that numbered item. We apologize for the error.
13	C. Submission of Proposal – Format: Is a table of contents required for the entire bid or just the appendices?	We’d appreciate it if your Table of Contents would include the entire bid - sections, each appendix, and each attachment.

14	Do addenda need to be signed?	The only addenda that need to be signed are those with signature blocks. (The corresponding requirement asking you to fill out the information should ask for a signature.)
15	Over a recent 12-month period, what percent of submitted charges were from a Delta PPO participating dentist?	In order to prepare your proposal, it is not necessary for Delta's network utilization and savings information to be provided.
16	Over a recent 12-month period, what percent of submitted charges were from a Delta Premier-only participating dentist?	In order to prepare your proposal, it is not necessary for Delta's network utilization and savings information to be provided.
17	Over a recent 12-month period, what percent of submitted charges were from a dentist who does not participate in any of Delta's networks?	In order to prepare your proposal, it is not necessary for Delta's network utilization and savings information to be provided; therefore, the State will not be providing this data.
18	Of the dentists in Delta's PPO network, what portion of the submitted charge dollars were discounted due to Participating fee allowance agreements?	In order to prepare your proposal, it is not necessary for Delta's network utilization and savings information to be provided.
19	Of the dentists in Delta's Premier network, what portion of the submitted charge dollars were discounted due to Participating fee allowance agreements?	In order to prepare your proposal, it is not necessary for Delta's network utilization and savings information to be provided.
20	If there is a reporting package that speaks to network statistics and other utilization, we can use this information to set our rates more accurately; could you provide, please?	In order to prepare your proposal, it is not necessary for Dominion's or Delta's network utilization and savings information to be provided.
21	Would it be possible to include the provider tax ID information on the PPO disruption report?	Provider tax ID information cannot be provided because some of the providers use their social security number. However, a revised list with the national provider number will be provided via secure email as soon as possible.

22	The disruption appears to be sorted by name; would it be possible to provide the disruption sorted from top utilized providers to least utilized providers?	This information will not be provided at this time. If your organization is selected as a finalist and if the top five providers are not in your network, HMO and/or PPO depending on your bid submission, you will be asked whether or not you will recruit those providers if you are awarded a contract.
23	Please provide monthly premiums, claim dollars, and claim counts or EOB counts by PPO and HMO plan. Please split between actives and pensioners.	An average for monthly paid claims has been provided along with enrollment broken out by Active and Pensioner. In order to prepare your proposal, it is not necessary for claim counts to be provided. Current rates can be found at http://ben.omb.delaware.gov/dental/index.shtml .
24	(Regarding the) Delta Paid Claims spreadsheet. It appears the actual monthly claims were not provided but rather the annual claims were divided by 12 for each year. In the past we were given actual claims paid. Can this be provided ?	We are not able to provide that information. The paid claims would probably not deviate significantly from month to month.
25	Please provide tier rate history dating back to 2012 for the Dominion and Delta PPO/Premier plans.	Please see the chart at the end of this document.
26	Have there been any plan design changes since 2012? If so please provide type of change and effective date.	No, there have not been plan design changes since FY2012.
27	Please confirm whether 3-year rate guarantee must be flat or rates can step-up for those 3 years.	Your 3-year rate guarantee must be the same flat rates for all three years. Optional Years 4 and 5 must be expressed in a percentage rate cap and can be the same or different each year.
28	Please confirm whether the PPO utilization data provided by the State of Delaware is paid or submitted.	PPO utilization data has been provided on a paid basis.
29	Are bidders required to disclose which network they are using when completing the network disruption exhibit?	Yes, your network information should be based on the type of plan you are bidding on – HMO, PPO or both. Please provide separate reports with those plan and rate quote documents.

30	Should dentists listed on the disruption exhibit include all dentists submitting claims, or just those above certain thresholds or meeting other criteria?	You are asked to complete the disruption report based on your network regardless of any criteria. Please provide a “Y” indicating that the provider is in your network or a “N” indicating a non-network provider.
31	Question 55, page 32, <i>Please confirm your organization’s agreement that it is the State’s right to modify the benefit design during the contract period with reasonable notice.</i> Please confirm rates can be adjusted if the State changes plan design.	Yes, rates can be adjusted if the State changes the plan design(s).
32	Historically, approximately how many groups (e.g., local schools) chose to join the Delaware plan?	There are currently nine school districts out of a total of fifty districts/charter schools that do not participate in the State’s dental programs and offer a different dental benefit to their employees. These nine school districts are primarily larger districts with as much as one third of the State’s teacher population. There are approximately 20,000 State school district and charter school employees. All State agency organizations offer the State dental programs to their employees. There are approximately 14,000 benefit eligible State agency employees.
33	Page 53, Requirements, 1. b. - If the State does not use SSN as contract ID, what are you passing as your employee ID?	As shown on the file layouts, the Active employees use an Employee ID (“EmplID”) number. The Pension Office also uses a numerical ID.
34	Regarding Section VI, #3, Point D, Item i. "The requirement of at least ten (10) characters in a password is non-negotiable." - Is this requirement only for data transmission such as eligibility files, or does the requirement also apply to other areas of member access, such as our website?	<p>All technology and data security requirements apply to your organization’s control of Delaware data only – in transit, storage, and access. The following information is found in the policy:</p> <ul style="list-style-type: none"> • All environments such as operating systems, networks, applications, databases, etc. that require strong password authentication. • This standard does not address passwords or pin numbers for mobile devices. <p>The password length for ACF2 passwords will remain at 8 characters until ACF2 is able to support 10 or more characters.</p>

35	Page 55, d. i. - Does the Strong Password Standard apply to Delaware logins (file transfer and DE Member portals) or does it extend to our internal systems that would process DE data in order to provide this Dental coverage?	See response above.
36	Appendix R, page 83, #4 – Encryption-Data in Transit: What does "regardless of the transit mechanism" mean (wired/wireless or public networks/private network or something else)?	It should be inferred that the descriptive word, “regardless”, refers to any and all types of transit mechanisms that an organization can use to secure the State’s data in transit.
37	Appendix R, page 83, #4, Secure File Transport PDF - What in that document are the requirements we must adhere to? It seems to be more definitions and statements and we want to ensure we are correctly interpreting what the 'requirements' are.	The policy includes a list of “tools . . . to be used to secure it (the data)”. The policy also states that “this standard covers all data that is to be secured as it is being moved from point A to point B.” To reply to the requirement, the bidder should determine if their organization uses a tool or combination of tools in the policy in order to be able to confirm that the organization meets the requirement.
38	Appendix R, page 85, #10 - Security Logs and Reports: What does "access" mean (access to a report or live, real-time data or something else)? What does "user" mean (a State of Delaware user or an internal user)?	Security logs and reports are defined as information that can be compiled into a report about the access to State’s data by an internal user.
39	Ts&Cs #3 - What does "remotely" mean in this statement? Does it mean from an off-campus location, an offshore location, or something else?	The title of the policy is “Offshore IT Staffing Policy”. Within the context of “remotely”, the policy is referring to offshore locations.

Historical Rates per Plan per Fiscal Year (July 1 to June 30)

		HMO	PPO
FY12	Subscriber	\$22.68	\$25.10
	Subscriber + Spouse	\$42.14	\$51.22
	Subscriber + Child(ren)	\$45.42	\$50.28
	Family	\$61.66	\$83.90

FY13	Subscriber	\$22.68	\$25.10
	Subscriber + Spouse	\$42.14	\$51.22
	Subscriber + Child(ren)	\$45.42	\$50.28
	Family	\$61.66	\$83.90

FY14	Subscriber	\$23.80	\$34.24
	Subscriber + Spouse	\$44.24	\$69.90
	Subscriber + Child(ren)	\$47.68	\$68.62
	Family	\$64.74	\$114.52

FY15	Subscriber	\$24.74	\$35.34
	Subscriber + Spouse	\$46.00	\$72.14
	Subscriber + Child(ren)	\$49.58	\$70.82
	Family	\$67.32	\$118.18