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| J:\Function\Branding\- New OMES logo\Horizontal\OMES-logo-horiz-RGB.jpg |  | Amendment of Solicitation |

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| **Date of Issuance:** | June 2, 2020 | | **Solicitation No.** | | 0900000435 | | |
| **Requisition No.** | 0900013825 | | **Amendment No.** | | 1 | | |
| Hour and date specified for receipt of offers is changed: | | | No | Yes, to: |  | CST | |
| Pursuant to OAC 260:115-7-30(d), this document shall serve as official notice of amendment to the solicitation identified above. Such notice is being provided to all suppliers to which the original solicitation was sent.  Suppliers submitting bids or quotations shall acknowledge receipt of this solicitation amendment prior to the hour and date specified in the solicitation as follows:  (1) Sign and return a copy of this amendment with the solicitation response being submitted; or,  (2) If the supplier has already submitted a response, this acknowledgement must be signed and returned prior to the solicitation deadline. All amendment acknowledgements submitted separately shall have the solicitation number and bid opening date printed clearly on the front of the envelope. | | | | | | | |
| **ISSUED BY and RETURN TO:** | | | | | | | |
| Email: [OMESCPeBID@omes.ok.gov](mailto:OMESCPeBID@omes.ok.gov) | | Stephanie Beshears | | | | |  |
|  | | Contracting Officer | | | | |  |
|  | | 405-522-1037 | | | | |  |
|  | | Phone Number | | | | |  |
|  | | [Stephanie.Beshears@omes.ok.gov](mailto:Stephanie.Beshears@omes.ok.gov) | | | | |  |
|  | | E-Mail Address | | | | |  |
| **Description of Amendment:** | | | | | | | |
| a. This is to incorporate the following: | | | | | | | |
| Q.1. Exhibits 5-7 reference an option "With Plan Changes." Is there any direction on what plan changes the State would like to see?  A.1. The State requires returning Suppliers to provide the current plan design(s) in the OEIBA Program without any benefit changes. The State is permitting Dental Suppliers the opportunity to propose an alternative plan design, but it will not provide further direction for purpose of bid submission. The State makes the final determination as to which plan design(s) will be offered for PY2021.  Q.2. There are only two plans in this RFP. Exhibit 6 references the Dental PPO and Exhibit 7 references the Prepaid. Are these going to be the only two plans offered or are some current plans not being marketed?  A.2. These are the only two types of dental plans permitted in the OEIBA Program at this time.  Q.3. Can you please provide SPDs for your PPO plans?  A.3. Refer to <http://omes.ok.gov/services/employees-group-insurance-division/benefit-coordinator/handbooks> for the Plan Year 2020 HealthChoice Dental Handbook. Summaries of the available Plan Year 2020 PPO dental plans may be found at <https://omes.ok.gov/sites/g/files/gmc316/f/2020BOG.pdf>.  Q.4. Can you please provide experience for PPO plans?  A.4. EGID will not provide this information as it is not available for all plans.  Q.5. Can you please provide a census with only Employees/Retirees and not their dependents? Please include Status (active or retiree), Gender, Date of Birth (or age), Zip code, Dental plan and Tier.  A.5. EGID will not provide any further census information than what was provided in Exhibit 1.  Q.6. Will the State be providing claims data for rating or repricing purposes?  A.6. No. Claims experience is not available for each plan.  Q.7. Can you confirm plan year for the dental RFP and any multi-year requests?  A.7. The Dental RFP is for Plan Year 2021 for January 1, 2021 through December 31, 2021. This is a one year contract with up to two possible renewal options (PY2022 and PY2023) based on a calendar year.  Q.8. How many dental carriers is the State aiming to select? Is the State's goal to fully replace one or any carriers?  A.8. The State’s objective is to offer cost effective managed care service alternatives to the OEIBA Program’s covered population statewide and provide improvements and initiatives in dental care benefits that are available in Oklahoma while maintaining a cost efficient program and a rising level of quality dental care services. All dental Suppliers which submit qualified bids are eligible for consideration for participation. The State is not limiting the number of Suppliers, only the number of plans that each carrier may provide. There is no goal to replace any existing carrier.  Q.9. Can you provide any information on employer contribution or is the current dental coverage considered voluntary?  A.9. Dental coverage is considered voluntary for all program participants, and there is no established employer contribution with one exception. The single exception is for the group of employees of state agencies. For that group alone, there is an employer contribution towards the cost of dental coverage.  Q.9.B. Additionally, does EGID have the capability to release total members covered under the state agencies listed above in response #9? Thanks!  A.9.B. As of April 30, 2020, there were 48,291 employees who have mandatory coverage which is paid for by the employer. These primaries have 42,442 dependents covered. Dependent coverage for these is optional and there is some employer contribution. All other dental enrollees (employees and dependents) in the OEIBA Program are optional and do not have employer contributions.  Q.10. Can you provide additional information on the bidder selection process? (timing, criteria, weighting)  A.10. Upon bid closing, bids submissions will be evaluated for completeness and compliance with the terms of the RFP. This will be followed by an evaluation of the plans being proposed, including reviews by actuaries of the supporting data. Upon conclusion of this process, recommendations will be made to the Oklahoma Employees Insurance and Benefits Board during its August meeting as to which proposals should be moved forward to the Director of OMES as final recommendations for plan year 2021.  Q.11. Will the State provide a Top Utilized Provider file?  A.11. No. Accurate and complete information is not available.  Q.12. Will the state be able to release any additional enrollment data? (I.e. month to month enrollment, due to all dental plans being considered voluntary)?  A 12. No. The State will not be able to release any additional enrollment data at this time.  Q.13 Our prepaid plan currently does not offer Implants, and were subsequently disqualified on the 2019 RFP for prepaid coverage. Would it be acceptable to the State, if we filed with Oklahoma a revised copay schedule that includes Implant coverage, and our quote would be contingent upon approval by the State and acceptance by the network providers?  A.13. Any proposed plan submitted must be licensed, have the required minimum benefits, and have the required network in place as of the date of the bid submission.  Q.14. Our prepaid plan does not offer an indemnified Ortho benefit. We offer a 25% discount from an Orthodontist's normal retail fees. Would this be acceptable to the State in satisfying the $1800 minimum Lifetime ortho benefit requirement? If not, as with Implants, if we were to file an ortho copay with the State, would the State accept a prepaid quote contingent upon approval by the State and acceptance by the Network provider?  A.14. Any proposed plan submitted must be licensed, have the required minimum benefits, and have the required network in place as of the date of the bid submission.  Q.15. Exhibit 4 section IV describes a risk adjustment process “assumed by all contracted health plan carriers”.  Please confirm if this risk adjustment applies to dental carriers.  A.15. That is correct.  Q.16. Exhibit 5 section 2 notes “this is a one-year contract with two (2) renewable options. Supplier must provide Plan Year 2021 premium quotes for each proposed plan.”  Are suppliers expected to provide premium rates for 2022 and 2023 at this time or will those be rated at future renewals, if supplier is selected?  A.16. Only Plan Year 2021 premium quotes should be submitted at this time.  Q.17. Exhibit 8a-d, section II H notes the “Retention – EGID @$0.305PMPM”  Per exhibit 5 $0.305PMPM is the 2020 administration cost and the 2021 cost is to be $0.360 PMPM.  Please confirm the correct retention/administration cost to use for 2021.  A.17. The Bidder should include PY2021 premium quotes which include the PMPM of $0.360 PMPM.  Q.18. Please include a fields for gender and dental plan/dental supplier on Exhibit 1a in addition to those fields provided.  If there are eligible subscribers with waived coverage please indicate that on the census.  A.18. EGID will not provide any further census information than what was provided in Exhibit 1.  Q.19. Sun Life is in the process of developing an amendment with the State of Oklahoma to add implants and ortho copays to our prepaid dental plan. We expect this filing would be approved by the effective date of PY2021. Will the State of OK consider a prepaid plan that has benefit in pending status?  A.19. Any proposed plan submitted must be licensed, have the required minimum benefits, and have the required network in place as of the date of the bid submission.  Q.20. In regards to Exhibit 4 (Commercial Carrier Policy), please confirm that Section 2 (Excessive Pricing) and Section 4 (Risk Adjustment) are intended for Medical plans only, and do not apply to the Dental coverage  A.20. That is correct.  Q.21. What is the enrollment process for the State of Oklahoma employees? Will all EE’s be able to enroll the same way?  A.21. Specific details vary based upon type of employer. Current State employees enroll online during Option Period but use paper forms outside of Option Period. Education, local government and specified non-profit employees use a mixture of online and paper forms. Retirees utilize paper forms. Option Period enrollment typically occurs between September-October for current employees, and October-November for retirees, with an effective date of January 1st.  Q.22. How do the State of Oklahoma employees currently receive benefits communication?  A.22. During a typical Option Period, the employees receive a variety of communications, including email and limited printed materials which refer them to more extensive materials available online. Employees also have opportunity to attend informational sessions. All Suppliers may be invited to present at some larger meetings. Due to the COVID-19 global pandemic, typical Option Period communications are subject to change.  Q.23. Will the Dental carrier be able to communicate directly to EE’s, i.e. home mailing?  A.23. Throughout the Plan Year, Suppliers may communicate directly to their currently enrolled membership via any type of channel. Refer to the marketing guidelines in the Solicitation.  Q.24. What channels are available to communicate to State of Oklahoma employees?  A.24. For their enrolled members, Suppliers may use any method for which they are set up throughout the year. During Option Period, Suppliers may follow up with prospective members who contact the Supplier by any standard communication method. All advertising to prospective members must be approved by EGID. Refer to Exhibit 19 Advertising Approval Request Form for additional background.  Q.25. Do you communicate benefits to employees via employer email?  A.25. The OEIBA Program consists of 900 employer groups which have different levels of email access. During Option Period, the employees receive a variety of communications, including email and limited printed materials which refer them to more extensive materials available online.  Q.26. What decision support tools does State of Oklahoma provide to EE’s to help make choices about their Dental benefits?  A.26. This varies based upon employer. At a minimum, there is an Option Period guide available online. See <https://omes.ok.gov/sites/g/files/gmc316/f/2020BOG.pdf> Option Period materials contain contact information so that prospective members can reach Suppliers directly for additional information. EGID’s Member Services team is available for questions but will refer the prospective members back to the individual Suppliers for details on a plan.  Q.27. Does State of Oklahoma have any pain points regarding communication to their employees about their Dental benefits?  A.27. Refer to the points mentioned in the Solicitation under Marketing Restrictions. Approved Suppliers are permitted to freely communicate with their current members regarding those members’ existing benefits. There should not be any sales marketing to OEIBA Program members outside of Option Period.  Q.28. Does the census file include participants and non-participants for Dental coverage?  A.28. Participants only.  Q.29. What is the approval process and timing for communications?  A.29. Refer to Exhibit 19 Advertising Approval Request Form. Typical turnaround for review completion and response is within two business days.  Q.30. Is there a list of locations and number of employees where they are only eligible for Health Choice Dental coverage?  A.30. All OEIBA Program members are eligible to select any Program approved plan available in their zip code.  Q.31. Are there any locations where payroll deduction is not available?  A.31. No.  Q.32. Will the State of Oklahoma send communications to their Benefit Officers and employees on behalf of MetLife?  A.32. The State of Oklahoma provides limited communications to Benefit Officers and employees on behalf of a Supplier. Typically, such communications include issues affecting a large number of members and their coverage.  Q.33. Are there Social Media platforms that can be leveraged to help create awareness for Dental Benefits?  A.33. Suppliers are allowed to educate enrolled members on Facebook, Twitter, Snapchap, etc.  Q.34. What is the start/end date for enrollment?  A.34. Dates have not been officially finalized for enrollment but are expected to run September 22, 2020 through December 07, 2020.  Q.35. Sun Life is in the process of developing a plan with the State of Oklahoma to add implants and ortho copays that would meet or exceed the State's minimum requirements. We expect this to be approved by or prior to the effective date. Orthodontia is about $5000 and a $1800 copay gets you about $3,200 of ortho benefit (According to statistics from the American Dental Association (ADA), the cost for braces on average for children is $4,685 to $6,500). Our benefit would be equal to or greater than the required benefit. Will the State of OK consider a prepaid plan that has benefit in pending status?  A.35. Any proposed plan submitted must be licensed, have the required minimum benefits, and have the required network in place as of the date of the bid submission. | | | | | | | | |

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| b. All other terms and conditions remain unchanged. | | | | |
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| Supplier Company Name (**PRINT**) | | |  | Date |
|  |  |  |  |  |
| Authorized Representative Name (**PRINT**) |  | Title |  | Authorized Representative Signature |