



Solicitation Addendum

Solicitation Number: RFP #13-DOA1568086601
Solicitation Description: Voluntary Dental Benefits
Solicitation Opening Date and Time: August 20, 2025 at 2pm
Addendum Number: #3
Addendum Date: August 1, 2025
Contract Specialist or Purchasing Agent: Meredith Swartz
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1. This addendum does not need to be returned.
2. This addendum contains the items listed below:
 - The Office of State Human Resources responses to vendor questions.

QUESTION NO.	REFERENCE	QUESTION
QUESTION 1.	Provider Disruption tab within the Provider Disruption and Network Access.xlsx file	Results achieved could be significantly reduced without the 9 digit TINs. Could you please provide an updated file that contains all of the following data elements? 9-digit TIN Provider First Name Provider Last Name Provider 5 digit Zip Provider Address
	ANSWER	After completion of non-disclosure agreement with Segal, Segal will forward the updated provider disruption. See addendum #2. Please note that we are only able to provide NPI, not the 9-digit TIN.
QUESTION 2	Provider Disruption and Network Access	Can Bidders receive the following additional fields on the disruption tab of the report: Provider Tax ID, Claim totals (paid \$ and procedure frequency) by provider, and also current claim payment status (in vs out of network)?
	ANSWER	See response to question #1.

QUESTION 3	NC Flex – Dental Utilization	If available, please provide utilization splits by In Network and Out of Network services.
	ANSWER	In-network claims for calendar year 2024 were \$24,920,655 and out-of-network claims for calendar year 2024 were \$36,884,819.
QUESTION 4	NC Flex 2024 – 2025 Dental Lives-Claims	If available, please provide monthly paid premium.
	ANSWER	Monthly paid premium for March 2025 was \$5,274,515.
QUESTION 5	NC Flex 2024 – 205 Dental Lives-Claims	If available, please provide additional monthly claims data, ideally back to 1/1/23.
	ANSWER	Please see updated files provided.
QUESTION 6	NC Flex - Dental Utilization Summary.pdf	Please confirm claims data provided is on a fully-incurred basis for the time periods shown.
	ANSWER	Yes, claims data is on a fully-incurred basis.
QUESTION 7	NC Flex 2024 - 2025 Dental Lives-Claims.xlsx	Please provide monthly membership, employee count, incurred claims, premium totals by month from January 2022 to December 2022, and January 2023 to December 2023 for each plan separately.
	ANSWER	Please see updated files provided. Claims are provided on a paid basis.
QUESTION 8	NC Flex 2024 - 2025 Dental Lives-Claims.xlsx	Please provide monthly membership, employee count, incurred claims, premium totals by month from January 2024 to March 2025 separately by plan and by any relevant covered population (i.e. University System).
	ANSWER	Segal is this something you are providing?
QUESTION 9	NC Flex 2024 - 2025 Dental Lives-Claims.xlsx	Please provide a description of plan design and coverage details by plan that were in effect during the experience period, or please confirm there are no differences to the current plan designs provided.
	ANSWER	For current plan design and coverage details on our www.NCFlex.org website: <ul style="list-style-type: none"> • https://oshr.nc.gov/ncflex-2025-benefits-guide/open • https://oshr.nc.gov/state-employee-resources/benefits/ncflex/dental-plan/options

QUESTION 10	Dental Report for Census.xlsx	Can they State confirm total eligible population that these benefits are available to? On the attached file, there are approximate 127,000 employees that consist of both active and cobra would this be the correct assumption?
	ANSWER	Yes, this is the correct assumption. The total eligible population will change up or down over time; these changes may or may not be material. Bidders should be aware that current vacancy rates in state positions are higher than the historical average.
QUESTION 11	General	Please provide SBC's or SPD's for all of the plans currently in place.
	ANSWER	See response to question #9.
QUESTION 12	General - Claims	Can you please provide updated paid claims for 2025 by plan and month (with enrollments) through June 2025?
	ANSWER	Please see updated files provided.
QUESTION 13	General – Claims	To ensure more accurate pricing, can you please confirm when you are able to provide paid claims by plan and month (with enrollments) for calendar years 2022 and 2023?
	ANSWER	Please see updated files provided.
QUESTION 14	General – Benefits	Are you able to provide the most current Certificate of Coverage for the MetLife plan?
	ANSWER	See the following weblinks: Certificate of Coverage Dental - High Plan Certificate of Coverage - Dental Classic Option Certificate of Coverage Dental Low Plan
QUESTION 15	General Plan Design	Are there any member incentives offered in the current program such as rollover balances or other enhancements?
	ANSWER	No. See response to question #9.
QUESTION 16	General – Plan Design	Is there anything you would like to change or enhance in your current dental plan?
	ANSWER	The “Pricing Questions” tab in Attachment D contains questions for vendors seeking information about various potential changes or enhancements that NC Flex might consider. These questions are offered for the purpose of gathering information, and the ideas on the “Pricing Questions” tab may or may not be implemented as changes or enhancements.

QUESTION 17	2.1 Introduction – Page 3	Please provide current total member count or current member to employee ratio.
	ANSWER	See response to question #10.
QUESTION 18	RFP Section: Item 2.1 Page Number 3	Is the NCFlex currently offered as slice business? Are there multiple dental carriers to choose from?
	ANSWER	No.
QUESTION 19	RFP Section: Item 2.1 Page Number 3	Were there any benefit changes to either plan within the past 36 months?
	ANSWER	No.
QUESTION 20	RFP Section: Item 2.1 Page Number 3	Can the State please provide experience broken out by plan from the past 24-36 months that includes enrollment history?
	ANSWER	Please see updated files provided.
QUESTION 21	RFP Section: Item 2.1 Page Number 3	Can the State please provide the current dental certificates that include frequencies and limitations?
	ANSWER	See response to question #14.
QUESTION 22	Section 2.1 Page 4	How are entities added or removed from the NCFlex plan? How often does this occur? Is there a marketing or solicitation plan in place today to recruit new entities?
	ANSWER	Entities are added upon request after being created by the legislature, upon creation or closing, or after being recruited. There are usually three to six additions per year. New entities will be treated as newly eligible for benefits.
QUESTION 23	RFP Section: Item 2.1 Page Number 4	The State provides detail on the dental plan’s payroll units and references Requirement 32 in Attachment J. We cannot locate this requirement. Can the State please provide this information?
	ANSWER	In RFP Section 2.1, the text reading: <p style="text-align: center;">“The Dental Plan’s payroll units are as follows. (Note Requirement 32 in Attachment J regarding changes to this list.)”</p> is replaced with the following text:

		<p>“The Dental Plan’s payroll units are as follows. (Note Requirement 10 in Attachment J regarding changes to this list.)”</p> <p>In addition, the following payroll units are added to the list in RFP Section 2.1 on pages 4 and 5. These are existing employees for which the payroll unit was split from another payroll unit.</p> <ul style="list-style-type: none"> - Governor Morehead School for the Blind - NC School for the Deaf - Eastern NC School for the Deaf <p>COBRA participants are in their own group.</p> <p>In addition, in the list in RFP Section 1 on page 4, the University of North Carolina System Office is removed, as it is included in the UNC Chapel Hill group.</p>
QUESTION 24	RFP_Dental_Final, 2.0 Purpose of RFP, Section 2.6 Contract Type, Page 6; 3.0 RFP Requirements and Specifications, Section 3.1 General Requirements and Specifications, Section 3.1.4 Equivalent Terms, page 7	In this situation that the State should choose multiple vendors, would all vendors be required to amend benefits to create differentiation for the member population that could include enhancements or tailoring plan design to align with membership?
	ANSWER	This would be addressed if applicable upon award.
QUESTION 25	RFP Page 5, section 2.1 Introduction	Page 5 of the RFP, section 2.1 Introduction refers to a requirement 32 in Attachment J. Please confirm this is in reference to question #10 within the Contract Requirements tab of Attachment J.
	ANSWER	See response to question #23.
QUESTION 26	RFP Page 5, section 2.4 Contract Terms	Page 6 of the RFP, section 2.4 Contract Terms, refers to a requirement 15 in Attachment J. Please confirm this is in reference to question #4 within the Contract Requirements tab of Attachment J.
	ANSWER	<p>Yes. In RFP Section 2.4, the text reading:</p> <p>“the Vendor shall administer open enrollment (as stated in Attachment J, Requirement 15)”</p> <p>is replaced with the following text:</p>

		“the Vendor shall administer open enrollment (as stated in Attachment J, Requirement 4)”
QUESTION 27	Section 2.4 Page 5-6	Under Sec. 2.4 (“Contract Term”) (Pg. 5-6), at the end of the initial three (3) year term, the State has the option to renew the contract with the vendor for up to four (4) additional one-year terms “on the same terms and conditions”. What, if any, modifications to the contract can be proposed during the renewal periods by the vendor? For example, can the vendor modify premium rates at each renewal period? Are there contract terms that are non-negotiable during a renewal period? What termination rights are available to the vendor for a renewal period if the State and vendor are unable to agree to proposed modifications?
	ANSWER	<p>If the State exercises an option, in its sole discretion, to renew the contract under RFP Section 2.4, the contract terms will remain the same unless the State and the Vendor mutually amend the contract to change the terms. Regarding amendment of the contract, see RFP Attachment B, Section 1, Paragraph #30.</p> <p>The Vendor may propose changes in premium rates, with justification, for review by the Underwriter and Actuarial Service Vendor and the State. See RFP Attachment J, Requirement 9 for further details. The Vendor may also propose changes in other contract terms. The Vendor’s proposed changes in premium rates or changes in other contract terms will go into effect only if the State and the Vendor mutually agree on an amendment to the contract. The decision by the State whether to amend the contract will be made in the State’s sole discretion, and the State is not required to agree to any changes proposed by the Vendor.</p> <p>Regarding termination of the contract, see RFP Attachment B, Section 1, Paragraph #21.</p>
QUESTION 28	Section 2.6 Page 6	Section 2.6 (Pg. 6) (“Contract Type”) states the “State reserves the right to make partial, progressive, or multiple awards” for the reasons described in this Section. Does the State anticipate awarding a contract to more than one vendor? If so, how does the State anticipate dividing the membership among the vendors awarded a contract? When will the State make its decision in this regard?
	ANSWER	Refer to RFP, Section 2.6, including, “The State reserves the right to make partial, progressive or multiple awards where it is advantageous to award separately by items; where more than one supplier is

		needed to provide the contemplated specifications as to quantity, quality, delivery, service, geographical areas; or where other factors are deemed to be necessary or proper to the purchase in question.” Decisions will be made during the review process.
QUESTION 29	Section 3.1(2) Page 6	Section 3.1.2 (Pg. 6) provides that if the RFP is silent with respect to “specifications as to any detail, or the apparent omission of detailed description”, that the meaning will be “only the best commercial practice is to prevail and that only processes, configurations, materials and workmanship of the first quality may be used”. How is “best commercial practice” defined and determined? Similarly, how is “first quality” defined and determined?
	ANSWER	The State declines to provide additional text defining these terms. Vendors should respond to this portion of the RFP using the text as written.
QUESTION 30	Section 3.2 Page 7	Does the State require the completion of the Vendor Readiness Assessment Report (VRAR) linked in section 3.2, or will providing HITRUST or SOC 2 Type 2 Certification be sufficient?
	ANSWER	Yes.
QUESTION 31	RFP Section 3.2.3	Upon review of RFP Section 3.2.3 -Vendor Readiness Assessment Report Non-State Hosted Solutions (“VRAR”), please advise if the state would accept a Hi-Trust/Soc II report in lieu of completing the VRAR assessment?
	ANSWER	See response to question #30.
QUESTION 32	RFP Section: Items 3.3.3 through 3.3.7 Page Number: 8 and 9	This section references RFP Section 7.4. Did the State mean to reference Section 7.5 instead?
	ANSWER	The question is not phrased clearly, since RFP Sections 3.3.3 through 3.3.7 do not appear to include a reference to RFP Section 7.4. Vendors should respond to this portion of the RFP using the text as written.
QUESTION 33	RFP Section: Items 3.3.3 through 3.3.7 Page Number: 8 and 9	Does the State want a response to these Sections in our Solution Roadmap included as Tab O?
	ANSWER	There is no requirement for the responses to these sections to be in a separate tab. As stated in RFP Section 6.3.2, “Within each section of its offer, Vendor should address the items in the order in which they

		appear in this RFP.” Therefore, it would be helpful, but is not required, for responses to Section 3.3.3 through 3.3.7 to appear between the responses to Section 3.3.2 and the response to Section 3.3.8.
QUESTION 34	RFP_Dental_Final, 3.0 RFP Requirements and Specifications, Section 3.3 Enterprise Specifications, 3.3.1 Architecture Diagrams, Page 8	The RFP references two separate diagram templates. However, when we click on the link, we only see one template, a Visio document, titled "Vendor Architecture Template." Please provide a link or a copy of the second diagram template that Bidders must complete.
	ANSWER	No
QUESTION 35	Section 5.2 Page 11	Section 5.2(1) (Pg. 11) of the RFP describes in detail the weighting that will be given to specific aspects of a vendor’s proposal. Section 5.2(2) (“Vendor Qualifications and Experience”) and Section 5.2(3) (“Total Cost of Ownership”) identify additional criteria to be used in evaluating each vendor’s bids. However, unlike Section 5.2(1), neither Section 5.2(2) nor Section 5.2(3) state how these aspects of a vendor’s proposal will be weighted or otherwise scored. Please explain how the State will evaluate and score a vendor’s proposal with respect to the categories listed in Sections 5.2(2) and (3), including how these will be weighted with the points awarded under Section 5.2(1).
	ANSWER	<p>As stated in RFP Section 5.2, the evaluation criteria are listed in Order of Importance. There is no weighting to the evaluation criteria other than this Order of Importance.</p> <p>The scoring in Evaluation Criterion 1 will be used for the comparative analysis of vendors under Evaluation Criterion 1; the Evaluation Criterion 1 scores will not be copied automatically to the analysis of the other evaluation criteria.</p> <p>Of course, the same facts may be relevant not only to Evaluation Criteria 1, but also to the two other evaluation criteria. Vendor qualifications and experience may be considered not only when analyzing Evaluation Criterion 2, but also when determining scoring on the first evaluation criterion (for example, the subcategories for “Customer Service Claims” and “Implementation and Account Management”). The Total Cost of Ownership may be considered not only when analyzing Evaluation Criterion 3, but also when</p>

		<p>determining scoring on the “Pricing including Discount Analysis” subcategory of Evaluation Criterion 1.</p> <p>The evaluation committee will consider the evaluation criteria together, under the Order of Importance stated in RFP Section 5.2, to comparatively determine the strengths and weaknesses of each Vendor’s proposal (relative to the evaluation criteria) and determine which offer provides the Best Value, as defined in N.C.G.S. 143-135.9(a)(1).</p>
QUESTION 36	Section 5.2 Page 11	Section 5.2 also lists additional evaluation criteria, including “strength of references”, “vendor past performance”, “financial review”, and “financial statements”. Please explain how the State will evaluate and score a vendor’s proposal with respect to these additional evaluation criteria, including how these will be weighted with the points awarded under Sections 5.2(1) – 5.2(3).
	ANSWER	These will not be separate evaluation criteria, but shall be among the items taken into account when they are relevant to evaluating the evaluation criteria listed in RFP Section 5.2.
QUESTION 37	RFP Section 5.2 Evaluation Criteria - Page 11	Please provide any insights as to how much weighting within the “Pricing including Discount Analysis” category will be given to price for years 1,2&3, how much weighting given to offer on rate guarantee/rate caps for years 4,5,6,7 and how much weighting given to the Discount Analysis.
	ANSWER	No additional information will be provided.
QUESTION 38	Section 5.2 Evaluation Criteria	Please confirm that 400 points is the maximum. Are there points allocated for items 2 and 3 listed under the table? Can you define number 3 – Total cost of ownership?
	ANSWER	See response to question #35.
QUESTION 39	Section 5.2(3) Page 11	Section 5.2(3) (“Evaluation Criteria”) (Pg. 11) states the State will evaluate a vendor’s “Total Cost of Ownership”. Please define “Total Cost of Ownership”.
	ANSWER	Total Cost of Ownership is defined in the North Carolina Administrative Code as “State’s total cost of ownership, meaning summation of the State’s total cost for acquiring, operating, maintaining, and supporting a product or service over its projected lifetime to include competitive price data; evaluation of the offeror’s cost for actual and anticipated components comprising its quotation, as applicable;

		and value-added conditions or additional services included in the offer.”
QUESTION 40	RFP_Dental_Final, 6.0 Vendor Information and Instructions, 6.1 General Conditions of Offer, Section 6.1.5 E-Procurement, page 14	Please advise where Bidders should submit their signature.
	ANSWER	Submit one (1) signed, original electronic offer through the Ariba Sourcing Module.
QUESTION 41	RFP Section: Item 6.3.2 Page Number: 17	<p>Can the State please clarify the references made to the following items in Attachment J?</p> <p>e) Organizational Chart (see Attachment J, Requirement 16) – Is this supposed to be a reference to Attachment J, Item 1 on the Implementation Tab?</p> <p>f) Business Preparedness Plan (see Attachment J, Requirement 17) – we cannot find this requirement in Attachment J.</p> <p>g) Project Implementation Timeline (see Attachment J, Requirement 18) – Is this supposed to be a reference to Attachment J, Item 2 on the Implementation Tab?</p> <p>h) Performance Guarantees (see Attachment J, Requirement 19) – Is this supposed to be a reference to Attachment J, Item 16 on the Contract Requirements Tab?</p> <p>i) Sample Report Package (see Attachment J, Requirement 22) – Is this supposed to be a reference to Attachment J, Item 18 on the Contract Requirements Tab?</p> <p>j) Sample Communication Materials (see Attachment J, Requirement 23) – Is this supposed to be a reference to Attachment J, Item 19 on the Contract Requirements Tab?</p> <p>k) Coverage Exclusions or Limitations, if any (see Attachment J, Requirement 28) – we cannot find this requirement in Attachment J.</p> <p>s) Vendor's License and Maintenance Agreements, if any (see Section 7.4) – Did the State mean to reference Section 7.5 instead?</p>

	ANSWER	<p>(e) Yes. In RFP Section 6.3.2, the text reading:</p> <p>“e) Organizational Chart (see Attachment J, Requirement 16)”</p> <p>is replaced with the following text:</p> <p>“e) Organizational Chart (see Attachment J, ‘Implementation & Acct Mgmt Spec’ tab, item 1)”</p> <p>(f) In RFP Section 6.3.2, the text reading “(f) Business Preparedness Plan (see Attachment J, Requirement 17)” is removed.</p> <p>In RFP Section 3.3.5, the text reading “(See also Attachment J, Requirement 17.)” is also removed. For responses to Section 3.3.3 through 3.3.7, see response to question #33.</p> <p>(g) Yes. In RFP Section 6.3.2, the text reading:</p> <p>“g) Project Implementation Timeline (see Attachment J, Requirement 18)”</p> <p>is replaced with the following text:</p> <p>“g) High Level Project Implementation Plan (see Attachment J, ‘Implementation & Acct Mgmt Spec’ tab, item 2)”</p> <p>(h) Yes. In RFP Section 6.3.2, the text reading:</p> <p>“h) Performance Guarantees (see Attachment J, Requirement 19)”</p> <p>is replaced with the following text:</p> <p>“h) Performance Guarantees (see Attachment J, Requirement 16)”</p> <p>(i) Yes. In RFP Section 6.3.2, the text reading,</p> <p>“i) Sample Report Package (see Attachment J, Requirement 22)”</p> <p>is replaced with the following text:</p> <p>“i) Sample Report Package (see Attachment J, Requirement 18)”</p> <p>(j) Yes. In RFP Section 6.3.2, the text reading,</p> <p>“j) Sample Communication Materials (see Attachment J, Requirement 23)”</p> <p>is replaced with the following text:</p>
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		<p>“j) Sample Communication Materials (see Attachment J, Requirement 19)”</p> <p>(k) This requirement is in Attachment J under a different number. The reference in RFP Section 6.3.2 needs to be updated. Therefore, in RFP Section 6.3.2, the text reading,</p> <p>“k) Coverage Exclusions or Limitations, if any (see Attachment J, Requirement 28)”</p> <p>is replaced with the following text:</p> <p>“k) Coverage Exclusions or Limitations, if any (see Attachment J, Requirement 8)”</p> <p>(s) Yes. In RFP Section 6.3.2, the text reading,</p> <p>“s) Vendor's License and Maintenance Agreements, if any (see Section 7.4)”</p> <p>is replaced with the following text:</p> <p>“s) Vendor's License and Maintenance Agreements, if any (see Section 7.5)”</p> <p>The updates to item numbering mean that some tabs listed in RFP Section 6.3.2 are now out of order compared to their location in Attachment J. For the avoidance of doubt, vendors will not be disqualified based on whether responses vary from the order listed in RFP Section 6.3.2. The State prefers that responses be in the order listed in RFP Section 6.3.2(a) through (u), even though that may mean some items are out of the order in which they appear in the tabs of Attachment J.</p>
<p>QUESTION 42</p>	<p>RFP_Dental_Final, 6.0 Vendor Information and Instructions, 6.3 Instructions for Offer Submission, Section 6.3.2 Offer Organization, page 17</p>	<p>Section 6.3.2 of the RFP States that we include attachments A and B in the submission. However, it does not appear that these two attachments require action (for example, Bidders are not being asked to speak to any of the requirements, or to sign anything on these two documents.). Does the State want Bidders to include these Attachments as they appear in the RFP in our final submission?</p>
	<p style="color: red; text-align: center;">ANSWER</p>	<p>Yes. RFP Section 6.3.2 reads, “The offer ... should contain, at a minimum, all listed items below. A) Signed Execution Page AND all pages of this solicitation document.... This includes: - Attachments A and B.”</p>

QUESTION 43	RFP_Dental_Final, 6.0 Vendor Information and Instructions, 6.3 Instructions for Offer Submission, Section 6.3.2 Offer Organization, page 17	<p>"This section references several Attachment J requirements that are either misnumbered, or do not exist:</p> <ul style="list-style-type: none"> • 6.3.2.e Organizational Chart (see Attachment J, Requirement 16). Requirement 16 relates to performance guarantees. Please provide correct requirement number. • 6.3.2.f Business Preparedness Plan (see Attachment J, Requirement 17). Requirement 17 relates to reporting package. Please provide the correct requirement number. • 6.3.2.g Project Implementation Timeline (see Attachment J, Requirement 18). Requirement 18 relates to reporting package. Please provide the correct requirement number. • 6.3.2.h Performance Guarantees (see Attachment J, Requirement 19). Requirement 19 relates to sample communication materials. Confirm this should reference Requirement 16. • 6.3.2.i Sample Report Package (see Attachment J, Requirement 22). There is no Requirement 22 noted. Please provide the correct requirement number. • 6.3.2.j Sample Communication Materials (see Attachment J, Requirement 23). There is no Requirement 23 noted. Confirm this should reference Requirement 19. • 6.3.2.k Coverage Exclusions or Limitations, if any (see Attachment J, Requirement 28). There is no Requirement 28 noted. Please provide the correct requirement number."
	ANSWER	See response to question #41.
QUESTION 44	Section 6.3.2 Offer Organization	Letters E through K are not lining up with what we see on attachment J on any of the tabs. Can you please advise where we can locate these requirements?
	ANSWER	See response to question #41.
QUESTION 45	RFP Page 18, Section 6.3.2 Offer Organization	Page 18 of the RFP, section 6.3.2 Offer Organization, refers to a requirement 16 in Attachment J. Please confirm this is in reference to question #1 within the Implementation & Acct Mgmt Spec Tab of Attachment J.
	ANSWER	See response to question #41.

QUESTION 46	RFP Page 18, Section 6.3.2 Offer Organization	Page 18 of the RFP, section 6.3.2 Offer Organization, refers to a requirement 17 in Attachment J. Please confirm which section refers to the Business Preparedness Plan. Please clarify the instruction for this document and where it is located.
	ANSWER	See response to question #41.
QUESTION 47	RFP Page 18, Section 6.3.2 Offer Organization	Page 18 of the RFP, section 6.3.2 Offer Organization, refers to a requirement 18 in Attachment J. Please confirm this is in reference to question #2 within the Implementation & Acct Mgmt Spec Tab of Attachment J.
	ANSWER	See response to question #41.
QUESTION 48	RFP Page 18, Section 6.3.2 Offer Organization	Page 18 of the RFP, section 6.3.2 Offer Organization, refers to a requirement 19 in Attachment J. Please confirm this is in reference to question #16 within the Contract Requirements Tab of Attachment J.
	ANSWER	See response to question #41.
QUESTION 50	RFP Page 18, Section 6.3.2 Offer Organization	Page 18 of the RFP, section 6.3.2 Offer Organization, refers to a requirement 22 in Attachment J. Please confirm this is in reference to question #18 within the Contract Requirements Tab of Attachment J.
	ANSWER	See response to question #41.
QUESTION 51	RFP Page 18, Section 6.3.2 Offer Organization	Page 18 of the RFP, section 6.3.2 Offer Organization, refers to a requirement 23 in Attachment J. Please confirm this is in reference to question #19 within the Contract Requirements Tab of Attachment J
	ANSWER	See response to question #41.
QUESTION 52	RFP Page 18, Section 6.3.2 Offer Organization	Page 18 of the RFP, section 6.3.2 Offer Organization, refers to a requirement 28 in Attachment J. Please confirm this is in reference to question #8 within the Contract Requirements Tab of Attachment J
	ANSWER	See response to question #41.
QUESTION 53	Item 6.3.2 and Attachments A and B/PP17 and 23 through 44	Item 6.3.2 states to include Attachments A and B in this section. These appear to just be Definitions and Terms and Conditions. Is there something we need to complete with these attachments?
	ANSWER	See response to question #42.
QUESTION 54	RFP Page 19, Section 6.3.3 Offer Submittal, D	Page 19 of the RFP, section 6.3.3 Offer Submittal, requires .xls format. However, the Provide Disruption and Network Access.xlsx, and Updated Attachment D Pricing Form and

		Plan Design March 2025.xlsx, are both in .xlsx format. Please confirm if we should reformat to .xls prior to submitting.
	ANSWER	Please submit in either .xls or .xlsx format.
QUESTION 55	Section 6.3.3 offer Submittal	Please provide the Execution page noted in 6.3.3 for signature.
	ANSWER	See response to question #40.
QUESTION 56	RFP_Dental_Final, 3.0 RFP Requirements and Specifications, Section 3.3 Enterprise Specifications, 3.3.3 Identity and Access Management, page 8 and 6.0 Vendor Information and Instructions, 6.3 Instructions for Offer Submission, Section 6.3.2 Offer Organization, page 17	This RFP requirement appears to necessitate a response. However, we do not see it referenced in Section 6.3.2. that outlines the organization of the RFP response. Please advise if Bidders should answer this requirement in their RFP responses. If yes, please advise where this should be submitted.
	ANSWER	For responses to Section 3.3.3 through 3.3.7, see response to question #33.
QUESTION 57	RFP_Dental_Final, 3.0 RFP Requirements and Specifications, Section 3.3 Enterprise Specifications, 3.3.4 Integration Approach, page 9 and 6.0 Vendor Information and Instructions, 6.3 Instructions for Offer Submission, Section 6.3.2 Offer Organization, page 17	This RFP requirement appears to necessitate a response. However, we do not see it referenced in Section 6.3.2. that outlines the organization of the RFP response. Please advise if Bidders should answer this requirement in their RFP responses. If yes, please advise where this should be submitted.
	ANSWER	For responses to Section 3.3.3 through 3.3.7, see response to question #33.

<p>QUESTION 58</p>	<p>RFP_Dental_Final, 3.0 RFP Requirements and Specifications, Section 3.3 Enterprise Specifications, 3.3.5 Disaster Recovery and Business Continuity, page 9 and 6.0 Vendor Information and Instructions, 6.3 Instructions for Offer Submission, Section 6.3.2 Offer Organization, page 17</p>	<p>This RFP requirement appears to necessitate a response. However, we do not see it referenced in Section 6.3.2. that outlines the organization of the RFP response. Please advise if Bidders should answer this requirement in their RFP responses. If yes, please advise where this should be submitted.</p>
	<p>ANSWER</p>	<p>For responses to Section 3.3.3 through 3.3.7, see response to question #33.</p>
<p>QUESTION 59</p>	<p>RFP_Dental_Final, 3.0 RFP Requirements and Specifications, Section 3.3 Enterprise Specifications, 3.3.6 Data Migration, page 9 and 6.0 Vendor Information and Instructions, 6.3 Instructions for Offer Submission, Section 6.3.2 Offer Organization, page 17</p>	<p>This RFP requirement appears to necessitate a response. However, we do not see it referenced in Section 6.3.2. that outlines the organization of the RFP response. Please advise if Bidders should answer this requirement in their RFP responses. If yes, please advise where this should be submitted.</p>
	<p>ANSWER</p>	<p>For responses to Section 3.3.3 through 3.3.7, see response to question #33.</p>
<p>QUESTION 60</p>	<p>RFP_Dental_Final, 3.0 RFP Requirements and Specifications, Section 3.3 Enterprise Specifications, 3.3.7 Application Management, page 9 and 6.0 Vendor Information and</p>	<p>This RFP requirement appears to necessitate a response. However, we do not see it referenced in Section 6.3.2. that outlines the organization of the RFP response. Please advise if Bidders should answer this requirement in their RFP responses. If yes, please advise where this should be submitted.</p>

	Instructions, 6.3 Instructions for Offer Submission, Section 6.3.2 Offer Organization, page 17	
	ANSWER	For responses to Section 3.3.3 through 3.3.7, see response to question #33.
QUESTION 61	RFP_Dental_Final, 6.0 Vendor Information and Instructions, 6.3 Instructions for Offer Submission, Section 6.3.2 Offer Organization, page 17 and 7.0 Other Requirements and Special Terms, 7.5 Vendor's License or Support Agreements, page 19	This RFP requirement appears to necessitate a response. However, we do not see it referenced in Section 6.3.2. that outlines the organization of the RFP response. Please advise if Bidders should answer this requirement in their RFP responses. If yes, please advise where this should be submitted.
	ANSWER	Please submit this response according to item (s) in the offer organization listed in RFP Section 6.3.2. After the numbering correction in Response #41 above, RFP Section 6.3.2 reads: <p style="text-align: center;">“s) Vendor's License and Maintenance Agreements, if any (see Section 7.5)”</p>
QUESTION 62	Section 7.1 Vendor Utilization of workers outside of the U.S.	Are any elements of the dental administration and support administered offshore and if so, which services?
	ANSWER	No.
QUESTION 63	Attachment A Definitions Section	In Attachment A (“Definitions”), “Contract Effective Date” and “Effective Date” appear to have the same definition. Both terms are used in the RFP. Please explain whether there is a difference between these two terms.
	ANSWER	There is not a difference in these two terms. Contract Effective Date and Effective Date are the same for this RFP. As stated in RFP Section 2.4, “Benefits Effective Date” has a different meaning.

QUESTION 64	Attachment B #21. B.ii (Page 30)	Is the 30 day notice of termination for convenience by the State set out in Attachment B, Para. 21(b)(ii) negotiable with the State?
	ANSWER	The State cannot promise to negotiate the terms of the RFP.
QUESTION 65	Attachment B #38. A (Page 33)	In reference to the E-Procurement transaction fee described in Attachment B, Sec. 38 (Pg. 33), can OSHR clarify how this impacts the administration of the Dental plan? If this does apply, can a vendor include in its premium charged to the State the 1.75% E-Procurement transaction fee described in Attachment B, Sec. 38 (Pg. 33)?
	ANSWER	The e-procurement transaction fee is not applicable to service contracts.
QUESTION 66	Attachment B Sections 1	This RFP is seeking to produce a dental plan that is competitive and provides good value, not the purchase of software. For this reason, we request clarification whether Attachment B: Department of Information Technology Terms and Conditions and Title 9, Chapter 6B of the North Carolina Administrative Code should apply to this procurement or whether the NCDOA Standard Terms and Conditions should apply since NCDOA, not NCDIT, is assisting OSHR.
	ANSWER	The State of North Carolina procurement offices have determined that this RFP should be issued using the information technology procurement process. For the reason, see the definition of “information technology” in N.C.G.S. § 143B-1320(a)(11). As a result, Attachment B and Title 9, Chapter 6B of the North Carolina Administrative Code apply to this procurement, and the terms and conditions in the RFP apply instead of the NCDOA Standard Terms and Conditions.
QUESTION 67	Attachment B Sections 2	Attachment B, Section 2 (SaaS Terms and Conditions) addresses the state’s requirements for a vendor to provide software and support to the state. This RFP is seeking to produce a dental plan that is competitive and provides good value, not the purchase of software. For this reason, does the state agree that Section 2 of Attachment B does not apply to this procurement?
	ANSWER	The suggested clarification is not correct.
QUESTION 68	RFP_Dental_Final, Attachment B: Department of	Confirm if the State is looking to be billed for prior, current, or future month. Can the State provide an example timeline for the billing schedule? For example, if a member is

	Information Technology Terms and Conditions, Section 1: General Terms and Conditions Applicable to All Purchases, 10) Payment Terms, Page 27	effective on 1/1/2027, when would the payment to the Bidder be due?
	ANSWER	Dental deductions are taken in arrears, January 1st, 2027 premiums, taken from employees January paychecks, will be sent to vendor the following month.
QUESTION 69	RFP_Dental_Final, Attachment B: Department of Information Technology Terms and Conditions, Section 1: General Terms and Conditions Applicable to All Purchases, 38) Electronic Procurement, Page 33	What percent of the current parties premium is transacted through this electronic procurement process? Is the State open to payment via wire and ACH?
	ANSWER	Dental Premiums will be submitted directly by the payroll units based on the payroll unit procedures or mutually agreed upon process.
QUESTION 70	RFP_Dental_Final, Attachment B: Department of Information Technology Terms and Conditions, Section 1: General Terms and Conditions Applicable to All Purchases, 38) Electronic Procurement, a), Page 33	Should the transaction fee of 1.75% be included in the pricing proposal?
	ANSWER	See response to question #65.
QUESTION 71	RFP_Dental_Final, Attachment B: Department of	The RFP states: "...under no circumstances shall price information be designated as confidential." Please confirm this requirement does not pertain to Attachment I Dental

	Information Technology Terms and Conditions, Section 1: General Terms and Conditions Applicable to All Purchases, 18) Confidentiality, page 28	Reimbursement Analysis and that Bidders can redact confidential information contained in this section.
	ANSWER	Bidders may note a page in the RFP response as “Confidential and Proprietary.” For further details, see RFP Section 7.10 and RFP Attachment B, Section 1, Paragraph #20. The term “price information” in Attachment B, Section 1, Paragraph #20 does not appear to include numbers in the reimbursement analysis, Attachment I, since these numbers do not reflect price to the State.
QUESTION 72	RFP_Dental_Final, Attachment B: Department of Information Technology Terms and Conditions, Section 2: Terms and Conditions Applicable to Software and a Service (SaaS), 18) Security of State Data, page 40	Under Section 2 (Terms and Conditions Applicable to Software as a Service (SaaS)), paragraph 18 (Security of State Data), there are cited laws that would either not apply to the administration of dental benefits or it is unclear how they would apply given the nature of the services (ex. Federal Privacy Act of 1974, FERPA, PCI standards, etc.). Is the State open to narrowing down the laws to those that would directly apply to the services? For the administration of dental benefits, Bidder is generally subject to HIPAA and State privacy and cyber security laws, as applicable.
	ANSWER	The State cannot promise to negotiate the terms of the RFP.
QUESTION 73	RFP_Dental_Final, Attachment B: Department of Information Technology Terms and Conditions, Section 2: Terms and Conditions Applicable to Software and a Service (SaaS), 18) Security of State Data, page 40	Is the State open to negotiating terms concerning reporting of data breaches and destruction of data? Bidder generally agrees to provide notices, manage privacy and security incidents, and return or destroy data in compliance with HIPAA, which would be directly applicable to the services.

	ANSWER	The State cannot promise to negotiate the terms of the RFP.
QUESTION 74	RFP_Dental_Final, Attachment B: Department of Information Technology Terms and Conditions	Many of the provisions in Attachment B appear to apply to a contract for IT services or for the sale of goods. Is the State willing to work with the Bidder on contractual terms that are more tailored to the administration of dental benefits?
	ANSWER	The State cannot promise to negotiate the terms of the RFP.
QUESTION 75	RFP_Dental_Final, Attachment B: Department of Information Technology Terms and Conditions, Section 3: Terms and Conditions Applicable to Personnel and Personal Services, 3) Personnel, Page 44	Will the State please confirm that these requirements are limited to key personnel?
	ANSWER	In Attachment B, Section 3, on page 44 of the RFP, the State is not adding a limitation to “key personnel” where that term does not already appear in the language on the page.
QUESTION 76	RFP_Dental_Final, Attachment B: Department of Information Technology Terms and Conditions, Section 2: Terms and Conditions Applicable to Software and a Service (SaaS), 4) Access Availability; Remedies, page 38	Is the State willing to work with the Vendor to develop service level agreements and remedies that are tailored to a contract for the administration of dental benefits?
	ANSWER	See Attachment J, Requirement 16, regarding performance guarantees. Regarding any other service level agreements or remedies, the State cannot promise to negotiate the terms of the RFP.

QUESTION 77	RFP_Dental_Final, Attachment B: Department of Information Technology Terms and Conditions, Section 2: Terms and Conditions Applicable to Software and a Service (SaaS), 6) Performance Review and Accountability, page 39	Please confirm that the 10% retainage would not apply to this dental benefits arrangement, under which the Vendor is paying benefits continuously and premium payments are paid monthly																				
	ANSWER	No, it does not apply to this service contract.																				
QUESTION 78	Attachment C	Do you utilize any HUBs today and what services are they?																				
	ANSWER	Current vendor is not a HUB vendor.																				
QUESTION 79	Attachment D – High, Classic, Low Option Tabs	Please confirm posterior composite fillings are fully covered and not subject to the alternate benefit provision.																				
	ANSWER	Please see response to question #9.																				
QUESTION 80	Attachment D – High, Classic, Low Option Tabs	Please provide a list of any plan changes to the dental benefits since 1/1/2020.																				
	ANSWER	No changes since 1/1/2020.																				
QUESTION 81	Attachment D – High, Classic, Low Option Tabs	Please confirm whether the current plans utilize MetLife’s PDP or PDP Plus network.																				
	ANSWER	The current plans utilize both MetLife’s PDP and PDP Plus network.																				
QUESTION 82	Attachment D – Premium Rates	Please provide the current dental contribution structure.																				
	ANSWER	<p>The State currently contributes the following to the Classic Dental Plan. This may change at any time.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Classic Option Rates Total</th> <th>Classic Option Subsidy Amount</th> <th>Classic Option EE Payment</th> </tr> </thead> <tbody> <tr> <td>Employee Only</td> <td style="text-align: right;">\$41.04</td> <td style="text-align: right;">\$4.34</td> <td style="text-align: right;">\$36.70</td> </tr> <tr> <td>Employee & Spouse</td> <td style="text-align: right;">\$82.26</td> <td style="text-align: right;">\$8.66</td> <td style="text-align: right;">\$73.60</td> </tr> <tr> <td>Employee & Child(ren)</td> <td style="text-align: right;">\$88.90</td> <td style="text-align: right;">\$9.16</td> <td style="text-align: right;">\$79.74</td> </tr> <tr> <td>Employee & Family</td> <td style="text-align: right;">\$145.30</td> <td style="text-align: right;">\$19.44</td> <td style="text-align: right;">\$125.86</td> </tr> </tbody> </table> <p>The vendor will invoice OSHR quarterly for the subsidy.</p>		Classic Option Rates Total	Classic Option Subsidy Amount	Classic Option EE Payment	Employee Only	\$41.04	\$4.34	\$36.70	Employee & Spouse	\$82.26	\$8.66	\$73.60	Employee & Child(ren)	\$88.90	\$9.16	\$79.74	Employee & Family	\$145.30	\$19.44	\$125.86
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QUESTION 83	Attachment D – University Premium Rates	Please clarify the inclusion of this additional tab and any specific requirements on how this portion of the group should be priced compared to the general Premium Rates.
	ANSWER	The University system is considering adding domestic partners to the dental plan. Will this change affect the premium rates? If so, please update the rates on the 'University Premium Rates' tab accordingly.
QUESTION 84	Attachment D Premium Rates tab	Will OSHR provide the Premium by plan that corresponds with the Claims and Enrollment data provided by Segal?
	ANSWER	Please see updated files provided.
QUESTION 85	Attachment D Premium Rates tab	Will OSHR provide the renewal rates for 2026?
	ANSWER	2026 rates have not been published.
QUESTION 86	Attachment D High, Classic and Low plan tabs	Has the dental benefit offering had changes to their benefit plan designs in the past 3 years, if so can you please share the changes?
	ANSWER	No.
QUESTION 87	Attachment D Pricing questions tab	Does the current carrier utilize any leased Networks?
	ANSWER	Yes.
QUESTION 88	Attachment D Pricing questions tab, #12	Provide the pricing impact (percentage increase to quoted rates) to increase the plan reimbursement for Fillings and Simple Extractions on the Classic Option plan from 50% to 80%. Isn't the current plan at 60% so OSHR is asking for the move from 60% to 80%?
	ANSWER	Yes. In RFP Attachment D, “Pricing Questions” tab, item 12, the text reading: “Provide the pricing impact (percentage increase to quoted rates) to increase the plan reimbursement for Fillings and Simple Extractions on the Classic Option plan from 50% to 80%” is replaced with the following text: “Provide the pricing impact (percentage increase to quoted rates) to increase the plan reimbursement for Fillings and Simple Extractions on the Classic Option plan from 60% to 80%.”
QUESTION 89	Attachment D Pricing questions tab,	Will OSHR provide clarification as to what the request is on these questions? Are you referring to making a coinsurance change or is this in reference to the Out of

	questions #14, #15, #19 and #20	Network UCR reimbursement changing from 80% to 70% or 60%?
	ANSWER	Requesting price impact from bidders.
QUESTION 90	Attachment D Premium Rate tab	Will OSHR provide the Dental loss ratio for the following years 2022, 2023, 2024?
	ANSWER	Paid claims and premiums are included in the claims lives history file. The claims lives history file spreadsheet is being uploaded to Ariba and is added to the RFP documents.
QUESTION 91	Attachment D Premium Rate tab	How are the enrolled members dental premiums collected? Both the timing and the frequency?
	ANSWER	Premiums are collected from payroll on a pre-tax basis and payroll deducted monthly.
QUESTION 92	Updated Attachment D Pricing Form and Plan Design March 2025, Premium Rates Tab & University Premium Rates Tab	Please advise on the expectation between Premium Rates and University Premium Rates tabs and if there are any differences between the programs including funding, etc. The enrollment numbers appear to be the same on both tabs.
	ANSWER	Please see response to question #83.
QUESTION 93	Updated Attachment D Pricing Form and Plan Design March 2025, Pricing Questions Tab, Question 10	Our understanding is the contract is based on Net 30. Could the State provide a preferred frequency if awarded on which we would review the discrepancies, i.e. quarterly, semi-annually or annually?
	ANSWER	On Net 30 payment terms, the State cannot promise to negotiate the terms of the RFP. On the frequency of review of discrepancies, the State would want to discuss this item with the awarded vendor and determine a mutually acceptable frequency.
QUESTION 94	Updated Attachment D Pricing Form and Plan Design March 2025, Pricing Questions Tab, Question 7	Please confirm if online/mobile ID cards with optional printed ID cards would meet this requirement or are full membership ID card mailings required and if so, at what frequency?
	ANSWER	Printed ID Cards to members' addresses are sent with initial enrollment, and thereafter for new hires and newly eligible.
QUESTION 95	Updated Attachment D Pricing Form and	Can the State confirm if each qualified group will require Schedule A's? Is the State providing commissions to

	Plan Design March 2025, Pricing Questions Tab, Question 8	another party or would the awarded vendor be responsible for payment and reporting on commissions?
	ANSWER	There are no commissions.
QUESTION 96	Updated Attachment D Pricing Form and Plan Design March 2025, Pricing Questions Tab, Question 9	Does the State have any participation requirements or waiting periods on any of the plan options?
	ANSWER	No.
QUESTION 97	Updated Attachment D Pricing Form and Plan Design March 2025, Pricing Questions Tab, Question 12	Please confirm the coinsurance amounts in the requested pricing scenario (e.g. current coinsurance for fillings and simple extractions appear to be 60% in the "Classic" Option)
	ANSWER	Correct.
QUESTION 98	Updated Attachment D Pricing Form and Plan Design March 2025, Pricing Questions Tab, Questions 19 and 20	Please confirm which services should not change coinsurance (e.g. the "High" Option appears to currently have coinsurance at the 100%, 80%, and 50% levels)
	ANSWER	Refer to NCFlex Enrollment Guide and dental information online at www.ncflex.org and NCFlex Enrollment Guide: https://oshr.nc.gov/state-employee-resources/benefits/ncflex-benefits-enrollment-resources
QUESTION 99	Updated Attachment D Pricing Form and Plan Design March 2025, Pricing Questions Tab, Question 24	With various cohorts; COBRA, Active, University System and potential addition to domestic partners, would the State be willing to provide a breakdown of contribution levels to each? Would you also be willing to breakdown claims experience separately by cohort?
	ANSWER	See response to question #82.
QUESTION 100	Updated Attachment D Pricing Form and Plan Design March 2025, Pricing Questions Tab, Question 25	Please confirm how the technical credit is to be paid. Would it need to be directed to the vendor, adjustment on billing or providing payments on a monthly cycle directly to the State? Would the premium payment be reduced by 0.5%?

	ANSWER	This is for price comparison only, actual tech fee would be based on vendor’s current relationship with NCFlex’s benefit administration platforms.
QUESTION 101	Updated Attachment D Pricing Form and Plan Design March 2025	Can the State provide the most recent 12 months of detailed claims data, including provider identifiers (NPI, TIN, Name, Address), Network status (IN or OON), CDT procedure code, claim line status (Paid or Rejected), claim counts, service counts, submitted charge, and paid amounts?
	ANSWER	Please see response to question #1. Detailed claims data and network status will not be provided, but see claims lives history file for other information.
QUESTION 102	Attachment D - High Option Plan tab & Classic Option Plan tab	For the Inforce High Option plan & Classic Option Plan, surgical extractions are listed as Type II in Attachment D. As the current carrier, we have surgical extractions listed as Type III in Dental Plan Design Certifications for the High Option Plan and Classic Option Plan. The 2025 NC Flex Plan Details on the following webpage is silent as to which service category covers surgical extractions: https://oshr.nc.gov/2025-ncflex-dental-plan-details . Please confirm surgical extractions are covered as Type III under the current High Option Plan and Classic Option Plan.
	ANSWER	See updated plan design tabs.
QUESTION 103	Attachment D - Classic Option Plan tab and Low Option Plan tab	For the Inforce Classic Option Plan and Low Option Plan, the out-of-network reimbursement level is listed as 80th percentile in Attachment D. As the current carrier, we know that the out-of-network reimbursement level for the Classic Option Plan and Low Option Plan is 70th percentile R&C. Please confirm that the current out-of-network reimbursement level for the Classic Option Plan and the Low Option Plan is 70th percentile R&C.
	ANSWER	See updated plan design tabs.
QUESTION 104	Attachment D - Pricing Questions #12	We are being asked to "Provide the pricing impact (percentage increase to quoted rates) to increase the plan reimbursement for Fillings and Simple Extractions on the Classic Option plan from 50% to 80%". The requested change does not align with current plan designs. The current Type I/II/III coinsurance for Classic plan is 100/60/50 and the current Type I/II/III coinsurance for High plan is 100/80/50. Under the Classic plan, fillings and simple extractions are currently covered at 60%. Under the High plan, fillings and simple extractions are

		currently covered at 80%. Please clarify which plan design we are being asked to provide pricing impact and what change in coinsurance we should provide pricing impact for.
	ANSWER	<p>See updated Attachment E, being uploaded in Ariba. This replaces the Attachment E originally issued as part of the RFP.</p> <p>For a general summary of the changes made in the updated version of Attachment E, see the following.</p> <p>High Option</p> <ul style="list-style-type: none"> • Surgical extraction of erupted tooth: moved from Type II to Type III <p>Classic Option</p> <ul style="list-style-type: none"> • Surgical extraction of erupted tooth: moved from Type II to Type III • R&C percentile: changed from 80th to 70th <p>Low Option</p> <ul style="list-style-type: none"> • R&C percentile: changed from 80th to 70th
QUESTION 105	Attachment D - Pricing Questions #14	We are being asked to "Provide the pricing impact (percentage decrease to quoted rates) to reduce the out-of-network coinsurance on the Classic Option plan to 70% reimbursement (no change to coinsurance for services currently at 100% or 60%)." The requested change does not align with current plan designs. The current Type I/II/III coinsurance for Classic plan is 100/60/50. The current Type I/II/III coinsurance for High plan is 100/80/50. Plan clarify which class of services and which plan design option we are being asked to price reduction to 70% coinsurance. Are we being asked to adjust the Type I/II/III out-of-network coinsurance for High plan from 100/80/50 to 100/70/50?
	ANSWER	See response to Question #104.
QUESTION 106	Attachment D - Pricing Questions #15	We are being asked to "Provide the pricing impact (percentage decrease to quoted rates) to reduce the out-of-network coinsurance on the Classic Option plan to 60% reimbursement (no change to coinsurance for services currently at 100% or 60%). " The requested change does not align with current plan designs. The current Type I/II/III coinsurance for Classic plan is 100/60/50. The current Type I/II/III coinsurance for High plan is 100/80/50. Plan clarify which class of services and which

		plan design option we are being asked to price reduction to 60% coinsurance. Are we being asked to adjust the Type I/II/III out-of-network coinsurance for High plan from 100/80/50 to 100/60/50?
	ANSWER	See response to Question #104.
QUESTION 107	Attachment D - Pricing Questions #19	We are being asked to "Provide the pricing impact (percentage decrease to quoted rates) to reduce the out-of-network coinsurance on the High Option plan to 70% reimbursement (no change to coinsurance for services currently at 100% or 60%)". The requested plan design does not align with current benefits. The current High Option Type I/II/III coinsurance is 100/80/50. There are currently no services with 60% coinsurance under the High Option plan. Please clarify the plan design change we are being asked to price. Are we being asked to change the High Option Out-of-network coinsurance from 100/80/50 to 100/70/50?
	ANSWER	See response to Question #104.
QUESTION 108	Attachment D - Pricing Questions #20	We are being asked to "Provide the pricing impact (percentage decrease to quoted rates) to reduce the out-of-network coinsurance on the High Option plan to 60% reimbursement- (no change to coinsurance for services currently at 100% or 60%)." The requested plan design does not align with current benefits. The current High Option Type I/II/III coinsurance is 100/80/50. There are currently no services with 60% coinsurance under the High Option plan. Please clarify the plan design change we are being asked to price. Are we being asked to change the High Option Out-of-network coinsurance from 100/80/50 to 100/60/50?
	ANSWER	See response to Question #104.
QUESTION 109	Updated Attachment D Pricing Form and Plan Design March 2025, Benefits	Can the State provide the full certificate for each corresponding plan that would provide additional details not listed in the benefit summary or on the state's website?
	ANSWER	See response to question #14.
QUESTION 110	Attachment H, Financial Review Form/PP: 54 and 55	Can the State please provide this form in Excel format?
	ANSWER	No.
QUESTION 111	Attachment I Dental Reimbursement Analysis	Can you please advise when we can expect to receive the executed NDA so we may provide financial reporting?

	ANSWER	After bidder selects and designates as “intends to participate”. Refer to Addendum #2.
QUESTION 112	Attachment J, Implementation & Acct Mgmt Spec Tab, question 13	Within Attachment J, Implementation & Acct Mgmt Spec Tab, question 13, refers to an executive summary. Please confirm that you would like us to discuss the reports noted within questions 13a-c within the executive summary or if an executive summary is being requested
	ANSWER	Please include with your response to Implementation and Account Management whether (1) the vendor can provide the reports listed in 13a-c and (2) whether the vendor can provide an executive summary of those reports.
QUESTION 113	Attachment J Implementation and Account Management tab	Will OSHR clarify your expectations for the 2027 Open Enrollment? How many approximate locations will the vendor be asked to facilitate on site meetings?
	ANSWER	Up to three locations each fall.
QUESTION 114	Attachment J Contract Requirements Tab	Attachment J, #3 of the RFP requires vendors to respond “yes” or “no” to the following statement: “the Vendor’s financial ratings are an A- or above.” Will the State evaluate for award non-profit vendors that do not have financial ratings but are licensed with the North Carolina Department of Insurance and are able to demonstrate their financial stability in response to Attachment H and Section 7.3 of the RFP through financial statements and/or other evidence of financial stability?
	ANSWER	Yes. The requirement in Attachment J, item #3 applies only to the types of organizations that have financial ratings. The types of organizations that do not have financial ratings are not subject to this requirement. Both for-profit and non-profit vendors shall provide evidence of financial stability by submitting a response to RFP Section 7.3.
QUESTION 115	Attachment J Contract Requirement Tab	Please describe the processes and procedures in place consistent with HIPAA to protect member protected health information in light of Requirement #11 in Schedule J for the vendor to “provide OSHR with access to member level” information. For example, does OSHR require access to member-specific procedure code information?
	ANSWER	Yes, only the NCFlex Benefits Team within OSHR would have access.

QUESTION 116	Attachment J Contract Requirements Tab	Requirement #13 in Attachment J requires that the vendor provide a dedicated toll-free number that must be “answered by Vendor staff members and not a voice recording”. We believe that the State’s current vendor provides dental plan members an industry-standard interactive voice recognition (IVR) system at the beginning of every call that includes a recorded voice that explains calls could be monitored and asks whether the caller is a member or dental office in order to route the caller to the right call center representative. As long as a caller has the ability to promptly request to speak directly to a live call center representative, will the State consider an IVR system like the one in use with the current vendor as meeting the expectations under Requirement #13?
	ANSWER	Yes, that is acceptable.
QUESTION 117	Attachment J Requirements Tab	Requirement #20 in Attachment J requires that when the contract is terminated a vendor must transfer all data and records necessary to administer the dental program with another vendor. Sec. 2, Para. 10(e) of Attachment B (SaS Terms and Conditions) requires the vendor to permanently destroy or render inaccessible the state’s data following termination of the contract. There are a number of reasons a vendor will need to maintain data related to the dental plan following termination of the agreement. Examples include, but are not limited to, having the ability to process claims that have been incurred but not received and responding to appeals, grievances and complaints that might be submitted post-termination. Please confirm that the vendor is permitted to retain a copy of the data to the extent required by applicable law and as necessary to continue its administrative obligations, subject to maintaining the information confidential consistent with the RFP and applicable law.
	ANSWER	The requirement in RFP Attachment B, Section 2, Paragraph 10(e) applies to the extent there is not a more specific agreement (such as an SLA or supplemental agreement) agreed to in writing by the parties. Here, RFP Attachment J, Requirement #20, is that type of more specific term. Regardless, the State will not require a Vendor to destroy data in a situation where destruction would be prohibited by law. The term “administrative obligations” is too broad to be able to provide guidance on that issue at this time.
QUESTION 118	RFP Section: Attachment J, Requirements and	What are the current Performance Guarantees and percentages of premium at risk?

	Specifications Excel File Page Number: 57 and item 16 on Contract Requirements Tab	
	ANSWER	We are requesting the bidder's performance guarantees and percentages of premium risk.
QUESTION 119	RFP Section: Attachment J, Requirements and Specifications Excel File Page Number: 57 and item 10 on Contract Requirements Tab	Can the State provide the payroll unit's policies, procedures, and timetables for our review?
	ANSWER	Payroll units' information is not centralized and each have their own policies, procedures, and timetables, this is not centralized housed information. It is the responsibility of all vendors to coordinate implementation and ongoing procedures with each payroll center.
QUESTION 120	Attachment_J Contract Requirements Tab, Requirement #10	Is each payroll unit (group) responsible for their own premium payment? Can you please provide details on the remit process as it applies to the payments? One or each group?
	ANSWER	Each payroll center is responsible for their own premium payment. See response to question #119.
QUESTION 121	Attachment_J_draft_2 0250617_RFP_Dental , Contract Requirements Tab, Requirement #17	Contract Requirement #17 States "The Vendor shall provide, at no additional cost, include the standard data reporting package, as well as agreed upon custom reporting." Are Bidders to include a standard reporting package in their response?
	ANSWER	Yes. See RFP Attachment J, Requirement #17 (for data reporting package) and Requirement #18 (for "a sample report package tailored to NCFlex's dental plans and service requirements").
QUESTION 122	Attachment_J_draft_2 0250617_RFP_Dental ,	Contract Requirement #18 States: "The Vendor shall submit with its Offer a sample report package tailored to NCFlex's dental plans and service requirements." We do

		not have information on the tailored needs of NCFlex. Please provide such details.
	ANSWER	See response to question #122.
QUESTION 123	Attachment J_draft_2 0250617_RFP_Dental , Contract Requirements Tab, Requirement #11	Can the State confirm member level claims detail is required at the aggregate level only to comply with HIPAA privacy rules?
	ANSWER	No. As plan administrators and business level associates, there are times we need member level data to administer the plan.
QUESTION 124	Attachment J Contract Requirements Tab, Question #3.	Which financial agencies do you require bidders to meet an A- or above rating?
	ANSWER	One or more of AM Best, S&P, Moody's. See response to question #114 for additional details.
QUESTION 125	Attachment J Contract Requirements Tab, Question #10.	Please confirm the total number of payroll units. How will each payroll unit's policies, procedures, and timetables impact on our administration?
	ANSWER	Currently 52 independent payroll units, which may be added, updated or changed anytime. There should be no impact as there are two Benefit Administration systems, Benefitfocus and Empyrean, that feed payroll data to the payroll centers for each employing unit.
QUESTION 126	Attachment J Contract Requirements Tab, Question #17	Can you provide a sample of your custom reporting package including the frequency of submission?
	ANSWER	We are requesting your custom reporting package.
QUESTION 127	Attachment J Customer Service Specs Tab, Question #1	Are the claims and customer service teams supporting your dental program today dedicated? Are these services provided in NC?
	ANSWER	We are seeking a dedicated team that is educated on the NCFlex benefits to provide customer service and claims processing, however we are not seeking 100% dedicated.
QUESTION 128	Attachment K – Provider and Access file	Are you able to provide a provider utilization file that includes an indicator showing the provider's network participation status with MetLife?
	ANSWER	No, cannot provide.

QUESTION 129	RFP Section: Attachment K, Provider Disruption and Network Access Workbook, Provider Disruption Tab Page Number: 58	Can the State please provide an updated file to include the provider Tax ID numbers?
	ANSWER	Please see the response to question #1.