



**MORIN BUILDING
8570 EXECUTIVE PARK AVENUE
FAIRFAX, VIRGINIA 22116-0815**

September 6, 2017

To: All Prospective Offerors

Issued by: Donald R. Legg, CPPO, Procurement Manager

Subject: Addendum # 1 to RFP #17- 63 Dental Care Services for Medicare Eligible Retirees

The purpose of this addendum is to make revisions to the RFP and to answer questions submitted by the specified deadline for their submission.

1. Attached is the Evidence of Coverage document, Census Zip Codes only document, the current rates and the claim data document requested by United Concordia.
2. Attached are questions and answers received on this RFP. Answers are in bold.

I. Questions and Answers

United Concordia

1. White fillings – are they available on both anterior and posterior teeth?
White fillings are available on both anterior and posterior teeth.
2. General Anesthesia – is NOT listed on the Delta plan design PDF – this is a somewhat normal service listed on summaries. Is this coverage not available through the current Delta plan? If it is, into which Class – Class II or Class III – does general anesthesia fall?
Anesthesia is covered under Basic/Oral Surgery
3. Reimbursement level out of network. Normally a plan will reimburse with MAC or 90th out of network. Please advise.
See Evidence of Coverage for out of network reimbursement.
4. Note: Utilization information, Delta renewal and renewal rates are not available.

Delta Dental

5. Are there questionnaires to be completed for either the Technical or Cost Proposals?
No
6. Is there a rate sheet for the Cost Proposal?
There is no rate sheet for the Cost Proposal. Offerors should provide the rate structure for their plan solution in whatever means they have available.

NO OTHER QUESTIONS WERE RECEIVED BY THE DEADLINE

II. Acknowledgement

Acknowledge your receipt of, and compliance with, this Addendum by either signing the attached acknowledgement, or referencing its receipt and your compliance, in your bid.

ACKNOWLEDGEMENT OF RECEIPT OF ADDENDUM # 1

I certify that the information contained in the proposal submitted on behalf of the below named firm incorporates any and all changes to the original specification. I further certify by my signature below, that I am fully authorized to acknowledge receipt of the above addendum and also bind the below named firm to the terms, conditions and specifications of the RFP and any changes thereto made by this addendum.

ACKNOWLEDGED BY:

FOR: _____

Company Name

Date

Signature of Authorized Agent

Printed/typed name

Title