

ACERA 2025/2026 Dental RFP
Response to Dental RFP Questions

- 1) What is the out of network allowance on the current Delta PPO?

The standard OON reimbursement rate (also called the prevailing rate) is a rate based on generally accepted regional dentist fees and more closely aligns with what Delta Dental dentists accept as payment in full. For ACERA, the prevailing rate is most closely aligned with the Delta Dental DPPO reimbursements.

- 2) Would the group/Segal like us to secure a DHMO option alongside our PPO proposal (the program would be jointly administered - combined billing and eligibility if PPO is fully insured. Separate billing/eligibility if PPO goes ASO)?

The RFP is requesting both a PPO and a DHMO plan.

- 3) Would the group/Segal like us to propose an alternate low- cost PPO plan (assuming replacement of the DHMO)?

No

- 4) Does ACERA have a memorandum of understanding (MOU) that would preclude them from moving away from the incumbent?

No

- 5) Is the organization for profit or tax exempt?

ACERA is a qualified retiree association

- 6) If tax exempt, how is the organization classified under the IRC (e.g. 501(c)(3))?

Not applicable

- 7) How often will new groups be added, if any?

None. All retirees are in one group plan.

- 8) Are there any limitations upon an employer's ability to join or leave the association or MEWA?

ACERA is a qualified retiree association. This question does not apply to ACERA.

- 9) Section II G – member satisfaction survey – this section refers to NCQA standards which does not apply to dental. Was this section included in error?

The standards provided are based on the current arrangement. Please provide responses to the best of your ability.

- 10) Please provide 2025 monthly enrollment and claims experience for each of the current DPPO plans

This information is currently unavailable

- 11) Please advise on current DPPO enrollment for the <10 Years of service group. The census file shows 781 employees enrolled, and the employee enrollment as of 12/2024 shows 442.

The census file was provided by ACERA, while the enrollment in Attachment D was provided by the incumbent. For the census data, please filter out the mandatory/voluntary data field to find a figure closer to the 442 retiree enrollment.

- 12) Please provide a disruption file based on submitted charges, ideally with in network indicators. Please provide the timeframe for the submitted charges.

The submitted charges and in-network indicators are not required to complete the provider disruption file and will not be provided. The experience period for the disruption file is from January through December of 2024.

- 13) Other than the benefit enhancements noted, has there been any additional plan design changes within the experience period provided? If so, please indicate the effective date of change.

No

- 14) ID Cards – Is ACERA willing to go digital in lieu of printed ID cards?

ACERA prefers both printed and digital ID cards. The ACERA population is retired, and many do not use digital platforms.

- 15) Please advise what the current out of network program allowance based on. Is it based on a fee schedule such as MAC using either the PPO, Premier fee schedules, or an R&C such as 80th, or some other methodology?

The standard OON reimbursement rate (also called the prevailing rate) is a rate based on generally accepted regional dentist fees and more closely aligns with what Delta Dental dentists accept as payment in full. For ACERA, the prevailing rate is most closely aligned with the Delta Dental DPPO reimbursements.

- 16) Is the current out of network program allowance calculated using submitted or allowed charges?

Please refer to question 15

- 17) Please provide the % of paid claims broken out by PPO, Premier and out of network

This information is pending.

- 18) After reviewing the Vision and Dental RFPs for ACERA, the only item we need is a copy of their Association agreement.

This information is not applicable.

- 19) Also, does the group use a BenAdmin platform?

ACERA uses PG3.

- 20) Does the Association have a Trust that “holds” the lines of coverage being requested?

ACERA has direct contracts with the current carrier to offer dental benefits.

- 21) If so, may we review a copy of the Trust Agreement? This may be required for filing in each state's department of insurance where employees reside. Some states will require no filing, others may require filing the trust as a policy holder (depending on state-specific requirements). RFP states, "The majority of ACERA Retirees reside within California (approximately 85%). The remaining 15% of ACERA Retirees reside throughout the United States and internationally. Arizona, Nevada, Texas, Oregon, and Washington are the states with the largest concentration of ACERA Retirees outside of California". We can evaluate every state if nothing additional is available.

N/A

- 22) Please confirm the out-of-network reimbursement (program allowance) being administered by Delta Dental is the 80th percentile of R&C.

Please refer to question 15

- 23) If Delta Dental is not using the 80th percentile, please provide the R&C equivalent for the Delta Dental program allowance for non-participating dentists.

Please refer to question 15

- 24) For the electronic copy of our proposed network providers in Microsoft Excel, please confirm if the provider list should be limited to a specific geography? For example, should we provide a list of the providers located in Alameda County or the Bay Area? If you would like the providers in the Bay Area, please provide the list of counties to include.

The provider list should include providers within the Northern California region. The census provided in a secure email contains the information required to determine access to dental providers.

- 25) Our best practice for executing our proposal documents is via electronic signature, which are legally binding in the United States. Will you waive the ink and notary on the requested forms and approve electronic signature?

Yes.

- 26) Please provide the financial PAR agreement/policy with the current terms.

This information is pending.

- 27) Will the current reserve with Delta transfer to the new carrier?

Typically, the stabilization funds would be held by Delta Dental and used to cover plan runoff claims cost. Any unused funds would then be returned to ACERA.

- 28) With the current PAR arrangement in place, please confirm the magnitude of annual and terminal retro, historical and latest PSR or deficit amounts, as well as risk charges.

This information is pending.

- 29) Can retirees who waived coverage at annual enrollment, elect coverage at the following enrollment and/or throughout the year?

Retirees who waived or cancelled coverage may only enroll during the next annual open enrollment.

30) Does the customer currently partner with or have plans to partner with a third-party entity that will assist in their benefit administration? Please include the name(s) of the entity partner(s) being considered and explain the scope of services they will provide.

No

31) Please provide the last 36 months of **paid** premium and **paid** claim experience on a monthly basis with the following items split by plan (and by population if applicable):

- a. Premium (or premium equivalents if ASO arrangement);
- b. Paid claim dollars split by In-Network and Out-of-Network;
- c. Claim counts or EOBs;
- d. Employee Lives (eligible and enrolled);
- e. Dependent Lives.

Please utilize the information provided in Attachment A.

32) We would like to request an extension on the Dental bid. At least another seven working days if possible.

Yes, the revised deadline will be April 11, 2025 at 4:00 PST.

33) They currently offer a Participating policy and a non-participating policy. We can only offer non-participating policy. Will they accept only a non-participating policy?

Yes

34) What are the out of network reimbursements for the DPPO plan, 80th or 90th UCR?

Pending response from Delta

35) Please provide a revised census broken out by classes for both the DPPO and DHMO. The current census is only broken out by DPPO and DHMO.

Please use the current census provided. The census includes the dental plan and years of service.

36) < 10 years of services for DPPO & DHMO have different rates and >10+ years have different rates for DPPO & DHMO. Please clarify.

Retirees with <10 years of services are allowed to enroll in the dental plans offered by ACERA. However, retirees that meet the eligibility requirements for a subsidy from ACERA are offered a different premium structure. Please refer to the retiree benefit guide for more details.