

APPENDIX F – Mandatory Responses to Cost Components of the RFP

1. Managed Care Savings Opportunities

Section 1 Point Allocation	
Question(s)	Points
1	10
2,3,4,5	20
6	10
7	10
Total	50

- Q1.** Describe the respondent's experience in achieving cost reductions through utilization management and controls (prior authorization requirements, clinical management, care coordination or dental homes, claims review, etc.). Quantify the expected impact on utilization of services, by category if applicable, compared to the estimates in the cost model provided.
- Q2.** Describe and quantify any potential savings related to claims adjudication protocols.
- Q3.** Describe any member outreach, education, and incentive activities and quantify their expected impact on utilization of services, by category if applicable, compared to the estimates in the cost model provided.
- Q4.** Describe any mechanisms for working with outlier providers identified as having utilization out of line with expectations, and how that might affect utilization trends over time.
- Q5.** Describe and quantify the expected impact of any programs aimed at avoiding emergency department visits for dental issues and ensuring dental care is sought and provided in the most appropriate setting.
- Q6.** Describe and quantify the expected impact, over time, of provider-directed efforts to promote appropriate utilization. How do you expect the mix of services to change over time as people are continuously enrolled for dental benefits and how would that change future expected costs?
- Q7.** How do you expect APMs to bend the cost curve for dental services in the future? What APMs have been successful for you in other states and what types of savings have been achieved? Please list and describe at least two examples of positive impact from successful APM programs.

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2. Third Party Liability (TPL), Coordination of Benefits (COB), and Cost Avoidance

Section 2 Point Allocation	
Question(s)	Points
8	5
9	5
10	5
Total	15

- Q8.** Quantify the respondent's TPL recovery levels in Medicaid managed dental programs as a percentage of total paid claims. If your organization has experience in multiple state Medicaid programs, please list each state separately.
- Q9.** Quantify the respondent's COB and cost avoidance rates in Medicaid managed dental programs as a percentage of total paid claims.
- Q10.** Please list key factors in successfully managing TPL, COB, and cost avoidance efforts.

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3. Program Integrity – Fraud, Waste, and Abuse

Section 3 Point Allocation	
Question(s)	Points
11	10
Total	10

- Q11.** Discuss the respondent’s fraud, waste, and abuse mitigation processes, including recoveries of provider overpayments, and the magnitude of savings from such programs in other states, as a percentage of paid claims.

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4. Administrative Efficiencies

Section 4 Point Allocation	
Question(s)	Points
12	10
13	5
Total	15

- Q12.** Is there any potential for, and could you quantify, any opportunities for administrative efficiency beyond the stated 85% minimum loss ratio requirement? What loss ratios have been contracted in other state programs and what has been the actual profit margin in those programs?
- Q13.** Describe the respondent's approach to balancing the need to make administrative investments that improve outcomes and manage dental costs with the need to limit administrative expenditures.

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5. Cost Savings

Section 5 Point Allocation	
Question(s)	Points
14	10
Total	10

Q14. Based on the respondent's view of the cost model, what areas appear to offer the greatest potential for overall cost savings, and/or greatest potential for higher-than-expected costs?