



STATE OF OHIO
DEPARTMENT OF ADMINISTRATIVE SERVICES
GENERAL SERVICES DIVISION
OFFICE OF PROCUREMENT SERVICES
4200 SURFACE ROAD, COLUMBUS, OH 43228-1395

MANDATORY USE CONTRACT FOR: DENTAL INSURANCE FOR EXEMPT STATE OF OHIO EMPLOYEES

CONTRACT NUMBER: CSP903909

EFFECTIVE DATES: 04/06/09 TO 06/30/12

* Renewal through 06/30/13

The Department of Administrative Services has accepted Proposals submitted in response to Request for Proposal (RFP) No. CSP903909 that opened on January 14, 2009. The evaluation of the Proposal responses has been completed. The Offeror listed herein has been determined to be the highest ranking Offeror and has been awarded a Contract for the services listed. The respective Proposal response including, Contract Terms & Conditions, any Proposal amendment, special Contract Terms & Conditions, specifications, pricing schedules and any attachments incorporated by reference and accepted by DAS become a part of this Services Contract.

This Requirements Contract is effective beginning and ending on the dates noted above unless, prior to the expiration date, the Contract is renewed, terminated, or cancelled in accordance with the Contract Terms and Conditions.

This Requirements Contract is available to the Human Resources Division (HRD), Benefits Administration Services (BAS), of the Department of Administrative Services (DAS) as applicable.

The agency is eligible to make purchases of the contracted services in any amount and at any time as determined by the agency. The State makes no representation or guarantee that department will purchase the volume of services as advertised in the Request for Proposal.

Questions regarding this and/or the Services Contract may be directed to:

Carol Clingman, CPPB
carol.clingman@das.state.oh.us

This Requirements Contract and any Amendments thereto are available from the DAS Web site at the following address:

www.ohio.gov/procure

* To advise of contract renewal effective 07/01/12 through 06/30/13.

RFP Response Clarifications:

Per its February 5, 2009 letter, Delta Dental has agreed to withdraw any exception statements made as part of its original CSP submission #CSP903909 on January 14, 2009, to Ohio's Scope of Work and Deliverables and Terms and Conditions. Also, Delta Dental is in agreement that composite resin (white) restorations and porcelain crowns will be covered services on posterior teeth as applicable under its Plan A #9273-0001, 0099 and Plan B #9273-1001,1099.

COST SUMMARY

TITLE: Dental Insurance for Exempt State of Ohio Employees

RFP NUMBER: CSP903090

INDEX NUMBER: DAS001

UNSPSC NUMBER: 85122000

EFFECTIVE DATE OF PLAN: July 1, 2009

ITEM NUMBER: 00000000000015926

DELTA DENTAL PPO AND DELTA PREMIER ADMINISTRATIVE FEES	July 1, 2009 Dec. 31, 2009	January 1, 2010 June 30, 2010	July 1, 2010- June 30, 2011	July 1, 2011- June 30, 2012	July 1, 2012- June 30, 2013
• Annual Set-up fee	Included	Included	Included	Included	Included
• Claim Administration	\$ 2.07	\$ 2.54	\$ 2.60	\$ 2.64	\$ 2.82
• Network Access	\$ 0.25	\$ 0.25	\$ 0.25	\$ 0.25	\$ 0.25
• Fiduciary Liability	Included	Included	Included	Included	Included
• Utilization Review	Included	Included	Included	Included	Included
• Other Fees	Included	Included	Included	Included	Included
Total PEPM ASO Fee	\$ 2.32	\$ 2.79	\$ 2.85	\$ 2.89	\$ 3.07

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CONTRACTOR INDEX

CONTRACTOR AND TERMS:

CONTRACT NO.: CSP903909-1 (06/30/12)

HR00001075
 Delta Dental
 4100 Okemos Road
 Okemos, MI 48864

Terms: Net 30

Remit to:
 Delta Dental
 P.O. Box 79001
 Detroit, MI 48279-0454

CONTRACTOR'S CONTACT: Jerry Kucan,

Telephone (614) 901-7120
 Fax (614) 890-1274
 Email gkucan@deltadentaloh.com

* To correct the FY13 dates.

SUMMARY OF AMENDMENTS

Amendment Number	Revision Date	Description
2	06/11/12	To correct FY13 dates listed on the Cost Summary.
1	04/04/12	To advise of contract renewal effective 07/01/12 through 06/30/13 and of a price increase in the ASO fee for Fiscal Year 2013.