Financial Response Medical Overview/Highlights/Caveats of Reponses

- Offeror One
 - Highlights of Offeror One's response to the non-financial aspects of the RFP
- Offeror Two
 - Highlights of Offeror Two's response to the non-financial aspects of the RFP
- Offeror Three
 - Highlights of Offeror Three's response to the non-financial aspects of the RFP

Medical Financial Evaluation

Re-Priced Allowed Claims Amount

Offeror Financial Totals							
	Contract Year 1	Contract Year 2	Contract Year 3	Contract Year 4	Contract Year 5	Total	
Trend Factor							
Projected Allowed Claims	\$ -	\$ -	\$ -	\$ -	\$ -		
Administration Fees	\$ -	\$ -	\$ -	\$ -	\$ -		
Total Projected Claims	\$ -	\$ -	\$ -	\$ -	\$ -		
Penalty for Missing Discount Guarantee	\$ -	\$ -	\$ -	\$ -	\$ -		
Annual Contract Total	\$ -	-	\$ -	\$ -	\$ -		
Five Year Contract Total						\$ -	

Medical Financial Evaluation

Total Five Year Cost Comparison							
	Baseline (Current)	Offeror 1	Offeror 2	Offeror 3	Offeror 4	Offeror 5	
Total Administration Fees	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Total Projected Claims	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Total Penalty for Missing Discount Guarantee	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Five Year Cost	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Dollar Change from Baseline (Current)		\$ -	\$ -	\$ -	\$ -	\$ -	
Percentage Change from Baseline (Current)		X.X%	X.X%	X.X%	X.X%	X.X%	

Financial Response Dental Overview/Highlights/Caveats of Reponses

- Offeror One
 - Highlights of Offeror One's response to the non-financial aspects of the RFP
- Offeror Two
 - Highlights of Offeror Two's response to the non-financial aspects of the RFP
- Offeror Three
 - Highlights of Offeror Three's response to the non-financial aspects of the RFP

Dental Financial Evaluation

Re-Priced Allowed Claims Amount

Offeror Financial Totals							
	Contract Year 1	Contract Year 2	Contract Year 3	Contract Year 4	Contract Year 5	Total	
Trend Factor							
Projected Allowed Claims	\$ -	\$ -	\$ -	\$ -	\$ -		
Administration Fees	\$ -	\$ -	\$ -	\$ -	\$ -		
Total Projected Claims	\$ -	\$ -	\$ -	\$ -	\$ -		
Annual Contract Total	\$ -	\$ -	\$ -	\$ -	\$ -		
Five Year Contract Total						\$ -	

Dental Financial Evaluation

Total Five Year Cost Comparison							
	Baseline (Current)	Offeror 1	Offeror 2	Offeror 3	Offeror 4	Offeror 5	
Total Administration Fees	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Total Projected Claims	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Five Year Cost	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Dollar Change from Baseline (Current)		\$ -	\$ -	\$ -	\$ -	\$ -	
Percentage Change from Baseline (Current)		X.X%	X.X%	X.X%	X.X%	X.X%	

Dental Per Procedure Discount

			Offeror 1	Offeror 2	Offeror 3	Offeror 4
Salast ADA	A Codes / Description	Fraguanay	Offeror 1	Offeror 2	Offeror 3	Offeror 4
D0120	Periodic Oral Evaluation - Established Patient	Frequency xx.xx%	\$\$	\$\$	\$\$	\$\$
D1110	Prophylaxis - Adult	XX.XX%	\$\$	\$\$	\$\$	\$\$
D0274	Bitewings - Four Radiographic Images.	x.xx%	\$\$	\$\$	\$\$	\$\$
D2392	Resin-based Composite - Two Surfaces, Posterior	x.xx%	\$\$	\$\$	\$\$	\$\$
D0210	Intraoral - Complete Series Of Radiographic Images	x.xx%	\$\$	\$\$	\$\$	\$\$
D0220	Intraoral - Periapical First Radiographic Image	x.xx%	\$\$	\$\$	\$\$	\$\$
D0150	Comprehensive Oral Evaluation - New Or Established Patient	x.xx%	\$\$	\$\$	\$\$	\$\$
D4910	Periodontal Maintenance	x.xx%	\$\$	\$\$	\$\$	\$\$
D2391	Resin-based Composite - One Surface, Posterior	x.xx%	\$\$	\$\$	\$\$	\$\$
D0140	Limited Oral Evaluation - Problem Focused	x.xx%	\$\$	\$\$	\$\$	\$\$
D1208	Topical Application Of Fluoride	x.xx%	\$\$	\$\$	\$\$	\$\$
D1206	Topical Application Of Fluoride Varnish	x.xx%	\$\$	\$\$	\$\$	\$\$
D1120	Prophylaxis - Child	x.xx%	\$\$	\$\$	\$\$	\$\$
D2740	Crown - Porcelain/ceramic Substrate	x.xx%	\$\$	\$\$	\$\$	\$\$
D2950	Core Buildup, Including Any Pins When Required	x.xx%	\$\$	\$\$	\$\$	\$\$
D0230	Intraoral - Periapical Each Additional Radiographic Image	x.xx%	\$\$	\$\$	\$\$	\$\$
D1351	Sealant - Per Tooth	x.xx%	\$\$	\$\$	\$\$	\$\$
D2393	Resin-based Composite - Three Surfaces, Posterior	x.xx%	\$\$	\$\$	\$\$	\$\$
D7210	Extraction, Erupted Tooth Requiring Removal Of Bone	x.xx%	\$\$	\$\$	\$\$	\$\$
D0272	Bitewings - Two Radiographic Images.	x.xx%	\$\$	\$\$	\$\$	\$\$
D4381	Localized Delivery Of Antimicrobial Agents	x.xx%	\$\$	\$\$	\$\$	\$\$
D2331	Resin-based Composite - Two Surfaces, Anterior	x.xx%	\$\$	\$\$	\$\$	\$\$
D4342	Periodontal Scaling And Root Planing - 1 To 3 Teeth Per Quadrant	x.xx%	\$\$	\$\$	\$\$	\$\$
D2330	Resin-based Composite - One Surface, Anterior	x.xx%	\$\$	\$\$	\$\$	\$\$
D2332	Resin-based Composite - 3 Surfaces, Anterior	x.xx%	\$\$	\$\$	\$\$	\$\$
D9223	Deep Sedation/general Anesthesia-each 15 Minute Increment	x.xx%	\$\$	\$\$	\$\$	\$\$
D0330	Panoramic Radiographic Image	x.xx%	\$\$	\$\$	\$\$	\$\$
D3330	Endodontic Therapy, Molar (excluding Final Restoration)	x.xx%	\$\$	\$\$	\$\$	\$\$
Weighted Av	verage Allowance - 3 digit zip code		\$\$	\$\$	\$\$	\$\$
Discount Fro	om Incumbent			x.x%	x.x%	x.x%
Relativity to	Incumbent			x.xx	x.xx	X.XX