

Firm		1	2	3	4	5	6	TOTAL	Comments
EX	COMPANY NAME	20	30	40	30	40	40	200	Comments
1	Vendor A	13	27	33	24	15	25	137	
2	Delta Dental	19	28	37	30	36	21	171	
3	Vendor C	12	27	27	25	14	34	139	
4	Vendor D	13	28	26	24	15	20	126	
5	Vendor E	19	28	37	28	14	24	150	
1	Experience, background, financial capability, and years in business performing similar services to other private and public organizations within and around Lake County.								10
	Responses to the Dental Insurance Program Questionnaire								15
	Access to a Preferred Dental Provider (PDP) network is required.								20
	Track record and ability to provide quality customer services and maintain effective performance standards. Strong account management and implementation team.								15
	Process and capabilities to administer the change in Plan Year and manage open enrollment related to staffing, material, employee notification and education.								20
	Price Proposal and ability to include multi-year rate guarantees and performance guarantee incentives.								20