



DELTA DENTAL OF COLORADO  
4582 South Ulster Street  
Denver, Colorado 80237

**DELTA DENTAL BENEFITS CONTRACT**

The parties of this Contract are ADAMS COUNTY GOVERNMENT (EPO SCHEDULE 1B), herein called the "Group," "Applicant," or "Employer" and Colorado Dental Service Inc., d/b/a Delta Dental of Colorado, herein called "Delta Dental."

The following sections of the current Delta Dental EPO contract has been amended effective January 1, 2020 for a one year period. The balance of such contract is continued as if fully set forth herein except for the amended section as shown below:

**Rate Coverage**

Composite	Admin Fee
PER MONTH PER SUBSCRIBER	\$ 3.80

This Service Fee is contingent upon total enrollment of all eligible primary subscribers, in accordance with the eligibility provisions in Article III. Should enrollment vary by 10% or more, Delta Dental reserves the right to recalculate the Service Fee based upon actual enrollment. The change in Service Fee would not become effective until the next contract anniversary. If a recalculation becomes necessary, multiple-year contracts will be replaced with a new agreement based upon the new enrollment.

The Service is due the first day of each month, and as further described in Article II. The Monthly Claims Reimbursement Due Date is the 2nd, 12th, and 22nd day or the last business day closest to such date of each month and as further described in Article II.

**Eligibility Waiting Period:**

Active employees working the minimum number of hours as required by the employer will become eligible for enrollment on the first day of the month coinciding with or following their date of employment.

**Countersigned:**

Delta Dental of Colorado

*Mark Thompson*

Signature

June 8, 2020

Date

**Accepted:**

Adams County Government (EPO Schedule 1B) - # 7195 & 97195

Signature

Date

**APPROVED AS TO FORM  
COUNTY ATTORNEY**

*[Signature]*

