



DELTA DENTAL OF COLORADO

4582 South Ulster Street
Denver, Colorado 80237

DELTA DENTAL BENEFITS CONTRACT

The parties of this Contract are ADAMS COUNTY COLORADO- RETIREES, 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 section of the current Delta Dental PPO 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 change as shown below.

Rate Coverage

Coverage Tier	Rate Amount
SUBSCRIBER	\$ 42.99
SUBSCRIBER PLUS ONE	\$ 86.31
SUBSCRIBER PLUS TWO OR MORE DEPENDENTS	\$ 129.04

The following section of the current Delta Dental PPO contract has been amended effective January 1, 2020. The balance of such contract is continued as if fully set forth herein except for the changes as shown below.

Maximum (January 1st - December 31st)

Class	Type	Network	Amount
All Covered Classes Except D&P	Individual coverage amount	PPO and Non-PPO	\$2000



Countersigned:
Delta Dental of Colorado

Mark Thompson

Signature

June 30, 2020

Date

Accepted:
Adams County Colorado-Retirees #7738

Signature

Date

APPROVED AS TO FORM
COUNTY ATTORNEY

A handwritten signature in blue ink, consisting of several loops and flourishes, positioned over a horizontal line.