



DELTA DENTAL OF COLORADO

PO Box 173803
Denver, Colorado 80217

DELTA DENTAL BENEFITS CONTRACT

The parties of this Contract are ADAMS COUNTY COLORADO - RETIREES, herein called the "Group," "Applicant," or "Employer" and Delta Dental of Colorado, herein called "Delta Dental."

The following section of the current Delta Dental PPO contract has been amended effective January 1, 2021 for a two 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	\$ 39.70
SUBSCRIBER PLUS ONE DEPENDENT	\$ 79.70
SUBSCRIBER PLUS TWO OR MORE DEPENDENTS	\$ 119.16

Countersigned:

Delta Dental of Colorado

A handwritten signature in black ink that reads "Mark Thompson". The signature is written in a cursive, flowing style.

Signature

October 19, 2020

Date

Accepted:

Adams County Colorado – Retirees- 7738

Signature

Date