

**RENEWAL ADDENDUM
FOR GROUP #90904-0**

Attached to and forming a part of the Agreement To Provide Dental Care Benefits between **CITY OF ARKANSAS CITY** (plan #90904-0) and Delta Dental of Kansas, Inc.

It is agreed and understood that effective with the **January 1, 2024**, renewal, Section VIII, Number 2 shall read:

Current Admin Rate:
\$5.50

New Admin Rate:
\$5.60

**NOTE: New 3 year agreement:
2024 - as noted above
2025 - \$5.60 administrative rate; 2026 - \$5.60 administrative rate**

Please acknowledge acceptance of this renewal by signing below and returning the renewal confirmation by fax to (913) 381-8312 or by email to marketing@deltadentalks.com by **December 1, 2023**.

Printed Name

Date

Signature

Agent's Name

Sara K. Marlock

Delta Dental of Kansas, Inc.

Please assist us in updating our records by providing the name & email address of your group administrator.

Contact: _____

Email: _____

WELLNESS CONNECTION - As the dental benefits experts, we're here to help educate your employees on the importance of good oral health. Visit the **Wellness Connection** on our website, www.deltadentalks.com, to download easy-to-use wellness materials.