

**ADDENDUM FOUR (revised)  
TO  
DENTAL CARE GROUP POLICY  
ISSUED BY  
CARE-PLUS DENTAL PLANS, INC.**

**CITY OF GREEN BAY  
GROUP NO. PPD098**

The Dental Care Group Policy (the "Policy") originally effective the 1st day of January, 2017 by and between Care-Plus Dental Plans, Inc. ("Care-Plus") and CITY OF GREEN BAY (the "Group"), shall be modified as indicated below. This Addendum is attached to and made part of the Policy.

**Article II, Section 2 of the Policy shall be amended and restated in its entirety to read as follows:**

CONTRACT COMMENCES. The Contract shall commence on the 1st day of January, 2021, for a term of 12 months and shall remain in effect upon fulfillment of the financial provisions outlined herein, until it is amended or terminated. This Contract, the Members' applications and any amendments or riders shall constitute the entire Contract between the Group and Care-Plus.

**ADDENDUM B PROCEDURE DESCRIPTION, of the Policy shall be amended and restated to include as follows:**

ADA CODE	DESCRIPTION	PARTICIPANT'S CO- PAYMENT
PREVENTIVE		
D1110	Prophylaxis – adult – 3 per year	NONE
D1120	Prophylaxis – child – 3 per year	NONE
D1551	Re-cement or re-bond bilateral space maintainer – max	NONE
D1552	Re-cement or re-bond bilateral space maintainer – mand	NONE
D1553	Re-cement or re-bond bilateral space maintainer – per quad	NONE
D1556	Removal of fixed or unilateral space maintainer – per quad	NONE
D1557	Removal of fixed bilateral space maintainer – max	NONE
D1558	Removal of fixed bilateral space maintainer – mand	NONE
PROSTHODONTICS, REMOVABLE		
D5284	Removable unilateral partial denture – one piece flexible base (including clasps and teeth) – per quad	NONE
D5286	Removable unilateral partial denture – one resin (including clasps and teeth) – per quad	NONE

**ADDENDUM B PROCEDURE DESCRIPTION, of the Policy shall be amended and restated to remove the following:**

ADA CODE	DESCRIPTION	PARTICIPANT'S CO- PAYMENT
PREVENTIVE		
D1550	Re-cement or re-bond space maintainer	

NOW, THEREFORE, in consideration of the premises and mutual covenants herein described, Care-Plus Dental Plans, Inc. and the Group have each extended and modified the Policy in accordance with this Addendum, effective as of the 1st day of January, 2021.

Date: November 12, 2020

CARE-PLUS DENTAL PLANS, INC.

In the presence of:

By: Paul Seibert  
(Chief Financial Officer)

Christine Bruns

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Date: \_\_\_\_\_

GROUP: CITY OF GREEN BAY

In the presence of:

By: \_\_\_\_\_

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