

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

**ST. NORBERT COLLEGE
GROUP NO. MW017**

The Dental Care Group Policy (the "Policy") originally effective the 1st day of January, 2020 by and between Care-Plus Dental Plans, Inc. ("Care-Plus") and ST. NORBERT COLLEGE (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, 2023, 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 attached hereto, constitute the entire Contract between the Group and Care-Plus.

Article II, Section 4 of the Policy shall be amended and restated in its entirety to read as follows:

MONTHLY FEES.

a. Single Member Rate	\$ 22.85
b. Family Member Rate	\$ 75.41
c. Couple (employee + 1(spouse or 1 child)) Rate	\$ 45.70
d. Limited Family (employee & Child(ren)) Rate	\$ N/A
e. Composite Rate	\$ N/A
e. Participant Rate	\$ N/A

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

ADA CODE	DESCRIPTION	PARTICIPANT'S CO- PAYMENT		
		TIER 1	TIER 2	TIER 3
ENDODONTICS				
D3911	Intraorifice barrier	10%	10%	N/A
PROSTHODONTICS, REMOVABLE				
D5765	Soft liner for complete or partial removable denture – indirect	10%	10%	N/A
ADJUNCTIVE GENERAL SERVICES				
D9912	Pre-visit patient screening	NONE	NONE	N/A

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

ADA CODE		DESCRIPTION	PARTICIPANT'S CO- PAYMENT		
PERIODONTICS					
D4320	Provisional splinting – intracoronal				
D4321	Provisional splinting – extracoronal				

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, 2023.

Date: July 18, 2022

In the presence of:

Luis Alvarez

CARE-PLUS DENTAL PLANS, INC.

By: Paul Seibert
(Chief Financial Officer)

Date: 7/19/2022

GROUP: ST. NORBERT COLLEGE

In the presence of:

Nathan Butterfield

By: J. Au