DELTA DENTAL

EXHIBIT "A"

DeltaVision

CITY OF JOPLIN
602 S. Main St.
Joplin, MO 64801

Dear Plan Administrator:

On a promise of affordably priced comprehensive dental benefits delivered through caring service professionals, you selected us. Thank you for placing your trust in us. We take that trust very seriously.

We are grateful for your business. We respect the role of your broker and consultant and will work closely with both of you to provide you with the best possible service.

Your plan anniversary is January 1, 2024. Below is a summary of your current rates along with your renewal rates. The rates are guaranteed from 01/01/2024 through 12/31/2025.

To confirm renewal acceptance, please sign and date this document and retain a copy with your SPD.

SIGNATURE _____ DATE _____

	Current Rates	Renewal Rates
Employee	$27.96	$30.06
Family	$74.36	$79.94

Please keep in mind that this is your annual enrollment period. Now is the time for your employees to review and make changes to their current coverage, which will become effective on your anniversary.

Thank you for your continued partnership with Delta Dental of Missouri.

Sincerely,

Cindy Pithers

Cindy Pithers
Regional Account Manager
Phone: (800) 392-1167 x2840