

**Northeast Delta Dental
Delta Dental Plan of New Hampshire
Group Dental Plan Description
Amendment**

Effective Date of change(s): 01/01/2011

As of the Effective Date above, your dental plan description (DPD) booklet is amended as follows:

Under Section I, Definitions, replace the definition of "Dependent" with the following:

Dependent:

- (a) the spouse to whom the Subscriber is legally married or a partner in a valid civil union; and/or
- (b) a child of the Subscriber or of the spouse/civil union partner of the Subscriber, by natural birth or legal adoption or a child in the process of adoption or guardianship, a foster child legally placed by order of a court or agency having competent jurisdiction and/or a stepchild, provided such child is under the age of twenty-six (26).

Qualified children are eligible regardless of student status and coverage will terminate when a child reaches the age of twenty-six (26). Children incapable of self-support because of physical or mental disability are eligible regardless of age; supporting documentation from a health-care provider may be requested.

A newborn child is automatically covered for the first thirty-one (31) days following birth. Coverage will continue if the child is formally enrolled within the first thirty-one (31) days following birth or the child may be enrolled thereafter at any open enrollment or as of the first day of the month following the month of the child's second birthday.

Except as provided above, all other terms, conditions and limitations of your coverage will remain unchanged. If you have any questions regarding these changes or other terms of your coverage, please call Customer Service at (800) 832-5700.

Northeast Delta Dental

By: 

Title: President & CEO

Date: November 1, 2010