

**AMENDMENT NO. 5
CONTRACT FOR DENTAL SERVICES AND COVERAGE BETWEEN
FLORIDA HEALTHY KIDS CORPORATION AND
LIBERTY DENTAL PLAN OF FLORIDA, INC.**

This Amendment No. 5, entered into between the Florida Healthy Kids Corporation (“FHKC”) and LIBERTY DENTAL PLAN OF FLORIDA, INC. (“Insurer”) amends the Contract No.: 2021-300-02 for Dental Services and Coverage between FHKC and Insurer (“Contract”).

WHEREAS, the Contract allows for amendments by mutual written consent of the Parties; and

WHEREAS, the Parties desire to amend the Contract as provided in this Amendment, to be effective October 1, 2025.

NOW, THEREFORE, in consideration of the mutual promises and agreements herein contained, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Parties agree as follows:

1. Section 22.1 is hereby modified by deleting the last paragraph and replacing it as follows:

Utilization management activities, including prior authorization reviews, that result in an adverse determination shall be conducted by individuals with clinically appropriate backgrounds in a manner that results in interrater reliability sufficient to indicate the appropriateness and validity of the process, including the training given to the reviewers.

2. Except as expressly amended hereby, the Contract shall remain in full force and effect in accordance with its provisions.
3. This Amendment No. 5 sets forth the entire understanding between the Parties with regard to the subject matter of the Contract and supersedes all other agreements, negotiations, understanding, or representations, verbal or written, between the Parties regarding the Contract.
4. In the event of any conflict between the Contract and this Amendment No. 5, the terms of this Amendment No. 5 shall govern.
5. This Amendment No. 5 may be executed in counterparts, each of which shall constitute an original and all of which together shall constitute the same document.

IN WITNESS WHEREOF, the Parties have caused this Amendment No. 5 to be executed by their undersigned officials as duly authorized.

**FOR
FLORIDA HEALTHY KIDS CORPORATION:**

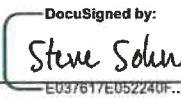
Signed:  _____

Name: Ryan West

Title: Chief Executive Officer

Date: 9/29/2025

**FOR
PLAN: LIBERTY DENTAL PLAN OF FLORIDA,
INC.**

Signed:  _____
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Name: Steve Sohn

Title: Chief Administrative Officer

Date: 9/23/2025