

# ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at [MileHighOrdinance@DenverGov.org](mailto:MileHighOrdinance@DenverGov.org) by 9 a.m. Friday. Contact the Mayor's Legislative team with questions

Date of Request: August 1, 2024

Please mark one:  Bill Request or  Resolution Request

Please mark one: The request directly impacts developments, projects, contracts, resolutions, or bills that involve property and impact within .5 miles of the South Platte River from Denver's northern to southern boundary? (Check map [HERE](#))

Yes  No

## 1. Type of Request:

Contract/Grant Agreement  Intergovernmental Agreement (IGA)  Rezoning/Text Amendment

Dedication/Vacation  Appropriation/Supplemental  DRMC Change

Other:

## 2. Title:

**For an ordinance modifying Article VI, Chapter 18 of the Revised Municipal Code of Denver entitled Insurance Program, to implement 2025 employee benefit changes that both adds a new "Preferred Provider Organization" insurance plan and allows employees until December 31 of each year to earn wellness incentive.**

3. Requesting Agency: Office of Human Resources

## 4. Contact Person:

Contact person with knowledge of proposed ordinance/resolution (e.g., subject matter expert)	Contact person for council members or mayor-council
Name: Heather Britton	Name: Heather Britton
Email: heather.britton@denvergov.org	Email: Heather.britton@denvergov.org

## 5. General description or background of proposed request. Attach executive summary if more space needed:

(who, what, why)

**2025 Employee Health Insurance Committee Recommendations** – The Executive Director of the Office of Human Resources (OHR), pursuant to section 18-5(e) recommends the adoption of changes to the employee benefit structure, as follows:

1. At the request of Denver Health and Hospitals Authority, a medical plan that includes DHHA (the "PPO" plan is added to section 18-173)
2. Revision to the wellness incentive to allow employees one additional month to earn the incentive, and to clarify eligibility and timing of wellness payment, and right to appeal denial of payment.

6. City Attorney assigned to this request (if applicable): Robert McDermott

7. City Council District: n/a

8. **\*\*For all contracts, fill out and submit accompanying Key Contract Terms worksheet\*\***

## Key Contract Terms

*To be completed by Mayor's Legislative Team:*

Resolution/Bill Number: \_\_\_\_\_

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

Type of Contract: (e.g. Professional Services > \$500K; IGA/Grant Agreement, Sale or Lease of Real Property):

Vendor/Contractor Name (including any dba's):

Contract control number (legacy and new):

Location:

Is this a new contract?  Yes  No Is this an Amendment?  Yes  No If yes, how many? \_\_\_\_\_

Contract Term/Duration (for amended contracts, include existing term dates and amended dates):

Contract Amount (indicate existing amount, amended amount and new contract total):

<i>Current Contract Amount</i> (A)	<i>Additional Funds</i> (B)	<i>Total Contract Amount</i> (A+B)
<i>Current Contract Term</i>	<i>Added Time</i>	<i>New Ending Date</i>

Scope of work:

Was this contractor selected by competitive process?

If not, why not?

Has this contractor provided these services to the City before?  Yes  No

Source of funds:

Is this contract subject to:  W/MBE  DBE  SBE  XO101  ACDBE  N/A

WBE/MBE/DBE commitments (construction, design, Airport concession contracts):

Who are the subcontractors to this contract?

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*To be completed by Mayor's Legislative Team:*

Resolution/Bill Number: \_\_\_\_\_

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