

ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at MileHighOrdinance@DenverGov.org by **3:00pm on Monday**. Contact the Mayor's Legislative team with questions

Date of Request: 12/23/2021

Please mark one: Bill Request or Resolution Request

1. Type of Request:

- Contract/Grant Agreement Intergovernmental Agreement (IGA) Rezoning/ext Amendment
 Dedication/Vacation Appropriation/Supplemental DRMC Change
 Other:

2. **Title:** (Start with *approves, amends, dedicates*, etc., include name of company or contractor and indicate the type of request: grant acceptance, contract execution, contract amendment, municipal code change, supplemental request, etc.)

Approves a service contract with COLORADO DENTAL SERVICE, INC. d/b/a DELTA DENTAL COLORADO to offer three dental benefit plan options to qualified Denver employees, including civilian, sheriff, classified police and fire.

3. **Requesting Agency:** OHR Benefits

4. Contact Person:

Contact person with knowledge of proposed ordinance/resolution	Contact person to present item at Mayor-Council and Council
Name: Chris O'Brien	Name: Chris O'Brien
Email: christopher.obrien@denvergov.org	Email: christopher.obrien@denvergov.org

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

Contract with Delta Dental Colorado to provide 3 dental plan options for qualified Denver employees. This contract will cover a term of 1/1/22 – 12/31/26, at a cost not to exceed \$55,000,000.00.

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

7. **City Council District:** Citywide

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: RR22 0017

Date Entered: _____

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

Expenditure – Professional Services

Vendor/Contractor Name: COLORADO DENTAL SERVICE, INC. d/b/a DELTA DENTAL COLORADO.

Contract control number: CSAHR-202160474

Location: N/A

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): 1/1/2022 – 12/31/2026

Contract Amount (indicate existing amount, amended amount and new contract total): \$55,000,000.00

<i>Current Contract Amount</i> (A)	<i>Additional Funds</i> (B)	<i>Total Contract Amount</i> (A+B)
\$55,000,000.00		\$55,000,000.00

<i>Current Contract Term</i>	<i>Added Time</i>	<i>New Ending Date</i>
1/1/22 – 12/31/26		12/31/2026

Scope of work:

DELTA DENTAL to provide Denver employee dental benefit plan administration.

Was this contractor selected by competitive process? Yes **If not, why not?**

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

Source of funds: General Fund

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? N/A

To be completed by Mayor's Legislative Team:

Resolution/Bill Number: RR22 0017

Date Entered: _____