

BILL/ RESOLUTION REQUEST

- 1. Title:** Approves a contract for \$350,000 with Concentra to provide primary medical care for City and County of Denver employees utilizing the Workers' Compensation Program (CE81011).
- 2. Requesting Agency:** Department of Finance
- 3. Contact Person *with actual knowledge of proposed ordinance***
 - Name:**Raymond Sibley
 - Phone:**720-913-3349
 - Email:**Raymond.Sibley@denvergov.org
- 4. Contact Person *with actual knowledge of proposed ordinance who will present the item at Mayor Council and who will be available for first and second reading, if necessary***
 - Name:**Raymond Sibley
 - Phone:**720-913-3349
 - Email:**Raymond.Sibley@denvergov.org
- 5. Describe the proposed ordinance, including what the proposed ordinance is intended to accomplish, who's involved**
 - a. Scope of Work**

Ordinance approves the contract with Concentra to provide primary care through a second medical facility as required by law to all employees who are using the Workers Compensation Program.
 - b. Duration**

12 months
 - c. Location**

Citywide
 - d. Affected Council District**

Citywide
 - e. Benefits**

Provide State mandated services
 - f. Costs**

\$350,000
- 6. Is there any controversy surrounding this ordinance, groups or individuals who may have concerns about it? Please explain.**

No.

Bill Request Number: BR12-0798

Date: 10/23/2012