

**ORDINANCE/RESOLUTION REQUEST**

Please email requests to the Mayor’s Legislative Team  
at [MileHighOrdinance@DenverGov.org](mailto:MileHighOrdinance@DenverGov.org) by **3:00pm on Monday**.

*\*All fields must be completed.\*  
Incomplete request forms will be returned to sender which may cause a delay in processing.*

**Date of Request: February 12, 2018**

Please mark one:       **Bill Request**                      or               **Resolution Request**

**1. Has your agency submitted this request in the last 12 months?**

**Yes**                       **No**

**If yes, please explain:**

**2. Title:** Request for approval of contract, pursuant to Charter § 3.2.6(E), with Denver Health Medical Plan for employee medical insurance benefits.

**3. Requesting Agency:** Office of Human Resources

**4. Contact Person:** *(With actual knowledge of proposed ordinance/resolution.)*

- **Name:** Christopher O’Brien
- **Phone:** 720-913-0748
- **Email:** Christopher.Obrien@denvergov.org

**5. Contact Person:** *(With actual knowledge of proposed ordinance/resolution who will present the item at Mayor-Council and who will be available for first and second reading, if necessary.)*

- **Name:** Christopher O’Brien
- **Phone:** 720-913-0748
- **Email:** Christopher.Obrien@denvergov.org

**6. General description of proposed ordinance including contract scope of work if applicable:**

Agreement for Denver Health Medical Plan to provide medical insurance in 2018 to employees eligible pursuant to section 18-171 of the DRMC, and classified members of the police departments, contract amount not to exceed \$8,423,000. Contract ID# CSAHR- 201736839-00

*\*\*Please complete the following fields: (Incomplete fields may result in a delay in processing. If a field is not applicable, please enter N/A for that field – please do not leave blank.)*

- a. Contract Control Number:**
- b. Duration:** 01/01/2018 – 12/31/2018
- c. Location:**
- d. Affected Council District:**
- e. Benefits:**
- f. Costs:** \$8,423,000

**7. Is there any controversy surrounding this ordinance? (Groups or individuals who may have concerns about it?) Please explain.**

None Known

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

SIRE Tracking Number: RR18 0187

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