

ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor’s Legislative Team
at 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: November 19, 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: *(Include a concise, one sentence description – please include name of company or contractor and contract control number - that clearly indicates the type of request: grant acceptance, contract execution, amendment, municipal code change, supplemental request, etc.)*

Occupational Health Centers of the Southwest, PA PC.; 201846056; Contract was awarded by RFP on11/19/18. Provider will act as one of the designated medical providers under the Workers’ Compensation Act and Rules of Procedure of the State of Colorado.

3. Requesting Agency: Department of Finance - Cash, Risk & Capital Funding -Workers’ Compensation Unit

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

- **Name:** Raymond Sibley
- **Phone:** 720-913-3349
- **Email:** Raymond.Sibley@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:** Raymond Sibley
- **Phone:** 720-913-3349
- **Email:** Raymond.Sibley@denvergov.org

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

Resolution approves the contract with Occupational Health Centers of the Southwest through December 31, 2023. Total contract amount by year 5 will be \$3,000,000. Occupational Health Centers of the Southwest acts as a designated medical provider under the Workers’ Compensation Act and Rules of Procedure of the State of Colorado. The City is required to provide employees a minimum of two choices for care when an alleged injury is reported. Occupational Health Centers of the Southwest (Concentra), and Denver Health will be the primary medical providers used.

****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:** 201846056
- b. Duration:** 1-1-2019 thru 12-31-2023
- c. Location:** n/a
- d. Affected Council District:** All
- e. Benefits:** City must provide at least two designated medical providers to injured employees.
- f. Costs:** \$3,000,000

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

To be completed by Mayor’s Legislative Team:

SIRE Tracking Number: RR18 1409

Date Entered: _____

No

To be completed by Mayor's Legislative Team:

SIRE Tracking Number: **RR18 1409**

Date Entered: _____