

## 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: **December 31, 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:** Was scheduled on 12/17/2018. Error in contract was discovered and signed copy from vendor was not received in time to continue.

**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 on 11/19/18. 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), will be one of the options 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

To be completed by Mayor's Legislative Team:

SIRE Tracking Number: RR19 0006

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

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

No

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

SIRE Tracking Number: **RR19 0006**

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