## **ORDINANCE/RESOLUTION REQUEST**

Please email requests to the Mayor's Legislative Team at <a href="MileHighOrdinance@DenverGov.org">MileHighOrdinance@DenverGov.org</a> by 3:00pm on <a href="Monday.">Monday</a>.

\*All fields must be completed.\*

Incomplete request forms will be returned to sender which may cause a delay in processing.

							Date of Rec	ղuest։ November	28, 2016	
Ple	ease ma	ark one:	☐ Bill Request	or	$\boxtimes$	Resolution	Request			
1.	. Has your agency submitted this request in the last 12 months?									
		Yes	⊠ No							
	lf y	yes, please	explain:							
2.		<b>Title:</b> Request for approval of contract, pursuant to Charter § 3.2.6(E), with Kaiser Permanente Insurance Company for employee medical insurance benefits.								
3.	Reque	esting Agen	ocy: Office of Hum	an Resources						
4.	■ Na ■ Ph	Contact Person: (with actual knowledge of proposed ordinance)  Name: Jennifer Cahoon Phone: 720-913-5521 Email: Jennifer.cahoon@denvergov.org								
5.	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: Jennifer Cahoon Phone: 720-913-5521 Email: Jennifer.cahoon@denvergov.org									
6. General description of proposed ordinance including contract scope of work if applicable								cable:		
	pu	Agreement for Kiser Permanente Insurance Company to provide medical insurance in 2017 to employees eligible pursuant to section 18-171 of the DRMC, and classified members of the police departments, contract amount not to exceed \$70,103,708.86. Contract ID# CSAHR-201631061-00								
	a. b. c. d.	Duration: Location:	de the following: January 1, 2017– Dec	·	7					
		there any c	controversy surroundir oplain.	ng this ordinand	<b>:e?</b> (g	Jroups or indi	ividuals who m	ay have concerns	about	

None known