



**CITY OF PLANO  
COUNCIL AGENDA ITEM**

<b>CITY SECRETARY'S USE ONLY</b>				
<input type="checkbox"/> Consent <input type="checkbox"/> Regular <input type="checkbox"/> Statutory				
Council Meeting Date:		9/27/10		
Department:		Purchasing		
Department Head		Mike Ryan		
Agenda Coordinator (include phone #): <b>Sharron Mason x7247</b>				
<b>CAPTION</b>				
To approve the Second Modification of the contract by and between the City of Plano and Columbia Medical Center of Plano Subsidiary, L.P. d/b/a Medical Center of Plano (Contract No. 2008-102-C) RFP for Wellness and Safety Program to reduce the contract amount from \$165,225 as provided in the First Modification to \$162,800, and authorizing the City Manager or his authorized designee to execute all necessary documents.				
<b>FINANCIAL SUMMARY</b>				
<input type="checkbox"/> NOT APPLICABLE <input checked="" type="checkbox"/> OPERATING EXPENSE <input type="checkbox"/> REVENUE <input type="checkbox"/> CIP				
FISCAL YEAR: <b>2010-11</b>	<b>Prior Year (CIP Only)</b>	<b>Current Year</b>	<b>Future Years</b>	<b>TOTALS</b>
Budget	0	0	0	<b>0</b>
Encumbered/Expended Amount	0	0	0	<b>0</b>
This Item	0	2,425	4,850	<b>7,275</b>
<b>BALANCE</b>	0	2,425	4,850	<b>7,275</b>
<b>FUND(s):     HEALTH CLAIMS FUND</b>				
<p><b>COMMENTS:</b> This item, in the amount of -\$7,275 (-\$2,425 for each fiscal year, 2010-11, 2011-12 &amp; 2012-13), modifies and reduces the existing contract for the Wellness and Safety Program to Columbia Medical Center of Plano.</p> <p><b>STRATEGIC PLAN GOAL:</b> This modification to the contract for the wellness and safety program for the self-funded health plan relates to the City's Goal of Financially Strong City with Service Excellence.</p>				
<b>SUMMARY OF ITEM</b>				
Council awarded Contract No. 2008-102-C RFP for Wellness and Safety Program to Columbia Medical Center of Plano Subsidiary, L.P. dba Medical Center of Plano in the amount not to exceed \$170,000 on 07/28/08 for an initial term of two (2) years with three (3) City optional one (1) year renewals. The First Modification executed on 11/13/08 reduced the contract amount to \$165,225. This modification will reflect a decrease from \$165,225 to \$162,800.				
List of Supporting Documents:			Other Departments, Boards, Commissions or Agencies	
Second Modification of Contract No. 2008-102-C				

THE STATE OF TEXAS	§	<u>Second Modification of Contract</u>
	§	By and Between City of Plano and
	§	Columbia Medical Center of Plano
	§	Subsidiary, L.P. d/b/a Medical Center
COUNTY OF COLLIN	§	of Plano

THIS SECOND MODIFICATION OF PROFESSIONAL SERVICES AGREEMENT (hereinafter "Second Modification") is made and entered into on this the \_\_\_\_\_ day of \_\_\_\_\_, 2010, by and between **COLUMBIA MEDICAL CENTER OF PLANO SUBSIDIARY, L.P., d/b/a MEDICAL CENTER OF PLANO**, a limited partnership (hereinafter "Professional") and the **CITY OF PLANO, TEXAS**, a home rule municipal corporation (hereinafter "CITY"), acting by and through its City Manager or his designee.

**WITNESSETH:**

**WHEREAS**, City and Professional entered into an Agreement on October 9, 2008 (hereinafter "Agreement") for a Wellness and Safety program (hereinafter "Services"); and

**WHEREAS**, City and Professional executed the First Modification on November 13, 2008; and.

**WHEREAS**, City and Professional desire to amend such Agreement and First Modification in certain respects as set forth herein in this Second Modification.

**NOW THEREFORE**, the Agreement is incorporated herein as if written word for word. Except as provided below, all other terms and conditions of the Agreement and First Modification shall remain unchanged and shall remain in full force and effect. In the event of any conflict or inconsistency between the provisions set forth in this Second Modification, First Modification and the Agreement, priority of interpretation shall be in the following order: Second Modification, First Modification, and Agreement. In consideration of the foregoing, and for other good and valuable consideration, the parties hereto agree as follows:

**I.**

Beginning on the effective date of this Modification and continuing through the remaining term of the Agreement, Page 3 of 6 of **Exhibit "B-1"**, First Modification executed on November 13, 2008, is replaced with a new page 3 of 6 of **Exhibit "B-1"** which is attached hereto and incorporated herein by reference modifying the fee schedule.

II.

Beginning on the effective date of this Modification and continuing through the remaining term of the Agreement, Page 5 of 6 of **Exhibit "B-1"**, First Modification executed on November 13, 2008, is replaced with a new page 5 of 6 of **Exhibit "B-1"** which is attached hereto and incorporated herein by reference modifying the Scope of Services.

**IN WITNESS WHEREOF**, the parties enter into this Second Modification on the date first written above.

**COLUMBIA MEDICAL CENTER OF  
PLANO SUBSIDIARY, L.P. d/b/a  
MEDICAL CENTER OF PLANO**

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

BY: \_\_\_\_\_  
Troy A. Villarreal, FACHE  
President and Chief Executive  
Officer  
3901 West 15<sup>th</sup> Street  
Plano, Texas 75075

**CITY OF PLANO, TEXAS**

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

By: \_\_\_\_\_  
Thomas H. Muehlenbeck  
CITY MANAGER  
1520 Avenue K  
P. O. Box 860358  
Plano, TX 75086-0358

APPROVED AS TO FORM:

\_\_\_\_\_  
Diane C. Wetherbee, CITY ATTORNEY

**ACKNOWLEDGMENTS**

**STATE OF TEXAS           §**  
**§**  
**COUNTY OF COLLIN       §**

This instrument was acknowledged before me on the \_\_\_\_ day of \_\_\_\_\_, 2010 by **TROY A. VILLARREAL**, FACHE, President and Chief Executive Officer of **COLUMBIA MEDICAL CENTER OF PLANO SUBSIDIARY, L.P, d/b/a MEDICAL CENTER OF PLANO**, a limited partnership, on behalf of said limited partnership.

\_\_\_\_\_  
Notary Public, State of Texas

**STATE OF TEXAS           §**  
**§**  
**COUNTY OF COLLIN       §**

This instrument was acknowledged before me on the \_\_\_\_\_ day of \_\_\_\_\_, 2010 by **THOMAS H. MUEHLENBECK**, City Manager of the **CITY OF PLANO, TEXAS**, a home-rule municipal corporation, on behalf of said corporation.

\_\_\_\_\_  
Notary Public, State of Texas

**EXHIBIT B**  
**WELLNESS AND SAFETY PROGRAM COST PROPOSAL WORKSHEET**  
**PROPOSAL SCHEDULE FOR Medical Center of Plano**

All Services to be included in the base bid shall be totaled under the base bid column. All other services shall be totaled under the Additional Services Column.

**A. Health Assessment** (See Note 2)

Item No.	Estimated Quantity	Unit	Description	Unit Price	Base Bid	Additional Services
1	1600	Person	Health Questionnaire	10.00	16,000.00	
2	1600	Person	Resting Blood Pressure	7.00	11,200.00	
3	1600	Person	Blood Chemistry (See Note 3)	45.00	72,000.00	
4	1600	Person	Percent Body Fat	7.00	11,200.00	
5	1600	Person	Height & Weight	5.00	8,000.00	
6	200	Person	PSA	22.00	4,400.00	

**B.**

7	1600	Person	Individual Summary of Health Assessment with Recommendations	10.00	16,000.00	
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**C. Immunizations/Injections**

16	1200	Shot	Flu Shots	20.00	24,000.00	
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Total Base Bid (See Note 1)

\$162,800.00

Total Additional Services

\_\_\_\_\_

## ADDITIONAL NOTES

**NOTE 1:** Price increase of 3% per year, starting in year two (2) of the contract.

**NOTE 2:** Included in the cost of the Health Assessment are the following services:

- Scheduling of all screenings at various City sites.
- Copy costs of all related paperwork: Health History Form, Release, Schedule, Testing Instructions, Rationale for Program, Letter from Senior Management.
- Delivering of above listed paperwork to eligible employees prior to testing to minimize time away from the job.
- Marketing materials.
- Individual Reports include the following:
  - Personal Wellness Profile
  - Physician Summary Report
  - Two Copies of Blood Chemistry Analysis
  - Review of Biometric Data: HR, BP, WT, Body Fat %
  - Personal Health Improvement Recommendations by Registered Nurse
  - Progress/Trend Report (in year 2+)
- All tobacco users receive additional materials to assist with smoking cessation
- All City Employees have access via email to our health professional staff for questions, referrals, etc. ([mcp.cle@hcahealthcare.com](mailto:mcp.cle@hcahealthcare.com))
- 52 Weekly Health Information Bytes distributed electronically via HR.
- Attend bi-monthly Wellness Committee Meetings

The Center for Lifestyle Enhancement at Medical Center of Plano doesn't just supply the City of Plano wellness services, we supply comprehensive health management. We do this by maintaining charts in our office on all City employees and compare their results over time; make referrals to their personal physician if applicable and follow-up on critical values. An individual's health information is reviewed by a health professional who then makes personal recommendations and checks medication efficacy.

We also act as a resource for departments in establishing protocols to minimize health risks (ie. Blood Born Pathogen Exposure Protocol for Fire and Police) and provide presentations on a myriad of health topics. We encourage employees to utilize in-network providers as well as wellness benefits provided through your insurance carrier.

To increase participation and minimize time away from the job, last year we visited 22 different sites on 41 different days at 50 different times. And lastly, we are a Plano-based business.

**NOTE 3:** Included in the Blood Chemistry is SMAC19, Lipid Profile, CBC and TSH