



City Clerk Document No. _____

City Council Meeting Date: October 27, 2022

**AMENDMENT TO CITY OF CHANDLER AGREEMENT
LONG-TERM DISABILITY INSURANCE FOR PUBLIC SAFETY PERSONNEL
CITY OF CHANDLER AGREEMENT NO. 4046**

THIS CALENDAR YEAR 2023 AMENDMENT (CY 2023 Amendment) to Agreement No. 4046 for Long-Term Disability Insurance for Public Safety Personnel, dated January 1, 2004 (the Agreement), is made and entered by and between the City of Chandler, an Arizona municipal corporation (City), and Anthem Life Insurance Company (Contractor), (City and Contractor may individually be referred to as Party and collectively referred to as Parties) and made _____, 2022 (Effective Date).

RECITALS

WHEREAS, the Parties first entered the Agreement to provide Long-Term Disability Insurance for Public Safety Personnel effective January 1, 2004; and

WHEREAS, the Agreement has been amended to extend the term of the Agreement and modify rates through December 31, 2022, subject to the terms and conditions of the original Agreement, as amended; and

WHEREAS, the Contractor offered guaranteed rates through December 31, 2024; and

WHEREAS, the Parties wish to extend the Agreement subject to the same terms and conditions for an additional year.

AGREEMENT

NOW THEREFORE, the Parties agree as follows:

1. The recitals are accurate and are incorporated and made a part of the Agreement by this reference.

2. The term of the Agreement is extended for one year from January 1, 2023, through December 31, 2023.
3. The City Manager, or designee, may extend the term of the Agreement for an additional one-year term of January 1, 2024, through December 31, 2024 (CY 2024), subject to the same terms and conditions.
4. All other terms and conditions of the Agreement remain unchanged and in full force and effect. If a conflict or ambiguity arises between this CY 2023 Amendment and the Agreement, the terms and conditions in this CY 2023 Amendment prevail and control.

IN WITNESS WHEREOF, the Parties have entered into this Amendment on the Effective Date.

FOR THE CITY

By: _____

Its: Mayor

FOR THE CONTRACTOR

By: Annika Jackson

Its: Specialty Retention Consultant, Anthem Blue Cross

APPROVED AS TO FORM:

By: _____

City Attorney *PK*

ATTEST:

By: _____

City Clerk