

SUNRISE, FLORIDA

RESOLUTION NO. _____

A RESOLUTION OF THE CITY OF SUNRISE, FLORIDA, APPROVING A WORKERS' COMPENSATION SETTLEMENT RELATED TO CLAIMANT FOR CLAIM NUMBER 1290281; AUTHORIZING THE CITY'S WORKERS' COMPENSATION COUNSEL AND RISK MANAGER, OR DESIGNEE, TO FINALIZE AND EXECUTE NECESSARY DOCUMENTS; PROVIDING FUNDING; AND PROVIDING AN EFFECTIVE DATE.

NOW THEREFORE, BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF SUNRISE, FLORIDA:

Section 1. A workers' compensation settlement in the amount of three hundred fifty thousand dollars (\$350,000.00) to be paid to claimant to settle all liabilities and verified claims including all claims for past and future medical expenses, lost wages, attorney's fees, and lien and release costs related to Claim Number 1290281, is hereby approved.

Section 2. The City waives HMO SPD Section 11.47 and POS SPD Section 11.46, Workers' Compensation Benefits, in Article XI, Exclusions from Basic Benefits, of the City of Sunrise Group Medical Plan, as it relates to past or future Medical Services that are the subject of or related to the workers' compensation settlement for Claim No. 1290281. This waiver shall not apply if the City transitions from a self-funded plan to a fully insured commercial plan or an intergovernmental insurance or risk-sharing trust and does not create coverage for services otherwise excluded or limited under the Plan.

Section 3. The City's workers' compensation counsel and Risk Manager, or designee, are authorized to finalize and execute all necessary documents for this settlement.

Section 4. Effective Date. This Resolution shall be effective immediately upon its passage.

PASSED AND ADOPTED this _____ DAY of _____, 2026.

Mayor Michael J. Ryan

Authentication:

Felicia M. Bravo
City Clerk

MOTION: _____
SECOND: _____

CLARKE: _____
GUZMAN: _____
KERCH: _____
SCUOTTO: _____
RYAN: _____

Approved by the City Attorney
as to Form and Legal Sufficiency

Thomas P. Moss