## **CHECK LIST FOR ALDERMANIC SUBMISSIONS**

| X Cover Letter  X Resolutions/Orders/Ordinances (NOTE: If you are submitting any item to the State, you must write a Resolution)  X Prior Notification Form  X Fiscal Impact Statement - Should include comprehensive budget  Supporting Documentation (if applicable)  |                                    |
|---|------------------------------------|
| IN ADDITION [IF A GRANT/DONATION]:  Notice of Intent Grant Summary Executive Summary (not longer than 5 pages without an explanation)   |                                    |
| Date Submitted:   | November 6, 2025                   |
| Meeting Submitted For:  | November 17, 2025                  |
| Regular or Suspension Agenda:   | Regular                            |
| Submitted By:   | Patricia King, Corporation Counsel |
| ORDER OF THE NEW HAVEN BOARD OF ALDERS AUTHORIZING THE OFFICE OF THE CORPORATION COUNSEL TO ENTER INTO A MULTI-YEAR PRODUCT AND SERVICE AGREEMENT WITH ISO CLAIMS PARTNERS, INC. TO SUBSCRIBE TO MSP NAVIGATOR AND RELATED SERVICES, A SYSTEM FOR REPORTING BODILY INJURY CLAIM DATA OF MEDICATE ELIGIBLE CLAIMANTS TO THE CENTERS FOR MEDICARE & MEDICAID SERVICES (CMS) FOR THE PURPOSE OF FACILITATING CUSTOMER COMPLIANCE WITH SECTION 111 OF MEDICARE, MEDICAID AND SCHIP EXTENSION ACT OF 2007, P.L. 110-173 ("SECTION 111"). |                                    |
| Comments: Legistar File ID: LM-2025-0606  |                                    |
| Coordinator's Signature:  Controller's Signature (if grant):  Mayor's Office Signature:   |                                    |
|   |                                    |

Call (203) 927-0802 or email aguzhnay@newhavenct.gov with any questions.

\*\*PLEASE NOTE CLEARLY IF UC (UNANIMOUS CONSENT) IS REQUESTED\*\*

\*\*\* SUSPENSION AGENDA ITEMS MUST BE DISCUSSED WITH PRESIDENT OF BOA\*\*\*