

Wessely, Michael

From: Butcher, Tim <tbutcher@corahealth.com>
Sent: Wednesday, May 22, 2024 1:15 PM
To: Wessely, Michael
Subject: EXTERNAL: Fwd: Completed: Complete with DocuSign: CORA PT City of Kingsport LOA 2023.pdf
Attachments: CORA PT City of Kingsport LOA 2023.pdf

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Please let know if you need anything else.

Tim Butcher, PT,CSCS

Regional Director
Kentucky and Tennessee

p: 865-300-0512

f: 865-377-3187

a: 7228 Norris Freeway
Knoxville, TN 37918

e: tbutcher@corahealth.com

From: Sigurdsson, Jaime <jsigurdsson@corahealth.com>
Sent: Tuesday, May 21, 2024 11:02:18 AM
To: Butcher, Tim <tbutcher@corahealth.com>
Subject: Fw: Completed: Complete with DocuSign: CORA PT City of Kingsport LOA 2023.pdf

Tim this does not have an end date so it's still valid if they want to continue to use it!



Jaime Sigurdsson, CEAS

VP and Executive Director
Work Comp Services

e: jsigurdsson@corahealth.com

c: 386-847-1052

For scheduling/referrals including: FCE's, Work Programs, POET's, Ergo Assessments, Job Site Analysis, Impairment Ratings or any other tests requested, email: FCE@CORAHealth.com

For administrative, billing, utilization or treatment questions, email: WorkTRACKS@CORAHealth.com

From: Othon, Javier <jothon@corahealth.com>
Sent: Tuesday, May 21, 2024 11:00 AM
To: Sigurdsson, Jaime <jsigurdsson@corahealth.com>
Subject: Fwd: Completed: Complete with DocuSign: CORA PT City of Kingsport LOA 2023.pdf

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From: DocuSign NA4 System <dse_NA4@docusign.net> on behalf of Brent Morelock via DocuSign <dse_NA4@docusign.net>
Sent: Tuesday, May 21, 2024 9:09:54 AM
To: Othon, Javier <jothon@corahealth.com>
Subject: Completed: Complete with DocuSign: CORA PT City of Kingsport LOA 2023.pdf

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Brent Morelock
brentmorelock@kingsporttn.gov

All parties have completed Complete with DocuSign: CORA PT City of Kingsport LOA 2023.pdf.

Please sign the following agreement for the Employee Physical Wellness Program as approved via Action Form 178-2023 on 06/20/23. Funding is identified in account # 61516014132061. Thank you.



June 15, 2023

Chris McCartt
City Manager
City of Kingsport
415 Broad Street
Kingsport, TN 37660
(423) 229-9400

Re: Letter of Agreement for Physical Wellness/Strengthening Program

I am pleased to present this Letter of Understanding to the City of Kingsport ("City of Kingsport") and initiating a relationship between our entities. Champion Physical Therapy, LLC ("CORR") would like to outline the services City of Kingsport may expect to receive in exchange for providing the services hereunder:

CORR Responsibilities:

- CORR shall provide a physical wellness and strengthening program for City of Kingsport employees, as requested by City of Kingsport.
- CORR shall provide these services during normal business hours at the CORR Physical Therapy Kingsport location (1825 N. Eastman Rd., Suite A Kingsport, TN 37664)
- CORR will require scheduled appointments for initial assessments as well as follow up appointments to be scheduled directly at the facility either in person or via phone (423) 390-8948
- CORR shall provide qualified Physical Therapists (PT), Physical Therapy Assistants (PTA), and or Athletic Trainers (ATC) educated in the field of rehabilitation and licensed by their respective licensing boards, who maintain an unlimited license to practice.
- CORR shall provide access to MedBridge (the mobile platform that maintains their exercise program and progression) to employees during the initial assessment.
- CORR shall bill City of Kingsport \$46/assessment and/or training session.
- CORR shall submit monthly invoices via email (michaelwessely@kingsporttn.gov) to the City of Kingsport Attn: Michael Wesley to include itemized documentation of the date of service, employee name, and employee job title.
- CORR shall not refuse to provide services to any employee on the grounds of race, color, sex, age, disability or national origin.
- CORR will maintain public liability and medical malpractice insurance in the minimum amount of One Million Dollars (\$1,000,000.00) for each occurrence and Five Million Dollars (\$5,000,000.00) in the aggregate.
- CORR shall indemnify and hold City of Kingsport harmless from claims or causes of action from clients or third parties resulting from acts or omissions of CORR in performing all services hereunder.
- CORR shall acknowledge and maintain its obligations to comply with the provisions of the Health Insurance Portability and Accountability Act ("HIPAA").

City of Kingsport Responsibilities:

- City of Kingsport will reimburse CORA \$46/assessment and/or training session.
- City of Kingsport will pay CORA within 30 days of receipt of invoice from CORA

BINDING AGREEMENT


CORA and City of Kingsport agree that this Letter of Understanding is intended to create a binding obligation of the parties once signed by both parties.

If the foregoing accurately reflects your understanding, please date, sign and return the enclosed copy of this Letter of Understanding. In the event you do not accept this Letter of Understanding by July 15, 2023 the promise hereof will be null and void. We look forward to establishing this relationship with you.

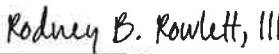
CHAMPION PHYSICAL THERAPY, LLC

By: 
43B4E2655CF24C0...
Title: President - COO

CITY OF KINGSFORT

By: 
72D36825DF7443D...
Title: Mayor

Accepted this 6/23/2023 day of _____, 2023

APPROVED AS TO FORM: 
9890E2AE88DA483...

ATTEST: 
AD9E467A1BDB489...
DS