Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Current Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)	Requested Action
Behavioral Health Services	Health Right 360- Street Crisis Response Team	\$0.00	\$ 8,009,837	\$ 8,009,837		11/1/20-06/30/23	\$0.00	\$ 2,383,880	\$ 2,383,880	0.00%	New Contract
implmentation of city-wide Sturequiring a behavioral health a	eet Crisis Response Teams, operati and/or medical response with staffin cifically trained in de-escatiation an	t with Health Right 360 for a Total Co ng 24 x 7 to intervene with people or ng trained to deliver therapeutic de-e d mental health management, a para	n the street experiencing a scalation and medically ap	substance abuse or men propriate responses to p	tal health crisis. The strat eople in crisis, and to prov	tegy represents a shift av ride appropriate linkages	vay from dispatching and follow-up care.	law enforcement to The Street Crisis Res	certain types of 91 ponse Team is an i	1 calls with an intenterdisciplinary te	ent to respond to calls am composed of a
Target Population:	The Health Right360, as a clinical member of the Street Response Team, will respond to 911/311 calls involving behavioral health and substance abuse crises in public settings including suicide threats, intoxication, psychosis and problems associated with homelessness. The contract focuses on the homeless experiencing crisis.										
Service Description:	contract rocuses on the nomeless experiencing crisis. The contractor will provide the behavioral health clinician team-member to provide mental health crisis identification, management, de-escalation, assessment for risk of suicide and referral to higher levels of care. The contract will also provide medical treatment (wound care) to the homeless who lack consistent access to heath care. The goal of the contract is to match professional expertise to need.										
UOS (annual):	Cost Reimbursement: First Year 1 Team on 12-Hour Shifts 7 Days Per Week, 24 Hours Per Day; 2 Teams in January 2021; 6 Teams in March 2021										
UDC (annual)	N/A										
Funding Source(s):	General Funding										
Selection Type	RFP-35-2020 Street Crisis Respons										
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC)										
HIV Health Services	Regents University of California San Francisco - Alliance Health Project	\$1,964,891	\$3,001,118	\$1,036,227	2/01/2017-6/30/2021	2/01/2017-6/30/2022	\$712,533	\$590,269	\$ (122,264)	-20.71%	Amendment #2
current-year funding is now \$3 and will reallocate a Board of 5 the continual support of the Ir Reason for Funding Change:	712,533, an increase over the baseli Supervisors addback funding in the Itensive Case Management modalit The Department is requesting appro	This is the first time that this contract ne funding level of \$400,955. As note amount of \$189,314 to this contract it y as well as the HIV Long Term Survivious of a Total Contract Amount with General Fund Addback FY21/22 in the	ed, this amendment will end in support of the HIV Long ors program. The proposed Contingency of \$3,001,118	xtend the term for one your Term Survivors target pood amendment exercises to the state of \$1,03.	ear to add and add FY 202 opulation. This contract po he options authorized und 6,227 due to the following	1/22 funding at the base rovides Getting to Zero II der RFP 24-2016. g changes: 1) General Fur	annual amount of \$4 ntensive Case Manag	400,955 (for the Gett ement services to Pe 20/21 in the amount	ing to Zero (GTZ) Ir ople living with HI\ of \$311,578; 2) Ar	tensive Case Man with the addition	agement program), al funding to enhance
Target Population:	Getting to Zero Intensive Case Management Services: The priority population for these services are HIV + clients with multiple complex needs, including suffering from mental health disorders (dually diagnosed) or concurrent co-occurring mental health and substance use disorder (triply diagnosed), and for whom short-term navigation support is not sufficient to remain engaged in care and maximize quality of life. Crisis, Psychiatry, Mental Health, Substance Use and Long-Term Survivor Services: The primary population for these services is people living with HIV/AIDS who have symptoms, other health problems, or functional impairments resulting from mental health or substance use disorders. The majority of clients are from the following at-risk populations: men who have sex with men (MSM), the homeless or marginally housed, transgenders, people of color; those newly diagnosed, undocumented, bi/monolingual, substance users including IVDU, those new to SF, those recently released from prison or with criminal justice histories, Long-Term Survivors of HIV/AIDS.										
Service Description:	The goal of the Getting to Zero, ICM Program is to help clients stay in care, achieve, or maintain viral suppression, and to effectively connect clients to the breadth of wraparound services necessary for stability and maximized quality of life. An additional goal is to provide outpatient mental health services to people living with HIV - including Long-Term Survivors - to reduce symptoms and functional impairments resulting from mental health and/or substance use disorders										
UOS (annual):	FY20/21 General Fund Carry Forward UOS Cost: Crisis Intervention Hours: \$55,328/220 UOS = 251.49 Substance Use Counseling/Case Management Hours:\$26,837/158 UOS = \$169.85 Psychiatry Encounters: \$67,622/199 UOS = \$339.80										
UDC (annual)	224	B									
Funding Source(s):	Icity and County General Fund and	Ryan White Part A (FY2017/18 only)									

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DPH Contracts Report - March, 2021

Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Current Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)	Requested Action
Selection Type	RFP 24-2016 Getting to Zero: Community-Based Intensive Case Management Services for HIV-positive Clients with Complex Needs										
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC)										

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Div.	Contractor		Proposed Total Contract	•	Current Contract Term	Proposed Contract		Proposed Annual	Annual	Annual	Requested Action
		Exceed (NTE) Amount with	NTE Amount with	Contract Amount		Term	Amount without	Amount without	Difference	Difference (%)	
		Contingency	Contingency				Contingency	Contingency			
DPH-PHD	PHFE dba Heluna Health	\$ 9,000,000	\$ 5,600,000	(\$3,400,000)	3/01/20-2/28/22	3/01/21-2/28/22	\$ 9,000,000	\$ 5,000,000	\$ (4,000,000)	-44.44%	21.15 Emergency
											Contract

Purpose: The requested action is the approval of a new 21.15 Emergency Contract with PHFE dba Heluna Health to continue the support of the COVID Command Center Emergency Response services. While this is a new contract, the funding amounts for the contract that this is replacing are presented only for reference. While the City's new Emergency Declaration No. 34 does now allow for an existing emergency contract to be extended, the Department is proposing to replace the original contract to reflect multiple changes to the scope to represent changing needs. PHFE dba Heluna Health currently supports the hiring process and employment of multiple DSW emergency response team members, hired directly in response to the Central COVID Command Center's identified staffing gaps. These individuals are working at all critical emergency response sites. These sites include the COVID Field Care clinics, laboratory testing, and the COVID Command Center logistics and response. In hiring these employees, PHFE dba Heluna Health also ensures that all liability and other insurance requirements have been met, as well as the proper credentialing, and benefits as applicable. The term of this agreement will be from 3/01/2021 - 2/28/2022 (1 year) as allowable under the City's Emergency Declaration. The current emergency contract will term out on February 28, 2021 per the one year term requirement. Funding to support this agreement is \$5,000,000 with a 12% contingency in the amount of \$600,000 for a total Not To Exceed amount of \$5,600,000.

Reason for Funding Change: The Department is requesting approval of a Total Contract Amount with Contingency in the amount of \$5,600,000. The decrease between the current and proposed contracts is due to a reduction in staffing and consultant support services that will not carry forward in this

new contract/term.	
Target Population:	Residents of the City and County of San Francisco.
Service Description:	In collaboration with the San Francisco Central COVID Command Center, PHFE Heluna Health will provide Program Administration services through the hiring and processing critical staff and consultants for employment of multiple DSW emergency response team members, hired directly in response to the Central COVID Command Center's identified staffing gaps. These individuals are working at all critical emergency response sites. These sites include the COVID Field Care clinics, laboratory testing, and the COVID Command Center logistics and response. In hiring these employees, PHFE dba Heluna Health also ensures that all liability and other insurance requirements have been met, as well as the proper credentialing, and benefits as applicable.
UOS (annual)	COVID Response Month: \$5,000,000 / 12 UOS month = \$416,666.66
UDC (annual)	NA NA
Funding Source(s):	General Fund / FEMA
Selection Type	21.15 Local Emergency Response
Monitoring	Monitoring is ongoing, based on the needs of COVID response.

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