

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	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)	Requested Action
Population Health Division	PHFE dba Heluna Health	\$5,509,200	\$5,528,769	\$19,569	1/1/21 - 7/31/23	1/1/21 - 6/30/24	\$3,080,000	\$3,639,534	\$ 559,534	15.37%	Amendment
<p>Purpose: The requested action is the approval of a contract amendment with Heluna Health to increase the Total Contract Amount with Contingency to an amount of \$5,528,769 and to extend the current contract term from 1/1/2021 to 7/31/2023 (2 years and 7 months) to 1/1/2021 through 6/30/2024 (3 years and 6 months). The Health Commission previously approved this contract on September 7, 2021. Heluna Health provides program administration and support services for the SFDPH - Population Health Division COVID Response, to support a broad range of COVID 19 testing and surveillance related activities. Of the proposed annual funding in the amount of \$3,639,534, Heluna Health will receive a 12.1% administrative fee of \$392,848, with the remaining balance of \$3,246,686 going towards programmatic costs. The proposed amendment exercises the options authorized under the Administrative Chapter 21.42 authority. Funding will continue to provide support under Program Administration modality.</p> <p>Reason for Funding Change: The Department is requesting the approval of a Total Contract Amount of \$5,528,769, or an increase of \$19,569 due to the following changes: (1) a reduction of unspent funds in the amount of \$42,231 of CDPH ELC (Epidemiology and Laboratory Capacity) Enhancing Detection State Funds for CY 2021; (2) a reduction of unspent funds in the amount of \$306,104 of CDPH ELC Enhancing Detection Expansion State Funds for FY 2021-22; (3) a reduction of unspent funds in the amount of \$391,199 of CDPH ELC Enhancing Detection State Funds for FY 2022 (11 months for term of 1/1/2022 - 11/17/2022); (4) a reduction of unspent funds in the amount \$90,000 of General Fund for FY 2022-23 (6 months for the term of 7/1/2022 - 12/31/2022); (5) a carry-forward amount of \$433,430 of the unspent funds of CDPH ELC Enhancing Detection State Funds from FY2021 and FY2022 (\$42,231 and \$391,199) for the term of 11/18/2022 - 6/30/2024; (6) a carry-forward amount of \$306,104 of unspent CDPH ELC Enhancing Detection Expansion State Funds from CY2022 for the term of 7/1/2023 - 6/30/2024; and (7) an increase in the amount of \$90,000 to the 12% Contingency value applied for FY22/23 thru FY23/24. The current Contingency amount is \$507,547. The previous Contingency amount was \$417,547.</p> <p>Please Note: The annual funding level includes the following amounts and terms: (1) \$2,900,000 of CDPH ELC Enhancing Detection Expansion State Funds for the term of 7/1/2022 - 6/30/2024, 2 years; (2) \$433,430 of carry-forward CDPH ELC Enhancing Detection State Funds for the term of 11/18/2022 - 06/30/2024, 1 year 7 months; and (3) \$306,104 of unspent CDPH ELC Enhancing Detection Expansion State Funds for the term of 7/1/2023 - 6/30/2024, 1 year. The annual funding level increased by \$559,534 due to the following changes: (1) a decrease in FY21/22 General Fund funding in the amount of \$180,000; (2) a carry-forward amount of \$433,430; and (3) a carry-forward amount of \$306,104. The carry-forward amounts include unspent CDPH ELC Enhancing Detection Expansion State Funds due to staff vacancies.</p>											
Target Population:	The primary target population for this project are the residents of San Francisco with a focus on those who need COVID testing and epidemiological surveillance.										
Service Description:	<p>In collaboration with the San Francisco Department of Public Health, Population Health Division COVID Response, Heluna Health will provide Fiscal Administration and Program Management services in support of a broad range of COVID-19/SARS-CoV-2 testing and epidemiologic surveillance related activities, including the establishment of modernized public health surveillance systems as well as Resource Management to support these services. These services will continue to support and further the surveillance of the Public Health response to COVID19 by continuing to enhance laboratory work, strengthen testing, improve reporting, and partnership coordination and engagement with other testing facilities.</p> <p>Fiscal Administration/Program Management for this program consists of developing and monitoring the budget; managing employee payroll and benefits; managing programmatic expenditures such as invoice payments and travel reimbursements according to the budget plan; executing contractual agreements and maintaining all program documentation as related to this contract. Resource Management will include recruiting, hiring, and orienting new staff; managing employee benefits; monitoring employee training, skill development, and performance evaluations on regular basis, and implementing employee discipline when necessary.</p>										
UOS (annual)	COVID Response ELC Enhancing Detection Program Month: \$2,586,976/ 24 UOS month = \$107,790.66 COVID Response ELC Enhancing Detection Month: \$386,646/19.5 UOS months = \$19,828 COVID Response ELC Enhancing Detection Month: \$273,064/ 12 UOS month = \$22,755.33					Program Administrative Months: \$313,024 / 24 UOS Months = \$13,042.67 Program Administrative Months: \$46,784 / 19.5 UOS Months = \$2,399.18 Program Administrative Months: \$33,040 / 12 UOS Months = \$2,753.33					
UDC (annual)	N/A										
Funding Source(s):	CDPH State Fund and General Fund										
Selection Type	Administrative Sole Source 21.42										
Monitoring	The contract services will be monitored the SFDPH Program Administrator responsible for the accomplishment of the project.										

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HHS	Maitri AIDS Hospice	\$9,536,341	\$14,130,444	\$4,594,103	07/01/17 - 03/31/24	07/01/17 - 03/31/27	\$ 1,381,315	\$ 1,381,315	\$ -	0.00%	Amendment
<p>Purpose: The requested action is the approval of a contract amendment with Maitri AIDS Hospice to reflect a Total Contract Amount with Contingency of \$14,130,444. The term of this contract will be amended to reflect 07/01/2017 - 03/31/2027, 9 years and 9 months. This contract provides hospice services for people living with HIV/AIDS and in need of 24-hour residential care facility for chronically impaired residents of San Francisco. The Health Commission previously approved the current contract amount and term on August 4, 2020. The proposed amendment exercises the options authorized under RFP 25-2017. Additional funding will continue to provide support under the Hospice Services modality. This proposed amendment is subject to approval by the S.F. Board of Supervisors.</p> <p>Reason for Funding Change: The Department is requesting the approval of a Total Contract Amount with Contingency of \$14,130,444, or an increase of \$4,594,103 due to the following changes: (1) A reduction of total unspent funds from SAM - State Office of AIDS (Ryan White Part B) and General Fund in the amount of \$65,545 from FY17/18, FY18/19, and FY19/20; (2) an increase in Ryan White Part A Funding of \$1,887,786 for FY24/25 thru FY26/27, or \$629,262 annually; (3) increase to SAM - State Office of AIDS (Ryan White Part B) funding in the amount of \$2,256,159 for FY24/25 thru FY26/27, or \$752,053 annually; and (4) an additional amount of \$515,703 added to the 12% Contingency value applied from FY23/24 thru FY26/27. Previous Contingency Amount was \$147,328 and the Current Contingency Amount is \$663,031.</p> <p>Please Note: The Annual Funding level remains the same.</p>											
Target Population:	The target population is San Francisco residents who are living with HIV/AIDS and in need of end-of-life/hospice or 24-hour skilled nursing care. Priority for client enrollment is reserved for San Francisco residents who have low-income and are uninsured. Secondary enrollment is reserved for San Francisco residents who have low-income and are underinsured.										
Service Description:	Maitri AIDS Hospice is a licensed 15-bed residence that provides safe housing, medical care, and nutrition support services for those with HIV and at end-of-life and those requiring 24-hour skilled care to return to independence. Maitri AIDS Hospice also makes provision for intensive harm reduction support and mental health services for dual and triply diagnosed residents through individual and group counseling with the end goal of increasing the quality of life and continuum of care. Care is provided by both Professional, i.e., Registered Nurses, Licensed Vocational Nurses, and Social Work-Case Managers, and Paraprofessionals, i.e., Certified Nursing Attendants. Professional services provide for patient days that include intensive case management and evaluation, 24-hour Registered Nurse On-Call support or 24-hour Licensed Vocational Nurse care. Paraprofessional services provide for patient days that include 24-hour attendant care with 24-hour On-Call Registered Nurse support. Mental Health services provides for individual psychosocial assessments, development of care plans, client-tailored interventions, case management and group therapy sessions which include support groups focusing on stress management and encouragement of self-care, and coping skills. Individual case management services will provide for crisis, short-term and ongoing therapeutic interventions while group therapy sessions will consist of therapeutic concepts such as trauma and grief, guilt and shame, and the importance of support networks. These services will also include aftercare services for individuals and group therapy sessions for clients who are discharged for up to one year with continued services that include case management, client engagement and linkage to care with the goal to decrease social isolation among those returning to their communities and to promote a decrease in mental health/psychiatric symptoms.										
UOS (annual)	Professional Patient Days: 3,796 x \$214.14 = \$812,856.46 Paraprofessional Patient Days: 3796 x \$125.24 = \$475,392.06 Mental Health Individual Hours: 528 x \$117.77 = \$62,182.56 Mental Health Group Therapy Hours: 240 x \$77.40 = \$18,576.00 Mental Health Aftercare Individual Therapy Hours: 96 x \$100.08 = \$9,607.68 Mental Health Aftercare Group Therapy Hours: 144 x \$32.25 = \$4,644.00										
UDC (annual)	40										
Funding Source(s):	Ryan White Part A and SAM - State Office of AIDS (RWPB)										
Selection Type	RFP 25-2017 HIV/AIDS Hospice Services										
Monitoring	The program received annual monitoring from the DPH Business Office Business Office of Contract Compliance (BOCC) for FY20-21. The program met 100% of its contracted performance objectives, 105% of its contracted units of service target, and 90% of its unduplicated client target. Due to COVID, there was no scoring assigned.										

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PHD/CHPE	Heluna Health	\$ 6,057,413	\$ 6,287,182	\$ 229,769	12/1/19-12/31/26	12/1/19-12/31/26	\$ 973,335	\$ 988,815	\$ 15,480	1.59%	Amendment #3
<p>Purpose: The requested action is the approval of a contract amendment with Heluna Health to increase the Total Contract Amount with Contingency to reflect an amount of \$6,287,182. The Contract term will remain the same. This contract provides program administration and support services to the Disease Prevention & Control Branch (DPC) in support of Strengthening STD Prevention and Control for Health Department (PCHD) and Strengthening Syndemic-Based Sexual Health Care. Of the \$988,815 in annual funding, Heluna Health will receive a 12.1% administrative fee in the amount of \$106,732, with the balance of \$882,083 going towards PCHD programmatic costs. The proposed amendment is authorized under RFQ 36-2017. Additional funding will continue to support the efforts to reduce and educate the San Franciscan target population about STDs and other communicable diseases.</p> <p>Reason for Funding Change: The Department is requesting the approval of a Total Contract Amount with Contingency of \$6,287,182, or an increase of \$229,769 due to the following reasons: (1) an additional amount of \$189,671 from the Ending the HIV Epidemic (EHE) Component C grant award for FY23/24 ; (2) an additional amount of \$15,480 from the Strengthening STD Prevention and Control for Health Departments (PCHD) grant award for one additional month, 1/1/24 - 1/31/24; (3) an increase of \$24,618 added to the 12% Contingency value applied for current and future years. Previous Contingency Amount was \$598,444 and current Contingency Amount is \$623,062.</p>											
Target Population:	<p>Heluna Health will provide program administration and support services for the programs and target population. The Strengthening STD Prevention and Control for Health Departments (PCHD) Project serve all ethnicities and population within San Francisco, with focused expertise on two primary target populations: gay and bisexual men and other men who have sex with men (MSM) and adolescent females, both of whom are at high risk for acquiring or transmitting STDs, as well as other communicable diseases, and HIV. The Strengthening Syndemic-Based Sexual Health Care Project will serve all ethnicities and population within San Francisco, with focused expertise to address the unique needs of Francisco communities that are most impacted by HIV, HCV, and STIs: Black/African Americans; Latinos/Latinas/Latinx; trans women; people who use drugs, including people who inject drugs; and people experiencing homelessness.</p>										
Service Description:	<p>Heluna Health will provide program management, fiscal management, subcontract management, accounts payable, and human resources support services to STD prevention and control programs in DPC. The Strengthening STD Prevention and Control for Health Departments (PCHD) Project seeks (1) to leverage the existing infrastructure of public primary care clinics in SF, which are part of the SFHN, to establish and improve the quality performance measures of STD screening coverage and diagnoses, and (2) expand the provision of technical assistance and public health detailing to improve screening and care at both clinical and community-based sites that serve populations with high STD burden. The Strengthening Syndemic-Based Sexual Health Care Project seeks to enhance and scale up the quality of culturally sensitive, HIV/HCV/STI/Mpox prevention services, including integration of vaccination, diagnosis, and treatment services into routine sexual health care and HIV prevention services.</p> <p>Program Management for the area of service that focuses on the Strengthening of STD Prevention and Control for Health Departments (PCHD) Project and Strengthening Syndemic-Based Sexual Health Care Project. The SFDPH provides objectives, direction, and input regarding the work to be provided under this contract agreement, Heluna Health shall determine how such objectives, direction, and input are addressed and is solely responsible for how such a result is obtained.</p> <p>Fiscal Management for this program consists of developing and monitoring the budget; managing employee payroll and benefits; managing programmatic expenditures such as invoice payments and travel reimbursements according to budget plan; executing contractual agreements and maintaining all program documentation as related to this contract.</p> <p>Resource management will include recruiting, hiring, and orienting new staff; managing employee benefits; monitoring employee training, skill development, and performance evaluations on regular basis, and implementing employee discipline when necessary.</p>										
UOS (annual):	<p>1) The Strengthening STD Prevention and Control for Health Departments (PCHD) Project: \$988,815 (Federal CDC)/12 months = \$82,401.25 per month (of the total annual funding amount of \$988,815, a total of \$106,732 will be paid for indirect program administration and support services, with the balance of \$882,083 to be used for the program).</p>										
NOC (annual)	<p>N/A</p>										
Funding Source(s):	<p>Federal CDC-PCHD Grant, State Grant</p>										
Selection Type	<p>RFQ 36-2017 Department of Public Health As Needed Project Based Support Services</p>										
Monitoring	<p>The contracted services will be monitored by the DPH Program Administrator overseeing these services.</p>										

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HHS	Mission Neighborhood Health Center	\$4,675,458	\$11,300,310	\$6,624,852	3/1/20 - 2/29/24	3/1/20 - 2/28/30	\$1,103,760	\$1,103,760	\$ -	0.00%	Amendment #1
<p>Purpose: The requested action is the approval of a contract amendment with Mission Neighborhood Health Center to increase the Total Contract Amount with Contingency to an amount of \$11,300,310 and to extend the current contract term from 3/1/2020 to 2/29/2024 (4 years) to 3/1/2020 through 2/28/2030 (10 years). The Health Commission previously approved this contract on April 21, 2020. This contract provides Center of Excellence services to clients engaged in primary care while providing the network of social support services to keep the clients engaged in care and improving viral load suppression at Mission Neighborhood Health Center. The proposed amendment exercises the options authorized under RFP 5-2019. Funding will continue to provide support under the Ambulatory/Outpatient Medical Care Treatment Adherence, Medical Case Management, Mental Health, and Substance Use Treatment modality. This proposed amendment is subject to approval by the S.F. Board of Supervisors.</p> <p>Reason for Funding Change: The Department is requesting the approval of a Total Contract Amount with Contingency of \$11,300,310, or an increase of \$6,624,852 due to the following changes: (1) a reduction of unspent funds in the amount of \$125,293 of Ryan White Part A and Ryan White Part A/MAI funding for the term 03/01/2020 - 02/28/2021; (2) a reduction of unspent funds in the amount of \$109,867 of Ryan White Part A and Ryan White Part A/MAI funding for the term of 03/01/2021 - 02/28/2022; (3) a reduction of unspent funds in the amount of \$342,236 of Ryan White Part A and Ryan White Part A/MAI funding for the term of 03/01/2022 - 02/28/2023 (5) additional Ryan White Part A funding in the amount of \$3,793,542, or \$632,257 annually, for FY24/25 thru FY29/30; (6) additional Ryan White Part A/MAI funding in the amount of \$2,829,018, or \$471,503 annually, for FY24/25 thru FY29/30; and (7) an increase in the amount of \$579,688 to the 12% Contingency value applied for FY23/24 thru FY29/30. The current Contingency amount is \$927,158. The previous Contingency amount was \$347,470.</p> <p>Please Note: The annual funding level remains the same.</p>											
Target Population:	The target population for the Mission Neighborhood Health Center - Center of Excellence is San Francisco residents who are HIV-positive Latinos/as, with a focus on immigrants who are monolingual Spanish-speaking or have limited English proficiency and belong to the following high risk sub-groups: gay, bisexual, transgender, injection drug users, other substance users, and their sex partners. The primary target enrollment population is reserved for those that are low income and/or at below poverty level and uninsured and the secondary target enrollment population is reserved for those that are low income and/or at below poverty level and underinsured. Services are provided both at Mission Neighborhood Health Center and Instituto Familiar de la Raza (IFR).										
Service Description:	<p>Outpatient Ambulatory Health Service Encounters: Medical services provided by a health care practitioner who acts as the central provider and coordinator of patient care and includes medical evaluation, immune system monitoring, minor preventive and therapeutic medical services, medical referrals, tests, and follow up.</p> <p>Nursing Treatment Adherence Hours: Education and support provided by an RN or LVN to facilitate medication adherence, including a review of medications prescribed, instructions for use, tips on organizing medications and using Medi-sets, translating prescription labels into Spanish, explaining side effects and drug interactions, and monitoring refills.</p> <p>Medical Case Management Hours: Comprehensive psychosocial assessments, development, implementation, and follow-up of individual client care plans and clinical consultation with other service providers as needed.</p> <p>Individual Treatment Adherence Hours: One-on-one strength-based HIV / Health counselling and education working with the multidisciplinary team to provide culturally appropriate care addressing client barriers to adherence, advocating for realistic and appropriate treatment, and providing HIV/AIDS education and treatment options.</p> <p>Treatment Adherence Group Hours: Groups provide clients with various types of education and support on maintaining medication adherence, such as sharing coping strategies, empowerment taking medications and gaining a sense of community; and client attendance in the Learning Immune Function Enhancement (LIFE) program in Spanish.</p> <p>IFR - Mental Health Outpatient Hours: psychological evaluation and counseling for clients with a diagnosed mental illness including crisis intervention, brief and long-term individual therapy, and family/collateral services to support treatment goals.</p> <p>IFR - Outpatient Substance Abuse Individual Counseling Hours: Assessment and evaluation of substance use history, current use, range of symptoms, strengths, coping methods, previous experience in recovery (if any); short-term counseling and support to reduce substance use-related behavioral risk factors and referrals as needed; includes service coordination such as access to HIV treatment, case management, medication adherence, housing, and food.</p> <p>IFR - Outpatient Substance Abuse Group Counseling Hours: Group psychoeducation provides clients the opportunity to improve their health, abilities, relationships, and functioning. This is attained by providing substance abuse clients with information regarding HIV treatment, harm reduction, treatment adherence, mental health, housing, and access to food.</p>										

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UOS (annual)	Outpatient Ambulatory Health Services Encounters: \$388,380 / 1,195 Encounters = \$325.00 Nursing Treatment Adherence Hours: \$80,515 / 670 Hours = \$120.17 Medical Case Management Hours: \$337,160 / 3,240 Hours = \$104.06 Treatment Adherence Individual Hours: \$61,130 / 515 Hours = \$118.69 Treatment Adherence Group Hours: \$10,755 / 90 Hours = \$119.50					IFR - Mental Health Outpatient Hours: \$124,301 / 1,074 Hours = \$115.74 IFR - Outpatient Substance Abuse Individual Hours: \$91,535 / 1,100 Hours = \$83.21 IFR - Outpatient Substance Abuse Group Counseling Hours: \$9,984 / 81 Hours = \$123.26					
UDC (annual)	325										
Funding Source(s):	Ryan White Part A and Ryan White Part A/Minority AIDS Initiative Funds (M.A.I.)										
Selection Type	RFP 05-2019 Outpatient/Ambulatory HIV Health Services - Centers of Excellence Programs										
Monitoring	The program received annual monitoring from the DPH Business Office Business Office of Contract Compliance (BOCC) for FY21-22. The Overall Program Score was Commendable, with an Acceptable score for the Program Deliverables section of the Monitoring Report and a Commendable Score for the three sections of the report for Program Performance, Program Compliance and Client Satisfaction. The program met 100% of its contracted performance objectives, 58% of its contracted units of service target, and 91% of its unduplicated client target.										

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SFHN/ CYF	Mental Health Management/ Canyon Manor	\$5,530,000	\$9,980,000	\$4,450,000	7/1/2018 - 6/30/2023 (5 yrs)	7/1/2018 - 6/30/2028 (10 yrs)	\$1,000,000	\$1,000,000	\$ -	0.00%	Amendment #1
<p>Purpose: The requested action is the approval of a contract extension with Mental Health Management dba Canyon Manor for the provision of ongoing long term care treatment services in a locked facility, to increase the Total Contract Amount with Contingency from \$5,530,000 to an amount of \$9,980,00, and increase of \$4,450,000 and to extend the current contract term from 7/1/2018 to 6/30/2023 (5 years) to 7/1/2018 through 6/30/2028 (10 years). The Health Commission previously approved this contract on April 1, 2018. This new contract is authorized under RFQ 30-2017, with the new contract effective July 1, 2018. All services are provided in one facility location.</p> <p>Reason for Funding Change: This amendment adds funding for an additional five years, increasing the total contract term from five to ten years. Note, there is no change in annual compensation amount.</p>											
Target Population:	San Francisco residents admitted to the Canyon Manor facility, licensed as a Mental Health Rehabilitation Center (MHRC), will be 18 years and older and meet behavioral and medical criteria. Specifically, individuals admitted to Canyon Manor must have a psychiatric diagnosis with behaviors too severe to live independently or in an unlocked unstructured community program. As the MHRC license allows, individuals may also be admitted who have concomitant medical problems and /or have physical impairments requiring special needs that might include the use of a wheelchair, walker, or cane; or vision and/or hearing loss, or a speech impediment.										
Service Description:	Canyon Manor's service goal is to maximize each individual's functional capacity, fostering self-care and return to the highest level of independent living possible in the community. Canyon Manor a locked mental health rehabilitation center providing a psychiatric rehabilitation program and nursing services for clients who have a psychiatric diagnosis with severe behaviors, chemical dependency, and/or physical/medical problems preventing them from successfully living in the community, eg, unlocked, unstructured community program. The program provides coordinated treatment and medical nursing services seven days per week. All clients are accorded effective, individualized, respectful, and culturally competent clinical services in a consistent and understandable manner.										
UOS (annual)	2,910 (estimated) bed days = \$343.64 per bed day										
Funding Source(s):	State Realignment and County General Fund										
Selection Type	RFQ-30-2017: Locked Licensed Facility, Skilled Nursing Facility and Mental Health Rehabilitation Center										
Monitoring	These services will be monitored in accordance with all applicable Departmental procedures.										

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Primary Care	Regents of the University of California, San Francisco	\$0	\$1,187,200	\$1,187,200	N/A	08/01/2023-06/30/2025	\$0	\$530,000	\$ 530,000	100.00%	New
<p>Purpose: The requested action is the approval of a new contract agreement with the Regents of the University of California, San Francisco (UCSF) - Vouchers for Veggies/ EatSF Program for a Total Contract Amount with Contingency to an amount of \$1,187,200 and for a contract term of 8/1/2023 to 6/30/2025 (1 year and 11 months). While this is a new contract, it is for continued services that were recently approved at the June 6th, 2023 Health Commission for a contract thru Maternal, Child and Health (MCAH). This contract provides food vouchers to reduce disparities in chronic disease outcomes in primary care. The annual amount is \$530,000 that includes an indirect cost of 15% for personnel and operating expenses, totaling \$16,621. Of the remaining amount of \$416,042, \$110,805 will be applied to the 0.90 FTE that is needed to manage the program and \$402,574 will be applied directly to the vouchers, including the service fees for the vouchers. This new agreement exercises Administrative Sole Source 21.5(b). Funding will provide support under the Program Administration modality.</p> <p>Reason for Funding Change: The Department is requesting the approval of a Total Contract Amount with Contingency of \$1,187,200, which includes the following: (1) Primary Care Practice Improvement Program (PIP), Special Revenue funds in the amount of \$530,000 for FY23/24 (11 months); (2) Primary Care Practice Improvement Program (PIP), Special Revenue Funds in the amount of \$530,000 for FY24/25; and (3) an amount of \$127, 200 for the 12% Contingency value applied for FY23/24 and FY24/25.</p> <p>Please Note: The Practice Improvement Program is San Francisco Health Plan's pay-for-performance for Medi-Cal clinics and medical groups to achieve improvements in system and health outcomes.</p>											
Target Population:	The target population for this program includes those patients in primary care who are in continued, chronic, and acute care that are experiencing disparities in food security that help control chronic diseases such as hypertension and diabetes.										
Service Description:	UCSF's EatSF program will have Program Administrative months that includes 0.90 FTE to manage the program. This will involve coordinating with local food retailers and providing technical support, when needed, as well as creating a system for resource distribution, grocery voucher distribution, and distribution of program materials. These staff will provide support to the participants ensuring that quality of services is provided. The annual amount is \$530,000 that includes an indirect cost of 15% for personnel and operating expenses, totaling \$16,621. Of the remaining amount of \$416,042, \$110,805 will be applied to the 0.90 FTE that is needed to manage the program and \$402,574 will be applied directly to the vouchers, including the service fees for the vouchers. Vouchers are \$10 each and include a 10% service fee, for a total of \$11 per voucher. There will be about 442 clients served that will receive up to \$160 per month for a six-month period, or \$960 for each client served (this does not include the service fee of \$1 per voucher).										
UOS (annual)	For YR1: Food Vouchers: \$402,578 / 36,598 vouchers = \$11.00 Program Administrative Months: \$127,422 / 11 months = \$11,583.82 For YR2: Food Vouchers: \$399,841 / 36,349 vouchers = \$11.00 Program Administrative Months: \$130,159 / 12 months = \$10,846.58										
NOC (annual)	442										
Funding Source(s):	Primary Care Practice Improvement Program (PIP), Special Revenue Funds										
Selection Type	Administrative Sole Source 21.5(b)										
Monitoring	The contracted services will be monitored by the DPH Program Administrator overseeing these services.										

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HHS	Regents of the University of California, San Francisco	\$9,997,872	\$26,479,764	\$16,481,892	3/1/2020 - 6/30/2024	3/1/2020 - 2/28/2030	\$2,571,658	\$2,530,408	\$ (41,250)	-1.63%	Amendment #1
<p>Purpose: The requested action is the approval of a contract amendment with the Regents of the University of California, San Francisco (UCSF) - Ward 86 for the HALT COE (Homeless, Aging & Long-Term Survivor's Center of Excellence) to increase the Total Contract Amount with Contingency to an amount of \$26,479,764 and to extend the current contract term from 3/1/2020 to 6/30/2024 (4 years and 4 months) to 3/1/2020 through 2/28/2030 (10 years). The Health Commission previously approved this contract on April 21, 2020. UCSF provides primary medical care services through their COE model at Ward 86 with an integrated delivery system that also provides client supportive services. The proposed amendment exercises the options authorized under RFP 5-2019. Funding will continue to provide support under the Ambulatory/Outpatient Medical Care modality. This proposed amendment is subject to approval by the S.F. Board of Supervisors.</p> <p>Reason for Funding Change: The Department is requesting the approval of a Total Contract Amount with Contingency of \$26,479,764, or an increase of \$16,481,892 due to the following changes: (1) a reduction of unspent funds in the amount of \$22 of Ryan White Part A funding for the term 07/01/2020 - 02/28/2021 and 07/01/2021 - 02/28/2022; (2) additional General Fund Cost of Doing Business (CODB) in the amount \$114,032 for FY23/24; (3) additional Ryan White Part A Cost of Doing Business (CODB) increase in the amount of \$533 for FY23/24 (4) additional General Fund funding in the amount of \$12,573,230, or annually \$2,514,646, for 07/01/2024 - 06/30/2029; (4) additional General Fund funding in the amount of \$1,676,431 for 07/01/2029 - 02/28/2030 (pro-rated for 8 months); (5) additional Ryan White Part A funding in the amount of \$94,572, or \$15,762 annually pro-rated for 8 months each year, for FY24/25 thru FY29/30; and (6) an increase in the amount of \$2,023,116 to the 12% Contingency value applied for FY23/24 thru FY29/30. The current Contingency amount is \$2,024,957. The previous Contingency amount was \$1,841.</p> <p>Please Note: The annual funding level is reduced by \$41,250 due to the following changes: (1) a one-time additional General Fund in the amount of \$155,812 that was included only for FY22/23; (2) a 4.75% General Fund Cost of Doing Business (CODB) increase in the amount of \$114,029 for FY23/24; and (3) a 3.5% Ryan White Part A Cost of Doing Business (CODB) increase in the amount of \$533 for FY23/24.</p>											
Target Population:	The target population for this program includes HIV+ clients who are experiencing homeless or are marginally housed, aging (age 50 years and older) and/or are long-term survivors, who live in San Francisco and are uninsured or underinsured and live at or below 500% of Federal Poverty Level (FPL). This COE has a citywide focus on older adults, long-term survivors and clients with advanced HIV disease requiring complex medical management and/or experiencing unstable housing/homelessness, and with behavioral health (mental health issues and substance use) needs resulting in challenges remaining engaged in traditional primary care settings or any type of health care.										

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Service Description:	<p>The goal of these services is to provide primary care services and the supportive services necessary to keep clients actively engaged in primary medical care, especially for those clients living with a history of substance use of active mental health issues. Clients remain actively engaged in care through a network of services including medical case management, mobile and community-based outreach, client navigation, treatment adherence and medication assistance, outpatient mental health and/or substance use assessment, counseling, and referrals from a constellation of providers with the community that have experience and expertise to provide center of excellence services for clients who may be homeless, marginally housed, aging and/or living with HIV for 10 years or more:</p> <p>Outpatient Ambulatory Health Services (Primary Care Services): comprehensive medical assessment, evaluation, diagnosis, and treatment services rendered by a physician, physician assistant, RN, nurse practitioner or licensed medical provider in an outpatient setting including the following: conducting diagnostic testing, early intervention and risk assessment, preventive care and screening, practitioner examination; providing, continuing care and management of chronic conditions, and referral to and provision of specialty care (includes all medical subspecialties).</p> <p>Medical Case Management: a service that links and coordinates assistance from multiple agencies and caregivers who provide psychosocial, medical, and practical support. The purpose of case management is to assist clients in obtaining the highest level of independence and quality of life consistent with their functional capacity and preferences for care including maintenance in care to attain optimal HIV health outcomes.</p> <p>Outpatient Health Psychiatry (Mental Health Counseling): The provision of psychosocial and psychiatric treatment and counseling services to individuals with a diagnosed mental illness, conducted in a group or individual setting, and provided by a mental health professional, licensed (or under license supervision) or authorized within the State to render such services. Services may be provided by an intern under the supervision of a licensed provider and may be crisis, short-term, or ongoing.</p> <p>Outpatient Substance Abuse Services (Substance Use Counseling), both individual and group: The provision of individual and/or group treatment, case planning, and counseling to address substance use issues (including alcohol, legal and illegal drugs - as they may adversely impact life and health outcomes), as well as service coordination, provided in an outpatient health service setting. Services include outpatient detoxification services as well as outpatient counseling within a methadone treatment setting to address adverse life and health outcomes.</p> <p>Mobile-based Retention and Re-Engagement and Navigation: Providing clinic and mobile, community based practical support to ensure engagement in care and access to a continuum of care services (i.e. accompanying to appointments, appointment reminders, and arranging transportation); assisting clients in developing a service plan under the direction of case managers/care coordinators and/or other service team members providing information and referrals to needed and desired services according to the care plan; assisting clients in identifying service needs on an on-going basis and communicating them as appropriate to the client's multidisciplinary care team on an on-going basis; assisting clients in identifying and overcoming barriers to accessing services (i.e. homelessness or marginally housed, addiction patterns, cognitive disorders, financial constraints, transportation problems, language barriers, mental illness, or resistance to treatment).</p>										
UOS (annual)	<p>Medical Case Management Hours: \$470,897 / 3,588 hours = \$131.24 Outpatient/Ambulatory Health Service Hours: \$1,718,737 / 5,290 hours = \$324.90 Outpatient Substance Abuse Service Hours: \$74,815 / 490 hours = \$152.68 Outpatient Substance Abuse Group Service Hours: \$10,104 / 95 hours = \$106.36 Outpatient Health Psychiatry Hours: \$255,855 / 635 hours = \$402.92</p>										
UDC (annual)	600										
Funding Source(s):	General Fund and Federal Grant Ryan White Part A Funds										
Selection Type	RFP 05-2019 Department of Public Health Center of Excellence										
Monitoring	The program received annual monitoring from the DPH Business Office Business Office of Contract Compliance (BOCC) for FY20-21. The program met 85.7% of its contracted performance objectives, 175% of its contracted units of service target, and 199% of its unduplicated client target. Regular distribution of patient satisfaction surveys was disrupted by the COVID-19 pandemic. Due to COVID, there was no scoring assigned.										

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Behavioral Health Services	Horizons Unlimited of San Francisco	\$0	\$1,891,328	\$1,891,328	n/a	07/01/2023 - 06/30/2025	\$0	\$827,787	\$ 827,787	100.00%	Original Agreement
<p>Purpose: The requested action is for the approval of an original agreement for Horizons Unlimited of San Francisco's Prevention Education program, to continue services that were previously provided in Contract ID #1000010302. The Total Contract Amount with Contingency is \$1,891,328 and reflect a term of 07/01/2023 - 06/30/2025 (2 years). These services were previously approved by the Health Commission on 12/04/2018 and 05/02/2023. The contract will continue the Prevention Education program that will provide substance use disorder prevention activities to elementary, middle school and high school aged students and their families who reside in the Mission District and throughout the City and County of San Francisco. This agreement is authorized under a 21.8G grant waiver.</p> <p>Reason for Funding Change: The Department is requesting the approval of a Total Contract Amount with Contingency of \$1,891,328. (1) The annual funding for FY 23-24 is \$827,787. (2) Funding for FY 24-25 includes a CODB increase and is \$860,898. (3) 12% Contingency was added to current and future years and is \$202,642. The total requested amount for this two-year contract is \$1,891,328. For comparative purposes the annual amount for Prevention Education services in this contract (\$827,787) is the same annual amount as for these services from FY-22-23 in the previous Horizon's contract (#1000010302). The other services in the former Horizon's contract will continue to be funded through that contract under RFP 26-2016.</p>											
Target Population:	There are three primary target populations for universal substance use disorder prevention activities: elementary and middle school age students and their parents/caregivers [Strengthening Families Program (SFP)] and [Botvin LifeSkills (elementary/middle school age youth only); and 2) high school age youth [Communities Mobilizing for Change on Alcohol (CMCA) - Environmental Prevention]. While Horizons' Prevention Education program welcomes and serves all ethnicities and populations, services are also designed to meet the unique cultural and linguistic needs of Latino youth, African American youth, and other youth of color.										
Service Description:	Horizons Unlimited of San Francisco, Inc. The Prevention Education program provides substance use prevention services to all ethnicities and populations, with a special focus on the unique cultural and linguistic needs of Latino youth and other youth of color and their families. The goal is to prevent underage drinking and reduce the initiation of alcohol by elementary, middle and high school youth through the implementation of 3 evidence-based interventions: Strengthening Families Program (SFP) (elementary/middle school youth), Communities Mobilizing for Change on Alcohol (CMCA) framework environmental prevention (EP) projects (high school), and 3) Botvin LifeSkills focused on elementary/middle school youth.										
UOS (annual)	Prevention Education Prevention Info Dissemination: 700 hours x \$73.29 = \$51,303 Prevention Education: 3,556 hours x \$117.22 = \$416,834 Prevention Alternatives: 960 hours x \$117.22 = \$112,531 Prevention Community Based: 1,825 hours x \$73.29 = \$133,754 TOTAL UOS = 7,041										
UDC (annual)	Prevention Education = 190										
Funding Source(s):	Federal, General Funds, Mental Health Work Order										
Selection Type	21G.8 Grant Waiver										
Monitoring	The program received annual monitoring from the DPH Business Office Business Office of Contract Compliance (BOCC) for FY20-21. This program was exempt from contracted performance objectives and achieved 130.5% of its target Units of Service and 504% of its target Unduplicated Clients. A client satisfaction survey was conducted in a timely manner, with a return rate of more than 50%. Percentage of clients indicating satisfaction with the program's services was between 60% and 69%. Due to COVID, there was no scoring assigned.										