

Sect.	Contractor	Target Population; Description of Services	UOS (annual)	UDC/ NOC (annual)	Ct. Term	Total Contract Amount With Contingency	Annual or Mod	Funding Source	Prior Annual Amt. without Contingency	Prop. Annual Amt. without Contingency	Annual Difference \$	Annual Difference %	Selection Type
SFHN/SFGH/ LHH	Nuance Communications, Inc.	A limited term license for additional modules of the Clintegrity suite of applications in use by the Health Information System units of SFGH and LHH and essential for the ICD-10 conversion.	N/A	N/A	07/01/15- 06/30/20	\$ 8,532,689	Annual	General Fund	\$ 293,050	\$ 798,562	\$ 505,512	173%	Sole Source
FOOTNOTES:													
SFHN/SFGH/ LHH	Nuance Communications, Inc.	<p>Reason for Increase or Decrease: This contract will assist the Department in the transition to the ICD-10 standard and serve as "bridge" technology for the new Electronic Health Record (EHR) by adding functionality to the Department's existing Clintegrity suite of products, which are currently under a perpetual license agreement.</p> <p>The Clintegrity suite now consist of 3 types of agreements: (1) a perpetual license, (2) a limited term license, and (3) a software maintenance agreement. Nuance now only provides these additional modules under a limited term software license.</p> <p>The amount above represents (A) the cost of a five-year, limited-term license, (B) modification of the current maintenance agreement to extend it one year, and (C) maintenance charges for the new limited term products. The limited-term license includes a module for Enterprise Document Management (EDM) based a budgeted 1,000 users per year, however, if there are fewer users, costs will decrease accordingly (the contract includes a minimum of 600 users).</p> <p>Reason for Sole Source: These functions are essential for patient billing and for compliance with State, federal and accrediting agency requirements. The Nuance Clintegrity application is currently installed and in use by the Health Information Services (Medical Records) departments at Laguna Honda Hospital (LHH) and San Francisco General Hospital (SFGH) to code and abstract patient information. Nuance Communications is the only vendor that can provide access to licenses for its own Clintegrity proprietary software application. No third-party vendor has access to the Nuance proprietary software. This sole source is requested in accordance with San Francisco Administrative Code Chapter 21.30 (Software), Proprietary System Maintenance, Design and Implementation of Systems.</p>											

KEY for Monthly Contracts Report:

Column Heading	Explanation
Section	This represents the area of the DPH with whom the contractor/vendor is contracting. Specifically, it identifies both the section, and the Division of the section where the contract (see key to acronyms below).
Contractor	The name of the agency contracting for the services, as shown in NFAMIS and the contract boilerplate.
Target Population; Description of Services	Brief description of services and target population, as shown in the contract (if there is no target population, e.g., if the services are provided directly and only to DPH, then only services will be shown).
UDCs/NOCs	UDC: Number of Unduplicated Clients projected to be served in one year; NOC: Number of Clients projected to be served in one year (may include duplicated clients, i.e., the same client receiving services more than once). Note: UDCs/NOCs will only be shown if they are included in the contract. The number of UDCs/NOCs shown are those projected to be provided if the requested contract or contract modification is approved.
Contract Term	The term of the entire contract.
Total Contract	The total value of the contract, including the contingency, for the full contract term, also referred to as the "Not To Exceed (NTE)" or total contract amount.
Annual/Mod.	Annual: A request made to implement annual allocations from the DPH budget; the legal instrument may be an original agreement or an amendment/modification. Mod.: Any modification/amendment to a contract other than an "annual" and which requires Health Commission approval.
Funding Source	The source of funds for the variance shown in the Difference column. GF: Funding which originates from the City and County's General Fund MediCal: Includes all types of MediCal (Federal, State, Drug, EPSDT, etc.) Realignment: State monies Grant: Federal, State, Local or private grants; should include name of grantor (e.g., "grant/CDC") Work Order: Funding received from other City departments; should include name of department (e.g., "Work Order-Human Services") MHSA: State Mental Health Services Act monies (also sometimes referred to as "Prop. 63" monies) RWPA: Federal Ryan White grants CDC: Federal Centers for Disease Control grants SAMHSA: Federal Substance Abuse and Mental Health Services Administration grants
Prior	-- For contracts which receive regular annual funding allocations or renewals: [This applies especially to most contracts with Community Based Organizations (CBOs) providing services to the public.] "Prior" refers to the contract amount for the immediately prior 12 month contract funding period. (For instance, for contracts which follow the City Fiscal Year, if the request to approve is for FY14-15, then "prior" refers to FY13-14.) The same methodology applies for Calendar Year contracts. If the request is for approval of a contract being establishing for the first time under an RFP, but the service is a continuation of the same services under the prior RFP, then "prior" refers to the amount allocated under the previous RFP, in order to facilitate comparison. If the request is for a modification, then "prior" refers to the currently approved annual contract amount, prior to approval of the proposed modification. -- The Contingency amount is not included. -- ("Annual" approval is also sometimes used in reference to "renewals.")
Proposed	For most contracts with CBOs, "proposed" refers to the annual amount requested. For non-CBO contracts, "proposed" may refer to an annualized average amount (the total contract amount divided by the total term). The Contingency amount is not included.
Difference	The variance between the Prior and the Proposed amounts.
Selection Type	RFP: Request for Proposals RFQ: Request for Qualifications Sole Source: Sole source of the services needed; no competitive solicitation (RFP or RFQ) has been done.
* (asterisk)	An asterisk (***) is used to indicate when a contract or modification requires Board of Supervisors approval. The Health Commission must approve all contracts before approval is requested of the Board of Supervisors.
Footnotes	Footnotes include a description of the reasons for any changes indicated in the "Difference" column, shown as "Reason for Increase/Decrease," and if the contract is requested as a Modification, the "Reason for Modification." Footnotes also include "Reason for Sole Source," briefly explaining why the needed services are not available from any other source. If the contract does not include a contingency, the footnote should include an explanation.

Health Commission Approval Requirements

When approval needed	Health Cm. approval is needed when either the total contract amount is over \$50,000, or there is a change to the total contract amount of 10% or more as compared to that most recently approved by the Commission.
How approval requested	If a contract or contract modification is for either a vendor or services which are new to the DPH, the contract or modification must be calendared for approval as a separate agenda item, and should not appear on the monthly contracts report. If a contract or contract modification is for either a vendor or services which are NOT new to the DPH, the contract or modification may be calendared for approval as part of the monthly contracts report.
Who must attend	If a contract is calendared for approval as a separate agenda item, both the program manager and contractor's representative should attend the Health Commission Finance Committee meeting. If the contract is approved at the Finance Committee meeting and there are no further questions, the program manager and contractor's representative are not required to attend the full Commission meeting at which final approval of the contract is calendared. If a contract is calendared for approval as part of the monthly contracts report, only the program manager is required to attend the Health Commission Finance Committee meeting. A presentation is not necessary, but the program manager should be prepared to answer commissioner's questions on the contract.
Where meetings held	The Health Commission Finance Committee meeting is usually held at 101 Grove Street, in Room 302. However, this varies a few times each year. Date, time and location of the meeting should be confirmed prior to the meeting. Meeting agendas may be found online here: http://www.sfdph.org/dph/comupg/aboutdph/hc/nextMeeting.asp

DIV:	Division
DPH	Department of Public Health
DPH/Finance	Department of Public Health/Finance
DPH/IT	Department of Public Health/Information Technology
DPH/HR	Department of Public Health/Human Resources
DPH/COMP	Department of Public Health/Compliance
DPH/PP	Department of Public Health/Policy and Planning
SFHN	San Francisco Health Network
SFHN/SFGH	San Francisco Health Network/San Francisco General Hospital
SFHN/LHH	San Francisco Health Network/Laguna Honda Hospital
SFHN/MgdC	San Francisco Health Network/Managed Care
SFHN/Trans	San Francisco Health Network/Transitions
SFHN/Trans/HUH	Transitions/Housing and Urban Health
SFHN/AC/PC	San Francisco Health Network/Ambulatory Care/Primary Care
SFHN/CBHS	San Francisco Health Network/Ambulatory Care/Behavioral Health Services
SFHN/AC/MCH	San Francisco Health Network/Ambulatory Care/Maternal and Child Health
SFHN/AC/JHS	San Francisco Health Network/Ambulatory Care/Jail Health Services
SFHN/AC/HHS	San Francisco Health Network/Ambulatory Care/HIV Health Services
PHD	Population Health Division
PHD/CHEP	Population Health Division/Community Health Equity and Promotion
PHD/PHPR	Population Health Division/Public Health Preparedness and Response
PHD/LI	Population Health Division/Center for Learning and Innovation
PHD/PHR	Population Health Division/Center for Public Health Research
PHD/EQI	Population Health Division/Office of Equity and Quality Improvement
PHD/EHPES	Population Health Division/Environmental Health Protection, Equity and Sustainability
PHD/DPC	Population Health Division/Disease Prevention and Control
PHD/EMS	Population Health Division/Emergency Medical Services
PHD/RES	Population Health Division/Applied Research, Community Health Epidemiology and Surveillance
PHD/BRID	Population Health Division/Bridge HIV

Health Commission Reports

Justification Information

To standardize our explanations, and to include information to address the most common questions which occur by the Health Commissioners, please consider the following language in the explanation for the contracts

- **Health Commission Approval of Contract Period**

- As you know, the Contract Term box in the HC Contracts report indicates the entire contract term, typically five years, and in itself doesn't differentiate between what the HC has previously approved, and the period of time subject to new approval. This is a consistent area of confusion for the Health Commissioners. To clarify without changing the report format, please include a sentence indicating the period of time that constitutes a
 - Language Examples:
 - The requested action is the approval of an annual renewal for the period 7/1/15-6/30/15.
 - The requested action is the approval of a modification to a previously approved annual renewal for the period
 - Please note, as a stand-alone item, the Department is not required by the HC to seek its approval for the contract term, unless the initial term of the contract is longer than 5.5 years, not including City options for extensions beyond the initial term. In other words, as a stand-alone item, a term extension, or a term under 5.5 years would not require HC approval. The funding amount is really the trigger for HC approval. However, because an extension of a contract may trigger the need to obtain Board of Supervisors approval, typically
 - The requested action is the approval of an extension of the contract term for the period *_the date the extension begins* __ through ____ . This contract is subject to Board of Supervisors' approval, and therefore

- **Explanation of Change**

If there is a change in funding between the prior year and the current/proposed years, or due to a modification of an already approved annual renewal, then an explanation of the change is also necessary.

- Reason for Increase/Decrease: The proposed change is the result of _____.

It is not necessary to include the funding amount for each unique item contributing to a change, however, the items noted should represent what is contributing to the funding difference, and the changes should be those occurring during the time period subject to HC approval. The Funding Notification is typically a good resource to