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1	Div.	Contractor	Current Total Contract Amount with Contingency	Proposed Total Contract 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 (btwn. FY16-17 and FY17-18)	Annual Difference (%)	Requested Action
3	SFHN/MgdC	San Francisco Community Health Authority	\$ 3,244,862	\$ 4,368,361	\$ 1,123,499	07/01/17-06/30/18 (1 year)	07/01/17-06/30/18 (1 year)	\$ 3,244,862	\$ 4,368,361	\$ 1,123,499	35%	Contract modification
4	<p><b>Purpose:</b> The requested action is the approval of a contract modification with the San Francisco Community Health Authority to increase the current funding level for its Healthy Kids Program. This contract was previously approved by the Health Commission in August 2017 for an amount of \$3,244,862. However, this amount is insufficient to fund private provider reimbursement at the program's current membership level.</p> <p><b>Reason for Funding Change:</b> Initial projections underestimated the number of children who would transition to the Healthy Kids Program, once the Healthy Kids Program was included in California's health insurance exchange (a.k.a. Covered California). The membership has been steadily increasing, and is higher than originally anticipated or funded. As such, the proposed budget increase would support the modified projection that reflects a 5.9 percent monthly membership increase. The additional funding is already in the Department's budget for this purpose, but hadn't been included in the contract, due to lower original cost projections.</p>											
5	<b>Target Population:</b>		Children who are uninsured and ineligible for other publicly funded insurance programs, with incomes between 266-322% of the Federal Poverty Level.									
6	<b>Service Description:</b>		Reimbursement for private providers serving Healthy Kids members for the following services: medical, dental, and vision coverage, mental health services, prescription drugs, hospital care, family planning, substance abuse, and preventive care									
7	<b>UOS (annual):</b>		22,416 expected members to be served annually.									
8	<b>UDC/NOC (annual)</b>		2509 (not all clients are enrolled for the full year, due to new enrollments and drop-outs)									
9	<b>Funding Source(s):</b>		General Fund, and Work Order from the Department of Children, Youth, & Families (DCYF)									
10	<b>Selection Type</b>		Sole Source (SF Admin. Code Ch. 21.42): SFCHA operates jointly with the San Francisco Health Plan under a joint powers agreement, established under Board of Supervisors Resolution 237.5, and as such is the sole agency authorized to pay private providers for DPH's Healthy San Francisco program.									
11	<b>Monitoring</b>											

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13	SFHN/HHS	UCSF - Positive Health Program	\$ 6,472,717	\$ 9,181,919	\$ 2,709,202	07/01/15-06/30/18 (3 years)	07/01/15-06/30/19 (4 years)	\$ 2,023,928	\$ 2,125,124	\$ 101,196	5%	Contract modification
14	<p><b>Purpose:</b> The requested action is the approval of a contract modification to (1) add additional Cost of Doing Business (CODB) funding in FY17-18 (see Prior Annual Amount for FY17-18 funding), (2) extend the full contract term by one year through FY18-19, and (3) add the corresponding funding for the additional year, including CODB funding (see Proposed Annual Amount for FY18-19 funding). The proposed extension would exercise an option authorized under RFQ 22-2013. This contract has previously been approved by the Health Commission.</p> <p><b>Reason for Funding Change:</b> The proposed annual increase of \$101,196 is due to the allocation of an annual 2.5% Cost of Doing Business (CODB) of \$50,598 added in both FY17/18, and again in FY18/19.</p>											
15	<b>Target Population:</b>	Low-income Persons Living with HIV/AIDS (PLWHA) who are: uninsured and have no other source of care; have severe need (as defined by the HIV Health Services Planning Council); reside in San Francisco; and have active mental health needs, or active substance use, or both.										
16	<b>Service Description:</b>	The UCSF Positive Health Program is the lead agency for the Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP) Center of Excellence (COE), collaborating with UCSF Alliance Health Project, UCSF's Division of Substance Abuse and Addiction Medicine (DSAAM) Stimulant Treatment Outpatient Program (STOP), and the San Francisco AIDS Foundation (SFAF) Stonewall Program. CCHAMP Center of Excellence (COE) services include: Primary Care, Case Management, Psychiatry Encounters, Mental Health Services, Individual Substance Abuse Counseling, Substance Abuse Group Counseling, Treatment Adherence, and Program Coordination.										
17	<b>UOS (annual):</b>	FY18/19: 13,963 hours (Includes: -- Positive Health Program: 2,016 hours Case Management; 1,090 hours Primary Care Encounters; 230 hours Substance Use Disorder Counseling; 230 hours Mental Health Services; 3,445 hours Treatment Adherence; 3,352 hours Coordination, Planning & Evaluation; -- Alliance Health Project: 680 hours Mental Health Encounters; 2,258 hours Case Management; -- DSAAM-STOP: 255 hours Substance Use Counseling; -- SFAF Stonewall Program: 272 hours Individual and 135 hours Group Substance Use Disorder Counseling)										
18	<b>UDC/NOC (annual)</b>	600										
19	<b>Funding Source(s):</b>	General Fund										
20	<b>Selection Type</b>	RFQ 22-2013										
21	<b>Monitoring</b>											

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23	SFHN/HHS	Positive Resource Center- HIV Employment and Work Re-Entry	\$ 1,155,332	\$ 2,695,703	\$ 1,540,371	07/01/13-06/30/18 (5 years)	07/01/13-06/30/20 (7 years)	\$ 482,539	\$ 536,090	\$ 53,551	11%	Contract modification
24	<p><b>Purpose:</b> The requested action is the approval of a contract modification to (1) increase FY17-18 funding, (2) extend the full contract term by two years through FY19-20, and (3) add the corresponding funding for the additional two years. This contract has previously been approved by the Health Commission. The proposed extension would exercise options authorized under RFQ 18-2013.</p> <p><b>Reason for Funding Change:</b> The proposed annual increase of \$53,551 is comprised of the following: (1) an amount of \$50,000 in FY17-18 one-time funding work-ordered by the Human Services Agency (HSA) to provide a short-term, On-the-Job-Training (OJT) program for eligible clients; and (2) a General Fund Cost Of Doing Business (CODB) increase in the amount of \$3,551 for FY17/18. The original source of the HSA work-order is addback funding allocated by the Board of Supervisors during the annual budget process.</p>											
25	<b>Target Population:</b>	Low income residents of San Francisco living with HIV/AIDS who are considering work and/or seeking to enter or re-enter the workplace, and low income LGBTQ residents of San Francisco in recovery from alcohol and/or drug dependency who are considering work and/or seeking to enter or re-enter the workplace.										
26	<b>Service Description:</b>	HIV Employment and Work Re-Entry Services, including: employment assessment, job development and placement assistance, service plan development and follow-up, group employment support and services for People Living With HIV/AIDS (PLWHA). For one year, services will also include: On-the-Job-Training (OJT) for LGBTQ in recovery from alcohol and/or drug dependency and placement assistance.										
27	<b>UOS (annual):</b>	6,369 (includes: 250 pre-employment hrs., 450 On-the-Job-Training hrs., and 5,669 employment hrs.)										
28	<b>UDC (annual)</b>	351										
29	<b>Funding Source(s):</b>	General Fund, Ryan White Part A, and Human Services Agency Work Order										
30	<b>Selection Type</b>	RFP 18-2013										
31	<b>Monitoring</b>											

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	Div.	Contractor	Current Total Contract Amount with Contingency	Proposed Total Contract 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 (btwn. FY16-17 and FY17-18)	Annual Difference (%)	Requested Action
1												
33	SFHN/HHS	Health-RIGHT 360 (Fiscal Intermediary Services)	\$ 2,572,151	\$ 3,222,027	\$ 649,876	03/01/14-02/28/18 (4 years)	03/01/14-09/29/18 (4.6 years)	\$ 671,354	\$ 958,247	\$ 286,893	43%	Contract modification
34	<p><b>Purpose:</b> The requested action is the approval of a contract modification to extend the contract term for 7 months through 9/29/18, and to allocate one-time funding. The Health Commission has previously approved the current contract. The proposed amendment exercises the options authorized under RFQ 22-2013.</p> <p><b>Reason for Funding Change:</b> The proposed annual increase of \$286,893 includes the following funding sources: (1) one-time unspent carry-forward Ryan White Part A funding in the amount of \$56,699; (2) one-time unspent carry-forward Ryan White Part A/Minority AIDS Initiative funding in the amount of \$60,223; and (3) one-time unspent supplemental State Office of AIDS funding in the amount of \$169,971. These one-time funds will be used primarily to purchase additional client incentive vouchers, e.g. taxi scripts, with the funding representing both the value of the vouchers itself and any associated processing fees, with the remaining funding to support staff trainings.</p>											
35	<b>Target Population:</b>	Program and fiscal management services are provided to the SFHN HIV Health Services Section (HHS) to support HHS staff, consultants and trainers to conduct administrative organization and management services for the HIV Health Services section in its role as grantee administrator of Ryan White funding provided by the US Health Resources and Services Administration (HRSA).										
36	<b>Service Description:</b>	Program and Fiscal Management services to support staff, trainers, and consultants who assist HIV Health Services in performing grantee duties, as well as fiscal administration for the purchase of client vouchers										
37	<b>UOS (annual):</b>	35 months (11 months Training & Consultation Coordination; 12 months Client Incentive Vouchers; 12 months Training Client Incentive Vouchers)										
38	<b>UDC/NOC (annual)</b>											
39	<b>Funding Source(s):</b>	Ryan White Part A, Ryan White Part A - Minority AIDS Initiative, State Office of AIDS										
40	<b>Selection Type</b>	RFQ 22-2013										
41	<b>Monitoring</b>											

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	Div.	Contractor	Current Total Contract Amount with Contingency	Proposed Total Contract 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 (btwn. FY16-17 and FY17-18)	Annual Difference (%)	Requested Action
1												
43	SFHN/CHEP	Harm Reduction Coalition	\$ 1,772,820	\$ 626,826	\$ (1,145,994)	7/1/10-12/31/17 (6.5 years)	1/1/18-6/30/19 (1.5 years)	\$ 358,186	\$ 376,096	\$ 17,910	5%	New Contract (for ongoing services)
44	<p><b>Purpose:</b> The proposed contract was previously administered by the Behavioral Health Services (BHS) section. However, it has been reissued as a new contract under the Population Health Division-CHEP to reflect that CHEP and not BHS administers this contract as part of its broader program. CHEP manages the Department's program to reduce overdose and HIV/Hepatitis C Virus (HCV) transmission among substance users.</p> <p><b>Reason for Funding Change:</b> The funding for this program was previously the federal Substance Abuse Prevention and Treatment (SAPT) block grant, HIV Set-Aside component, which is a BHS funding stream. This funding was administered by CHEP as part of its "HIV Set-Aside" program, but the contracts were managed through BHS. However, due to State changes in FY15-16 restricting services eligible for reimbursement, and a significant funding reduction in FY16-17, the program is no longer funded through BHS, or subject to BHS reporting requirements. As a result, the contract has been moved to PHD-CHEP to consolidate all functions related to this program under one division.</p>											
45	<b>Target Population:</b>		<p>(1) DOPE Project target population is San Francisco residents who are using opioids (prescription and illicit) and at risk for overdose, as well as their associates and service providers who work with people who use drugs. The primary target population is people who use heroin and other opiate/opioid users, the secondary target population are those residents of high-need neighborhoods, which includes the Tenderloin, SOMA/6th Street Corridor, Mission District, Bayview, and the tertiary target population are people who are homeless, living in shelters, exiting treatment or jail, or living in single room occupancy (SRO) hotels.</p> <p>(2) The target population for the Harm Reduction Training Institute are DPH and DPH-funded service providers and organizations that provide direct services to PWUDs, as well as people engaged in other high-risk behaviors.</p>									
46	<b>Service Description:</b>		<p>This contract contains two programs, the Drug Overdose Prevention and Education (DOPE) Project and the Harm reduction Training Institute and Outreach Project:</p> <p>(1) The DOPE Project provides overdose prevention and response trainings, as well as naloxone distribution, to providers and community members at risk of overdosing or witnessing an overdose. The goals of the Project are to reduce overdose fatality and other negative consequences of substance use among the target population. The DOPE Project does this through one-on-one trainings, distribution of naloxone kits, and follow-up encounters with the target population, and overdose prevention trainings for service providers.</p> <p>(2) The Harm Reduction Training Institute will provide large-group harm reduction trainings to DPH and DPH-funded providers that provide support to PWUD, as well as people engaged in other high-risk behaviors. The Training Institute will also provide agency-specific technical assistance around implementation of harm reduction policy and practices. The Project goals are to build agency and program capacity, improve consumer engagement in service design and delivery, and enhance the citywide system of care and prevention to meet the needs of PWUD and alcohol in San Francisco. Training will ensure culturally appropriate and effective engagement strategies for those who work directly with people who use drugs to ensure participant-informed programming.</p>									
47	<b>UOS (annual):</b>		<p>644 One-on-one overdose prevention trainings with Naloxone kit distribution to Intravenous Drug Users (IDUs)/other drug users, at Community-Based Organizations (CBOs);                      194 Group overdose prevention trainings for IDUs/other drug users, at CBOs;                      484 Group overdose prevention trainings for service providers who work with IDUs/other drug users                      806 Follow-up meetings with previously-trained IDUs/other drug users;                      120 Large group harm reduction trainings, including needs assessment and curriculum development;                      100 Hours technical assistance, including planning, coordination, needs assessment, and curriculum development to DPH and DPH-funded providers</p>									
48	<b>UDC/NOC (annual)</b>		<p>644 Clients trained one-on-one overdose prevention training and naloxone kit distribution to Intravenous Drug Users (IDUs)/other drug users, at Community-Based Organizations (CBOs);                      194 Clients trained in group overdose prevention trainings for IDUs/other drug users, at CBOs;                      484 Service providers trained in group overdose prevention trainings for service providers who work with IDUs/other drug users                      806 Meetings to follow-up with previously-trained IDUs/other drug users;                      120 DPH staff and DPH-funded providers' staffs trained in large group harm reduction trainings, including needs assessment and curriculum development</p>									
49	<b>Funding Source(s):</b>		General Fund									
50	<b>Selection Type</b>		Sole Source (SF Admin Code Ch 21.42)									
51	<b>Monitoring</b>											

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53	SFHN/BHS	Health-RIGHT 360 (BHS)	\$ 91,525,506	\$ 96,165,139	\$ 4,639,633	7/1/10-12/31/17 (7.5 years)	1/1/18-12/31/22 (5 years)	\$ 15,750,565	\$ 18,514,491	\$ 2,763,926	18%	New Contract (for ongoing services)
54	<p><b>Purpose:</b> The requested action is the approval of a new contract for the provision of ongoing Substance Use Disorder (SUD) services, effective January 1, 2018. (for comparison purposes, the annualized value is presented). Previously, HealthRIGHT 360 had had two separate contracts for the services now included under the proposed new contract. Please note that this contract also includes Mental Health (MH) services (\$595,023 for six months 1/1/18-6/30/18), which are currently under solicitation. Once the solicitation for those services is complete, this contract will be revised to include those services on an ongoing basis, if awarded.</p> <p><b>Reason for Funding Change:</b> The new contract is effective January 1, 2018. However, on a 12-month annual basis comparison, the new contract has a net increase of \$2,736,926 which reflects (1) a \$336,523 annual 2.5 percent Cost of Doing Business (CODB) allocation, (2) an increase of \$2,608,509 to meet new SUD Drug MediCal requirements, (4) a \$88,754 decrease due to reduction of MH WRAP funding; a (5) \$41,000 decrease to transfer these funds to an HR360 contract administered by the Population Health Division-HIV Prevention Section; and (6) a \$51,352 decrease due to a reduction in the the Adult Probation Department (APD) work order funding to reflect actual usage.</p>											
55	<b>Target Population:</b>	Substance Use Disorder: Adults with Substance Use issues Mental Health: Adults with Mental Health issues										
56	<b>Service Description:</b>	Substance Use Disorder: Residential Treatment; Outpatient Treatment; Case Management Services; Prevention Services Mental Health: Mental Health Services; Case Management Brokerage Services; Residential Services; Socialization Services; Housing Voucher Services										
57	<b>UOS (annual):</b>	Substance Use Disorder: 93,719 Residential Bed Days; 23,925 Outpatient Counseling Client Contacts; 1,183 Case Management Client Contacts; 3,405 Prevention Client Contacts Mental Health: 184,619 MH Services Staff Minutes; 2,053 Case Management Brokerage Staff Minutes; 771 Residential Client Days; 9,125 Socialization Client Days; 127 Housing Vouchers										
58	<b>UDC/NOC (annual):</b>	Substance Use Disorder: 3,245 Mental Health: 340										
59	<b>Funding Source(s):</b>	Substance Use Disorder: General Fund; Federal Substance Abuse and Mental Health Services Administration (SAMHSA) Substance Abuse Prevention and Treatment (SAPT) Block Grant; Federal Drug Medi-Cal; State Drug Medi-Cal; State General Fund; Work Order from the SF Adult Probation Department; Work order from the SF Human Services Agency Mental Health: General Fund; Medi-Cal; State Realignment; State CDCR Grant										
60	<b>Selection Type:</b>	Substance Use Disorder: RFP 26-2016 (selected under Outpatient Services Adult/Older Adult ASAM Level 1; Intensive Outpatient Services Adult and Older Adult ASAM Level 2; Residential Services ASAM Level 3 and Residential Services Perinatal ASAM Level 3) and (SF Admin Code Ch 21.42) Mental Health: Sole Source (SF Admin Code Ch 21.42)										
61	<b>Monitoring:</b>											

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63	SFHN/BHS	Community Awareness and Treatment Services (CATS)*	\$ 42,153,375	\$ 11,933,083	\$ (30,220,292)	7/1/10-12/31/17 (7.5 years)	1/1/18-12/31/2022 (5 years)	\$ 8,026,140	\$ 2,137,232	\$ (5,888,908)	-73%	New Contract (for ongoing services)
64	<p><b>Purpose:</b> The requested action is the approval of a new contract for the provision of ongoing Substance Use Disorder (SUD) services. This new contract is authorized under the selection types shown below with services effective January 1, 2018 (for comparison purposes, the annualized value is presented). These services were previously approved by the Health Commission under the prior contract. This contract also includes Mental Health (MH) services (\$385,532 for six months 1/1/18-6/30/18) which are currently being solicited. Once the solicitation for those services is complete, this contract will be revised to include those services on an ongoing basis, if applicable.</p> <p><b>Reason for Funding Change:</b> The new contract is effective January 1, 2018. However, on an annual basis, increases include an amount of \$49,140 for a 2.5 percent annual Cost of Doing Business (CODB) allocation, and a net increase of \$38,111 for new program occupancy expenses. The reduction is attributable to the removal \$5,976,159 for the Medical Respite program which was part of the prior contract, but is now a separate stand-alone contract (still with CATS) beginning 7/1/18.</p>											
65	<b>Target Population:</b>		Substance Use Disorder: Adults with Substance Use issues Mental Health: Adults with Mental Health issues									
66	<b>Service Description:</b>		Substance Use Disorder: Residential Treatment; Prevention Services; Case Management Services Mental Health: Community Client Services; Mental Health Services; Case Management Brokerage Services; Outpatient Crisis Intervention Services									
67	<b>UOS (annual):</b>		Substance Use Disorder: 8,541 Residential Bed Days; 8,812 Prevention Staff Hours; 120 Case Management Staff Hours Mental Health: 880 Community Client Services Staff Hours; 75,550 MH Services Staff Minutes; 28,500 Case Management Brokerage Staff Minutes; 1,550 Outpatient Crisis Intervention Staff Minutes									
68	<b>UDC/NOC (annual):</b>		Substance Use Disorder: 593 Mental Health: 150									
69	<b>Funding Source(s):</b>		Substance Use Disorder: General Fund Mental Health: General Fund; Federal Short-Doyle Medi-Cal									
70	<b>Selection Type:</b>		Substance Use Disorder: RFP 26-2016 (selected under Residential Services ASAM Level 3) Mental Health: Sole Source (SF Admin Code Ch 21.42)									
71	<b>Monitoring:</b>											

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1												
73	SFHN/BHS	Latino Commission	\$ 9,496,398	\$ 7,598,089	\$ (1,898,309)	7/1/10-12/31/17	1/1/18-12/31/22 (5 years)	\$ 1,295,274	\$ 1,327,656	\$ 32,382	2.5%	New Contract (for ongoing services)
74	<p><b>Purpose:</b> The requested action is the approval of a new contract for the provision of ongoing Substance Use Disorder (SUD) services. This new contract is authorized under RFP 26-2016 (see below) for services effective January 1, 2018. (Note: for comparison purposes, the annualized value of the contract is presented). Latino Commission has had an existing contract for these services which are continuing under the proposed contract.</p> <p><b>Reason for Funding Change:</b> The new contract is effective January 1, 2018, However, on an annual basis, there is an increase of \$32,382 due to the annual Cost of Doing Business (CODB) allocation.</p>											
75	<b>Target Population:</b>	Substance Use Disorder: Hispanic adults with Substance Use issues										
76	<b>Service Description:</b>	Substance Use Disorder: Residential Treatment										
77	<b>UOS (annual):</b>	Substance Use Disorder: 7,591 Residential Bed Days										
78	<b>UDC/NOC (annual):</b>	Substance Use Disorder: 68										
79	<b>Funding Source(s):</b>	Substance Use Disorder: General Fund										
80	<b>Selection Type:</b>	Substance Use Disorder: RFP 26-2016 (selected for Residential Services ASAM Level 3)										
81	<b>Monitoring:</b>											



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83	SFHN/BHS	San Francisco AIDS Foundation	\$ 9,982,414	\$ 5,717,494	\$ (4,264,920)	7/1/10-12/31/17 (7.5 years)	7/1/17-6/30/23 (5 years)	\$ 994,168	\$ 938,117	\$ (56,051)	-6%	New contract (for ongoing services)
84	<p><b>Purpose:</b> The requested action is the approval of a new contract with San Francisco AIDS Foundation for the provision of ongoing Substance Use Disorder (SUD) services. This new contract is authorized under the selection types shown below with the contract effective July 1, 2017. The San Francisco AIDS Foundation has had an existing contract for these services which are continuing under the contract for which approval is requested. Please note that this contract also includes Mental Health (MH) services, (\$47,536 for six months 1/1/18-6/30/18) which have been previously approved by the Health Commission. Once the solicitation for those services is complete, this contract will be revised to include those services on an ongoing basis, if applicable.</p> <p><b>Reason for Funding Change:</b> The net decrease is the result of the following: (1) an increase of \$20,812 due to the annual Cost of Doing Business (CODB) allocation, (2) an increase of \$84,822 due to the SUD solicitation to meet expanded Drug MediCal requirements, and (3) a decrease of \$161,685 due to the reallocation of this outreach program for injection drug users, to a separate contract with the SF AIDS Foundation, administered by the Population Health Division-HIV Prevention program.</p>											
85	<b>Target Population:</b>	Substance Use Disorder: LGBT adults with Substance Use issues Mental Health: LGBT adults with Mental Health issues										
86	<b>Service Description:</b>	Substance Use Disorder: Outpatient Treatment; Case Management Services Mental Health: Case Management Brokerage Services; Mental Health Services; Outpatient Crisis Intervention Services										
87	<b>UOS (annual):</b>	Substance Use Disorder: 4,836 Outpatient Counseling Staff Hours; 298 Case Management Staff Hours Mental Health: 5,325 Case Management Brokerage Staff Minutes; 30,723 MH Services Staff Minutes; 923 Outpatient Crisis Intervention Staff Minutes										
88	<b>UDC/NOC (annual):</b>	Substance Use Disorder: 145 UDC Mental Health: 115 UDC										
89	<b>Funding Source(s):</b>	Substance Use Disorder: General Fund; Federal Drug Medi-Cal; State Drug Medi-Cal Mental Health: General Fund; Federal Short-Doyle Medi-Cal										
90	<b>Selection Type:</b>	Substance Use Disorder: RFP 26-2016 (selected for Outpatient Services Adult and Older Adult ASAM Level 1) Mental Health: Sole Source (SF Admin Code Ch 21.42)										
91	<b>Monitoring:</b>											

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1	Div.	Contractor	Current Total Contract Amount with Contingency	Proposed Total Contract 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 (btwn. FY16-17 and FY17-18)	Annual Difference (%)	Requested Action
93	SFHN/BHS	Curry Senior Center	\$ 3,895,313	\$ 4,649,618	\$ 754,305	7/1/12-12/31/17 (5.6 years)	1/1/18-12/31/22 (5 years)	\$ 932,345	\$ 941,926	\$ 9,581	1%	New Contract (for ongoing services)
94	<p><b>Purpose:</b> The requested action is the approval of a new contract with Curry Senior Center for the provision of Substance Use Disorder (SUD) services and Mental Health (MH) services. This new contract is authorized under the selection types shown below with services effective January 1, 2018. (Note: for comparison purposes, the annualized value of the contract is presented). Curry Senior Center has had an existing contract for these services which are continuing under the contract for which approval is requested. Please note that this contract also includes MH services, (\$103,752 for six months 1/1/18-6/30/18) which have been previously approved by the Health Commission. Once the solicitation for those services is complete, this contract will be revised to include those services on an ongoing basis, if applicable.</p> <p><b>Reason for Funding Change:</b> The new contract is effective January 1, 2018. However, even comparing on an annual basis, there are several changes not immediately indicated, including: (1) an increase of \$7,780 due to the annual 2.5 percent Cost of Doing Business (CODB) in FY17-18, (2) a reduction of \$256,250 for the Socially Isolated Older Adult Program which became a stand-alone contract with Curry Senior Center to reflect a 7/1/17 start-date, (3) an increase of \$222,699 for the Senior Drop-In Center awarded via solicitation RFQ 5-2017, and (4) the reallocation of \$34,778 to the Mental Health program to support its homeless programming.</p>											
95	<b>Target Population:</b>	Substance Use Disorder: Older adults with Substance Use issues Mental Health: Older adults with Mental Health issues										
96	<b>Service Description:</b>	Substance Use Disorder: Outpatient Treatment; Case Management Services Mental Health: Community Client Services; Mental Health Services; Case Management Brokerage Services; Other Non-Medi-Cal Client Support										
97	<b>UOS (annual):</b>	Substance Use Disorder: 1,337 Outpatient Counseling Staff Hours; 148 Case Management Staff Hours Mental Health: 1,861 Community Client Services Staff Hours; 10,021 MH Services Staff Minutes; 2,616 Case Management Brokerage Staff Minutes; 111,350 Other Non-Medi-Cal Client Support Staff Minutes										
98	<b>UDC/NOC (annual):</b>	Substance Use Disorder: 75 Mental Health: 275										
99	<b>Funding Source(s):</b>	Substance Use Disorder: General Fund; Federal Substance Abuse and Mental Health Services Administration (SAMHSA) Substance Abuse Prevention and Treatment (SAPT) Block Grant Mental Health: General Fund; Federal SAMHSA Grant; Medi-Cal; State Mental Health Service Act (MHSA)										
100	<b>Selection Type:</b>	Substance Use Disorder: RFP 26-2016 (selected under Outpatient Services Adult and Older Adult ASAM Level 1) Mental Health: RFQ 5-2017 Community Drop-In and Resource Support (Senior Drop-In Center); RFQ 32-2017 Primary Care for Older Adults (Behavioral Health Services in Primary Care); and Sole Source (SF Admin. Code Ch. 21.42) for the Older Adult IFSO.										
101	<b>Monitoring:</b>											

	A	B	C	D	E	F	G	H	I	J	K	L
	Div.	Contractor	Current Total Contract Amount with Contingency	Proposed Total Contract 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 (btwn. FY16-17 and FY17-18)	Annual Difference (%)	Requested Action
1												
103	SFHN/ BHS	Mount St. Joseph - St. Elizabeth	\$ 5,785,734	\$ 4,574,534	\$ (1,211,200)	7/1/10-12/31/17 (7.5 years)	1/1/18-12/31/22 (5 years)	\$ 796,955	\$ 816,881	\$ 19,926	3%	
104	<p><b>Purpose:</b> The requested action is the approval of a new contract with Mount St. Joseph - St. Elizabeth for the provision of Substance Use Disorder (SUD) services and mental health services for youth. This new contract is authorized under the two solicitations identified under Selection Types shown below, with the ongoing new services effective January 1, 2018. (Note: for comparison purposes, the annualized value of the contract is presented). Mount St. Joseph - St. Elizabeth has had an existing contract for these services which are continuing under the contract for which we are requesting approval.</p> <p><b>Reason for Funding Change:</b> The new contract is effective January 1, 2018. However, on an annual basis, there is an increase of \$19,926 due to the annual Cost of Doing Business (CODB) allocation.</p>											
105	<b>Target Population:</b>	Substance Use Disorder: Adult females with Substance Use issues, and their children Mental Health: Adult females with Mental Health issues, and their children										
106	<b>Service Description:</b>	Substance Use Disorder: Residential Treatment Mental Health: Case Management Brokerage Services										
107	<b>UOS (annual):</b>	Substance Use Disorder: 6,772 Residential Bed Days Mental Health: 27,651 Staff Minutes; 1,119 Case Management Brokerage Staff Minutes										
108	<b>UDC/NOC (annual):</b>	Substance Use Disorder: 60 Mental Health: 20										
109	<b>Funding Source(s):</b>	Substance Use Disorder: General Fund Mental Health: General Fund; Federal Short-Doyle Medi-Cal; State Early and Periodic Screening, Diagnosis and Treatment (EPSDT) funds										
110	<b>Selection Type:</b>	Substance Use Disorder: RFP 26-2016 (selected under Residential Services ASAM Level 3) Mental Health: RFP 1-2017 (selected to provide Outpatient Therapeutic Treatment to youth and families)										
111	<b>Monitoring:</b>											

	A	B	C	D	E	F	G	H	I	J	K	L
1	Div.	Contractor	Current Total Contract Amount with Contingency	Proposed Total Contract 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 (btwn. FY16-17 and FY17-18)	Annual Difference (%)	Requested Action
113	SFHN/BHS	Mission Council on Alcohol Abuse for the Spanish Speaking	\$ 3,638,828	\$ 3,259,652	\$ (379,176)	7/1/12-12/31/17	1/1/18-12/31/22 (5 years)	\$ 555,686	\$ 569,578	\$ 13,892	2%	New Contract (for ongoing services)
114	<p><b>Purpose:</b> The requested action is the approval of a new contract with Mission Council for the provision of Substance Use Disorder (SUD) services. This new contract is authorized under the selection types shown below with services effective January 1, 2018. (Note: for comparison purposes, the annualized value of the contract is presented). Mission Council has had an existing contract for these services which are continuing under the contract for which we are requesting approval.</p> <p><b>Reason for Funding Change:</b> The new contract is effective January 1, 2018. However, on an annual basis, there is an increase of \$13,892 due to the annual Cost of Doing Business (CODB).</p>											
115	<b>Target Population:</b>	Substance Use Disorder: Hispanic adults with Substance Use issues										
116	<b>Service Description:</b>	Substance Use Disorder: Outpatient Treatment										
117	<b>UOS (annual):</b>	Substance Use Disorder: 2,905 Outpatient Staff Hours; 2,429 Face-to-Face Client Visits										
118	<b>UDC/NOC (annual):</b>	Substance Use Disorder: 322										
119	<b>Funding Source(s):</b>	Substance Use Disorder: General Fund										
120	<b>Selection Type:</b>	Substance Use Disorder: RFP 26-2016 (selected to provide Outpatient Services Adult and Older Adult ASAM Level 1)										
121	<b>Monitoring:</b>											

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	A	B	C	D	E	F	G	H	I	J	K	L
	Div.	Contractor	Current Total Contract Amount with Contingency	Proposed Total Contract 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 (btwn. FY16-17 and FY17-18)	Annual Difference (%)	Requested Action
1												
123	SFHN/BHS	Friendship House Association of American Indians	\$ 3,413,693	\$ 2,519,149	\$ (894,544)	7/1/10-12/31/17 (7.5 years)	1/1/18-12/31/23 (5 years)	\$ 438,875	\$ 449,847	\$ 10,972	3%	New Contract (for ongoing services)
124	<p><b>Purpose:</b> The requested action is the approval of a new contract with Friendship House for the provision of Substance Use Disorder (SUD) services. This new contract is authorized under the selection types shown below with services effective January 1, 2018. (Note: for comparison purposes, the annualized value of the contract is presented). Friendship House has had an existing contract for these services which are continuing under the contract for which we are requesting approval.</p> <p><b>Reason for Funding Change:</b> The new contract is effective January 1, 2018. However, on an annual basis, there is an increase of \$10,972 due to the annual Cost of Doing Business (CODB).</p>											
125	<b>Target Population:</b>	Substance Use Disorder: Adult Native Americans with Substance Use issues										
126	<b>Service Description:</b>	Substance Use Disorder: Residential Treatment										
127	<b>UOS (annual):</b>	Substance Use Disorder: 2,957 Residential Bed Days										
128	<b>UDC/NOC (annual):</b>	Substance Use Disorder: 36										
129	<b>Funding Source(s):</b>	Substance Use Disorder: General Fund										
130	<b>Selection Type:</b>	Substance Use Disorder: RFP 26-2016 (selected under Residential Services ASAM Level 3)										
131	<b>Monitoring:</b>											

	A	B	C	D	E	F	G	H	I	J	K	L
	Div.	Contractor	Current Total Contract Amount with Contingency	Proposed Total Contract 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 (btwn. FY16-17 and FY17-18)	Annual Difference (%)	Requested Action
1												
133	SFHN/BHS	Rona Consulting Group	\$ 2,559,200	\$ 8,996,870	\$ 6,437,670	1/1/16 - 12/31/19 (4 years)	1/1/16 - 6/30/20 (4.5 years)	\$ 571,250	\$ 1,920,104	\$ 1,348,854	236%	Contract modification
134	<p><b>Purpose:</b> The requested action is the approval of a modification to an existing contract with Rona Consulting Group for the provision of consulting services in furtherance of the Department's Service Excellence Program. This contract is authorized under the selection type shown below.</p> <p><b>Reason for Funding Change:</b> The expanded contract represents a revised approach to the needs of the San Francisco Department of Public Health to continue our lean transformation while simultaneously adopting a new electronic health record. Plans include activities to spread development of lean leadership and management systems, build internal capacity and support performance improvement work for EHR deployment.</p>											
135	<b>Target Population:</b>	Program managers department wide.										
136	<b>Service Description:</b>	Executive coaching; services provided to each DPH division may include Kaizen workshops, 3P workshops, LEAN management initiatives and certification, LEAN 5 year plan development & support, Value Stream Mapping, Hoshin Kanri sessions, among other services.										
137	<b>UOS (annual):</b>	3 LEAN Education & Certification; 1 LEAN 5-year plan development & support; 7 LEAN Leadership Development sessions; 13 Value Stream Mapping sessions; 40 Kaizen Workshops; 16 Hoshin Kanri session; 2 3P Training session; 1 First Step Assessment; 2 First Steps Executive Education; 12 First Steps Workshops; 4 5S Workshop; 6 3P Workshops; 1 KPO Coaching & Development; 233 Days of Executive Coaching										
138	<b>UDC/NOC (annual):</b>	All sessions/workshops are attended by 25-30 city employees. Executive Coaching varies from individual to group services depending on need.										
139	<b>Funding Source(s):</b>	General Fund										
140	<b>Selection Type:</b>	RFQ 26-2014										
141	<b>Monitoring:</b>											

**KEY for Monthly Contracts Report:**

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.]  " <b>Prior</b> " 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	<p>For most contracts with CBOs, "proposed" refers to the annual amount requested.</p> <p>For non-CBO contracts, "proposed" may refer to an annualized average amount (the total contract amount divided by the total term).</p> <p>The Contingency amount is not included.</p>
Difference	The variance between the Prior and the Proposed amounts.
Selection Type	<p>RFP: Request for Proposals</p> <p>RFQ: Request for Qualifications</p> <p>Sole Source: Sole source of the services needed; no competitive solicitation (RFP or RFQ) has been done.</p>
* (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	<p>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."</p> <p>Footnotes also include "Reason for Sole Source," briefly explaining why the needed services are not available from any other source.</p> <p>If the contract does not include a contingency, the footnote should include an explanation.</p>

**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	<p>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.</p> <p>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.</p>
Who must attend	<p>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.</p> <p>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.</p>
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: <a href="http://www.sfdph.org/dph/comupg/aboutdph/hc/nextMeeting.asp">http://www.sfdph.org/dph/comupg/aboutdph/hc/nextMeeting.asp</a>



<b>DPH</b>	<b>Department of Public Health</b>
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
<b>SFHN</b>	<b>San Francisco Health Network</b>
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
<b>PHD</b>	<b>Population Health Division</b>
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