

Div.	Contractor	Contract No.	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 (%)
BHS	Regents of the University of California	1000035447	\$9,994,866	\$43,781,617	\$33,786,751	07/01/2025 - 12/31/2026	07/01/2025 - 12/31/2029	\$8,505,048	\$8,659,515	\$154,467	2%
Requested Action	Amendment: Change in scope, term extension, change in funding										
Purpose:	The requested action is for the approval of a contract amendment with The Regents of the University of California, Division of Substance Abuse and Addiction Medicine (DSAAM) to continue providing Opiate Treatment Outpatient Program (OTOP) services and to move Office-Based Opiate Treatment (OBOT) programs into this contract, as OBOT services are closely aligned with the scope of the OTOP programs. UCSF DSAAM OBOT programs are currently a part of CID#; 1000035448. These services were both previously approved by the Health Commission on June 2, 2025. The Original Agreement was approved for the contract term of 07/01/2025 - 12/31/2026 and a Not-to-Exceed amount of \$9,994,866 for only UCSF DSAAM OTOP programs. The proposed request for this amendment is for both UCSF DSAAM OTOP and OBOT programs. The total requested amount, including contingency, is \$43,781,617 with a contract term from 07/01/2025 through 12/31/2029, for a total of 3.5 years. This contract requires future Board of Supervisors approval.										
Reason for Funding Change:	The Department is requesting the approval of a Total Contract Amount with Contingency of \$43,781,617, or an increase of \$33,786,751. This increase covers both programs, OTOP and the addition of OBOT, through 06/30/2030. The additional funding starts in FY26/27. The anticipated annual amount for FY26-27 is \$8,659,515 and \$8,919,300 for FY27-28.										

Service Description:	The following services are included in this proposed amendment: DSAAM Opiate Treatment Outpatient Program (OTOP): This program aims to improve the quality of life for patients and the public by providing the highest quality addiction treatment, education, and research to reduce the dangers of drug abuse and its consequences. The mission of OTOP is to intervene in opioid addiction and HIV risk behaviors by providing a medically supervised alternative that assists individuals in improving their lives. The target population for OTOP Medication-Assisted Treatment (MAT) services are medically/psychiatrically compromised individuals who meet the criteria for an Opioid Use Disorder. DSAAM Opiate Treatment Outpatient Program (OTOP) – Bayview Van: The mission of this program is same as the Opiate Treatment Outpatient Program (OTOP), but the Bayview Mobile Methadone Van Site provides a safe environment for clients to obtain substance use disorder services within their own neighborhood community. The convenient location of the program enables efficient delivery of services, which fosters adherence to treatment, also provides a more comfortable/less institutional atmosphere, and minimizes transportation costs. Within this program, clients receive the support they need for linkage to essential services, (e.g. food, housing, primary care) from the counselors. DSAAM Office-Based Opiate Treatment (OBOT) – Tom Waddell (TW): This program is at the Tom Waddell location and the Office Based Opiate Treatment (OBOT) program provides services to improve the lives of people in San Francisco with opioid use disorder by providing a medically supervised office-based treatment. DSAAM Office-Based Opiate Treatment (OBOT) - ZSFG Pharm: This program is at ZSFGH Pharmacy location and the Office Based Opiate Treatment (OBOT) program provides services to improve the lives of people in San Francisco with opioid use disorder by providing a medically supervised office-based treatment. DSAAM Office-Based Opiate Treatment (OBOT) – CBHS Pharm: Same services are provided at the Behavioral Health Services Pharmacy.
Deliverables & Unduplicated Clients:	Methadone Dosing: Fee for service; Unduplicated Clients 1,605; Units of Service 203,626; Unit: Dose; Cost per Unit \$25.92 Buprenorphine - Naloxone Combo Film: Fee for service; Unduplicated Clients (included); Units of Service 5; Unit: Dose; Cost per Unit \$35.58 Buprenorphine - Naloxone Combo Tablets: Fee for service; Unduplicated Clients (included); Units of Service 1,319; Unit: Dose; Cost per Unit \$39.97 Buprenorphine Mono: Fee for service; Unduplicated Clients (included); Units of Service 2,088; Unit: Dose; Cost per Unit \$39.36 Disulfiram: Fee for service; Unduplicated Clients (included); Units of Service 4; Unit: Dose; Cost per Unit \$14.20 Buprenorphine Injectable (Sublocade): Fee for service; Unduplicated Clients (included); Units of Service 1; Unit: Dose; Cost per Unit \$2,476.53 Naltrexone Injectable (Vivitrol): Fee for service; Unduplicated Clients (included); Units of Service 1; Unit: Dose; Cost per Unit \$2,705.06 Naltrexone: Fee for service; Unduplicated Clients (included); Units of Service 5; Unit: Dose; Cost per Unit \$20.89 Individual Counseling AOD Counselor: Fee for service; Unduplicated Clients (included); Units of Service 18,254; Unit: 15 min; Cost per Unit \$105.62 Care Coordination AOD Counselor: Fee for service; Unduplicated Clients (included); Units of Service 1,027; Unit: 15 min; Cost per Unit \$105.62 Jail Pilot Admissions: Fee for service; Unduplicated Clients 175; Units of Service 150; Unit: 1 admission; Cost per Unit \$6,666.67 Recovery Incentives (ODS 91, blended rate based on FTE): Fee for service; Unduplicated Clients 100; Units of Service 601; Unit: 1 hour; Cost per Unit \$340.55
Funding Source(s):	Federal 57%, State 25%, Opioid Settlement 6%, Prop C 12%
Selection Type	Administrative Code 1.25 (Agreement with Government Entities)
Monitoring	Annual monitoring from the DPH Business Office Business Office of Contract Compliance (BOCC)

Div.	Contractor	Contract No.	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 (%)
BHS	Health Right 360 - Check Writing	1000018756	\$107,416,172	\$137,243,348	\$20,877,929	1/1/21-6/30/27	1/1/21-12/31/28	\$24,701,598	\$13,160,658	\$11,540,940	47%
Requested Action	Amendment: No change in scope, term extension - Change in Service Level funding (increase or decrease annual funding)										
Purpose:	The requested action is the approval of an amendment with Health Right 360 (HR360) to extend the term by eighteen months from 6/30/27 to 12/31/28 and to increase the Total Contract by an amount of \$20,877,929 to fund the contract through the end of the proposed term, at which time the services will be rebid. Under the contract, HR360 provides check writing services on behalf of DPH, Behavioral Health Services (BHS) to pay for providers/entities that are not contracted with DPH and hence are not considered “vendors” in the City’s financial system (so can’t be paid). The structure involves HR360 making upfront payments to the service providers and then submitting invoices to DPH for reimbursement. To be eligible for reimbursement, providers must follow BHS policies and procedures for safety, privacy and adequacy of services. HR360 is issued reimbursement at a rate of \$22 per check and issues approximately 1,600 annual payments. On average, HR360 earns approximately \$40,000 annually in reimbursement with the balance of the annual funding going towards direct expenses. This contract amendment will also require approval by the Board of Supervisors.										
Reason for Funding Change:	The Total Contract Amount with Contingency of \$137,243,348 represents an increase of \$20,877,929 which will fund the contract through the end of the proposed term, including a 12 percent contingency in the amount of \$3,948,197. On an annual basis, the net reduction of \$11,540,940 between FY25-26 and FY26-27 is due to the following changes: (1) A decrease of \$12.2m to create stand-alone residential care facility (RCF) and skilled nursing facility (SNF) provider contracts that had previously been paid a daily bed rate through this contract, (2) a decrease of \$1.25m in FY26-27 DPH budget reductions, (3) an increase of \$869k due to a reallocation of funding from a different HR360 contract, (4) an increase of \$760k to support rate increases for providers that are continuing under this contract, and (5) an increase of \$212k in misc. adjustments.										
Service Description:	This contract provides a mechanism to pay vendors who are not suppliers in the City's accounts payable system (non-contract providers) typically smaller providers, such as residential care facilities and hotel providers, that lack the capacity to contract with the City, or for payments that are periodic to meet emerging but not ongoing needs. For example, this may include reimbursement to out of network/county providers serving San Francisco Mental Health Plan members, e.g. foster care youth placed out-of-county, licensed residential care facilities (i.e. board and care operators), wrap around services for clients (including emergency housing and food, transportation and clothing), other mental health and substance use disorder consultation, and one-off placement payments for specialized care, such as a youth in an eating disorder clinic. Of the total annual funding, approximately \$10m is dedicated to residential care facilities managed by BHS.										
Deliverables:	Fiscal Intermediary Services (Check Writing Services)										
Funding Source(s):	General Fund (74%), Federal (4%), State (22%)										
Selection Type	RFP 16-2019 - Check Writing Services for Crisis Stabilization Programs and Related Services										
Monitoring	This program is subject to annual Fiscal and Compliance monitoring.										

Div.	Contractor	Contract No.	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 (%)
PHD/CHEP	Public Health Foundation Enterprises, Inc. dba Heluna Health	1000035975	\$3,539,088	\$4,388,206	\$849,118	9/1/25 - 6/30/29	9/1/25 - 6/30/29	\$726,475	\$990,378	\$ 263,903	36.33%
Requested Action	Amendment: No change in scope, no term extension, change in Service Level funding (increase or decrease in annual funding)										
Purpose:	The requested action is the approval of a contract amendment with Public Health Foundation Enterprises, Inc. dba Heluna Health for a Total Contract Amount with Contingency of \$4,388,206 for a term of 9/1/2025 thru 6/30/2029 (3 years and 9 months). The Health Commission previously approved these services on October 6th, 2025. This contract provides Community Wellness, Health Promotion, and Community Engagement services to support and promote community-wide health and well-being. The contractor will receive annually 15% Indirect Cost as their Administrative Fee which equates to \$129,180 with the remaining amount of \$861,198 going to direct services for a total of \$990,378.										
Reason for Funding Change:	The Department is requesting the approval of a Total Contract Amount with Contingency of \$4,388,206, or an increase of \$849,118. Please Note: The annual funding level increased by \$263,903 due to the following reasons: 1) an increase in General Fund funding in the amount of \$103,903 for FY26/27 (which includes an amount of \$93,732 to continue to support services and an amount of \$10,171 for Cost of Doing Business); and 2) a one time CDC Grant funding for FY 26/27 in the amount of \$160,000.										
Service Description:	1) CHP Community Wellness Program Activities & Services These activities support community based, nutrition focused chronic disease prevention efforts addressing chronic disease health disparities in San Francisco. Total Subcontractor Allocation: \$577,000 (Community Wellness General Funds) and operational costs are as follows: a). Vision Zero/pedestrian safety for seniors and people with disabilities (\$271K) . Subcontractors: Chinatown Community Development Center: \$55K; Curry Senior Center: 55K; Senior and Disability Action: 55K; Walk SF: 106K b). Community and Home Injury Prevention Program for Seniors (CHIPPS) (\$200K) : Prevent falls and injuries of seniors living in San Francisco by providing fall prevention education, home safety devices, minor home repairs, and minor home modifications so seniors can live safely at home. Subcontractors: Rebuilding Together SF: \$50K; Home Safety Services: \$150K c). Second Chance Youth Program (\$53K) : This youth program provides peer support groups that create safe environments at local high schools and community spaces to actively engage in critical thinking, life-skills development, and fun, culturally affirming group activities. Subcontractor: CARECEN -In the process of working with Program Leads to strategically integrate chronic disease health education. d). SHAPE UP SF Community Mini Grants (\$43K) : Vendor Selection TBD-support the increase of healthy eating and active living activities within community neighborhoods. e). David Byrd: SHAPE UP Community Data Support (integration of Chronic Disease Efforts) (\$10K) 2) Health Promotion Services, and 3) Community Engagement Services: (\$253,732) This initiative focuses on health promotion and community engagement activities related to HCV, HIV, and STI prevention. a) End Hep C - Research Study Coordinator which provides for epidemiologic studies, data compliance and surveillance activities; and (CDC funds:160K) b) End HEP C- Data Analyst (HIV GF: 93,732): One-time, for FY26-27, future years will be funded by CDPH State Grant funds The above are crucial ARCHES (Addressing Reproductive Coercion in Health Settings) Data Positions that serve to continue to provide support to Community Wellness, Health Promotion, and Community Engagement services that include epidemiologic studies, data compliance and surveillance. c) Community Health Engagement activities that support and promotes community-wide health and well-being, community capacity building efforts through selected subcontractors as approved: City wide Public Health Messaging-Social Marketing efforts to Promote and increase utilization of SF Home-Based Testing Program (takemehome.org), via our approved StayGoodGood campaign. Increase awareness of HIV Biomedical Prevention Oral and Injectable PrEP and Doxy PrEP via Social Media Messaging and PrEP Supports Social Marketing Campaign effort										
Deliverables & Unduplicated Clients:	This is a Fee For Service contract that will coordinate financial management and reporting, quality management and data analysis, staffing and programming efforts to support the initiatives above. UOS = 1 month of project administration services; 12 UOS total										
Funding Source(s):	General Fund - 82% CDC Grant - 18%										
Selection Type	RFP 8500 Community Health Equity & Promotion (CHEP) Program Administration Services for the Department of Public Health.										
Monitoring	This contract is monitored on a monthly basis by CHP SOC via program deliverables along with the Program Administration team										

Div.	Contractor	Contract No.	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 (%)
PC/HHS	Shanti Project	1000024465	\$4,974,125	\$9,157,054	\$4,182,929	3/1/22 - 6/30/27	3/1/22-6/30/31	\$936,694	\$949,289	\$ 12,595	1.34%
Requested Action	Amendment: No change in scope - term extension - increase annual funding by CODB only										
Purpose:	The requested action is the approval of a contract amendment with the Shanti Project to increase the Total Contract Amount with Contingency to an amount of \$9,157,054 and to extend the current contract term from 3/01/2022 through 6/30/2027 to 3/01/2022 through 6/30/2031. This contract was previously approved by Health Commission on December 6, 2022. This contract supports Emotional and Practical Support by trained volunteers and Psychosocial Support by Staff to People living with HIV. The proposed amendment exercises the options authorized under RFP 29-2021.										
Reason for Funding Change:	The Department is requesting the approval of a Total Contract Amount with Contingency of \$9,157,054, or an increase of \$4,182,929 due to the following changes: (1) additional Cost of Doing Busines (CODB) Ryan White Part A Fund funding for FY26/27 in the amount of \$12,595; (2) Ryan White Part A Fund funding for FY27/28 thru FY30/31 in the amount of \$2,099,292, or \$524,823 annually; (3) General Fund increase of \$411,871 and anticipated CODB for subsequent years										
Service Description:	The Shanti Project provides two programs through this contract. The services provided are Emotional & Practical Support Services for People Living with HIV (PLWH) and also Long Term Survivors of HIV as well as Senior Survivor Support Groups. Psychosocial Services for PLWH and for Long-Term Survivors of HIV Programs: The program is designed for those that are experiencing behavioral and physical health concerns. The services include care navigation, client advocacy, and psychosocial support provided by staff, staff hours mentoring volunteers, and emotional/practical support hours provided by volunteers, as well as senior psychosocial support staff hours. Through the peer volunteer services, Shanti trains volunteer in order to be able to match these trained volunteers with clients so that they can provide emotional support and practical assistance to persons living with HIV/AIDS in San Francisco. These clients receive day-to-day assistance in their daily activities which may include accompanying them to medical or social service appointments as well as arranging transportation to other activities that promote quality of life. Senior Survivor Support Groups: This program provides client-centered program support with activities that are focused on improving access and retention to core medical and non-medical services. The services provided by Shanti include a combination of group and individual interventions that include weekly support groups for long-term survivors; individual psychosocial support, i.e., assistance with establishing and maintaining a connection to primary medical care and mental health services; establishment, maintenance, and optimization of stable and safe housing; advocacy with providers; information and referrals to legal services, food, and other relevant providers to meet the basic needs of clients; and a variety of ongoing, peer-facilitated activities designed to build community among long-term survivors.										
Deliverables & Unduplicated Clients:	Care Navigation, Client Advocacy, Psychosocial Support Staff Hours: \$328,604 / 4,401 Staff Hours = \$74.67/hr for 250 Clients Psychosocial Support Staff Training Hours with Volunteers: \$121,385 / 1,709 Staff Hours = \$71.03/hr, UDC n/a for this service category Psychosocial Emotional/Practical Support Volunteer Hours: \$135,768 / 3,680 Volunteer Hours = \$36.89/hr for 50 clients Long-Term Suvivors of HIV Weekly Support Group Hours: \$32,571/ 72 Group Hours = \$452.39/hr for 25 clients Senior Psychosocial Support Staff Hours: \$330,961 / 3,913 Staff Hours = \$84.58/hr for 60 clients 315 unique UDC are served across the above service types. This is a Cost-Reimbursement service.										

Monthly Contract Report October 5, 2026

Funding Source(s):	General Fund - 46%, Ryan White Part A - 54%
Selection Type	RFP 29-2021 Psychosocial Support Services to People Living with HIV
Monitoring	Annual monitoring from the DPH Business Office Business Office of Contract Compliance (BOCC)

Div.	Contractor	Contract No.	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 (%)
MCAH	SisterWeb	1000036248	\$1,452,500	\$1,710,865	\$258,365	7/1/25- 6/30/27	7/1/25- 6/30/27	\$687,500	\$913,719	\$ 226,219	32.90%
Requested Action	Amendment: No change in scope, no term extension, change in Service Level funding (increase or decrease in annual funding)										
Purpose:	The requested action is the approval of a contract amendment with the SisterWeb to increase the Total Contract Amount with Contingency to an amount of \$1,710,865 with no change to the current contract term, which is from 7/01/2025 through 6/30/2027 (2 years). These services were previously presented at Health Commission on November 1, 2022 as a new contract with Public Health Foundation Enterprises (PHFE), Inc. dba Heluna Health (HH), a fiscal sponsor of SisterWeb. The original contract with PHFE dba HH was approved the contract for a term of 1/1/2023 - 6/30/2027 and a Not To Exceed Amount of \$3,402,000. On July 1, 2025, this contract went through an Assignment and Assumption so that the services would directly be contracted with SisterWeb. At that time, there was only one year of funding left which totaled an amount \$1,452,500 for FY25/26. This contract provides support for congruent equity based perinatal, labor, and postpartum doula services.										
Reason for Funding Change:	The Department is requesting the approval of a Total Contract Amount with Contingency of \$1,710,665 due to an additional work order funds from the Mayor Office Housing and Community Development (MOHCD) for FY26/27 in the amount of \$226,219 and contingency to cover the term of the contract										
Service Description:	SisterWeb provides congruent equity based perinatal, labor, and postpartum doula services to support pregnant and parenting individuals in San Francisco, with focused expertise serving Black/African American communities experiencing maternal health inequities. Services include prenatal education, labor support, postpartum home visits, emergency support, and referrals to wrap around resources. Clients receive individualized assistance to navigate health care, access needed services, and promote wellnness during pregnancy and early parenting. The program utilizes a cohort model of culturally responsive doulas, provides timely face to face and in home visits. SisterWeb has dedicated doulas and administrative support to manage referrals, client tracking, and program coordination. The organization participates in the Champion Dyad Initiative to strengthen doula care in collaboration with San Francisco hospitals, which is a bi-directional collaboration with all 5 hospitals in San Francisco with labor and delivery units. This collaboration allows for access to these services for those women that qualify. The additional MOHCD funding will be utilized to continue to strengthen maternal and family support systems through enhanced client navigation to ensure clients with high risk needs are connected to wrap-around support services which medical, housing and employment services. Additionally, these funds will support a workforce development initiative for aspiring Doulas, offering a 40-hour training curriculum for up to 7 doulas that includes apprenticeships and mentorship in order to promote workforce entry.										
Deliverables & Unduplicated Clients:	This is a Cost-Reimbursement contract. Doula Services (80 unduplicated Clients Served): \$687,500/80 Clients = \$8,593.76/client (General Fund) Doula Services and Client Navigation (40 unduplicated Clients served): \$216,219/65 Sessions = \$3,326.44 per session (MOHCD) Workforce Development Training (7 doulas served - 40 hours training): \$10,000/1 training session = \$10,000 per training session (MOHCD)										
Funding Source(s):	General Fund - 75% and General Fund MOHCD - 25%										
Selection Type	RFP 0-6929 Equity Based Community Doula Services										
Monitoring	Annual monitoring from the DPH Business Office Business Office of Contract Compliance (BOCC)										

Div.	Contractor	Contract No.	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 (%)
BHS	Regents of the University of California	1000010331	\$133,397,493	\$133,897,493	\$500,000	07/01/2018 - 06/30/2028	07/01/2018 - 06/30/2028	\$14,142,884	\$16,000,383	\$1,857,499	13.13%
Requested Action	Amendment: Change in scope, no term extension, change in funding										
Purpose:	The requested action is for the approval of a contract amendment with The Regents of the University of California, UC Citywide Single Point of Responsibility (SPR) intensive case management program, to increase the amount by only \$500,000 and to add an ICM Expansion program, previously CID#: 1000029051, into the contract. The current contract is approved for \$133,397,493 with a contract term of 07/01/2018 - 06/30/2028. The requested total not-to-exceed amount for this contract amendment request is \$133,897,493 with no change to the term. This contract was previously approved by the Health Commission on 06/06/2023. CID#: 1000029051, containing the UCSF ICM Expansion program, was also previously approved by the Health Commission on 08/06/2024.										
Reason for Funding Change:	Reason for Funding Change: The Department is requesting approval of \$500,000 for a Total Contract Amount of \$133,897,493 for the remainder of the term to support the ICM Expansion program. The annual budget for FY26-27 is \$16,000,383.										
Service Description:	UC Citywide SPR—comprising Citywide Focus and Citywide Forensics—provides clinical case management and behavioral health services to adults ages 24 and older from diverse backgrounds who are living with serious mental illness. Services include psychiatry, medication management, therapy, ongoing crisis intervention, care coordination, and psychoeducation for clients and families about diagnoses and symptom management. Citywide Forensics is the only intensive case management (ICM) program in our system of care dedicated to justice-involved adults. It also operates the Citywide PES team, which serves high-risk clients at Zuckerberg San Francisco General Hospital who cannot be safely engaged in the community by other providers. Citywide also operates the system’s only dialectical behavior therapy (DBT) program, providing specialized treatment for clients with high acuity and significant clinical risk.										
Deliverables & Unduplicated Clients:	Focus – 400 original slots + 30 from ICM Expansion contract = 430 slots Forensics – 175 original slots + 15 from ICM Expansion contract = 190 slots Total UDC = 620 slots <i>(This contract is paid on a per member per month (PMPM) capitated rate based on \$2,049.69 per client/month for FY25-26)</i> Total FY 25-26 UOS (hours) achieved = 26,099.1 Total FY 25-26 negotiated UOS (hours) goal = 26,491.91										
Funding Source(s):	General Fund (29%), State (16%), Federal (29%), Prop C (1%), MHSA (25%)										
Selection Type	Administrative Code 1.25 (Agreement with Government Entities)										
Monitoring	Annual monitoring from the DPH Business Office Business Office of Contract Compliance (BOCC)										

Div.	Contractor	Contract No.	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 (%)
SFHN	United Audit Systems, Inc.	1000025128	\$5,960,956	\$8,094,109	\$2,133,153	07/01/2022 - 06/30/2027	07/01/2022 - 06/30/2027	\$1,511,534	\$1,980,410	\$468,876	31.02%
Requested Action	Amendment: Change in scope, no term extension, change in funding										
Purpose:	The requested action is for the approval of the fourth amendment to the United Audit Systems. Inc contract to provide as needed remote coding and clinical documentation integrity staffing services. The amendment will update the scope of work to include Revenue Cycle Consulting Services, update rate sheet and program budget and increase the contract amount by \$2,133,153 for a total contract Not to Exceed Amount of \$8,094,109. This contract was previously approved by the Health Commission on 04/04/2023.										
Reason for Funding Change:	The requested action is to increase the contract Not to Exceed Amount by \$2,133,153 from \$5,960,956 to \$8,094,109. The increase in contract amount supports the use of additional as needed contractors to support remote coding and clinical documentation integrity staffing services at Zuckerberg San Francisco General Hospital and Behavioral Health Services including Revenue Cycle Consulting Services.										
Service Description:	United Audit Systems, Inc will provide as needed remote coding and clinical documentation integrity staffing services at Zuckerberg San Francisco General Hospital and Behavioral Health Services.										

Deliverables & Unduplicated Clients:	Services from contractor are performed on an as needed basis and are paid on an hourly rate basis as decribed below: 1. Revenue Cycle Consulting Services - \$145 per hour 2. Remote Coding Services Rates a. \$79.05 per hour per consultant for all Inpatient remote coding time. b. \$74.27 per hour per consultant for all Outpatient/SDS remote coding time. c. \$69.85 per hour per consultant for all ED remote coding time. d. \$68.50 per hour per consultant for all Profee E/M remote coding time. e. \$105.85 per hour per consultant for all Coding Auditor time. 3. CDI Staffing Services Rates \$110.40 per hour per Clinical Documentation Improvement (CDI) Specialist 4. Overtime Overtime will be billed at time and one half. The Contractor may, annually and upon thirty (30) days prior written notice to ZSFG, increase these rates by no more than 3%. 5. Training Hours The Contractor will invoice the ZSFG the current hourly coding/CDI rate for all associated training hours related to ZSFG start-up of a new account, requests for assistance with new systems, processes, work record types or requests for new, non-previously trained, coders onto an account. ZSFG will not be billed for any training time associated with the replacement of a coder that has been removed or replaced at the request of ZSFG.
Funding Source(s):	General Fund (100%)
Selection Type	Administrative Code Section 21A.2 Group Purchasing Organization (GPO)
Monitoring	The contract will be monitored in accordance with hourly productivity standards for coding and Clinical Documentation Improvement record review procedures by the Program Manager assigned to these services.