

DPH Contracts Report - June 2, 2025

Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)
BHS - CYF	A Better Way	\$13,579,299	\$15,464,413	\$1,885,114	7/1/2017 - 6/30/2027	7/1/2017 - 6/30/2027	\$1,785,033	\$1,785,033	\$ -	0.00%
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 for the approval of a contract amendment with A Better Way. A Better Way provides outpatient mental health services for children, youth and families. This contract was previously approved at the 11/07/2023 Health Commission for with annual spending of \$1.2 million. In FY 23-24, \$495k of services was added to this contract to expand the Outpatient Program, bringing the total to \$1.7 million. The proposed action will increase the total NTE by \$1.8 million with a total Contract Amount with Contingency requested is \$15,464,413 with no change to the term. This proposed amendment is subject to approval by the San Francisco Board of Supervisors.									
Reason for Funding Change:	The Department is requesting the approval of a Total Contract Amount with Contingency of \$15,464,413, or an increase of \$1,885,114 to support these services at the current annual funding level through 06/30/2027. There is no change in annual funding between FY24-25 and FY25-26.									
Service Description:	This contract provides specialty mental health services for children, youth, and families involved in the Child Welfare/Foster Care System. Referrals come from a centralized CYF Foster Care Hub that partners with the City's Human Services Agency- Child Welfare Division. Outpatient services are provided to children aged 0-21 inclusive of individual/family therapy, targeted case management, collateral, and crisis intervention. Most notably, this contract also offers specialized intensive services such as Intensive Care Coordination (ICC) and Intensive Home-Based Services (IHBS), aligned with the Child Family Team (CFT) process and cross-system collaboration as outlined in the Integrated Core Practice Model. HSA also supports costs for private insurance youth and other supportive services that can't be billed to Medi-Cal through workorder dollars.									
Deliverables:	Fee-for-Service reimbursement UOS (annual) Outpatient Services (Mode 15): \$660.83 x 2,461 Staff Hours = \$1,626,305 OS-MH Promotion (Mode 45): \$425 x 373 Staff Hours = \$158,728 UDC (annual): 75									
Funding Source(s):	Fed MediCal: \$573,319 (32%) State Realignment: \$525,233 (29%) County General Fund: \$455,428 (26%) Human Services Agency (workorder): \$231,053 (13%)									
Selection Type	RFP 1-2017									
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC) (performance and financial)									

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PHD	Public Health Foundation Enterprises, Inc. dba Heluna Health	\$9,697,459	\$9,983,651	\$286,192	1/1/18 - 12/31/25	1/1/18 - 12/31/25	\$1,233,961	\$646,034	\$ (587,927)	-47.65%
Requested Action	Amendment: Change in scope, no term extension, change in funding									
Purpose:	The requested action is the approval of a contract amendment with Heluna Health to increase the Total Contract Amount with Contingency by \$286,192 to reflect continuation in funding for an additional six months, until the expiration of the contract in December 2025.									
Reason for Funding Change:	Reason for Funding Change: Continuation of State Funding beyond the originally anticipated date of June 30, 2025. The change in annual funding represents (1) a reduction of six months in annual funding, as the contract will expire on 12/31/25 and further, the reduction in one-time \$30,000 added in FY24-25 only.									
Service Description:	<p>Heluna Health provides program management to the PHD Community Health Equity & Promotion (CHEP) team.</p> <p>1) Continuum of HIV Prevention, Care and Treatment Program is responsible for implementing a comprehensive Continuum of HIV Prevention, Care, and Treatment services for people living with and at risk for HIV.</p> <p>2) CHEP Ending the HIV Epidemic program will support San Francisco communities that are most impacted by HIV, HCV, and STIs: Black/African Americans, Latinos/Latinas/Latinx, Trans Women, People who use drugs, including people who inject drugs, People experiencing homelessness.</p> <p>3) San Francisco Hep B Free - Bay Area's mission is to provide free and low-cost hepatitis B testing, community and physician education on hepatitis B and promote routine testing and vaccination for those Asian and Pacific Islander (API) adults at risk. San Francisco has a rich network of services and efforts that must be maintained; shifts in policies and approaches are needed to realize the goals of getting to zero, ending Hep B, and turning the curve on STIs.</p> <p>4) HEP C Initiative: The main focus of funding is to improve HEP C surveillance efforts and provide backbone support for Ending HEP C SF initiatives. The priority populations are people co-infected with HIV/HCV, perinatal HCV, and young PWUD/young newly reported cases.</p>									
Deliverables:	This is a cost reimbursement contract to continue the research study coordination, data analysis and programming to support the efforts of the four initiatives above.									
Funding Source(s):	Federal CDC Grant - 82%; State Grant - 5%; General Fund - 13%									
Selection Type	RFQ 36-2017 Department of Public Health As Needed Project Based Support Services									
Monitoring	The contracted services are monitored by the DPH Program Administrator overseeing these services. Subject to annual Fiscal and Compliance review.									

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BHS	The Salvation Army (Harbor Lights/STARR)	\$5,598,152	\$6,552,628	\$954,476	02/16/2023 - 03/01/2026	02/16/2023 - 06/30/2026	\$6,251,800	\$4,998,350	\$ (1,253,450)	-20.05%																																				
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 an amendment to increase the Total Contract Amount with Contingency by \$954,476 to an amount of \$6,552,628. The term is not changing. This will provide full funding through the existing term, ending June 30, 2026. Effective 7/1/25, the proposed contract will continue to fund eighteen residential treatment beds, and ten withdrawal management beds, all funded by the Board of State and Community Corrections grant funding, for a total of 28 beds.																																													
Reason for Funding Change:	The reason for the funding changes are as follows: (1) the annual reduction of \$1,253,450 represents the reduction of 22 residential treatment beds supported with General Fund monies, which effective 7/1/25 will be transferred to a new contract with Salvation Army (approved by the Health Commission on May 5, 2025), and (2) an increase of \$954,476 in the total contract funding reflects the required funding level to fully expend the remaining grant funding through the end of the grant term. The original Health Commission approval in May, 2023 did not include the expansion of General Fund supported residential treatment beds, so the total funding request under-projected the need.					<table border="1"> <caption>Summary of Number of Beds by Contracts</caption> <thead> <tr> <th></th> <th>Mar-23</th> <th>May-25</th> <th>Jun-25</th> </tr> <tr> <th></th> <th>STAR funded all beds</th> <th>STAR reduced, moved 22 beds to GF</th> <th>Added new GF beds (10 WM and 22 Res)</th> </tr> </thead> <tbody> <tr> <td>WM (Original Grant Contract)</td> <td>10</td> <td>10</td> <td>10</td> </tr> <tr> <td>RES (Original Grant Contract)</td> <td>40</td> <td>18</td> <td>18</td> </tr> <tr> <td></td> <td>50</td> <td>28</td> <td>28</td> </tr> <tr> <td>WM (New Contract May 2025)</td> <td>0</td> <td>0</td> <td>10</td> </tr> <tr> <td>RES (New Contract May 2025)</td> <td>0</td> <td>22</td> <td>44</td> </tr> <tr> <td>Total</td> <td>0</td> <td>22</td> <td>54</td> </tr> <tr> <td>Total Beds</td> <td>50</td> <td>50</td> <td>82</td> </tr> </tbody> </table>						Mar-23	May-25	Jun-25		STAR funded all beds	STAR reduced, moved 22 beds to GF	Added new GF beds (10 WM and 22 Res)	WM (Original Grant Contract)	10	10	10	RES (Original Grant Contract)	40	18	18		50	28	28	WM (New Contract May 2025)	0	0	10	RES (New Contract May 2025)	0	22	44	Total	0	22	54	Total Beds	50	50	82
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Service Description:	The San Francisco Department of Public Health (SFDPH) will work with The Salvation Army to engage adults with substance use disorder (SUD) or co-occurring disorders who have a history of involvement with the criminal justice system. The Salvation Army will develop a community care plan for participants who complete treatment that connects them to community-based resources that support their ongoing stabilization and recovery. A goal is also to reduce recidivism rates in the program participants. Supporting Treatment and Reducing Recidivism (STARR) programs expand the city’s residential treatment capacity for adults, of all ethnicities and populations, who have been arrested, charged with, or convicted of a criminal offense, and who are assessed and authorized for residential treatment for Substance Use Disorder (SUD) through the Department of Public Health’s Behavioral Health Access Center (BHAC). The population is expected to be largely people of color (an estimated 33% African American, 10% Latino, and 17% other non-White) and two-thirds male. The project will specifically support the unique needs of individuals with SUD who may also have co-occurring mental health needs.																																													
Deliverables:	This is a Fee-For-Service reimbursed contract. Services are as follows: (1) 10 Withdrawal Management Beds (UDC = 61, UOS = 10,950 (bed days)); 18 Grant Funded Residential Tx Beds (UDC = 110, UOS = 19,710 (bed days)).																																													
Funding Source(s):	State BSCC (Prop 47) Grant (STARR) = 100%, (SUD county GF transferred out effective 7/1/25)																																													
Selection Type	21A.4																																													
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC).																																													

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BHS	Justice & Diversity Center, Bar Association of San Francisco	\$3,246,814	\$7,327,657	\$4,080,843	1/1/20 - 12/31/24	1/1/20 - 12/31/29	\$670,086	\$686,838	\$ 16,752	2.50%
Requested Action	Amendment: No change in scope - term extension - increase annual funding by CODB only									
Purpose:	The requested action is the retroactive approval of a contract amendment with Justice and Diversity Bar Association of SF to extend the term by five years from 12/31/24 -12/31/29 and to increase the Total Contract Not to Exceed (NTE) Amount by \$4,080,843 to an amount of \$7,327,657. This contract provides advocacy and support for clients who are either applying for or receiving Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) benefits who are homeless or at risk of homelessness.									
Reason for Funding Change:	The Department is requesting the approval of a Proposed Total Contract Amount with Contingency of \$7,327,657, including an increase of \$16,752 annually to reflect a potential 2.5 percent Cost of Doing Business (CODB) adjustment, and an overall increase to support annual funding over the term extension.									
Service Description:	<p>Justice and Diversity Bar Association of San Francisco provides SSI advocacy to 1) homeless and those at risk of homelessness who are referred to Justice and Diversity by the Department of Public Health 2) homeless clients with mental illness and substance abuse addiction; and 3) homeless clients who pose the greatest need for assistance in qualifying and maintaining eligibility for SSI/SSDI benefits. Justice and Diversity Bar Association of San Francisco advocates help clients effectively document a valid SSI/SSDI disability claim. Advocacy consists of helping clients with application forms, documenting level and nature of disability, physical and mental impairment, arranging for medical examination and obtaining medical records so that SSI/SSDI can effectively evaluate a claim.</p> <p>Advocacy also includes assisting clients with problems that prevent the award of SSI/SSDI benefits such as probation, parole and outstanding warrants. Advocacy includes assistance in overcoming post-entitlement obstacles. Staff represent clients at entitlement reviews and appeals with overpayment problems and cessation of benefits. Finally, if clients are ineligible for SSI/SSDI benefits, advocates refer clients to other resources including Veteran's Benefits, employment training and county assistance.</p>									
Deliverables:	168 Unduplicated Clients (UDC)									
Funding Source(s):	City's Human Services Agency (HSA) Department Workorder - 100%									
Selection Type	RFP 19-2019 Supplemental Security Income (SSI) Linked Medi-Cal Advocacy Services									
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC) (performance and financial)									

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BHS -SUD	Horizons Unlimited	\$1,882,057	\$3,669,450	\$1,787,393	7/1/23 - 6/30/25	7/1/23 - 6/30/27	\$829,496	\$726,038	\$ (103,458)	-12.47%
Requested Action	Amendment: No change in scope, term extension - Change in Service Level funding (increase or decrease annual funding)									
Purpose:	<p>The requested action is the approval of a contract amendment with Horizons Unlimited to extend the current contract term by two years from July 1, 2025 to June 30, 2027, and to increase the total funding to support the additional term. The subject contract is one of five contracts that is funded by federal Substance Use Block Grant (SUBG) funding specifically to provide substance use primary prevention services to youth, of which two are subject to Health Commission approval criteria. The State of California has been delayed in releasing its State Strategic Plan requirements, including service design, scope and vision updates. As a result, DPH has been unable to issue an RFP which is why the proposed contract is currently authorized under a sole-source waiver.</p> <p>The proposed extension term is designed to allow the State to release its SUD Primary Prevention Strategic Plan, receive public comment, publish the final plan and instruct counties on how to implement. This will be followed by the development of a DPH solicitation to reflect the updates. The Department has been advised by its State liaison that SUBG funding is written into federal law, and may not be cut without congressional action. As a result, DPH has been advised that the SUBG funding appears to be ongoing at this time.</p>									
Reason for Funding Change:	In FY25-26, the annual funding reduction represents a reduction to Federal American Rescue Plan Act (ARPA) grant funding, which was enacted in 2021 as a response to COVID. ARPA provided additional funds to address the effects of the COVID-19 pandemic for individuals with substance use disorders or services to minimize risks of developing a substance use disorder. A portion of the ARPA grant was dedicated by grant requirement to SUD Primary Prevention. This reduction in funding will not affect the scope of the SUD Primary Prevention scope, as the additional funding simply enabled additional cohorts of the same interventions already being provided.									
Service Description:	The goal of the SUD Primary Prevention is to prevent underage use, reduce the initiation of, and delay the onset of drug, alcohol, and other substances use by elementary, middle and high school youth through the implementation of four programmatic interventions: (1) evidenced-based Strengthening Families Program (SFP) (elementary, middle, and high schooler + caregivers), (2) locally innovative Communities Mobilizing for Change on Alcohol (CMCA) program (high schoolers), (3) locally innovative Youth Alcohol Prevention Coalition (YAPC) (high schoolers), and (4) evidenced-based Botvin LifeSkills (LST) (elementary, middle, and high schoolers). The services are provided at SFUSD schools, at agency facilities, and community centers.									
Deliverables:	Deliverables are reimbursed on a Fee-for-Service hourly basis across the the following 4 modalities: (1) Education (direct service), (2) Alternatives (direct service), (3) Information Dissemination (indirect hours), and (4) Community Based (indirect hours).									
Funding Source(s):	Federal SUBG Primary Prevention Set-Aside Funding (\$557,109 - 77%) and County General Fund (\$168,929 - 23%) = \$726,038									
Selection Type	21G.8 Grant Sole Source Waiver									
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC) (performance and financial)									

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BHS -SUD	Japanese Community Youth Council		\$3,697,981	\$3,697,981	7/1/23 - 6/30/25	7/1/23 - 6/30/27	\$820,056	\$710,008	\$ (110,048)	-13.42%
Requested Action	Amendment: No change in scope, term extension - Change in Service Level funding (increase or decrease annual funding)									
Purpose:	<p>The requested action is the approval of a contract amendment with Japanese Community Youth Council (JCYC) to extend the current contract term by two years from July 1, 2025 to June 30, 2027, and to increase the total funding to support the additional term. The subject contract is one of five contracts that is funded by federal Substance Use Block Grant (SUBG) funding specifically to provide substance use primary prevention services to youth. This contract is one of two of these contracts subject to Health Commission review criteria. The State of California has been delayed in releasing its State Strategic Plan requirements, including service design, scope and vision updates. As a result, DPH has been unable to issue an RFP which is why the proposed contract is currently authorized under a sole-source waiver.</p> <p>The proposed extension term was designed to allow the State to release its SUD Primary Prevention Strategic Plan, receive public comment, publish the final plan and instruct counties on how to implement. This will be followed by the development of a DPH solicitation to reflect the updates. The Department has been advised by its State liaison that SUBG funding is written into federal law, and may not be cut without congressional action. As a result, DPH has been advised that the SUBG funding appears to be ongoing at this time.</p>									
Reason for Funding Change:	In FY25-26, the annual funding reduction represents a reduction to Federal American Rescue Plan Act (ARPA) grant funding, which was enacted in 2021 as a response to COVID. ARPA provided additional funds to address the effects of the COVID-19 pandemic for individuals with substance use disorders or services to minimize risks of developing a substance use disorder. A portion of the ARPA grant was dedicated by grant requirement to SUD Primary Prevention. This reduction in funding will not affect the scope of the SUD Primary Prevention scope, as the additional funding simply enabled additional cohorts of the same interventions already being provided.									
Service Description:	<p>The goal of the SUD Primary Prevention program to prevent underage use, reduce the initiation of, and delay the onset of drug, alcohol, and other substances use by elementary, middle and high school youth through the implementation of four programmatic interventions: (1) evidenced-based Strengthening Families Program (SFP) (elementary, middle, and high schooler + caregivers), (2) locally innovative Communities Mobilizing for Change on Alcohol (CMCA) program (high schoolers) , (3) locally innovative Youth Alcohol Prevention Coalition (YAPC) (high schoolers), and (4) evidenced-based Botvin LifeSkills (LST) (elementary, middle, and high schoolers). The services are provided at SFUSD schools, at agency facilities and community centers.</p> <p>JCYC has 3 subcontractors that support the agency in delivering services: Samoan Community Development Center (SCDC), Southeast Asian Development Center (SEADC), and Community Youth Center of San Francisco (CYC)</p>									

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Deliverables:	<p>Deliverables are reimbursed on a Fee-for-Service hourly basis across the following four modalities: (1) Education (direct service), (2) Alternatives (direct service), (3) Information Dissemination (indirect hours), and (4) Community Based (indirect hours).</p> <p>While all direct services are provided in cohorts and there are no individual direct service, each agency has a set number of youth and parents to serve. For JCYC, the UDCs per intervention are: (1) SFP - 3 cohorts (36 youth, 36 parents), (2) Botvin LifeSkills - 120 youth , (3) CMCA - 33 youth, and (4) YAPC - 3 youth.</p> <p>Deliverables include the length of cohort tenure: (1) SFP - 14 sessions, (2) Botvin LifeSkills Elementary School - 8 sessions, (3) Botvin LifeSkills Middle School - 16 sessions, (4) Botvin LifeSkills High School - 10 sessions, and (5) CMCA and YAPC - 24 sessions.</p>									
Funding Source(s):	Federal SUBG Primary Prevention Set-Aside Funding (\$478,998 - 67%) and County General Fund (\$231,010 - 33%) = \$710,008									
Selection Type	21G.8 Grant Sole Source Waiver									
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC) (performance and financial)									

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SFHN/LHH	UCSF - School of Dentistry		\$1,971,451	\$1,971,451	7/1/2024 - 6/30/2025	7/1/2025 - 6/30/2028	\$536,940	\$548,438	\$ 11,498	2.14%
Requested Action	Continuing Services in a New Contract - No change in Scope									
Purpose:	The requested action is the approval of a new contract to continue existing dental services for Laguna Honda Hospital (LHH) residents for a term of 7/1/25 - 6/30/28 (three years), and a Total Contract Amount with Contingency of \$1,971,451. There is no change in scope.									
Reason for Funding Change:	The Department is requesting a Total Contract Amount of \$1,971,451, over 3-years, or an increase in the annual amount of \$11,498 reflecting a Cost of Doing Business increase for each year of the same three-year period.									
Service Description:	The UCSF School of Dentistry's dentists and registered dental assistants will continue to provide comprehensive dental services to residents of LHH. Services include, but are not limited to routine treatment and examinations, radiographs, cleanings and fillings, relines and repairs of dentures, fabrication of new full and partial dentures, extractions, fixed prosthodontics including crowns and bridges. Dental assessments are provided within 30 days for all new routine referrals, and within seven days for urgent referrals. Service provision may occur bedside to patients who are unable to come to the LHH Dental Clinic.									
Deliverables:	Four days of service (8 hours each day) per week.									
Funding Source(s):	City General Fund - 100%									
Selection Type	City's Administrative Code, Section 1.25 (d) (sole source waiver for Government to Government (G2G) entities)									
Monitoring	The SFDPH Program Administrator and UC Administrator are responsible for assisting and tracking all information related to the accomplishment of the performance indicators for this contract. As a contract that provides patient care services, its performance is reviewed annually by the Performance Improvement and Patient Safety Committees.									

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SFHN/LHH	Regents of University of California/UCSF (CPG)		\$5,353,407	\$5,353,407	7/1/2024 - 6/30/2025	7/1/2025 - 6/30/2028	\$1,532,900	\$1,551,712	\$ 18,812	1.23%
Requested Action	Continuing Services in a New Contract - No change in Scope									
Purpose:	The requested action is the approval of a new original agreement with the Regents of the University of California, UCSF Clinical Practice Group (CPG) for the continuation of existing specialty medical services provided to residents and patients of Laguna Honda Hospital (LHH) for a Total Contract Not to Exceed amount of \$5,353,407, and for a term of 7/1/25 - 6/30/28 (three years). The Health Commission previously approved these services in August 2024 for a one-year term to enable the Department to evaluate the possibility of bringing these services in-house, which was explored and not deemed feasible. As a result, the requested action is for the proposed new three-year contract.									
Reason for Funding Change:	The Department is requesting the approval a Total Contract Amount of \$5,353,407, which on an annual basis reflects an increase of \$18,812. The increase reflects rate adjustments that occurred under the new contract across the seventeen service categories. (Note, as this is a new contract, the prior year annual funding is included for comparison purposes).									
Service Description:	The purpose of this contract is to provide a range of specialty medical services to Laguna Honda Hospital residents, including Pathology, Dermatology, Nephrology, Neurology, Orthopedic Surgery, Plastic Surgery Services, Radiology, Rheumatology, Ophthalmology and Optometry, ECG Services, OHNS Services, Endocrinology Services, Infectious Diseases Services, Psychiatry Services, Cardiology Services, Pulmonary, Podiatry. Each service specialty has a defined schedule for service delivery availability to the LHH residents. This contract ensures that UCSF clinical services are available on-site at LHH, thus preventing unnecessary discharge and transportation to and from various sites.									

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Deliverables:	<p>The services delivered on-site, by specialty are described as follows:</p> <p><u>(1) Cardiology:</u> Provide a consulting cardiologist, including physician services for cardiology clinic coverage ; (\$54,000 max annually)</p> <p><u>(2) Dermatology:</u> Provide approximately 5 hours every other week over 52 weeks; (\$77,400 max annually)</p> <p><u>(3) ECG:</u> Provide ECG reading and interpretation; (\$54,000 max annually)</p> <p><u>(4) Endocrinology:</u> Provide professional services and consultation to carry out consultations and in-service education for LHH physicians and other staff; (\$53,112)</p> <p><u>(5) Infectious Diseases:</u> Provide professional services, consultations and clinic coverage; (\$180,576 max annually)</p> <p><u>(6) Nephrology:</u> Provide a consulting nephrologist; (\$204,912 max annually)</p> <p><u>(7) Neurology:</u> Provide 80 hours per month of clinical neurologist services;</p> <p><u>(8) Optometry:</u> Provide licensed optometrist services; (\$62,784 max annually)</p> <p><u>(9) Orthopedic Surgery & Hand:</u> Provide routine clinics as well as surgery consultation; (\$138,000 max annually)</p> <p><u>10) Otolaryngology:</u> Provide a consulting provider; (\$31,629 max annually)</p> <p><u>11) Pathology:</u> Provide autopsy, lab, refrigeration; (\$25k max annually)</p> <p><u>12) Psychiatry:</u> Provide weekly scheduled clinic appointments and rounding on inpatients; (\$246,848 max annually)</p> <p><u>13) Plastic Surgery:</u> Provide a consulting surgeon, and staff to clinic; (\$96,000 max annually)</p> <p><u>14) Podiatry:</u> Provide routine podiatry, including evaluation; (\$43,200 max annually)</p> <p><u>(15) Pulmonary:</u> Provide a primary representative to clinic, e-referrals to facilitate diagnostic evaluations; (\$35,724 max annually)</p> <p><u>(16) Radiology:</u> Provide clinical and professional supervision of the LHH Radiology Department;(\$88,368 max annually)</p> <p><u>(17) Rheumatology:</u> Provide professional consultation and rheumatology services; (\$62,784 max annually)</p>									
Funding Source(s):	General Fund - 100%									
Selection Type	City Administrative Code Section 1.25(d) (government to government entities)									
Monitoring	These services are monitored by the SFDPH Program Administrator and UCSF Administrator who are responsible for assisting and tracking all information related to the accomplishment of the performance indicators for this contract. As a contract that provides patient care services, performance is reviewed annually by the Performance Improvement and Patient Safety Committees.									

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Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)
SFHN	Regents of the University of California/UCSF (Tertiary Care)		\$8,400,000	\$0	*7/1/2021 - 6/30/2025	7/1/2025 - 6/30/2029	\$2,100,000	\$2,100,000		0.00%
Requested Action	Continuing Services in a New Contract - No change in Scope									
Purpose:	The requested action is the approval of a new contract for a proposed Total Contract Not to Exceed (NTE) Amount with Contingency of \$8,400,000 for the period of 7/1/2025- 6/30/29 (4.0 years). While this is a new contract, the services are ongoing with UCSF to provide Tertiary Care services, including comprehensive cardiac care and other highly specialized services unavailable at ZSFG.									
Reason for Funding Change:	The prior annual amount is provided for comparison purposes to the proposed annual amount in the new contract. While the proposed new contract does include rate adjustments on the billable amounts for the services, the annual contract amount will not exceed \$2,100,000. This authority has been set at \$2.1m for at least a decade and has never been exceeded. The Department does not anticipate an increase in either services, or rates that would cause this annual limit to be reached. Please note that there is no Contingency included in this contract, so the maximum annual amount is \$2.1m.☐									

DPH Contracts Report - June 2, 2025

Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)
Service Description:	<p>Patients covered under the terms of this Agreement by and between City and Contractor shall be under the care of physicians in SFHN and referred by these physicians to Contractor for specified Services. Population Served:</p> <ol style="list-style-type: none"> 1. Patients who meet the criteria for County Medical Assistance Program (CMAP) 2. Patients who meet the criteria for Healthy San Francisco (HSF) and who are the financial responsibility of SFHN 3. San Francisco County Jail Inmates who are not eligible for the Medi-Cal County Inmate Program (MCIP) 4. Additionally, any patient at ZSFG, regardless of residency (i.e. San Francisco resident or not), indigent or insured, will receive any necessary emergency perfusion services through this contract. <p>Subject to the availability of beds and services, the contractor will provide hospital, clinic and other services to the target population of patients referred by the SFHN or transferred to UCSF, only for medically necessary services not provided at SFHN. In other words, these services will not be provided on-site at ZSFGH. Inpatient services include Coronary Artery, Bypass Graft, Percutaneous Transluminal Coronary Angioplasty (PTCA)/Atherectomy, other cardiac surgeries, including valve procedures and other major cardiovascular procedures. Outpatient services include Cardiac Catheterization, Extracorporeal Shock Wave Lithotripsy, Mohs Surgery, Radiation Oncology (Excluding Stereotactic Radiosurgery), PET Scan, DEXA Study. Services also cover emergency perfusion provided by the contractor; these Services will be provided at ZSFG and be provided regardless of whether the patient is a San Francisco resident, indigent or has sponsored health care services. The services are provided on-site at ZSFGH due to the emergent need and are available to all patients because ZSFGH couldn't otherwise make the services available. The perfusion services are provided under the direction of the UCSF Cardio-Thoracic Surgeon, in coordination with the ZSFG Attending Trauma Surgeon.</p> <p>The contract allows for DPH to reimburse UCSF Doctors for providing these services. These services are not covered under the Affiliation Agreement. The estimated annual budget of 2.1 million dollars is an estimate of the actual amount of services, and is dependent on usage. Historically there have not been requests to increase the annual budget, and the annual usage varies from year to year. Reimbursement occurs only for actual costs.</p> <p>NON-COVERED SERVICES: Organ transplants and services, supplies and devices related to transplants (including evaluation and follow-up care, and ventricular assist devices when used as a bridge to transplant surgery) and bariatric surgery services are not covered under this Agreement. Patients requiring such services shall be referred for Medi-Cal coverage.</p>									
Deliverables:	Units of Services and Unduplicated Client Counts will reflect actual usage									
Funding Source(s):	General Fund - 100%									
Selection Type	San Francisco Administrative Code Chapter 1.25 G2G authority, effective 7/1/25 under the proposed new contract									
Monitoring	The ZSFG Department of Care Coordination pre-screens requests to ensure requested services are in-scope.									

DPH Contracts Report - June 2, 2025

Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)
BHS	Regents of the University of California (CWCM Minna Project/Roving Team)		\$17,480,417	\$17,480,417	7/1/2018 - 6/30/27*	7/1/25 - 6/30/30	\$3,121,503	\$3,121,503	\$ -	0.00%
Requested Action	Continuing Services in a New Contract - No change in Scope									
Purpose:	<p>The requested action is the approval of a new original agreement with UCSF Citywide Case Management (CWCM) to continue its existing Minna Project and Roving Team programs for the term of 7/1/25 – 6/30/30 (five years) for a Total Contract Amount with Contingency of \$17,480,417.</p> <p>Beginning in FY25-26, the single Citywide Case Management contract, CID# 1000010136, containing 11 programs is being separated into four total contracts , including the continuation of the original agreement *(term 7/1/2018-6/30/27). The proposed separation will simplify the Department’s contracting process by grouping programs within subcategories into unique contracts, thereby reducing the number of administrative owners overseeing each contract. This contract will require future approval by the Board of Supervisors. (Note: the separation of contracts is occurring prior to the end of the original term because the Department has access to new contracting authority (see below) and because the change will improve contract processing timing, the Department opted not to delay the change). Two of the four contracts are subject to Health Commission approval, of which this proposed contract is one of the two.</p>									
Reason for Funding Change:	There is no change to annual funding or to the scope.									
Service Description:	<p>Citywide Roving Team: The services provided by the Roving Team include behavioral health case management for formerly homeless individuals living in the Department of Homelessness and Supportive Housing’s Housing First Master Lease Program. The goal of this program is to maximize housing retention within the Housing First Master Lease Program by addressing the unmet behavioral health needs of residents. Services are designed to meet the cultural and linguistic needs of residents identified by on-site staff as having significant unmet behavioral health needs that could, if not addressed, lead to eviction and future episodes of homelessness.</p> <p>Minna Project: The goal is to provide behavioral health services to participants of the Minna Project, a transitional housing site with on-site supportive services for dually diagnosed, justice-involved adults. These services will help to stabilize clients coming from jails, hospitals, or homelessness, resulting in an overall reduction in the usage of crisis services. Services are designed to meet the cultural and linguistic needs of the participants of the Minna Project, comprised of formerly homeless, justice-involved adults with co-occurring mental health, substance abuse and medical problems, and limited experience living independently. The Minna Project prioritizes clients coming from residential treatment, Jail Behavioral Health Services, San Francisco Superior Courts – Mental Health Diversion and Collaborative Courts, the Community Assessment & Services Center (CASC), as well as monolingual Spanish speakers.</p>									

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Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)
Deliverables:	This contract is paid based on Fee-for-Service reimbursement. The funding, by unit of service rate is as follows: Citywide Roving Team: Hourly Rate: \$517.23; Contracted UOS: 3,091 hours (120 Unduplicated Client) Citywide Minna Project: Hourly Rate: \$602.88; FY 24-25 Contracted UOS: 2,550 hours (75 Unduplicated Clients)									
Funding Source(s):	Local Prop C: (\$1,537,500; 49%), County General Fund: (\$210,111; 7%), Homeless and Supportive Housing Dept Workorder: (\$966,468; 31%) and Fed MediCal: (\$407,424; 13%) = \$3,121,503 annually.									
Selection Type	Effective 7/1/25, this contract will be authorized under the City's new Administrative Code 1.25 (agreements with governmental agencies)									
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC) (performance and financial)									

DPH Contracts Report - June 2, 2025

Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)
BHS	Regents of the University of California (Citywide SUD System of Care)		\$7,358,299	\$7,358,299	*7/1/18 - 6/30/27	7/1/25 - 6/30/30	\$1,313,982	\$1,313,982	\$ -	0.00%
Requested Action	Continuing Services in a New Contract - No change in Scope									
Purpose:	<p>The requested action is the approval of a new original agreement with UCSF Citywide to continue its existing UC Citywide SUD System of Care programs, including Stimulant Treatment Outpatient Program (STOP) and Substance Use Disorder (SUD) Intensive Case Management (ICM), for the term of 7/1/25 – 6/30/30 (five years) for a Total Contract Amount with Contingency of \$7,358,299.</p> <p>Beginning in FY25-26, the single Citywide Case Management contract, CID# 1000010136, containing 11 programs is being separated into four contracts, including the continuation of the original agreement *(term 7/1/18-6/30/27). The proposed separation will simplify the Department’s contracting process by grouping programs by subcategories into unique contracts, thereby reducing the number of administrative owners of each contract. (Note: the separation of contracts is occurring prior to the end of the original term because the Department has access to new contracting authority (see below), and the proposal will improve contract processing timing, so the Department opted not to delay the change). Two of the four contracts are subject to Health Commission approval, of which this is one of the two contracts.</p>									
Reason for Funding Change:	There is no change in proposed annual funding or scope									
Service Description:	<p><u>Citywide STOP</u>: Outpatient substance use services to clients enrolled in UCSF's intensive case management programs, specializing in supporting clients stimulant use disorders and co-occurring mental health conditions or involvement in the criminal justice system.</p> <p><u>Citywide Substance Use Disorders Intensive Case Management (SUD ICM)</u>: Intensive case management to chronically intoxicated adults who are high users of the City's Sobering Center, Managed Alcohol Program, ambulances, emergency rooms, or hospitals.</p>									
Deliverables:	<p>This contract is paid on a Fee-For-Service basis. The funding, by unit of service rate is as follows:</p> <p><u>Citywide STOP</u>: Blended Rate Fee-For-Service; Hourly Rate: \$460.09; FY 24-25 Contracted UOS: 1,840 hours; Service Level of Care: Outpatient (45 unduplicated clients)</p> <p><u>Citywide ICM SUD</u>: Blended Rate Fee-For-Service; Hourly Rate: \$372.72; FY 24-25 Contracted UOS: 161 hours (20 unduplicated clients)</p>									
Funding Source(s):	City General Fund (\$630,688; 2%); State (\$239,153; 18%); and Federal MediCal (\$444,141; 34%) = \$1,313,982									
Selection Type	Effective 7/1/25, this contract, will be authorized under the City's new Administrative Code 1.25 (agreements with governmental agencies)									
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC) (performance and financial)									

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Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)
SFHN	Cross Country Staffing (RN)		\$9,900,000	\$9,900,000	07/01/2024 - 06/30/2025	07/01/2025 - 06/30/2026		\$9,900,000	\$ 9,900,000	0.00%
Requested Action	Continuing Services in a New Contract - No change in Scope									
Purpose:	The requested action is for approval of a new one-year contract with Cross Country Staffing to provide as-needed, temporary, Registered Nursing (RN) registry services across the San Francisco Health Network (SFHN) for a term of 7/1/25 - 6/30/26, and a Total Contract Amount with Contingency of \$9,900,000. DPH awarded two contracts to the top two highest ranked responsive proposers for RN registry services. Cross Country Staffing was ranked the highest and was deemed the Primary provider, and as such is awarded with a higher spending authority. Triage, LLC. (see below) was ranked 2nd. This is a continuation of existing services procured under a previously awarded (Primary vendor) contract that expires on 6/30/25.									
Reason for Funding Change:	The contracting structure has changed, so providing an annual FY24-25 contract amount won't accurately compare the cost of same-services between contract years. Previously, there were six contracts with combined registry services, for a total of \$25.2m. Although the specific scope of as-needed, temporary registry services is not changing under the new contract, the contractual structure is changing. There are two primary changes: (1) instead of combining all registry staff, including Registered Nurses, Nursing Ancillary and Clinical Support Staff (Non-RN) together in rolled-up registry contracts, effective 7/1/25, RN services and Non-RN ancillary services will be in separate contracts, and (2) instead of having one primary vendor and multiple back-up vendors, effective 7/1/25, there will be one Prime vendor contract and one Secondary (back-up) vendor contract for (a) RN registry services, and (b) Non-RN registry services. This will ensure utilization data transparency, clear and separated data, and easier access to requested data reports. This also will enable the Department to continue to track the RN-specific hiring initiatives against registry usage.									
Service Description:	Provide as-needed, temporary Registered Nurse (RN) Registry Staff, with clinical expertise to serve the San Francisco Health Network (SFHN), including but not limited to Zuckerberg San Francisco General Hospital (ZSFG), Laguna Honda Hospital (LHH), and any Ambulatory Care sites (Jail Health Services, Primary Care Health, Whole Person Integrated Care, Maternal Child Adolescent Health, and HIV Health Services).☐									
Deliverables:	Contractor will provide temporary as-needed RN nurses for SF Health Network. Services are performed on an hourly basis.									
Funding Source(s):	General Fund (100%)									
Selection Type	Sourcing Event No. 0000010494 As Needed, Temporary Registered Nurse Registry Staff									
Monitoring	The SFHN Chief Nursing Officer conducts quarterly business reviews with the vendor to review adherence to established key performance indicators and discusses plans of correction if necessary. Additionally internal DPH meetings are held monthly to assess registry usage and ongoing need. In addition, ZSFG and LHH nursing registry contracts performance is reviewed annually by the Performance Improvement and Patient Safety Committees under contract management and oversight.									

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Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)
SFHN	Triage, LLC (RN)		\$3,100,000	\$3,100,000	07/01/2024 - 06/30/2025	07/01/2025 - 06/30/2026		\$3,100,000	\$ 3,100,000	0.00%
Requested Action	Continuing Services in a New Contract - No change in Scope									
Purpose:	The requested action is for approval of a new one-year contract with Triage, LLC to provide as-needed, temporary, Registered Nursing (RN) registry services across the San Francisco Health Network (SFHN) for a term of 7/1/25 - 6/30/26, and a Total Contract Amount with Contingency of \$3,100,000. DPH awarded two contracts to the top two highest ranked responsive proposers for RN registry services. Triage, LLC was ranked 2nd and has been deemed the Secondary (back-up) vendor, as such spending authority will be lower than that allocated to the primary vendor, Cross Country Staffing (See above). This is a continuation of existing services procured under a previously awarded (primary vendor) contract that expires on 6/30/25.									
Reason for Funding Change:	The contracting structure has changed, so providing an annual FY24-25 contract amount won't accurately compare the cost of same-services between contract years. Previously, there were six contracts with combined registry services, for a total of \$25.2m. Although the specific scope of as-needed, temporary registry services is not changing under the new contract, the contractual structure is changing. There are two primary changes: (1) instead of combining all registry staff, including Registered Nurses, Nursing Ancillary and Clinical Support Staff (Non-RN) together in rolled-up registry contracts, effective 7/1/25, RN services and Non-RN ancillary services will be in separate contracts, and (2) instead of having one primary vendor and multiple back-up vendors, effective 7/1/25, there will be one Prime vendor contract and one Secondary (back-up) vendor contract for (a) RN registry services, and (b) Non-RN registry services. This will ensure utilization data transparency, clear and separated data, and easier access to requested data reports. This also will enable the Department to continue to track the RN-specific hiring initiatives against registry usage.									
Service Description:	Provide as-needed, temporary Registered Nurse (RN) Registry Staff, with clinical expertise to serve the San Francisco Health Network (SFHN), including but not limited to Zuckerberg San Francisco General Hospital (ZSFG), Laguna Honda Hospital (LHH), and any Ambulatory Care sites (Jail Health Services, Primary Care Health, Whole Person Integrated Care, Maternal Child Adolescent Health, and HIV Health Services). ☒									
Deliverables:	Contractor will provide temporary as-needed RN nurses for SF Health Network. Services are performed on an hourly basis. Registered Nurse: Specialty (Operating Room, Critical Care, Emergency Department, NICU, Labor & Delivery, Cath Lab, PeriOp, Acute HD, Radiology, Peds, Tele): \$102/hour; Overtime \$153/hour Registered Nurse: Non-Specialty: \$88/hour; Overtime \$132/hour									
Funding Source(s):	General Fund (100%)									
Selection Type	Sourcing Event No. 0000010494 As Needed, Temporary Registered Nurse Registry Staff									
Monitoring	The SFHN Chief Nursing Officer conducts quarterly business reviews with the vendor to review adherence to established key performance indicators and discusses plans of correction if necessary. Additionally internal DPH meetings are held monthly to assess registry usage and ongoing need. In addition, ZSFG and LHH nursing registry contracts performance is reviewed annually by the Performance Improvement and Patient Safety Committees under contract management and oversight.									

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Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)
SFHN	Cross Country Staffing (Ancillary)		\$9,900,000	\$9,900,000	07/01/2024 - 06/30/2025	07/01/2025 - 06/30/2026		\$9,900,000	\$ 9,900,000	0.00%
Requested Action	Continuing Services in a New Contract - No change in Scope									
Purpose:	The requested action is for approval of a new one-year contract with Cross Country Staffing to provide as-needed, temporary nursing ancillary (Non-RN) and clinical support staff positions across the San Francisco Network (SFHN) for a term of 7/1/25 -6/30/26, and a Total Contract Amount with Contingency of \$9,900,000. DPH awarded two contracts to the top two highest ranked responsive proposers for Non-RN registry services. Cross Country Staffing was ranked the highest and was deemed the Primary provider, and as such will be awarded with the higher spending authority. Tryfacta, Inc. (see below) was ranked 2nd. This is a continuation of existing services procured under previously awarded contracts that expire on 6/30/25.									
Reason for Funding Change:	The contracting structure has changed, so providing an annual FY24-25 contract amount won't accurately compare the cost of same-services between contract years. Previously, there were six contracts with combined registry services, for a total of \$25.2m. Although the specific scope of as-needed, temporary registry services is not changing under the new contract, the contractual structure is changing. There are two primary changes: (1) instead of combining all registry staff, including Registered Nurses, Nursing Ancillary and Clinical Support Staff (Non-RN) together in rolled-up registry contracts, effective 7/1/25, RN services and Non-RN ancillary services will be in separate contracts, and (2) instead of having one primary vendor and multiple back-up vendors, effective 7/1/25, there will be one Prime vendor contract and one Secondary (back-up) vendor contract for (a) RN registry services, and (b) Non-RN registry services. This will ensure utilization data transparency, clear and separated data, and easier access to requested data reports. This also will enable the Department to continue to track the RN-specific hiring initiatives against registry usage.									
Service Description:	Provide as needed temporary Nurse Ancillary (Non RN) and Clinical Support (CS) Staff, with clinical expertise as required by the City, to the San Francisco Health Network (SFHN), including but not limited to Zuckerberg San Francisco General Hospital (ZSFG), Laguna Honda Hospital (LHH), and any Ambulatory Care (Jail Health Services, Primary Care Health, Whole Person Integrated Care, Maternal Child Adolescent Health, and HIV Health Services) sites.									

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Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)
Deliverables:	<p>Contractor will provide as-needed, temporary nursing ancillary (Non-RN) and Clinical Support Staff Registry for SF Health Network. Services are performed on an hourly basis.</p> <p>Licensed Vocational Nurse (LVN) \$58.00/hour; Overtime \$78.30/hour Certified Nursing Assistant (CNA) \$38.00/hour; Overtime \$51.30/hour Medical Social Work (MSW) \$65.00/hour; Overtime \$87.75/hour Medical Evaluations Assistant (MEA) \$45.00/hour; Overtime \$60.75/hour Licensed Psychiatric Technician (LPT) \$38.00/hour; Overtime \$51.30/hour Unit Clerk \$43.50/hour; Overtime \$58.73/hour Nursing Staffing Assistant \$50.00/hour; Overtime \$67.50/hour OTHER: Surgical Procedures Technician (SPT) \$70.00/hour; Overtime \$94.50/hour</p>									
Funding Source(s):	General Fund (100%)									
Selection Type	Sourcing Event No. 0000010495 As Needed, Temporary Nursing Ancillary (Non-RN) and Clinical Support Staff Registry									
Monitoring	The SFHN Chief Nursing Officer conducts quarterly business reviews with the vendor to review adherence to established key performance indicators and discusses plans of correction if necessary. Additionally internal DPH meetings are held monthly to assess registry usage and ongoing need. In addition, ZSFG and LHH nursing registry contracts performance is reviewed annually by the Performance Improvement and Patient Safety Committees under contract management and oversight.									

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Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)
SFHN	Tryfacta Inc. (Ancillary)		\$2,600,000	\$2,600,000	07/01/2024 - 06/30/2025	07/01/2025 - 06/30/2026		\$2,600,000	\$ 2,600,000	0.00%
Requested Action	Continuing Services in a New Contract - No change in Scope									
Purpose:	The requested action is for approval of a new one-year contract with Tryfacta, Inc to provide as-needed, temporary nursing ancillary (Non-RN) and clinical support staff positions across the San Francisco Network (SFHN) for a term of 7/1/25 -6/30/26, and a Total Contract Amount with Contingency of \$2,600,000. DPH awarded two contracts to the top two highest ranked responsive proposers for Non-RN registry services. Tryfacta, Inc. was ranked 2nd, and therefore is the Secondary (back-up) vendor, and as such will be awarded with lower spending authority. Cross Country Staffing (see above) was ranked 1st. This is a continuation of existing services procured under previously awarded contracts that expire on 6/30/25.									
Reason for Funding Change:	The contracting structure has changed, so providing an annual FY24-25 contract amount won't accurately compare the cost of same-services between contract years. Previously, there were six contracts with combined registry services, for a total of \$25.2m. Although the specific scope of as-needed, temporary registry services is not changing under the new contract, the contractual structure is changing. There are two primary changes: (1) instead of combining all registry staff, including Registered Nurses, Nursing Ancillary and Clinical Support Staff (Non-RN) together in rolled-up registry contracts, effective 7/1/25, RN services and Non-RN ancillary services will be in separate contracts, and (2) instead of having one primary vendor and multiple back-up vendors, effective 7/1/25, there will be one Prime vendor contract and one Secondary (back-up) vendor contract for (a) RN registry services, and (b) Non-RN registry services. This will ensure utilization data transparency, clear and separated data, and easier access to requested data reports. This also will enable the Department to continue to track the RN-specific hiring initiatives against registry usage.									
Service Description:	Provide as needed temporary Nurse Ancillary (Non RN) and Clinical Support (CS) Staff, with clinical expertise as required by the City, to the San Francisco Health Network (SFHN), including but not limited to Zuckerberg San Francisco General Hospital (ZSFG), Laguna Honda Hospital (LHH), and any Ambulatory Care (Jail Health Services, Primary Care Health, Whole Person Integrated Care, Maternal Child Adolescent Health, and HIV Health Services) sites.									

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Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)
Deliverables:	<p>Contractor will provide as-needed, temporary nursing ancillary (Non-RN) and Clinical Support Staff Registry for SF Health Network. Services are performed on an hourly basis.</p> <p>Licensed Vocational Nurse (LVN) \$57.20/hour; Overtime \$85.80/hour Certified Nursing Assistant (CNA)\$45.70/hour; Overtime \$68.55/hour Medical Social Work (MSW) \$58.50/hour; Overtime \$87.75/hour Medical Evaluations Assistant (MEA) \$39.00/hour; Overtime \$58.50/hour Licensed Psychiatric Technician (LPT) \$37.70/hour; Overtime \$56.55/hour Unit Clerk \$39.00/hour; Overtime \$58.50/hour Nursing Staffing Assistant \$45.50/hour; Overtime \$68.25/hour OTHER: Surgical Procedures Technician (SPT) \$68.90/hour; Overtime \$103.35/hour</p>									
Funding Source(s):	General Fund (100%)									
Selection Type	Sourcing Event No. 0000010495 As Needed, Temporary Nursing Ancillary (Non-RN) and Clinical Support Staff Registry									
Monitoring	The SFHN Chief Nursing Officer conducts quarterly business reviews with the vendor to review adherence to established key performance indicators and discusses plans of correction if necessary. Additionally internal DPH meetings are held monthly to assess registry usage and ongoing need. In addition, ZSFG and LHH nursing registry contracts performance is reviewed annually by the Performance Improvement and Patient Safety Committees under contract management and oversight.									