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 (%)	
внѕ	Health Right 360 - Fiscal Intermediary	\$9,900,000	\$9,900,000	\$0	01/01/24 - 6/30/25	1/1/24-12/31/25	\$3,325,904	\$1,092,467	\$ (2,233,437)	-67.15%	
Requested Action	Amendment: Change in scope, term extension, change in funding										
Purpose:	The requested action is the approval of an Amendment with Health Right 360 (HR360) for term of 1/1/24-12/31/25. There is no change to the Not to Exceed (NTE) Contract Amount of \$9,900,000. The purpose of this contract is to provide program administrative support for specific DPH programs. The services were recently solicited through SFGOV-0000008668 - BHS and SFHN Program Administration Services and the proposed extension will allow for the transition to the selected vendor. The contract is authorized under Administrative Code Section 21.42. Approval of the proposed amendment serves as the Health Commission's corresponding approval of the use of the Administrative Code Section 21.42, sole source waiver. HR360 is reimbursed a 12 percent indirect rate under the subject contract, so could be reimbursed up to \$132k.										
Reason for Funding Change:	The annual difference is due to adjustments to reflect the following: 1) the proposed extension is for six months, whereas the prior annual amount is for 12 months, and (2) to reflect the proposed funding reduced by services and programming that will be provided by civil service instead of through the proposed contract, effective in FY25-26.										
Service Description:	Fiscal Intermediary Services (Fiscal and Human Resource Management Services) includes contract employee payroll and benefits, and payment and tracking of programmatic expenses.										
Deliverables:	Fiscal Intermediary Services (Fiscal and Human Resource Management Services) includes budget monitoring, contract employee payroll and benefits, and payment of programmatic expenses.										
Funding Source(s):	General Fund (70%), Federal (11%), Work Order (17%), State (2%)										
Selection Type	Administrative Code Section 21.42 Recommendation for 21.42 usage based on survey the availability of non profit providers for the health and behavioral health services and support services. Services are:  1. Unique to SFDPH 2. Consistent with the its mission and goals 3. Require specialized knowledge, training, personnel, facilities or other resources that are known to be provided by a limited number of non-profit contractors										
Monitoring	This program is subject to ar	nnual Fiscal and Comp	liance monitoring.								

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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 (%)	
	San Francisco Community		\$385,440	\$385,440	*10/01/15 -	10/01/2024 -	\$336,000	\$357,500	\$ 21,500	6.40%	
	Clinic Consortium				9/30/24	9/30/2025			,		
Requested	Continuing Services in a New Contract - No Change in Scope										
Purpose:	The requested action is for approval of a new Original Agreement with the San Francisco Community Clinic Consortium (SFCCC) to continue administering the Community HealthCorps, a members program with federal agency, AmeriCorps, for the term from 10/01/2024 through 09/30/2025 (one year), for a Total Contract Amount with Contingency of \$385,440. Community HealthCorps is the largest health-focused, national AmeriCorps program that links medically underserved populations with community health centers (CHC) to provide culturally appropriate, preventive, and primary health-care services. As the administrator, SFCCC charges SFDPH for the Community HealthCorps members that are placed in DPH health care settings (e.g. primary care clinics, Whole Person Integrated Care, Value Based Care, etc.). This contract will replace the current contract with SFCCC, CID:100002617. The previous contract and the proposed new contract are for the same services. The previous contract amount is included for comparison purposes. This contract is retroactive due to staffing shortage issues in the Contract's Office and a delay in the City Attorney determining appropriate procurement authority.   SFCCC has been providing these services since July 1, 2011 and is the designated program sponsor by the National Association of Community Health Centers, Inc. SFCCC is responsible for the management and fiscal control of the Community HealthCorps program. The contract is authorized under Administrative Code Section 21.42. Approval of the proposed amendment serves as the Health Commission's corresponding approval of the use of the Administrative Code Section 21.42, sole source waiver.										
Funding Change:	The administrative cost per member has increased, which has resulted in an increase in overall contract cost. The annual rate for a member for FY 23-24 (for 12 members) was \$28,000 per member, while the cost for a member for FY 24-25 is \$32,500.										
Service	SFCCC will recruit members into the Community HealthCorps program and shall provide member's training, development, living allowance and health care insurance coverage in accordance to AmeriCorps'										
Description:	requirements.										
Deliverables:	Successfully place 11 Community HealthCorps members into DPH health care settings.										
Funding Source(s):	General Fund										
Selection Type	Administrative Code Section 21.42 Recommendation for 21.42 usage based on survey the availability of non profit providers for the health and behavioral health services and support services.  Services are:  1. Unique to SFDPH  2. Consistent with the its mission and goals  3. Require specialized knowledge, training, personnel, facilities or other resources that are known to be provided by a limited number of non-profit contractors										
Monitoring	Services will be monitored by				•	•	•				

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