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	**Hatchuel Tabernik & Associates**	**$3,927,282**	**$4,488,559**	**$561,277**	**7/1/2018 - 6/30/2025**	**7/1/2018 - 6/30/2026**	**$963,795**	**$963,795**	**$ -**	**0.00%**
Requested Action	Amendment: No change in scope - term extension - no change to annual funding level									
Purpose:	The requested action is for the approval of a contract amendment with Hatchuel Tabernik & Associates (HTA). HTA provides support to the Department for the implementation of two mandatory state-wide initiatives, the Behavioral Health Service Act (BHSA) (formerly Mental Health Service Act (MHSA)) and CalAIM. This contract was previously approved at the 11/7/23 Health Commission for a total NTE of $3,927,282 and a term of 7/1/18 - 6/30/25. The proposed action will extend the contract term by one year from 6/30/25 - 6/30/2026 and increase the total contract Not-To-Exceed (NTE) amount by $561,277, or an amount of $4,488,559.									
Reason for Funding Change:	The Department is requesting the approval Total Contract Amount amount of $4,488,559, including $115,655 in contingency or an increase of $561,277, to support these services at the current annual funding level through 6/30/26. There is no change in the annual funding between FY24-25 and FY25-26.									
Service Description:	HTA assists DPH with implementation of BHSA and CalAIM through the following activities: 1) MHSA General Program Coordination & Technical Support including supporting and coordinating SFDPH data collection activities and program planning, and providing technical assistance with various special projects. 2) Non-MHSA General Program Coordination & Technical Support including planning and implementation of multiple communication strategies, including for the CalAIM initiative, designed to strengthen the continum of care and integrate physical health care. 3) Planning and Assessment for Workforce Education and Training including project management. 4) MHSA Innovation Program Support including coordinating data collection activities, program planning, program implementation, budgeting activities, and providing technical assistance to SFDPH for innovation projects.									
Deliverables:	This is a Fee For Service (FFS) contract to fund progam staff to continue the data collection, program planning and technical assistance described above.									
Funding Source(s):	State Behavioral Health Service Act (BHSA) $385,835 40% CalAIM Implementation Continuing Project (General Fund) $382,960 40% MH Adult HB Court Implementation Continuing Project (State) $195,000 20%									
Selection Type	Selected through Approved Qualified Vendor List resulting from Request for Qualifications RFQ36-2017.									
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC) and the DPH Program Administrator overseeing these services.									

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 (%)
DPH	**Santa Cruz County**		**$1,489,500**	**$1,489,500**	***07/01/2022 - 06/30/2025**	**07/01/2025 - 06/30/2028**	**$413,750**	**$413,750**	**$ -**	**0.00%**
Requested Action	Continuing Services in a New Contract - No change in Scope									
Purpose:	The requested action is the approval of a new agreement to continue existing services with the County of Santa Cruz for a Total Contract Amount with Contingency of $1,489,500 and a term of three years from 7/1/25 to 6/30/28. San Francisco participates in the County-Based Medi-Cal Administrative Activities (CMAA) program which is administered by the California Department of Health Care Services (DHCS), where DHCS reimburses Local Governmental Agencies (LGAs) for activities that promote and maintain the Medi-Cal program. The County of Santa Cruz is the designated "Host County" chosen by the statewide LGA Consortium to serve as the administrative and fiscal intermediary between DHCS and all participating LGAs. As a participant in CMAA, each LGA (e.g. San Francisco) enters into a contract with the County of Santa Cruz to pay its share of the participation fees and to benefit from the activities performed by Santa Cruz County on behalf of the LGAs.									
Reason for Funding Change:	Under this new contract, there is no proposed change to the annual funding levels (the current funding level is included for comparison purposes).									
Service Description:	Dept. of Public Health staff deliver MediCal Administrative Activies (MAA) that are claimed and reimbursed as a result of this contract. The County of Santa Cruz has been selected to administer these programs and serve as the host county on behalf of the State Dept. of Health Care Services.									
Deliverables:	The role of the Host County includes maintaining the CMAA trust fund, to hold and account for participation fees paid by the LGA members of the LGA Consortium, paying the DHCS CMAA administrative costs, overseeing all CMAA contracts between the LGAs and DHCS, paying LGA consultant costs, providing quarterly revenue/expenditure reports and an annual budget, and paying costs related to coordinating an annual CMAA Conference. Renewing this agreement is necessary for San Francisco to continue participating in the CMAA revenue program.									
Funding Source(s):	General Fund 100%									
Selection Type	Administrative Code 1.25 (G2G waiver)									
Monitoring	The contracted services will be monitored by the DPH Program Administrator overseeing these services.									

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 - DSAAM OTOP**		**$45,283,269**	**$45,283,269**	***7/1/18 - 6/30/27**	**07/01/2025 - 6/30/2030**	**$8,086,298**	**$8,086,298**	**$ -**	**0.00%**
Requested Action	Continuing Services in a New Contract - No change in Scope									
Purpose:	The requested action is for the approval of a new original agreement 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 for the term of 07/01/2025 through 6/30/30 (five years) for a Total Contract Amount with Contingency of $45,283,269 Beginning in FY 25-26, the single DSAAM Contract CID 1000010465, containing multiple programs is being separated into two contracts, ("OTOP and OBIC") and the original agreement originally approved through 6/30/27 will end early on 6/30/25. The proposed separation will simplify the Department's contracting process by grouping programmatic subcategories into two unique contracts, thereby reducing the number of administrative owners overseeing each contract, both within DPH and UC. This contract will require future approval by the Board of Supervisors. Both new contracts are subject to Health Commission approval, of which this proposed contract is one of two. The OBIC contract will be presented at a future Health Commission meeting.									
Reason for Funding Change:	There is no change to annual funding or to the scope.									
Service Description:	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 Opiate Treatment Outpatient Program (OTOP) – Ancillary Services: The mission of this program is same as the Opiate Treatment Outpatient Program (OTOP). The target population for OTOP Medication-Assisted Treatment (MAT) services are medical-ly/psychiatrically compromised individuals who meet the criteria for an Opioid Use Disorder.									

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:	DSAAM Opiate Treatment Outpatient Program (OTOP): FFS Total UDC: 911 ODS NTP Methadone Dosing: 91,534 UOS x $18.29 ODS NTP MAT Buprenorphine (Mono): 1,499 UOS x $37.04 ODS NTP MAT Buprenorphine (Combo): 1,249 UOS x $37.61 ODS NTP Individual Counseling: 6,996 UOS x $77.29 ODS NTP - Group Counseling: 5 UOS x $17.18 ODS NTP - Care Coordination (AOD Counselor): 15 UOS x $77.29 ODS NTP - New Client Intake : 300 UOS x $160.57 SA Sec Prev Outreach (CM) 4,466 UOS x $77.29 DSAAM Opiate Treatment Outpatient Program (OTOP) – Bayview Van: FFS Total UDC: 71 ODS NTP Methadone Dosing: 11,365 UOS x $18.29 ODS NTP MAT Buprenorphine (Mono): 1 UOS x $37.04 ODS NTP MAT Buprenorphine (Combo): 1 UOS x $37.61 ODS NTP Individual Counseling: 1,106 UOS x $77.29 ODS NTP - Care Coordination (AOD Counselor): 8 UOS x $77.29 ODS NTP - New Client Intake : 6 UOS x $160.57 DSAAM Opiate Treatment Outpatient Program (OTOP) – Ancillary Services: Cost Reimbursement SA Sec Prev Outreach: 7,287 US x $237.00 Total UCD: 100									
Funding Source(s):	Federal MediCal (19%), State MediCal (10%), General Fund (31%), Prop C Homeless (14%), Opioid Settlement (27%)									
Selection Type	Administrative Code 1.25 (G2G)									
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC).									

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	**Asian Pacific Islander Wellness Center DBA San Francisco Community Health Center**	**$0**	**$6,411,250**	**$6,411,250**	**-**	**07/01/2025 - 06/30/2030**	**$870,833**	**$1,112,316**	**$ 241,483**	**27.73%**
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 Asian Pacific Islander Wellness Center DBA San Francisco Community Health Center to continue Night Navigation and Daytime Case Management services for the term of 7/1/25 – 6/30/30 for a Total Contract Amount with Contingency of $6,411,250. The new contract is authorized under RFP 10009.									
Reason for Funding Change:	The increase in total annual funding in FY25-26 reflects an increase in staffing of the night navigator and the case manager positions from one to three.									
Service Description:	The purpose of the Street Health Night Navigation and Daytime Case Management Services program is to reduce fatal drug overdoses through connecting people experiencing homelessness (PEH) with substance use disorders (SUD) to ongoing SUD treatment, including assisting clients in accessing telehealth medications for opioid use disorder (MOUD) treatment, accessing inpatient treatment for substance use disorders, accessing other necessary services such as transportation, and supporting Recovery Engagement to Start Treatment for Overdose Response Equity (RESTORE) program clients in reaching their SUD treatment goals. The Street Health Night Navigation and Daytime Case Management Program will provide: (1) ADA-compliant transportation services, using personal vehicles, taxi vouchers, or access to ride-share services to transport People Experiencing Homelessness (PEH) with substance use disorder (SUD) between priority neighborhoods, RESTORE sites, and Medications for Opioid Use Disorder (“MOUD”) site(s) to receive services such as shelter/house and substance abuse disorder treatments. (2) Night Navigation Deploying night navigators in high priority neighborhoods, who will navigate clients to substance use treatment. Navigation includes assisting clients in accessing telehealth medications for opioid use disorder (MOUD) treatment. (3) Daytime Case Management, working with clients enrolled in the Recovery Engagement to Start Treatment for Overdose Response Equity (RESTORE) program to coordinate access to care.									
Deliverables:	Cost Reimbursement / Units of Service 32,400 x $35.08219 hourly rate / Unduplicated Clients 14,350									
Funding Source(s):	Opioid Settlement Funds (85%) Prop C (15%)									
Selection Type	RFP 10009 - Night Navigation and Daytime Case Management Services for the Department of Public Health									
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC)									

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	**LanguageLine Solutions**	**$0**	**$9,408,000**	**$9,408,000**	**N/A**	**08/01/2025 - 07/31/2027**	**$4,200,000**	**$4,200,000**	**$ -**	
Requested Action:	Continuing Services in a New Contract - No change in Scope									
Purpose:	The requested action is the approval to a new original agreement with LanguageLine Solutions to continue to provide comprehensive interpreter service for patients of the San Francisco Health Network (SFHN) and the Population Health Division for the two-year term of 08/01/2025 - 07/31/2027, and a Total Contract Amount, with Contingency, of $9,408,000. This service was recently solicited, and Languageline Solutions was selected to replace the existing vendor. While the solicitation allows for a longer term than the proposed two-years, the Department is proposing a shorter term while it determines whether it will rebid the services to obtain Epic integrated video interpretation services, as well as to potentially reflect technological changes in this field.									
Reason for Funding Change:	The annual funding, both current and proposed, reflects an average monthly usage of $350,000, or $4,200,000 annually. Any growth in demand would be covered by the contingency. In 2024, there were 450,000 requests for interpretation services.									
Service Description:	LanguageLine Solutions must provide interpreter to support patients, residents, and clients receiving care across all DPH entities, including SFHN and Population Health in each of the four service modes at a minimum in each of the 87 languages listed in the Solicitation Event, with the following nine (9) languages being the most used: 1. Spanish, 2. Cantonese, 3. Vietnamese, 4. Mandarin, 5. Russian, 6. Taishanese, 7. Tagalog, 8. Arabic, 9. Korean									
Deliverables:	Interpreter Modes/Services Are As Followed: Over-The-Phone Interpreter Services ("OPI") = Rate of $0.67/Per Minute; Video-Remote Interpreter Services ("VRI") = $0.95/Per Minute; Video-Remote American Sign Language ("ASL") = $1.50/Per Minute; In-Person American Sign Language ("ASL") = Optional & Not Scored In Event.									
Funding Source(s):	General Fund 100%									
Selection Type	Sourcing Event ID: SFGOV-0000010391: COMPREHENSIVE INTERPRETER SERVICES FOR THE DEPARTMENT OF PUBLIC HEALTH - AMENDMENT #1									
Monitoring	The services are monitored by the SFDPH Program Administrator overseeing this service, who monitors the response time for the provision of interpretation using Tier 1 languages, as well as the quality of interpretation provided. Additionally, as this is a contract that provides patient care services, performance is reviewed annually by the Performance Improvement and Patient Safety Committees.									

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	**Edgewood Center for Children and Families**	**$0**	**$6,373,228**	**$6,373,228**	*** 7/1/23 - 6/30/25**	**7/1/2025 - 6/30/2029**	**$1,372,394**	**$1,372,394**	**$ -**	**0.00%**
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 Edgewood Center for Children and Families (Edgewood) to continue their existing Wraparound program services for the term of 7/1/25 – 6/30/29 (four years), for a Total Contract Amount with Contingency of $6,373,228. This contract provides the mental health specialty services component of the City's Human Services Agency (HSA) and Juvenile Probation Department's (JPD) Wraparound Services program. The Wraparound Services program is for children and families involved, and/or at risk for involvement with Child Welfare, and/or Juvenile Probation.									
Reason for Funding Change:	There is no change to the proposed annual funding level, with the current year included only for comparison purposes.									
Service Description:	The San Francisco Human Services Agency (HSA), in partnership with Juvenile Probation issued a solicitation for one non-profit provider to oversee a Wraparound Services program for children and their families involved or at risk for involvement with Child Welfare and/or Juvenile Probation. As part of the portfolio of services to be available, the successful provider would be responsible for the provision of speciality mental health care services as a critical component in the success of the program, and would need to enter into a separate contract directly with the Department of Public Health. This contract would allow MediCal reimbursement to occur, among other benefits. HSA selected Seneca Families of Agencies as their service provider, who partnered with Edgewood to provide the specialty mental health services. As a result, the Department is entering into two contracts for the provision of outpatient mental health services in support of the Wraparound Services program. The subject contract with Edgewood is one of the two contracts. Wraparound is a collaborative approach to care that encourages coordination across agencies, disciplines, and communities to enhance outcomes for at-risk children and families. It provides children and youth who have complex needs with comprehensive and intensive, coordinated, highly individualized interventions and linkage to services. The Wraparound model enhances safety, permanency, and well-being for children and youth consistent with state and federal mandates. The goal of this contract is to provide the skills and support necessary for youth to function in their communities, and in family and family-like environments. Services covered under this contract include Comprehensive Assessments, Intensive Care Coordination (ICC), In-Home Behavioral Support (IHBS), Individual/Family Therapy, Targeted Case Management, Collateral, Crisis Intervention, and Medication Management. Providers are also required to travel up to 90 miles to provide care.									
Deliverables:	<u>FY 25/26: Outpatient (Intensive) Blended Rate (Fee-for-Service):</u> Outpatient Services (Mode 15): $1,372,394 Contract Award / $479.76 Rate = 2,860.58 UOS UDC (annual): 35									

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 (%)
Funding Source(s):	Annual Award Total $1,372,394 Fed MediCal: $661,013 (48%) State Realignment: $394,633 (29%) Human Services Agency Workorder: $108,586 (8%) County General Fund: $208,162 (15%)									
Selection Type	HSA RFQ Request for Proposals #1159 for: FCS Wraparound Services for Child Welfare Families									
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC) & Other (report to HSA & MHSA)									

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	**Seneca Family of Agencies**	**-**	**$19,087,988**	**$19,087,988**	***7/1/23 - 6/30/25**	**7/1/2025 - 6/30/29**	**$5,668,663**	**$4,035,345**	**$ (1,633,318)**	**-28.81%**
Requested Action	Continuing Services in a New Contract - Change in Scope									
Purpose:	The requested action is the approval of a new original agreement with Seneca Family of Agencies to continue its existing Long Term Connections – Wraparound Program for the term of 7/1/25 – 6/30/29 for a Total Contract Amount with Contingency of $19,087,988. This contract supports the integration of Specialty Mental Health Services for children, youth, and families in child welfare and juvenile probation placements. In addition, it supports Wraparound services to non system-involved/dependent youth through the support of MHSA/BHSA Full Service Partnership (FSP) Funding. This contract will require future approval by the Board of Supervisors.									
Reason for Funding Change:	In FY25-26, Seneca will be opening a new 10-day Enhanced Short Term Residential Program (ESTRTP) in partnership with DPH and HSA. Both departments have reallocated existing funding to support the establishment of this new program which will expand acute placement options for foster care youth. This new program, in a completely separate and existing Seneca contract, is part of a crisis continuum pilot. The Department does not anticipate that this reallocation will result in a service reduction in this contract, but instead the funding realignment will reflect and direct funding to match expected service usage rates.									
Service Description:	The San Francisco Human Services Agency (HSA), in partnership with Juvenile Probation issued a solicitation for one non-profit provider to oversee a Wraparound Services program for children and their families involved or at risk for involvement with Child Welfare and/or Juvenile Probation. As part of the portfolio of services to be available, the successful provider would be responsible for the provision of speciality mental health care services as a critical component in the success of the program, and would need to enter into a separate contract directly with the Department of Public Health. This contract would allow MediCal reimbursement to occur, among other benefits. HSA selected Seneca Families of Agencies as their service provider, who partnered with Edgewood to provide the specialty mental health services. As a result, the Department is entering into two contracts for the provision of outpatient mental health services in support of the Wraparound Services program. The subject contract with Seneca is one of the two contracts. Wraparound is a collaborative approach to care that encourages coordination across agencies, disciplines, and communities to enhance outcomes for at-risk children and families. It provides children and youth who have complex needs with comprehensive and intensive, coordinated, highly individualized interventions and linkage to services. The Wraparound model enhances safety, permanency, and well-being for children and youth consistent with state and federal mandates. The goal of this contract is to provide the skills and support necessary for youth to function in their communities, and in family and family-like environments. Services covered under this contract include Comprehensive Assessments, Intensive Care Coordination (ICC), In-Home Behavioral Support (IHBS), Individual/Family Therapy, Targeted Case Management, Collateral, Crisis Intervention, and Medication Management. Providers are also required to travel up to 90 miles to provide care. Under this new contract, there is one change in that the proposed contract intentionally will have two cost centers, as opposed to one. While having two cost centers will clarify the expectations, it does not change the existing target population. This change will separate out the services provided to youth and families already involved in the child welfare, and/or juvenile probation ("Dependent Youth") from non-dependent youth. Non-dependent youth and families are not involved in child welfare and juvenile probation systems, but are at risk for out of home placement and/or have high acuity needs (e.g., post inpatient psychiatric hospitalization). Services covered under this contract include Comprehensive Assessments, Intensive Care Coordination (ICC), In-Home Behavioral Support (IHBS), Individual/Family Therapy, Targeted Case Management, Collateral, Crisis Intervention, and Meds Management. The non-dependent programming is supported through MHSA/BHSA Full Service Partnerhip (FSP) funding.									

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:	System-Involved WRAP FY 25/26 Outpatient Blended Rate (Fee-for-Service): Outpatient Services (Mode 15): $2,792,149 / $481.74 = 5,796 UOS UDC (annual): 70 Non-Dependent WRAP FY 25/26 Outpatient Blended Rate (Fee-for-Service): Outpatient Services (Mode 15): $779,005 / $436.92= 1,783 UOS Other Non-MediCal Client Support Exp (Mode 60): $464,191 UDC (annual): 20									
Funding Source(s):	Annual Funding: $4,035,345 FY25/26: System-Involved WRAP Total Annual $2,792,149 Fed MediCal: $ 906,017 (32%) State Realignment: $567,043 (20%) Human Services Agency Workorder: $349,680 (13%) County General Fund: $969,409 (35%) FY25/26: Non- Dependent WRAP Total Annual $1,243,196 Fed MediCal: $389,502 (31%) State Realignment: $389,503 (31%) MHSA Full Service Partnership: $464,191 (38%)									
Selection Type	HSA RFQ Request for Proposals #1159 for: FCS Wraparound Services for Child Welfare Families									
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC) & Other (report to HSA & MHSA)									

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 (%)
PHD-CHEP	**Native American Health Center**	**$0**	**$3,136,000**	**$3,136,000**	***7/1/20 - 6/30/25**	**7/1/25 - 6/30/29**	**$138,756**	**$700,000**	**$ 561,244**	**404.48%**
Requested Action	Continuing Services in a New Contract - Additional scope									
Purpose:	The requested action is the approval of a new contract with the Native American Health Center (NAHC) for a Total Contract Amount with Contingency of $3,136,000 and a contract term of 07/01/2025 - 06/30/2029 (4 years). The purpose of the contract is to provide HIV, HCV and STD/STI Testing, Treatment and Linkage Services, and under this new contract to include Community Wellness services. While the exception of the Community Wellness services, this contract will continue all the services from the previous contract with NAHC. The new component of the solicitation included Community Wellness to provide wrap-around services including harm reduction, peer support training, health education and linkages to resources.									
Reason for Funding Change:	The Department is requesting approval of a New Contract Amount with Contingency of $3,136,000 including an annual increase of $561,244 annually due to the addition of Community Wellness services under the solicitation.									
Service Description:	The target population is all San Francisco residents who qualify, regardless of race, ethnicity, national origin, gender, or sexual orientation, with focused expertise to meet the unique cultural needs of San Francisco residents suffering disparate and negative impacts from public health related issues specifically within the Native American/American Indian Community. Community Wellness and Integrated HIV, HCV, and STD/STI Testing, Treatment, and Linkage Services includes wrap-around services that consist of health education and wellness workshops as well as linkages to health care resources and vaccination services, i.e., COVID-19, Monkeypox, HIV, HCV, other emerging infectious diseases. Integrated HIV, HCV, and STD/STI testing, treatment is provided in alignment with the Department's testing policies and standards of care. Services also include conducting client assessments to identify housing and food needs, as well as education on chronic health conditions like diabetes, heart disease, and hypertension. Monthly peer support and training sessions under the new contract will also include specific trainings on violence prevention, harm reduction, and behavioral health stigma reduction. Monthly peer support will also include restorative healing sessions. Under the new contract, there will also be the development of culturally relevant materials, trauma-informed community healing and drumming circles, Native American/American Indian-centered storytelling, expressive arts, community rituals, and/or related practices, and peer support network development.									
Deliverables (Annual):	This is a Cost Reimbursement contract. HIV, HCV, and STD/STI Tests $300,000/1000 Tests = $300.00/test Health Education and Community Wellness Promotion Hours $134,870/500 Hours = $269.74/hr. (added in subject new contract) Community Wellness Peer Support and Training Hours $134,865/200 Hours = $674.32/hr. (added in subject new contract) Community Wellness Linkages to Health Care/Wrap-Around Service Hours $130,265/200 Hours = $651.33/hr. (added in subject new contract)									
Funding Source(s):	100% General Fund									
Selection Type	RFP 9847 Category 1: Community Wellness; and Integrated HIV/HCV, and STD/STI Testing, Treatment, and Linkage Services									
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC)									