Div.	Contractor	Current Total Contract Not to	Proposed Total Contract	Change in Total	Current Contract Term	Proposed Contract Term	Prior Annual	Proposed Annual	Annual	Annual	Requested Action
		Exceed (NTE) Amount with	NTE Amount with	Contract Amount			Amount without	Amount without	Difference	Difference (%)	
		Contingency	Contingency				Contingency	Contingency			
MCAH - CHDP, CHEP, BHS,	Facente Consulting	\$1,741,249	\$3,430,326	\$1,689,077	01/01/18 - 12/31/23 (6	01/01/18 - 06/30/25	\$317,077	\$833,230	\$ 516,15	3 61.95%	Amendment
DPC					Years)	(7.5 Years)					

<u>Purpose:</u> The requested action is the approval of a contract amendment with Facente Consulting to increase the Total Contract Amount with Contingency to an amount of \$3,430,326, an increase of \$1,689,077, and to extend the term by 1.5 years from 01/01/2018 to 06/30/2025 (7.5 Years). The contract will continue to support Professional Consultation and Technical Assistance Services. The proposed amendment exercises the options authorized under RFQ 36-2017. Additional Funding will continue to support the Project Based Consultant Services modality.

Reason for Funding Change: The Department is requesting the approval of a Total Contract Amount with Contingency of \$3,430,326, or an increase of \$1,689,077 due to the following changes: (1) additional General Fund funding in the amount of \$366,953 for FY22/23; (2) One time additional Carry-Forward CDC Federal Funding for FY22/23 in the amount of \$149,200; (3) additional General Fund funding in the amount of \$422,518 for FY23/24; (4) One time additional California Department of Public Health (CDPH) - State Grant in the amount of \$60,000 for FY23/24; (5) additional General Fund funding in the amount of \$422,518 for FY24/25 to help develop and implement activities outlined in the CDPH Syphilis Planning Grant; and (6) an increase in the amount of \$73,931 to the 12% Contingency value applied for FY22/23 thru FY24/25. The previous Contingency was \$171,201 and the current Contingency amount is \$244,592.

Please Note: The annual funding level for FY22/23 increased by \$516,153 due to the following reasons: (1) additional General Fund funding in the amount of \$366,953 and (2) One-time additional Carry-Forward CDC Federal Funding in the amount of \$149,200.

Target Population:	The target population served through the Facente Consulting contract will be all populations and ethnicities within San Francisco, with focused expertise to meet the unique needs of those living with or at risk for HIV, hepatitis C, or sexually transmitted infections (STI). The services will be provided to the Disease Prevention & Control/ Sexually Transmitted Infections (DPC/STI) and to the Community, Health, Equity & Promotion (CHEP) Branch .
	services will be provided to the disease Prevention & Controly Sexually Transmitted infections (DPC/STI) and to the Community, health, Equity & Promotion (Cher) Branch.
Service Description:	Facente Consulting will provide program administration and consulting services.
	Program Administration: Facente Consulting will subcontract and will coordinate the overall programs. Coordination will consist of development of program plans and materials, cultivation of partnerships, and implementation of pilot projects. Facente Consulting will also
	provide direct Program Development and Consulting support to the SFDPH Disease Prevention and Contract STI Branch to design, develop and implement activities outlined in the CDPH Syphilis Planning Grant. All this work will be done in close partnership with SFDPH CHEP and SFDPH DPC/STI (SF City Clinic Leadership Staff).
	Consulting Services: Facente Consulting will provide technical assistance to the CHEP and SFDPH DPC/STI Branches. These are the administrative hours provided by Facente Consulting.
UOS (annual)	Program Administration: FY 22-23: \$741,030/36 months (3 subcontractors x 12 months) = \$20,584.17 per UOS
	Consulting Services: FY 22-23: \$92,200/500 hours = \$184.40 per UOS
UDC (annual)	N/A
Funding Source(s):	General Fund, Federal CDC - 20 - 2010 ETHE CFDA #93.940 HCHIVPREVNGR, and State - CDPH
Selection Type	RFQ 36-2017 Department of Public Health As Needed Project Based Support Services
Monitoring	The services will be monitored and evaluated internally by CHEP Branch and DPC/STI leadership who guide Facente Consulting in the work they provide.

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 (%)	Requested Action
ZSFGH HIM & CBHS	United Audit System Inc	\$846,160	\$5,240,680	\$4,394,520	7/1/2022-12/31/2022	7/1/2022-6/30/2025	\$1,511,000	\$1,586,708	\$ 75,708	4.77%	Ammendment

<u>Purpose:</u> The requested action is the approval of an amendment to an existing contract with United Audit System Inc to exercise a contract option to extend the contract term from 7/1/22 through 12/31/22 to 7/1/22 – 6/30/25 which will continue existing services for ZSFG's Hospital Information Management System Unit and add remote coding support services for DPH's Behavioral Health Services (BHS) Section. The amended contract amount with contingency is \$5,240,680.

United Audit System, Inc. is an approved Vizient Group Purchasing Organization, selected following a solicitation conducted by Vizient. Prior to the subject contract, DPH had a contract with United Audit System for the ZSFG based services only, which expired June 30, 2022. This contract was approved by the Health Commission on August 3, 2021, for a contract ending 6/30/22.

Upon expiration of the original contract, it was not extended because Vizient was conducting a new solicitation process that wasn't to be effective until July 1, 2022. At the same time, DPH only had contracting authority from the City's Civil Service Commission to contract out these services through December 31, 2022. As such, the Department entered into a six-month contract to continue services pending the extension of DPH's Civil Service Commission approval to contract out services. The original new six-month agreement was not brought to the Health Commission for approval. Today, the DPH is seeking approval for the proposed amendment that will align with Vizient's solicitation authority and the Civil Service Commission approval through June 30, 2025. Additionally, the subject amendment will support the expansion of these services to support BHS through the implementation of the State's Cal Aim initiative that is significantly changing billing requirements.

Reason for Funding Change: The increase in the contract amount is the result of the extension of the services and the addition of services in support of Community Behavioral Health Services. The annual difference of \$75,708 is due to the additional service for CBHS which is \$75,708 *3 years = \$227,125. The contract rates remain the same.

Change in total contract amount of \$4,394,520 is due to extension for ZSFG for \$3,777,500, for CBHS \$227,125 & contingency of \$389,895.

Target Population:	The San Francisco General Hospital Health Information System & Community Behavioral Health System (CBHS)	
Service Description:	Remote coding for Community Behavioral Health Service and San Francisco General Hospital. UASI will provide remote coding services within ZSFG & CBHS. In association with the Hospital's Health Information Management Systems division, UASI will utilize a secure remote connection to access ZSFG's billing and encoding systems to perform coding. UASI coder will transform medical record documentation (physician's notes, procedures, equipment, etc.) into appropriate alphanumeric codes for medical billing. The UASI coder will function within UASI's established criteria for both quality and coding volume.	UOS rates for Coding realted work include: * \$67.85 per hour per consultant for all Inpatient remote coding time. * \$63.85 per hour per consultant for all Outpatient/SDS remote coding time. * \$60.85 per hour per consultant for all ED remote coding time. * \$58.85 per hour per consultant for all Profee E/M remote coding time. * \$90.85 per hour per consultant for all Coding Auditor time. * \$94.85 per hour per CDI Specialist.
UOS (annual)	Hours of remote coding worked.	
UDC (annual)	NA NA	
Funding Source(s):	General Fund	
Selection Type	GPO (Group Purchasing Organization)	
Monitoring	San Francisco General Hospital Health Inforamtion System Division & Behavioral Health Service will conduct annual audits of the remote coding services.	

Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with	Proposed Total Contract NTE Amount with	Change in Total Contract Amount	Current Contract Tern	Proposed Contract Term	Prior Annual Amount without	Proposed Annual Amount without	Annual Difference	Annual Difference (%)	Requested Action
		Contingency	Contingency				Contingency	Contingency			
внѕ	Healthright 360 (Check Writing)	\$ 46,766,160	\$ 109,545,131	\$ 62,778,971	1/1/21-6/30/23	1/1/21-12/31/25	\$ 17,804,721	\$ 22,202,534	\$ 4,397,813	24.70%	Amendment

Purpose: The requested action is the approval of an Amendment with Health Right 360 for an amended term of 1/1/21-12/31/25 and Not to Exceed (NTE) Contract Amount of \$109,545,131. The purpose of this contract is to issue payments to non-DPH entities for critical services that are not conducive to the creation of contracts. This contract serves the target population by paying providers who, because of their size or location inside and outside San Francisco, are unable to contract with the City to receive reimbursement for services throughout the City's contracting process. This contract issues payments to out-of-county Private Providers serving SF Mental Health Plan clients requiring treatment while outside of SF, to Licensed Residential Care Facilities for the Elderly, for Client Wrap-Around Related Services, Emergency Housing, Workforce Training, and for expenses related to the Parent Training Institute. HealthRight 360 is issued reimbursement at a rate of \$22 per check. Of the total annual amount of \$22,202,534, it is expected that approximately \$50,000 annually will be paid for the per check, with the balance of the funding used for direct expenses. The contract is authorized under RFP-16-2019 and expires 12/31/25. This contract was previously approved by the Health Commission on October 6, 2020. This proposed amendment is subject to approval by the S.F. Board of Supervisors.

Reason for Funding Change: The Department is requesting the approval of a proposed Total Contract Amount with Contingency of \$109,545,131. The proposed increase of \$4,397,813 is due to the following changes: (1) \$3,375,375 in additional funding for additional beds at Long Term Elderly Adult Residential Care Facilities (Skilled Nursing Facilities) (2) \$759,625 in additional funding for Skilled Nursing Facilities Board and Care rate and census increases; (3) \$45,921 in additional funding for Pre-Trial MH Diversion State Grants; (4) \$25,000 in TAY Mental Academy WO Program funding; (5) \$150,000 in Mega-Black funding; (6) \$100,000 in MHSA funding for Intern Training; and (8) A reduction of \$112,008 for Adult Emergency Room Stabilization Rooms.

Target Population:	The target population are providers who are unable to contract with the City to receive reimbursement using a direct contracting mechanism. The population also includes San Francisco Medi-Cal beneficiaries and eligible San Francisco Mental Health Plan members, the indigent and uninsured, within and outside San Francisco; mental health clients and the elderly who live in licensed, 24-hour Residential Care Facilities or Skilled Nursing Facilities; vendors who provide and clients who need "wrap-around" services or emergency (food) and non-emergency services (transportation, clothing and vocational training); vendors who provide and receive mental health consultation and workforce training; and vendors who provide and homeless clients who need emergency housing and stabilization services at hotels through the Department of Homeless and Supportive Housing.
Service Description:	This contract provides a mechanism for primarily DPH's Behavioral Health Services (BHS) to pay vendors who are not Suppliers in the City's accounts payable system (non-contract providers) and who provide residential services, mental health services, consultation services, managed care, housing services to the homeless and workforce development. The HealthRight 360 Check-Writing contract issues payment on behalf of the Department to enable the Department to access critical services, where it is not feasible or practical for the vendor of the services to enter into a contract with the Department.
UOS (annual):	While there is fluxuation in the number of checks written each year, in FY21-22, a total of 1,853 checks were issued.
NOC (annual)	N/A
Funding Source(s):	General Fund
Selection Type	RFP-16-2019
Monitoring	These Check Writing services are not monitored by the Business Office of Contract Compliance (BOCC) but are evaluated by DPH BHS Leadership.

Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with	Proposed Total Contract NTE Amount with	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without	Proposed Annual Amount without	Annual Difference	Annual Difference (%)	Requested Action
		Contingency	Contingency				Contingency	Contingency			
Behavioral Health Services-	Homeless Children's Network	\$ 9,991,727	\$ 15,603,550	\$ 5,611,823	7/1/18-06/30/23	7/1/18-12/31/27	\$ 2,126,823	\$ 2,404,561	\$ 277,738	13.06%	Amendment
CYF											

Purpose: The requested action is the approval of an Amendment with Homeless Children's Services (HCN) for an amended term of 7/1/8-12/31/27 and Not to Exceed (NTE) Contract Amount of \$15,603,550, an increase of \$5,611,823 and to increase the current five-year term of 7/1/2018 through 6/30/23 and to now extend from 7/1//18 through 12/31/27 (a new term of 8.5 years, increased by an additional 3.5 years). The services are ongoing and were awarded to HCN under RFP-1-2017 (EPSDT) and RFP-16-2018 (Early Childhood Mental Health Consultation Initiative, ECMHCI). The services in this contract were last approved by the Health Commission on 2/1/22. The purpose of this contract is to provide mental health and homeless care facilities. The contract also provides support to shelter-based and homeless childcare providers and staff who provide care to homeless youth and their families. This proposed amendment is is subject to approval by the S.F. Board of Supervisors.

Reason for Funding Change: The annual increase of \$277,738 includes the following: (1) \$57,188 for a 4.0 percent annual Cost of Doing Business (CODB) allocation, (2) \$8,988 expansion of MHSA funding in the Early Childhood Mental Health Consultation Initiative (ECMHCI) Program (3) \$111,562 in additional

Target Population:	Homeless children, youth ages 0-17 and their families in all neighborhoods throughout San Francisco. Services are extended to families who reside in a housing but have a formative history with homelessness. The target population also includes staff who provide childcare and homeless services to home	
Service Description:	The goal of this program is to provide culturally competent, strength-based mental health outpatient services which are focused on the specific needs of homeless children and families living in emergency, transitional and domestic violence shelters.	A second program is Early Childhood Mental Health Consultation where services are provided by trained behavioral health consultants and can range in intensity from site observation (e.g., at City funded preschools), individual and group consultation, and complimentary capacity building support to program sites for behavioral health assessment, early intervention and treatment services that address behavioral health needs of young children and their families.
UOS (annual):	Outpatient Programs: UOS = 144,024 Total Staff Minutes	ECMHCI UOS =3,803 hours per year:
	Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)/ General Outpatient Case Mgt Brokerage: 3,694 minutes at \$4.99 per minute =	10,823 hours x \$120.00/ hour = \$1,298,760
	\$18,433.06	
	General EPSDT Outpatient Mental Health Services: 104,211 minutes at \$7.72 per minute = \$804,508.92	
	Riley EPSDT Outpatient Case Mgt Brokerage: 3,003 minutes at \$7.72 per minute = \$23,183.16	
	Treasure island EPSDT Outpatient Case Mgt Brokerage: 251 minutes at \$4.98 per minute = \$1,249.98	
	Treasure Island EPSDT Outpatient Mental Health Services: 2,623 minutes at \$7.72 per minute = \$20,249.56	
	LGBTQ EPSDT Outpatient Case Mgt Brokerage: 1,125 minutes at \$4.99 per minute = \$5,613.75	
	LGBTQ EPSDT Outpatient Mental Health Services: 30,117 minutes at \$7.72 per minute = \$232,503.24	
	Total for Outpatient Program: \$1,105,741.67	
UDC (annual)	OutPatient/ EPSDT Programs: UDC = 118	CMHCI = 219
unding Source(s):	General Fund, MHSA, Work Order	
Selection Type	RFP 1-2017 RFQ 16-2018	
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC). Report scoring suspended for FY-20-21 due to COVID-Children's Network received separate Monitoring Reports for FY-20-21. Homeless Children's Network EPSDT met 78% of its contracted performance operformance objectives but did meet 100% of contracted Units of Service.	

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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 (%)	Requested Action
Behavioral Health	Community Forward SF	\$13,600,000	\$26,177,617	\$12,577,617	7/1/18-06/30/23	7/1/18-12/31/27	\$3,403,408	\$3,908,222	\$ 504,814	12.92%	Amendment Three (for ongoing services)
•	tion is the approval of an Amendment T s). The Health Commission last approved										
Reason for Funding Change and 6 (-\$1,087,810).	e: The increase of \$508,814 includes the	following: (1) 4.0 percent annual Cos	t of Doing Business (CODB) allocation, \$92,624; (2)	One-Time 2022-23 BOS A	dd Backs for A Woman's Pl	ace and Drop In Prog	rams \$1,500.000; (3)	Reduction of fund	ing for COVID She	elter In Place Hotels 11
Target Population:	• , ,	cuses on low income, chronically hom al illness, are victims of violence, have he streets, parks, and freeways.			•						
Service Description:	individual and group therapy, motive harm reduction education (including	ovides 30-180 day residential services ational interviewing, crisis interventiog information on substance use and risertive housing, primary care, recreation	n, case management, sk behaviors, needle use,	The AWP (Drop-In Progr term basis and may also AWP and community pro	• •	, , , , , , , , , , , , , , , , , , , ,					
UOS (annual):	A Woman's Place Substance Abuse 5,669 Total Bed Days Residential Long Term Recovery: 2,8 Residential Long Term Recovery BOS Total = \$1,034,548.20	A Woman's Place Drop-In: 13,876 Drop-In Hours A Woman Place Drop-In: 6,938 Hours X \$122.34 = \$848,794.92 A Woman Place Drop-In BOS Add Back: 6,938 Hours x \$141.25 = \$979,992.50 Total = \$1,828,787.42 Mental Health Services 52,707 minutes x \$10.49 Case Mgt Brokerage 23,525 minutes x \$9.94 = \$2 Crisis Intervention Outpatient 1,305 minutes x \$1						s x \$10.49 = \$552 \$9.94 = \$233,838	,896.43 .50		
NOC (annual)	The target population includes staff,	, subcontractors and consultants enga	ged in providing the follow	ı ving Children Youth and F	amily (CYF) services: Case	e Management Services, Fa	mily Mosaic Project,	Total = \$1,044,825.5 Skilled Professional M		oster Care Progra	am
Funding Source(s):	General Fund		•			-	•			<u> </u>	
Selection Type	RFP-26-2016; RFP-8-2017										
Monitoring	Annual DPH Business Office monitor contracted Units of Service.	ring through Business Office of Contra	ct Compliance (BOCC). Rep	oort scoring suspended fo	or FY-20-21 due to COVID-:	19 impact. Community For	ward SF - A Woman's	s Place met 92% of its	contracted perfor	mance objectives	and met 106% of its

Selection Type

RFP 10-2021 Lean Consulting Services

Div.	Contractor	Current Total Contract Not to	Proposed Total Contract	Change in Total	Current Contract Term	Proposed Contract Term	Prior Annual	Proposed Annual	Annual	Annual	Requested Action
		Exceed (NTE) Amount with	NTE Amount with	Contract Amount			Amount without	Amount without	Difference	Difference (%)	
		Contingency	Contingency				Contingency	Contingency			
DPH-Behavioral Health	HealthRIGHT 360 (FI)	\$79,058,563	\$83,192,976	\$4,134,413	1/01/14-12/31/23	1/01/14-12/31/23	\$9,190,685	\$9,496,484	\$ 305,799	3.22%	Amendment 4
Services											
Purnose: The requested action	n is the approval of an Amendment Fo	our with Health Right 360 for a term o	ıl nf 1/01/2014-12/31/2023 a	nd amended Not to Exce	Led (NTF) Contract Amour	nt of \$83 192 976 The Fisc	al Intermediary serv	ices were awarded to	Health Right 360	under RFO-16-20	13 and were last

Purpose: The requested action is the approval of an Amendment Four with Health Right 360 under RFQ-16-2013 and were last approved by the Heatlh Commission on 11/16/18. The purpose of this contract is to provide fiscal intermediary (human resources, accounting, budget, fiscal, contract, quality assurance, compliance and administrative services) in support of outpatient and residential mental and substance abuse treatment to San Francisco residents for the period of 1/01/2014-12/31/2023. This proposed amendment is subject to approval by the S.F. Board of Supervisors.

Reason for Funding Change: The increase of \$305,799 includes the following: Increases for \$239,340 to the Street Violence Intervention Prevention Program (Adult Mental Health Comprehensive Crisis Bereavement), \$5,998 in increases to the Treatment Access Program and Methadone Van, \$28,568 in additional funding for the Black Infant Health and Community Wells Programs, \$14,853 for the Jail Health and \$17,050 for the Youth Guidance Center. Four percent Cost of Doing Business funding is included here as well as deletions in one time 2020-21 and 2021-22 Dream Keeper Initiative funding.

Target Population:	The target population includes staff, subcontractors and consultants engaged in providing the following Children Youth and Family (CYF) services: Case Management Services, Family Mosaic Project, Skilled Professional Medical Personnel Foster Care Program and the Parent Training Program. The target population also include program staff who provide DPH Mental Health and Substance Abuse Services, Youth Guidance Center Nutritionist Services, Street Violence Intervention and Prevention services, Jail Health Services, and the Black Infant Health & Community Wellness services. Direct program clientele come from all racial and cultural and economic backgrounds and include high risk youth at risk for out of home placement up to age 21 years, all children, youth and families of the SF HSA Family and Children Services, clients who use Family Resource Centers, CYF Clinics, substance abuse and mental health services, DPH Shelter and Youth Guidance Clinics, and at risk youth in diversion/intervention and aftercare.
Service Description:	HealthRIGHT 360 provides provide fiscal intermediary (human resources, accounting, budget, fiscal, contract, quality assurance, compliance and administrative services) in support of outpatient and residential mental and substance abuse treatment to San Francisco residents for the period of 1/01/2014-12/31/2023. HealthRIGHT 360 provides a full continuum of services to meet the needs of participants.
UOS (annual):	Annual - 53,145 UOS
NOC (annual)	Annual - 0 unduplicated clients
Funding Source(s):	General Fund, WO, Grants
Selection Type	RFQ-16-2013
Monitoring	These Fiscal Intermediary services are not monitored by the Business Office of Contract Compliance (BOCC) but are evaluated by DPH BHS Leadership.

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 (%)	Requested Action
SFHN/ ZSFG/ LHH	Moss Adams	\$4,126,080	\$9,987,293	\$5,861,213	12/11/2021 - 12/10/2023 (2 yrs)	12/11/2021 - 12/31/2024 (3 yrs 1 mos)	\$1,882,179	\$3,321,906	\$ 1,439,727	43.34%	Amendment

Purpose: The requested action is the approval of a contract amendment woth Moss Adams to increase the Total Contract Amount to \$9,987,293, or an increase of \$5,861,213, and to extend the current term from 12/11/2021 through 12/10/2023 to 12/11/2021 through 12/31/2024, or an extension of one year three weeks for a total contract term of three years three weeks. The purpose of this contract is to provide DPH managers with Lean Management consulting services, including hoshin strategy deployment, communications strategies, and project management. This contract was initially approved by the Health Commission in December 2021 and is authorized by the enabling solicitation RFP 10-2021 Lean Consulting Services. The Department is experiencing a heightened need for these services in conjunction with the recertification effort at Laguna Honda Hospital. This requested increase in funding is made in order to greatly expand existing Moss Adams services to meet the urgent need at Laguna Honda Hospital.

Target Population:	DPH Managers at San Francisco Health Network, Zuckerberg San Francisco General Hospital (ZSFG), Laguna Honda Hospital (LHH) and other network facilities as needed.
Service Description:	This contract amendment will make a substantial addition to service hours In support of Laguna Honda's recertification efforts in the Centers for Medicare and Medicaid Services Provider Participation Program. In those efforts, Moss Adams services will support the Incident Command leadership in establishing and maintaining critical processes related to information flow in the Incident Command structure. This will include streamlined and documented process for Incident Command structure and reporting; Communication triage process for inbound requests from key external stakeholders (e.g., Mayor's Office and DPH Leadership); and the goal of developing a comprehensive management system to drive accountability from the top-level operations strategy deployed through the management of daily operations. The primary outcome of the comprehensive system is remediation of all Plans of Correction (POCs), including the RCA Action Plan and other initiatives, to sustain survey readiness both through recertification and on an ongoing basis.
UOS (annual)	Moss Adams hourly rates by five category of employee: 1. Hoshin Kanri/Strategy Deployment and executive coaching (\$488/hr) 2. All other LEAN certified facilitation and coaching services (\$420/hr) 3. Data Analytics, Communications, enterprise Program Management, Operational support (\$280/hr) 4. Advanced Project Management (PMP certified and/or clinical designation) (\$240/hr) 5. Basic Project Management and training (\$165/hr). All contracted services to be invoiced through these hourly rates or travel expenses.
Funding Source(s):	General Fund

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Monitoring These services will be monitored in accordance with all applicable Departmental procedures.

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 (%)	Requested Action
	Westside Community Mental Health Center - Methadone	\$15,370,101	\$15,580,935	\$210,834	7/1/2017 - 6/30/2027	7/1/2017 - 6/30/2026	\$1,771,299	\$1,788,496	\$ 17,197		Amendment

Purpose: The requested action is for the approval of an amendment to a contract with the Westside Community Mental Health Center. Westside provides the San Francisco Department of Public Health (SFDPH) Methadone treatment services for opiate addiction. The goal of the Westside Methadone Methadone Treatment Program is to provide Methadone treatment for opiate addiction to reduce the impact of opiate abuse and addiction on adults who are emotionally, physically and socially impaired due to the use of opiates. This contract was previously approved at the 07/05/2022 Health Commission. The Total Contract Amount with Contingency requested is \$15,580,935, with a term from 7/1/2017 - 6/30/2026, for a total of 9 years. This amendment continues to be funded under RFP 26-2016 and is subject to approval by the S.F. Board of Supervisors.

Reason for Funding Change: The Department is requesting the approval of a Total Contract Amount with Contingency in the amount of \$15,580,935, or an increase of \$210,834, due to the following changes: 1) after this contract was last approved at the Health Commission, we needed to amend it to extend for a year from 12/31/22 to provide additional time to return to the BOS. There was sufficient unspent funding to allow the extension to occur to align and implement planned increases by the System of Care. This proposed increase of \$210,834 and reduction of term from 7/1/2017 through 6/30/2027 to a term of 7/1/2017 through 6/30/2026 is to align with the proposed contract amendment moving to the Board of Supervisors for approval next month.

Target Population:	The target population consists of adults (18 years and older) who are addicted to heroin and require methadone maintenance treatment. WMTP provides addiction counseling using a harm reduction approach and a comprehensive social service assessment and referral services. A particular focus of Westside Methadone Treatment Program is the African-American population residing in the Western Addition, Tenderloin, South of Market area, homeless, living in streets, living in shelters, and other surrounding neighborhoods.
Service Description:	Provide Methadone treatment for opiate addiction to reduce the impact of opiate abuse and addiction on adults who are emotionally, physically, and socially impaired due to the use of opiates. Westside Methadone Maintenance will provide Buprenorphine and Methadone treatment through our Opioid Treatment Program. In addition to the general Opioid (Narcotic) Treatment Program (OTP) services requirements; the Contractor shall comply with the following specific opioid (narcotic) treatment program services requirements: 1) Opioid (Narcotic) Treatment Program services shall include daily or several times weekly opioid agonist medication and counseling available for those with severe opioid disorder. 2) Service Components: a. Intake, b. Individual and Group Counseling, c. Patient Education, d. Medication Services, e. Collateral Services, f. Crisis Intervention Services, g. Treatment Planning, h. Medical Psychotherapy, and i. Discharge Services.
UOS (annual)	ODS Opiate/Narcotic Treatment (OTP/NTP) Individual Counseling: 27,582 10-Minutes x \$16.60. = \$457,855 ODS Opiate/Narcotic Treatment (OTP/NTP) Dosing: 78,893 Doses x \$14.69 = \$1,158,945 ODS Opiate/Narcotic Treatment (OTP/NTP) Buprenorphine: 7,521 Doses x \$22.83 = \$171,696 Total = \$1,788,496
UDC (annual)	ODS Opiate/Narcotic Treatment (OTP/NTP) Individual Counseling = 280 UDC ODS Opiate/Narcotic Treatment (OTP/NTP) Dosing = 245 UDC ODS Opiate/Narcotic Treatment (OTP/NTP) Buprenorphine = 35 UDC Total = 280
Funding Source(s):	Federal Drug Medi-Cal FFP, State Drug Medi-Cal, General Fund
Selection Type	RFP 26-2016
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC). Report scoring suspended for FY-20-21 due to COVID-19 impact. The Westside Methadone program met 75% of its contracted performance objectives and met 80% of its contracted Units of Service.
Di	Contractor Current Total Contract Not to Proposed Total Contract Change in Total Current Contract Term Proposed Contract Term Prior Annual Proposed Annual Annual Requested Action
Div.	Contractor Current Total Contract Not to Proposed Total Contract Change in Total Current Contract Term Proposed Contract Term Prior Annual Proposed Annual Annual Annual Annual Requested Action

Contingency Contingency Contingency Contingency BHS Mount St. Joseph-St. Elizabeth \$9,371,551 \$20,601,207 \$11,229,656 01/01/2018 -07/01/2018 -\$1,998,009 \$2,302,433 \$304,424 15.24% Amendment 06/30/2023 (5.5 Years) | 06/30/2027 (9.5 Years) Purpose: The requested action is the approval of a contract amendment with Mount St. Joseph-St. to increase the Total Contract Amount with Contingency to reflect \$20,607,207 and to reflect a new term of 01/01/2018 - 06/30/2027 (9.5 years). The Health Commission previously approved this contract on

Contract Amount

Difference

Amount without

Amount without

Difference (%)

February 6, 2018. This contract supports Mount St. Joseph-St. Elizabeth, which provides residential drug treatment program. The proposed amendment is authorized under RFP 26-2019 and RFP 1-2017 issued on October 21, 2016, and March 24, 2017 and is subject to approval by the S.F. Board of Supervisors.

Reason for Funding Change: The Department is requesting approval of a Total Contract Amount with Contingency of \$20,601,207 or an increase of \$11,229,656. The increase reflects extending the contract term for an additional 4 years.

NTE Amount with

Exceed (NTE) Amount with

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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 (%)	Requested Action	
Target Population:	Mount St. Joseph - St. Elizabeth (MSJ) provides a comprehensive continuum of mental health services and substance use prevention services to anyone identifying as female, inclusive of all races and ethnicities, 18 years of age or older, with substance use problems, mental health issues, pregnant, parenting children 0-4 years, or without children, and are residents of San Francisco. The program, Epiphany Family Treatment/Outpatient Therapeutic Treatment aims to serves infants, children, and adolescents 0 - 21 years of age of all races and populations whose functioning has been affected by parental substance abuse, separation due to out-of-home placement, are in the process of reunification, have experienced trauma, and other stressors on the family.										
	1) Epiphany Residential Step Down: The Epiphany Center Residential Step-Down Program serves woman-identified, with or without children, who have successfully completed a minimum of 30			Epiphany Center's resid parenting skills, and the services will focus on th	: Individuals identifying as female inclusive of all ethrential drug treatment program will gain recovery skill ir young children will have positive developmental or e unique cultural and linguistic needs of any identifyidmitted into treatment services.	3) Epiphany Family Treatment: The goal of the Epiphany Family Treatment Program (EFTP) is to strengthen family functioning, improve child mental health, early identification of emotional/ behavioral problems, reduce the risk of child abuse and neglect, and improve the parent-child relationship of individuals and families of all races and populations eligible for services, and are residents of San Francisco.					
Service Description:	Center Step Down Program, and pub notifications through DPH. The qualification and intake programmers are programmers and intake programmers.	tial treatment programs to secure applicize openings through the agency of fying individuals will successfully corocess, and upon acceptance, will be very skills and goals to live independent own Program, it is required that clies own clients, regardless of race, religitive services for up to one year. Span	pplications to the Epiphany website, Facebook, and mplete the Epiphany Center provided a safe living lently. While residing in the nts will participate in ion, or nationality, will hish speaking staff will be	and to partnering agend with Child Welfare work Jail, and Zuckerberg San Hummingbird for referr	: Intake Coordinator and Assistant Program Directories when openings in the Program occur. The Epiphalers, Family Treatment Court, neighborhood health of Francisco General Hospital, Psychiatric Emergency Stals to the Epiphany Center. Clients of all ethnicities are renatal Program, detoxification programs, and other the second of the Epiphany Center.	EFTP partners with Early Head Start, other childcare centers, Homeless Prenatal Program, Family Treatment Court, Neighborhood Health Centers, the County Jail, and San Francisco General Hospital.					
UOS (annual):	Epiphany Residential Step Down (Co 3,504 bed days x 101.10 =\$354,259	ost Reimbursement):		Epiphany Residential (CODS (Organized Deliver) 5,840 days x \$123.3 ODS Room & Board, Res 1,459 bed days x \$1 ODS Room & Board, Res 4,381 bed days x 17	y System) Residential: 9 = \$720,588 idential Treatment (Perinatal Only): 79.57 = \$261,907 idential Treatment:		OP-MH Svcs: 58,000	iphany Family Treatment (Fee-for Se P-MH Svcs: 58,000 staff minutes x \$3. P-Case Mgt Brokerage: 1,500 staff min		,487	
NOC (annual):		17		-	80				20		
Funding Source(s):	Federal SABG Discretionary, CFDA 93.959, County General Fund, Federal SABG Discretionary, CFDA 93.959, Federal SABG (Substance Abuse Block Grant) Perinatal Set-Aside, CFDA 93.959, Federal Drug Medi-Cal FFP, CFDA 93.778, Federal Perinatal Drug Medi-Cal FFP, CFDA 93.778, State Perinatal Drug Medi-Cal, State General Fund (ODS Waiver)										
Selection Type:	RFP 26-2019 & RFP 1-2017										
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC). Report scoring suspended for FY-20-21 due to COVID-19 impact. Each of the three Mt. St. Joseph (MSJ) programs received separate Monitoring Reports for FY-20-21. MSJ Epiphany Treatment Mental Health met 98% of its contracted performance objectives and 100% of its contracted Units of Service. MSJ Epiphany Residential Step Down met 100% of its contracted performance objectives and 73% of contracted Units of Service. MSJ Epiphany Residential met 14% of its contracted performance objectives and 89% of contracted Units of Service.										

Contractor

Div.

514.	Contractor	Exceed (NTE) Amount with Contingency	NTE Amount with Contingency	Contract Amount	carrent contract remi	Troposed contract remi	Amount without Contingency	Amount without Contingency	Difference	Difference (%)	Requested Action
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 (%)	Requested Action
BHS	Seneca Center	\$4,307,725	\$9,672,097	\$5,364,372	7/1/22-6/30/27	7/1/22-6/30/27	\$820,519	\$2,064,190	\$ 1,243,671	151.57%	Amendment
services, previously provid 2022 for \$4,307,725 with a 24th Street which was not	ed under an existing Seneca Center of a term of 7/1/22-6/30/27. The Proposition included in the previous Health Com	oved contract with Seneca Center to continuous contract, which were recently solicited uncosed Total Contract Amount with Continuous amission approval. This proposed amendment approval of a Total Contract Amount with the	der RFP 3-2022 Continuum ency is \$9,672,097 and the ent is subject to approval I	of Care. Seneca Center term remains at 5 years by the S.F. Board of Supe	was reselected and these s from 7/1/22 - 6/30/27. Thervisors.	specific services became pne proposed agreement is	art of a new stand-al to add \$5,364,372, a	one contract. The He n annual increse of \$	alth Commission pr 1,243,671 tos uppo	reviously approved ort an additional loc	the contract in June
arget Population:	A-1: Seneca Compass (Kuck Lan	e, Petaluma) - Seneca serves all ethnicitie	es and populations within	A-2: Intensive Services	Foster Care (ISFC) - Seneca	a welcomes and serves all	ethnicities and	A-3: Seneca COMP	ASS – 24th St - Sene	eca welcomes and	serves all ethnicities
	San Francisco, with focused expe		Francisco, with focused ex						rtise that will meet t		
	provide a safe refuge for young	needs of services of chi	ildren and adolescents thro	ough age 21 referred by S.	F. Mental Health, S.F	. unique cultural nee	ds of services that	will provide a safe	refuge for young		
	present with acute behaviors, ar	Human Services Agency	y (HSA) or S.F. Probation w	ho are likely to benefit from	m an intensive foster	people through age 17 who are dependents of the juvenile court or who are					
	disruption. The program accepts	s referrals from San Francisco Family and	Children Services (FCS).		elative family placement th			_		-	
					Il receive ITFC services deli	<u>-</u>		at risk of hospitaliza			
					t Connections criteria will l	•		Seneca COMPASS -	•		cepts referrals from
					both target populations wi	ill be to return children to t	heir kin families	San Francisco Fami	ly and Children Serv	vices (FCS).	
				within 6-9 months.							
ervice Description:	Seneca Compass (Kuck Lane, Pe	Intensive Services Fost	Seneca COMPASS – 24th St - The COMPASS – 24th St. model includes an								
	a short-term basis to support effective crisis stabilization and linkage to a rich array of community-based supports such as mobile response and outpatient mental health services. The Short-Term Residential Treatment Program (STRTP) is designed to allow youth to receive a high or low tier of support, allowing the service intensity to malleably adapt to the individualized needs of each youth, without the need for physical change in placement or relational disruption. A placed youth benefits from the support of Seneca staff at all hours of the day.			who are at risk of place from a residential prog so that within 6-9 mont kinship family home. So developed by Seneca d relational, behavioral a "streams" to inform and referral to discharge.	impact of which serves as an alternative setting to hospitalization and out state residential placement. These highly individualized placements provid the stability of care by highly trained mental health professionals on a shoterm basis to support effective crisis stabilization and linkage to a rich arra						
	Seneca Compass (Kuck Lane)			Intensive Services Fost				Seneca COMPASS -			
	OP-MH Svcs: 103,980 Staff Minu				e: 25,929 Staff Minute x \$2			SS-Other Non-Med	• • •	•	
UOS (annual)		3 Staff Minute x \$7.05 = \$152,166	24	· ·	Staff Minute x \$3.75 = \$660			Reimbursement for	services provided	which are not Med	i-Cal Billable =
, ,	. , .			OP-Crisis Intervention: 1,151 Staff Minute x \$5.50 = \$6,332 OP-Medication Support: 2,395 Staff Minute x \$6.84 = \$16,383 OP-Intensive Care Coordination (ICC): 14,405 Staff Minute x \$2.93 = \$42,206				\$169,000 OB Case Mat Prokerage: 1 045 Staff Minute v \$2.03 = \$2.062			
	, , , , , , , , , , , , , , , , , , , ,							OP-Case Mgt Brokerage: 1,045 Staff Minute x \$2.93 = \$3,063 OP-MH Svcs: 22,580 Staff Minute x \$3.75 = \$84,677			
	7552,515				sed Services (IHBS): 11,255			OP-Medication Sup			2,259
				Total = \$844,150	, , ,			Total = \$269,000	,		
JDC (annual)		2			25	5				2	
Funding Source(s):	MH CYF Fed SDMC FFP (50%); MH State CYF 2011 PSR-EPSDT; MH CYF County General Funds; MH CYF County WO CODB; MH WO HSA MH HSA GF Matches; MH WO HAS HUB										
Selection Type	RFP 3-2022 Continuum of Care F	Reform Services									
Monitoring	Annual DPH Business Office mor	nitoring through Business Office of Contra	nct Compliance (BOCC). Rep	oort scoring suspended f	or FY-20-21 due to COVID-	19 impact. The Intensive 1	herapeutic Foster Ca	are (IFTC) and COMP	ASS programs at Ser	neca were received	l separate Monitori
	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC). Report scoring suspended for FY-20-21 due to COVID-19 impact. The Intensive Therapeutic Foster Care (IFTC) and COMPASS programs at Seneca were received separate Monitoring Reports for FY-20-21. Seneca IFTC met 70% of its contracted performance objectives and met 69% of its contracted Units of Service. Seneca COMPASS met 50% of its contracted performance objectives and met 64% of contracted Units of Service.										

Change in Total

Current Contract Term | Proposed Contract Term

Prior Annual

Proposed Annual

Annual

Annual

Requested Action

Current Total Contract Not to Proposed Total Contract