ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at MileHighOrdinance@DenverGov.org by 3:00pm on Monday. Contact the Mayor's Legislative team with questions

Please mark one:	Bill Request	or	☐ Resolution	on Request	Date of Request: October 16, 2023		
1. Type of Request:							
☐ Contract/Grant Agreeme	ent 🛛 Intergov	ernmental	Agreement (IG	SA) \square Re	zoning/Text Amendment		
☐ Dedication/Vacation	_		plemental		MC Change		
Other:	Птрргорг		prementar		Chunge		
_							
2. Title: (Start with <i>approves</i> , acceptance, contract execu					tractor and indicate the type of request: grant mental request, etc.)		
new total of \$1,050,06	65 and one day for	a new end	date of 02-29-20)24 to provi	Authority (UCHA) by adding \$863,197 for a de care, treatment, and supportive services to), citywide (202369751-01).		
3. Requesting Agency: Pub	lic Health & Envir	onment (D	DPHE)				
4. Contact Person:							
Contact person with knowledge of proposed ordinance/resolution			Contact p	Contact person to present item at Mayor-Council and Council			
Name: Will Fenton				Name: Will Fenton & Robert George			
Email: William.Fenton@de	nvergov.org			Email: William.Fenton@denvergov.org Robert.George2@denvergov.org			
Health Services, Outpatient HIV/AIDS residing in the D The term is being extended	pital Authority pr Ambulatory Hea Penver TGA. by one day becau I an end date of 0	rovides Ca lth Service use the firs 12/28/2024	ase Managemenes, and Substar	nt Continuunce Abuse (mary if more space needed: am, Early Intervention Services, Mental Outpatient Care to individuals living with a from the Health Resources and Services a the additional funding from the second		
6. City Attorney assigned to) this request (if a	pplicable)	: Breena Meng				
7. City Council District: All	I						
8. **For all contracts, fill o	ut and submit acc	companyin	g Key Contract	Terms woi	ksheet**		
			I h., M 1	sialative T			
Deceletion (Dill N. order	To be	completed	l by Mayor's Leg	usiative Tea			
Resolution/Bill Number:				Date Entered:			

Key Contract Terms

	tract: (e.g. Professional Services > Sessional Services	\$500K; IGA/Grant Agreement, Sal	e or Lease of Real Property):	
Vendor/Con	tractor Name: University of Colora	ndo Hospital Authority		
Contract con	ntrol number: 202369751-01 (Origin	nal Contract: 202368046-00)		
Location: Ci	itywide			
Is this a new	contract? ☐ Yes ⊠ No Is th	nis an Amendment? 🛛 Yes 🔲 N	To If yes, how many?01	
	rm/Duration (for amended contraction of the contrac	ets, include <u>existing</u> term dates and d to 03/01/2023-02/29/2024	amended dates):	
	nount (indicate existing amount, an act amount: \$186,868.00 Amended	Amount: \$863,197.00 Amend	otal): led Total: \$1,050,065.00	
	Current Contract Amount	Additional Funds	Total Contract Amount	
	<i>(A)</i>	(B)	(A+B)	
	\$186,868.00	\$863,197.00	\$1,050,065.00	
	Colorado Hospital Authority will propatient Ambulatory Health Services,		Early Intervention Services, Mental Healt e to individuals living with HIV/AIDS res	
Was this con	tractor selected by competitive pro	ocess? Yes If not	, why not? n/a	
Has this cont	tractor provided these services to the	he City before? 🛛 Yes 🗌 No		
Source of fu	nds: Ryan White Part A grant HRSA			
Is this contra	act subject to: W/MBE D	OBE SBE XO101 AC	DBE N/A	
WBE/MBE/I	DBE commitments (construction, d	lesign, Airport concession contracts	s):	
Who are the	subcontractors to this contract? n	ione		
	To be	completed by Mayor's Legislative Te	am:	
Resolution/Bi	ill Number:		Date Entered:	