

ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team
at MileHighOrdinance@DenverGov.org by **11 a.m. Friday**. Contact the Mayor's Legislative team with questions

Date of Request: 03/21/2024

Please mark one: Bill Request or Resolution Request

1. Type of Request:

- Contract/Grant Agreement Intergovernmental Agreement (IGA) Rezoning/Text Amendment
 Dedication/Vacation Appropriation/Supplemental DRMC Change
 Other:

2. **Title:** Approves a City Amendment #3 (CO State referred to as Amendment #2 State Fiscal Year 2024) to Revenue Agreement with Colorado Department of Health Care Policy and Financing adding \$4,255.78 for a new maximum contractual commitment of \$3,390,053.18 through contract control number SOCSV-202263930-03 Jaggaer. There is no change to the current term of 7/01/2021 to 6/30/2024.

3. **Requesting Agency:** Denver Human Services

4. Contact Person:

Contact person with knowledge of proposed ordinance/resolution (e.g., subject matter expert)	Contact person for council members or mayor-council
Name: Renee Newton	Name: Crystal Porter, Tami Tapia
Email: renee.newton@denvergov.org	Email: crystal.porter@denvergov.org , tami.tapia@denvergov.org

5. General description or background of proposed request. Attach executive summary if more space needed:

DHS requests authorization to approve City Amendment #3 (CO State referred to as Amendment #2 State Fiscal Year 2024) to Revenue Agreement with Colorado Department of Health Care Policy and Financing that adds another \$4,255.78 for a new contract maximum of \$3,390,053.18. There is no change to the current term of 7/01/2021 to 6/30/2024. The relevant contract control number is SOCSV-202263930-03 Jaggaer. This increase to the revenue agreement will continue to support Denver Human Services in achieving certain performance standards related to County Administration and Medical Assistance Eligibility in cooperation with Medical Assistance related entities, such as Colorado Department of Health Care Policy and Financing.

6. **City Attorney assigned to this request (if applicable):** Andrew Riester

7. **City Council District:** Citywide

8. ****For all contracts, fill out and submit accompanying Key Contract Terms worksheet****

To be completed by Mayor's Legislative Team:

Resolution/Bill Number: _____

Date Entered: _____

Key Contract Terms

Type of Contract: IGA/Revenue

Vendor/Contractor Name (including any dba's): Colorado Department of Health Care Policy and Financing

Contract control number (legacy and new): SOCSV-202263930-03 Jaggaer

Location: Citywide

Is this a new contract? Yes No Is this an Amendment? Yes No If yes, how many? 3

Contract Term/Duration (for amended contracts, include existing term dates and amended dates):

Original Contract: SOCSV-202263930-00 Jaggaer: 7/01/2021 to 6/30/2023

Amendment 1: SOCSV-202263930-01 Jaggaer: 7/01/2021 to 6/30/2023

Amendment 2: SOCSV-202263930-02 Jaggaer: 7/01/2021 to 6/30/2024

Proposed Amendment 3: SOCSV-202263930-03 Jaggaer: 7/01/2021 to 6/30/2024

Contract Amount (indicate existing amount, amended amount and new contract total):

<i>Current Contract Amount</i> (A)	<i>Additional Funds</i> (B)	<i>Total Contract Amount</i> (A+B)
\$3,385,797.40	\$4,255.78	\$3,390,053.18

<i>Current Contract Term</i>	<i>Added Time</i>	<i>New Ending Date</i>
7/01/2021 to 6/30/2024	No Change	6/30/2024

Scope of work:

- Provide DHS with financial incentives to improve efficiency and accuracy as to eligibility determinations for Medical Assistance benefits.
- Assist DHS in the process of achieving certain performance standards related to County Administration and Medical Assistance Eligibility in cooperation with Medical Assistance related entities, such as Colorado Department of Health Care Policy and Financing.
- Provide DHS with performance data for comparative analytics for the purposes of qualifying for the financial incentives under the contract.

Was this contractor selected by competitive process? No If not, why not? N/A

Has this contractor provided these services to the City before? Yes No

Source of funds: Federal, received through CO State

Is this contract subject to: W/MBE DBE SBE XO101 ACDBE N/A

To be completed by Mayor's Legislative Team:

Resolution/Bill Number: _____

Date Entered: _____

WBE/MBE/DBE commitments (construction, design, Airport concession contracts): N/A

Who are the subcontractors to this contract? N/A

To be completed by Mayor's Legislative Team:

Resolution/Bill Number: _____

Date Entered: _____