

ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team
at [MileHighOrdinance@DenverGov.org](mailto: MileHighOrdinance@DenverGov.org) by **9 a.m. Friday**. Contact the Mayor's Legislative team with questions

Please mark one: ☐ Bill Request or ☒ Resolution Request Date of Request: 5/22/2025

Please mark one: The request directly impacts developments, projects, contracts, resolutions, or bills that involve property and impact within .5 miles of the South Platte River from Denver's northern to southern boundary? (Check map [HERE](#))

☐ Yes ☒ No

1. Type of Request:

☒ Contract/Grant Agreement ☐ Intergovernmental Agreement (IGA) ☐ Rezoning/Text Amendment

☐ Dedication/Vacation ☐ Appropriation/Supplemental ☐ DRMC Change

☐ Other:

2. **Title:** (Start with *approves*, *amends*, *dedicates*, etc., include name of company or contractor and indicate the type of request: grant acceptance, contract execution, contract amendment, municipal code change, supplemental request, etc.)

Approves a service agreement with Colorado Health Network, Inc. for \$3,039,969.00 with an end date of 12-31-2025 to provide rental assistance and supportive services to individuals participating in the Housing Opportunities for Persons with AIDS (HOPWA) program, citywide (HOST-202579748).

3. **Requesting Agency:** HOST

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: Israel Cruz	Name: Polly Kyle
Email: israel.cruz@denvergov.org	Email: Polly.Kyle@denvergov.org

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

This service agreement with Colorado Health Network, Inc. is to provides supportive services to individuals participating in the Housing Opportunities for Persons with AIDS (HOPWA) program. HOPWA provides services including housing assistance, housing navigation, and case management for low-income individuals living with Human Immunodeficiency Virus (HIV)/ Acquired Immune Deficiency Syndrome (AIDS). Housing assistance programs supported by this contract include TBRA (Tenant Based Rent Assistance), STRMU (Short Term Rent Mortgage Utilities), and PHP (Permanent Housing Placement).

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

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: (e.g. Professional Services > \$500K; IGA/Grant Agreement, Sale or Lease of Real Property):
Professional Services > \$500K

Vendor/Contractor Name (including any dba's): Colorado Health Network, Inc.

Contract control number (legacy and new): HOST-202579748

Location: 6260 E Colfax Ave, Denver, CO 80220

Is this a new contract? ☒ Yes ☐ No **Is this an Amendment?** ☐ Yes ☒ No **If yes, how many?** _____

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

- HOST-202579748 03/01/2025 – 12/31/2025

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

<i>Current Contract Amount</i>	<i>Additional Funds</i>	<i>Total Contract Amount</i>
(A)	(B)	(A+B)
\$3,039,969.00	---	\$3,039,969.00

<i>Current Contract Term</i>	<i>Added Time</i>	<i>New Ending Date</i>
3/1/2025 – 12/31/2025	N/A	N/A

Scope of work:

SERVICES DESCRIPTION

- A. The participant population to be served consists of low-income people living with HIV/AIDS who need assistance with maintaining long-term, stable, permanent housing. Assistance may be provided after review of the participant's eligibility and other requirements according to the Program Requirements and Responsibilities outlined below.
- Tenant Based Rental Assistance (TBRA):** The TBRA Program will provide housing assistance to eligible households. TBRA meets the needs of participants by subsidizing the difference between total rent and the monthly tenant rent.
 - CHN's TBRA Occupancy and Financial Assistance Coordinator will determine an individual's eligibility for the program per programmatic basic requirements and conduct all annual Housing Quality Standards (HQS) inspections.
 - All TBRA programmatic and fiscal components will be administered according to standards of care and fiscal management requirements.
 - Short Term Rent Mortgage Utility Assistance (STRMU):** The STRMU Program will provide housing assistance to eligible households for up to \$2,500.00 and/or 21 weeks (continuous or non-continuous) of assistance in a 52-week period. The 52-week period for this program aligns with the calendar year. This program is designed to prevent homelessness by assisting to retain long-term, stable, permanent housing options for households that might otherwise lose their housing. This program provides STRMU in the form of eviction/foreclosure prevention.
 - All STRMU requests are submitted for eligible clients, as determined per basic programmatic requirements, by the client's medical case manager.
 - Permanent Housing Placement (PHP):** The PHP Program will provide deposit and move-in assistance to eligible participants to help households establish permanent residence in which continued occupancy is expected.

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- a. All PHP requests are submitted for eligible clients, as determined per basic programmatic requirements by the client's medical case manager.
- 4. Supportive Services:** The Supportive Services (SS) service category may be used to provide wraparound services to eligible households. Supportive Services may include, but are not limited to, Housing Case Management (HCM), health, mental health, assessment, permanent housing placement, nutritional services, intensive care when required, and assistance in gaining access to local, State, and Federal government benefits and services, except that health services may only be provided to individuals with acquired immunodeficiency syndrome or related diseases and not to other household members living with these individuals.
 - a. As part of a client's initial intake assessment, the Medical Case Managers screen all clients to determine a clients' need for Emergency Financial Assistance (EFA) and/or Housing Services as well as identify the underlying reason for the request. Clients will be referred to appropriate HOPWA Supportive Services.
 - b. CHN will provide in-reach training to its staff in non-HOPWA programs and outreach to AIDS serving organizations and homeless shelters in the Denver Metro area regarding the HOPWA services listed above.

B. Program Requirements and Responsibilities:

1. **BASIC REQUIREMENTS SUMMARY:** Basic requirements for HOPWA program assistance are as follows:
 - a. Eligibility: proof of HIV/AIDS status and household income at or below 80% Area Median Income (AMI).
 - b. TBRA: rent calculation, housing inspection, lease, Fair Market Rent (FMR) limits, cancelled checks to landlord.
 - c. STRMU: evidence of need, time limit calculation, cancelled payment checks.
 - d. Supportive services: documentation fitting with type of service (e.g., transportation, case management), that service was delivered, time sheets, client participation records.
 - e. Permanent Housing: Proper categorization of housing information and permanent housing placement activities and costs
 - f. Participants living in the Denver Eligible Metropolitan Statistical Area (EMSA) in the counties of Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Elbert, Gilpin, Jefferson, and Park are eligible for HOPWA assistance.

Was this contractor selected by competitive process? Yes If not, why not?

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

Source of funds: Housing Opportunities for People With AIDS (HOPWA)

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

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

Who are the subcontractors to this contract? N/A

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