

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

Date of Request: 9/23/19

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: (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.)

Amends a contract with Colorado Health Network, Inc., doing business as Colorado AIDS Project and Howard Dental Center, by adding \$2,116,824 for a new total of \$3,963,551 and one year for a new end date of 2-29-20 for medical case management, mental health services, early intervention, emergency financial and housing assistance, and substance abuse assistance to individuals living with HIV/AIDS, citywide (ENVHL-201843782-01).

3. Requesting Agency: Public Health & Environment (DDPHE)

4. Contact Person:

Contact person with knowledge of proposed ordinance/resolution	Contact person to present item at Mayor-Council and Council
Name: Will Fenton	Name: Terra Haseman Swazer & Will Fenton
Email: William.Fenton@denvergov.org	Email: terra.hasemanswazer@denvergov.org

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

Colorado Health Network d/b/a Denver Colorado AIDS Project and Howard Dental Center expenditure contract provides services including medical case management, mental health, food bank, early intervention, emergency financial assistance, medical transportation, psychosocial support, and substance abuse to individuals living with HIV/AIDS residing in the TGA.

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

7. City Council District: All

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

To be completed by Mayor's Legislative Team:

Resolution/Bill Number: RR19 1018

Date Entered: _____

Key Contract Terms

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

Vendor/Contractor Name: Colorado Health Network d/b/a Denver Colorado AIDS Project and Howard Dental Center

Contract control number: ENVHL-201843782-01

Location: Citywide

Is this a new contract? Yes No **Is this an Amendment?** Yes No **If yes, how many?** 1

Contract Term/Duration (for amended contracts, include existing term dates and amended dates):
March 1, 2018 through February 29, 2020

Contract Amount (indicate existing amount, amended amount and new contract total): \$3,963,551

<i>Current Contract Amount</i>	<i>Additional Funds</i>	<i>Total Contract Amount</i>
<i>(A)</i>	<i>(B)</i>	<i>(A+B)</i>
\$1,846,727	\$2,116,824	\$3,963,551

<i>Current Contract Term</i>	<i>Added Time</i>	<i>New Ending Date</i>
3/1/2018 – 2/28/2019	3/1/2019 – 2/29/2020	2/29/2020

Scope of work:

CHN/DCAP/HDC will provide Food Bank, Medical Case Management, Oral Health care, Mental health services, Substance Abuse treatment, Psychosocial Support Services, Emergency Financial Assistance, and Medical Transportation Services to individuals living with HIV/AIDS in the Denver TGA.

Was this contractor selected by competitive process? yes **If not, why not?** n/a

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

Source of funds: Ryan White Part A grant

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

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

Who are the subcontractors to this contract? none

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