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

Places mark and	Date of Request:			
Please mark one: Bill Request or	Resolution Request			
1. Type of Request:				
□ Contract/Grant Agreement □ Intergovernmental Agreement	reement (IGA) Rezoning/Text Amendment			
☐ Dedication/Vacation ☐ Appropriation/Supplem	nental DRMC Change			
☐ Other:				
	d \$360,000 for a new contract total of \$875,594 and to extend the term tinue providing disability navigation services to eligible clients within DCSV-202367647-02, SOCSV-202262399-02)			
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: Christian Maddy	Name: Crystal Porter, Tami Tapia			
Email: christian.maddy@denvergov.org	Email: crystal.porter@denvergov.org,			
	tami.tapia@denvergov.org			
total of \$875,594 and to extend the term by one year for a ne	with Bayaud Enterprises, Inc. to add \$360,000 for a new contract ew end date of 6/30/2024 through contract control number SOCSV-providing disability navigation services to eligible clients within the			
6. City Attorney assigned to this request (if applicable): Rad	ana Haidari			
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: Professional Services > \$500K

Vendor/Contractor Name (including any dba's): Bayaud Enterprises, Inc.

Contract control number (legacy and new): SOCSV-202262399-02, SOCSV-202367647-02

Location: Citywide

Is this a new contract? \square Yes \boxtimes No Is this an Amendment? \boxtimes Yes \square No If yes, how many? $\underline{2}$

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

Original Agreement: SOCSV-202262399-00: 3/1/2022 to 6/30/2022

First Amendment: SOCSV-202262399-01, SOCSV-202264084-01: 3/1/2022 to 6/30/2023

Proposed Second Amendment: SOCSV-202262399-02, SOCSV-202367647-02: 3/1/2022 to 6/30/2024

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

Current Contract Amount	Additional Funds	Total Contract Amount	
(A)	(B)	(A+B)	
\$515,594	\$360,000	\$875,594	
Current Contract Term	Added Time	New Ending Date	
3/1/2022 - 6/30/2023	One year	6/30/2024	

Scope of work:

- A. Aid to the Needy and Disabled (AND) clients will be assisted with Social Security Income (SSI) and Social Security Disability Income (SSDI) applications or supported with appealing a denial within the allowable reconsideration timeframes. AND clients referred with a recent denial of an initial claim will receive assistance with filing an appeal for first reconsideration prior to the expiration of the appeal period.
- B. Assessment/screening of the following categories will occur independently or concurrently, depending on the participant's need:
 - 1. SSI/SSDI eligibility for initial adult applicant with no pending SSI/SSDI cases: assessment of SSI/SSDI eligibility will be determined by the Benefit Navigators through utilization of a screening. The Benefit Navigators have adopted the Outreach, Access, and Recovery (SOAR) procedures and tools to determine whether an individual is a good candidate to qualify medically for SSI/SSDI approval or needs further development. Worksheets and questionnaires are utilized as tools to determine impacts and severity of disability, as appropriate (copies of these tools are available upon request). A review of medical documentation will also be conducted. Signed releases of information are provided to all potential sources when requesting records and documentation. If medical documentation supporting stated diagnosis is insufficient or nonexistent, then referrals to appropriate providers and resources will be made for clients to enhance their medical documentation. Bayaud will utilize Colorado Benefits Management System (CBMS) to document all contact attempts and actions for any referrals made for AND clients. This information will be shared with the DHS Program Administrator.
 - SSI/SSDI reconsideration assistance for an adult applicant who has received an initial denial prior to the appeal window expiration date.
 - 3. Referral needed for Bayaud Bridge mental health services: up to 30 adults may receive along with access to therapeutic groups. When appropriate, the Mental Health Counselor may exit the claimant for reasons including, but not limited to, violation of Bayaud policies, need for higher level of care, or meeting treatment goals. Services

	To be completed by Mayor's Legislative Team:	
Resolution/Bill Number:	Date Entered:	

include facilitated connection to long-term mental health supports for the individual. Mental health records may be requested by the referring Benefit Navigator to include in the SSI/SSDI screening process and submission to Disability Determination Services (DDS).

Was this contractor selected by competitive process?	Yes	If not, why not?	
Has this contractor provided these services to the City be	efore? 🛛 Yes 🗆] No	
Source of funds: CO State, Aid to the Needy Disabled State	e Only (AND-SO) F	Funding - 24 IHGA 182199	
Is this contract subject to: W/MBE DBE S	SBE 🛭 XO101	☐ ACDBE ☐ N/A	
WBE/MBE/DBE commitments (construction, design, Air	rport concession co	ontracts): N/A	
Who are the subcontractors to this contract? N/A			
To be completed	d by Mayor's Legisla	ative Team:	
Resolution/Bill Number:		Date Entered:	_