ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at MileHighOrdinance@DenverGov.org by 11:00am on Monday. Contact the Mayor's Legislative team with questions

Please mark one: Bill Request or	Date of Request: 02/13/23 Resolution Request		
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1. Type of Request:			
☐ Contract/Grant Agreement ☐ Intergovernmental Agre	ement (IGA) Rezoning/Text Amendment		
☐ Dedication/Vacation ☐ Appropriation/Suppleme	ntal DRMC Change		
Other:			
2. Title: (Start with <i>approves, amends, dedicates</i> , etc., include <u>na</u> acceptance, contract execution, contract amendment, municip	me of company or contractor and indicate the type of request: grant al code change, supplemental request, etc.)		
Approves a contract with Vivent Health, Inc. to administer the assistance and supportive services programs for a total of \$1,1 202366622-00).	e Housing Opportunities for Persons with AIDS (HOPWA) housing 165,160 and one year with an end date of 12-31-23 (HOST		
3. Requesting Agency: Department of Housing Stability (HOST			
4. Contact Person:			
Contact person with knowledge of proposed ordinance/resolution	Contact person to present item at Mayor-Council and Council		
Name: David Riggs	Name: Jack Wylie		
Email: dave.riggs@denvergov.org	Email: jack.wylie@denvergov.org		
Affordable Housing Act of 1990 to address housing and related su HIV/AIDS. Housing is essential to the health and stability of all pe addressing a chronic health condition; in high-cost cities, such as I rent assistance to help prevent eviction, as well as housing access supportive wrap around services necessary to stabilize households their longevity.	eople, but particularly for those living with HIV/AIDS who are Denver, the challenges can be particularly dire. HOPWA provides		
HOPWA services including housing assistance, housing navigatio income. Housing assistance programs supported by this contract in Term Rent, Mortgage, Utilities), and PHP (Permanent Housing Plant)	nclude TBRA (Tenant-Based Rent Assistance), STRMU (Short-		
6. City Attorney assigned to this request (if applicable): Johna Varty			
7. City Council District: Citywide			
8. **For all contracts, fill out and submit accompanying Key	Contract Terms worksheet below**		
To be completed by M	ayor's Legislative Team:		
Resolution/Bill Number:	Date Entered:		

Key Contract Terms

	ract: (e.g. Professional Services > \$5 ervices > \$500K	00K; IGA/Grant Agreement, Sa	le or Lease of Real Property):	
Vendor/Contr	ractor Name: Vivent Health, Inc.			
Contract control number: HOST 202366622-00 Location: 648 N. Plankinton Ave. Milwaukee, WI 53203				
				Is this a new contract? ⊠ Yes □ No Is this an Amendment? □ Yes ⊠ No If yes, how many?
Contract Terr 01/01/23-12/3	m/Duration (for amended contracts, 1/23	, include <u>existing</u> term dates and	amended dates):	
Contract Amo	ount (indicate existing amount, ame	nded amount and new contract t	total):	
	Current Contract Amount (A)	Additional Funds (B)	Total Contract Amount (A+B)	
	\$1,165,160	N/A	\$1,165,160	
	Current Contract Term	Added Time	Now Ending Date	
	01/01/23-12/31/23	N/A	New Ending Date 12/31/23	
higher, in a 52-housing option Tenant-Based remaining rent will be served The Permaner served through Supportive Se healthcare and	week period. This program is designed as for households that might otherwise. Rental Assistance provides housing portion is paid in the form of a rent set through TBRA. Int Housing Placement Program provides PHP. Pervices, either in-house or through reference.	ed to prevent homelessness by assict lose their housing. 120 household assistance whereby eligible house absidy to the landlord for up to two ides deposit/move-in assistance to errals, includes housing navigation	non-continuous) of assistance, whichever is sting to retain long-term, stable, permanent is will be served through STRMU. holds pay 30% of their income and the o years with possible extension. 40 households eligible participants. 25 households will be a, healthcare, support around adherence to be and psycho-educational workshops, housing	
Was this contractor selected by competitive process? Yes If not, why not? N/A				
Has this contr	ractor provided these services to the	City before? ⊠ Yes ☐ No		
Source of fund	ds: U.S. Department of Housing and	Urban Development, Housing Opp	portunities for Persons with AIDS (HOPWA)	
Is this contract subject to: \[\begin{align*} \text{W/MBE} & \begin{align*} \text{DBE} & \text{SBE} & \text{XO101} & \text{ACDBE} & \text{N/A} \] WBE/MBE/DBE commitments (construction, design, Airport concession contracts): N/A				
	To be co	mpleted by Mayor's Legislative Te	eam:	
Resolution/Bil	esolution/Bill Number: Date Entered:			