

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: October 16, 2023

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 an intergovernmental agreement with Denver Health and Hospital Authority by adding \$892,759 for a new total of \$1,075,394 and one day for a new end date of 02-29-2024 to provide care, treatment, and supportive services to individuals living with HIV/AIDS in the Denver Transitional Grant Area (TGA), citywide (202370343-01).

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: Will Fenton & Robert George
Email: William.Fenton@denvergov.org	Email: William.Fenton@denvergov.org Robert.George2@denvergov.org

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

Denver Health and Hospital Authority provides Case Management Continuum, Early Intervention Services, Mental Health Services, Medical Transportation Services, Outpatient Ambulatory Health Services (HIV Specialty care), Oral Health Care, and Substance Abuse Outpatient Care to individuals living with HIV/AIDS in the Denver TGA.

The term is being extended by one day because the first Notice of Award (NOA) from the Health Resources and Services Administration (HRSA) had an end date of 02/28/2024. This amendment adds in the additional funding from the second NOA and adjusts the end date to 02/29/2024.

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

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:

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: Denver Health & Hospital Authority (DHHA)

Contract control number: 202370343-01 (Original Contract: 202368146-00)

Location: Citywide

Is this a new contract? Yes No **Is this an Amendment?** Yes No **If yes, how many?** 01

Contract Term/Duration (for amended contracts, include existing term dates and amended dates):
Current 03/01/2023-02/28/2024 Amended to 03/01/2023-02/29/2024

Contract Amount (indicate existing amount, amended amount and new contract total):
Current contract amount: \$182,635.00 Amended Amount: \$892,759.00 Amended Total: \$1,075,394.00

<i>Current Contract Amount</i>	<i>Additional Funds</i>	<i>Total Contract Amount</i>
<i>(A)</i>	<i>(B)</i>	<i>(A+B)</i>
\$182,635.00	\$892,759.00	\$1,075,394.00

Scope of work:

Denver Health and Hospital Authority will provide Case Management Continuum, Early Intervention Services, Mental Health Services, Medical Transportation Services, Outpatient Ambulatory Health Services (HIV Specialty care), Oral Health Care, and Substance Abuse Outpatient Care 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 HRSA

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

To be completed by Mayor's Legislative Team:

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Date Entered: _____