## **ORDINANCE/RESOLUTION REQUEST**

Please email requests to the Mayor's Legislative Team

at <u>MileHighOrdinance@DenverGov.org</u> by 9 a.m. Friday. Contact the Mayor's Legislative team with questions

Please mark one:	Bill Request	or 🖂 Re	esolution Request	Date of Request:	February 9, 2024
1. Type of Request:					
Contract/Grant Agree	ement 🗌 Intergove	rnmental Agreem	ent (IGA) 🗌 Rezoni	ing/Text Amendment	
Dedication/Vacation	Appropria	ation/Supplementa	d DRMC	Change	
Other:					

2. Title: (Start with *approves, amends, dedicates*, etc., include <u>name of company or contractor</u> 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. by adding \$1,453,564 for a new total of \$3,937,484 and one year for a new end date of 02-28-2025 to provide care, treatment, and supportive services to individuals living with HIV/AIDS in the Denver Transitional Grant Area (TGA), citywide (202472137-02).

## 3. Requesting Agency:

#### 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: 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:

Colorado Health Network, Inc. provides Childcare Services, Case Management Continuum, Emergency Financial Assistance, Food Bank/Home Delivered Meals, Housing Services, Linguistic Services, Mental Health Services, Medical Transportation Services, Outpatient Ambulatory Health Services (HIV Specialty care), Oral Health Care, Oral Health Fund, Other Professional Services, Psychosocial Support Services, and Substance Abuse Outpatient Care to individuals living with HIV/AIDS in the Denver TGA.

## 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\*\*

# **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 (including any dba's): Colorado Health Network, Inc.

Contract control number (legacy and new): 202472137-02 (Original Contract: 202368045-00; Amendment 01: 202369974-01)

Location: Citywide

Is this a new contract? 
Yes No Is this an Amendment? 
Yes No If yes, how many? \_02\_\_\_

**Contract Term/Duration (for amended contracts, include <u>existing term dates and amended</u> dates): Current Term: 03/01/2023-02/29/2024 Amended to Term: 03/01/2023-02/28/2025** 

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

Current Contract Amount	Additional Funds	Total Contract Amount	
<i>(A)</i>	<b>(B)</b>	(A+ <b>B</b> )	
\$2,483,920.00	\$1,453,564.00	\$3,937,484.00	
· · · · · ·			
Current Contract Term	Added Time	New Ending Date	
03/01/2023-02/29/2024	1 year	02/28/2025	

#### Scope of work:

Colorado Health Network, Inc. will provide Childcare Services, Case Management Continuum, Emergency Financial Assistance, Food Bank/Home Delivered Meals, Housing Services, Linguistic Services, Mental Health Services, Medical Transportation Services, Outpatient Ambulatory Health Services (HIV Specialty care), Oral Health Care, Oral Health Fund, Other Professional Services, Psychosocial Support Services, 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? 🛛 Y	Zes 🗌 No
Source of funds: Ryan White Part A grant HRSA	
Is this contract subject to: 🗌 W/MBE 🗌 DBE 🗌 SBE 🗌 XC	D101 🗌 ACDBE 🖾 N/A
WBE/MBE/DBE commitments (construction, design, Airport concess	sion contracts): n/a
Who are the subcontractors to this contract? None	

To be completed by Mayor's Legislative Team:

Date Entered: \_\_\_\_\_