

*description. Upon bill filling, the City Attorney's Office should enter the title above the description (the title should be in **bold** font).*

*Both the title and description must be entered between the red "title" and "body" below. Do **not** at any time delete the red "title" or "body" markers from this template.*

A bill for an ordinance approving a proposed Second Amendatory Agreement between the City and County of Denver and Denver Health and Hospital Authority for Transitional Residential Treatment (TRT) services.

Amends a contract with Denver Health and Hospital Authority (DHHA) by adding one year for a new end date of 8-31-17, and adding \$276,013 for a new contract in the amount of \$552,456.50 to provide up to 13 transitional residential treatment beds to individuals at DHHA's detoxification center, Denver CARES, including individuals with high, undermanaged addiction levels who are repetitive users of costly public services including criminal justice, emergency medical, or mental health services and/or detoxification services (2015-23052-02). The last regularly scheduled Council meeting within the 30-day review period is on 4-24-17. The Committee approved filing this bill by consent on 3-22-17.

Affected Council District(s) or citywide? Citywide

Contract Control Number: 2015-23052-02

Vendor/Contractor Name (including any "DBA"): Denver Health & Hospital Authority

Type and Scope of services to be performed: This Resolution will authorize an amendment with Denver Health & Hospital Authority-Transitional Residential Treatment through contract number 2015-23052-02 to add \$276,013 to their current contract. The contractor will provide up to 13 Transitional Residential Treatment (TRT) beds to individuals within a comprehensive continuum of care at DHHA's detoxification center, Denver CARES. The contractor will include services to individuals with high, undermanaged addiction levels who are frequent and/or repetitive users of costly public services including criminal justice, emergency medical or mental health services and/or detoxification services.

Location (if applicable):

WBE/MBE/DBE goals that were applied, if applicable (construction, design, Airport concession contracts):

Are WBE/MBE/DBE goals met (if applicable)?

Is the contract new/a renewal/extension or amendment?

Was this contractor selected by competitive process or sole source?

For New contracts

Term of initial contract:

Options for Renewal:

How many renewals (i.e. up to 2 renewals)?

Term of any renewals (i.e. 1 year each):

Cost of initial contract term:

Cost of any renewals:

Total contract value council is approving if all renewals exercised:

For Amendments/Renewals Extensions:

Is this a change to cost/pricing; length of term; terms unrelated to time or price (List all that apply)?

If length changing

What was the length of the term of the original contract? 09-01-15 - 08-31-16

What is the length of the extension/renewal? One year

What is the revised total term of the contract? 09-01-15 -08-31-17

If cost changing

What was the original value of the entire contract prior to this proposed change?

\$276,443.50

What is the value of the proposed change? \$276,013.00

What is the new/revised total value including change? \$552,456.50

If terms changing

Describe the change and the reason for it (i.e. compliance with state law, different way of doing business etc.)