



Legislation Details (With Text)

**File #:** 21-0587      **Version:** 1

**Type:** Resolution      **Status:** Adopted

**File created:** 5/16/2021      **In control:** Safety, Housing, Education & Homelessness Committee

**On agenda:** 6/21/2021      **Final action:** 6/21/2021

**Title:** A resolution approving a proposed Agreement between the City and County of Denver and Colorado Health Network, Inc. to provide services to individuals living with HIV/AIDS in the Denver Transitional Grant Area.  
Approves a contract with Colorado Health Network, Inc., for \$2,301,779 and through 2-28-22 for emergency financial assistance, food bank and home delivered meals, medical case management, medical transportation, outpatient / ambulatory health, mental health, oral health care and oral health care directives, psychosocial support, substance abuse outpatient care and housing services to individuals living with HIV/AIDS in the Denver Transitional Grant Area (ENVHL-202158736). The last regularly scheduled Council meeting within the 30-day review period is on 7-12-21. The Committee approved filing this item at its meeting on 5-26-21.

**Sponsors:**

**Indexes:** Emily Lapel

**Code sections:**

**Attachments:** 1. RR21 0587 DDPHE CHN\_HIV\_FY2021 Request, 2. 21-0587 Filed Resolution Colorado Health Network, Inc. 202158736-00, 3. 21-0587 Agreement Colorado Health Network, Inc. 202158736-00, 4. 21-0587 Filed Resolution Colorado Health Network, Inc., 5. 21-0587 - signed

Date	Ver.	Action By	Action	Result
6/21/2021	1	Council President	signed	
6/21/2021	1	City Council	adopted	Pass
5/26/2021	1	Safety, Housing, Education & Homelessness Committee	approved by consent	

**Contract Request Template (Contracts; IGAs; Leases)**

**Date Submitted:** 5-16-21

**Requesting Agency:** Department of Public Health and Environment  
**Division:**

**Subject Matter Expert Name:**

Name: Will Fenton & Bridget Tetteh
Email: Will.Fenton@denvergov.org

**Item Title & Description:**

*(Do not delete the following instructions)  
These appear on the Council meeting agenda. Initially, the requesting agency will enter a 2-3 sentence 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 resolution approving a proposed Agreement between the City and County of Denver and Colorado Health Network, Inc. to provide services to individuals living with HIV/AIDS in the Denver Transitional Grant Area.**

Approves a contract with Colorado Health Network, Inc., for \$2,301,779 and through 2-28-22 for emergency financial assistance, food bank and home delivered meals, medical case management, medical transportation, outpatient / ambulatory health, mental health, oral health care and oral health care directives, psychosocial support, substance abuse outpatient care and housing services to individuals living with HIV/AIDS in the Denver Transitional Grant Area (ENVHL-202158736). The last regularly scheduled Council meeting within the 30-day review period is on 7-12-21. The Committee approved filing this item at its meeting on 5-26-21.

**Affected Council District(s) or citywide?** Citywide

**Contract Control Number:** ENVHL-202158736

**Vendor/Contractor Name (including any "DBA"):** Colorado Health Network, Inc.

**Type and Scope of services to be performed:**

This is an expenditure contract for Colorado Health Network, Inc. to provide emergency financial assistance, food bank & home delivered meals, medical case management, medical transportation, outpatient / ambulatory health, mental health, oral health care and oral health care directives, psychosocial support, substance abuse outpatient care and housing services to individuals living with HIV/AIDS in the Denver Transitional Grant Area (TGA). The Denver Transitional Grant Area includes Adams, Arapahoe, Broomfield, Denver, Douglas, and Jefferson counties.

**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?**

Competitive process

**For New contracts**

**Term of initial contract:** 3/1/2021 - 2/28/22

**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:** \$2,301,779

**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?**

**What is the length of the extension/renewal?**

**What is the revised total term of the contract?**

***If cost changing***

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

**What is the value of the proposed change?**

**What is the new/revised total value including change?**

***If terms changing***

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