



## Legislation Details (With Text)

**File #:** 22-0400      **Version:** 1

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

**File created:** 4/3/2022      **In control:** Safety, Housing, Education & Homelessness Committee

**On agenda:** 5/23/2022      **Final action:** 5/23/2022

**Title:** A resolution approving a proposed Second Amendatory 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.  
Amends a contract with Colorado Health Network, Inc., doing business as Denver Colorado AIDS Project and Howard Dental Center, by adding \$728,846 for a new contract total of \$3,389,846 and one year for a new end date of 2-28-2023 for 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 (202262517-02). The last regularly scheduled Council meeting within the 30-day review period is on 6-13-22. The Committee approved filing this item at its meeting on 4-13-22.

**Sponsors:**

**Indexes:** Emily Lapel

**Code sections:**

**Attachments:** 1. RR22 0400 DDPHE CHN FY2022 Request, 2. 22-0400 Filed Resolution\_Colorado Health Network, Inc. 202262517-02, 3. 22-0400 Second Amendatory Agreement Colorado Health Network, Inc. 202262517-02, 4. 22-0400 Filed Resolution\_Colorado Health Network, Inc., 5. 22-0400 - signed

Date	Ver.	Action By	Action	Result
5/23/2022	1	Council President	signed	
5/23/2022	1	City Council	adopted	Pass
4/13/2022	1	Safety, Housing, Education & Homelessness Committee	approved by consent	Pass

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

**Date Submitted:** 4/4/22

**Requesting Agency:** DDPHE  
**Division:**

**Subject Matter Expert Name:** Will Fenton  
**Email Address:** [William.fenton@denvergov.org](mailto:William.fenton@denvergov.org)  
[<mailto:William.fenton@denvergov.org>](mailto:William.fenton@denvergov.org)  
**Phone Number:**

**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 Second Amendatory 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.**

Amends a contract with Colorado Health Network, Inc., doing business as Denver Colorado AIDS Project and Howard Dental Center, by adding \$728,846 for a new contract total of \$3,389,846 and one year for a new end date of 2-28-2023 for 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 (202262517-02). The last regularly scheduled Council meeting within the 30-day review period is on 6-13-22. The Committee approved filing this item at its meeting on 4-13-22.

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

**Contract Control Number: 202262517-02**

**Vendor/Contractor Name (including any "DBA"):** Colorado Health Network, Inc., doing business as Denver Colorado AIDS Project and Howard Dental Center

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

Colorado Health Network d/b/a Denver Colorado AIDS Project and Howard Dental Center expenditure contract provides services including medical case management, mental health, food bank, early intervention, emergency financial assistance, housing services, outpatient ambulatory health services, medical transportation, psychosocial support, and substance abuse to individuals living with HIV/AIDS residing in the TGA.

**Location (if applicable): Citywide**

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

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

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

**Was this contractor selected by competitive process or sole source? Grant**

**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)? Added term and capacity**

***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?**

<i>Current Contract Term</i>	<i>Added Time</i>	<i>New Ending Date</i>
3/1/2021 - 2/28/2022	12 months	2/28/2023

***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?**

<i>Current Contract Amount (A)</i>	<i>Additional Funds (B)</i>	<i>Total Contract Amount (A+B)</i>
\$2,661,000.00	\$728,846.00	\$3,389,846.00

***If terms changing***

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