



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 bill for an ordinance approving a proposed Agreement between the City and County of Denver and the University of Colorado Hospital Authority to provide services to individuals living with HIV/AIDS in the Denver Transitional Grant Area.**

Approves an intergovernmental agreement with University of Colorado Hospital Authority (UCHA) for \$1,074,443 and through 2-28-22 for medical case management, mental health, substance abuse outpatient care, outpatient/ambulatory health and early intervention services to individuals living with HIV/AIDS in the Denver Transitional Grant Area (ENVHL-202158724). 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-202158724

**Vendor/Contractor Name (including any "DBA"):** University of Colorado Hospital Authority

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

This is an expenditure contract for University of Colorado Hospital Authority to provide medical case management, mental health, substance abuse outpatient care, outpatient/ambulatory health and early intervention 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: \$1,074,443**

**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.)**