

File No. 250543

Committee Item No. 9

Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee Date June 4, 2025

Board of Supervisors Meeting Date _____

Cmte Board

<input type="checkbox"/>	<input type="checkbox"/>	Motion
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Resolution
<input type="checkbox"/>	<input type="checkbox"/>	Ordinance
<input type="checkbox"/>	<input type="checkbox"/>	Legislative Digest
<input type="checkbox"/>	<input type="checkbox"/>	Budget and Legislative Analyst Report
<input type="checkbox"/>	<input type="checkbox"/>	Youth Commission Report
<input type="checkbox"/>	<input type="checkbox"/>	Introduction Form
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Department/Agency Cover Letter and/or Report
<input type="checkbox"/>	<input type="checkbox"/>	MOU
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Grant Information Form
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Grant Budget
<input type="checkbox"/>	<input type="checkbox"/>	Subcontract Budget
<input type="checkbox"/>	<input type="checkbox"/>	Contract/Agreement
<input type="checkbox"/>	<input type="checkbox"/>	Form 126 – Ethics Commission
<input type="checkbox"/>	<input type="checkbox"/>	Award Letter
<input type="checkbox"/>	<input type="checkbox"/>	Application
<input type="checkbox"/>	<input type="checkbox"/>	Public Correspondence

OTHER (Use back side if additional space is needed)

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>MYR Proposal Memo 3/8/2023</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>MYR Scope of Work 3/30/2023</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Executed MOU Blue Cross 7/1/2024</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>DPH Statement on Retroactivity 5/29/2025</u>
<input type="checkbox"/>	<input type="checkbox"/>	_____
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Completed by: Brent Jalipa Date May 29, 2025

Completed by: Brent Jalipa Date _____

1 [Accept and Expend Grant - Retroactive - California Department of Health Care Services -
2 Blue Cross of California Partnership Plan, Inc. (Anthem) - California Advancing and Innovating
3 Medi-Cal (CalAIM) Capacity Building Incentive Payment Program - \$265,000]

4 **Resolution retroactively authorizing the Department of Public Health to accept and**
5 **expend a grant in the amount of \$265,000 from the California Department of Health**
6 **Care Services through the Blue Cross of California Partnership Plan, Inc. (Anthem) for**
7 **participation in a program entitled, “California Advancing and Innovating Medi-Cal**
8 **(CalAIM) Capacity Building Incentive Payment Program,” for the period of July 1, 2024,**
9 **through June 30, 2025.**

10
11 WHEREAS, The California Department of Health Care Services (DHCS), through the
12 Blue Cross of California Partnership Plan, Inc. (Anthem) as a pass-through entity, has agreed
13 to fund the Department of Public Health (DPH) in the amount of \$265,000 for participation in a
14 program, entitled “California Advancing and Innovating Medi-Cal (CalAIM) Capacity Building
15 Incentive Payment Program,” for the period of July 1, 2024, through June 30, 2025; and

16 WHEREAS, Under the Office of Coordinated Care (OCC), DPH operates the Bridge
17 and Engagement Services Team: Neighborhoods (BEST Neighborhoods) to provide rapid,
18 trauma-informed behavioral and physical health assessments; community-based therapeutic
19 interventions to promote healing, wellness, and positive community participation; and linkages
20 to benefits, housing and community resources; and

21 WHEREAS, This grant provides partial funding for BEST Neighborhoods Peers, who
22 will link and navigate clients to housing and benefits, support DPH teams in: Engagement and
23 relationship building with people experiencing homelessness, and linkage and engagement to
24 Enhanced Care Management and Community Supports; and

25 WHEREAS, The grant does not require an Annual Salary Ordinance Amendment; and

1 WHEREAS, A request for retroactive approval is being sought because DPH received
2 the award letter on March 31, 2025, for a project start date of July 1, 2024; and

3 WHEREAS, The Department proposes to maximize use of available grant funds on
4 program expenditures by not including indirect costs in the grant budget; now, therefore, be it

5 RESOLVED, That the Board of Supervisors hereby waives inclusion of indirect costs in
6 the grant budget; and, be it

7 FURTHER RESOLVED, That DPH is hereby authorized to retroactively accept and
8 expend a grant in the amount of \$265,000 from DHCS through Anthem; and, be it

9 FURTHER RESOLVED, That DPH is hereby authorized to retroactively accept and
10 expend the grant funds pursuant to Administrative Code, Section 10.170-1; and, be it

11 FURTHER RESOLVED, That the Director of Health is authorized to enter into the
12 Agreement on behalf of the City; and, be it

13 FURTHER RESOLVED, That within thirty (30) days of the Grant Agreement being fully
14 executed by all parties, the Director of Health shall provide a copy to the Clerk of the Board of
15 Supervisors for inclusion in the official file.

1 Recommended: Approved: /s/
2 Mayor
3 /s/
4 Daniel Tsai Approved: /s/
5 Director of Health Controller
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File Number: 250543
(Provided by Clerk of Board of Supervisors)

Grant Resolution Information Form
(Effective July 2011)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

1. Grant Title: **California Advancing and Innovating Medi-Cal ("CalAIM") Capacity Building Incentive Payment Program**
2. Department: **Department of Public Health
San Francisco Health Network**
3. Contact Person: **Alex Boyder** Telephone: **510 381-4842**
4. Grant Approval Status (check one):
☒ Approved by funding agency ☐ Not yet approved
5. Amount of Grant Funding Approved or Applied for: **\$265,000**
- 6a. Matching Funds Required: **\$0**
b. Source(s) of matching funds (if applicable): **N/A**
- 7a. Grant Source Agency: **California Department of Health Care Services**
b. Grant Pass-Through Agency (if applicable): **Blue Cross of California Partnership Plan, Inc. (Anthem)**
8. Proposed Grant Project Summary: **Under the Office of Coordinated Care (OCC), the Department of Public Health operates the Bridge and Engagement Services Team: Neighborhoods (BEST Neighborhoods) to provide rapid, trauma-informed behavioral and physical health assessments; community-based therapeutic interventions to promote healing, wellness, and positive community participation; and linkages to benefits, housing and community resources. The engagement teams are composed of street-based clinicians, peers, nurses and psychiatric practitioners in assigned neighborhoods. This grant provides partial funding for BEST Neighborhoods Peers, who will link and navigate clients to housing and benefits, support SFDPH teams in: Engagement and relationship building with people experiencing homelessness, and linkage and engagement to Enhanced Care Management and Community Supports.**
9. Grant Project Schedule, as allowed in approval documents, or as proposed:
Start-Date: **7/1/2024** End-Date: **6/30/2025**
- 10a. Amount budgeted for contractual services: **\$265,000**
b. Will contractual services be put out to bid? **No**
c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? **N/A**
d. Is this likely to be a one-time or ongoing request for contracting out? **One-time**

11a. Does the budget include indirect costs? ☐ Yes ☒ No

b1. If yes, how much? **N/A**

b2. How was the amount calculated? **N/A**

c1. If no, why are indirect costs not included?

☒ Not allowed by granting agency ☐ To maximize use of grant funds on direct services [
] Other (please explain):

c2. If no indirect costs are included, what would have been the indirect costs? **5% of Direct Costs**

12. Any other significant grant requirements or comments:

**We respectfully request for approval to accept and expend these funds retroactive to July 1, 2024.
The Department received the award on March 31, 2025.**

The grant does not require an ASO amendment and does not create net new positions.

Project Description: HN WPC WP103 FY 2324 HHIP

Project ID: 10041847

Proposal ID: CTR00004479

Fund ID: 11580

Version ID: V101

Authority ID: 10001

Activity ID: 0001

****Disability Access Checklist** (Department must forward a copy of all completed Grant Information Forms to the Mayor's Office of Disability)**

13. This Grant is intended for activities at (check all that apply):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Existing Site(s) | <input type="checkbox"/> Existing Structure(s) | <input type="checkbox"/> Existing Program(s) or Service(s) |
| <input type="checkbox"/> Rehabilitated Site(s) | <input type="checkbox"/> Rehabilitated Structure(s) | <input type="checkbox"/> New Program(s) or Service(s) |
| <input type="checkbox"/> New Site(s) | <input type="checkbox"/> New Structure(s) | |

14. The Departmental ADA Coordinator or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to:

1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures;
2. Having auxiliary aids and services available in a timely manner in order to ensure communication access;
3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor's Office on Disability Compliance Officers.

If such access would be technically infeasible, this is described in the comments section below:

Comments:

Departmental ADA Coordinator or Mayor's Office of Disability Reviewer:

Toni Rucker, PhD
(Name)

DPH ADA Coordinator
(Title)

Date Reviewed: 4/30/2025 | 4:32 PM PDT

DocuSigned by:
Toni Rucker
(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Daniel Tsai
(Name)

Director of Health
(Title)

Date Reviewed: 5/1/2025 | 4:45 PM PDT

Signed by:
Jenny Louie for Daniel Tsai
(Signature Required)



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London N. Breed
Mayor

March 8, 2023

To: Kristopher Kuntz, Housing Manager (Anthem) and David Ries, Director of Behavioral Health and Housing Supports (SFHP)

CC: Carissa Avalos, Regional Program Manager (Anthem); Hanan Obeidi, Vice President of Health Services Programs (SFHP); Ed Ortiz, Consultant (SFHP)

The City and County of San Francisco (CCSF) is eager to submit proposals and receive funding from our local Managed Care Plan partners through the Housing and Homelessness Incentive Program (HHIP). With these incentive funds, CCSF will be able to resource projects that will greatly enhance efforts in San Francisco to address homelessness and housing insecurity, and keep people housed through housing supports and access to high quality health care.

Enclosed are the two HHIP proposals that CCSF has prioritized at this time. These proposals were developed and supported by the CCSF Departments of Homelessness and Supportive Housing (HSH), Department of Public Health (DPH), Human Services Agency (HSA) and the Mayor's Office. CCSF internally reviewed gaps in services where these new resources can address the unmet needs of the community. These proposals were further developed in partnership with representatives from Anthem and San Francisco Health Plan. We trust that these two proposals will help CCSF meet many of the HHIP measures, support CCSF's efforts to address homelessness in San Francisco through housing supports and access to high quality health care and improve CCSF's ability to meet the overall goals of HHIP.

Thank you for the opportunity to submit proposals for HHIP and for your investment. We look forward to your response. For questions, contact Bernadette Gates at #628-233-8266 or bernadette.gates@sfdph.org.

Sincerely,

Hali Hammer, MD
Director of Ambulatory Care, San Francisco Health Network

Anna Pineda
Deputy Director, Economic Support & Self Sufficiency, San Francisco Human Services Agency

Noelle Simmons
Chief Deputy Director, San Francisco Department of Homelessness and Supportive Housing



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SCOPE OF WORK

Street Medicine BEST Neighborhoods Peers

March 30, 2023

Project Name	Street Medicine - Bridge and Engagement Services Team (BEST): Neighborhoods Teams
Point of Contact and Email	Krista Gaeta (krista.gaeta@sfdph.org)
Exec Sponsor	Imo Momoh
Team Members	Krista Gaeta, Dara Papo, Deb Borne, Heather Weisbrod
Project Timeframe	July 2023 – June 2025

Project background and description

Under the Office of Coordinated Care (OCC), the Department of Public Health is working to expand street-based services by creating Bridge and Engagement Services Team (BEST) Neighborhood engagement teams to provide rapid, trauma-informed behavioral and physical health assessments; community-based therapeutic interventions to promote healing, wellness, and positive community participation; and linkages to benefits, housing and community resources. The new engagement teams are composed of street-based clinicians and peers in assigned neighborhoods. The integrated teams will be working 7 days a week with focused and phased interventions to support clients in transitioning to ongoing care and services.

Project scope

The OCC is the primary conduit for DPH to accept, triage, and respond to referrals for follow up and linkage to behavioral and physical health care from hospitals, clinics and other non-medical street-based programs across the city. The BEST Neighborhood teams will be directed to reach people for linkage/follow up. The team works closely with other street teams within the City and County such as Street Crisis Response team, The Homeless Outreach Team, and Community Ambassadors.

The OCC BEST Neighborhood teams will:

- Respond to referrals and provide targeted engagement, assessment, care planning and linkage to other street and four walls health services.



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- Assess for 5150
- Connect clients to low-threshold services for immediate psychiatric or medical need, such as Street Medicine, or Managed Alcohol Program
- Connect clients to other linkage and care managers from OCC, BEST ECM, additional SFHN ECM, and ICM teams
- BEST Neighborhood Peers will
 - Link and navigate clients to housing and benefits
 - Support SFPD Street Medicine health teams in:
 - engagement and relationship building with people experiencing homelessness.
 - linkage and engagement to Street Medicine Enhanced Care Management and Community Supports.
 - Support clients with a street based Medi-Cal enrollment processes, which would otherwise need to be done in four walls centers.

Sustainability Plan: Behavioral Health Services Department has secured a portion of ongoing funding for future fiscal years and is optimistic about additional ongoing funding opportunities that are in process. The team would welcome further discussion about this with our Managed Care Plan Partners and expect updates about additional funding soon.

Project Deliverables

Exclusions – Describe any specific components that are excluded from this project
N/A

Major milestones (<i>first 6 months</i>)	
Deliverables	Delivery Date
Onboarding and Training	July – August 2023
Resource Guide	August 2023
75% of Staff Trained and Actively Delivering Services	September 2023
First Quarterly Report	December 2023



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Stakeholders

Name	Department	Role
Krista Gaeta	DPH	Director, Strategic Initiatives
Dara Papo	DPH	Director, Whole Person Integrated Care
Deb Borne	DPH	Administrator
Imo Momoh	DPH	Director, Behavioral Health Managed Care
Heather Weisbrod	DPH	Director, Office of Coordinated Care

Estimated Budget : **\$2,700,000 in FY 23-24 and \$2,835,000 in FY 24-25 (pending final RFP results)**

Proposed Contracts Budget	TOTAL
Salaries	\$1,749,248
Employee Benefits	\$481,045
Subtotal Salaries & Employee Benefits	\$2,230,293
Operating Expenses	\$101,555
Subtotal Direct Expenses	\$2,331,848
Indirect Expenses	\$343,314
Indirect %	14.72%
TOTAL FUNDING USES	\$2,675,162



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Staffing

Position Title	FTE	Salaries
Divisional Director	0.05	\$6,695
Associate Director	0.50	\$57,500
Program Assistant	1.00	\$74,915
Peer Supervisor	3.00	\$237,875
Peer Counselor	15.50	\$1,372,263
Totals:	20.05	\$1,749,248
Employee Benefits:	27.50%	\$481,045

Operating

Estimated Annual Budget	
Rent	\$16,200
Utilities (telephone, electricity, water, gas)	\$27,645
Building Repair/Maintenance	\$900
Occupancy Total:	\$44,745
Office Supplies	\$3,000
Program Supplies	\$12,000
IT Supplies	\$9,000



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Materials & Supplies Total:		\$24,000
Training/Staff Development		\$4,000
Insurance		\$14,450
Membership Fee		\$1,500
Professional License		
Software Subscription		\$2,500
Permits		
Equipment Lease & Maintenance		\$360
General Operating Total:		\$22,810
Local Travel		\$500
Staff Travel Total:		\$500
Other (provide detail):		
Recruitment (Job Postings, etc.)		\$2,000
Client Stipends		
Client-Related Food		\$2,500
Client-Related Other Activities		\$5,000
Other Total:		\$9,500
TOTAL OPERATING EXPENSE		\$101,555

MEMORANDUM OF AGREEMENT (MOA)
BETWEEN
BLUE CROSS OF CALIFORNIA PARTNERSHIP PLAN, INC. (ANTHEM)
AND
CITY AND COUNTY OF SAN FRANCISCO, a municipal corporation, acting by and
through the San Francisco Department of Public Health (Sponsored Party)

This CALIFORNIA ADVANCING AND INNOVATING MEDI-CAL (“CalAIM”) CAPACITY BUILDING INCENTIVE PAYMENT PROGRAM (“IPP”) Agreement (“Agreement”) is made as of July 1, 2024, in the City and County of San Francisco, State of California, by and between BLUE CROSS OF CALIFORNIA PARTNERSHIP PLAN, INC. (“ANTHEM”) and the City and County of San Francisco, a municipal corporation (“City”), acting by and through the San Francisco Department of Public Health (“Sponsored Party”),

WHEREAS, CalAIM is a multi-year Department of Health Care Services (“DHCS”) initiative to improve the quality of life and health outcomes of the Medi-Cal managed care population through the implementation of broad delivery system, program and payment reforms across the Medi-Cal program; and

WHEREAS, DHCS is making incentive payments to qualifying MCPs that meet milestones and metrics associated with the implementation of components of CalAIM, including the ECM and Community Supports (ILOS) programs; and

WHEREAS, ANTHEM has received those funds and wishes to grant those funds to Sponsored Party in accordance with the capacity funding requirements; and

WHEREAS, Sponsored Party desires to receive such an incentive payment on the terms and conditions set forth herein:

Now, THEREFORE, in consideration of the premises and the mutual covenants contained in this Agreement and for other good and valuable consideration, the receipt and adequacy of which is acknowledged, the parties agree as follows:

CATEGORY	Sponsored Party	ANTHEM
LIAISON	Appoint liaison person(s) to coordinate activities with Anthem and to notify Sponsored Party staff of their roles and responsibilities to comply with the requirements of the Provider Capacity Incentive Program.	Appoint liaison person(s) to coordinate activities with Sponsored Party and to notify Sponsored Party’s staff and providers of their roles and responsibilities to comply with the requirements of the Provider Capacity Incentive Program.
CAPACITY FUNDING REQUIREMENTS	1. Capacity funds cannot be used for: capital campaigns, endowments, annual drives, operating deficit, debt retirement, replacement of previously funded services, direct services billable to other payers, or miscellaneous line items.	1. Anthem will advance to Sponsored Party one lump sum in the amount of \$265,000.00 (“sponsorship funds”) as an incentive to assist with the following provider capacity building activities: a. Staffing and training costs to support program expansion, in

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	<p>2. Provide Anthem required documentation to support funding request.</p>	<p>alignment with Anthem's network needs as indicated by DHCS.</p> <p>b. Training and other staff development/retention activities</p> <p>2. Funding can be taken back to the extent that Sponsored Party utilizes sponsorship funds in a manner expressly prohibited or in a manner not authorized, and to the extent any sponsorship funds remain unspent all unspent funds shall be returned if Anthem determines that the Sponsored Party has not or will not meet program requirements. Provided that Sponsored Party substantially meets its goals as specified in this Agreement, in Anthem's sole discretion, and provided that Sponsored Party is given an opportunity to submit to Anthem additional information or evidence that it has substantially met its goals under this Agreement after written notice by Anthem that it has determined that Sponsored Party has not substantially met its goals under this Agreement, then ANTHEM will waive repayment of such sponsorship, or a prorated portion, thereof. If the ECM/CS Provider Agreement between ANTHEM and Sponsored Party is terminated for any reason, with the exception of Sponsored Party's breach of Agreement, during the duration of this Agreement, Sponsored Party understands and agrees that it will repay any unspent sponsorship funds.</p>
ELIGIBILITY, TRACKING AND FOLLOW-UP	See Exhibit A of this MOA.	Review Sponsored Party's submitted documentation to ensure program requirements are met.
QUALITY ASSURANCE	Sponsored Party agrees to provide progress reports as requested and submit outcome documentation by the date specified by Anthem that are provided to Sponsored Party with reasonable notice. Outcome documentation of incentive activities includes using templates provided by Anthem. Training and technical assistance will be provided by Anthem.	Collect needed documentation for review through Plan resources.

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MONITORING AND CONFLICT RESOLUTION	<ol style="list-style-type: none"> 1. Coordinate with Anthem liaison(s) to schedule quarterly meetings to monitor this MOA. Events or circumstances which require consideration or conflict resolution shall be presented at such meetings. 2. MOA will commence on the Effective Date and will be in force until the end of DHCS incentive phase out fiscal year 2024-2025 and thus an end date of 06/30/2025, unless otherwise informed by DHCS and incorporated into this MOA through an amendment, or as noted in subsection 3 below. 3. Either party may terminate this agreement with or without cause on thirty (30) calendar days' prior written notice to the other party. The MOA will automatically terminate upon one or more of the following events: <ol style="list-style-type: none"> a. Termination of Sponsored Party's CalAIM Agreement (Participation Agreement) with Anthem; or b. Sponsored Party fails to meet requirements and measurements as outlined in Exhibit A of this MOA. 	<ol style="list-style-type: none"> 1. Coordinate with Sponsored Party liaison(s) to schedule quarterly meetings to monitor this MOA. 2. MOA will commence on the Effective Date and will be in force until the end of DHCS incentive phase out fiscal year 2024-2025 and thus an end date of 06/30/2025, unless otherwise informed by DHCS and incorporated into this MOA through an amendment, or as noted in subsection 3 below. 3. Either party may terminate this MOA with or without cause on thirty (30) calendar days' prior written notice to the other party. The MOA will automatically terminate upon one or more of the following events: <ol style="list-style-type: none"> a. Termination of Sponsored Party's CalAIM Agreement (Participation Agreement) with Anthem; or b. Sponsored Party fails to meet requirements and measurements as outlined in Exhibit A of this MOA.
STATE MANDATE	The Provider Incentive Program complies with DHCS All Plan Letter (APL) 21-016 , including any future APLs concerning IPP.	
PROTECTED HEALTH INFORMATION	<ol style="list-style-type: none"> 1. Sponsored Party will comply with all applicable laws pertaining to use and disclosure of Protected Health Information (PHI) including: <ol style="list-style-type: none"> a. HIPAA / 45 C.F.R. Parts 160 and 164 b. LPS / W & I Code Sections 5328-5328.15 c. 45 C.F.R. Part 2 d. HITECH Act (42. U.S.C. Section 17921 <i>et. seq.</i> e. CMIA (CA Civil Code 56 through 56.37) 2. Sponsored Party will train all members of its workforce on policies and procedures regarding PHI as necessary and appropriate for them to carry out their functions within the covered entity. 	<ol style="list-style-type: none"> 1. Anthem will comply with all applicable laws pertaining to use and disclosure of PHI including: <ol style="list-style-type: none"> a. HIPAA / 45 C.F.R. Parts 160 and 164 b. LPS / W & I Code Sections 5328-5328.15 c. 45 C.F.R. Part 2 d. HITECH Act (42. U.S.C. Section 17921 <i>et. seq.</i> e. CMIA (CA Civil Code 56 through 56.37) 2. Anthem will encrypt any data transmitted via Electronic Mail (email) containing confidential data of Anthem members such as PHI and Personal Confidential Information (PCI) or other

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	<div>3. Only encrypted PHI as specified in the HIPAA Security Rule will be disclosed via email. Unsecured PHI will not be disclosed via email.</div> <div>4. Sponsored Party will notify Anthem of verified breaches (as defined by the HITECH Act as posing a significant risk of financial, reputational or other harm to the client) and corrective actions planned or taken to mitigate the harm involving members within 30 business days.</div>	<div>confidential data to Anthem or anyone else including state agencies.</div> <div>Anthem will notify Sponsored Party within 24 hours during a work week of any suspected or actual breach of security, intrusion or unauthorized use or disclosure of PHI and/or any actual or suspected use or disclosure of data in violation of any applicable Federal and State laws or regulations.</div>
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Term. This Agreement will commence on the Effective Date and will be in force until June 30, 2025, unless the Agreement is terminated as specified below in the Termination Section of this Agreement.

Termination. Either Party may terminate this Agreement with or without cause upon sixty (60) calendar days’ prior written notice to the other Party. This Agreement will automatically terminate upon termination of Sponsored Party Participation Agreement with Anthem.

(Remainder of this page is intentionally left blank)

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EXHIBIT A

The CalAIM Capacity Building Incentive Payment Program (IPP) is for Anthem California Medicaid business-only. Unless otherwise defined in this Agreement, all defined terms shall have the meanings set forth in the Agreement. The parties agree that the terms of this agreement may be modified upon written mutual agreement.

Under the Program, Anthem will advance to Sponsored Party in one lump sum in the amount of \$ 265,000.00 as an incentive to assist Sponsored Party with (Check all that apply):

- ☒ Provider Capacity Building
- ☒ Training and other Staff development/retention activities
- ☐ Purchase or Improve IT Infrastructure
- ☐ Service Model/Program Development to Engage Hard to Reach Populations
- ☐ Service model/program development for future Populations of Focus (PoFs) such as Jail Re-Entry, Child Services PoF integration
- ☐ Closure of other identified gaps

Provided that Sponsored Party meets its goals under the Program as specified herein during the term of the Agreement, then Anthem will waive repayment of such sponsorship, or a prorated portion, thereof.

If the Sponsored Party Participation Agreement between Anthem and Sponsored Party is terminated for any reason during the duration of this Agreement, Sponsored Party understands and agrees that it will repay the Sponsorship in full.

Provider Capacity Incentive Payment Program (IPP) Services and Goals

Measurements

In order to be eligible for IPP funds, Sponsored Party chooses the goals as bolded below:

- 1. Increase staff roster size to serve more ECM and/or CS members.**
- 2. Implement Staff Training or Community Based Training forums to support ECM and/or CS Membership**
- ~~3. Purchase or improve IT infrastructure to support ECM and/or CS systems including certified EHR technology, care management document systems, closed loop referral, billing systems/services, and onboarding/enhancements to health information exchange capabilities~~
- ~~4. Community/County Partnerships: Development and maintenance of HIE/HIT technology or community based HER.~~

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- ~~5. Community/County Partnerships: CS Service Model/Program Development and ECM Jail Re-Entry, Child Services PoF Integration~~
- ~~6. Community/County Partnerships: Consulting/Program Planning costs that focus on broad engagement across all stakeholders.~~
- ~~7. Closure of other identified gaps~~

Required documentation to support the capacity building need request and the resulting impact of the funding is required and outlined in the Anthem IPP Program Description.

(Remainder of this page is intentionally left blank)

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Blue Cross of California Partnership Health Plan, Inc.

MSPi:

03/31/2025

Date

Name: **Michael Piellucci**

Title: **Regional Vice President**

City and County of San Francisco, a municipal corporation, acting by and through the San Francisco Department of Public Health

DocuSigned by:

Naveena Bobba

52BC36E46CB9439...

02/26/2025 | 2:36 PM PST

Date

Name: **Naveena Bobba**

Title: **Deputy Director of Health**

Approved as to Form:
DAVID CHIU
City Attorney

By:

DocuSigned by:

Arnulfo Medina

71CE0E756B6346E...

Arnulfo Medina
Deputy City Attorney

Date: **02/25/2025 | 2:40 PM PST**

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH
San Francisco Health Network
IPP
July 1, 2024 - June 30, 2025

		7/1/24-6/30/2025	Total Amount
	Contractual		
	Rams Contract for Peers for BEST Neighborhood Team	\$ 265,000.00	\$ 265,000.00
Total		\$ 265,000.00	\$ 265,000.00



San Francisco Department of Public Health

Daniel Tsai
Director of Health

City and County of San Francisco
Daniel Lurie
Mayor

Memorandum

To: Honorable Members of the Board of Supervisors

From: San Francisco Department of Public Health

Date: Thursday, May 29, 2025

RE: **Retroactivity re: File 250543**

This Resolution seeks authorization for the Department of Public Health (DPH) to retroactively accept and expend a gift in the amount of \$265,000 from the California Department of Healthcare Services through the Blue Cross of California Partnership Plan, Inc. (Anthem).

This accept and expend gift is retroactive because DPH received the notice of the gift after the project start date. DPH received the award letter on March 31, 2025, for a pre-determined project start date of July 1, 2024. Upon receiving the notice of award, DPH put together the accept and expend packet and forwarded it to the Controller's Office for review on April 15, 2025. The Controller's Office forwarded the packet to the Mayor's Office for review on May 8, 2025, for introduction on May 20, 2025. We respectfully request retroactive authorization for this item.

Please contact Christina Chiong, SFDPH Accept & Expend Unit Manager, at christina.chiong@sfdph.org for any questions about this request for retroactive authorization.

City and County of San Francisco

Department of Public Health



Daniel Lurie
Mayor

TO: Angela Calvillo, Clerk of the Board of Supervisors

FROM: Daniel Tsai
Director of Health

DATE: 4/30/2025

SUBJECT: Grant Accept and Expend

GRANT TITLE: California Advancing and Innovating Medi-Cal (CalAIM)
Capacity Building Incentive Payment Program - \$265,000

Attached please find the original and 1 copy of each of the following:

- ☒ Proposed grant resolution, original signed by Department
- ☒ Grant information form, including disability checklist
- ☒ Budget and Budget Justification
- ☐ Grant application: Not Applicable. No application submitted.
- ☒ Agreement / Award Letter
- ☒ Other (Explain): Investment Proposals, Scope of Work,

Special Timeline Requirements:

Departmental representative to receive a copy of the adopted resolution:

Name: Gregory Wong (greg.wong@sfdph.org) Phone: 554-2521

Interoffice Mail Address: Dept. of Public Health, 101 Grove St # 108

Certified copy required Yes ☐

No ☒

OFFICE OF THE MAYOR
SAN FRANCISCO



DANIEL LURIE
MAYOR

TO: Angela Calvillo, Clerk of the Board of Supervisors
FROM: Adam Thongsavat, Liaison to the Board of Supervisors
RE: [Accept and Expend Grant - Retroactive - California Department of Health Care Services - Blue Cross of California Partnership Plan, Inc. (Anthem) - California Advancing and Innovating Medi-Cal (CalAIM) Capacity Building Incentive Payment Program - \$265,000]

DATE: May 20, 2025

Resolution authorizing the Department of Public Health to retroactively accept and expend a grant in the amount of \$265,000 from the California Department of Health Care Services through the Blue Cross of California Partnership Plan, Inc. (Anthem) for participation in a program entitled, "California Advancing and Innovating Medi-Cal (CalAIM) Capacity Building Incentive Payment Program," for the period of July 1, 2024, through June 30, 2025.

Should you have any questions, please contact Adam Thongsavat at adam.thongsavat@sfgov.org