

**AMENDMENT NUMBER FIVE
TO
THE HOUSING AND HOMELESSNESS INCENTIVE PROGRAM AGREEMENT
BETWEEN
SAN FRANCISCO HEALTH AUTHORITY dba SAN FRANCISCO HEALTH PLAN
AND
SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH**

This Amendment Number Five (“Amendment”) to the Housing and Homelessness Incentive Program Agreement (“Agreement”) between San Francisco Health Authority doing business as the **San Francisco Health Plan** (“Health Plan” or “MCP”), and the **City and County of San Francisco** (“City”), a municipal corporation, acting by and through the **San Francisco Department of Public Health** (“HHIP Grantee”), referenced collectively as parties and individually as party, is effective May 15, 2025.

RECITALS

WHEREAS, Health Plan and HHIP Grantee previously entered into a Housing and Homelessness Incentive Program Agreement (“Agreement”); and

WHEREAS, pursuant to Section 7. of the Agreement, the parties desire to execute this Amendment Number Five to amend the Agreement to incorporate a new grant for the purposes of expanding recuperative care community supports; and

NOW, THEREFORE, in consideration of the mutual promises set forth below, the Parties agree to amend the Agreement as follows:

1. Exhibit A-5 (Expanding Recuperative Care Community Supports), is added to the Agreement as attached hereto and incorporated herein by this reference.

[Remainder of page is left blank intentionally.]

IN WITNESS WHEREOF, the Parties have executed this Amendment as of the date first hereinabove written.
Except as modified above, all terms and conditions of the Agreement, as previously amended, shall remain the same.

San Francisco Health Plan

Signed by:
Signature: Jenn Moore
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Print Name: Jenn Moore
Title: Chief operating officer
Date: 6/17/2025

**City and County of San Francisco acting by and through
the San Francisco Department of Public Health for the
San Francisco Health Network**

DocuSigned by:
Approved By: Naveena Bobba
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Print Name: Naveena Bobba
Title: Deputy Director Of Health
Date: 06/16/2025 | 8:52 AM PDT

Approved as to Form:

David Chiu

City Attorney

DocuSigned by:
By: Arnulfo Medina
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Arnulfo Medina
Deputy City Attorney
Date: 06/13/2025 | 4:02 PM PDT

Initial
TB
Recommended By: _____
Tangerine Brigham
SFHN Chief Operating and Strategy Officer

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EXHIBIT A-5
Expanding Recuperative Care Community Supports
Grant Number HHIP-20

HHIP is for Medi-Cal only. Unless otherwise defined in this Agreement, all defined terms shall have the meanings set forth in the DHCS HHIP All Plan Letter 22-007.

Under the Program, MCP will advance funds (See Section 6 (Total Grant Amount)) as a grant to assist MCP with meeting HHIP metrics and/or performance goals. If the Agreement between MCP and HHIP Grantee is terminated for any reason, HHIP Grantee understands and agrees that it will repay all unspent grant funds pursuant to Section 4 (Term and Termination) of the Agreement and Section 9 (Recovery and/or Return of Fund Disbursement) of this Exhibit.

1. Grantee Information:

Grantee Name: SF Department of Department of Public Health ("DPH")	Primary Contact for Grant: Name: Bernadette Gates Email: [REDACTED] Phone: [REDACTED]
Grantee Address: [REDACTED] San Francisco, CA 94110	County Served: San Francisco

2. Description of Grant/Investment: HHIP Grantee aims to tackle San Francisco's mental health, addiction, and homelessness crisis by moving people quickly from the streets into effective treatment and sustained recovery. Additionally, caring for clients in the right setting and avoiding unnecessary emergency department utilization and hospital days are also primary HHIP Grantee's goals. Key strategies to these goals are to expand Recuperative Care Community Supports and streamline program delivery. The RESTORE 1, Eleanora Fagan/Kean, and Hummingbird programs provide recuperative care for Medi-Cal members experiencing homelessness. Included in the models of care are referrals to Coordinated Entry, Housing Community Supports, ECM and other services to promote physical and behavioral health linkages, recovery, and stabilization. This funding request is for RESTORE 1 operating expenses and staffing, and for Epic implementation for RESTORE 1, Eleanora Fagan/Kean, and Hummingbird programs to enable staff to implement CS closed loop referrals, documentation, invoicing, reporting, and care coordination.

3. HHIP Measures to be Impacted: The following HHIP measures are intended to be successfully impacted/achieved by the grant. The HHIP Grantee has reviewed and understands the definitions and expectations of the intended impacted DHCS HHIP metrics below:

Priority Area 1: Partnership and Capacity to Support Referrals for Services	Priority Area 2: Infrastructure to Coordinate and Meet Member Housing Needs	Priority Area 3: Delivery of Services and Member Engagement
☐ 1.1 Engagement with the Continuum of Care (CoC)	☐ 2.1 Connection with street medicine team (<i>DHCS Priority Measure</i>)	☒ 3.3 MCP members experiencing homelessness who were successfully engaged in ECM

☐ 1.2 Connection and Integration with the local Homeless Coordinated Entry System (<i>DHCS Priority Measure</i>)	☐ 2.2 MCP Connection with the local Homeless Management Information System (HMIS) (<i>DHCS Priority Measure</i>)	☒ 3.4 MCP members experiencing homelessness receiving at least one housing related Community Supports (<i>DHCS Priority Measure</i>)
☒ 1.3 Identifying and addressing barriers to providing medically appropriate and cost effective housing-related Community Supports		☐ 3.5 MCP members who were successfully housed (<i>DHCS Priority Measure</i>)
☐ 1.4 Partnerships with counties, CoC, and/or organizations that deliver housing services with whom the MCP has a data sharing agreement that allows for timely information exchange and member matching (<i>DHCS Priority Measure</i>)		☐ 3.6 MCP members who remained successfully housed (<i>DHCS Priority Measure</i>)
☐ 1.6 Partnerships and strategies the MCP will develop to address disparities and equity in service delivery, housing placements, and housing retention (aligns with HHAP-3)		

4. HHIP Grantee Deliverables / Reporting: HHIP Grantee will provide Health Plan with a complete grant report of all activities, purchases, and vendor acquired services via email at [REDACTED] based on the below due dates using the most current Health Plan Grant Reporting Template.

- Progress report due on or before November 15, 2025.
- Final report due on or before July 1, 2026.
- By June 30, 2026, Night Navigation staff and Bringing Expanded Access to Medications for Opioid Use Disorder (“BEAM”) staff will transport at least 25 clients directly from the street to Community Supports Recuperative Care programs by securing and utilizing 2 transportation vans through one-time funding provided by SFHP.

Major Activities	Measurable Outcomes	Target Completion Date
Identify at least two vendors to procure vans.	Confirmation that the identified vendor can be utilized for purchase by SFDPH.	9/30/2025
Staff trained on standard operating procedures for client transportation in vans.	At least 25 clients are transported in the vans from the street to Community Supports programs.	3/30/2026
Increase access to opioid medication.	At least 25 CS members are connected to medication for opioid use disorder.	6/30/2026

- By September 30, 2025, RESTORE 1 staff will be able to scale from 35 to 70 rooms by securing and utilizing office furniture, clinical equipment, and technology supplies funded by SFHP.

Major Activities	Measurable Outcomes	Target Completion Date
Vendors for office furniture, clinical equipment, and technology supplies are identified.	Confirmation that the identified vendors can be utilized for purchase by SFDPH.	6/30/2025
Purchase of office furniture, clinical equipment, and technology supplies (refer to anticipated items needed with estimate costs in "CalAIM RESTORE 1 Operating Expenses" spreadsheet)	Purchase of equipment will furnish RESTORE 1 Recuperative Care site that has capacity of 70 rooms.	9/30/2026
Staff trained on proper use of office furniture, clinical equipment, and technology supplies (refer to anticipated items needed with estimate costs in "CalAIM RESTORE 1 Operating Expenses" spreadsheet)	100% of designated staff will be properly trained to use clinical equipment and technology supplies.	9/30/2026

- By September 30, 2025, RESTORE 1 program staff will be hired to enable recuperative care services to be provided in 70 rooms (key example of services provided includes clients being started on Medications for Opioid Use Disorder (MOUD) while enrolled in the RESTORE 1 program).

Major Activities	Measurable Outcomes	Target Completion Date
RESTORE 1 program staffing model identified.	Documented list of service providers and Full-Time Equivalents (FTEs).	5/13/2025
RESTORE 1 program staff hired.	Hiring is completed and documented.	9/1/2025
RESTORE 1 program staff onboarded and trained in care and service delivery workflows including MOUD.	RESTORE 1 care and services provided to clients on MOUD increases from 75% to 80% by 9/30/2025	9/30/2025
RESTORE 1 program staff onboarded and trained in care and service delivery workflows including Community Supports requirements.	100% of RESTORE 1 program staff trained on Community Supports requirements and workflows.	9/30/2025

- By June 30, 2026, RESTORE 1, Eleanora Fagan/Kean, and Hummingbird Programs will be able to use Epic for closed loop referrals, documentation, claims, reporting, and care coordination aligned with CalAIM Community Supports requirements.

Major Activities	Measurable Outcomes	Target Completion Date
Epic Program Manager and Analyst are hired for Epic build, optimization, eventual expansion of the build to additional Recuperative Care programs, and associated project management for each.	RESTORE 1 Epic build will be completed.	8/31/2025
RESTORE 1 program staff are trained on use of Epic for documentation, requesting authorization, charge capture, claim denial management, reporting, and care coordination.	RESTORE 1 Program staff will document on Epic for 100% clients enrolled in the program. Staff will also submit charges from Epic for all SFHP members.	9/30/2025
Two Analysts are hired for Epic build.	Eleanora Fagan/Kean and Hummingbird Epic build, go-live support, optimization is completed.	6/30/2026
Eleanora Fagan/Kean program staff are trained on use of Epic for documentation, requesting authorization, charge capture, claims denial management, reporting, and care coordination.	Eleanora Fagan/Kean program staff document on Epic for 100% clients enrolled in the program. Staff will also submit charges from Epic for all SFHP members.	5/31/2026
Hummingbird program staff will be trained on use of Epic for documentation, requesting authorization, charge capture, claims denial management, reporting, and care coordination.	Hummingbird program staff document on Epic for 100% clients enrolled in the program. Staff will also submit charges from Epic for all SFHP members.	5/31/2026

5. MCP Responsibilities:

- a. Identify a point of contact to serve as a liaison for HHIP grant.
- b. Participate as necessary in any planning activities, system/program design, or any other necessary meetings to implement activities being funded by the HHIP grant.
- c. Distribute funds to HHIP Grantee based on Disbursement Intervals below.

6. Total Grant Amount: Two million four hundred eighty-nine thousand six hundred ninety-eight dollars and sixty-three cents (\$2,489,698.63)

7. Effective Date: 05/15/2025 – 06/30/2026

8. Disbursement Intervals: Full Total Grant Amount as described in Section 6 (Total Grant Amount) within ten (10) business days upon execution of this Amendment.

9. **Recovery and/or Return of Fund Disbursement:** Health Plan has a right to recover and HHIP Grantee agrees to return all or any unused funds to Health Plan within sixty (60) business days upon notification of the following reasons:
- a. HHIP Grantee fails to carry out the full scope of services outlined in the Agreement.
 - b. HHIP Grantee uses the funds for a different purpose other than those outlined in its application project budget without prior approval.
 - c. HHIP Grantee ceases operations during the grant period.
 - d. HHIP Grantee under the Agreement is terminated with Health Plan before the grant is completed.

HHIP Grantee will have thirty (30) business days to respond to any recoupment request from Health Plan before further action is taken.

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