

File No. 240935

Committee Item No. 2

Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee Date October 9, 2024

Board of Supervisors Meeting Date _____

Cmte Board

- | | | |
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| <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 |
| | | • Approved Budget |
| | | • All Years Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Contract/Agreement |
| <input type="checkbox"/> | <input type="checkbox"/> | Form 126 – Ethics Commission |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Award Letter |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Application |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Correspondence |

OTHER (Use back side if additional space is needed)

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| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>CADHCS Correspondence Retroactive Reimbursement</u> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>CADHCS Correspondence Term Date Confirmation</u> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>DPH Statement on Retroactivity 10/3/2024</u> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>DPH Presentation 10/9/2024</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
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Completed by: Brent Jalipa Date October 3, 2024

Completed by: Brent Jalipa Date _____

1 [Accept and Expend Grant - Retroactive - California Department of Health Care Services -
2 Providing Access and Transforming Health (PATH) Capacity and Infrastructure, Transition,
3 Expansion and Development (CITED) 1B - \$3,862,929.40]

4 **Resolution retroactively authorizing the Department of Public Health to accept and**
5 **expend a grant in the amount of \$3,862,929.40 from the California Department of Health**
6 **Care Services for participation in a program, entitled “Providing Access and**
7 **Transforming Health (PATH) Capacity and Infrastructure, Transition, Expansion and**
8 **Development (CITED) 1B,” for the period of October 1, 2021, through June 30, 2025.**

9
10 WHEREAS, The California Department of Health Care Services (DHCS) has agreed to
11 fund the Department of Public Health (DPH) in the amount of \$3,862,929.40 for participation
12 in a program, entitled “Providing Access and Transforming Health (PATH) Capacity and
13 Infrastructure, Transition, Expansion and Development (CITED) 1B,” for the period of October
14 1, 2021, through June 30, 2025; and

15 WHEREAS, DHCS has designated Public Consulting Group LLC as the Third-Party
16 Administrator (TPA), to administer the grant program and to communicate with DPH with
17 respect to grant administration in connection with the CITED Program; and

18 WHEREAS, Fifty percent of the grant funding is from a federal source and fifty percent
19 of the grant funding is from a state source; and

20 WHEREAS, DPH is requesting funding for furniture, furnishings, and equipment for a
21 building acquisition, which will serve as the new Mental Health Service Center (MHSC), a
22 'one-stop' behavioral health drop-in access point, particularly for individuals experiencing
23 homelessness; and

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25

1 WHEREAS, California Advancing and Innovating Medi-Cal (CalAIM) and Enhanced
2 Care Management (ECM) services and associated required CalAIM and ECM administrative
3 support will be provided within 33% of the total physical space of the building; and

4 WHEREAS, Our Office of Coordinated Care's Bridges and Engagement Services
5 Team (BEST), a San Francisco Health Network (SFHN) ECM provider, will see people onsite;
6 and

7 WHEREAS, This will facilitate linkages for these members as well as other SFHN ECM
8 teams including San Francisco Street Medicine, primary care Complex Care Management
9 Team (CCM), Permanent Housing Advanced Clinical Services (PHACS), Team Lily serving
10 pregnant women, and Behavioral Health Services (BHS) Outpatient Mobile Outreach Teams
11 (MOT); and

12 WHEREAS, \$3,000,000 of the budgeted grant funds is contingent upon purchase of
13 the BHS building which will serve as the new Mental Health Service Center (MHSC), a 'one-
14 stop' behavioral health drop-in access point, particularly for individuals experiencing
15 homelessness; and

16 WHEREAS, DPH is requesting salary reimbursement for staff who work exclusively on
17 creating our Community Support and ECM programs; and

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

19 WHEREAS, A request for retroactive approval is being sought because DPH received
20 the award notice on March 24, 2023, for a project start date of October 1, 2021; and

21 WHEREAS, The grant budget includes a provision for indirect costs in the amount of
22 \$41,091.88; now, therefore, be it

23 RESOLVED, DPH is hereby authorized to accept and expend a grant in the amount of
24 \$3,862,929.40 from the DHCS; and, be it

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

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

5 FURTHER RESOLVED, That within thirty (30) days of the Grant being fully executed
6 by all parties, the Director of Health shall provide the final agreement to the Clerk of the Board
7 for inclusion in File No. 240935.

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1 Recommended:
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3 _____ /s/ _____
4 Dr. Grant Colfax
5 Director of Health
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Approved: _____ /s/ _____
Mayor

Approved: _____ /s/ _____
Controller

File Number: 240935
(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: **PATH CITED 1B**
- 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: **\$3,862,929.40.**
- 6a. Matching Funds Required: **\$0**
b. Source(s) of matching funds (if applicable): **N.A.**
- 7a. Grant Source Agency: **Centers for Medicare & Medicaid Services (CMS)**
b. Grant Pass-Through Agency (if applicable): **California Department of Health Care Services (DHCS)**
- 8. Proposed Grant Project Summary: **The San Francisco Department of Public Health (SFDPH) is requesting funding for 33% of a building acquisition, which will serve as the new Mental Health Service Center (MHSC), a 'one-stop' behavioral health drop-in access point, particularly for individuals experiencing homelessness. California Advancing and Innovating Medi-Cal (CalAIM) Enhanced Care Management (ECM) services and associated required CalAIM and ECM administrative support will be provided within 33% of the total physical space of the building. The co-location of Behavioral Health Services (BHS) staff and CalAIM/ECM staff will improve coordination and service delivery. Our Office of Coordinated Care's Bridges and Engagement Services Team (BEST), an San Francisco Health Network (SFHN) ECM provider, will see people onsite. This will facilitate linkages for these members as well as other SFHN ECM teams including San Francisco Street Medicine, primary care Complex Care Management Team (CCM), Permanent Housing Advanced Clinical Services (PHACS), Team Lily serving pregnant women, and BHS Outpatient Mobile Outreach Teams (MOT). We expect to expand the number of Medi-Cal eligible individuals being served by 25%, from 6,000 currently to 7,500, within our first year of full operation. DPH is requesting salary reimbursement for staff who work exclusively on creating our Community Support and ECM programs. Funding for the grant comes from the Centers for Medicare & Medicaid Services (CMS). California Department of Health Care Services (DHCS) has designated Public Consulting Group LLC (PCG) as the Third-Party Administrator (TPA), to administer the grant program and to communicate with Applicant with respect to grant administration in connection with the CITED Program. \$3,000,000 of the budgeted grant funds is contingent upon purchase of the BHS building which will serve as the new Mental Health Service Center (MHSC), a 'one-stop' behavioral health drop-in access point, particularly for individuals experiencing homelessness.**
- 9. Grant Project Schedule, as allowed in approval documents, or as proposed:

Start-Date: **October 1, 2021**

End-Date: **June 30, 2025**

10a. Amount budgeted for contractual services: **\$498,125**

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**

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

b1. If yes, how much? **\$41,091.88**

b2. How was the amount calculated? **5% of Personnel and Contractor costs.**

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

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? **N.A.**

12. Any other significant grant requirements or comments:

The grant does not require an ASO amendment, does not create net new positions, and partially reimburses the department for the existing positions:

No.	Class	Job Title	FTE	Start Date	End Date
1	0931	Central Team Manager	1.00	10/01/2021	09/30/2022
2	2593	Central Team Manager	1.00	10/01/2021	09/30/2022
3	1053	IT Project Manager	1.00	10/01/2021	09/30/2022
4	1052	IT Analyst	1.00	10/01/2021	09/30/2022

We respectfully request for approval to accept and expend these funds retroactive to October 1, 2021. The Department received the award letter on March 24, 2023. The AL # for this grant is 93.778.

California Department of Health Care Services (DHCS) has designated Public Consulting Group LLC (PCG) as the Third-Party Administrator (TPA), to administer the grant program and to communicate with Applicant with respect to grant administration in connection with the CITED Program.

The grant funding is comprised of 50% federal and 50% state funding.

The grantor is a State entity.

Project Description: HN WPC WP101 2324 PATH CITED

Project ID: 10040036

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):

- Existing Site(s) Existing Structure(s) Existing Program(s) or Service(s)
- Rehabilitated Site(s) Rehabilitated Structure(s) New Program(s) or Service(s)
- New Site(s) 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: 9/18/2024 | 9:26 AM PDT

DocuSigned by:
Toni Rucker
40CFE25DD864104...
(Signature Required)

Department Head or Designee Approval of Grant Information Form:

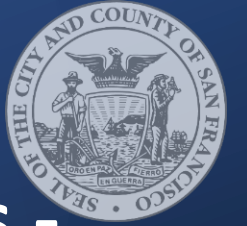
Dr. Grant Colfax
(Name)

Director of Health
(Title)

Date Reviewed: 9/20/2024 | 4:36 PM PDT

DocuSigned by:
Jenny Louie for Dr. Colfax
40CFE25DD864104...
(Signature Required)
Jenny Louie, COO for

Accept and Expend Grants:



File 240935: California Department of Health Care Services -
PATH CITED 1B

File 240936: California Department of Health Care Services -
PATH CITED – InterGovernmental Transfer (IGT)

BOS Budget & Finance Committee

Alex Boyder, Administrative Analyst, San Francisco Health Network

October 9, 2024

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

Overview of File 240935



Providing Access and Transforming Health (PATH) Capacity and Infrastructure, Transition, Expansion and Development (CITED) 1B:

- **Funder:** California Department of Health Care Services (DHCS)
- **Third Party Administrator:** Public Consulting Group LLC
- **Amount:** \$3,862,929.40
- **Timeline:** October 1, 2021, through June 30, 2025
- **Project:** Enhanced Care Management (ECM) and Community Supports (CS) programs as part of CalAIM
- **Resolution:** Requesting authority for DPH to retroactively accept PATH CITED 1B grant with DHCS

Grant Summary



Providing Access and Transforming Health (PATH) Capacity and Infrastructure, Transition, Expansion and Development (CITED) 1B:

- **Grant Summary:** PATH CITED is a grant program that provides funding to enable the transition, expansion and development of Enhanced Care Management (ECM) and Community Supports (CS) programs as part of CalAIM
 - \$862K for retroactive salary reimbursement for staff who worked exclusively on creating the CS and ECM programs under CalAIM
 - \$3M for furniture, fixtures and equipment for the Mental Health Service Center under DPH Behavioral Health
 - CalAIM CS/ECM services and associated required CalAIM CS/ECM administrative support will be provided within 33% of the total physical space

Retroactivity



We are seeking **retroactive authorization** to accept this grant.

- The project period for this grant began October 1, 2021, and goes through June 30, 2025.
 - SFDPH applied for this grant in September 2022. The PATH CITED grant application allowed for agencies to apply for retroactive salary reimbursement for staff who worked exclusively on creating the ECM and CS programs. This is the primary reason why the project start date is retroactive to one year before the application.
- SFDPH received notice of this grant award on March 24, 2023, after the project start date.
- There were prolonged discussions with DHCS, Controller's Office, and SFDPH from August 2023 through September 2024, which resolved fiscal issues.
- Once resolved, DPH brought this item to the BOS after going through the fiscal approvals process, including Controller's Office review and approval.

Overview of File 240936



Providing Access and Transforming Health (PATH) Capacity and Infrastructure, Transition, Expansion, and Development (CITED) IGT

- **Funder:** California Department of Health Care Services (DHCS)
- **Third Party Administrator:** Public Consulting Group LLC
- **Total Amount:** \$3,225,678.96
 - DHCS awarded \$1,612,839.48
 - SFDPH will provide \$1,612,839.48 in GF matching funds
- **Timeline:** October 1, 2022, through February 28, 2026
- **Funder:** California Department of Health Care Services (DHCS)
- **Project:** Community Supports (CS) and Enhanced Care Management (ECM) as part of CalAIM
- **Resolution:** Requesting authority for DPH to retroactively accept grant as well as non-standard terms in grant agreement with DHCS
- **Time Sensitive:** Request from DHCS to obligate funds and non-standard terms within the next month

Grant Summary



Capacity and Infrastructure, Transition, Expansion and Development Program - InterGovernmental Transfer (IGT)

- **Grant Summary:** PATH CITED IGT is a grant program that provides funding to enable the transition, expansion and development of Enhanced Care Management (ECM) and Community Supports (CS).
- Funds for DPH:
 - \$1.19M in retroactive salary reimbursement for staff who worked on creating the CS and ECM programs
 - \$250K in IT system analysts to support CS/ECM work
 - \$50K for IT system implementation
- Funds for HSH:
 - \$125K for a new IT platform that meets CalAIM requirements

Non-Standard Clause



This grant contains a **non-standard clause**.

- Non-standard clause authorizes the City to release all claims against DHCS and its Third-Party Administrator arising out of or relating to receipt of PATH CITED IGT grant funds.
- After discussions between the City Attorney's Office and DHCS, DPH decided to accept the non-standard terms in the agreement.
- Once resolved, DPH brought this item to the BOS after going through the fiscal approvals process, including Controller's Office review and approval.

Retroactivity



We are seeking **retroactive authorization** to accept this grant.

- The project period for this grant began October 1, 2022, and goes through February 28, 2026.
 - SFDPH applied for this grant in May 2023. The PATH CITED IGT grant application allowed for agencies to apply for retroactive salary reimbursement for CalAIM related services. This is the primary reason why the project start date is retroactive to several months before the application.
- SFDPH received notice of this grant award on October 30, 2023, after the project start date.
- There were prolonged discussions with DHCS, Controller's Office, and SFDPH from August 2023 through September 2024, which resolved fiscal issues.
- Once resolved, DPH brought this item to the BOS after going through the fiscal approvals process, including Controller's Office review and approval.



Conclusion

DPH respectfully requests retroactive approval of these two items. Thank you!

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH
San Francisco Health Network
PATH CITED 1B
October 1, 2021 - June 30, 2025

		Year 1		Year 2	Total
		Project: 10040036 10/01/2021-9/30/2022	Project: 10040036 1/1/2022 -9/30/2022	Project: 10040036 7/1/2023-6/30/2025	Amount
	Personnel -				-
	Central Team Manager		28,480		28,480
	Central Team Manager		4,682		4,682
	IT Project Manager		81,258		81,258
	IT Analyst		150,485		150,485
					-
	Fringe benefits		58,807		58,807
					-
	Contractual	498,125			498,125
					-
	Building, Structure and Improvements			3,000,000	3,000,000
					-
	Indirect Costs	24,906	16,186		41,092
Total		523,031	339,898	3,000,000	3,862,929

San Francisco Department of Public Health
 Path CITED Startup Personnel Costs
 Round 1 Application

Purpose: To identify personnel costs associated with startup costs for CalAIM ECM and CS services.
 The costs identified represent the SFDPH Central Cal AIM team, along with IT EHR support.

Sum of Balance Amount		Balance Category						
Job Code	Job Description	Earnings	Fringes	Grand Total	5% Capped Indirect Cost	Total Cost w/ Indirect	% CalAIM Effort	Total PATH CITED Amount
COMMN:0931	Manager III	28,480.00	5,786.72	34,266.72	1,713.34	35,980.06	100.00%	35,980.06
COMMN:1052	IS Business Analyst	4,682.00	402.42	5,084.42	254.22	5,338.64	100.00%	5,338.64
COMMN:1053	IS Business Analyst-Senior	81,258.10	7,735.03	88,993.13	4,449.66	93,442.79	100.00%	93,442.79
COMMN:2593	Health Program Coordinator 3	150,485.21	44,883.04	195,368.25	9,768.41	205,136.66	100.00%	205,136.66
Grand Total		264,905.31	58,807.21	323,712.52	16,185.63	339,898.15		339,898.15
IS EHR Consultant (based on PO)		-	-	498,125.00	24,906.25	523,031.25	100.00%	523,031.25
Grand Total		264,905.31	58,807.21	821,837.52	41,091.88	862,929.40		862,929.40

Reed, Kathleen (DPH)

From: PATH TPA | CITED <cited@ca-path.com>
Sent: Friday, March 24, 2023 9:27 AM
To: Reed, Kathleen (DPH)
Subject: PATH CITED Round 1 Funding Update

This message is from outside the City email system. Do not open links or attachments from untrusted sources.



March 24, 2023

San Francisco Health Networks ECM and CS
1001 Potrero Avenue, Building 5, 25, 80, 90 & Bldg. 5 Ward 1B
San Francisco, CA 94110-3518

RE: PATH CITED Initiative

Dear Applicant,

On January 31 2023, you received a notice from the CITED TPA team indicating your application was still under review. The California Department of Health Care Services (DHCS) and the TPA have completed that final review and we are pleased to inform you that DHCS awards you a final amount of \$3,862,929.40. The review entailed removing impermissible budget activities and determining reasonable costs for the activities proposed.

The attached activities and amounts were approved from your budget during the review process. DHCS will not be disbursing funds based on budget items or activities but on completed milestones. As a result, DHCS and the TPA have determined that awardees will need to review their current milestones and re-submit milestones that align with their final approved amount during the progress reporting process. Further details on progress reporting will be released by the TPA prior to the first quarterly progress reporting deadline.

CITED Terms and Conditions

The CITED [Terms and Conditions](#) document, linked here for reference, formalizes the contract between both parties explaining the responsibilities and expectations upon acceptance of the CITED grant. The Terms and Conditions document applicable to your organization will be sent in a separate email. ***Please sign the emailed CITED Terms and Conditions document and submit within twenty (20) business days of receipt keeping a copy for your records.***

Managed Care Plan Contract Important Information

A letter stating your intent to contract with an MCP or other entity to provide ECM and/or Community Supports services was included as part of the application process. Throughout the funding period, you are required to provide a signed contract with an MCP. If you do not provide that signed contract by the last progress report, the TPA will withhold 5% or \$5,000 of funds, whichever is lower, until a contract with the MCP, county, or other eligible entity is provided.

Progress Report Important Information

As the CITED Terms and Conditions indicate, DHCS requests quarterly (3-month) progress reports and a final report when your project is completed. Further details on progress reporting will be released by the TPA prior to the first quarterly progress reporting deadline. If you have any questions, please contact cited@ca-path.com.

Establish Your Financial Institution

In order to receive grant disbursements from the CITED Initiative under PATH, you must submit your organization's tax and financial institution information to the TPA. Please navigate to the website listed below to start this process and use the provided PIN as part of verification. You must create a PATH TPA user profile and establish Multi-Factor Authentication. ***Your banking information must be submitted within ten (10) business days.***

Website: <https://finance.ca-path.com/>

PIN: 120588655129578

Note: The following information is required to complete this process, and must match the information on the submitted Application:

- kathleen.reed@sfdph.org
- 94110

Sincerely,

The CITED TPA Team

Organization Name: San Francisco Health Network ECM/CS	
Approved Activity	Approved Funding Amount
Central Team Managers	\$241,116.72
1 IT Project Manager	\$523,031.25
2 IT Analysts	\$98,781.43
Renovation for behavioral health drop-in access point contingent upon SF DPH ability to leverage local funds to purchase the building	\$3,000,000.00
Total Approved Funding	\$3,862,929.40

Reed, Kathleen (DPH)

From: Reed, Kathleen (DPH)
Sent: Saturday, October 1, 2022 1:42 PM
To: Clayton, Jillian@DHCS; trrobinson@pcgus.com; PATH TPA CITED; DHCS 1115 Path
Cc: Justice, Carla; Devonish, Jazmin; Lelchook, Sari
Subject: Re: [External]Re: We have received your response for PATH CITED Round 1 Application

Thank you, Jillian!

Kathleen Reed
CalAIM Community Supports Program Manager

From: Clayton, Jillian@DHCS <Jillian.Clayton@dhcs.ca.gov>
Sent: Saturday, October 1, 2022 12:27:58 PM
To: Reed, Kathleen (DPH) <kathleen.reed@sfdph.org>; trrobinson@pcgus.com <trrobinson@pcgus.com>; PATH TPA CITED <cited@ca-path.com>; DHCS 1115 Path <1115Path@dhcs.ca.gov>
Cc: Justice, Carla <cjustice@pcgus.com>; Devonish, Jazmin <jdevonish@pcgus.com>; Lelchook, Sari <slelchook@pcgus.com>
Subject: RE: [External]Re: We have received your response for PATH CITED Round 1 Application

Thank you, Kathleen. We will reach out should we have any clarifying questions during our review period. If you have any further questions, please don't hesitate to reach out. Thanks!

From: Reed, Kathleen (DPH) <kathleen.reed@sfdph.org>
Sent: Saturday, October 1, 2022 11:47 AM
To: trrobinson@pcgus.com; PATH TPA CITED <cited@ca-path.com>; DHCS 1115 Path <1115Path@dhcs.ca.gov>; Clayton, Jillian@DHCS <Jillian.Clayton@dhcs.ca.gov>
Subject: [External]Re: We have received your response for PATH CITED Round 1 Application

Hi all,

Thank you for your support and feedback in answering my questions about the PATH CITED application, which I successfully submitted yesterday.

Some of our funding requests had milestones beyond 2023, but your application did not allow the option to select 2024 or 2025 for the year. (This is why you may see no dates for some milestones.) Please refer to my Milestones documentation attachment, where I have detailed all of our milestones. Please let me know if you have any questions.

Thank you!

Kathleen

Kathleen Reed
CalAIM Community Supports Program Manager

From: CA PATH CITED team <noreply@formresponse.com>
Sent: Friday, September 30, 2022 11:25:12 PM
To: Reed, Kathleen (DPH) <kathleen.reed@sfdph.org>
Subject: We have received your response for PATH CITED Round 1 Application

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

PATH CITED Round 1 Application

Get Page URL	https://pcgus.jotform.com/222056209203141?session=JF-S4L-8ccRqPm5&token=JF--VKOLpjs-11
Applicant Organization Name	San Francisco Health Network ECM and CS
Point of Contact Name	Kathleen Reed
Point of Contact Title	CalAIM Community Supports Program Manager, San Francisco Health Network, San Francisco Department of Public Health
Point of Contact Telephone Number	(628) 227-4104
Point of Contact Email Address	kathleen.reed@sfdph.org
Mailing Address	Street Address: 1001 Potrero Ave Street Address Line 2: Building 5, 25, 80, 90 and Bldg 5 Ward 1B City: San Francisco State: California Zip Code: 94110-3518
Please select the box that best describes your organization.	County, city and local government agency
Please describe your experience providing Enhanced Care Management (ECM) and/or Community Supports (or equivalent services) prior to the start of CalAIM and since CalAIM began in 2022.	Behavioral Health Services (BHS) and San Francisco Health Network (SFHN) have longstanding expertise and skills relevant to providing ECM and Community Supports (CS). BHS and SFHN are leveraging their significant experience providing case management in San Francisco serving the ECM populations of focus. Each of our ECM teams have been working with persons experiencing homelessness, substance use disorders, severe mental illness, and individuals who are high users of emergency services. Since January, 2022, SFHN has launched an ECM team across SFHN that incorporates primary care, street medicine, behavioral health services, and soon will launch a permanent supportive housing team, a team focusing on pregnant women, a mobile team linked to our mental health clinics, and a medically focused team embedded in one of our intensive case management subcontractors. Medical Respite is a program of San Francisco Department of Public Health (SFDPH) in partnership with a CBO (CFSF -

Community Forward San Francisco) which opened in 2007 at 1171 Mission St. in South of Market neighborhood (SOMA). It's 55 bed capacity provides post-acute recuperative care for people experiencing homelessness who are too sick or frail to be on the streets or in the shelter. Since 2003, SFPD worked with CFSF and the SF Fire Department's Community Paramedic division to open a program to address the needs of people found intoxicated in public. Both Medical Respite (since 1/1/22) and Sobering Center (since 7/1/22) have been implemented as CalAIM Community Supports.

DPH is a close partner of the San Francisco Department of Homelessness and Supportive Housing (HSH) and will work with HSH to implement Housing CS services in SF. HSH funds and oversees a full scope Homelessness Response System, which includes Housing Navigation Transition Services, Housing Transition Sustaining Services, and Housing Deposits through its 'Move-In Assistance' service in its prevention and diversion programming.

Applicants are required to attach to this application the signature page of an existing contract from an MCP or other organization to provide ECM/Community Support services for Medi-Cal beneficiaries, or have a signed attestation letter from an MCP, county, delegated provider or other entity authorized to contract with the Applicant that they intend to contract with the Applicant to provide ECM/Community Supports in a timely manner. Please indicate below the type of attachment included in this application.

A signature page of an existing contract from an MCP or other organization to provide ECM / Community Support services

Please upload a copy of the signature page of your existing contract or signed attestation here.

[Signature Page from SFHP-SFHN CalAIM CS Agreement.pdf](#)
[Signature Page from SFHP-SFHN CalAIM ECM Agreement.pdf](#)

Adult populations of focus (select all that apply)	<p>Individuals and families experiencing homelessness</p> <p>High utilizers</p> <p>Adults with Serious Mental Illness (SMI) or Substance Use Disorder (SUD)</p> <p>Individuals transitioning from incarceration</p> <p>Individuals at risk for institutionalization and eligible for long-term care services</p> <p>Nursing facility residents who want to transition to the community</p>
Children and youth populations of focus (select all that apply)	<p>Children experiencing homelessness</p> <p>High utilizers</p> <p>Children with Serious Emotional Disturbance (SED) or identified to be at Clinical High Risk (CHR) for psychosis or experiencing a first episode of psychosis</p> <p>Children enrolled in California Children's Services (CCS) / CCS Whole Child Model (WCM) with additional needs beyond the CCS qualifying condition</p> <p>Children involved in, or with a history of involvement in, child welfare (including foster care up to age 26)</p> <p>Children transitioning from incarceration</p>
If applicable, please indicate which Community Support services are currently provided or will be provided by your organization.	<p>Housing transition navigation services</p> <p>Housing deposits</p> <p>Housing Tenancy and Sustaining Services</p> <p>Recuperative care (medical respite)</p> <p>Sobering centers</p>
Is this application for more than one county	No
Funding Amount	\$ 23,319,679.40
Start Date:	01-01-2022
End Date:	03-15-2025
What is the county you are requesting funding for?	San Francisco
Which of the following allowable uses does your organization's funding request best fit into?	<p>Increasing the provider workforce</p> <p>Providing upfront funding needed to support capacity and infrastructure necessary to deliver ECM and Community Supports services</p>
Provide a justification of why CITED funding is needed to support the delivery of and/or bolster capacity to support ECM and/or Community Support services. Applicants should include a description of the anticipated breadth of impact of the	<p>CalAIM Staffing: Our CalAIM CS Program Manager implements strategic plans to implement and operationalize CS. Her direct oversight of these programs has enabled 28 Sobering Center visits and 96 Medical Respite visits (5,226 days) under CalAIM. She is currently preparing for Food Pharmacy, Housing Deposits, and Housing Transition CS to go live in 2023. Our CalAIM ECM Program Manager implements strategic plans to operationalize ECM services for our populations of focus, onboards new ECM teams, and projects capacity for new populations of focus (PoF). Under her leadership, we have launched 3 ECM Teams, have triaged 175, opened (in</p>

requested CITED funding.

outreach, enrolled) 75, and closed 80 members. She is onboarding 4 additional ECM Teams to expand capacity for current PoF and prepare for Long Term Care and Justice Involved PoF in 2023. Our CalAIM Manager develops strategy and oversees operations for ECM, CS, and serves as a liaison with our managed care plans (MCPs) and other City and County of San Francisco Agencies. Our IT Project Manager provides overall CalAIM IT program management and supports CS and ECM IT planning and implementation, including Epic workflow development, data reporting, billing, and quality assurance. She provides onboarding and ongoing training to the CalAIM Central Team on ECM and CS Epic related workflows, reports, and dashboards. Our IS Business Analysts analyze data and develop reports to plan for and operationalize programs for future CalAIM populations of focus, and to identify and expand the number of Medi-Cal beneficiaries supported by CalAIM.

Purchase of BHS Building: The San Francisco Department of Public Health (SFDPH) is requesting funding for 33% of a building acquisition, which will serve as the new Mental Health Service Center (MHSC), a 'one-stop' behavioral health drop-in access point, particularly for individuals experiencing homelessness. CalAIM Enhanced Care Management (ECM) services and associated required CalAIM and ECM administrative support will be provided within 33% of the total physical space of the building. The co-location of BHS staff and CalAIM/ECM staff will improve coordination and service delivery. Our Office of Coordinated Care's Bridges and Engagement Services Team (BEST), an SFHN ECM provider, will see people on-site. This will facilitate linkages for these members as well as other SFHN ECM teams including SF Street Medicine, primary care Complex Care Management Team (CCM), Permanent Housing Advanced Clinical Services (PHACS), Team Lily serving pregnant women, and BHS Outpatient Mobile Outreach Teams (MOT). We expect to expand the number of Medi-Cal eligible individuals being served by 25%, from 6,000 currently to 7,500, within our first year of full operation.

Food Pharmacy: Since 2016, SFDPH has partnered with patient advisors, clinic staff, and the Food as Medicine Coalition to implement Food Pharmacy in primary care clinics across our network. Approximately 1,500 patients have participated in Food Pharmacy since its inception, totaling over 7,500 visits. Food Pharmacy supports patients with uncontrolled hypertension and diabetes, with a particular emphasis on reducing disparities in control rates among Black/African-American and Latinx clients, and has been successful in reducing uncontrolled

hypertension in Black/African-Americans participating in the program.

Provide a high-level description of how the requested CITED funding will be used to support the delivery of ECM and/or Community Supports, including how funding request aligns with the goals of CalAIM. Note: administrative or “indirect” costs are not permitted to exceed 5% of total requested funds.

CalAIM Staffing: The collaborative work among our CalAIM Managers, IT Project Manager, and IS Business Analysts, allows us to more effectively identify and manage the comprehensive needs of San Francisco's vulnerable and historically underserved populations through whole person care approaches and social drivers of health and to modernize our systems, implement payment reform, and create a more seamless and integrated system for SF Medi-Cal enrollees.

Purchase of BHS Building: The space is designed to optimize the client experience, particularly for individuals who are unhoused, experiencing homelessness or justice involved with complex substance use and behavioral health needs. The building is centrally located in the most high-demand neighborhood of SF, with proximity to other services frequently accessed by our priority population, allowing ease of access for the ~3,800 people experiencing homelessness (PEH) in that district based on the 2022 Point in Time Count (PIT) (approximately half of SF's 7,800 PEH). Through integration and co-location of CalAIM and ECM staff and services, Behavioral Health Access Center (BHAC), Office-based Buprenorphine Induction Clinic (OBIC), Behavioral Health Services (BHS) Pharmacy, a medical laboratory, Street- and community-based outreach and extended care management teams, housing services, and more, we will address systemic challenges in providing coordinated access to care for vulnerable populations. The center will improve quality outcomes, reduce health disparities, and transform the delivery system through value-based initiatives.

Food Pharmacy: The Food Pharmacy funding aligns with the goals of CalAIM by implementing a preventive, whole person approach to: Addressing social determinants of health via access to healthy, affordable food; Improving quality outcomes by reducing hypertension; Reducing health disparities for Black/African American and Latinx clients; Transforming the SFDPH health care system by integrating Food Pharmacy more formally into SFDPH primary care clinics through standardization of work, tracking patient outcomes using electronic health records, measurement of cost savings.

Describe your initial approach to sustaining activities/items funded via CITED after CITED funding ends.

CalAIM Staffing: Funding for salaries will continue through the County General Funds.

Purchase of BHS Building: This is a one-time funding request for purchase of a building, so ongoing funding will not be needed.

Food Pharmacy: While Food Pharmacy is a proven and highly effective health intervention at SFDPH, it has operated separately at each clinic and lacked centralized oversight from SFHN Primary Care leadership, limiting full integration into our primary care delivery system. It has also relied on inconsistent funding from philanthropic organizations and donations from food banks for the food. This limits scalability and prevents SFDPH from expanding this program to other primary care sites in the network. CITED funding will allow SFDPH to fully integrate and modernize how the Food Pharmacy program is implemented at SFHN primary care clinics, while continuing to address the social drivers of health for 250 or more patients per year. SFDPH is coordinating with health plan partners (San Francisco Health Plan and Anthem) to develop Food Pharmacy as a Community Support (CS). The long-term vision is that Food Pharmacy will be expanded to serve all eligible Medi-Cal beneficiaries and will be integrated into SFHN primary care clinics as a CalAIM CS.

Describe how your organization intends to coordinate with other stakeholders (including MCPs) to ensure CITED funding is aligned with, but does not duplicate or supplant reimbursement from other sources.

CalAIM Staffing: The scope of work our CalAIM Managers, IT Project Manager, and IS Business Analysts perform is aligned with our MCP's and City Agencies. Through cross-stakeholders functional meetings among SFDPH and the SF managed care plans (San Francisco Health Plan and Anthem), as well as other City and County of San Francisco partners, scope of work is discussed and agreed to on a regular basis. There are no risks for duplication or replacement of this CITED funding request.

Purchase of BHS Building: DPH will be leveraging local funds to support the remaining 67% of funding for the building, therefore this does not duplicate or supplant reimbursement from other sources.

Food Pharmacy: SFDPH has discussed with both the San Francisco Health Plan (SFHP) and Anthem this CITED Food Pharmacy funding application and our plans to scale Food Pharmacy as a CaAIM CS in San Francisco. We are partnering with other City and County of San Francisco agencies to ensure this program is coordinated with and complements other Medically Supportive Food & Nutrition Community Supports, and does not overlap with other funding requests. Both health plan partners are supportive of Food Pharmacy as part of Medically Supportive Food & Nutrition Community Supports implementation in San Francisco, and will collaborate with SFDPH to build out Food Pharmacy as a CS.

Milestones (select + to add more milestones)

Milestone	Metrics	Anticipated Date
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Individuals hired	Number of individuals hired	09/03/2022
Individuals completed onboarding and necessary training	Number of individuals who completed onboarding and training	12/03/2022
Individuals supporting delivery of ECM and CS	Number of individuals actively involved in support of ECM and CS delivery	12/04/2022
Board and Mayoral approval of purchase	Financing and sale agreement resolutions and ordinances approved and signed by the Mayor	03/10/2023
Escrow - initial funding	All funding sources deposited into escrow account	04/10/2023
Building tenant improvements completed	3-6 months after escrow funded	09/15/2023
Escrow – close - building purchased	30 days after building tenant improvements complete	10/15/2023
Building fully operational	IT systems, pharmacy licensing, and equipment in place (including supply chain considerations); majority of client services spaces are operational and DPH staff can utilize office spaces	
Staff in the Mental Health Service Center (MHSC) building providing ECM services and associated required CalAIM and ECM administrative support	Number of staff in the MHSC building providing ECM services and associated required CalAIM and ECM administrative support	

Achieve 25% operational capacity by end of first quarter, based on projected full operational capacity of 625 people served per month	Number of people served per month	
Achieve full operational capacity by end of first year, based on projected full operational capacity of 625 people served per month (25% increase from current Behavioral Health Access Center)	Number of people served per month	
Funding approved via the City's accept and expend process	Signed resolution	06/30/2023
Funding added to San Francisco Public Health Foundation contract	Funding notification issued to SFPHF that funding has been added to contract	07/01/2023
Submit request for Information (RFI) to health plans to establish Food Pharmacy as a CalAIM Community Support	RFI submitted	06/30/2023
Develop and implement a coordinated tracking process across clinic sites to monitor patient participation and health outcomes	Health outcome data for participating patients	
Develop and implement a coordinated	# of clinics reporting patient data every 6 months	

tracking process across clinic sites to monitor patient participation and health outcomes		
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Milestone Documentation, if necessary	SFDPH PATH CITED Round 1 Milestones.xlsx
Describe to what extent your organization serves populations that are historically marginalized or underserved.	<p>The San Francisco Health Network (SFHN) is the City’s only complete system of care, with locations throughout SF, including Zuckerberg San Francisco General Hospital and Trauma Center, Laguna Honda Hospital and Rehabilitation Center, 18 behavioral health service sites, 16 neighborhood-based primary care health centers, Health at Home, and Jail Health Services. SFHN also provides care in schools, navigation centers, shelters, on the streets, and in childcare centers. SFNH and Behavioral Health Services (BHS) serve all populations in San Francisco.</p> <p>The San Francisco Department of Public Health (SFDPH) has made equity an explicit value; equity is a True North Dimension for the SFDPH. In 2014, the establishment of the Black/African American Health Initiative (BAAHI) prioritized the elimination of large and persistent health and workforce disparities for this population. Over the last 3 years, that work expanded to include increasing attention to institutional and structural causes of these disparities. Different areas of the department have instituted training, created infrastructure, set new policy, and taken action to advance racial equity. SFDPH is committed to creating greater consistency in racial equity activities across the department and has created the Office of Health Equity to organize these efforts. This work aligns with city-wide goals addressing racial equity through the San Francisco Office of Racial Equity at the Human Rights Commission.</p> <p>Additionally, SFHN and BHS actively cut through socioeconomic, ethnic, cultural, and linguistic barriers to provide a wide range of mental health services to San Francisco’s most vulnerable populations. Frontline staff reflect the diversity of the communities served. Many staff offer services in non-English languages, making services more accessible and reducing stigmas within cultures historically reluctant to seek mental health support. SFDPH has led efforts to offer programming and resources to the LGBTQ+ community, including expanding data collection to integrate information around Sexual Orientation/Gender Identity (SOGI).</p>
Has your organization received, or applied for, funding from MCPs	1) In August 2022, San Francisco Department of Public Health (SFDPH) was awarded an Incentive Payment Program (IPP) grant of \$360,000 jointly funded between

through the Incentive Payment Program? If yes, please describe the amount of funding received or requested, when funding was received or requested, the activities that funding is supporting or is intended to support, and the MCP that provided this funding.

Anthem and SFHP as follows based on market share:
Anthem (12%) - \$43,200
SFHP (88%) - \$316,800

The below activities will be supported by this grant:

Project 1: \$180,000 for SFDPH IT Staff to Support Approvals Process, Technical Infrastructure Build, and Implementation of CareLink, an IT platform that will provide access to client background and overviews, CS service history, visit histories at SFDPH and other city healthcare sites, information on shelter stays and transition into permanent supportive housing, and more to support implementation of CalAIM CS services in San Francisco.

Project 2: \$180,000 for CareLink Client Summary Trainings to Build Capacity. SFHN provides CareLink access for numerous groups within the community. With the expansion of ECM and CS, we anticipate a significant increase in requests for CareLink access from SFHP ECM lead entities, SF Department of Homelessness and Supportive Housing (HSH), and more than 50 community-based organizations.

2) In September 2022, SFDPH/SF Homelessness and Supportive Housing (HSH) department was awarded an Incentive Payment Program (IPP) grant for \$387,500 jointly funded between Anthem and SFHP as follows:
Anthem: \$46,500
SFHP: \$341,000

The below activities will be supported by this grant:

a) Consulting services to implement HSH IT Upgrades for Medi-Cal Compliance, including review of Medi-Cal IT security requirements, security gaps and needs analysis for HSH and its CBO contractors, identifying solutions to close those gaps (implementation may be a separate, longer-term project for a future IPP or other funding cycle).

b) Consulting services to support HSH Data Exchange with MCPs and/or SFDPH, including gaps and needs analysis regarding HSH's ability to produce 837/EDI compliant claims, as required for CalAIM billing; identification of technological solutions, workflows, and personnel needs that would put HSH on a path to 837/EDI claims submission and adjudication (implementation may be a separate, longer-term project for a future IPP or other funding cycle).

c) Staffing to support HSH’s general project management related to a range of projects required to kick off participation in Community Supports planning and operations, and other projects in the CalAIM initiative.

3) Justice Involved PATH Round 1: The San Francisco Sheriff's Office received \$100,000 to identify processes, protocols, and IT modifications that are necessary to support implementation of pre-release enrollment and suspension processes.

Does your organization participate in a PATH-funded Collaborative Planning and Implementation group? If so, please describe which group your organization participates in, when it began participating, and how this application was coordinated with other participants in the collaborative planning group.

The San Francisco Department of Public Health (SFDPH) is enthusiastic to participate in a PATH-funded Collaborative Planning and Implementation group. However, SFDPH has not yet been informed of who is the Facilitator for the San Francisco Collaborative Planning and Implementation group, nor has that person reached out to SFDPH to coordinate participation. In developing this application, we have coordinated with internal and external partners including the SF managed care plans (MCPs) SFHP and Anthem, SF Homelessness and Supportive Housing (HSH), and various other departments within the City and County of San Francisco.

Despite the lack of a DHCS Collaborative Planning and Implementation facilitator in SF, SFDPH has developed a collaborative partnership with both MCPs to implement CalAIM in San Francisco. SFDPH also partners closely with the San Francisco Human Services Agency (HSA), the San Francisco Department of Homeless and Supportive Housing (HSH), the San Francisco Sheriff’s Department and Jail Health Services (JHS), a division of the San Francisco Department of Public Health (SFDPH), and other City departments. JHS has been assisting incarcerated individuals with applying for Medi-Cal for over eight years. We intend to build upon this existing collaboration as we implement CalAIM, with the goals of significantly increased Medi-Cal enrollment, increasing automated data sharing, and improving communication and coordination. The San Francisco Health Network has existing relationships and collaboration with HSH around Community Supports and CalAIM at large, and is working closely with HSH to plan for the implementation of CalAIM Housing CS. The San Francisco Health Network (SFHN) would like to expand collaborative planning, and feel a multicounty approach is needed among Alameda, Contra Costa, Marin, Monterey, Napa, San Francisco, San Mateo, Santa Clara, Santa Cruz, Sonoma counties. We're interested in learning more about the PATH-funded Collaborative Planning and Implementation group in SF and/or the Bay Area.

Is any portion of this request seeking retroactive funding for

Yes

investments made in infrastructure and capacity from January 1, 2022 until the release of applications for the first round of CITED funding?

Dollar Amount \$ 862,929.40

Start Date 01-01-2022

End Date 09-30-2022

Purpose: SFDPH is requesting \$862,929.40 in retroactive funding for 5 CalAIM positions dedicated 100% to CalAIM: 3 CalAIM Central Team Managers, 1 Information Technology (IT) Project Manager, and 2 Information System (IS) Business Analysts dedicated to CalAIM between 1/1/2022 and 9/30/2022. (These positions are ongoing, thus if retroactive funding is available to cover expenses from 9/30/2022 through 12/31/2022, we request expenses for these 5 CalAIM positions are covered for that time period.)

Our CalAIM CS Program Manager implements strategic plans to implement and operationalize CS. Her direct oversight of these programs has enabled 28 Sobering Center visits and 96 Medical Respite visits (5,226 days) under CalAIM. She is currently preparing for Food Pharmacy, Housing Deposits, and Housing Transition CS to go live in 2023. Our CalAIM ECM Program Manager implements strategic plans to operationalize ECM services for our populations of focus, onboards new ECM teams, and projects capacity for new populations of focus (PoF). Under her leadership, we have launched 3 ECM Teams, have triaged 175, opened (in outreach, enrolled) 75, and closed 80 members. She is onboarding 4 additional ECM Teams to expand capacity for current PoF and prepare for Long Term Care and Justice Involved PoF in 2023. Our CalAIM Manager develops strategy and oversees operations for ECM, CS, and serves as a liaison with our managed care plans (MCPs) and other City and County of San Francisco Agencies.

Our IT Project Manager provides overall CalAIM IT program management and provides onboarding and ongoing training to the CalAIM Central Team on ECM and CS Epic related workflows, reports, and dashboards. She developed Epic workflows for Medical Respite team members to send authorizations, to document charges in flowsheets to bill MCPs for Sobering and Medical Respite and built functionality in Epic to track the length of stay. For ECM, she has supported various aspects of ECM IT planning and implementation, including Epic workflow development, data reporting, billing, and quality

assurance. She also leads the SFDPH CalAIM IT workgroup to support both ECM and CS initiatives, and facilitates IT project planning and communications among ECM, CS, IT, and CalAIM leadership stakeholders.

Our IS Business Analysts pull and analyze data from multiple electronic platforms to provide integrated reporting all SF CalAIM ECM and CS initiatives. They work closely with the Epic application team to build reports for current ECM and CS services (Medical Respite and Sobering), and for upcoming CalAIM Populations of Focus, such as Justice involved, to support operations and planning related to ECM and Community Supports. The data analytics they provide is crucial to track the impact of and report on current ECM and CS services, to plan for and operationalize programs for future CalAIM populations of focus, and to identify and expand the number of Medi-Cal beneficiaries supported by CalAIM.

The collaborative work among our CalAIM Managers, IT Project Manager, and IS Business Analysts, allows us to more effectively identify and manage the comprehensive needs of San Francisco's vulnerable and historically underserved populations through whole person care approaches and social drivers of health and to modernize our systems, implement payment reform, and create a more seamless and integrated system for SF Medi-Cal enrollees.

Provide a high-level description of how the requested CITED funding will be used to support the delivery of ECM and/or Community Supports, including how funding request aligns with the goals of CalAIM. Note: administrative or “indirect” costs are not permitted to exceed 5% of total requested funds. (300 words)
The requested funding has been and will continue to be used to cover expenses related to scaling Community Supports and expanding ECM to serve more members and introduce new Populations of Focus.

Our CS Program Manager partnered closely with the Medical Director, IT Project Manager, Information Systems (IS) Business System Analysts, and the SF Health Plan's Social Determinants of Health Program Manager to operationalize San Francisco Department of Public Health's (SFDPH) Sobering Center and Medical Respite as Community Supports. She will continue to collaborate with our MCP's, IT Project Manager, IS Business Analysts for future community supports. Additional City and County of San Francisco Agencies such as Human Services Agency, Homelessness and Supportive Housing, and Zuckerberg San Francisco General Hospital Social

Determinants of Health Committee as well as CBO's will be key stakeholders for 2023 CS to go live and maintain focus on equitable, whole person care approaches as we develop a more consistent and seamless system.

Our ECM Program Manager partners closely with our ECM Medical Director, IT Project Manager, IS Business System Analysts, MCP's, and Field Teams including Primary Care, Behavioral Health, and Street Medicine to plan for, implement, and operationalize ECM services. To expand capacity and introduce new PoF, she will widen her network of stakeholders to include additional ECM Teams who are able to serve all PoF. She will continue to stratify ECM statistics by race and ethnicity to better understand the population we are serving, identify gaps, and put forth measures to close those gaps.

In partnership with MCP Leadership and CCSF Stakeholders, our CalAIM Manager will develop continued strategy that aligns with SFDPH's True North Metrics, which prioritize equity and health impact, to improve quality outcomes, reduce health disparities, and transform the SFDPH delivery system.

Describe your initial approach to sustaining activities/items funded via CITED after CITED funding ends. (500 words)

Funding for salaries will continue through the County General Funds.

Describe how your organization intends to coordinate with other stakeholders (including MCPs) to ensure CITED funding is aligned with but does not duplicate or supplant reimbursement from other sources. (300 words)

The scope of work our CalAIM Managers, IT Project Manager, and IS Business Analysts perform is aligned with our MCP's and City Agencies. Through cross-functional meetings among SFDPH and the SF managed care plans (San Francisco Health Plan and Anthem), as well as other City and County of San Francisco partners, scope of work is discussed and agreed to on a regular basis. There are no risks for duplication or replacement of this CITED funding request.

Receipts, invoices or other documents for retroactive funding requests:

[SFDPH PATH CITED Round 1 retroactive funding documentation for 5 CalAIM positions.xlsx](#)

CITED Budget Upload

[SFDPH PATH CITED Budget Template 2022-09-30.xlsx](#)

Do you have any additional documentation?	Yes
Please describe the additional documentation that you would like to upload.	The below two documents are referenced in the SFDPH PATH CITED Budget Template in Tab C, Cell D5, and support the SFDPH funding request for \$20,000,000 for 33% of a building acquisition, building improvements, and FFE (furniture, fixtures, & equipment), which will serve as the new Mental Health Service Center (MHSC), a 'one-stop' behavioral health drop-in access point, particularly for individuals experiencing homelessness and those with complex behavioral health needs. CalAIM Enhanced Care Management (ECM) services and associated required CalAIM and ECM administrative support will be provided within 33 percent of the total physical space of the building. 1) SFDPH Mental Health Service Center Client Experience 2) SFDPH Mental Health Service Center Community Partners
Additional Documentation	SFDPH Mental Health Service Center Client Experience.docx SFDPH Mental Health Service Center Community Partners.docx
Please sign	Kathleen M. Reed
Date of Signature	09/30/2022

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CalAIM PATH CITED Round 1 BHS Building Application Content Submitted 9/30/2022:

Please describe your experience providing Enhanced Care Management (ECM) and/or Community Supports (or equivalent services) prior to the start of CalAIM and since CalAIM began in 2022.

Behavioral Health Services (BHS) and San Francisco Health Network (SFHN) have longstanding expertise and skills relevant to providing ECM and Community Supports (CS). BHS and SFHN are leveraging their significant experience providing case management in San Francisco serving the ECM populations of focus. Each of our ECM teams have been working with persons experiencing homelessness, substance use disorders, severe mental illness, and individuals who are high users of emergency services. Since January, 2022, SFHN has launched an ECM team across SFHN that incorporates primary care, street medicine, behavioral health services, and soon will launch a permanent supportive housing team, a team focusing on pregnant women, a mobile team linked to our mental health clinics, and a medically focused team embedded in one of our intensive case management subcontractors. Medical Respite is a program of San Francisco Department of Public Health (SFDPH) in partnership with a CBO (CFSF -

Community Forward San Francisco) which opened in 2007 at 1171 Mission St. in South of Market neighborhood (SOMA). It's 55 bed capacity provides post-acute recuperative care for people experiencing homelessness who are too sick or frail to be on the streets or in the shelter. Since 2003, SFDPH worked with CFSF and the SF Fire Department's Community Paramedic division to open a program to address the needs of people found intoxicated in public. Both Medical Respite (since 1/1/22) and Sobering Center (since 7/1/22) have been implemented as CalAIM Community Supports.

DPH is a close partner of the San Francisco Department of Homelessness and Supportive Housing (HSH) and will work with HSH to implement Housing CS services in SF. HSH funds and oversees a full scope Homelessness Response System, which includes Housing Navigation Transition Services, Housing Transition Sustaining Services, and Housing Deposits through its 'Move-In Assistance' service in its prevention and diversion programming.

Which of the following allowable uses does your organization's funding request best fit into?

Providing upfront funding needed to support capacity and infrastructure necessary to deliver ECM and Community Supports services

Provide a justification of why CITED funding is needed to support the delivery of and/or bolster capacity to support ECM and/or Community Support services. Applicants should include a description of the anticipated breadth of impact of the requested CITED funding.

BHS Building: The San Francisco Department of Public Health (SFDPH) is requesting funding for 33% of a building acquisition, which will serve as the new Mental Health Service Center (MHSC), a 'one-stop' behavioral health drop-in access point, particularly for individuals experiencing homelessness. CalAIM Enhanced Care Management (ECM) services and associated required CalAIM and ECM administrative support will be provided within 33% of the total physical space of the building. The co-location of BHS staff and CalAIM/ECM staff will improve coordination and service delivery. Our Office of Coordinated Care's Bridges and Engagement Services Team (BEST), an SFHN ECM provider, will see people onsite. This will facilitate linkages for these members as well as other SFHN ECM teams including SF Street Medicine, primary care Complex Care Management Team (CCM), Permanent Housing Advanced Clinical Services (PHACS), Team Lily serving pregnant women, and BHS Outpatient Mobile Outreach Teams (MOT). We expect to expand the number of Medi-Cal eligible individuals being served by 25%, from 6,000 currently to 7,500, within our first year of full operation.

Provide a high-level description of how the requested CITED funding will be used to support the delivery of ECM and/or Community Supports, including how funding request aligns with the goals of CalAIM. Note: administrative or "indirect" costs are not permitted to exceed 5% of total requested funds.

Purchase of BHS Building: The space is designed to optimize the client experience, particularly for individuals who are unhoused, experiencing homelessness or justice involved with complex substance use and behavioral health needs. The building is centrally located in the most high-demand neighborhood of SF, with proximity to other services frequently accessed by our priority population, allowing ease of access for the ~3,800 people experiencing homelessness (PEH) in that district based on the 2022 Point in Time Count (PIT) (approximately half of SF's 7,800 PEH). Through integration and co-location of CalAIM and ECM staff and services, Behavioral Health Access Center (BHAC), Office-based Buprenorphine Induction Clinic (OBIC), Behavioral Health Services (BHS) Pharmacy, a medical laboratory, Street- and community based outreach and extended care management teams, housing services, and more, we will address systemic challenges in providing coordinated access to care for vulnerable populations. The center will improve quality outcomes, reduce health disparities, and transform the delivery system through value-based initiatives.

Describe your initial approach to sustaining activities/items funded via CITED after CITED funding ends.

Purchase of BHS Building: DPH will be leveraging local funds to support the remaining 67% of funding for the building, therefore this does not duplicate or supplant reimbursement from other sources.

Describe to what extent your organization serves populations that are historically marginalized or underserved.

The San Francisco Health Network (SFHN) is the City's only complete system of care, with locations throughout SF, including Zuckerberg San Francisco General Hospital and Trauma Center, Laguna Honda Hospital and Rehabilitation Center, 18 behavioral health service sites, 16 neighborhood-based primary care health centers, Health at Home, and Jail Health Services. SFHN also provides care in schools, navigation centers, shelters, on the streets, and in childcare centers. SFHN and Behavioral Health Services (BHS) serve all populations in San Francisco. The San Francisco Department of Public Health (SFDPH) has made equity an explicit value; equity is a True North Dimension for the SFDPH. In 2014, the establishment of the

Black/African American Health Initiative (BAAHI) prioritized the elimination of large and persistent health and workforce disparities for this population. Over the last 3 years, that work expanded to include increasing attention to institutional and structural causes of these disparities. Different areas of the department have instituted training, created infrastructure, set new policy, and taken action to advance racial equity. SFDPH is committed to creating greater consistency in racial equity activities across the department and has created the Office of Health Equity to organize these efforts. This work aligns with city-wide goals addressing racial equity through the San Francisco Office of Racial Equity at the Human Rights Commission. Additionally, SFHN and BHS actively cut through socioeconomic, ethnic, cultural, and linguistic barriers to provide a wide range of mental health services to San Francisco's most vulnerable populations. Frontline staff reflect the diversity of the communities served. Many staff offer services in non-English languages, making services more accessible and reducing stigmas within cultures historically reluctant to seek mental health support. SFDPH has led efforts to offer programming and resources to the LGBTQ+ community, including expanding data collection to integrate information around Sexual Orientation/Gender Identity (SOGI).

Has your organization received, or applied for, funding from MCPs through the Incentive Payment Program? If yes, please describe the amount of funding received or requested, when funding was received or requested, the activities that funding is supporting or is intended to support, and the MCP that provided this funding.

1) In August 2022, San Francisco Department of Public Health (SFDPH) was awarded an Incentive Payment Program (IPP) grant of \$360,000 jointly funded between Anthem and SFHP as follows based on market share: Anthem (12%) - \$43,200 SFHP (88%) - \$316,800

The below activities will be supported by this grant:

Project 1: \$180,000 for SFDPH IT Staff to Support Approvals Process, Technical Infrastructure Build, and Implementation of CareLink, an IT platform that will provide access to client background and overviews, CS service history, visit histories at SFDPH and other city healthcare sites, information on shelter stays and transition into permanent supportive housing, and more to support implementation of CalAIM CS services in San Francisco.

Project 2: \$180,000 for CareLink Client Summary Trainings to Build Capacity. SFHN provides CareLink access for numerous groups within the community. With the expansion of ECM and CS, we anticipate a significant increase in requests for CareLink access from SFHP ECM lead entities, SF Department of Homelessness and Supportive Housing (HSH), and more than 50 community based organizations.

2) In September 2022, SFDPH/SF Homelessness and Supportive Housing (HSH) department was awarded an Incentive Payment Program (IPP) grant for \$387,500 jointly funded between Anthem and SFHP as follows: Anthem: \$46,500 SFHP: \$341,000 The below activities will be supported by this grant:

a) Consulting services to implement HSH IT Upgrades for Medi-Cal Compliance, including review of Medi-Cal IT security requirements, security gaps and needs analysis for HSH and its CBO contractors, identifying solutions to close those gaps (implementation may be a separate, longer-term project for a future IPP or other funding cycle).

b) Consulting services to support HSH Data Exchange with MCPs and/or SFDPH, including gaps and needs analysis regarding HSH's ability to produce 837/EDI compliant claims, as required for CalAIM billing;

identification of technological solutions, workflows, and personnel needs that would put HSH on a path to 837/EDI claims submission and adjudication (implementation may be a separate, longer-term project for a future IPP or other funding cycle).

c) Staffing to support HSH's general project management related to a range of projects required to kick off participation in Community Supports planning and operations, and other projects in the CalAIM initiative. 3) Justice Involved PATH Round 1: The San Francisco Sheriff's Office received \$100,000 to identify processes, protocols, and IT modifications that are necessary to support implementation of pre-release enrollment and suspension processes.

Does your organization participate in a PATH funded Collaborative Planning and Implementation group? If so, please describe which group your organization participates in, when it began participating, and how this application was coordinated with other participants in the collaborative planning group.

The San Francisco Department of Public Health (SFDPH) is enthusiastic to participate in a PATH-funded Collaborative Planning and Implementation group. However, SFDPH has not yet been informed of who is the Facilitator for the San Francisco Collaborative Planning and Implementation group, nor has that person reached out to SFDPH to coordinate participation. In developing this application, we have coordinated with internal and external partners including the SF managed care plans (MCPs) SFHP and Anthem, SF Homelessness and Supportive Housing (HSH), and various other departments within the City and County of San Francisco. Despite the lack of a DHCS Collaborative Planning and Implementation facilitator in SF, SFDPH has developed a collaborative partnership with both MCPs to implement CalAIM in San Francisco. SFDPH also partners closely with the San Francisco Human Services Agency (HSA), the San Francisco Department of Homeless and Supportive Housing (HSH), the San Francisco Sheriff's Department and Jail Health Services (JHS), a division of the San Francisco Department of Public Health (SFDPH), and other City departments. JHS has been assisting incarcerated individuals with applying for Medi-Cal for over eight years. We intend to build upon this existing collaboration as we implement CalAIM, with the goals of significantly increased Medi-Cal enrollment, increasing automated data sharing, and improving communication and coordination. The San Francisco Health Network has existing relationships and collaboration with HSH around Community Supports and CalAIM at large, and is working closely with HSH to plan for the implementation of CalAIM Housing CS. The San Francisco Health Network (SFHN) would like to expand collaborative planning, and feel a multicounty approach is needed among Alameda, Contra Costa, Marin, Monterey, Napa, San Francisco, San Mateo, Santa Clara, Santa Cruz, Sonoma counties. We're interested in learning more about the PATH-funded Collaborative Planning and Implementation group in SF and/or the Bay Area.

Describe how your organization intends to coordinate with other stakeholders (including MCPs) to ensure CITED funding is aligned with, but does not duplicate or supplant reimbursement from other sources.

SFDPH has discussed with both the San Francisco Health Plan (SFHP) and Anthem this CITED Food Pharmacy funding application and our plans to scale Food Pharmacy as a CaAIM CS in San Francisco. We are partnering with other City and County of San Francisco agencies to ensure this program is coordinated with and complements other Medically Supportive Food & Nutrition Community Supports and does not overlap with other funding requests. Both health plan partners

are supportive of Food Pharmacy as part of Medically Supportive Food & Nutrition Community Supports implementation in San Francisco, and will collaborate with SFPDPH to build out Food Pharmacy as a CS.

Please describe the additional documentation that you would like to upload.

The below two documents are referenced in the SFPDPH PATH CITED Budget Template in Tab C, Cell D5, and support the SFPDPH funding request for \$20,000,000 for 33% of a building acquisition, building improvements, and FFE (furniture, fixtures, & equipment), which will serve as the new Mental Health Service Center (MHSC), a 'one stop' behavioral health drop-in access point, particularly for individuals experiencing homelessness and those with complex behavioral health needs. CalAIM Enhanced Care Management (ECM) services and associated required CalAIM and ECM administrative support will be provided within 33 percent of the total physical space of the building.

- 1) SFPDPH Mental Health Service Center Client Experience
- 2) SFPDPH Mental Health Service Center Community Partners

Budget Template

Allowable Use Category: Providing Upfront Funding Needed to Support Capacity and Infrastructure Necessary to Deliver ECM and Community Supports Services

Purchase Category: Facility costs (e.g. renovations, furniture etc.) Include description of items

Item Description

The San Francisco Department of Public Health (SFPDPH) is requesting one-time funding of \$20,000,000 for 33% of a building acquisition, building improvements, and FFE (furniture, fixtures, & equipment), which will serve as the new Mental Health Service Center (MHSC), a 'one-stop' behavioral health drop-in access point, particularly for individuals experiencing homelessness and those with complex behavioral health needs. CalAIM Enhanced Care Management (ECM) services and associated required CalAIM and ECM administrative support will be provided within 33 percent of the total physical space of the building. We're requesting an additional \$2,000,000 for overhead and administrative expenses. The total PATH CITED funding request for this building is \$22,000,000.

1019 Market Street will house a behavioral health drop-in access hub, to create San Francisco's (SF's) first comprehensive Mental Health Service Center (MHSC). The space is designed to optimize the client experience, particularly for individuals who are unhoused, experiencing homelessness or justice involved with complex substance use and behavioral health needs.

The MHSC at 1019 Market Street will be a joint collaboration across multiple programs including Behavioral Health Access Center (BHAC), Office-based Buprenorphine Induction Clinic (OBIC), Behavioral Health Services (BHS) Pharmacy, a medical laboratory, Street- and community-based outreach and extended care management teams, housing services, community CBO partners, and overnight services. Through integration and co-location, we will address systemic challenges in providing coordinated access to care for vulnerable populations. This whole-person approach will improve outcomes and decrease morbidity/mortality amongst people utilizing behavioral health services. The building is centrally located in the most high-demand neighborhood of SF, with proximity to other services frequently accessed by our

priority population, allowing ease of access for the ~3,800 people experiencing homelessness (PEH) in that district based on the 2022 Point in Time Count (PIT) (approximately half of SF's 7,800 PEH). It's adjacent to the Maria X Martinez Health Resource Center and the Tom Waddell primary care clinic, which both serve complex medical needs of this same vulnerable population. Referral to CS services (e.g., housing services, alcohol sobering, drug sobering), will support an accessible, consistent and seamless system for clients. The center will improve quality outcomes, reduce health disparities, and transform the delivery system through value-based initiatives. Engagement is essential, including access to food, clothing, showers, and other basic needs. Holistic programming such as resiliency groups, job access and training, community building, and companionship support will address issues such as loneliness and limited social support that impact substance use and mental health.

Justification

The San Francisco Department of Public Health (SFDPH) is requesting funding for 33% of a building acquisition, which will serve as the new Mental Health Service Center (MHSC), a 'one-stop' behavioral health drop-in access point, particularly for individuals experiencing homelessness. CalAIM Enhanced Care Management (ECM) services and associated required CalAIM and ECM administrative support will be provided within 33 percent of the total physical space of the building.

The total projected costs of building purchase and tenant improvements for 1019 Market Street in San Francisco is approximately \$60 million. The building is eight stories and each of the floors are 10,000 square feet. Based on current plans, Behavioral Health Services (BHS) staff, including key Mental Health SF staff and the Office of Coordinated Care (OCC), will occupy six floors of office space, with half of one of those floors dedicated to CalAIM and ECM administrative support staff. This co-location of BHS staff and CalAIM/ECM staff will improve coordination and service delivery, especially with the proximity to direct clinical services planned on the first two floors. The first two floors will be dedicated to client facing services and will serve as the 'one-stop' behavioral health drop-in access point and will provide enhanced client service integration, including significant collaboration across programs including Behavioral Health Access Center (BHAC), Office-Based Buprenorphine Induction Clinic (OBIC), Behavioral Health Services (BHS) Pharmacy, Street- and community-based teams, community partners, and overnight services. Proximity to the Maria X Martinez Health Resources Center allows for strong linkages between physical health urgent care, primary care, and behavioral health services. The new Center will embody the principals of trauma informed care, creating a healing environment for people experiencing homelessness, substance use and/or mental health challenges. (See attached document: "SFDPH Mental Health Service Center Client Experience.")

The MHSC will facilitate referrals to providers throughout the city per the attached document: "SFDPH Mental Health Service Center Community Partners." We expect to expand the number of Medi-Cal eligible individuals being served by 25%, from 6,000 currently to 7,500, within our first year of full operation. Referrals to CS services (e.g., housing services, alcohol sobering, drug sobering), will support an accessible, consistent and seamless system to meet additional needs of enrollees.

Our Office of Coordinated Care's Bridges and Engagement Services Team (BEST), an SFHN ECM provider, will see people on-site. This will facilitate linkages for these members as well as other SFHN ECM teams including SF Street Medicine, primary care Complex Care Management Team (CCM), Permanent Housing Advanced Clinical Services (PHACS), Team Lily serving pregnant women, and BHS Outpatient Mobile Outreach Teams (MOT). The new center will offer expanded assessment space to accommodate 1:1 ad hoc individual assessment sessions for street-based providers as well as weekly or monthly clinic time.

DPH estimates that given the two floors of co-located client services and 5,800 square feet of CalAIM and ECM administrative office space, at least 33% of the building aligns with and helps facilitate our achieving

the goals of CalAIM ECM and CS. As such, DPH proposes \$22 million in one-time CalAIM PATH CITED funding to support the building acquisition and tenant improvements. DPH will be leveraging local funds to support the remaining 67% of funding for the building.

Timeframe for Requested Funding

Timeframe for requested funding is 1/1/2023 to 3/15/2025.

Note: Building acquisition timeline is estimated and dependent on other funding sources, approvals, etc.

Amount Requested

\$ 22,000,000

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**Milestones for \$22,000,000 for 33% of a building acquisition for CalAIM Enhanced Care Management (ECM) services and associated required CalAIM and ECM administrative support**

**NOTE: All milestones must have a funding amount associated with them**

| Milestone                              | Metric                                                                                                                                                                                     | Anticipated Date |
|----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| <b>BUILDING PURCHASE</b>               |                                                                                                                                                                                            |                  |
| Board and Mayoral approval of purchase | Financing and sale agreement resolutions and ordinances approved and signed by the Mayor                                                                                                   | 3/10/2023        |
| Escrow - initial funding               | All funding sources deposited into escrow account                                                                                                                                          | 4/10/2023        |
| Building tenant improvements completed | 3-6 months after escrow funded                                                                                                                                                             | 9/15/2023        |
| Escrow – close - building purchased    | 30 days after building tenant improvements complete                                                                                                                                        | 10/15/2023       |
| Building fully operational             | IT systems, pharmacy licensing, and equipment in place (including supply chain considerations); majority of client services spaces are operational and DPH staff can utilize office spaces | 3/15/2024        |
| <b>OPERATIONS</b>                      |                                                                                                                                                                                            |                  |

|                                                                                                                                                                                                        |                                                                                                                           |                                                                                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| Staff in the Mental Health Service Center (MHSC) building providing ECM services and associated required CalAIM and ECM administrative support                                                         | Number of staff in the MHSC building providing ECM services and associated required CalAIM and ECM administrative support | 6/15/2024                                                                          |
| Achieve 25% operational capacity by end of first quarter, based on projected full operational capacity of 625 people served per month                                                                  | Number of people served per month                                                                                         | 6/15/2024<br><i>(based on 3 months from the date the building is operational)</i>  |
| Achieve full operational capacity by end of first year, based on projected full operational capacity of 625 people served per month <i>(25% increase from current Behavioral Health Access Center)</i> | Number of people served per month                                                                                         | 3/15/2025<br><i>(based on 12 months from the date the building is operational)</i> |



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|                   |                                                                                                                                           |
|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------|
| Application ID    | 852219                                                                                                                                    |
| Submitted         | Mar 17, 2023                                                                                                                              |
| Status            | In progress                                                                                                                               |
| Applicant(s)      | Kathleen Reed (kathleen.reed@sfdph.org)<br>Rob Longhitano (robert.longhitano@sfdph.org)<br>Louise Simpson (Louise.Simpson@sfcityatty.org) |
| Program and cycle | CITED Application Round 1<br>Application 1 data entry cycle                                                                               |
| Tags              | No tags                                                                                                                                   |
| Forms             | <a href="#">CITED Terms and Conditions Round 1 (Kathleen Reed)</a>                                                                        |

**CITED Terms and Conditions Round 1**

Submitted by Kathleen Reed on Apr 21, 2023

Kathleen Reed  
kathleen.reed@sfdph.org

**Terms and Conditions**

# California Providing Access and Transforming Health

## Capacity and Infrastructure, Transition, Expansion and Development Program

### Acknowledgement of Grant Terms and Conditions

As an express condition of receiving grant funds from the California Department of Health Care Services (“DHCS”) under the Capacity and Infrastructure, Transition, Expansion and Development (CITED) Program, which is part of the California Providing Access and Transforming Health (“PATH”) Initiative,

**Applicant**

City & County of San Francisco

**Tax Identification Number**

94-6000417

**Address**

1 Dr. Carlton B. Goodlett Place, Room 316, San Francisco, CA 94102

**I. Role of Third-Party Administrator.**

DHCS.DHCS has designated Public Consulting Group LLC as the Third-Party Administrator (TPA), to administer the grant program and to communicate with Applicant with respect to grant administration in connection with the CITED Program. Applicant understands that the TPA is acting solely as a third-party administrator on behalf of DHCS and is not liable or responsible for DHCS decisions or actions. Applicant hereby releases and holds harmless the TPA and its officers, agents, employees, representatives, and/or designees from and against any and all liability, actions, claims, demands, or suits, and all related costs, attorney fees, and expenses arising out of, or relating to the receipt of grant funds. DHCS shall not be liable to Applicant for any incidental, indirect, special, punitive, or consequential damages, including, but not limited to, such damages arising from any type or manner of commercial, business, or financial loss, even if PCG or DHCS had actual or constructive knowledge of the possibility of such damages and regardless of whether such damages were foreseeable. Applicant hereby releases and holds harmless DHCS and its officers, agents, employees, representatives, and/or designees from and against any and all liability, actions, claims, demands, or suits, and all related costs, attorney fees, and expenses arising out of, or relating to receipt of grant funds and associated activities in connection with CITED.

**II. Eligibility.**



In order to receive grant funds under this program, Applicant must be actively contracted with a Managed Care Plan (MCP), county, delegated provider, or other entity authorized to contract with for the provision of ECM/Community Supports, or have a signed attestation letter from an MCP, county, delegated provider or other entity authorized to contract with that they intend to contract with the Applicant to provide ECM/Community Supports within the timeframe of this Terms and Conditions. If the intent or ability to contract with an MCP has changed, ended, or been altered, Applicant must contact the TPA within twenty-four (24) hours to advise of this change. If there is no longer a contract as enumerated above or documented intent to contract, the grant may be terminated pursuant to Section VI, below.

### III. Use of Funding.

- a. Project Plan. Applicant shall use grant funds exclusively to implement the project plan as outlined in Applicant's submitted and approved grant application and the completed additional information request.
- b. Program Guidance and Conditions. In using the funds to implement the project plan, Applicant must follow all terms, conditions, and guidelines provided in the CITED Program guidance, found at [www.ca-path.com](http://www.ca-path.com), and in these Terms and Conditions.
- c. Changes and Modifications. Changes and modifications made to the submitted and approved grant application and the completed additional information request or to the program guidelines may be proposed by Applicant in writing and are subject to the approval of DHCS. No change or modification will be valid without the prior written approval of

### IV. Grant Amount and Method of Payment.

Grant Amount. The total grant amount awarded to Applicant shall not exceed

#### Final Allowed Award Amount

\$3,862,929.40 USD

Applicant acknowledges that the grant amount has been determined by DHCS and will not be negotiated with the TPA.

- a. Method of Payment. The TPA, on behalf of DHCS, shall cause initial payment to be disbursed to Applicant via direct deposit into Applicant's account within forty-five (45) calendar days following receipt of Applicant's signature on this Acknowledgement, provided Applicant has provided all required information, forms, and documentation required to facilitate payment.
- b. Reliance on Provided Information. DHCS and the TPA are entitled to rely on the accuracy and completeness of information provided by Applicant in the disbursement of grant funds.

**V. Reporting Requirements.**

- a. Quarterly Reports. Applicant is required to submit quarterly progress reports to the TPA through secured data portal specified by DHCS and PCG every three (3) months until the final project milestones described in the submitted and approved grant application and the completed additional information request are met. Each progress report must include a detailed description of completed milestones, status of activities for that quarter, and any deviations from the agreed-upon milestones.
- b. Reporting Schedule. The reporting schedule is as follows:

| Report             | Due Date   |
|--------------------|------------|
| January – March    | April 14   |
| April – June       | July 14    |
| July – September   | October 14 |
| October – December | January 14 |

- c. Failure to Report. If Applicant fails to submit any quarterly report within thirty (30) calendar days of the report becoming due, DHCS may terminate the grant pursuant to Section VI, below.

**VI. Additional DHCS Terms and Conditions.**

- a. Funding received through the CITED Program will not duplicate or supplant<sup>1</sup> funds received through other programs or initiatives or by other federal, state, or local funding sources.
- b. DHCS may, in its reasonable discretion, modify payment dates or amounts and will notify Applicant of any such changes in writing.
- c. Applicant may be subject to audit or inquiry with respect to the receipt and use of grant funds at any time. Applicant must respond to inquiries, communications, and reasonable requests for additional information or documentation from DHCS or the TPA within one (1) business day of receipt and must provide any requested information within five (5) business days, unless an alternative timeline is approved by DHCS.
- d. Applicant must alert DHCS and the TPA within twenty-four (24) hours if circumstances prevent it from carrying out any of the activities described in the submitted and approved grant application and the completed additional information request. In such cases, Applicant may be required to return unused funds to DHCS if an alternative solution cannot be reached.
- e. All inquiries and notices relating to this Agreement should be directed to the representatives listed below:

1

|                                                                       |                                                                 |
|-----------------------------------------------------------------------|-----------------------------------------------------------------|
| Department of Health Care Services, Managed Care Quality & Monitoring | Public Consulting Group, LLC                                    |
| Division                                                              |                                                                 |
| Branch Chief, Value-Based                                             | CITED Grant Manager                                             |
| Quality Programs Branch                                               |                                                                 |
| Attention: Michel Huizar                                              | Attention: Sari Lelchook                                        |
| Email: 1115path@dhcsca.gov                                            | Email: <a href="mailto:cited@ca-path.com">cited@ca-path.com</a> |

**Organization Name: \***

San Francisco Department of Public Health

**Title: \***

CalAIM Community Supports Program Manager

**Attention: \***

Kathleen Reed

**Email: \***

[kathleen.reed@sfdph.org](mailto:kathleen.reed@sfdph.org)

f. DHCS and the TPA may rely on the authority of the above-named individual to speak and act on behalf of Applicant. Either party may make changes to the information above by giving written notices to the other party within twenty-four (24) hours. Said changes shall not require an amendment to this Agreement. Applicant will retain all records and documentation related to the receipt and use of PATH grant funds, including all documentation used to support and detail expenditures, for no less than three (3) years beyond the date of final payment and will make such records available for complete inspection by DHCS upon request.

g. DHCS reserves the right to receive, use, and reproduce all reports and data produced, delivered, or generated by or about Applicant and its activities pursuant to this grant and may authorize others to do so without limitation, except as restricted by applicable law.

h. Applicant will not unlawfully discriminate against any person because of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status in the conduct of any activity funded by DHCS.

i. Applicant expressly agrees and acknowledges that DHCS is a direct beneficiary of the Terms and Conditions with respect to all obligations and functions undertaken pursuant to the Terms and Conditions, and DHCS may directly enforce any and all provisions of the Terms and Conditions.

j. Applicants are required to provide a signed contract with an MCP or the MCPs' Subcontractor (meaning delegated Medi-Cal managed care plan or delegated network provider) to provide ECM and/or Community Supports services. Alternatively, the Applicant may submit a signed agreement indicating that

the MCP or the MCP's Subcontractor intends to contract with the applicant for the provision of ECM and/or Community Supports. If you do not provide that signed contract by the last progress report, then the TPA will be withholding 5% or \$5,000 of funds, whichever is lower, until a contract with the MCP or the MCP's Subcontractor is provided.

#### **IV. Termination**

Upon written notice to Applicant, DHCS may terminate the grant award in any of the following circumstances:

- a. If Applicant fails to perform any one or more of the requirements set forth in these Terms and Conditions;
- b. If any of the information provided by Applicant to DHCS or to the TPA is untruthful, incomplete, or inaccurate;
- c. Upon Applicant's debarment or suspension by competent authority, if such debarment or suspension precludes any activity funded by the grant;
- d. Upon Applicant's indictment in any criminal proceeding;
- e. If Applicant is reasonably suspected of fraud, forgery, embezzlement, theft, or any other misuse of public funds;
- f. If DHCS does not receive or maintain sufficient funds to administer the program;
- g. If any restriction, limitation, or condition is enacted by Congress or by any other governing body or agency that impedes the funding or administration of the grant; or
- h. For any other purpose deemed necessary or advisable by DHCS.

In the case of early termination, Applicant may be subject to audit, recoupment by DHCS of unused or misused funds, and/or preclusion from receiving additional funding, dependent upon the circumstances of the termination.

IN WITNESS THEREOF, APPLICANT has executed this Acknowledgment as of the date set forth below.

**Name: \***

Kathleen Reed

**Date \***

Apr 21, 2023

Other Federal, state or local funding sources and programs that are complementary to or enhance PATH funds will not be considered supplanted by PATH funds or duplicate reimbursement. If applicable, applicants must describe how similar or related services and activities supported by other Federal, state or local funding sources are complemented or enhanced by efforts funded by PATH. For example, if other funding 1) does not fully reimburse activities, 2) may allow additional/different populations to be served or 3) may allow additional/different services to be provided beyond those funded by PATH. To the extent otherwise allowable PATH activities are reimbursed by other Federal, state or local programs, PATH funding must not duplicate such reimbursement.

*Kathleen Reed*

Signed by Kathleen Reed on Apr 21, 2023

**From:** [Sur, Matthew \(DPH\)](#)  
**To:** [Boyder, Alex \(DPH\)](#)  
**Subject:** Fwd: CA-PATH CITED Grants Support Ticket: 13800 - Questions regarding CITED Round 1B Progress Report Documentation  
**Date:** Tuesday, March 26, 2024 5:32:38 PM  
**Attachments:** [image001.png](#)

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Get [Outlook for iOS](#)

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**From:** Reed, Kathleen (DPH) <kathleen.reed@sfdph.org>  
**Sent:** Tuesday, January 23, 2024 1:23:33 PM  
**To:** Sur, Matthew (DPH) <Matthew.Sur@sfdph.org>  
**Subject:** FW: CA-PATH CITED Grants Support Ticket: 13800 - Questions regarding CITED Round 1B Progress Report Documentation

Hi Matt,

See below response from PATH CITED team. We do not need to adjust 2021 the documentation for Marianna.

### Kathleen Reed

CalAIM Community Supports Program Manager  
San Francisco Health Network, San Francisco Department of Public Health  
333 Valencia, 3<sup>rd</sup> Floor, San Francisco, CA 94103  
628-227-4104  
(pronouns: she/her/hers)

*To learn about SFHN CalAIM Initiatives, please visit our [CalAIM SharePoint Site](#).*



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**From:** CITED Grants Support <cited@ca-path.com>  
**Sent:** Tuesday, January 23, 2024 12:54 PM  
**To:** Reed, Kathleen (DPH) <kathleen.reed@sfdph.org>  
**Subject:** CA-PATH CITED Grants Support Ticket: 13800 - Questions regarding CITED Round 1B Progress Report Documentation

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Thank you for contacting the PCG CA-PATH CITED Grants Support Service Desk.

Your ticket has been updated: 13800 - - Questions regarding CITED Round 1B Progress Report Documentation

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**Stephanie Chen (CA PATH Grants)**

Jan 23, 2024, 12:54 PM PST

Hello Kathleen,

Thank you for your inquiries.

Based on the information from our reviewers, at this time, there is no need for additional actions for your past progress reports. We currently do not need any additional information, but we do recommend that you keep your documentation should there ever be an audit.

Best,

The PATH CITED TPA Team

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**Kathleen Reed**

Jan 22, 2024, 9:07 AM PST

Dear CITED Team,

In reviewing our PATH CITED Round 1B Progress Report [#1](#) documentation, SFHN realized we inadvertently submitted several **2021** invoices for IT Project Manager/EHR Consultant (Marianna Ramirez), and want to determine if we need to make any corrections/updates to the documentation. See attached submitted with Progress Report [#1](#) documentation.

1. Is DHCS/CITED team ok with keeping the 2021 documentation for the IT Project Manager/EHR Consultant (Marianna Ramirez), given she was working on SFHN CalAIM during the time of the 2021 invoices?
2. If not, and adjustments need to be made to the documentation submitted, which of the below options are acceptable to account for CalAIM expenses that would replace the 2021 invoices previously submitted?
  - a. Submit IT Project Manager/EHR Consultant (Marianna Ramirez) invoices for the time period **after 9/30/22** (*original time frame for our retroactive CalAIM consulting funding request was 1/1/22-9/30/22*)
  - b. Submit invoices for **other** IT/EHR Consultants working on CalAIM from

**1/1/22 to 9/30/22**

c. Other – please advise

- If corrections need to be made to our Progress Report [#1](#) documentation, how do we make those updates/corrections?

Thank you!

**Kathleen Reed**

CalAIM Community Supports Program Manager  
San Francisco Health Network, San Francisco Department of Public Health  
333 Valencia, 3<sup>rd</sup> Floor, San Francisco, CA 94103  
628-227-4104  
(pronouns: she/her/hers)



Attachment(s)

[CITED Round 1B Progress Report 1 – SFHN retroactive CalAIM IT Project Manager AP Transaction Details–Cont ##100002942.xlsx](#)

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**From:** [DHCS 1115 Path](#)  
**To:** [Boyder, Alex \(DPH\)](#); [Sur, Matthew \(DPH\)](#)  
**Cc:** [Aung, Hnin@DHCS](#); [CITED Grants Support](#); [Huizar, Michel@DHCS](#); [Wong, Michelle@DHCS](#); [Dhiman, Ayesha@DHCS](#); [DHCS 1115 Path](#); [Bistrup, Lisa@DHCS](#)  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT  
**Date:** Thursday, September 12, 2024 2:29:21 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[Impermissible Uses List\\_Final\\_2023-03-21.pdf](#)  
[CITED IGT Progress Report Guidance.pdf](#)  
[PATH CITED Guidance.FINAL.07.27.22-Round\\_1.pdf](#)

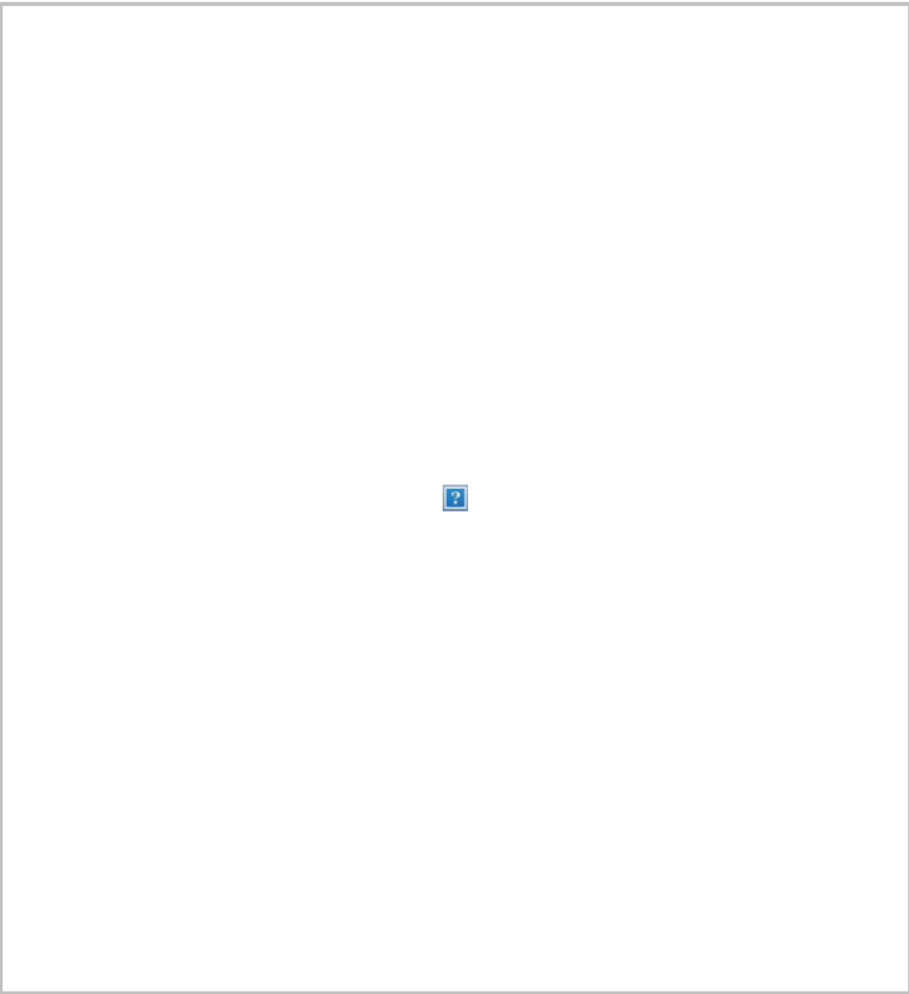
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Hello Alex,

Please see responses and additional comments to remaining questions from SFDPH. Responses are indicated in [blue](#). Some of the accounting questions are reliant on the set up of the CITED-IGT payment processing procedures at DHCS. DHCS is currently in the process of setting up the IGT financing so information such as the Federal award number are not readily available. This can be provided to SFDPH as soon as that process is complete.

### **SFDPH Questions**

1. SFDPH needs federal/state award info.
  - a. For CITED 1b and IGT Is there any federal documentation other than the CDFA #, according to CFR200 (listed below)
  - b. Is there any sub recipient pass-through information?
    - We are still looking into this with our finance departments and will provide a response as soon as possible.
    - Please note the CITED-IGT funding is not Pass-through funding. Awardees must contribute the non-federal share to receive funds at a 50/50 match. The rate will always be 50% federal funds and 50% local match.
  - c. Additionally, our Controllers office would like to know what portion of CITED 1b is from DHCS and what portion is from the Fed? Is it 50-50 for everything? For the money we've already received for CITED 1b, is it 50-50? For when we submit our progress reports and receive funding for the IGT will it always be 50-50?
    - For CITED 1B the funding on the DHCS side comes from 50% Federal funds and 50% State funds. This applies to both past payments and future payments for CITED Round 1B.
    - For CITED-IGT, the funding will be 50% Federal funds and 50% county-provided local match. This will also remain a 50/50 split for the duration of the program. To receive grant funds through CITED-IGT, the awardee must contribute the non-federal share through the Intergovernmental Transfer (IGT) process. Payment is made on completion of milestones following the progress report measurement period. Upon approval of the awardee's CITED-IGT progress report, DHCS will issue a request to the awardee for the necessary IGT amount, provided the awardee has submitted all required information, forms, and documentation, including the awardee's signature acknowledging the CITED-IGT Terms and Conditions, required to facilitate payment.
  - d. Also, are there any spending restrictions between the Fed and DHCS portions for either 1b or IGT?
    - Impermissible uses of funding are outlined between the [CITED-IGT Progress Report guidance](#) and Impermissible Uses list. Some example of spending restrictions include real estate investments and other capital projects, coverage of services and benefits covered through Medi-Cal, and incentive payments. Guidance documents for CITED Round 1 and for CITED-IGT are attached along with a list of Impermissible Uses of CITED funds for reference.

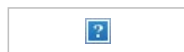


2. SFDPH needs approval for Progress Report 1 issue of invoices from 2021.
  - a. This is for PATH CITED 1B progress report #1. I attached our communication with PCG on this item. They did approve the progress report (and the expense outside of the grant period), but our Controllers office needs you (DHCS) to specifically approve that the expenses we included on that progress report from 2021 are allowable. The IT Project Manager/EHR Consultant (Marianna Ramirez), was working on CalAIM during the time of the 2021 invoices. Additionally, our Controllers office would like to confirm that the IT Consultant was an allowable use of PATH CITED funds.
    - DHCS confirms the expenses SFHN included on the CITED Round 1B Q1 progress report from 2021 are allowable, including for the IT Project Manager/EHR Consultant (Marianna Ramirez), who was working on CalAIM during the time of the 2021 invoices. DHCS also confirms that the IT Consultant is an allowable use of PATH CITED funds.
  
3. SFDPH needs clarification of grant terms for Cited 1B and IGT. Is it acceptable for the City and County of San Francisco to have grant terms for PATH CITED 1b and PATH CITED IGT in our accounting system as described below?
  - a. For DPH accounting purposes we need PATH CITED 1b's grant terms in our system to run 10/1/21 (if you approve the 2021 expenses for the IT Project Manager) – through 6/30/25 so we can allocate the retro salary back to 2021 and for the future costs for the FF&E for the BHS building that we have not yet purchased.
    - DHCS confirms it is acceptable for the City and County of San Francisco to have the grant terms for CITED Round 1B run from 10/1/2021 – 6/30/2025 within your systems for accounting purposes.
  
  - b. For PATH CITED IGT we need the terms to run from 10/1/22 (the start of the retro reimbursement) to 10/31/25 (if that is CITED IGT end date).

DHCS confirms it is acceptable for the City and County of San Francisco to have the grant terms for CITED-IGT (Round 2) run from 10/1/2022 – 10/31/2025 within your systems for accounting purposes.

Thank you,

**PATH Team** | Providing Access & Transforming Health Unit  
Managed Care Quality and Monitoring Division  
California Department of Health Care Services  
[PATH Website](#)  
[DHCS CalAIM-PATH Website](#)



---

**From:** Dhiman, Ayesha@DHCS <Ayesha.Dhiman@dhcs.ca.gov>  
**Sent:** Friday, September 6, 2024 11:56 AM  
**To:** 'Boyder, Alex (DPH)' <alexander.boyder@sfdph.org>; DHCS 1115 Path <1115Path@dhcs.ca.gov>  
**Cc:** Aung, Hnin@DHCS <Hnin.Aung@dhcs.ca.gov>; CITED Grants Support <cited@ca-path.com>; Sur, Matthew (DPH) <Matthew.Sur@sfdph.org>; Huizar, Michel@DHCS <Michel.Huizar@dhcs.ca.gov>; Wong, Michelle@DHCS <Michelle.Wong@dhcs.ca.gov>; Garcia, Jasmine@DHCS <Jasmine.Garcia@dhcs.ca.gov>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Thank you Alex! I will send out the invite to everyone shortly.

If you have any questions please let me know.

Best regards,

**Ayesha Dhiman** | AGPA, PATH Unit  
Managed Care Quality and Monitoring Division  
California Department of Health Care Services  
(916) 713-8259



---

**From:** Boyder, Alex (DPH) <alexander.boyder@sfdph.org>  
**Sent:** Friday, September 6, 2024 11:31 AM  
**To:** Dhiman, Ayesha@DHCS <Ayesha.Dhiman@dhcs.ca.gov>; DHCS 1115 Path <1115Path@dhcs.ca.gov>  
**Cc:** Aung, Hnin@DHCS <Hnin.Aung@dhcs.ca.gov>; CITED Grants Support <cited@ca-path.com>; Sur, Matthew (DPH) <Matthew.Sur@sfdph.org>; Huizar, Michel@DHCS <Michel.Huizar@dhcs.ca.gov>; Wong, Michelle@DHCS <Michelle.Wong@dhcs.ca.gov>; Garcia, Jasmine@DHCS <Jasmine.Garcia@dhcs.ca.gov>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

We can do Thursday 9/12 3:30 – 4:30pm, thanks for getting it scheduled! Do you all want to send out a meeting invite?



**Alex Boyder, MBA**  
Administrative Analyst  
SF Health Network  
San Francisco Department of Public Health  
[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)  
3<sup>rd</sup> Floor CHN Building 2789 25<sup>th</sup> St, San Francisco, CA 94110

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**From:** Dhiman, Ayesha@DHCS <Ayesha.Dhiman@dhcs.ca.gov>  
**Sent:** Friday, September 6, 2024 11:25 AM  
**To:** Boyder, Alex (DPH) <alexander.boyder@sfdph.org>; DHCS 1115 Path <1115Path@dhcs.ca.gov>

**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[Matthew.Sur@sfdph.org](mailto:Matthew.Sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Sounds good. Thank you!

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Managed Care Quality and Monitoring Division  
California Department of Health Care Services  
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[DHCS CalAIM-PATH Website](#)



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**From:** Boyder, Alex (DPH) <[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)>  
**Sent:** Friday, September 6, 2024 11:22 AM  
**To:** DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>  
**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[Matthew.Sur@sfdph.org](mailto:Matthew.Sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Thanks, I'll check in with our City Attorney and get back to you



**Alex Boyder, MBA**  
Administrative Analyst  
SF Health Network  
San Francisco Department of Public Health  
[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)  
3<sup>rd</sup> Floor CHN Building 2789 25<sup>th</sup> St, San Francisco, CA 94110

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**From:** DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>  
**Sent:** Friday, September 6, 2024 11:19 AM  
**To:** Boyder, Alex (DPH) <[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>  
**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[Matthew.Sur@sfdph.org](mailto:Matthew.Sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Hello Alex,

We were able to touch base with our legal team and have the below updated available times.

Please let us know which ones work best for your team.

Wed (9/11/24) – 3:00pm – 4:00pm  
Thu (9/12/24) – 3:30pm – 4:30pm  
Fri (9/13/23) – 1:30pm -2:30pm

Thank you!

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Managed Care Quality and Monitoring Division  
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**From:** Boyder, Alex (DPH) <[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)>  
**Sent:** Friday, September 6, 2024 8:36 AM  
**To:** Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>; DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>  
**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[Matthew.Sur@sfdph.org](mailto:Matthew.Sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Thanks Ayesha



**Alex Boyder, MBA**  
Administrative Analyst  
SF Health Network  
San Francisco Department of Public Health  
[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)  
3<sup>rd</sup> Floor CHN Building 2789 25<sup>th</sup> St, San Francisco, CA 94110

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**From:** Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>  
**Sent:** Friday, September 6, 2024 8:31 AM  
**To:** Boyder, Alex (DPH) <[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)>; DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>  
**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[Matthew.Sur@sfdph.org](mailto:Matthew.Sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Good morning Alex,

Our legal counsel is available next week. We're trying to coordinating the dates and timing, and will send you some timings for next week.

Our management is still working on getting the accounting questions answered. We'll keep you updated.

Thank you for your patience!

Best regards,  
**Ayesha Dhiman** | AGPA, PATH Unit  
Managed Care Quality and Monitoring Division  
California Department of Health Care Services  
(916) 713-8259



---

**From:** Boyder, Alex (DPH) <[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)>  
**Sent:** Friday, September 6, 2024 7:42 AM  
**To:** DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>  
**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[Matthew.Sur@sfdph.org](mailto:Matthew.Sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Hey PATH Team,

Can we get an update on what is happening? I know your legal counsel was unexpectedly OOO but you gave us dates that you were free to meet, of those dates, we told you when we were available and we never heard back. Is a legal call going to be possible, if not, please let us know so we can update our City Attorney accordingly. If it is possible, please give us some days/times for next week as the longer it takes, the chances of us being able to accept by the 10/31 go down.

Additionally, are there answers to the accounting questions?

Thanks,



**Alex Boyder, MBA**  
Administrative Analyst  
SF Health Network  
San Francisco Department of Public Health  
[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)  
3<sup>rd</sup> Floor CHN Building 2789 25<sup>th</sup> St, San Francisco, CA 94110

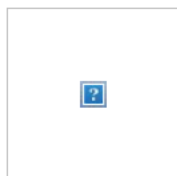
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---

**From:** Boyder, Alex (DPH)  
**Sent:** Tuesday, September 3, 2024 6:08 PM  
**To:** 'DHCS 1115 Path' <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>  
**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[matthew.sur@sfdph.org](mailto:matthew.sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Hey all,

Will 9/5 or 9/6 work for the legal meeting? Are there any answers to the accounting questions?



**Alex Boyder, MBA**  
Administrative Analyst  
SF Health Network  
San Francisco Department of Public Health  
[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)  
3<sup>rd</sup> Floor CHN Building 2789 25<sup>th</sup> St, San Francisco, CA 94110

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---

**From:** DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>  
**Sent:** Friday, August 30, 2024 1:43 PM  
**To:** Boyder, Alex (DPH) <[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)>  
**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[Matthew.Sur@sfdph.org](mailto:Matthew.Sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Hi Alex,

Sorry, I meant we'll get back to you Tuesday due to the State holiday on Monday.

Enjoy the long weekend!

Thank you,  
**PATH Team** | Providing Access & Transforming Health Unit  
Managed Care Quality and Monitoring Division



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[PATH Website](#)  
[DHCS CalAIM-PATH Website](#)



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**From:** DHCS 1115 Path  
**Sent:** Friday, August 30, 2024 11:24 AM  
**To:** Boyder, Alex (DPH) <[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)>  
**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[Matthew.Sur@sfdph.org](mailto:Matthew.Sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

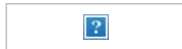
Hello Alex,

Thank you for confirming your availability. We will coordinate the date and time with our team, and get back to you by Monday.

If you have any questions, please let me know.

Have a great weekend!

Thank you,  
**PATH Team** | Providing Access & Transforming Health Unit  
Managed Care Quality and Monitoring Division  
California Department of Health Care Services  
[PATH Website](#)  
[DHCS CalAIM-PATH Website](#)



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**From:** Boyder, Alex (DPH) <[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)>  
**Sent:** Friday, August 30, 2024 8:55 AM  
**To:** DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>  
**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[Matthew.Sur@sfdph.org](mailto:Matthew.Sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Hey All,

Checking in if either of the times on the 5<sup>th</sup>/6<sup>th</sup> will work for meeting next week.



**Alex Boyder, MBA**  
Administrative Analyst  
SF Health Network  
San Francisco Department of Public Health  
[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)  
3<sup>rd</sup> Floor CHN Building 2789 25<sup>th</sup> St, San Francisco, CA 94110

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**From:** Boyder, Alex (DPH)  
**Sent:** Monday, August 26, 2024 11:54 AM  
**To:** DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>  
**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[matthew.sur@sfdph.org](mailto:matthew.sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Thanks for the heads up. We are available:

Thur. 9/5: 11 – 12:30  
Fri. 9/6: 11am – 12pm



**Alex Boyder, MBA**  
Administrative Analyst  
SF Health Network  
San Francisco Department of Public Health  
[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)  
3<sup>rd</sup> Floor CHN Building 2789 25<sup>th</sup> St, San Francisco, CA 94110

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---

**From:** DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>  
**Sent:** Monday, August 26, 2024 9:38 AM  
**To:** Boyder, Alex (DPH) <[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)>; DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>  
**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[Matthew.Sur@sfdph.org](mailto:Matthew.Sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Hello Alex,

Our DHCS legal counsel has been unexpectedly out. We will connect with them as soon as they return. Could you provide times that would work for the SF team for 9/5, 9/6 and 9/9.

For the accounting questions, we are reaching out to the appropriate teams and gathering those responses. We expect to have them in the next couple days to provide you with complete responses.

From our discussion on 8/7, SFDPH is granted the extension to 10/31 to execute the Terms and Conditions.

Thank you,  
**PATH Team** | Providing Access & Transforming Health Unit  
Managed Care Quality and Monitoring Division  
California Department of Health Care Services  
[PATH Website](#)  
[DHCS CalAIM-PATH Website](#)



---

**From:** Boyder, Alex (DPH) <[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)>  
**Sent:** Monday, August 26, 2024 9:16 AM  
**To:** DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>  
**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[Matthew.Sur@sfdph.org](mailto:Matthew.Sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS



<[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>

**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Hey PATH Team,

We appreciate your help on us in SF accepting the PATH CITED IGT award but we're running out of time for us to be able to get everything squared away on the legal and accounting end for a submission to our BOS on 9/1. If we don't have everything set by this Thursday afternoon, we'll be delayed an additional week before we can submit. Is it still possible to meet with legal on the 27<sup>th</sup> or 29<sup>th</sup>? If not, what are additional dates/times? Any updates on the accounting questions?

Thanks, and please let us know if there is anything we can do to help move this forward.



**Alex Boyder, MBA**  
Administrative Analyst  
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San Francisco Department of Public Health  
[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)  
3<sup>rd</sup> Floor CHN Building 2789 25<sup>th</sup> St, San Francisco, CA 94110

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---

**From:** Boyder, Alex (DPH)

**Sent:** Wednesday, August 21, 2024 9:39 AM

**To:** DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>

**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[matthew.sur@sfdph.org](mailto:matthew.sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[jasmine.Garcia@dhcs.ca.gov](mailto:jasmine.Garcia@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>

**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Hey all,

Following up on this. We'd really like to get something scheduled ASAP so we can submit it to our Board of Supervisors on 9/1.



**Alex Boyder, MBA**  
Administrative Analyst  
SF Health Network  
San Francisco Department of Public Health  
[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)  
3<sup>rd</sup> Floor CHN Building 2789 25<sup>th</sup> St, San Francisco, CA 94110

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---

**From:** Boyder, Alex (DPH)

**Sent:** Monday, August 19, 2024 9:30 AM

**To:** DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>

**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[matthew.sur@sfdph.org](mailto:matthew.sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[jasmine.Garcia@dhcs.ca.gov](mailto:jasmine.Garcia@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>

**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Thanks for letting us know, we can be available for the following times. Please let us know which one works for your legal, thanks!

8/26 9am

8/27 10:30am

8/29 10am



**Alex Boyder, MBA**  
Administrative Analyst  
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San Francisco Department of Public Health  
[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)  
3<sup>rd</sup> Floor CHN Building 2789 25<sup>th</sup> St, San Francisco, CA 94110

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---

**From:** DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>  
**Sent:** Monday, August 19, 2024 9:07 AM  
**To:** Boyder, Alex (DPH) <[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)>; DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>  
**Cc:** Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[Matthew.Sur@sfdph.org](mailto:Matthew.Sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>; Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>  
**Subject:** RE: [External]RE: SF/DHCS Meeting RE PATH CITED IGT

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Hello Alex,

Some of the times provided did not work for our team so we are sharing some alternate times below. Please let us know if these may work for the SFDPH team. The 8/22 10 am timeslot may work so we will propose that time to our Office of Legal services as well.

8/26 9 am or 1 pm  
8/27 10:30 am  
8/29 10 am

Thank you,  
**PATH Team** | Providing Access & Transforming Health Unit  
Managed Care Quality and Monitoring Division  
California Department of Health Care Services  
[PATH Website](#)  
[DHCS CalAIM-PATH Website](#)



---

**From:** Boyder, Alex (DPH) <[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)>  
**Sent:** Monday, August 19, 2024 8:44 AM  
**To:** DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>  
**Cc:** Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>; Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[Matthew.Sur@sfdph.org](mailto:Matthew.Sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>  
**Subject:** [External]RE: SF/DHCS Meeting RE PATH CITED IGT

Hey PATH Team,

I just wanted to check in again as we're getting closer to the end of the month. Is meeting Thursday or Friday with your legal + our City Attorney this week going to be possible, if not please let me know so we can find dates for next week. Also, please let us know about answers to the accounting questions.

Thanks,



**Alex Boyder, MBA**  
Administrative Analyst  
SF Health Network  
San Francisco Department of Public Health  
[alexander.boyder@sfdph.org](mailto:alexander.boyder@sfdph.org)  
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---

**From:** Boyder, Alex (DPH)  
**Sent:** Tuesday, August 13, 2024 11:39 AM  
**To:** DHCS 1115 Path <[1115Path@dhcs.ca.gov](mailto:1115Path@dhcs.ca.gov)>; Wong, Michelle@DHCS <[Michelle.Wong@dhcs.ca.gov](mailto:Michelle.Wong@dhcs.ca.gov)>  
**Cc:** Garcia, Jasmine@DHCS <[Jasmine.Garcia@dhcs.ca.gov](mailto:Jasmine.Garcia@dhcs.ca.gov)>; Aung, Hnin@DHCS <[Hnin.Aung@dhcs.ca.gov](mailto:Hnin.Aung@dhcs.ca.gov)>; CITED Grants Support <[cited@ca-path.com](mailto:cited@ca-path.com)>; Sur, Matthew (DPH) <[matthew.sur@sfdph.org](mailto:matthew.sur@sfdph.org)>; Huizar, Michel@DHCS <[Michel.Huizar@dhcs.ca.gov](mailto:Michel.Huizar@dhcs.ca.gov)>; Dhiman, Ayesha@DHCS <[Ayesha.Dhiman@dhcs.ca.gov](mailto:Ayesha.Dhiman@dhcs.ca.gov)>  
**Subject:** SF/DHCS Meeting RE PATH CITED IGT

Hi DHCS PATH CITED Team,

Thanks again for meeting with us last week and granting us an extension! My apologies for sending this a little late, we needed some additional time for some internal conversations. Based on our meeting with you, we'd like to schedule a call between our Deputy City Attorney and your legal team so we can discuss item 1- 3. Are they available on...

Thur. 8/15: 9 – 10am  
Thur. 8/22: 10 – 11am  
Fri. 8/23: 9 – 10am

Additionally, I've included the other accounting questions we need to resolve so that we can accept the award (items 4-7). As a reminder, we need to introduce this to our Board of Supervisors at the beginning of September so that we can meet the 10/31 deadline. We need to wrap up all the outstanding accounting/legal questions before we're able to introduce it.

#### Legal Questions

1. **Term:** The agreement needs a "term." The term may not exceed 10 years without formal approval of the San Francisco Board of Supervisors acting in its sole discretion.
2. **Release:** The City request that the word "release" be removed from paragraph 1. The City would need Board of Supervisors approval to include the word release. Unilateral indemnity is reportable to the City's Risk Manager but does not require BOS approval.
3. **CAT Approval:** Agreement requires a signature block (approval as to form) for the SF City Attorney

#### Accounting Questions

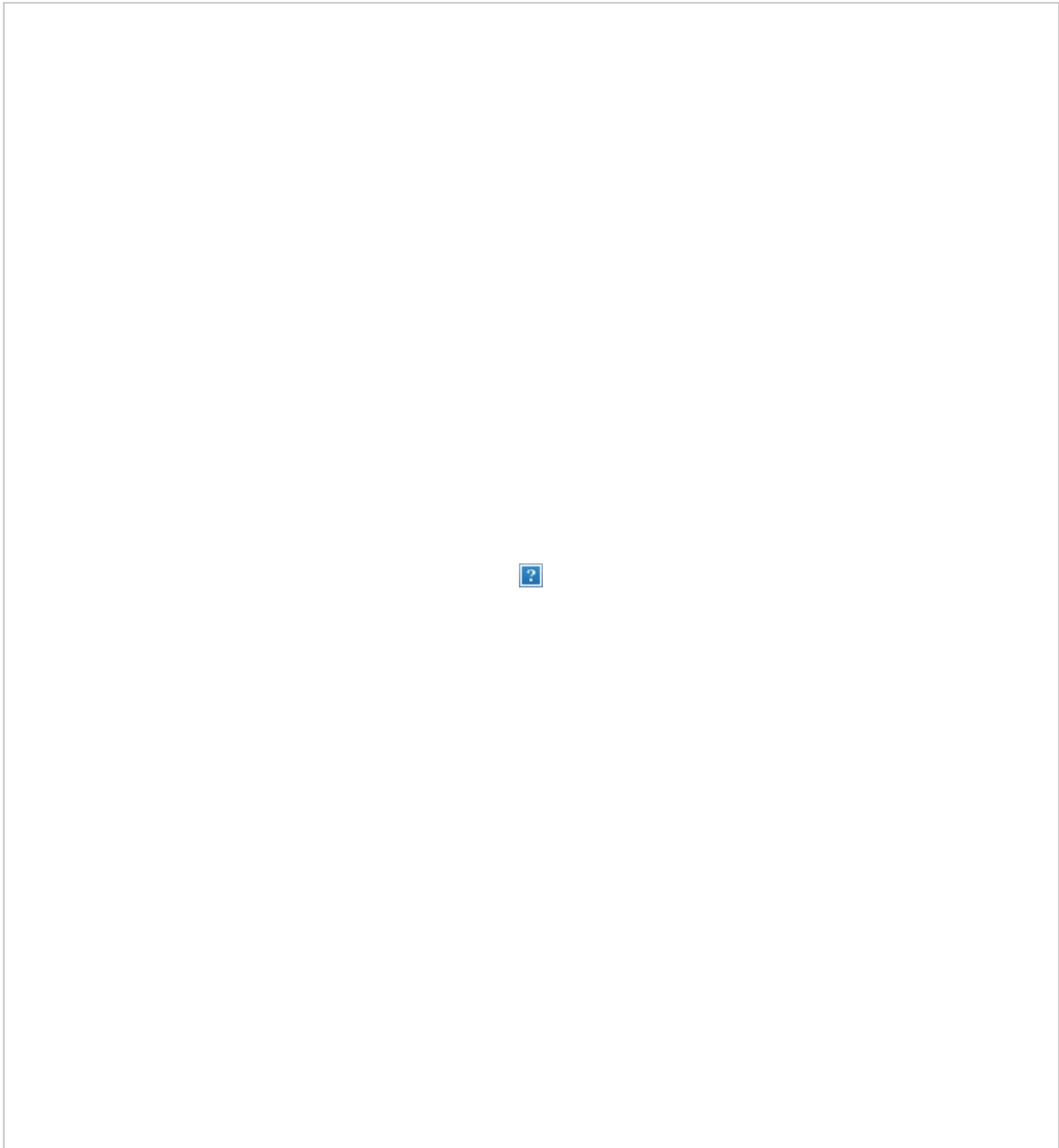
4. SFDPH needs extension until at least 10/15, ideally 10/31 **We need the extension in writing.**
  - a. We need approval from CAT/CON before we send this to our BOS for approval. As we haven't worked out all of their questions, we haven't been able to move this forward to our BOS. Our BOS is on recess for the month of August and due to backlog, best case is BOS Committee hearing on 9/18, more likely is 9/25. Would still need full BOS the following week and signature by Mayor over next 2 weeks. Either way, that would push into mid-October for being signed so we can accept the T&Cs.
5. SFDPH needs federal/state award info.
  - a. For CITED 1b and IGT Is there any federal documentation other than the CDFA #, according to CFR200 (listed below)
  - b. Is there any sub recipient pass-through information? (Graphic below)
  - c. Additionally, our Controllers office would like to know what portion of CITED 1b is from DHCS and what

portion is from the Fed? Is it 50-50 for everything? For the money we've already received for CITED 1b, is it 50-50? For when we submit our progress reports and receive funding for the IGT will it always be 50-50?

**We need this in writing**

- d. Also, are there any spending restrictions between the Fed and DHCS portions for either 1b or IGT? **We need this in writing**

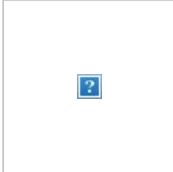
e.



6. SFDPH needs approval for Progress Report 1 issue of invoices from 2021.
- a. This is for PATH CITED 1B progress report #1. I attached our communication with PCG on this item. They did approve the progress report (and the expense outside of the grant period), but our Controllers office needs you (DHCS) to specifically approve that the expenses we included on that progress report from 2021 are allowable **We need this in writing**. The IT Project Manager/EHR Consultant (Marianna Ramirez), was working on CalAIM during the time of the 2021 invoices. Additionally, our Controllers office would like to confirm that the IT Consultant was an allowable use of PATH CITED funds. **We need this in writing**
7. SFDPH needs clarification of grant terms for Cited 1B and IGT. Is it acceptable for the City and County of San Francisco to have grant terms for PATH CITED 1b and PATH CITED IGT in our accounting system as described

below? **Need in writing**

- a. For DPH accounting purposes we need PATH CITED 1b's grant terms in our system to run 10/1/21 (if you approve the 2021 expenses for the IT Project Manager) – through 6/30/25 so we can allocate the retro salary back to 2021 and for the future costs for the FF&E for the BHS building that we have not yet purchased.
- b. For PATH CITED IGT we need the terms to run from 10/1/22 (the start of the retro reimbursement) to 10/31/25 (if that is CITED IGT end date).



**Alex Boyder, MBA**  
Administrative Analyst  
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San Francisco Department of Public Health  
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# San Francisco Department of Public Health

Grant Colfax, MD  
Director of Health

City and County of San Francisco  
London N. Breed  
Mayor

## Memorandum

**To:** Honorable Members of the Board of Supervisors

**From:** San Francisco Department of Public Health

**Date:** Thursday, October 3, 2024

**RE:** Retroactive Statement for Files 240935 and 240936

---

Files 240935 and 240936 are retroactive because DPH received notice of the grants after the predetermined project start dates. We respectfully request retroactive authorization for these two items.

**File 240935 - Accept and Expend Grant - Retroactive - California Department of Health Care Services - Providing Access and Transforming Health (PATH) Capacity and Infrastructure, Transition, Expansion and Development (CITED) 1B - \$3,862,929.40** - DPH received initial notice of this award on March 24, 2023, for a project start date of October 1, 2021. The project start date was pre-determined by the grantor. DPH originally applied for this grant in September 2022. The PATH CITED grant application allows agencies to apply for retroactive salary reimbursement, which is why the project start date is retroactive to one year before the application. Following the notice of the award, there were prolonged discussions with the funder (DHCS), the Controller's Office, and DPH to resolve fiscal issues with the grant. These discussions took place between August 2023 and September 2024. Once these issues were resolved, DPH brought this item to the BOS after going through City fiscal approvals processes, including the Controller's Office review and approval.

**File 240936 - Accept and Expand Grant - Retroactive - California Department of Health Care Services - Capacity and Infrastructure, Transition, Expansion and Development Program - Intergovernmental Transfer - \$1,612,839.48** - DPH received initial notice of this award on October 30, 2023, for a project start date of October 1, 2022. The project start date was pre-determined by the grantor. DPH originally applied for this grant in May 2023. The PATH CITED grant application allows agencies to apply for retroactive salary reimbursement, which is why the project start date is retroactive to several months before the application. Following the notice of the award, there were prolonged discussions with the funder (DHCS), the Controller's Office, City Attorney's Office and DPH to resolve fiscal and legal issues with the grant. These discussions took place between August 2023 and September 2024. Once these issues were resolved, DPH brought this item to the BOS after going through City fiscal approvals processes, including the Controller's Office review and approval.

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



**City and County of San Francisco**

**Department of Public Health**



**London N. Breed  
Mayor**

**TO: Angela Calvillo, Clerk of the Board of Supervisors**  
**FROM: Dr. Grant Colfax  
Director of Health**  
**DATE: 9/20/2024**  
**SUBJECT: Grant Accept and Expend**  
**GRANT TITLE: PATH CITED 1B - \$3,862,929.40.**

---

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.
- Agreement / Award Letter
- Other (Explain):

**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

**From:** [Trejo, Sara \(MYR\)](#)  
**To:** [BOS Legislation, \(BOS\)](#)  
**Cc:** [Paulino, Tom \(MYR\)](#); [Wong, Greg \(DPH\)](#); [Validzic, Ana \(DPH\)](#); [Chiong, Christina \(DPH\)](#); [Murrell, Drew \(DPH\)](#)  
**Subject:** Mayor -- Resolution -- California Department of Health Care Services - PATH CITED 1B  
**Date:** Tuesday, September 24, 2024 2:53:42 PM  
**Attachments:** [DPH A&E - PATH CITED 1B - 3,862,929.40.pdf](#)  
[1292 Board Cover Memo.docx](#)  
[1292 PATH CITED 1B Grant Resolution v2.doc](#)  
[1292 All Years Budgets.xlsx](#)  
[1292 FINAL SFNH application for Round 1 PATH CITED 2022-09-30.PDF](#)  
[1292 PATH CITED Central CalAIM & IT Retroactive Budget v3.xlsx](#)  
[1292 PATH CITED IB GRIF.docx](#)  
[1292 PATH CITED Round 1B Terms and Conditions Signed.pdf](#)  
[1292 SFHN Award Letter PATH CITED 1B Round 1B 2023-03-24.pdf](#)  
[Fwd CA-PATH CITED Grants Support Ticket 13800 - Questions regarding CITED Round 1B Progress Report Documentation.msg](#)  
[RE ExternalRE SFDHCS Meeting RE PATH CITED IGT.msg](#)  
[FW DPH Urgent 12 New Proposed Legislation from DPH \(PATH CITED 1B - \\$3862929.40\).msg](#)

---

Hello Clerks,

Attached is a Resolution retroactively authorizing the Department of Public Health to accept and expend a grant in the amount of \$3,862,929.40 from the California Department of Health Care Services for participation in a program, entitled "Providing Access and Transforming Health (PATH) Capacity and Infrastructure, Transition, Expansion and Development (CITED) 1B," for the period of October 1, 2021, through June 30, 2025.

Best regards,

**Sara Trejo**

Legislative Aide

Office of the Mayor

City and County of San Francisco