

File No. 100647

Committee Item No. 7

Board Item No. 33

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Sub - Committee: Budget and Finance

Date: June 9, 2010

Board of Supervisors Meeting

Date: 6/15/10

Cmte Board

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| <input type="checkbox"/> | <input type="checkbox"/> | Motion |
| <input checked="" type="checkbox"/> | <input checked="" 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 Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Introduction Form (for hearings) |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | MOU |
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| <input type="checkbox"/> | <input type="checkbox"/> | Grant Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
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| <input type="checkbox"/> | <input type="checkbox"/> | Award Letter |
| <input type="checkbox"/> | <input type="checkbox"/> | Application |
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OTHER

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| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Form 126 |
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Completed by: Andrea S. Ausberry

Date Friday, June 4, 2010

Completed by: 

Date 6.10.10

An asterisked item represents the cover sheet to a document that exceeds 25 pages. The complete document is in the file.

1 [Contract Extension - Department of Public Health and Regents of the University of California
2 San Francisco for the Positive Health Program for Chronic Care HIV/AIDS Multi-Disciplinary
3 Program]

4 **Resolution authorizing the San Francisco Department of Public Health to extend the**
5 **contract between the City and County of San Francisco and Regents of the University**
6 **of California San Francisco for the Positive Health Program for Chronic Care HIV/AIDS**
7 **Multi-disciplinary Program to provide Center of Excellence delivery of service which**
8 **includes HIV/AIDS case management, primary medical care, mental health services,**
9 **substance use counseling, and coordination and planning services.**

10
11 WHEREAS, The Department of Public Health desires to extend the term and continue
12 funding to support the Center of Excellence delivery of service which includes HIV/AIDS case
13 management, primary medical care, mental health services; substance use counseling, and
14 coordination and planning services; and

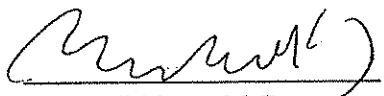
15 WHEREAS, projections estimate that funding allocated to this contract amendment will
16 require anticipated expenditures of more than \$10 million; now, therefore, be it

17 RESOLVED, That the Board of Supervisors hereby authorizes the Director of Public
18 Health and the Purchaser, on behalf of the City and County of San Francisco, to execute an
19 amendment to the contract with Regents of the University of California San Francisco for the
20 Positive Health Program for Chronic Care HIV/AIDS Multi-disciplinary Program (CCHAMP) for
21 the period of November 1, 2005 through February 29, 2012, to provide Center of Excellence
22 delivery of service which includes HIV/AIDS case management, primary medical care, mental
23 health services, substance use counseling, and coordination and planning services; and, be it

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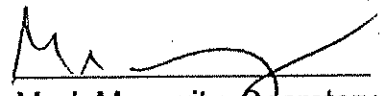
FURTHER RESOLVED, That the Board of Supervisors hereby authorizes the Director of Public Health and the Office of Contract Administration/Purchaser to make amendments to this contract, as needed.

RECOMMENDED;



Mitchell Katz, M.D.
Director of Health

APPROVED:



Mark Morewitz, Secretary to the
Health Commission

FORM SFEC-126:
NOTIFICATION OF CONTRACT APPROVAL
(S.F. Campaign and Governmental Conduct Code § 1.126)

City Elective Officer Information (Please print clearly.)	
Name of City elective officer(s): Members, Board of Supervisors	City elective office(s) held: Members, Board of Supervisors

Contractor Information (Please print clearly.)	
Name of contractor: Regents of the University of California	
Please list the names of (1) members of the contractor's board of directors; (2) the contractor's chief executive officer, chief financial officer and chief operating officer; (3) any person who has an ownership of 20 percent or more in the contractor; (4) any subcontractor listed in the bid or contract; and (5) any political committee sponsored or controlled by the contractor. Use additional pages as necessary.	
(1) please see attached list of the Regents of the University of California	
(2) Mark G. Yudof, President, UC; J. Michael Bishop, Chancellor, UCSF; Randy Lopez, Interim Vice Chancellor, Finance & Administration, UCSF	
(3) the University of California is a constitutional corporation	
(4) N/A	
(5) not reported	
Contractor address: Contracts & Grants Officer, UCSF Contracts & Grants/OSR 3333 California St. Suite 315 San Francisco, CA 94118	
Date that contract was approved: 7/23/08	Amount of contract: \$12,818,814
Describe the nature of the contract that was approved: (CCHAMP) Positive Health Program for the Chronic Care HIV/AIDS Multi-Disciplinary Program	
Comments:	

This contract was approved by (check applicable):

the City elective officer(s) identified on this form

a board on which the City elective officer(s) serves: San Francisco Board of Supervisors

Print Name of Board

the board of a state agency (Health Authority, Housing Authority Commission, Industrial Development Authority Board, Parking Authority, Redevelopment Agency Commission, Relocation Appeals Board, Treasure Island Development Authority) on which an appointee of the City elective officer(s) identified on this form sits

Print Name of Board

Filer Information (Please print clearly.)	
Name of filer: Clerk of the SF Board of Supervisors	Contact telephone number: (415) 554-5184
Address: City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., SF, CA 94102	E-mail: bos.legislation@sfgov.org

Signature of City Elective Officer (if submitted by City elective officer)

Date Signed

Signature of Board Secretary or Clerk (if submitted by Board Secretary or Clerk)

Date Signed

SAALL FORMS\2008\Form SFEC-126 Contractors doing business with the City 11.08.doc

Davis); Founder of the Sherry Lansing Foundation and former Chair and CEO of Paramount Pictures' Motion Picture Group; B.S., Northwestern University.

Monica Lozano

Appointed September 21, 2001 to term expiring March 1, 2013 (by Davis); Publisher and Chief Executive Officer of La Opinión Newspaper

Hadi Makarechian

Appointed October 24, 2008 to term expiring March 1, 2020 (by Schwarzenegger); B.S. (Civil Engineering), B.A. (Economics), State University of New York; Chairman of Makar Properties Board of Directors and Banning Lewis Ranch Management Company Board of Directors.

George M. Marcus

Appointed December 21, 2000 to term expiring March 1, 2012 (by Davis); B.A. (Economics), San Francisco State University; founder and Chairman of Marcus & Millichap; Chairman, Essex Property Trust.

Norman J. Pattiz

Appointed September 21, 2001 to a term expiring March 1, 2004 (by Davis); appointed September 4, 2003 to a term expiring March 1, 2014 (by Davis); Founder and Chairman of the Board of Westwood One.

Bonnie Reiss

Appointed March 27, 2008 to a term expiring March 1, 2020 (by Schwarzenegger); Operating Advisor to Pegasus Capital Advisors; BBA, University of Miami; J.D., Antioch Law School.

Frederick Ruiz

Appointed July 2, 2004 to a term expiring March 1, 2016 (by Schwarzenegger); Co-founder and Chairman, Ruiz Foods.

Leslie Tang Schilling

Appointed September 13, 2005 to a term expiring March 1, 2013 (by Schwarzenegger); B.A., University of California, Berkeley; M.A., American Graduate School of International Management; Director of Union Square Investments, Inc.

D'Artagnan Scorza

Student Regent, July 2008 - June 30, 2009; B.A., University of California, Los Angeles.

Bruce D. Varner

Appointed August 18, 2006 to a term expiring March 1, 2018 (by Schwarzenegger); Partner in the law firm Varner & Brandt; B.A., University of California, Santa Barbara; J.D., Hastings Law School.

Paul Wachter

Appointed July 2, 2004 (by Schwarzenegger) to a term expiring March 1, 2016; Wharton School, University of Pennsylvania; J.D., Columbia School of Law; Founder, President and CEO, Main Street Advisors.

Charlene Zettel

Appointed May 4, 2009 to term expiring March 1, 2021 (by

California, Los Angeles; M.B.A, University of California, Los Angeles;
Ph.D., University of California, Los Angeles.

Faculty Representatives to The Regents

Mary Croughan

Faculty Representative to The Regents, September 1, 2007 - August
31, 2009, and Chair of the Universitywide Academic Senate of the
University of California.

Harry Powell

Faculty Representative to The Regents, September 1, 2008 - August
31, 2010, and Vice Chair of the Universitywide Academic Senate of the
University of California.

Staff Advisors to The Regents

Bill Johansen

Staff Advisor to The Regents, July 1, 2007 - June 30, 2009.

Ed Abeyta

Staff Advisor-Designate to The Regents, July 1, 2008 - June 30, 2010.

**FORM SFEC-126:
NOTIFICATION OF CONTRACT APPROVAL
(S.F. Campaign and Governmental Conduct Code § 1.126)**

City Elective Officer Information <i>(Please print clearly.)</i>	
Name of City elective officer(s): Members, SF Board of Supervisor	City elective office(s) held: Members, SF Board of Supervisors

Contractor Information <i>(Please print clearly.)</i>	
Name of contractor: Regents of the University of California	
<i>Please list the names of (1) members of the contractor's board of directors; (2) the contractor's chief executive officer, chief financial officer and chief operating officer; (3) any person who has an ownership of 20 percent or more in the contractor; (4) any subcontractor listed in the bid or contract; and (5) any political committee sponsored or controlled by the contractor. Use additional pages as necessary.</i>	
(1) Please see attached list of the Regents of the University of California (2) Mark G. Yudof, President, UC; J. Michael Bishop, Chancellor, UCSF; Randy Lopez, Interim Vice Chancellor, Finance and Administration, UCSF (3) The University of California is a constitutional corporation (4) N/A (5) Not reported	
Contractor address: Contracts and Grants Officer, UCSF Contract & Grants/OSR 3333 California St. Suite 315 San Francisco, CA 94118	
Date that contract was approved:	Amount of contract: \$14,501,626
Describe the nature of the contract that was approved: Integrated substance abuse, mental health and medical services for clients in the Opiate Treatment Program	
Comments:	

This contract was approved by (check applicable):

the City elective officer(s) identified on this form

a board on which the City elective officer(s) serves: SF Board of Supervisors
Print Name of Board

the board of a state agency (Health Authority, Housing Authority Commission, Industrial Development Authority Board, Parking Authority, Redevelopment Agency Commission, Relocation Appeals Board, Treasure Island Development Authority) on which an appointee of the City elective officer(s) identified on this form sits

Print Name of Board

Filer Information <i>(Please print clearly.)</i>	
Name of filer: Clerk of the San Francisco Board of Supervisors	Contact telephone number: (415) 554-5184
Address: 1 Dr. Carlton B. Goodlett Pl. City Hall, Room 244, SF CA 94102	E-mail: Bos.legislation@sfgov.org

Signature of City Elective Officer (if submitted by City elective officer)

Date Signed

Signature of Board Secretary or Clerk (if submitted by Board Secretary or Clerk)

Date Signed



Gavin Newsom
Mayor

Mitchell H. Katz, MD
Director of Health

May 5, 2010

Angela Calvillo, Clerk of the Board
Board of Supervisors
1 Dr. Carlton B. Goodlett Place, Room 244
San Francisco, CA 94102-4689

Dear Ms. Calvillo:

Attached please find an original and four copies of proposed resolution for Board of Supervisors approval, which authorizes the Director of Public Health and the Director of the Office of Contract Administration/Purchaser to extend the current contract between the City and County of San Francisco and the Regents of the University of California San Francisco for the Positive Health Program for Chronic Care HIV/AIDS Multi-disciplinary Program (CCHAMP) to provide a Center of Excellence delivery of service which includes HIV/AIDS case management, primary medical care, mental health services, substance use counseling, and coordination and planning services.

We are submitting this contract for approval under San Francisco Charter Section 9.118, as projections estimate that this contract amendment will require anticipated expenditures of more than \$10 million.

The following is a list of accompanying documents (five sets):

- Resolution Authorizing Amendment to Contract with the Regents of the University of California San Francisco for the Positive Health Program for Chronic Care HIV/AIDS Multi-disciplinary Program (CCHAMP).
- Sixth Amendment to Agreement with the University of California San Francisco for the Positive Health Program for Chronic Care HIV/AIDS Multi-disciplinary Program (CCHAMP).

Please contact Jacquie Hale, Director of the DPH Office of Contract Management and Compliance, at 554-2609 if further information is needed.

Sincerely,

A handwritten signature in black ink, appearing to read "Mitch Katz".

Mitch Katz
Director of Health

cc: Gregg Sass, Chief Financial Officer, DPH
Barbara A. Garcia, Deputy Director of Health, Director Community Programs
Bill Blum, Director, DPH HIV Services
Anne Okubo, Chief Financial Officer, DPH Community Programs
Jacquie Hale, DPH Office of Contract Management and Compliance

City and County of San Francisco
Office of Contract Administration
Purchasing Division

SIXTH Amendment

This AMENDMENT (this "Amendment") is made as of March 1, 2010, in San Francisco, California, by and between **Regents of the University of California POSITIVE HEALTH PROGRAM FOR CHRONIC CARE HIV/AIDS MULTI-DISCIPLINARY PROGRAM (CCHAMP)** ("Contractor"), and the City and County of San Francisco, a municipal corporation ("City"), acting by and through its Director of the Office of Contract Administration.

RECITALS

WHEREAS, City and Contractor have entered into the Agreement (as defined below); and
WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to modify term and compensation.

WHEREAS, approval for this amendment was obtained from a Civil Service Commission Notice of Action for Contract Number 2016-98/99 on March 1, 1999 and Contract Number 2005-07/08 on July 7, 2008;

NOW THEREFORE, Contractor and the City agree as follows:

1. **Definitions.** The following definitions shall apply to this Amendment:

a. **Agreement.** The term "Agreement" shall mean the Agreement dated November 1, 2005 (BPHC06500029 and DPHC06500232) between Contractor and City, as amended by the FIRST Amendment dated February 28, 2007 (BPHC06500029/DPHC07000860), as amended by the SECOND Amendment dated November 28, 2007 (BPHC06500029/DPHC08000629), as amended by the THIRD Amendment dated February 5, 2008 (BPHC06500029/DPHC08000629), as amended by the FOURTH Amendment dated March 1, 2008 (BPHC06500029/DPHC08001215) and by the FIFTH Amendment dated July 1, 2009, (BPHC06500029/DPHC10000120)

b. **Other Terms.** Terms used and not defined in this Amendment shall have the meanings assigned to such terms in the Agreement.

2. **Modifications to the Agreement.** The Agreement is hereby modified as follows:

a. 2. **Term of the Agreement**

Section 2. Term of the Agreement Section of the Agreement currently reads as follows:

2. **Term of the Agreement**

Subject to Section 1, the term of this Agreement shall be from November 1, 2005 to February 28, 2010.

The City shall have the sole discretion to exercise the following options to extend the Agreement term:

Option 1:	03/01/2006-02/28/2007	Exercised
Option 2:	03/01/2007-02/28/2008	Exercised
Option 3:	03/01/2008-02/28/2009	Exercised
Option 4:	03/01/2009-02/28/2010	Exercised
Option 5:	03/01/2010-02/28/2011	

- Option 6: 03/01/2011-02/28/2012
- Option 7: 03/01/2012-02/28/2013
- Option 8: 03/01/2013-02/28/2014
- Option 9: 03/01/2014-02/28/2015

Such section is hereby amended in its entirety to read as follows:

2. Term of the Agreement

Subject to Section 1, the term of this Agreement shall be from November 1, 2005 to February 29, 2012.

The City shall have the sole discretion to exercise the following options to extend the Agreement term:

- | | | |
|-----------|-----------------------|-----------|
| Option 1: | 03/01/2006-02/28/2007 | Exercised |
| Option 2: | 03/01/2007-02/28/2008 | Exercised |
| Option 3: | 03/01/2008-02/28/2009 | Exercised |
| Option 4: | 03/01/2009-02/28/2010 | Exercised |
| Option 5: | 03/01/2010-02/28/2011 | Exercised |
| Option 6: | 03/01/2011-02/28/2012 | Exercised |
| Option 7: | 03/01/2012-02/28/2013 | |
| Option 8: | 03/01/2013-02/28/2014 | |
| Option 9: | 03/01/2014-02/28/2015 | |

b. Section 5 Compensation, of the Agreement currently reads as follows:

5. Compensation

Compensation shall be made in monthly payments on or before the 30th day of each month for work, as set forth in Section 4 of this Agreement, that the Director of the Department of Public Health, concludes has been performed as of the last day of the immediately preceding month. In no event shall the amount of this Agreement exceed **Eight Million Four Hundred Sixty-Eight Thousand Two Hundred Twenty-Eight DOLLARS (\$8,468,228)**. The breakdown of costs associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein.

Payments shall become due to Contractor pursuant to the payment provisions set forth in the statement of work when reports are received, services are rendered, or both, as required under and in accordance with this Agreement. City may withhold payment to Contractor in any instance in which Contractor has failed or refused to satisfy any material obligation provided for under this Agreement. Prior to the withholding of payment to Contractor for those services which City believes Contractor has failed or refused to satisfy pertaining to any material obligation under this Agreement, the parties agree that they will meet and discuss in good faith the alleged failure or refusal as soon as practicable after it becomes known to the City.

In no event shall City be liable for interest or late charges for any late payments.

Such section is hereby amended in its entirety to read as follows:

5. Compensation

Compensation shall be made in monthly payments on or before the 30th day of each month for work, as set forth in Section 4 of this Agreement, that the Director of the Department of Public Health, concludes has been performed as of the last day of the immediately preceding month. In no event shall the amount of this Agreement exceed **Twelve Million Eight Hundred Eighteen Thousand and Eight Hundred Fourteen DOLLARS (\$12,818,814)**. The breakdown of costs associated with this Agreement

appears in **Appendix B**, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein.

Payments shall become due to Contractor pursuant to the payment provisions set forth in the statement of work when reports are received, services are rendered, or both, as required under and in accordance with this Agreement. City may withhold payment to Contractor in any instance in which Contractor has failed or refused to satisfy any material obligation provided for under this Agreement. Prior to the withholding of payment to Contractor for those services which City believes Contractor has failed or refused to satisfy pertaining to any material obligation under this Agreement, the parties agree that they will meet and discuss in good faith the alleged failure or refusal as soon as practicable after it becomes known to the City.

In no event shall City be liable for interest or late charges for any late payments.

The following Appendices are being added to or substituted for the Exhibits and/or Appendices, as indicated, in the "Original Agreement" and any subsequent "Amendments", and are titled to support the period of 03/01/10-02/29/12.

- a. Add Appendix A 03/01/10-02/29/12, Pages 1-4
- b. Add Appendix A-1 03/01/10-02/29/12, Pages 1-9
- c. Add Appendix B 03/01/10-02/29/12, Pages 1-5.
- d. Add Appendix B-1 03/01/10-02/28/11, Pages 1-3
- e. Add Appendix B-1a 03/01/10-02/28/11, Pages 1-3.
- f. Add Appendix B-1b 03/01/10-02/28/11, Pages 1-2.
- g. Add Appendix B-1c 03/01/10-02/28/11, Pages 1-2.
- h. Add Appendix B-1d 03/01/11-02/29/12, Pages 1-3.
- i. Add Appendix B-1e 03/01/11-02/29/12, Pages 1-3.
- j. Add Appendix B-1f 03/01/11-02/29/12, Pages 1-2.
- k. Add Appendix B-1g 03/01/11-02/29/12, Pages 1-2.
- l. Add Appendix F -1 03/01/10-02/28/11, Pages 1-2.
- m. Add Appendix F-1a 03/01/10-02/28/11, Pages 1-2.
- n. Add Appendix F-1b 03/01/10-02/28/11, Pages 1-2.
- o. Add Appendix F-1c 03/01/10-02/28/11, Pages 1-2.
- p. Add Appendix F-1d 03/01/11-02/29/12, Pages 1-2.
- q. Add Appendix F-1e 03/01/11-02/29/12, Pages 1-2.
- r. Add Appendix F-1f 03/01/11-02/29/12, Pages 1-2.
- s. Add Appendix F-1g 03/01/11-02/29/12, Pages 1-2.

3. **Effective Date.** Each of the modifications set forth in Section 2 shall be effective on and after the date of this Amendment.

4. **Legal Effect.** Except as expressly modified by this Amendment, all of the terms and conditions of the Agreement shall remain unchanged and in full force and effect.

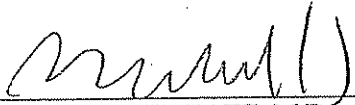
IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the day first mentioned above.

CITY

CONTRACTOR

The Regents of the University of
California
Fax: (415) 476-8158
UCSF Office of Sponsored Research
Contracts and Grants Division
3333 California Street, Suite 315
San Francisco, CA 94143-0962
(if overnight, use zip code 94118)

Recommended by:



MITCHELL H. KATZ, M.D. / 5/10/10
Date
Director of Health

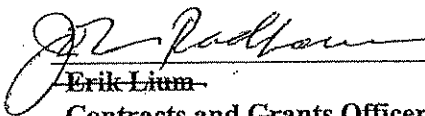
By signing this Agreement, I certify that I
comply with the requirements of the Minimum
Compensation Ordinance, which entitle
Covered Employees to certain minimum hourly
wages and compensated and uncompensated
time off.

Approved as to Form:

Dennis J. Herrera
City Attorney

I have read and understood paragraph 35, the
City's statement urging companies doing
business in Northern Ireland to move towards
resolving employment inequities, encouraging
compliance with the MacBride Principles, and
urging San Francisco companies to do business
with corporations that abide by the MacBride
Principles.

By: Aleeta Van Runkle / _____
Deputy City Attorney / Date



~~Erik Liim~~ / 5-7-10
Date
Contracts and Grants Officer
3333 California St., Suite 315
San Francisco, CA 94143-0962
JOHN RADKOWSKI
CONTRACTS & GRANTS OFFICER

Approved:

Naomi Kelly / _____
Director Office of Contract / Date
Administration and Purchaser

City vendor number: 18373

Appendices

- A: Services to be provided by Contractor
- B: Calculation of Charges
- C: Insurance Waiver
- D: Additional Terms
- E: HIPAA Business Associate Agreement (omitted)
- F: Invoice

Appendix A
Services to be provided by Contractor

1. Terms

A. Contract Administrator:

In performing the Services hereunder, Contractor shall report to **Bill Blum**, Contract Administrator for the City, or his / her designee, and City will contact **C. Bradley Hare, M.D.**, UC Principal Investigator or other appropriate UCSF staff person, Contractor's principal investigator for this Agreement, or his / her designee.

B. Reports:

Contractor shall submit written reports as reasonably requested by the City. The format for the content of such reports shall be determined by the City in advance. The timely submission of all reports is a necessary and material term and condition of this Agreement. All reports, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

C. Evaluation:

Contractor shall participate as requested with the City, State, and/or Federal government in evaluative studies designed to show the effectiveness of Contractor's Services. Contractor agrees to make reasonable efforts to meet the requirements of and participate in the evaluation program and management information systems of the City. The City agrees that any final written reports generated through the evaluation program shall be made available to Contractor within thirty (30) working days. Contractor may submit a written response within thirty working days of receipt of any evaluation report and such response will become part of the official report.

D. Possession of Licenses/Permits:

Contractor represents the possession of all licenses and/or permits required by the laws and regulations of the United States, the State of California, and the City to provide the Services. Failure to maintain these licenses and permits shall constitute a material breach of this Agreement.

E. Adequate Resources:

Contractor agrees that it has secured or shall secure at its own expense all persons, employees and equipment required to perform the Services required under this Agreement, and that all such Services shall be performed by Contractor, or under Contractor's supervision, by persons authorized by law to perform such Services.

F. Admission Policy:

Admission policies for the Services shall be in writing and available to the public. Except to the extent that the Services are to be rendered to a specific population as described in the programs listed in Section 2 of Appendix A, such policies must include a provision that clients are accepted for care without discrimination on the basis of race, color, creed, religion, sex, age, national origin, ancestry, sexual orientation, gender identification, disability, or AIDS/HIV status.

G. San Francisco Residents Only:

It is the intent of the parties that only clients who are San Francisco residents shall be treated under the terms of this Agreement, and City shall pay for all services rendered by Contractor in accordance with this Agreement. The parties agree that to the extent that residency has been verified by the City, that verification may be relied upon by Contractor. Exceptions must have the written approval of the Contract Administrator.

H. Grievance Procedure:

Contractor agrees to establish and maintain a written Client Grievance Procedure which shall include the following elements as well as others that may be appropriate to the Services: (1) the name or title of the person or persons authorized to make a determination regarding the grievance; (2) the opportunity for the aggrieved party to discuss the grievance with those who will be making the determination; and (3) the right of a client dissatisfied with the decision to ask for a review and recommendation from the community advisory board or planning council that has purview over the aggrieved service. Contractor shall provide a copy of this

procedure, and any amendments thereto, to each client and to the Director of Public Health or his/her designated agent (hereinafter referred to as "DIRECTOR"). Those clients who do not receive direct Services will be provided a copy of this procedure upon request.

I. Infection Control, Health and Safety:

(1) Contractor must have a Bloodborne Pathogen (BBP) Exposure Control plan as defined in the California Code of Regulations, Title 8, Section 5193, Bloodborne Pathogens (<http://www.dir.ca.gov/title8/5193.html>), and demonstrate compliance with all requirements including, but not limited to, exposure determination, training, immunization, use of personal protective equipment and safe needle devices, maintenance of a sharps injury log, post-exposure medical evaluations, and record keeping.

(2) Contractor must demonstrate personnel policies/procedures for protection of staff and clients from other communicable diseases prevalent in the population served. Such policies and procedures shall include, but not be limited to, work practices, personal protective equipment, staff/client Tuberculosis (TB) surveillance, training, etc.

(3) Contractor must demonstrate personnel policies/procedures for Tuberculosis (TB) exposure control consistent with the Centers for Disease Control and Prevention (CDC) recommendations for health care facilities and based on the Francis J. Curry National Tuberculosis Center: Template for Clinic Settings, as appropriate.

(4) Contractor is responsible for correcting known site hazards, the proper use of equipment located at the site, the health and safety of their employees, and for all other persons who work at or visit the job site as per local and/or state regulations.

(5) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as BBP and TB and demonstrate appropriate policies and procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.

(6) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.

(7) Contractor assumes responsibility for procuring all medical equipment and supplies for use by their staff, including safe needle devices, and provides and documents all appropriate training.

(8) Contractor shall demonstrate compliance with all state and local regulations with regard to handling and disposing of medical waste.

J. Acknowledgment of Funding:

Contractor agrees to acknowledge the San Francisco Department of Public Health in any printed material or public announcement describing the San Francisco Department of Public Health-funded Services. Such documents or announcements shall contain a credit substantially as follows: "This program/service/activity/research project was funded through the Department of Public Health, City and County of San Francisco."

K. Research Study Records:

To facilitate the exchange of research study records, should this Appendix A include the use of human study subjects, Contractor will include the City in all study subject consent forms reviewed and approved by Contractor's IRB.

L. Client Fees and Third Party Revenue:

(1) Fees required by federal, state or City laws or regulations to be billed to the client, client's family, or insurance company, shall be determined in accordance with the client's ability to pay and in conformance with all applicable laws. Such fees shall approximate actual cost. No additional fees may be charged to the client or the client's family for the Services. Inability to pay shall not be the basis for denial of any Services provided under this Agreement.

(2) Contractor agrees that revenues or fees received by Contractor related to Services performed and materials developed or distributed with funding under this Agreement shall be used to increase the gross program funding such that a greater number of persons may receive Services. Accordingly, these revenues and fees shall not be deducted by Contractor from its billing to the City.

M. Patients Rights:

All applicable Patients Rights laws and procedures shall be implemented.

N. Under-Utilization Reports:

For any quarter that Contractor maintains less than ninety percent (90%) of the total agreed upon units of service for any mode of service hereunder, Contractor shall immediately notify the Contract Administrator in writing and shall specify the number of underutilized units of service.

O. Quality Assurance:

Contractor agrees to develop and implement a Quality Assurance Plan based on internal standards established by Contractor applicable to the Services as follows:

- (1) Staff evaluations.
- (2) Personnel policies and procedures.
- (3) Quality Improvement.
- (4) Staff education and training.

Other Miscellaneous Optional Provisions:

P. Compliance With Grant Award Notices:

Contractor recognizes that funding for this Agreement is provided to the City through federal, state or private foundation awards. Contractor agrees to comply with the provisions of the City's agreements with said funding sources, which agreements are incorporated by reference as though fully set forth and will be provided to Contractor upon request.

Contractor agrees that funds received by Contractor from a source other than the City to defray any portion of the reimbursable costs allowable under this Agreement shall be reported to the City and deducted by Contractor from its billings to the City to ensure that no portion of the City's reimbursement to Contractor is duplicated.

2. **Description of Services**

Detailed descriptions of services supporting the period 03/01/10-02/29/12 may be found in the following Appendixes:

Appendix A, 03/01/10 – 02/29/12 Pages 1-4

Program Summary
Chronic Care HIV/AIDS Multi-Disciplinary Program
(C-CHAMP) Center for Excellence

Appendix A-1, 03/01/10 – 02/29/12 Pages 1-9

UCSF Positive Health Program (PHP) – C-CHAMP Center of Excellence

Ryan White Part A

03/01/10 – 02/29/12

SUMMARY

Service Providers	UCSF PHP – Chronic Care HIV/AIDS Multi-Disciplinary Program (C-CHAMP) Center of Excellence		
Fiscal Agent	University of California, San Francisco		
Total Contract	\$3,884,452		
Program Name	C-CHAMP Center of Excellence		
Funding Source	Ryan White Part A	Ryan White Part A	
Appendix	A-1	A-1	
Amount	\$1,942,226	\$1,942,226	
Term	03/01/10 – 02/28/11	03/01/11 – 02/29/12	
Target Population	Low income PLWHA that are uninsured or underinsured with no other source of care, and that are in severe need as defined by the HIV Health Services Planning Council. Clients must reside in SF, and have mental health needs, a substance use disorder, or both.		
Number of UDC per Year	600	Number of UOS per Year	
		10-11	11-12
	Description of Services		
Primary Care Encounters	comprehensive multidisciplinary medical assessments, evaluation, diagnosis and treatment including medical history, physical exams, general medical care, individualized care plans, and referral to specialty, ancillary, and tertiary services	5,868	5,868
Case Management Hours	comprehensive psychosocial intake and assessments, development, implementation, monitoring, reassessment, and follow-up of individual client care plans, and consultation with other service providers as needed; provided at AIDS Health Project and Ward 86	6,042	6,042
Mental Health Encounters	Psychiatrists provide ongoing medication monitoring assessment and referral to PHP primary medical providers, PHP social work staff, C-CHAMP partners or other outside Community based agencies	950	950
Mental Health Hours	comprehensive individual mental health assessment and on-going counseling and psychotherapy	240	240
Substance Abuse Counseling Hours	pre-treatment substance abuse counseling services based on a harm reduction model that assists the client in determining whether substance abuse is an issue that s/he is ready to address; referral to treatment, ongoing provision of individual substance and/or group substance abuse counseling and follow-up	783	783
Substance Abuse Counseling Group Hours	Three types groups for methamphetamine users depending upon patient readiness and in concert with harm reduction principles: preparation group; action group; relapse prevention group	135	135
Coordination, Planning, and Evaluation Hours	program planning and ongoing management and coordination of all aspects of the Center's services including quality assurance and program evaluation as well as coordination of communication between and among all collaborative partners providing services through the Center	1,620	1,620
Total Units of Service		15,638	15,638

1. Program Name: Chronic Care HIV/AIDS Multi-disciplinary Program (CCHAMP) Center of Excellence

Program Address: 995 Potrero Ave., Ward 86

City, State, Zip Code: San Francisco, CA 94110

Telephone: 415-206-6585

Facsimile: 415-502-9566

2. Nature of Document : Renewal

3. Goal Statement

Our mission is to provide high quality, multi-disciplinary, culturally proficient health care to individuals living with HIV/AIDS who are living in poverty and for whom mental health disorders, substance abuse, incarceration, or housing status create barriers to care. We strive to reduce harm, improve health status and quality of life for our clients, and integrate multiple health professions into a team-based approach to care.

4. Target Population

CCHAMP will serve a portion of the currently CARE-funded clients at PHP identified as severe need. All clients have a HIV- disabling diagnosis, will meet the low-income criteria of the Planning Council, and will have a mental health problem, a substance abuse disorder, or both. This Center of Excellence (CoE) is not targeting women, including transgender women, as they will be served by CCHAMP's sister organization, the Women's Center of Excellence. Some women, including transgender women, will continue to be seen at Tenderloin Health. Priority for enrollment in the program is reserved for residents of San Francisco that have low incomes and are uninsured; secondary consideration is reserved for residents of San Francisco that have low incomes and are underinsured. Ryan White funds are only used for services that are not reimbursed by any other source of revenue.

5. Modalities/Interventions

The CCHAMP Center of Excellence (the Center), will provide services to 600 unduplicated clients overall. The interventions and the respective number of units of service (UOS), and unduplicated clients (UDC) per agency is detailed in the following tables:

UCSF-Positive Health Program (Lead Agency)

Period	Mode of Service/Intervention Description	UOS	UDC
03/01/10- 02/28/11	Case Management Hours 1.74 FTE x 40 hours per week x 45 weeks x approx 70% effort	2,192	500
03/01/10- 02/28/11	Primary Medical Care Encounters 3.49 FTE x approx 37.37 encounters per wk per FTE x 45 weeks	5,868	600
03/01/10- 02/28/11	Mental Health Hours 0.16 FTE x 40 hours per week x 45 weeks x approx 83.3% effort	240	120
03/01/10- 02/28/11	Substance Use Counseling Hours 0.16 FTE x 40 hours per week x 45 weeks x approx 83.3% effort	240	120
03/01/10- 02/28/11	Coordination, Planning & Evaluation Hours 1.20 FTE x 40 hours per week x 45 weeks x approx 75% effort	1,620	N/A
Total UOS and UDC		10,160	600

UCSF- AIDS Health Project (AHP)

Period	Mode of Service/Intervention Description	UOS	UDC
03/01/10- 02/28/11	<i>Mental Health Encounters (Medical)</i> 0.80 FTE x 26.4 encounters per week per FTE x 45 weeks	950	250
03/01/10- 02/28/11	<i>Medical Case Management</i> 3.0 FTE x 40 hrs/week x 45 weeks x approx 71.3% effort	3,850	140
Total UOS and UDC		4,800	250

UCSF-Substance Treatment Outpatient Program (STOP)

Period	Mode of Service/Intervention Description	UOS	UDC
03/01/10- 02/28/11	<i>Substance Use Counseling Hours (Phd)</i> 0.157 FTE Counselor x 40 hrs/wk x 45 weeks x approx 94.8% effort	268	50
Total UOS and UDC		268	50

San Francisco AIDS Foundation (SFAF) Stonewall Project

Period	Mode of Service/Intervention Description	UOS	UDC
03/01/10- 02/28/11	<i>Substance Use Counseling Hours</i> 0.25 FTE x 37.5 hours per week x 45 weeks x approx 65.2% effort	275	35
03/01/10- 02/28/11	<i>Substance Use Counseling Group Hours</i> Three -1 hour groups per week x 45 weeks	135	30
Total UOS and UDC		410	35

Year One	All Modes of Service - All Programs	UOS	UDC
03/01/10-02/28/11	Grand Total UOS and UDC	15,638	600

YEAR TWO

UCSF-Positive Health Program (Lead Agency)

Period	Mode of Service/Intervention Description	UOS	UDC
03/01/11- 02/29/12	<i>Case Management Hours</i> 1.76 FTE x 40 hours per week x 45 weeks x approx 70% effort	2,192	500
03/01/11- 02/29/12	<i>Primary Medical Care Encounters</i> 3.49 FTE x approx 37.37 encounters per wk per FTE x 45 weeks	5,868	600
03/01/11- 02/29/12	<i>Mental Health Hours</i> 0.16 FTE x 40 hours per week x 45 weeks x approx 83.3% effort	240	120
03/01/11- 02/29/12	<i>Substance Use Counseling Hours</i> 0.16 FTE x 40 hours per week x 45 weeks x approx 83.3% effort	240	120
03/01/11- 02/29/12	<i>Coordination, Planning & Evaluation Hours</i> 1.20 FTE x 40 hours per week x 45 weeks x approx 75% effort	1,620	N/A
Total UOS and UDC		10,160	600

UCSF- AIDS Health Project (AHP)

Period	Mode of Service/Intervention Description	UOS	UDC
03/01/11- 02/29/12	Mental Health Encounters (Medical) 0.80 FTE x 26.4 encounters per week per FTE x 45 weeks	950	250
03/01/11- 02/29/12	Medical Case Management 3.0 FTE x 40 hrs/week x 45 weeks x approx 71.3% effort	3,850	140
Total UOS and UDC		4,800	250

UCSF-Substance Treatment Outpatient Program (STOP)

Period	Mode of Service/Intervention Description	UOS	UDC
03/01/11- 02/29/12	Substance Use Counseling Hours (PhD) 0.157 FTE Counselor x 40 hrs/wk x 45 weeks x approx 94.8% effort	268	50
Total UOS and UDC		268	50

San Francisco AIDS Foundation (SFAF) Stonewall Project

Period	Mode of Service/Intervention Description	UOS	UDC
03/01/11- 02/29/12	Substance Use Counseling Hours 0.25 FTE x 37.5 hours per week x 45 weeks x approx 65.2% effort	275	35
03/01/11- 02/29/12	Substance Use Counseling Group Hours Three -1 hour groups per week x 45 weeks	135	30
Total UOS and UDC		410	35

Year Two	All Modes of Service - All Programs	UOS	UDC
03/01/11- 02/29/12	Grand Total UOS and UDC	15,638	600

METHODOLOGY

The Lead Agency for CCHAMP will be the Regents of the University of California. The UCSF Positive Health Program (PHP) at San Francisco General Hospital (SFGH) will serve as the functional lead coordinated by the CCHAMP Program Coordinator. The CCHAMP Program Coordinator will be responsible for the following:

- Development of contractual agreement with the SFDPH HIV Health Services (HHS)
- Establishing and monitoring subcontracts with all providers
- Establishing and implementing a CCHAMP MOU
- Ensuring prompt and adequate reporting and invoicing to HHS
- Ensuring monthly timely and accurate client data entry into HERO and ARIES
- Ensuring administrative coordination among collaborators
- Ensuring logistics and program coordination, including assurance that off-site staff are utilized and scheduled effectively
- Organizing trainings for all CCHAMP staff
- Ensuring quality improvements for CCHAMP and conducting the annual consumer satisfaction survey
- Identifying and addressing problems and issues affecting the operation of CCHAMP
- Acting as the primary Center of Excellence liaison with HHS

PHP will conduct all invoicing and payment, using standard UCSF procedures. Each agency will submit complete, correct, and timely invoices to PHP, which will maintain the fiscal reserves and cash flow as required and make timely payments to the other agencies. PHP will submit monthly invoices in compliance with Appendix C – Method of Payment/Invoicing.

CCHAMP is committed to identifying people living with HIV/AIDS who are not in care and bringing them into care, and ensuring that they remain engaged in care. Clients will join CCHAMP one of four ways. First, clients will find CCHAMP via self-referral: Ward 86 currently sees 8-12 new clients each week, most of whom have heard of SFGH through word-of-mouth. Second, clients will come to CCHAMP through a referral from a community provider, including an internal referral from the other CCHAMP partners. Third, the Positive Health Access to Service and Treatment (PHAST) team connects with people identified as being HIV positive within SFGH, including those who have been newly diagnosed, and brings them into care at PHP. Fourth, individuals who have tested positive through AHP, or SFGH can be easily linked to care with CCHAMP. For all of these referrals and linkages, clients will be assessed by PHP social workers to determine if they are eligible for CCHAMP using the eligibility criteria of the "severe need" definition, or if they will become a part of the general PHP patient population. If a client does not qualify for CCHAMP under the severe need definition, the client will still be seen at Ward 86. The client will continue to receive uninterrupted service delivery; however, the client will no longer receive vouchers.

CLIENT OUTREACH

Outreach, recruitment, promotion, and advertising for CCHAMP occurs primarily through the staff of the Positive Health Program (PHP), the primary medical care facility at which services are delivered, also known to many as Ward 86. CCHAMP will also rely on staff at the collaborating agencies to recruit and enroll eligible clients into CCHAMP.

ADMISSION INTO CCHAMP

Admission into CCHAMP can occur through any of the partner agencies after being screened for meeting the severe need definition. Clients are identified through existing contacts within the partner agencies and by meeting the severe need criteria. New clients may be admitted through direct contact or referral to any of the partner agencies. Additionally, new clients are identified and enrolled in services at the time of hospitalization at San Francisco General Hospital by the PHAST Team (Positive Health Access to Services & Treatment). All new CCHAMP clients undergo both medical and psychosocial evaluations to determine which services will be of benefit to each client.

Any clients that arrive at STOP, Stonewall, or AHP are screened for primary care. Clients seeking treatment are asked at intake if they have a regular primary care provider, and if so, to provide the date of the last primary care appointment. If a client does not have a plan for accessing medical care, staff assists the client in developing a plan. If the client is unable to follow-through on their own, staff contacts PHAST directly to set up an initial medical evaluation.

SERVICE DELIVERY

Primary Care Services: delivered at San Francisco General Hospital, Ward 86 by qualified PHP HIV Physician Specialists, Nurse Practitioners, Nurses, and a licensed Pharmacist. Initial intake evaluations last 30-60 minutes, and follow-up visits 20 minutes. Patients are seen during all hours of operation, M - F 8:30 am to 5:00 pm. Case conferences are held on a weekly and monthly basis for all CCHAMP clients.

Case Management Services: delivered at both AHP and Ward 86. AHP will provide a model of comprehensive case management to 140 unduplicated clients with the highest needs, with case management services primarily delivered at Ward 86 but also services available on-site in the Mid-Market area. A medical social work model of case management is employed on-site at Ward 86 to provide services to 460 unduplicated CCHAMP clients that are not enrolled at AHP. These services are available during normal operating hours at each of the sites.

Mental Health Services: provided by AHP and PHP on-site at Ward 86. PHP Social Workers provide mental health assessment and referrals at Ward 86. AHP psychiatrists provide psychiatry clinics at Ward 86 with seven half-day sessions per week, including both morning and afternoon clinics based on client needs. These psychiatrists provide ongoing medication monitoring, assessment and referral to PHP primary medical providers, PHP social work staff, CCHAMP partners, or other outside community based agencies as appropriate.

Substance Abuse Services: The Stimulant Treatment Outpatient Program (STOP) provides integrated substance abuse and mental health counseling to clients who use cocaine or methamphetamine. Referrals of PHP clients are accepted from CCHAMP partners or other agencies. Clients may drop in or schedule appointments at Ward 86, Ward 93 (PHP satellite in the methadone clinic), or STOP. STOP counselors assess whether clients have problematic use or addiction to the various drugs they use, conduct differential diagnosis of substance use and psychiatric problems, and provide individual, couples, or group counseling matched to clients' needs. Counseling may include crisis intervention, motivational interviewing, discussion of safer sex and safer drug use, cessation and relapse prevention skills training, cognitive-behavioral interventions for co-occurring psychiatric problems, medication adherence support, and referrals/care coordination. Clients are supported in entering and staying in specialized addiction treatment, such as intensive outpatient, detox, residential, or opiate assisted therapy. STOP counselors coordinate care closely with PHP nurses, social workers, primary care providers, with AHP psychiatrists and case managers.

The Stonewall Project (serving gay men using methamphetamine) provides services on-site at Ward 86 including an intake assessment consisting of the Addiction Severity Index (ASI); a treatment plan developed by the participant with the assistance of his counselor; individual and group counseling sessions; collateral, couples, and/or family sessions as appropriate; case management and service coordination as needed; individual crisis intervention as needed; and basic disclosure and partner services. Group counseling is organized according to the Stages of Behavior Change mode and nature of patient goals. There will be 3 groups: a harm reduction group for patients who have no desire to cease their use of crystal but are interested in ways to minimize the harms resulting from their use (1-Preparation group), and a group for patients who have goals and are ready to meet their goals (2-Action Group), and a group for patients who have stopped doing crystal and want support for maintaining this change (3-Relapse Prevention).

The Stonewall Project's staff is responsible for:

- the client's continuity of care and assurance that a treatment plan is developed at the earliest practical time after admission, not to exceed 30 days
- assuring that required services are provided and documented in the client's chart
- discussing the ramifications of failure to keep scheduled appointments
- performing an assessment of client's achievement of goals and objectives identified in the treatment plan
- assuring that treatment plans are periodically reviewed and updated with the client (at 90 day intervals)
- assuring that treatment plans are reviewed and signed by the Program Director
- assuring that the client's record contains all required documents (e.g. correspondence, authorization to release information, consent for treatment, etc.)

On a regular basis, a client and his counselor review his treatment plan and assess progress to date; reassess needs and services; and identify additional problem areas and formulate new goals, when appropriate. The review occurs at a minimum every 90 days.

REASSESSMENT and DISCHARGE PLANS

Primary Care: CCHAMP clients are reassessed on an ongoing basis by the primary medical provider during clinical visits and the weekly and monthly case conferences. When clients no longer meet the criteria for participation in the Center, they are transitioned to ongoing services determined by their individual needs and the ability of other Center agencies or non-COE agencies to provide those services. Primary care continues to be provided to former CCHAMP clients at Ward 86 through non-CoE sources for clients who no longer meet Center criteria.

Case Management: CCHAMP clients are reassessed on an ongoing basis by the PHP social workers and AHP's case managers during client visits and the weekly and monthly case conferences. When clients no longer meet the criteria for participation in the Center, they are transitioned to ongoing services determined by individual needs and the ability of other Center agencies or non-COE agencies to provide those services.

Mental Health Services: CCHAMP clients are reassessed on an ongoing basis by the PHP social workers, AHP psychiatrists, PHP providers through client visits and weekly and monthly case conferences. When clients no longer meet the criteria for participation in the Center, they are transitioned to ongoing services determined by their individual needs and the ability of the Center agencies or non-COE agencies to provide those services.

Substance Abuse Services:

STOP: When the client believes he or she is ready for a higher level of substance abuse treatment, e.g. an intensive outpatient program, residential program, detox, or opiate replacement therapy, STOP substance use counselors refer them as appropriate. After admission to the STOP main program, clients are transferred from CARE funded substance use services to DPH CBHS funded drug treatment slots.

The Stonewall Project: Successful completion of a patient's participation in Stonewall service at Ward 86 is defined as when both the participant and his counselor agree that the client has been successful in achieving the goals he sets in terms of his use of speed; or that he needs more treatment than is possible at Ward 86 and is referred to another Stonewall program site, or to other off-site treatment programs. The client and counselor work together to develop a discharge plan that includes aftercare. Aftercare may include 12 Step groups, other self-help groups, participation in the prevention outreach activities of tweaker.org, or other activities that will support the changes the client has made.

Vouchers / Client Incentives

Vouchers are distributed to CCHAMP clients during designated medical visits and all voucher distribution is directly tied to service delivery. Generally, each client will receive a monthly allotment of fast food, grocery and Goodwill vouchers contingent on keeping primary medical care and psychiatric appointments at Ward 86. All client information is updated and confirmed, and medical appointments are also discussed during voucher distribution meetings. Finally, Substance Use and Mental Health issues are reviewed and updated as needed by staff.

Vouchers are stored in Director of Community Programs Office, which is only accessible through two locked doors and away from the clinic. Only the Director and the Center of Excellence Program Coordinator have keys to this room and no clients have access to this office. A small supply of vouchers is maintained by the Director of Social Services in a secure room under lock and key for distribution to clients in the clinic.

Centralized Client Registration Database

UCSF/PHP/CCHAMP collects and submits unduplicated client and service data through the ARIES client registration system. This applies to all "Ryan White funding eligible clients" receiving services paid with any HHS source of funding. UCSF complies with HHS policies and procedures for collecting and maintaining timely, complete, and accurate unduplicated client and service information in the ARIES database. Registration data is entered into the database within 48 hours or two working days after it is collected. All service data for the preceding month, including units of service, are entered into ARIES by the 15th working day of each month. The deliverables in ARIES are consistent with the information that is submitted to the AIDS Office on the "Monthly Statements of Deliverables and Invoice" form. If these HHS standards for quality and timeliness for data entry are not followed, UCSF will risk having payments delayed until ARIES data has been entered or updated.

6. OBJECTIVES AND MEASUREMENTS

All objectives, and descriptions of how objectives will be measured, are contained in a signed document entitled *Agreement between HIV Health Services and UCSF/PHP C-CHAMP on Program Objectives* (Attachment I). UCSF/PHP agrees to make its best efforts to achieve these objectives within the agreed upon timeframe. The PHP Center of Excellence Program Coordinator shares information regarding the accomplishment of all program objectives and results of all evaluation measures via the response to the SFDPH monitoring protocol submitted to the HIV Health Services Program Manager as part of the annual monitoring process.

7. CONTINUOUS QUALITY IMPROVEMENT

UCSF and all of its subcontractors receiving funding through this agreement (CCHAMP CoE) abide by the standards of care for the services specified in this appendix as described in "Making the Connection: Standards of Care for Client-Centered Services." The CCHAMP Center conducts HIV-specific CQI activities to ensure compliance with Public Health Service guidelines related to the treatment of HIV. These programs are kept in compliance with Health Commission, local, state, federal, and funding source policies and requirements, including harm reduction, Health Insurance Portability and Accountability Act (HIPAA), cultural competency, and client satisfaction.

CCHAMP has developed a quality assurance (QA) program to ensure the highest quality of care for all clients. This program meets all applicable contractual standards of care and provides valuable information for improving services. The new CoE-wide QA process will be built on the existing program at PHP and will become part of the HERO database system. The principal primary care site will be guided by uniform protocols based upon contractual requirements and nationally recognized HIV standards of care to ensure quality across the Center. PHP staff also holds quarterly meetings to review and update CCHAMP Center-wide fiscal and administrative policies as needed.

PHP is primarily responsible for implementing the QA program in its role as the lead agency of the CCHAMP Center of Excellence. PHP Continuous Quality Improvement (CQI) activities and indicators meet both SFGHMC and CHN performance improvement standards by adhering to SFGHMC Administrative Policy 17.1: Performance Improvement and Patient Safety Program. This administrative policy provides overall direction to all hospital areas for meeting Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) and other regulatory requirements for both QA and PI activities. Additionally, PHP QA and PI activities are guided by Ryan-White Care Act (RWCA) and other HIV-patient care funding requirements, and are focused on developing and improving comprehensive patient-centered HIV health care across the health care continuum.

PHP uses Health Care Maintenance (HCM) guidelines to both guide HCM screening during the year and provide outcome indicators when performing clinical documentation reviews. The PHP HCM guidelines are based on provider consensus, the American Academy of HIV Medicine core curriculum, and Public Health Service guidelines. Clinical documentation audit results are reviewed by the Clinical Operations Group (COG) to identify areas for improvement. Current QI plans include development of a real-time electronic clinical documentation review based on PHP clinical outcome indicators and ARIES items rather than the traditional labor-intensive hand-method.

The CQI coordinator, under the Medical Director's direction, works with the Clinical Operations Group (COG) to develop, evaluate and incorporate QA/QI activities into the clinical strategic plan. Yearly PHP QI projects are identified by the COG in December of the previous year and are based on annual patient satisfaction surveys, clinical documentation review, trending of unusual occurrences, clinical staff identified-issues, and SFGHMC required QA/QI activities.

The Clinical Operations Group and team activities are monitored for progress by a CQI committee comprised of the CQI coordinator and PHP staff. Clinically identified and SFGHMC required QA/QI activities are reported to the SFGHMC Department of Medicine, and the SFGHMC Nursing Continuous Quality Improvement Coordinating Committee at least every 18 months or more frequently according to the yearly PHP QI calendar. Additionally, Ryan White funding specifies that certain QA/QI activities are reported to the SFDPH HIV Health Services (HHS) on an annual basis.

PHP CQI program's goals and objectives are developed using the US Department of Health and Human Services (HRSA) HIV AIDS Bureau (HAB) Quality Management Technical Assistance Manual as a systematic basis for planning, designing, measuring, assessing and improving performance. The PHP CQI subcommittee, under the direction of the Medical Director, is charged with overseeing and assisting project teams with the development and integration of ongoing clinical monitoring indicators as identified by the COG for insuring quality clinical care. The subcommittee is comprised of the CQI Clinical Nurse Specialist (CNS) and Attending Physician. The subcommittee meets quarterly or more frequently if needed, and minutes are maintained in the PHP CQI binders.

The CQI committee works with:

- 1) the Management Service Officer (MSO) and Human Resources manager to oversee clinical staff credentialing, licensure and clinical training requirements
- 2) the PHP Clinical Contract coordinator to integrate process objectives and impact objectives across clinical funding contracts and into the PHP PI process
- 3) the Healthcare Electronic Record Organizer (HERO) group to assist with integration of clinical PI objectives and indicators into clinical documentation and development of electronic PI mechanisms
- 4) the Medical Director and COG to develop the CQI plan for annual July submission with the PHP Scope of Service statement.

Additionally, the CQI CNS works with the Medical Director to focus and document COG activities by incorporating QA/PI activities into strategic clinical plans, and maintaining and distributing COG meeting agendas and minutes.

Clinical faculty and staff receive information about QA and PI activities from electronic distributed COG, Provider and Ward 86 Staff meeting minutes, with hard-copies maintained in respective meeting binders. Provider support staff also discusses QA and PI activities and issues at their respective staff meetings and case conferences. Hard copies of agendas and attendance sheets from these meetings are maintained in respective meeting binders. These provider support staff meetings include:

- 1) monthly Nursing staff meetings,
- 2) weekly Social Service meetings,
- 3) monthly CCHAMP Center of Excellence interdisciplinary case conference meetings
- 4) weekly Administrative meetings and patient consultation/case conference meetings

Specific ambulatory issues are discussed and reported at the CHNPC Nursing Ambulatory Care Group (NAMB). Clinically-identified and SFGHMC required QA/QI activities are reported to the SFGHMC Department of Medicine (DOM) and the SFGHMC Nursing Continuous Quality Improvement Coordinating Committee (NCQICC) at least every 18-months or more frequently as needed for inclusion in the PI reports to the SFGHMC PIPS program. Additionally, RWCA contract specified QA/QI activities are reported to the San Francisco Department of Public Health HIV Health Services (HHS) on an annual basis.

Agencies ensure quality by coordinating trainings for case manager and peer advocate staff and providing supervision of care plans and documentation. All CCHAMP Center partners will have quality assurance programs in place that are appropriate for their professional domains and CoE-wide QA Program will address the interaction between the Center-wide program and the collaborating agencies' pre-existing programs. Additionally, the Center will use the quality management objectives developed by SFDPH for the purposes of measuring quality of all CoE services.

Substance Treatment Outpatient Program (STOP)

STOP is a program under the Division of Substance Abuse and Addiction Medicine (DSAAM). The DSAAM Continuous Quality Improvement (CQI) plan is approved by the Quality Council of the UCSF Department of Psychiatry at SFGH. Continuous Quality Improvement (CQI) activities are coordinated by the program director.

AIDS Health Project

AHP is part of the SFGH Department of Psychiatry and as such adheres to departmental guidelines regarding mandatory review of all policies and procedures pertaining to service delivery. Review includes program elements as diverse as quality improvement, safety procedures, staff licensure, client rights, staff training, staff TB testing procedures and compliance with departmental guidelines, which include cultural competency. In addition, case managers attend weekly staff meetings, weekly clinical case conferences facilitated by the Medical Director, and weekly individual supervision with the Clinical Social Work Supervisor. Provider agrees to abide by the standards of care for the services specified in this exhibit as described in "Making the Connection: Standards of Care for Client-Centered Services."

Infection control guidelines are utilized and are available in written form at AHP sites. These guidelines were formulated by the Infection Control Committee of SFGH and conform to those followed by SFGH and UCSF.

Staff members receive one monthly in-service on topics related to their work, with trainings developed by AHP's Coordinator of Training. Specific areas of training include: harm reduction, prevention with positives, strategies for medication adherence, cultural competency training (including but not limited to transgender, gay men, Latino, women, African American, substance abusers, forensic populations), motivational interviewing, vocational issues, spiritual issues and other topics that prove to be relevant and important to providing the best service possible to the clients served. In addition, weekly case conferences and afternoon rounds are held to provide an opportunity for discussion of cases with the Clinical Coordinator. At the discretion of their supervisor, staff members are encouraged to attend work-related conferences as possible, subject to program coverage availability.

Program staff members meet bimonthly to discuss program issues and to discuss clinically-related program concerns. All staff members attend a quarterly Quality Improvement Meeting to randomly review patient/client records and discuss clinical approach and delivery of care. Review of charts includes establishment of DSM diagnosis, appropriate client disposition, primary and secondary prevention planning, substance use assessment, review of adherence to HIV medications and a plan to help the client in any areas that intervention is needed.

All Case Management charts are routinely reviewed by the Social Work Supervisor. In addition, a random sample of at least five charts per Case Manager are pulled each quarter by the Social Work Supervisor and the Medical Director and are reviewed for adherence to acceptable charting standards as per the SFGH Department of Psychiatry. Results are submitted to the Program Coordinator, Community Psychiatric and Substance Abuse Services.

The Stonewall Project

Counselors review client cases with their supervisor in regularly scheduled weekly individual supervision meetings, staff meetings, consultation meetings, and psychiatry rounds. Case review occurs at intake, whenever treatment plan revision is appropriate, during regular case rounds, and at discharge. The purpose of the case review is to ensure that the treatment plan is relevant to the stated problem(s); the services delivered are relevant to the treatment plan; and record keeping is adequate and within the agency/program standards.

Regularly scheduled chart reviews are managed by the Program Director and Program Assistant to ensure charting standards are maintained and quality of care is within established standards. Staff is re-trained annually on all program charting and documentation standards and evaluated in writing twice a year on their ability to maintain complete and accurate client charts. The Program Director reviews the substance abuse counselor's notes/ client charts during weekly individual supervision and during regularly scheduled chart audits.

The Program Director coordinates all Quality Assurance meetings and activities. The Program Director conducts an annual review of program charting and documentation standards with the Director of Behavioral Health Services at the San Francisco AIDS Foundation to ensure current standards of care meet or exceed all industry and/or contractual standards of care.

CLIENT PRIVACY / HIPAA

The CCHAMP CoE firmly believes in a client's right to privacy, confidentiality and self-determination. In so doing, CCHAMP has adopted the following policies and procedures to support these goals:

- All staff that handles patient health information is trained (including new hires) and annually updated in the program's privacy/confidentiality policies and procedures and documentation is available to demonstrate that individuals were trained.
- Each disclosure of a patient's/client's health information for purposes other than treatment, payment, or operations is documented, and evidence is available to demonstrate this in program documentation.
- Authorization for disclosure of a patient's/client's health information is obtained prior to release (1) to providers outside the DPH Safety Net or (2) from a substance abuse program. An authorization form that meets the requirements of the Federal Privacy Rule (HIPAA) is signed and in patient's/client's chart/file.
- The UCSF and/or the SFDPH Privacy Policy are integrated into the program's governing policies and procedures regarding patient privacy and confidentiality. Evidence is available to demonstrate that the policy and procedures that abide by the rules outlined in these policies have been adopted, approved and implemented.
- A Privacy Notice that meets the requirements of the Federal Privacy Rule (HIPAA) is written and provided to all patients/clients served in their threshold and other languages. If document is not available in the patient's/client's relevant language, verbal translation is provided. Evidence is available in patient's chart or electronic file that patient was "noticed." *(Examples in English, Cantonese, Vietnamese, Tagalog, Spanish, and Russian will be provided.)*
- A Summary of the above Privacy Notice is posted and visible in registration and common areas of treatment facility, and evidence is available to demonstrate the presence and visibility of posting in said areas. *(Examples in English, Cantonese, Vietnamese, Tagalog, Spanish, and Russian will be provided.)*

**Appendix B
Calculation of Charges**

1. Method of Payment

A. Contractor shall submit monthly invoices in the format attached in Appendix F, by the fifteenth (15th) working day of each month for reimbursement of the actual costs for Services of the immediately preceding month. All costs associated with the Services shall be reported on the invoice each month. All costs incurred under this Agreement shall be due and payable only after Services have been rendered and in no case in advance of such Services.

2. Program Budgets and Final Invoice

A. Program Budgets supporting the period 03/01/10-02/29/12 may be found in the following Appendixes:

Appendix B, 03/01/10 - 02/29/12, Pages 1-2	Calculation of Charges
Appendix B-1, 03/01/10 - 02/29/12, Pages 1-8	Budget Summary by Program
Appendix B-1a, 03/01/10-02/28/11, Pages 1-3	C-CHAMP/Positive Health Program (PHP) Substance Treatment Outpatient Program (STOP)
Appendix B-1b, 03/01/10-02/28/11, Pages 1-2	Stonewall
Appendix B-1c, 03/01/10-02/28/11, Pages 1-2	C-CHAMP/Positive Health Program (PHP)
Appendix B-1d, 03/01/11-02/29/12, Pages 1-3	Aids Health Project (AHP)
Appendix B-1e, 03/01/11-02/29/12, Pages 1-3	C-CHAMP/Substance Treatment Outpatient Program (STOP)
Appendix B-1f, 03/01/11-02/29/12, Pages 1-2	Stonewall
Appendix B-1g 03/01/11-02/29/12, Pages 1-2	

B. Contractor understands that, of the maximum dollar obligation listed in Section 5 of this Agreement, \$466,134 is included as a contingency amount and is neither to be used in Program Budgets attached to this Appendix, or available to Contractor without a modification to this Agreement executed in the same manner as this Agreement or a revision to the Program Budgets of Appendix B, which has been approved by Contract Administrator. Contractor further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable City and Department of Public Health laws, regulations and policies/procedures and certification as to the availability of funds by Controller. Contractor agrees to fully comply with these laws, regulations, and policies/procedures.

The maximum dollar for each funding source shall be as follows:

Original Agreement	CARE I	\$556,059	11/01/05-02/28/06
Original Agreement	CARE II	\$95,690	11/01/05-03/31/06
Original Agreement	CARE I	\$1,942,226	03/01/06-02/28/07
1 st Amendment	CARE I	\$36,575	03/01/06-02/28/07
2 nd Amendment	CARE I	\$1,942,226	03/01/07-02/29/08
3 rd Amendment	CARE I	\$11,000	03/01/07-02/29/08
4 th Amendment	Federal Ryan White Part A	\$1,942,226	03/01/08-02/28/09
4 th Amendment	Federal Ryan White Part A	\$1,942,226	03/01/09-02/28/10
5 th Amendment	Federal Ryan White Part A	\$0 (No-Cost-Mod)	03/01/09-02/28/10
6 th Amendment	Federal Ryan White Part A	\$1,942,226	03/01/10-02/28/11
6 th Amendment	Federal Ryan White Part A	\$1,942,226	03/01/11-02/29/12
	Contingency	\$466,134	
		<u>\$12,818,814</u>	

C. Contractor agrees to comply with its Program Budgets of Appendix B in the provision of Services. Changes to the budget that do not increase or reduce the maximum dollar obligation of the City are subject to the

provisions of the Department of Public Health Policy/Procedure Regarding Contract Budget Changes. Contractor agrees to comply fully with that policy/procedure.

D. A final closing invoice, clearly marked "FINAL," shall be submitted no later than sixty (60) calendar days following the closing date of the Agreement, and shall include only those costs incurred during the referenced period of performance. If costs are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to City.

	A	B	C	D	E
1					Appendix B Page 3 Document Date: 3/15/2010
3	DEPARTMENT OF PUBLIC HEALTH				
4	CONTRACT BUDGET SUMMARY BY PROGRAM				
5	Contractor's Name	University of California, San Francisco		Contract Term	
6		Positive Health Program		3/1/10-2/28/12	
7	(Check One) New <input type="checkbox"/>	Renewal <input checked="" type="checkbox"/>	Modification <input type="checkbox"/>		
8	If modification, Effective Date of Mod.	No. of Mod.			
9	Program Name:	CCHAMP CoE	CCHAMP CoE		
10	Program Narrative Exhibit/Page No.(s)	Ryan White Part A App. A-1, pp1-9	Ryan White Part A App. A-1, pp1-9		Contract Total
11	Program Term	03/01/10-02/28/11	03/01/11-02/29/12		
12	Expenditures:				
13	Salaries & Benefits	\$ 1,735,098	\$ 1,735,098		\$ 3,470,196
14	Operating Expense	\$ 46,759	\$ 46,759		\$ 93,518
15	Capital Expenditure				\$ -
16	Direct Cost	\$ 1,781,857	\$ 1,781,857		\$ 3,563,714
17	Indirect Cost	\$ 160,368	\$ 160,368		\$ 320,736
18	Indirect Percentage (%) of direct cost (Line 16)	9.0%	9.0%		9.0%
	Total Expenditures	\$ 1,942,226	\$ 1,942,226		\$ 3,884,452
20	DPH Revenues by Source:				
21	(include CFDA# for Federal funding)				
22	CARE I - CFDA#93.914	\$ 1,942,226	\$ 1,942,226		\$ 3,884,452
23					\$ -
24					\$ -
25					\$ -
26					\$ -
27					\$ -
28	TOTAL DPH REVENUES	\$ 1,942,226	\$ 1,942,226		\$ 3,884,452
29	Other Revenues:				
30					\$ -
31					\$ -
32					\$ -
33					\$ -
34					\$ -
35	Total Revenues	\$ 1,942,226	\$ 1,942,226		\$ 3,884,452
36	Total Units of Service	15,638	15,638		31,276
37	Cost Per Unit of Service	\$124.20	\$124.20		NA
38	Full Time Equivalent (FTE)	15.75	15.75		31.50
39	Prepared by: Richard Bargetto		Telephone No.: 206-6585		
41	DPH-CO Review Signature: _____				
42	DPH #1				

	A	B	C	D	E	F						
1												
2	Ryan White Part A											
3	SUMMARY OF CLIENT SERVICES BY PROGRAM											
4												
5												
6												
7							Program Name	<u>UCSF-CCHAMP Positive Health Program (PHP)</u>			TERM	03/01/10-02/28/11
8												
9												
10	Mode/Service Function & Unit Type (i.e. hour)	Total Cost	No. of Units	No. of Clients	Cost Per Unit							
11	Case Management, Individual Hours	\$ 177,316	2,192	500	\$80.89							
12	Primary Medical Care Encounters	\$ 1,045,003	5,868	600	\$178.09							
13	Mental Health Hours	\$ 18,576	240	120	\$77.40							
14	Substance Use Individual Cnsl. Hours	\$ 19,782	240	120	\$82.43							
15	CoE Coordination, Planning & Evaluation	\$ 170,813	1,620	N/A	\$105.44							
16	Totals	\$ 1,431,490	10,160	NA	\$140.89							
17												
18	Program Name	<u>UCSF-CCHAMP AIDS Health Project (AHP)</u>			TERM	03/01/10-02/28/11						
19												
20												
21	Mode/Service Function & Unit Type (i.e. hour)	Total Cost	No. of Units	No. of Clients	Cost Per Unit							
22	Mental Health Encounters (Psychiatrist)	\$ 184,607	950	250	\$194.32							
23	Case Management Hours	\$ 254,798	3,850	140	\$66.18							
24	Totals	\$ 439,405	4,800	NA	\$91.54							
25												
26	Program Name	<u>UCSF-CCHAMP Substance Treatment Outpatient Program (STOP)</u>			TERM	03/01/10-02/28/11						
27												
28												
29	Mode/Service Function & Unit Type (i.e. hour)	Total Cost	No. of Units	No. of Clients	Cost Per Unit							
30	Substance Use Counseling Hours	\$ 33,553	265	50	\$126.62							
31												
32	Totals	\$ 33,553	265	NA	\$126.62							
33												
34	Program Name	<u>CCHAMP Stonewall (SFAF)</u>			TERM	03/01/10-02/28/11						
35												
36												
37	Mode/Service Function & Unit Type (i.e. hour)	Total Cost	No. of Units	No. of Clients	Cost Per Unit							
38	Substance Use Counseling Hours	\$ 24,458	275	35	\$88.94							
39	Substance Use Counseling Group Hours	\$ 13,320	135	30	\$98.67							
40												
41	Totals	\$ 37,778	410	NA	\$92.14							
42												
43												
44												

	A	B	C	D	E	F					
1						Appendix B Page 5					
2	Ryan White Part A					Document Date: 3/5/2010					
3	SUMMARY OF CLIENT SERVICES BY PROGRAM										
4											
5											
6											
7							Program Name	<u>UCSF-CCHAMP Positive Health Program (PHP)</u>	TERM	<u>03/01/11-02/29/12</u>	
8											
9		Total	No. of	No. of	Cost Per						
10	Mode/Service Function & Unit Type (i.e. hour)	Cost	Units	Clients	Unit						
11	Case Management, Individual Hour	\$ 177,316	2,192	500	\$80.89						
12	Primary Medical Care Encounter	\$ 1,045,003	5,868	600	\$178.09						
13	Mental Health Hours	\$ 18,576	240	120	\$77.40						
14	Substance Use Individual Cnsl. Hours	\$ 19,782	240	120	\$82.43						
15	CoE Coordination, Planning & Evaluation	\$ 170,813	1,620	N/A	\$105.44						
16	Totals	\$ 1,431,490	10,160	N/A	\$140.89						
		Total UDC = 600									
17											
18	Program Name	<u>UCSF-CCHAMP AIDS Health Project (AHP)</u>	TERM	<u>03/01/11-02/29/12</u>							
19											
20		Total	No. of	No. of	Cost Per						
21	Mode/Service Function & Unit Type (i.e. hour)	Cost	Units	Clients	Unit						
22	Mental Health Encounters (Psychiatrist)	\$ 184,607	950	250	\$194.32						
23	Case Management Hours	\$ 254,798	3,850	140	\$66.18						
24	Totals	\$ 439,405	4,800	N/A	\$91.54						
		Total UDC = 250									
25											
26	Program Name	<u>UCSF-CCHAMP Substance Treatment Outpatient Program (STOP)</u>	TERM	<u>03/01/11-02/29/12</u>							
27											
28		Total	No. of	No. of	Cost Per						
29	Mode/Service Function & Unit Type (i.e. hour)	Cost	Units	Clients	Unit						
30	Substance Use Counseling Hours	\$ 33,553	265	50	\$126.62						
31											
32	Totals	\$ 33,553	265	N/A	\$126.62						
		Total UDC = 50									
33											
34	Program Name	<u>CCHAMP Stonewall (SFAF)</u>	TERM	<u>03/01/11-02/29/12</u>							
35											
36		Total	No. of	No. of	Cost Per						
37	Mode/Service Function & Unit Type (i.e. hour)	Cost	Units	Clients	Unit						
38	Substance Use Counseling Hours	\$ 24,458	275	35	\$88.94						
39	Substance Use Counseling Group Hours	\$ 13,320	135	30	\$98.67						
40											
41	Totals	\$ 37,778	410	N/A	\$92.14						
		Total UDC = 35									
42											
43											
44											

		A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	
1	Contractor Name:	UCSF Positive Health Program																Appendix B-1 Page 1
2	Appendix Term:	03/01/10-02/28/11																Document Date: 3/5/2010
3	Fund Source:	Ryan White Part A																
4																		
5																		
6																		
7																		
8	UCSF Positive Health Program	SERVICE MODES																
9	Personnel Expenses	Case Management Hours		Primary Care Medical Encounters		Mental Health Hours		Substance Use Counseling Hours		Coordination, Planning & Evaluation Hours		Contract Totals						
10	Position Titles	FTE	Salaries	% Total	Salaries	% Total	Salaries	% Total	Salaries	% Total	Salaries	% Total	Salaries	% Total	Salaries	% Total	Salaries	% Total
11	Physicians	2.12	\$ 356,754	100%	\$ 356,754	100%												\$ 356,754
12	Nurse Practitioners	0.97	\$ 125,000	100%	\$ 125,000	100%												\$ 125,000
13	Registered Nurses	0.64	\$ 90,000	100%	\$ 90,000	100%												\$ 90,000
14	Clinical Pharmacist (PharmD)	0.71	\$ 100,000	100%	\$ 100,000	100%												\$ 100,000
15	Medical Assistant	1.95	\$ 84,800	100%	\$ 84,800	100%												\$ 84,800
16	Licensed Social Worker	0.71	\$ 52,079	81%			\$ 14,300	14%	\$ 12,080	19%								\$ 64,159
17	Case Manager (MSW)	1.47	\$ 84,000	83%			\$ 14,300	14%	\$ 3,149	3%								\$ 101,449
18	Front Desk Clerk	0.75			\$ 27,909	100%												\$ 27,909
19	Primary Investigator (MD)	0.01												\$ 2,503	100%			\$ 2,503
20	Nurse Practitioner Supervisor	0.07			\$ 9,846	100%								\$ 41,800	100%			\$ 9,846
21	CoE Coordinator (Analyst 4)	0.60												\$ 8,645	100%			\$ 8,645
22	Administrative Assistant 3	0.19												\$ 78,548	100%			\$ 78,548
23	Information Tech. - Programmer	0.89												\$ 131,496	12%			\$ 131,496
24	Total FTE & Total Salaries	11.10	\$ 136,079	12%	\$ 794,309	73%	\$ 14,300	1%	\$ 15,229	1%	\$ 17,042	1%	\$ 18,149	1%	\$ 156,708	12%	\$ 156,708	\$ 1,091,413
25	Fringe Benefits	19.2%	\$ 26,092	12%	\$ 152,300	73%	\$ 2,742	1%	\$ 2,920	1%	\$ 17,042	1%	\$ 18,149	1%	\$ 25,212	12%	\$ 25,212	\$ 209,266
26	Total Personnel Expenses		\$ 162,171	12%	\$ 946,609	73%	\$ 17,042	1%	\$ 18,149	1%	\$ 17,042	1%	\$ 18,149	1%	\$ 156,708	12%	\$ 156,708	\$ 1,300,679
28	Operating Expenses		Expenditure	% Total	Expenditure	% Total	Expenditure	% Total	Expenditure	% Total	Expenditure	% Total	Expenditure	% Total	Expenditure	% Total	Expenditure	% Total
29	General Operating		\$ 505	4%	\$ 12,109	96%												\$ 12,614
30	Total Operating Expenses		\$ 505	4%	\$ 12,109	96%												\$ 12,614
33	Total Direct Expenses		\$ 162,676	12%	\$ 958,718	73%	\$ 17,042	1%	\$ 18,149	1%	\$ 17,042	1%	\$ 18,149	1%	\$ 156,708	12%	\$ 156,708	\$ 1,313,293
34	Indirect Expenses		\$ 14,641	12%	\$ 86,285	73%	\$ 1,534	1%	\$ 1,633	1%	\$ 1,534	1%	\$ 1,633	1%	\$ 14,105	12%	\$ 14,105	\$ 118,198
35	TOTAL EXPENSES		\$ 177,316	12%	\$ 1,045,003	73%	\$ 18,576	1%	\$ 19,782	1%	\$ 18,576	1%	\$ 19,782	1%	\$ 170,813	12%	\$ 170,813	\$ 1,431,490
36	Number of Units of Service		2,192		5,868		240		240		240		240		1,620			10,160
37	Cost Per Unit of Service		\$80.89		\$178.09		\$77.40		\$82.43		\$77.40		\$82.43		\$105.44			\$140.89

Budget Justification

Salaries and Benefits

Physician

Responsible for managing HIV and primary health care needs of clients. Performs assessment of stage of HIV disease, prescribes medications (in conjunction with the treatment adherence program); diagnoses and treats opportunistic infections and malignancies. Provides referrals to other medical and psychosocial providers as necessary. Responsible for general health care management of clients, i.e., hypertension, diabetes, cardiac disease, liver disease and hepatitis, etc. Position requires an MD degree with specialized training or experience in HIV-related health issues and demonstration of professional competency as an HIV specialist.

Annual Salary \$168,000 x 2.123535714 FTE = \$ 356,754

Nurse Practitioner Team Leader and Providers

Similar primary care responsibilities as the team physicians above, under the supervision of the Medical Director (Principal Investigator). Additionally, NP Team and Leaders are available to clients on a medical drop-in basis. Position requires an NP degree with specialized training or experience in HIV-related health issues and demonstration of professional competency as an HIV specialist practitioner.

Annual Salary \$128,940 x 0.9694435 FTE = \$ 125,000

Registered Nurse

Responsible for coordinating plans of care for clients; facilitating medical referrals, coordinating medical follow-up appointments; administering injections and medications; routine patient follow-up for blood pressure and blood sugar checks; assists with patient education on HIV, HIV medications, and other general care needs.

Annual Salary \$141,000 x 0.638297872 FTE = \$ 90,000

Clinical Pharmacist

Responsible for medication adherence assessments, evaluations of drug interactions, and assistance with medication adverse event monitoring. Assesses appropriateness of medication dosing in the setting of kidney or liver impairment. Supervises Pharmacy Technicians in medication refills and Medi-Set programs. Requires a doctorate of pharmacy degree with demonstrated professional competence in HIV-related pharmacy care.

Annual Salary \$140,000 x 0.714285714 FTE = \$ 100,000

Medical Assistant

Responsible for assisting with client flow during medical encounters, including coverage of vital signs, phlebotomy, and specimen transport as needed. Requires a high school diploma or GED with additional training in medical sciences and awareness of the issues faced by the target population.

Annual Salary \$43,500 x 1.949425287 FTE = \$ 84,800

Licensed Clinical Social Worker

Responsible for planning, coordination, and delivery of services to clients; includes psychosocial needs assessments and linking clients with in appropriate services; assists with enrollment of clients into Medi-Cal, ADAP, and other assistance programs. Requires certification as a licensed social worker and awareness of the issues faced by the target population.

Annual Salary \$90,346 x .7100147654 FTE = \$ 64,159

Social Worker (MSW)

Responsible for planning, coordination, and delivery of services to clients; responsible for integration of client services and ensures appropriate access for clients as well as appropriate utilization of resources at the client level. Requires a master's degree in social work and awareness of the issues faced by the target population.

Annual Salary \$69,000 x 1.470275362 FTE = \$ 101,449

Front Desk Clerk

Responsible for registering clients into the system, checking clients in at appointments, and providing reminder messages for upcoming appointments (either through telephone calls to clients when possible, or through communication with members of the health care teams). Will be responsible for maintaining the clinic provider schedule.

Annual Salary \$37,000 x .7543 FTE = \$ 27,909

Primary Investigator

Responsible for overall execution of the CoE, including supervision of all medical and non-medical staff, ensuring that quality assurance and reporting are met.

Annual Salary \$185,880 x .013465676 FTE = \$ 2,503

Nurse Practitioner Supervisor

Responsible for supervising Nurse Practitioners in the roles of team leaders requirements and providers as above.

Annual Salary \$143,000 x .068853146 FTE = \$ 9,846

CoE Coordinator

Responsible for the coordination of services among the various partners in the CoE. Provides liaison with DPH and service providers. Oversees the quality assurance program for the CoE. Responsible for monitoring and year end report writing. Coordinates budgeting and invoicing. Supervises other CoE staff.

Annual Salary \$70,000 x .597142857 FTE = \$ 41,800

CoE Administrative Assistant

Responsible for assisting the PI, Co-PI, and CoE Coordinator with meetings and conferences, facilitating communications between the agencies.

Annual Salary \$44,628 x .193712467 FTE = \$ 8,645

CoE IT - Computer Programmer

Responsible for maintaining the HERO electronic medical record system; builds additional programs and reporting modules as needed to address specific needs of each aspect of client services, including screening tool for prevention with positives for the entire CCHAMP population.

Annual Salary \$88,005 x 0.892540 FTE = \$ 78,548

Total Salaries:

\$ 1,091,413

Benefits @ 19.1739 % of total salaries

\$ 209,266

TOTAL SALARIES & BENEFITS:

\$ 1,300,679

General Operating Expenses

Occupancy

Rental of space for HERO staff @ \$736.34 per mo per 0.9 FTE

\$ 7,952

UCSF Computer Network Charges

Standard charge for staff use, maintenance and setup of computer network @ approx \$35/mo x 11.1 FTE

\$ 4,662

Subtotal Expenses:

\$ 12,614

Total Operating Expenses

\$ 1,313,293

INDIRECTS Administrative Cost

Indirect expense charged by UCSF at 9% of total direct cost of the Positive Health Program to cover operating expenses incurred by the University, including building maintenance, library and student services.

INDIRECT COSTS (@ 9% of direct costs)

\$ 118,198

TOTAL EXPENSE

\$ 1,431,490

A	B	C	D	E	F	G	H	I	J	K	L
Contractor Name: UCSF Positive Health Program										Appendix B-1a Page 1	
										Document Date: 3/5/2010	
2	Appendix Term:		03/01/10-02/28/11								
3	Fund Source:		Ryan White Part A								
4	SF DEPARTMENT OF PUBLIC HEALTH CONTRACT										
5	UOS COST ALLOCATION BY SERVICE MODE										
6											
7											
8	AIDS Health Project (AHP)		SERVICE MODES								
9	Personnel Expenses		Mental Health Encounters		Case Management Hours					Contract Totals	
10	Position Titles	FTE	Salaries	% of Total	Salaries	% of Total					
11	Psychiatrist	0.80	\$ 140,733	100%							\$ 140,733
12	Case Manager	2.600			\$ 125,874						\$ 125,874
13	Clinical Supervisor	0.400			\$ 39,488						\$ 39,488
14	Program Assistant	0.100			\$ 4,114						\$ 4,114
15											\$ -
16											\$ -
17											\$ -
18											\$ -
19	Total FTE & Total Salaries	3.90	\$ 140,733	45%	\$ 169,476	55%					\$ 310,209
20	Fringe Benefits	21.0%	\$ 29,612	45%	\$ 35,659	55%					\$ 65,271
21	Total Personnel Expenses		\$ 170,344	45%	\$ 205,135	55%					\$ 375,480
22											
23	Operating Expenses		Expenditure	% of Total	Expenditure	% of Total					Contract Totals
24	Occupancy				\$ 16,386						\$ 16,386
25	Materials and Supplies				\$ 5,621						\$ 5,621
	General Operating				\$ 2,718						\$ 2,718
27	Staff Travel				\$ 1,283						\$ 1,283
28	Consultants/Subcontractor:										\$ -
29											\$ -
30	Other:										\$ -
31	Computer Network Charges		\$ 134		\$ 1,502						\$ 1,636
32											
33											
34											
35											
36											
37											
38											
39											
40											
41	Total Operating Expenses		\$ 134		\$ 27,510						\$ 27,644
42											
43	Capital Expenditures										
44											
45											
46	Total Capital Expenditures										
47	Total Direct Expenses		\$ 170,478	42%	\$ 232,645	58%					\$ 403,124
48	Indirect Expenses		\$ 14,129	39%	\$ 22,152	61%					\$ 36,281
49	TOTAL EXPENSES		\$ 184,607	42%	\$ 254,798	58%					\$ 439,405
50											
51	Number of Units of Service		950		3,850					4,800	
	Cost Per Unit of Service		\$194.32		\$66.18					\$91.54	
53											
54	DPH #1A(1)										Rev. 1/98

Budget Justification
UCSF CCHAMP
AIDS Health Project

Salaries and Benefits

Psychiatrist

Responsible for providing psychiatric evaluation, consultation, medication evaluation and patient management services. Will provide patient crisis intervention and triage services as required. Position requires a licensed psychiatrist in California; must be Board eligible; and proven experience with the medical aspects of HIV and psychiatry competency as an HIV specialist.

Annual Salary \$177,000 x .7951 FTE = \$ 140,733

Case Manager

Responsible for planning, coordination and service delivery to clients. Responsible for integration of CoE services and appropriate utilization of HIV delivery services. Collaboration with PHO Primary Care Providers, Social Work staff, COE Nurse, substance use and mental health workers. Also responsible for assisting CCHAMP clients with medical appointments and locating clients to ensure critical follow-up. Daily reporting to COE nurse for those clients.

Annual Average Salary \$48,413 x 2.6 FTE = \$ 125,874

Clinical Social Worker Supervisor

Responsible for oversight of case managers, as well as planning, coordination and delivery of services to clients. Minimum qualifications: LCSW required. Experience with severe need clients and supervising case management staff. Knowledge of HIV/AIDS. Responsible for ARIES/HERO compliance, and other administrative tasks as assigned.

Annual Salary \$98,720 x .40 FTE = \$ 39,488

Program Assistant

Responsible for program support services including: maintaining evaluation databases, participant satisfaction surveys and record keeping. Tasks will include typing correspondence, maintaining files, coordinating and setting up group space arrangements, and data entry. Minimum Qualifications: High school education and/or 3 years secretarial experience.

Annual Salary \$41,136 x .10 FTE = \$ 4,114

Total Salaries

\$ 310,209

BENEFITS @ 21.04% of salaries =

\$ 65,271

TOTAL Salaries and Benefits

\$ 375,480

Occupancy:

Rent:

Monthly rent expense for the proportion (11%) of clinic space utilized by program.

\$12,414 per month x 11% x 12 months = \$ 16,386

Materials and Supplies:

Office Supplies:

General office supplies such as pens, paper, medical chart supplies, and postage expenses for client communication, proportionate to program utilization.

\$151.09 per month x 3.1 FTE x 12 months = \$ 5,621

General Operating:

Staff Training:

Staff training activities

3.1 FTE x \$200 per training \$ 620

Computer Software/Hardware:

Includes updating computer hardware and software to maintain equipment that holds client medical records, client satisfaction data etc.

\$56.41 per month x 3.1 FTE x 12 months = \$ 2,098

Staff Travel (Local & Out of Town):

Travel expenses for Outreach and Case Management Staff for transportation to client homes, appointment escorts, meetings, and inservices.

\$41.13 per month x 2.6 FTE x 12 months = \$ 1,283

Other:

UCSF Computer Network Charges:

Standard charge from UCSF for staff use, maintenance and setup of computer network. The network services rate will be approximately \$35/month per pro-rated FTE.

\$35 per month x 3.8951 FTE x 12 months = \$ 1,636

Total Operating Expenses \$ 27,644

Total Direct Expenses \$ 403,124

Indirect Expense

Indirect expense is charged by UCSF at 9% of total direct cost to cover operating expenses incurred by the University, including building maintenance, library and student services.

Total Indirect Expense \$ 36,281

TOTAL EXPENSE \$ 439,405

	A	B	C	D	E	F	G	H	I	J	K	L	
1	Contractor Name:		UCSF Positive Health Program						Appendix B-1b Page 1				
2	Appendix Term:		03/01/10-02/28/11						Document Date: 3/5/2010				
3	Fund Source:		Ryan White Part A										
4	SF DEPARTMENT OF PUBLIC HEALTH CONTRACT												
5	UOS COST ALLOCATION BY SERVICE MODE												
6													
7													
8	Substance Treatment Outpatient Program (STOP)			SERVICE MODES									
9	Personnel Expenses		Substance Abuse Counseling Hours								Contract Totals		
10	Position Titles	FTE	Salaries	% Total									
11	Substance Use Counselor (PhD)	0.160	\$ 20,748	100%							\$ 20,748		
12	Data Entry Specialist	0.045	\$ 1,786	100%							\$ 1,786		
13													
14													
15													
16													
17													
18	Total FTE & Total Salaries		0.205	\$ 22,534	100%							\$ 22,534	
19	Fringe Benefits		19.9%	\$ 4,480	100%							\$ 4,480	
20	Total Personnel Expenses			\$ 27,014	100%							\$ 27,014	
21													
22	Operating Expenses		Expenditure	% Total							Contract Totals		
23	Occupancy		\$ 3,357	100%							\$ 3,357		
24	Materials and Supplies												
25	General Operating												
26	Staff Travel												
27	Consultants/Subcontractor:												
28													
29	Other:												
30	Operating expense - Utilities		\$ 316								\$ 316		
31	Computer Network Charges		\$ 96								\$ 96		
32													
33													
34													
35													
36													
37													
38													
39													
40													
41													
42	Total Operating Expenses		\$ 3,769	100%							\$ 3,769		
43													
44	Capital Expenditures												
45													
46													
47	Total Capital Expenditures												
48	Total Direct Expenses		\$ 30,783	100%							\$ 30,783		
49	Indirect Expenses		\$ 2,770	100%							\$ 2,770		
50	TOTAL EXPENSES		\$ 33,553	100%							\$ 33,553		
51													
52	Number of Units of Service		268								268		
53	Cost Per Unit of Service		\$125.20								\$125.20		
54													
55	DPH #1A(1)												

**Budget Justification
 UCSF CCHAMP**

**Division of Substance Abuse and Addiction Medicine (DSAAM)
 Substance Treatment Outpatient Program (STOP)**

Addiction Medicine Psychologist

Responsible for providing assessment of substance use disorders, short-term individual and group counseling, referrals to substance abuse treatment and documentation of these services. Coordinates services with other members of the CoE health care team. Participates in CCHAMP case conferences, STOP staff meetings and appropriate trainings. Coordinates with PHP and STOP to arrange space to provide services at PHP. Plans documentation, data collection, coordination with CCHAMP CQI. Requires PhD/PsychD in clinical Psychology from APA accredited program, California License in psychology, at least 6 years in program management, 4 years experience providing substance use, mental health or HIV counseling; or an equivalent combination of education and experience.

Annual Salary \$129,680 x .15999 FTE = \$ 20,748

Data Entry Specialist

Responsible for data entry of data base for STOP program and Reggie & ARIES data base systems and other clerical duties as assigned.

Annual Salary \$39,338 x .04541 FTE = \$ 1,786

Total Salaries \$ 22,534

Fringe Benefits:

Social Security, Worker's Comp., health benefits, unemployment, state and federal taxes @ 19.9% \$ 4,480

TOTAL SALARIES & BENEFITS \$ 27,014

Operating Expenses

Rent - based on FTE @ 279.79/month \$ 3,357

Utilities - based on FTE, \$26.33/month \$ 316

UCSF Computer Network Charges: Standard charge from UCSF for staff use, maintenance and setup of computer network @ approximately \$35/month per pro-rated 0.23 FTE. \$ 96

Total Operating Expenses \$ 3,769

TOTAL Direct Expenses \$ 30,783

INDIRECT COSTS

Indirect expense is charged by UCSF at 9% of total direct cost to cover operating expenses incurred by the University, including building maintenance, library and student services.

\$ 2,770

TOTAL EXPENSE \$ 33,553

	A	B	C	D	E	F	G	H	I	J	K	L
1	Contractor Name: UCSF Positive Health Program										Appendix B-1c Page 1	
2											Document Date: 3/5/2010	
3	Term: 03/01/10-2/28/11											
4	Fund Source: Ryan White Part A											
5	SF DEPARTMENT OF PUBLIC HEALTH CONTRACT											
6	UOS COST ALLOCATION BY SERVICE MODE											
7												
8	Stonewall		SERVICE MODES									
9	Personnel Expenses		Substance Use Counseling Hours				Substance Use Counseling Group Hours				Contract Totals	
10	Position Titles	FTE	Salaries	% of Total	Salaries	% of Total						Totals
11	Counselor	0.37	\$ 12,714	63%	\$ 7,453	37%						\$ 20,167
12	Psychologist	0.09	\$ 4,986	68%	\$ 2,347	32%						\$ 7,333
13												
14												
15												
16												
17												
18	Total FTE & Total Salaries	0.460	\$ 17,700	64%	\$ 9,800	36%						\$ 27,500
19	Fringe Benefits	23.0%	\$ 4,071	64%	\$ 2,254	36%						\$ 6,325
20	Total Personnel Expenses		\$ 21,771	64%	\$ 12,054	36%						\$ 33,825
21												
22	Operating Expenses		Expenditure	% of Total	Expenditure	% of Total						Contract Totals
23	Occupancy											
24	Materials and Supplies		\$ 567	68%	\$ 267	32%						\$ 834
25	General Operating											
26	Staff Travel											
27	Consultants/Subcontractor:											
28												
29	Other:											
30												
31												
32												
33												
34												
35												
36												
37												
38												
39												
40												
41	Total Operating Expenses		\$ 567	68%	\$ 267	32%						\$ 834
42												
43	Capital Expenditures											
44												
45												
46	Total Capital Expenditures											
47	Total Direct Expenses		\$ 22,338	64%	\$ 12,321	36%						\$ 34,659
48	Indirect Expenses		\$ 2,121	68%	\$ 998	32%						\$ 3,119
49	TOTAL EXPENSES		\$ 24,458	65%	\$ 13,320	35%						\$ 37,778
50												
51	Number of Units of Service		275		135						410	
52	Cost Per Unit of Service		\$88.94		\$98.67						\$92.14	
53												
54	DPH #1A(1)										Rev. 1/98	

Budget Justification
UCSF CCHAMP
SFAF Stonewall

Substance Use Counselor

Responsible for the assessment, short term counseling and documentation of these services. Participates in CCHAMP conferences, Stonewall staff meetings and case conferences appropriate trainings. Requires a Master's license or licensed eligible clinician and at least two years of experience in substance use , mental health counseling or HIV counseling.

Annual Salary \$54,997x .366693 FTE = \$ 20,167

Supervising Psychologist

Responsible for the clinical oversight and supervision of the substance use counselors. Backup clinician for services. Oversees quality assurance of services delivery, data collections and program improvements. Requires a PhD in Clinical or Counseling Psychology and at least five years experience in program management.

Annual Salary \$80,001 x .091661 FTE = \$ 7,333

Total Salaries \$ 27,500

Fringe Benefits

Social Security, Worker's Comp, health benefits, unemployment, state and federal taxes @ 23% = \$ 6,325

Total Salaries and Benefits \$ 33,825

Other Direct Expenses

Program/Educational Supplies

cost of materials based on previous history of expenses \$69.52 per month x 12 mos = \$ 834

Total Direct Expenses \$ 34,659

Indirect Expense

Expenses charged by the SFAF at 9% of total direct cost to cover indirect operating such as payroll, HR, accounting, administration, and planning

\$ 3,119

TOTAL EXPENSE \$ 37,778

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
1	Contractor Name: UCSF Positive Health Program														
2	Appendix B-1d Page 1														
3	Document Date: 3/5/2010														
4	Appendix Term: 03/01/11-02/29/12														
5	Fund Source: Ryan White Part A														
6	SF DEPARTMENT OF PUBLIC HEALTH CONTRACT														
7	UOS COST ALLOCATION BY SERVICE MODE														
8	UCSF Positive Health Program														
SERVICE MODES															
9	Personnel Expenses														
10	Position Titles	FTE	Case Management Hours	Primary Care Medical Encounters	Mental Health Hours	Substance Use Counseling Hours	Coordination, Planning & Evaluation Hours	Contract Totals							
11	Physicians	2.12	Salaries	Salaries	Salaries	Salaries	Salaries	Salaries	Salaries	Salaries	Salaries	Salaries	Salaries	Salaries	Salaries
12	Nurse Practitioners	0.97	% Total	% Total	% Total	% Total	% Total	% Total	% Total	% Total	% Total	% Total	% Total	% Total	% Total
13	Registered Nurses	0.64													
14	Clinical Pharmacist (PharmD)	0.71													
15	Medical Assistant	1.95													
16	Licensed Social Worker	0.71	\$ 52,079	81%		\$ 12,080	19%								
17	Case Manager (MSW)	1.47	\$ 84,000	83%	\$ 14,300	14%	\$ 3,149	3%							
18	Front Desk Clerk	0.75													
19	Primary Investigator (MD)	0.01							\$ 2,503	100%					
20	Nurse Practitioner Supervisor	0.07													
21	CoE Coordinator (Analyst 4)	0.60							\$ 41,800	100%					
22	Administrative Assistant 3	0.19							\$ 8,645	100%					
23	Information Tech. - Programmer	0.89							\$ 78,548	100%					
24	Total FTE & Total Salaries	11.10	\$ 136,079	12%	\$ 14,300	1%	\$ 15,229	1%	\$ 131,496	12%	\$ 25,212	12%	\$ 156,708	12%	\$ 1,091,413
25	Fringe Benefits	19.2%	\$ 26,092	12%	\$ 2,742	1%	\$ 2,920	1%	\$ 25,212	12%	\$ 18,149	1%	\$ 170,813	12%	\$ 209,266
26	Total Personnel Expenses		\$ 162,171	12%	\$ 17,042	1%	\$ 18,149	1%	\$ 156,708	12%	\$ 18,149	1%	\$ 170,813	12%	\$ 1,300,679
28	Operating Expenses		Expenditure	% Total	Expenditure	% Total	Expenditure	% Total	Expenditure	% Total	Expenditure	% Total	Expenditure	% Total	Contract Totals
29	General Operating		\$ 505		\$ 12,109		\$ 12,109		\$ 17,042		\$ 18,149		\$ 170,813		\$ 12,614
30	Total Operating Expenses		\$ 505		\$ 12,109		\$ 12,109		\$ 17,042		\$ 18,149		\$ 170,813		\$ 12,614
32															
33	Total Direct Expenses		\$ 162,676	12%	\$ 958,718	73%	\$ 162,676	12%	\$ 17,042	1%	\$ 18,149	1%	\$ 156,708	12%	\$ 1,313,293
34	Indirect Expenses		\$ 14,641	12%	\$ 86,285	73%	\$ 14,641	12%	\$ 1,534	1%	\$ 1,633	1%	\$ 14,105	12%	\$ 118,198
35	TOTAL EXPENSES		\$ 177,316	12%	\$ 1,045,003	73%	\$ 177,316	12%	\$ 18,576	1%	\$ 19,782	1%	\$ 170,813	12%	\$ 1,431,490
36	Number of Units of Service		2,192		5,868		240		240		240		1,620		10,160
37	Cost Per Unit of Service		\$80.89		\$178.09		\$77.40		\$82.43		\$105.44		\$140.89		\$140.89

Budget Justification

Salaries and Benefits

Physician

Responsible for managing HIV and primary health care needs of clients. Performs assessment of stage of HIV disease, prescribes medications (in conjunction with the treatment adherence program); diagnoses and treats opportunistic infections and malignancies. Provides referrals to other medical and psychosocial providers as necessary. Responsible for general health care management of clients, i.e., hypertension, diabetes, cardiac disease, liver disease and hepatitis, etc. Position requires an MD degree with specialized training or experience in HIV-related health issues and demonstration of professional competency as an HIV specialist.

Annual Salary \$168,000 x 2.123535714 FTE = \$ 356,754

Nurse Practitioner Team Leader and Providers

Similar primary care responsibilities as the team physicians above, under the supervision of the Medical Director (Principal Investigator). Additionally, NP Team and Leaders are available to clients on a medical drop-in basis. Position requires an NP degree with specialized training or experience in HIV-related health issues and demonstration of professional competency as an HIV specialist practitioner.

Annual Salary \$128,940 x 0.9694435 FTE = \$ 125,000

Registered Nurse

Responsible for coordinating plans of care for clients; facilitating medical referrals, coordinating medical follow-up appointments; administering injections and medications; routine patient follow-up for blood pressure and blood sugar checks; assists with patient education on HIV, HIV medications, and other general care needs.

Annual Salary \$141,000 x 0.638297872 FTE = \$ 90,000

Clinical Pharmacist

Responsible for medication adherence assessments, evaluations of drug interactions, and assistance with medication adverse event monitoring. Assesses appropriateness of medication dosing in the setting of kidney or liver impairment. Supervises Pharmacy Technicians in medication refills and Medi-Set programs. Requires a doctorate of pharmacy degree with demonstrated professional competence in HIV-related pharmacy care.

Annual Salary \$140,000 x 0.714285714 FTE = \$ 100,000

Medical Assistant

Responsible for assisting with client flow during medical encounters, including coverage of vital signs, phlebotomy, and specimen transport as needed. Requires a high school diploma or GED with additional training in medical sciences and awareness of the issues faced by the target population.

Annual Salary \$43,500 x 1.949425287 FTE = \$ 84,800

Licensed Clinical Social Worker

Responsible for planning, coordination, and delivery of services to clients; includes psychosocial needs assessments and linking clients with in appropriate services; assists with enrollment of clients into Medi-Cal, ADAP, and other assistance programs. Requires certification as a licensed social worker and awareness of the issues faced by the target population.

Annual Salary \$90,346 x .7100147654 FTE = \$ 64,159

Social Worker (MSW)

Responsible for planning, coordination, and delivery of services to clients; responsible for integration of client services and ensures appropriate access for clients as well as appropriate utilization of resources at the client level. Requires a master's degree in social work and awareness of the issues faced by the target population.

Annual Salary \$69,000 x 1.470275362 FTE = \$ 101,449

Front Desk Clerk

Responsible for registering clients into the system, checking clients in at appointments, and providing reminder messages for upcoming appointments (either through telephone calls to clients when possible, or through communication with members of the health care teams). Will be responsible for maintaining the clinic provider schedule.

Annual Salary \$37,000 x .7543 FTE = \$ 27,909

Primary Investigator

Responsible for overall execution of the CoE, including supervision of all medical and non-medical staff, ensuring that quality assurance and reporting are met.

Annual Salary \$185,880 x .013465676 FTE = \$ 2,503

Nurse Practitioner Supervisor

Responsible for supervising Nurse Practitioners in the roles of team leaders requirements and providers as above.

Annual Salary \$143,000 x .068853146 FTE = \$ 9,846

CoE Coordinator

Responsible for the coordination of services among the various partners in the CoE. Provides liaison with DPH and service providers. Oversees the quality assurance program for the CoE. Responsible for monitoring and year end report writing. Coordinates budgeting and invoicing. Supervises other CoE staff.

Annual Salary \$70,000 x .597142857 FTE = \$ 41,800

CoE Administrative Assistant

Responsible for assisting the PI, Co-PI, and CoE Coordinator with meetings and conferences, facilitating communications between the agencies.

Annual Salary \$44,628 x .193712467 FTE = \$ 8,645

CoE IT - Computer Programmer

Responsible for maintaining the HERO electronic medical record system; builds additional programs and reporting modules as needed to address specific needs of each aspect of client services, including screening tool for prevention with positives for the entire CCHAMP population.

Annual Salary \$88,005 x 0.892540 FTE = \$ 78,548

Total Salaries:

\$ 1,091,413

Benefits @ 19.1739 % of total salaries

\$ 209,266

TOTAL SALARIES & BENEFITS:

\$ 1,300,679

General Operating Expenses

Occupancy

Rental of space for HERO staff @ \$736.34 per mo per 0.9 FTE

\$ 7,952

UCSF Computer Network Charges

Standard charge for staff use, maintenance and setup of computer network @ approx \$35/mo x 11.1 FTE

\$ 4,662

Subtotal Expenses:

\$ 12,614

Total Operating Expenses

\$ 1,313,293

INDIRECTS Administrative Cost

Indirect expense charged by UCSF at 9% of total direct cost of the Positive Health Program to cover operating expenses incurred by the University, including building maintenance, library and student services.

INDIRECT COSTS (@ 9% of direct costs)

\$ 118,198

TOTAL EXPENSE

\$ 1,431,490

3 Appendix Term: 03/01/11-02/29/12
 4 Fund Source: Ryan White Part A

SF DEPARTMENT OF PUBLIC HEALTH CONTRACT
UOS COST ALLOCATION BY SERVICE MODE

8 AIDS Health Project (AHP)		SERVICE MODES						Contract Totals
		Mental Health Encounters		Case Management Hours				
9 Personnel Expenses	FTE	Salaries	% of Total	Salaries	% of Total			
10 Position Titles								
11 Psychiatrist	0.80	\$ 140,733	100%					\$ 140,733
12 Case Manager	2.600			\$ 125,874				\$ 125,874
13 Clinical Supervisor	0.400			\$ 39,488				\$ 39,488
14 Program Assistant	0.100			\$ 4,114				\$ 4,114
15								\$ -
16								\$ -
17								\$ -
18								\$ -
19 Total FTE & Total Salaries	3.90	\$ 140,733	45%	\$ 169,476	55%			\$ 310,209
20 Fringe Benefits	21.0%	\$ 29,612	45%	\$ 35,659	55%			\$ 65,271
21 Total Personnel Expenses		\$ 170,344	45%	\$ 205,135	55%			\$ 375,480

23 Operating Expenses	Expenditure	% of Total	Expenditure	% of Total				Contract Totals
24 Occupancy			\$ 16,386					\$ 16,386
25 Materials and Supplies			\$ 5,621					\$ 5,621
General Operating			\$ 2,718					\$ 2,718
Staff Travel			\$ 1,283					\$ 1,283
28 Consultants/Subcontractor:								
29								
30 Other:								
31 Computer Network Charges	\$ 134		\$ 1,502					\$ 1,636
32								
33								
34								
35								
36								
37								
38								
39								
40								
41 Total Operating Expenses	\$ 134		\$ 27,510					\$ 27,644

43 Capital Expenditures								
44								
45								
46 Total Capital Expenditures								
47 Total Direct Expenses	\$ 170,478	42%	\$ 232,645	58%				\$ 403,124
48 Indirect Expenses	\$ 14,129	39%	\$ 22,152	61%				\$ 36,281
49 TOTAL EXPENSES	\$ 184,607	42%	\$ 254,797	58%				\$ 439,405
50								
51 Number of Units of Service		950		3,850				4,800
Cost Per Unit of Service		\$194.32		\$66.18				\$91.54

Budget Justification
UCSF CCHAMP
AIDS Health Project

Salaries and Benefits

Psychiatrist

Responsible for providing psychiatric evaluation, consultation, medication evaluation and patient management services. Will provide patient crisis intervention and triage services as required. Position requires a licensed psychiatrist in California; must be Board eligible; and proven experience with the medical aspects of HIV and psychiatry competency as an HIV specialist.

Annual Salary \$177,000 x .7951 FTE = \$ 140,733

Case Manager

Responsible for planning, coordination and service delivery to clients. Responsible for integration of CoE services and appropriate utilization of HIV delivery services. Collaboration with PHO Primary Care Providers, Social Work staff, COE Nurse, substance use and mental health workers. Also responsible for assisting CCHAMP clients with medical appointments and locating clients to ensure critical follow-up. Daily reporting to COE nurse for those clients.

Annual Average Salary \$48,413 x 2.6 FTE = \$ 125,874

Clinical Social Worker Supervisor

Responsible for oversight of case managers, as well as planning, coordination and delivery of services to clients. Minimum qualifications: LCSW required. Experience with severe need clients and supervising case management staff. Knowledge of HIV/AIDS. Responsible for ARIES/HERO compliance, and other administrative tasks as assigned.

Annual Salary \$98,720 x .40 FTE = \$ 39,488

Program Assistant

Responsible for program support services including: maintaining evaluation databases, participant satisfaction surveys and record keeping. Tasks will include typing correspondence, maintaining files, coordinating and setting up group space arrangements, and data entry.

Minimum Qualifications: High school education and/or 3 years secretarial experience.

Annual Salary \$41,136 x .10 FTE = \$ 4,114

Total Salaries

\$ 310,209

BENEFITS @ 21.04% of salaries = \$ 65,271

TOTAL Salaries and Benefits \$ 375,480

Occupancy:

Rent:

Monthly rent expense for the proportion (11%) of clinic space utilized by program.

$\$12,414 \text{ per month} \times 11\% \times 12 \text{ months} =$ \$ 16,386

Materials and Supplies:

Office Supplies:

General office supplies such as pens, paper, medical chart supplies, and postage expenses for client communication, proportionate to program utilization.

$\$151.09 \text{ per month} \times 3.1 \text{ FTE} \times 12 \text{ months} =$ \$ 5,621

General Operating:

Staff Training:

Staff training activities

$3.1 \text{ FTE} \times \$200 \text{ per training}$ \$ 620

Computer Software/Hardware:

Includes updating computer hardware and software to maintain equipment that holds client medical records, client satisfaction data etc.

$\$56.41 \text{ per month} \times 3.1 \text{ FTE} \times 12 \text{ months} =$ \$ 2,098

Staff Travel (Local & Out of Town):

Travel expenses for Outreach and Case Management Staff for transportation to client homes, appointment escorts, meetings, and inservices.

$\$41.13 \text{ per month} \times 2.6 \text{ FTE} \times 12 \text{ months} =$ \$ 1,283

Other:

UCSF Computer Network Charges:

Standard charge from UCSF for staff use, maintenance and setup of computer network. The network services rate will be approximately \$35/month per pro-rated FTE.

$\$35 \text{ per month} \times 3.8951 \text{ FTE} \times 12 \text{ months} =$ \$ 1,636

Total Operating Expenses \$ 27,644

Total Direct Expenses **\$ 403,124**

Indirect Expense

Indirect expense is charged by UCSF at 9% of total direct cost to cover operating expenses incurred by the University, including building maintenance, library and student services.

Total Indirect Expense \$ 36,281

TOTAL EXPENSE **\$ 439,405**

	A	B	C	D	E	F	G	H	I	J	K	L	
1	Contractor Name: UCSF Positive Health Program										Appendix B-1f Page 1		
2											Document Date: 3/5/2010		
3	Appendix Term:		03/01/11-02/29/12										
4	Fund Source:		Ryan White Part A										
5	SF DEPARTMENT OF PUBLIC HEALTH CONTRACT												
6	UOS COST ALLOCATION BY SERVICE MODE												
7													
8	Substance Treatment Outpatient Program (STOP)			SERVICE MODES									
9	Personnel Expenses			Substance Abuse Counseling Hours								Contract Totals	
10	Position Titles		FTE	Salaries	% Total	Salaries	% Total						
11	Substance Use Counselor (PhD)		0.15	\$ 19,225	100%								\$ 19,225
12	Data Entry Specialist		0.08	\$ 3,309	100%								\$ 3,309
13													
14													
15													
16													
17													
18	Total FTE & Total Salaries		0.227	\$ 22,534	100%								\$ 22,534
19	Fringe Benefits		19.9%	\$ 4,480	100%								\$ 4,480
20	Total Personnel Expenses			\$ 27,014	100%								\$ 27,014
21													
22	Operating Expenses			Expenditure	% Total	Expenditure	% Total						Contract Totals
23	Occupancy			\$ 3,357	100%								\$ 3,357
24	Materials and Supplies												\$ -
25	General Operating												
26	Staff Travel												
27	Consultants/Subcontractor:												
28													
29	Other:												
30	Operating expense - Utilities			\$ 316									\$ 316
31	Computer Network Charges			\$ 96									\$ 96
32													
33													
34													
35													
36													
37													
38													
39													
40													
41													
42	Total Operating Expenses			\$ 3,769	100%								\$ 3,769
43													
44	Capital Expenditures												
45													
46													
47	Total Capital Expenditures												
48	Total Direct Expenses			\$ 30,783	100%								\$ 30,783
49	Indirect Expenses			\$ 2,770	100%								\$ 2,770
50	TOTAL EXPENSES			\$ 33,553	100%								\$ 33,553
51													
52	Number of Units of Service			268								268	
53	Cost Per Unit of Service			\$125.20								\$125.20	
54													
55	DPH #1A(1)												

**Budget Justification
 UCSF CCHAMP**

**Division of Substance Abuse and Addiction Medicine (DSAAM)
 Substance Treatment Outpatient Program (STOP)**

Addiction Medicine Psychologist

Responsible for providing assessment of substance use disorders, short-term individual and group counseling, referrals to substance abuse treatment and documentation of these services. Coordinates services with other members of the CoE health care team. Participates in CCHAMP case conferences, STOP staff meetings and appropriate trainings. Coordinates with PHP and STOP to arrange space to provide services at PHP. Plans documentation, data collection, coordination with CCHAMP CQI. Requires PhD/PsychD in clinical Psychology from APA accredited program, California License in psychology, at least 6 years in program management, 4 years experience providing substance use, mental health or HIV counseling; or an equivalent combination of education and experience.

Annual Salary \$129,680 x .14825 FTE = \$ 19,225

Data Entry Specialist

Responsible for data entry of data base for STOP program and Reggie & ARIES data base systems and other clerical duties as assigned.

Annual Salary \$39,338 x .08412 FTE = \$ 3,309

Total Salaries \$ 22,534

Fringe Benefits:

Social Security, Worker's Comp., health benefits, unemployment, state and federal taxes @ 20% \$ 4,480

TOTAL SALARIES & BENEFITS \$ 27,014

Office Supplies:

Rent - based on FTE @ 279.79/month \$ 3,357

Utilities - based on FTE, \$26.33/month \$ 316

UCSF Computer Network Charges: Standard charge from UCSF for staff use, maintenance and setup of computer network @ approximately \$35/month per pro-rated 0.23 FTE. \$ 96

Operating expenses \$ 3,769

TOTAL Direct Expenses \$ 30,783

INDIRECT COSTS @ 9% of direct expenses \$ 2,770

TOTAL EXPENSE \$ 33,553

	A	B	C	D	E	F	G	H	I	J	K	L
1	Contractor Name: UCSF Positive Health Program										Appendix B-1g Page 1	
2											Document Date: 3/5/2010	
3	Term:		03/01/11-2/29/12									
4	Fund Source:		Ryan White Part A									
5	SF DEPARTMENT OF PUBLIC HEALTH CONTRACT											
6	UOS COST ALLOCATION BY SERVICE MODE											
7												
8	Stonewall		SERVICE MODES									
9	Personnel Expenses		Substance Use Counseling Hours				Substance Use Counseling Group Hours				Contract Totals	
10	Position Titles	FTE	Salaries	% of Total	Salaries	% of Total						Totals
11	Counselor	0.37	\$ 12,714	63%	\$ 7,453	37%						\$ 20,167
12	Psychologist	0.09	\$ 4,986	68%	\$ 2,347	32%						\$ 7,333
13												
14												
15												
16												
17												
18	Total FTE & Total Salaries	0.460	\$ 17,700	64%	\$ 9,800	36%						\$ 27,500
19	Fringe Benefits	23.0%	\$ 4,071	64%	\$ 2,254	36%						\$ 6,325
20	Total Personnel Expenses		\$ 21,771	64%	\$ 12,054	36%						\$ 33,825
21												
22	Operating Expenses		Expenditure	% of Total	Expenditure	% of Total						Contract Totals
23	Occupancy											
24	Materials and Supplies		\$ 567	68%	\$ 267	32%						\$ 834
25	General Operating											
26	Staff Travel											
27	Consultants/Subcontractor:											
28												
29	Other:											
30												
31												
32												
33												
34												
35												
36												
37												
38												
39												
40												
41	Total Operating Expenses		\$ 567	68%	\$ 267	32%						\$ 834
42												
43	Capital Expenditures											
44												
45												
46	Total Capital Expenditures											
47	Total Direct Expenses		\$ 22,338	64%	\$ 12,321	36%						\$ 34,659
48	Indirect Expenses		\$ 2,121	68%	\$ 998	32%						\$ 3,119
49	TOTAL EXPENSES		\$ 24,458	65%	\$ 13,320	35%						\$ 37,778
50												
51	Number of Units of Service		275		135						410	
52	Cost Per Unit of Service		\$88.94		\$98.67						\$92.14	
53												
54	DPH #1A(1)											

Budget Justification
UCSF CCHAMP
SFAF Stonewall

Substance Use Counselor

Responsible for the assessment, short term counseling and documentation of these services. Participates in CCHAMP conferences, Stonewall staff meetings and case conferences appropriate trainings. Requires a Master's license or licensed eligible clinician

Annual Salary \$54,997x .366693 FTE = \$ 20,167

Supervising Psychologist

Responsible for the clinical oversight and supervision of the substance use counselors. Backup clinician for services. Oversees quality assurance of services delivery, data collections and program improvements. Requires a PhD in Clinical or Counseling Psyc

Annual Salary \$80,001 x .091661 FTE = \$ 7,333

Total Salaries \$ 27,500

Fringe Benefits

Social Security, Worker's Comp, health benefits, unemployment, state and federal taxes @ 23% = \$ 6,325

Total Salaries and Benefits \$ 33,825

Other Direct Expenses

Program/Educational Supplies

cost of materials based on previous history of expenses \$69.52 per month x 12 mos = \$ 834

Total Direct Expenses \$ 34,659

Indirect Expense

Expenses charged by the SFAF at 9% of total direct cost to cover indirect operating such as payroll, HR, accounting, administration, and planning

\$ 3,119

TOTAL EXPENSE \$ 37,778

Appendix C
Insurance Waiver



CITY AND COUNTY OF
SAN FRANCISCO

RISK MANAGEMENT
PROGRAM

WILLIE L. BROWN, JR.
MAYOR

MEMORANDUM

TO: Galen Leung, Director
DPH Office of Contract Management

FROM: Nancy Johnston-Béhard
Deputy Risk Manager

DATE: October 22, 2003

RE: Request for Approval to Waive Requirement for Proof of Insurance
for Regents of the University of California

RECEIVED
03 OCT 27 AM 9:37
OFFICE OF CONTRACT MGMT.
DPH

In response to your request, Risk Management hereby grants authorization to use the following language in lieu of the Certificate of Insurance and Endorsements for contracts between the City and County of San Francisco and Regents of the University of California.

CONTRACTOR and CITY agree that each party will maintain in force, throughout the term of this Agreement, a program of insurance and/or self-insurance of sufficient scope and amount to permit each party to discharge promptly any obligations each incurs by operation of this agreement. A certificate of insurance is not required from either party.

We ask the Office of Contract Administration, Purchasing to share this information with their staff.

cc: Errol Fitzpatrick
Risk Management Staff
Judith Blackwell
Mike Ward

City Hall, Room 370
1 Dr. Carlton B. Goodlett Place, San Francisco, CA 94102
Telephone (415) 554-6278; Fax (415) 554-6168

Appendix D
Additional Terms

1. **HIPAA**

The parties acknowledge that City is a Covered Entity as defined in the Healthcare Insurance Portability and Accountability Act of 1996 ("HIPAA") and is therefore required to abide by the Privacy Rule contained therein. The parties further agree that Contractor falls within the following definition under the HIPAA regulations:

- A Covered Entity subject to HIPAA and the Privacy Rule contained therein; or
- A Business Associate subject to the terms set forth in Appendix E;
- Not Applicable, Contractor will not have access to Protected Health Information.

2. **THIRD-PARTY BENEFICIARIES**

No third parties are intended by the parties hereto to be third-party beneficiaries under this Agreement, and no action to enforce the terms of this Agreement may be brought against either party by any person who is not a party hereto.

3. **CERTIFICATION REGARDING LOBBYING**

Contractor certifies to the best of its knowledge and belief that:

A. No federally appropriated funds have been paid or will be paid, by or on behalf of Contractor to any persons for influencing or attempting to influence an officer or an employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the entering into of any federal cooperative agreement, or the extension, continuation, renewal, amendment, or modification of a federal contract, grant, loan or cooperative agreement.

B. If any funds other than federally appropriated funds have been paid or will be paid to any persons for influencing or attempting to influence an officer or employee of an agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan or cooperative agreement, Contractor shall complete and submit the appropriate Federal form, in accordance with the form's instructions.

C. Contractor shall require the language of this certification be included in the award documents for all subawards at all tiers, (including subcontracts, subgrants, and contracts under grants, loans and cooperation agreements) and that all subrecipients shall certify and disclose accordingly.

D. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

4. **MATERIALS REVIEW**

Except for production or distribution pursuant to a valid Public Records Act request, Contractor agrees that all materials, including print, audio, video, and electronic materials, developed, produced, or distributed in accordance with Appendix A and with funding under this Agreement shall be subject to a thirty (30) working day review and approval by the Contract Administrator prior to such production, development or distribution. A failure by the City to notify Contractor of objections to the materials within said thirty- (30) working day period shall be deemed approval of the materials.

5. **CALIFORNIA STATE ENTITY**

Final draft as agreed upon by CCSF and UCSF 5-09 Boilerplate Template for Contracts and Grants

Notwithstanding anything to the contrary in this Agreement, the provisions of Sections 8, 23, 36, 38, 42, 46, 57, and 59 of this Agreement are enforceable only to the extent such provisions are applicable to a California state entity and constitutional corporation and are required by applicable law.

Appendix E
Omitted By Agreement of the Parties

Appendix F
Invoice

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE**

EXHIBIT F-1
PAGE A

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Control Number
HP-11-06376-AI

Invoice Number
6049A1MAR080

Telephone: (415) 476-2977
FAX: (415) 476-8158

Contract Purchase DP No. _____

Fund Source: **RWPA**

Grant Code/Detail: **HCPD13/0801**

Invoicing Period: _____

FINAL invoice (check if Yes)

ACE Control No. **3916-0TBC-A1**

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2010 - February 29, 2012

EXHIBIT TERM: March 1, 2010 - February 28, 2011

PROGRAM / EXHIBIT: PHP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients
Case Management, Individual Hour	2,192	400							2,192	400
Primary Medical Care, Encounter	5,868	600							5,868	600
Mental Health, Hour	240	120							240	120
Substance Use Counseling Hr - Individual	240	120							240	120
CoE Coord, Planning & Evaluation	1,620	N/A							1,620	N/A

Unduplicated Clients for Exhibit	600					
----------------------------------	-----	--	--	--	--	--

EXPENDITURES

	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$1,091,413.00				\$1,091,413.00
Fringe Benefits	\$209,266.00				\$209,266.00
Total Personnel Expenses	\$1,300,679.00				\$1,300,679.00
Operating Expenses:					
Occupancy					
Materials and Supplies					
General Operating					
Staff Travel					
Consultant/Subcontractor					
Other:					
Total Operating Expenses	\$12,614.00				\$12,614.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$1,313,293.00				\$1,313,293.00
Indirect Expenses	\$118,198.00				\$118,198.00
TOTAL EXPENSES	\$1,431,491.00				\$1,431,491.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to:	SFDPH - AIDS OFFICE 1380 Howard, 4th Floor San Francisco, CA 94103 Attn: Contract Payments	SFDPH CHS/AIDS OFFICE Authorization For Payment:
By:	_____	Date: _____

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE**

EXHIBIT F-1
PAGE B

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Telephone: (415) 476-2977
FAX: (415) 476-8158

Control Number

HP-11-06376-AI

Invoice Number

6049A1MAR080

Contract Purchase DP No. _____

Fund Source: RWPA

Grant Code/Detail: HCPD13/0801

Invoicing Period: _____

FINAL invoice _____ (check if Yes)

ACE Control No. 3916-0TBC-A1

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2010 - February 29, 2012

EXHIBIT TERM: March 1, 2010 - February 28, 2011

PROGRAM / EXHIBIT: PHP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Physicians	2.12	\$356,754.00				\$356,754.00
Nurse Practitioners	0.97	\$125,000.00				\$125,000.00
Registered Nurses	0.64	\$90,000.00				\$90,000.00
Clinical Pharmacist (PharmD)	0.71	\$100,000.00				\$100,000.00
Medical Assistant	1.95	\$84,800.00				\$84,800.00
Licensed Social Worker	0.71	\$64,159.00				\$64,159.00
Licensed Social Worker (MSW)	1.47	\$101,449.00				\$101,449.00
Front Desk Clerk	0.75	\$27,909.00				\$27,909.00
Primary Investigator	0.01	\$2,503.00				\$2,503.00
Nurse Practitioner Sprvsr (NP)	0.07	\$9,846.00				\$9,846.00
CoE Coordinator (Analyst 4)	0.60	\$41,800.00				\$41,800.00
CoE Administrative Asst 3	0.19	\$8,645.00				\$8,645.00
CoE Info Tech - Programmer	0.89	\$78,548.00				\$78,548.00
TOTAL SALARIES	11.08	\$1,091,413.00				\$1,091,413.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Date: _____

Title: _____

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE**

Appendix F-1a
PAGE A

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Control Number
HP-12-06376-AI

Invoice Number
3916-A1AMAR090

Contract Purchase DP No. _____

Fund Source: RWPA

Grant Code/Detail: HCPD13/0901

Invoicing Period: _____

FINAL invoice (check if Yes)

ACE Control No. 3916-0TBC-A1

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2011 - February 29, 2012
EXHIBIT TERM: March 1, 2010 - February 28, 2011

PROGRAM / EXHIBIT: AHP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients
Mental Health, Encounters	950	200							950	200
Case Management	3,850								3,850	

Unduplicated Clients for Exhibit	200				
----------------------------------	-----	--	--	--	--

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$310,209.00				\$310,209.00
Fringe Benefits	\$65,271.00				\$65,271.00
Total Personnel Expenses	\$375,480.00				\$375,480.00
Operating Expenses:					
Occupancy	\$16,386.00				\$16,386.00
Materials and Supplies	\$5,621.00				\$5,621.00
General Operating	\$2,718.00				\$2,718.00
Staff Travel	\$1,283.00				\$1,283.00
Consultant/Subcontractor					
Other:					
Computer network charges	\$1,636.00				\$1,636.00
Total Operating Expenses	\$27,644.00				\$27,644.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$403,124.00				\$403,124.00
Indirect Expenses	\$36,281.00				\$36,281.00
TOTAL EXPENSES	\$439,405.00				\$439,405.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to:	SFDPH - AIDS OFFICE 1380 Howard, 4th Floor San Francisco, CA 94103 Attn: Contract Payments	SFDPH CHS/AIDS OFFICE Authorization For Payment:
	By: _____	Date: _____

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE**

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Telephone: (415) 476-2977
FAX: (415) 476-8158

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2011 - February 29, 2012
EXHIBIT TERM: March 1, 2010 - February 28, 2011

Control Number

HP-12-06376-AI

Invoice Number

3916-A1AMAR090

Contract Purchase DP No. _____

Fund Source: RWPA

Grant Code/Detail: HCPD13/0901

Invoicing Period: _____

FINAL invoice _____ (check it Yes)

ACE Control No. 3916-0TBC-A1

PROGRAM / EXHIBIT: AHP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Psychiatrist	0.80	\$140,733.00				\$140,733.00
Case manager	2.60	\$125,874.00				\$125,874.00
Clinical Supervisor	0.40	\$39,488.00				\$39,488.00
Program Assistant	0.10	\$4,114.00				\$4,114.00
TOTAL SALARIES	3.90	\$310,209.00				\$310,209.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____ Date: _____
Title: _____

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE**

EXHIBIT F-1b
PAGE A

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Telephone: (415) 476-2977
FAX: (415) 476-8158

CONTRACT NAME: HIV Health Services
CONTRACT TERM: March 1, 2010 - February 29, 2012
EXHIBIT TERM: March 1, 2010 - February 28, 2011

Control Number
HP-10-06376-AI

Invoice Number
6049A1CMAR080

Contract Purchase DP No.

Fund Source:

Grant Code/Detail:

Invoicing Period:

FINAL invoice (check if Yes)

ACE Control No.

PROGRAM / EXHIBIT: STOP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients
Substance Use Cnsing (Phd) Hr - Individual	268	35							268	35

Unduplicated Clients for Exhibit

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$22,534.00				\$22,534.00
Fringe Benefits	\$4,480.00				\$4,480.00
Total Personnel Expenses	\$27,014.00				\$27,014.00
Operating Expenses:					
Occupancy	\$3,357.00				\$3,357.00
Materials and Supplies					
General Operating					
Staff Travel					
Consultant/Subcontractor					
Other:					
Utilities	\$316.00				\$316.00
Computer Network	\$96.00				\$96.00
Total Operating Expenses	\$3,769.00				\$3,769.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$30,783.00				\$30,783.00
Indirect Expenses	\$2,770.00				\$2,770.00
TOTAL EXPENSES	\$33,553.00				\$33,553.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____
Title: _____

Send to:	SFDPH - AIDS OFFICE 1380 Howard, 4th Floor San Francisco, CA 94103 Attn: Contract Payments	SFDPH CHS/AIDS OFFICE Authorization For Payment:
By:	_____	Date: _____

DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE

EXHIBIT F-1b
PAGE 'B'

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Control Number
HP-10-06376-AI

Invoice Number
6049A1CMAR080

Telephone: (415) 476-2977
FAX: (415) 476-8158

Contract Purchase DP No. _____

Fund Source: RWPA
Grant Code/Detail: HCPD13/0801
Invoicing Period: _____

CONTRACT NAME: HIV Health Services

FINAL invoice _____ (check it Yes)

CONTRACT TERM: March 1, 2010 - February 29, 2012
EXHIBIT TERM: March 1, 2010 - February 28, 2011

ACE Control No. 3916-0TBC-A1C

PROGRAM / EXHIBIT: STOP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Substance Use Counselor	0.16	\$20,748.00				\$20,748.00
Data Entry Specialist	0.05	\$1,786.00				\$1,786.00
TOTAL SALARIES	0.21	\$22,534.00				\$22,534.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____
Title: _____

Date: _____

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE**

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Control Number
HP-10-06376-AI

Invoice Number
6049A1BMAR080

Telephone: (415) 476-2977
FAX: (415) 476-8158

Contract Purchase DP No. _____

Fund Source: **RWPA**

Grant Code/Detail: **HCPD13/0801**

Invoicing Period: _____

FINAL invoice (check if Yes)

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2010 - February 29, 2012
EXHIBIT TERM: March 1, 2010 - February 28, 2011

ACE Control No. **3916-0TBC-A1B**

PROGRAM / EXHIBIT: Stonewall - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients
Substance Use Cnslng Hr - Individual	275	30							275	30
Substance Use Cnslng Hr - Group	180	30							180	30

Unduplicated Clients for Exhibit		30				
----------------------------------	--	----	--	--	--	--

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$27,500.00				\$27,500.00
Fringe Benefits	\$6,325.00				\$6,325.00
Total Personnel Expenses	\$33,825.00				\$33,825.00
Operating Expenses:					
Occupancy					
Materials and Supplies	\$834.00				\$834.00
General Operating					
Staff Travel					
Consultant/Subcontractor					
Other:					
Total Operating Expenses	\$834.00				\$834.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$34,659.00				\$34,659.00
Indirect Expenses	\$3,119.00				\$3,119.00
TOTAL EXPENSES	\$37,778.00				\$37,778.00
LESS: Initial Payment Recovery		-			
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES: _____

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____
Title: _____

Send to: SFDPH - AIDS OFFICE 1380 Howard, 4th Floor San Francisco, CA 94103 Attn: Contract Payments	SFDPH CHS/AIDS OFFICE Authorization For Payment: By: _____ Date: _____
--	--

DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Telephone: (415) 476-2977
FAX: (415) 476-8158

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2010 - February 29, 2012
EXHIBIT TERM: March 1, 2010 - February 28, 2011

Control Number

HP-10-06376-AI

Invoice Number

6049A1BMAR080

Contract Purchase DP No.

Fund Source:

RWPA

Grant Code/Detail:

HCPD13/0801

Invoicing Period:

FINAL invoice

(check it Yes)

ACE Control No.

3916-0TBC-A1B

PROGRAM / EXHIBIT: Stonewall - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Counselor	0.37	\$20,167.00				\$20,167.00
Psychologist	0.09	\$7,333.00				\$7,333.00
TOTAL SALARIES	0.46	\$27,500.00				\$27,500.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Date: _____

Title: _____

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE**

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Control Number

HP-12-06376-AI

Invoice Number

3916-A1MAR090

Telephone: (415) 476-2977
FAX: (415) 476-8158

Contract Purchase DP No. _____

Fund Source: RWPA

Grant Code/Detail: HCPD13/0901

Invoicing Period: _____

FINAL invoice (check if Yes)

ACE Control No. 3916-0TBC-A1

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2010- February 29, 2012
EXHIBIT TERM: March 1, 2011- February 29, 2012

PROGRAM / EXHIBIT: PHP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients
Case Management, Individual Hour	2,192	400							2,192	400
Primary Medical Care, Encounter	5,868	600							5,868	600
Mental Health, Hour	240	150							240	150
Substance Use Counseling Hr - Individual	240	150							240	150
CoE Coord, Planning & Evaluation	1,620	N/A							1,620	N/A

Unduplicated Clients for Exhibit 600

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$1,091,413.00				\$1,091,413.00
Fringe Benefits	\$209,266.00				\$209,266.00
Total Personnel Expenses	\$1,300,679.00				\$1,300,679.00
Operating Expenses:					
Occupancy					
Materials and Supplies					
General Operating					
Staff Travel					
Consultant/Subcontractor					
Other:					
Total Operating Expenses	\$12,614.00				\$12,614.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$1,313,293.00				\$1,313,293.00
Indirect Expenses	\$118,198.00				\$118,198.00
TOTAL EXPENSES	\$1,431,491.00				\$1,431,491.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES: _____

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____
Title: _____

Send to:	SFPDPH - AIDS OFFICE 1380 Howard, 4th Floor San Francisco, CA 94103 Attn: Contract Payments	SFPDPH CHS/AIDS OFFICE Authorization For Payment:
By:	_____	Date: _____

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE**

Appendix F-1d
PAGE B

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Telephone: (415) 476-2977
FAX: (415) 476-8158

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2010- February 29, 2012
EXHIBIT TERM: March 1, 2011- February 29, 2012

Control Number

HP-12-06376-AI

Invoice Number

3916-A1MAR090

Contract Purchase DP No. _____

Fund Source: RWPA

Grant Code/Detail: HCPD13/0901

Invoicing Period: _____

FINAL invoice _____ (check if Yes)

ACE Control No. 3916-0TBC-A1

PROGRAM / EXHIBIT: PHP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Physicians	2.12	\$356,754.00				\$356,754.00
Nurse Practitioners	0.97	\$125,000.00				\$125,000.00
Registered Nurses	0.64	\$90,000.00				\$90,000.00
Clinical Pharmacist (PharmD)	0.71	\$100,000.00				\$100,000.00
Medical Assistant	1.95	\$84,800.00				\$84,800.00
Licensed Social Worker	0.71	\$64,159.00				\$64,159.00
Case Manager (MSW)	1.47	\$101,449.00				\$101,449.00
Front Desk Clerk	0.75	\$27,909.00				\$27,909.00
Primary Investigator	0.01	\$2,503.00				\$2,503.00
Nurse Practitioner Sprvsr (NP)	0.07	\$9,846.00				\$9,846.00
CoE Coordinator (Analyst 4)	0.60	\$41,800.00				\$41,800.00
CoE Administrative Asst 3	0.19	\$8,645.00				\$8,645.00
CoE Info Tech - Programmer	0.89	\$78,548.00				\$78,548.00
TOTAL SALARIES	11.08	\$1,091,413.00				\$1,091,413.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Date: _____

Title: _____

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE**

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Control Number
HP-11-06376-AJ

Invoice Number
3916-A1AMAR090

Telephone: (415) 476-2977
FAX: (415) 476-8158

Contract Purchase DP No. _____

Fund Source: RWPA

Grant Code/Detail: HCPD13/0901

Invoicing Period: _____

FINAL invoice (check if Yes)

ACE Control No. 3916-0TBC-A1

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2010 - February 29, 2012
EXHIBIT TERM: March 1, 2011 - February 29, 2012

PROGRAM / EXHIBIT: AHP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients
Mental Health, Encounters	950	200							950	200
Case Management Hours	3,850								3,850	

Unduplicated Clients for Exhibit	200				
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EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$310,209.00				\$310,209.00
Fringe Benefits	\$65,271.00				\$65,271.00
Total Personnel Expenses	\$375,480.00				\$375,480.00
Operating Expenses:					
Occupancy	\$16,386.00				\$16,386.00
Materials and Supplies	\$5,621.00				\$5,621.00
General Operating	\$2,718.00				\$2,718.00
Staff Travel	\$1,283.00				\$1,283.00
Consultant/Subcontractor					
Other:					
Computer Network Charge	\$1,636.00				\$1,636.00
Total Operating Expenses	\$27,644.00				\$27,644.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$403,124.00				\$403,124.00
Indirect Expenses	\$36,281.00				\$36,281.00
TOTAL EXPENSES	\$439,405.00				\$439,405.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: SFDPH - AIDS OFFICE 1380 Howard, 4th Floor San Francisco, CA 94103 Attn: Contract Payments	SFDPH CHS/AIDS OFFICE Authorization For Payment:
By: _____	Date: _____

DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE

Appendix F-1e
PAGE B

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Control Number
HP-11-06376-AI

Invoice Number
3916-A1AMAR090

Telephone: (415) 476-2977
FAX: (415) 476-8158

Contract Purchase DP No. _____

Fund Source: RWPA
Grant Code/Detail: HCPD13/0901
Invoicing Period: _____

CONTRACT NAME: HIV Health Services

FINAL invoice (check if Yes)

CONTRACT TERM: March 1, 2010 - February 29, 2012
EXHIBIT TERM: March 1, 2011 - February 29, 2012

ACE Control No. 3916-0TBC-A1

PROGRAM / EXHIBIT: AHP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Psychiatrist	0.80	\$140,733.00				\$140,733.00
Case manager	2.60	\$125,874.00				
Clinical Supervisor	0.40	\$39,488.00				
Program Assistant	0.10	\$4,114.00				
TOTAL SALARIES	3.90	\$310,209.00				\$310,209.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____ Date: _____
Title: _____

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE**

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Telephone: (415) 476-2977
FAX: (415) 476-8158

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2010 - February 29, 2012
EXHIBIT TERM: March 1, 2011- February 29, 2012

Control Number
HP-12-06376-AI

Invoice Number
3916-A1MAR090

Contract Purchase DP No. _____

Fund Source: **RWPA**

Grant Code/Detail: **HCPD13/0901**

Invoicing Period: _____

FINAL invoice (check if Yes)

ACE Control No. **3916-0TBC-A1**

PROGRAM / EXHIBIT: STOP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients
Substance Use Cnsing (Phd) HOURS	271	35							271	35

Unduplicated Clients for Exhibit		35								
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EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$22,534.00				\$22,534.00
Fringe Benefits	\$4,480.00				\$4,480.00
Total Personnel Expenses	\$27,014.00				\$27,014.00
Operating Expenses:					
Occupancy	\$3,357.00				\$3,357.00
Materials and Supplies					
General Operating					
Staff Travel					
Consultant/Subcontractor					
Other:					
Utilities	\$316.00				\$316.00
Computer Network Charges	\$96.00				\$96.00
Total Operating Expenses	\$3,769.00				\$3,769.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$30,783.00				\$30,783.00
Indirect Expenses	\$2,770.00				\$2,770.00
TOTAL EXPENSES	\$33,553.00				\$33,553.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: SFDPH - AIDS OFFICE 1380 Howard, 4th Floor San Francisco, CA 94103 Attn: Contract Payments	SFDPH CHS/AIDS OFFICE Authorization For Payment:
By: _____	Date: _____

DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Telephone: (415) 476-2977
FAX: (415) 476-8158

CONTRACT NAME: HIV Health Services
CONTRACT TERM: March 1, 2010 - February 29, 2012
EXHIBIT TERM: March 1, 2011- February 29, 2012

Control Number
HP-12-06376-AI

Invoice Number
3916-A1MAR090

Contract Purchase DP No. _____

Fund Source: RWPA
Grant Code/Detail: HCPD13/0901
Invoicing Period: _____

FINAL invoice _____ (check if Yes)

ACE Control No. 3916-0TBC-A1

PROGRAM / EXHIBIT: STOP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Substance Use Counselor (PhD)	0.15	\$19,225.00				\$19,225.00
Data Entry Specialist	0.08	\$3,309.00				\$3,309.00
TOTAL SALARIES	0.23	\$22,534.00				\$22,534.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____
Title: _____

Date: _____

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE**

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Control Number
HP-11-06376-AI

Invoice Number
3916-A1MAR090

Telephone: (415) 476-2977
FAX: (415) 476-8158

Contract Purchase DP No. _____

Fund Source: **RWPA**

Grant Code/Detail: **HCPD13/0901**

Invoicing Period: _____

FINAL invoice (check if Yes)

ACE Control No. **3916-0TBC-A1**

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2011 - February 29, 2012
EXHIBIT TERM: March 1, 2011 - February 29, 2012

PROGRAM / EXHIBIT: Stonewall - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients	UOS	Clients
Substance Use Cnslng Hr - Individual	275	30							275	30
Substance Use Cnslng Hr - Group	135	30							135	30

Unduplicated Clients for Exhibit **30**

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$27,500.00				\$27,500.00
Fringe Benefits	\$6,325.00				\$6,325.00
Total Personnel Expenses	\$33,825.00				\$33,825.00
Operating Expenses:					
Occupancy					
Materials and Supplies	\$834.00				\$834.00
General Operating					
Staff Travel					
Consultant/Subcontractor					
Other:					
Total Operating Expenses	\$834.00				\$834.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$34,659.00				\$34,659.00
Indirect Expenses	\$3,119.00				\$3,119.00
TOTAL EXPENSES	\$37,778.00				\$37,778.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____
Title: _____

Send to: SFDPH - AIDS OFFICE 1380 Howard, 4th Floor San Francisco, CA 94103 Afn: Contract Payments	SFDPH CHS/AIDS OFFICE Authorization For Payment: By: _____ Date: _____
---	---

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY STATEMENT OF DELIVERABLES AND INVOICE**

Appendix F-1g
PAGE B

CONTRACTOR: Regents of the University of California
Address: Mail Remittance Cashier
UCSF Accounting Office
1855 Folsom Street, Suite 425
San Francisco, CA 94143-0815

Telephone: (415) 476-2977
FAX: (415) 476-8158

Control Number
HP-11-06376-AI

Invoice Number
3916-A1MAR090

Contract Purchase DP No.

Fund Source:
Grant Code/Detail:
Invoicing Period:

FINAL invoice (check if Yes)

ACE Control No.

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2011- February 29, 2012
EXHIBIT TERM: March 1, 2011 - February 29, 2012

PROGRAM / EXHIBIT: Stonewall - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Counselor	0.37	\$20,167.00				\$20,167.00
Psychologist (PhD)	0.09	\$7,333.00				\$7,333.00
TOTAL SALARIES	0.46	\$27,500.00				\$27,500.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____ Date: _____
Title: _____

