

**CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF PUBLIC HEALTH**

FIRST AMENDMENT TO GRANT AGREEMENT

BETWEEN

CITY AND COUNTY OF
SAN FRANCISCO

AND

SAN FRANCISCO AIDS FOUNDATION

FIRST AMENDMENT

This AMENDMENT of the, July 1st, 2021 Grant Agreement (the "Agreement") is dated as of **January 1st, 2023** and is made in the City and County of San Francisco, State of California, by and between the **SAN FRANCISCO AIDS FOUNDATION** ("Grantee") and the **City and County of San Francisco**, a municipal corporation ("City") acting by and through the **Department of Public Health** ("Department").

RECITALS

WHEREAS, the Agreement was competitively procured as required through RFP 39-2020 HIV RENTAL SUBSIDIES issued on November 4th, 2020 and this modification is consistent therewith; and

WHEREAS, the City's [name of Commission or Board of Supervisors] approved this Agreement by Resolution# _____ - _____ on _____;

WHEREAS, Grantee has submitted to the Agency the Application Documents (as hereinafter defined) seeking a grant for the purpose of funding the matters set forth in the Grant Plan (as defined in the Agreement); and

WHEREAS, the original grant agreement is being modified to increase the contract amount, extend the contract term, and update standard contractual clauses; and

WHEREAS, City and Grantee desire to execute this amendment to update the prior Agreement;

NOW, THEREFORE, City and Grantee agree to amend said Grant Agreement as follows:

- 1. Definitions.** Terms used and not defined in this Amendment shall have the meanings assigned to such terms in the Grant Agreement.
- 2. Modifications to the Agreement.** The Grant Agreement is hereby modified as follows:

(a) Article 3 Term.

Article 3 Term of the Grant Agreement currently reads as follows:

**ARTICLE 3
TERM**

3.1 Effective Date. This Agreement shall become effective when the Controller has certified to the availability of funds as set forth in Section 2.2 and the Department has notified Grantee thereof in writing.

3.2 Duration of Term. The term of this Agreement shall commence on **JULY 1ST, 2021** and expire on **JUNE 30TH, 2023**, unless earlier terminated as otherwise provided herein. Grantee shall not begin performance of its obligations under this Agreement until it receives written notice from City to proceed.

3.3 The City has **8 (eight)** options to renew the Agreement for a period of time span listed below each. The City may extend this Agreement beyond the expiration date by exercising an option at the City’s sole and absolute discretion and by modifying this Agreement as provided in Section 11.5, “Modification of this Agreement.”

- Option 1: 07/01/2023 – 06/30/2024
- Option 2: 07/01/2024 – 06/30/2025
- Option 3: 07/01/2025 – 06/30/2026
- Option 4: 07/01/2026 – 06/30/2027
- Option 5: 07/01/2027 – 06/30/2028
- Option 6: 07/01/2028 – 06/30/2029
- Option 7: 07/01/2029 – 06/30/2030
- Option 8: 07/01/2030 – 06/30/2031

Such section is hereby amended to read as follows:

**ARTICLE 3
TERM**

3.1 Effective Date. This Agreement shall become effective when the Controller has certified to the availability of funds as set forth in Section 2.2 and the Department has notified Grantee thereof in writing.

3.2 Duration of Term. The term of this Agreement shall commence on **JULY 1ST, 2021** and expire on **JUNE 30TH, 2031**, unless earlier terminated as otherwise provided herein. Grantee shall not begin performance of its obligations under this Agreement until it receives written notice from City to proceed.

3.3 The City has **0 (zero)** options to renew the Agreement for a period of time span listed below each. The City may extend this Agreement beyond the expiration date by exercising an option at the City’s sole and absolute discretion and by modifying this Agreement as provided in Section 17.2, “Modification.”

- Option 1: 07/01/2023 – 06/30/2024 Exercised
- Option 2: 07/01/2024 – 06/30/2025 Exercised
- Option 3: 07/01/2025 – 06/30/2026 Exercised

Option 4:	07/01/2026 – 06/30/2027	Exercised
Option 5:	07/01/2027 – 06/30/2028	Exercised
Option 6:	07/01/2028 – 06/30/2029	Exercised
Option 7:	07/01/2029 – 06/30/2030	Exercised
Option 8:	07/01/2030 – 06/30/2031	Exercised

(b) Section 4.6 Grantor Vaccination Policy.

Section 4.6 Grantor Vaccination Policy is hereby added in its entirety to read as follows in Article 4:

4.6 Grantor Vaccination Policy.

4.6 Grantor Vaccination Policy.

4.6.1 Grantee acknowledges that it has read the requirements of the 38th Supplement to Mayoral Proclamation Declaring the Existence of a Local Emergency (“Emergency Declaration”), dated February 25, 2020, and the Contractor Vaccination Policy for City Contractors and Grantees issued by the City Administrator (“Contractor Vaccination Policy”), as those documents may be amended from time to time. A copy of the Contractor Vaccination Policy can be found at: <https://sf.gov/confirm-vaccine-status-your-employees-and-subcontractors>.

4.6.2 A Contract or Grant subject to the Emergency Declaration is an agreement between the City and any other entity or individual and any subcontract under such agreement, where Covered Employees of the Contractor/Grantee or Subcontractor work in-person with City employees in connection with the work or services performed under the agreement at a City owned, leased, or controlled facility. Such agreements include, but are not limited to, professional services contracts, general services contracts, public works contracts, and grants. Contract or Grant includes such agreements currently in place or entered into during the term of the Emergency Declaration. Contract or Grant does not include an agreement with a state or federal governmental entity or agreements that do not involve the City paying or receiving funds.

4.6.3 In accordance with the Contractor Vaccination Policy, Grantee agrees that:

(i) Where applicable, Grantee shall ensure it complies with the requirements of the Contractor Vaccination Policy pertaining to Covered Employees, as they are defined under the Emergency Declaration and the Contractor Vaccination Policy, and insure such Covered Employees are either fully vaccinated for COVID-19 or obtain from Grantee an exemption based on medical or religious grounds; and

(ii) If Grantee grants Covered Employees an exemption based on medical or religious grounds, Grantee will promptly notify City by completing and submitting the Covered Employees Granted Exemptions Form (“Exemptions Form”), which can be found at <https://sf.gov/confirm-vaccine-status-your-employees-and-subcontractors> (navigate to “Exemptions” to download the form).

4.6.4 The City reserves the right to impose a more stringent COVID-19 vaccination policy for the San Francisco Department of Public Health, acting in its sole discretion.

(c) **Section 5.1 Maximum Amount of Grant Funds.**

Section 5.1 Maximum Amount of Grant Funds of the Grant Agreement currently reads as follows:

5.1 Maximum Amount of Grant Funds. In no event shall the amount of Grant Funds disbursed hereunder exceed **NINE MILLION, FOUR HUNDRED SEVEN THOUSAND, SIX HUNDRED THIRTY-THREE Dollars (\$9,407,633)**.

Such section is hereby amended to read as follows:

5.1 Maximum Amount of Grant Funds. In no event shall the amount of Grant Funds disbursed hereunder exceed **FIFTY-ONE MILLION, SEVENTY-FIVE THOUSAND, TWO HUNDRED THIRTEEN Dollars (\$51,075,213)**.

(d) **Section 9.5 Infringement Indemnity.**

Section 9.5 Infringement Indemnity is hereby added in its entirety to reads as follows in Article 9:

9.5 Infringement Indemnity. Grantee shall indemnify and hold City harmless from all loss and liability, including attorneys' fees, court costs and all other litigation expenses for any infringement of the patent rights, copyright, trade secret or any other proprietary right or trademark, and all other intellectual property claims of any person or persons arising directly or indirectly from the receipt by City, or any of its officers or agents, of Grantee's Services.

(e) **Article 18 Department Data and Security**

Article 18 Department Data and Security is hereby amended in its entirety to reads as follows as Article 18:

Article 18 Department Data and Security

18.1 Business Associate Agreement. The parties acknowledge that City is a Covered Entity as defined in the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and is required to comply with the HIPAA Privacy Rule governing the access, use, disclosure, transmission, and storage of protected health information (PHI) and the Security Rule under the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 ("the HITECH Act").

The parties acknowledge that CONTRACTOR will:

1. Do **at least one** or more of the following:
 - A. Create, receive, maintain, or transmit PHI for or on behalf of CITY/SFDPH (including storage of PHI, digital or hard copy, even if Grantee does not view the PHI or only does so on a random or infrequent basis); or
 - B. Receive PHI, or access to PHI, from CITY/SFDPH or another Business Associate of City, as part of providing a service to or for

CITY/SFDPH, including legal, actuarial, accounting, consulting, data aggregation, management, administrative, accreditation, or financial; or

C. Transmit PHI data for CITY/SFDPH and require access on a regular basis to such PHI. (Such as health information exchanges (HIEs), e-prescribing gateways, or electronic health record vendors)

FOR PURPOSES OF THIS AGREEMENT, CONTRACTOR IS A BUSINESS ASSOCIATE OF CITY/SFDPH, AS DEFINED UNDER HIPAA. CONTRACTOR MUST COMPLY WITH AND COMPLETE THE FOLLOWING ATTACHED DOCUMENTS, INCORPORATED TO THIS AGREEMENT AS THOUGH FULLY SET FORTH HEREIN:

1. **Appendix E SFDPH Business Associate Agreement (BAA) (08-03-2022)**
 2. **SFDPH Attestation 1 PRIVACY (06-07-2017)**
 3. **SFDPH Attestation 2 DATA SECURITY (06-07-2017)**
2. **NOT do any of the activities listed above in subsection 1;**

Grantee is not a Business Associate of CITY/SFDPH. Appendix E and attestations are not required for the purposes of this Agreement.

18.2 Management of City Data and Confidential Information.

18.2.1 Use of City Data and Confidential Information. Grantee agrees to hold City's Data received from, or collected on behalf of, the City, in strictest confidence. Grantee shall not use or disclose City's Data except as permitted or required by the Agreement or as otherwise authorized in writing by the City. Any work using, or sharing or storage of, City's Data outside the United States is subject to prior written authorization by the City. Access to City's Data must be strictly controlled and limited to Grantee's staff assigned to this project on a need-to-know basis only. Grantee is provided a limited non-exclusive license to use the City Data solely for performing its obligations under the Agreement and not for Grantee's own purposes or later use. Nothing herein shall be construed to confer any license or right to the City Data or Confidential Information, by implication, estoppel or otherwise, under copyright or other intellectual property rights, to any third-party. Unauthorized use of City Data by Grantee, subcontractors or other third-parties is prohibited. For purpose of this requirement, the phrase "unauthorized use" means the data mining or processing of data, stored or transmitted by the service, for commercial purposes, advertising or advertising-related purposes, or for any purpose other than security or service delivery analysis that is not explicitly authorized.

18.2.2 Disposition of Confidential Information. Upon request of City or termination or expiration of this Agreement, and pursuant to any document retention period required by this Agreement, Grantee shall promptly, but in no event later than thirty (30) calendar days, return all data given to or collected by Grantee on City's behalf, which includes all original media. Once Grantee has received written confirmation from City that City's Data has been successfully transferred to City, Grantee shall within ten (10) business days clear or purge all City Data from its servers, any hosted environment Grantee has used in performance of this Agreement, including its subcontractors environment(s), work stations that were used to process

the data or for production of the data, and any other work files stored by Grantee in whatever medium. Grantee shall provide City with written certification that such purge occurred within five (5) business days of the purge. Secure disposal shall be accomplished by “clearing,” “purging” or “physical destruction,” in accordance with National Institute of Standards and Technology (NIST) Special Publication 800-88 or most current industry standard.

18.3 Ownership of City Data. The Parties agree that as between them, all rights, including all intellectual property rights, in and to the City Data and any derivative works of the City Data is the exclusive property of the City.

18.4 Protected Health Information. Grantee, all subcontractors, all agents and employees of Grantee and any subcontractor shall comply with all federal and state laws regarding the transmission, storage and protection of all private health information disclosed to Grantee by City in the performance of this Agreement. Grantee agrees that any failure of Grantee to comply with the requirements of federal and/or state and/or local privacy laws shall be a material breach of the Contract. In the event that City pays a regulatory fine, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible use or disclosure of protected health information given to Grantee or its subcontractors or agents by City, Grantee shall indemnify City for the amount of such fine or penalties or damages, including costs of notification. In such an event, in addition to any other remedies available to it under equity or law, the City may terminate the Contract.

The Appendices listed below are Amended as follows:

(f) Delete Appendix A, and replace in its entirety with Appendix A to Agreement as amended. Dated: Amendment 01/01/2023.

(g) Delete Appendix A-1 from Agreement as amended. Dated: Amendment 01/01/2023.

(h) Delete Appendix B, and replace in its entirety with Appendix B to Agreement as amended. Dated: Amendment 01/01/2023.

(i) Attachment 1 is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(j) Attachment 1.1 is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(k) Attachment 2 is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(l) Attachment 2.1b is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(m) Attachment 2.1c is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(n) Attachment 2.1d is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(o) Attachment 2.1e is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(p) Attachment 2.1f is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(q) Attachment 2.1g is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(r) Attachment 2.1h is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(s) Attachment 2.1i is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(t) Delete Appendix C, and replace in its entirety with Appendix C to Agreement as amended. Dated: Amendment 01/01/2023.

(u) Attachment C.1b is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(v) Attachment C.1c is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(w) Attachment C.1d is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(x) Attachment C.1e is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(y) Attachment C.1f is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(z) Attachment C.1g is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(aa) Attachment C.1h is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(ab) Attachment C.1i is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

(ac) Delete Appendix D, and replace in its entirety with Appendix D to Agreement as amended. Dated: Amendment 01/01/2023.

(ad) Delete Appendix E, and replace in its entirety with Appendix E to Agreements as amended. Dated: OCPA & CAT v8/3/2022 and Attestation Forms 06-07-2017.

(ae) Appendix K is hereby added in its entirety this Amendment and fully incorporated within the Agreement. Dated: Amendment 01/01/2023.

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 Grant Agreement shall remain unchanged and in full force and effect.

IN WITNESS WHEREOF, the parties hereto have caused this Amendment to the Grant Agreement to be duly executed as of the date first specified herein.

CITY
CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF PUBLIC HEALTH

GRANTEE:
SAN FRANCISCO AIDS FOUNDATION

By: _____
Grant Colfax, MD
Director of Health

Approved as to Form:

David Chiu
City Attorney

DocuSigned by:
By: *Tyler A. Termeer*
54AC9F60A3234EE... 1/24/2023 | 11:14:46 PST

Print Name: **Tyler Termeer**
Title: **Chief Executive Officer**

Federal Tax ID #: 94-2927405

City Vendor Number: 0000011638

By: _____
Deputy City Attorney

Appendix A--Definition of Eligible Expenses

The term “Eligible Expenses” shall mean expenses incurred and paid by Grantee during the term of this Agreement in implementing the terms of the Grant Plan.

I. All Eligible Expenses must:

- (1) Be listed in the Grant Budget of Appendix B of this Agreement.
 - i. Formal modification to this Agreement or a revision to Grant Budget as specified in Appendix B of this Agreement.

II. Eligible Expenses shall specifically exclude:

- (1) any item submitted for funding not listed in the applicable Grant Budget listed in Appendix B of this Agreement.

Appendix B--Definition of Grant Plan

1. General Grant Plan Terms

A. Grant Administrator:

In performing the Services hereunder, Grantee shall report to **Bill Blum**, Grant Administrator for the City, or his / her designee.

B. Reports:

Grantee shall comply and submit reports as required in Article 6 of the Agreement. Including required reports outlined in the delivery of the scope of services.

C. Evaluation:

Grantee shall participate as requested with the City, State and/or Federal government in evaluative studies designed to show the effectiveness of Grantee's Services. Grantee agrees to meet the requirements of and participate in the evaluation program and management information systems of the City.

The City agrees that any final City evaluation reports generated through the City evaluation program shall be made available to Grantee within thirty (30) working days. Grantee 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:

Grantee warrants 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 fulfill the terms of the Grant Plan. Failure to maintain these licenses and permits shall constitute a material breach of this Agreement.

E. Adequate Resources:

Grantee agrees that it has secured or shall secure at its own expense all persons, employees and equipment required to fulfill the terms of the Grant Plan required under this Agreement.

F. Infection Control, Health and Safety:

(1) Grantee must have a Bloodborne Pathogen (BBP) Exposure Control plan for its employees, agents and Sub-Grantees 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 recordkeeping.

(2) Grantee must demonstrate personnel policies/procedures for protection of its employees, agents, Sub-Grantees 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) Grantee 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) Grantee is responsible for site conditions, equipment, health and safety of their employees, and all other persons who work or visit the job site.

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

(7) Grantee assumes responsibility for procuring all medical equipment and supplies for use by its employees, agents and Sub-Grantees, including safe needle devices, and provides and documents all appropriate training.

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

G. Aerosol Transmissible Disease Program, Health and Safety:

(1) Grantee must have an Aerosol Transmissible Disease (ATD) Program as defined in the California Code of Regulations, Title 8, Section 5199, Aerosol Transmissible Diseases (<http://www.dir.ca.gov/Title8/5199.html>), and demonstrate compliance with all requirements including, but not limited to, exposure determination, screening procedures, source control measures, use of personal protective equipment, referral procedures, training, immunization, post-exposure medical evaluations/follow-up, and recordkeeping.

(2) Grantee shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as Aerosol Transmissible Disease 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.

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

(4) Grantee assumes responsibility for procuring all medical equipment and supplies for use by their staff, including Personnel Protective Equipment such as respirators, and provides and documents all appropriate training.

H. Acknowledgment of Funding:

Grantee 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."

I. Admission Policy:

Admission policies for the Grant Plan 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 Grant Plan listed in Attachment 1 of Appendix B, 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.

J. Grievance Procedure:

Grantee 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. Grantee 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.

K. 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) Grantee agrees that revenues or fees received by Grantee 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 Grantee from its billing to the City.

L. Patients Rights:

All applicable Patients Rights laws and procedures shall be implemented.

M. Under-Utilization Reports:

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

N. Quality Assurance:

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

- 1) Staff evaluations completed on an annual basis.
- 2) Personnel policies and procedures in place, reviewed and updated annually.
- 3) Board Review of Quality Assurance Plan.

2. Detailed Grant Plan

A. Attachment 1 Grant Plans

Grant Plan Attachment	Grant Plan Term	Funding Source
Attachment 1 Grant Plan Summary / Appendix A	07/01/2021 – 06/30/2031	General Fund
Attachment 1.1 HIV Rental Subsidies / Appendix A-1	07/01/2021 – 06/30/2031	General Fund

B. Attachment 2 Grant Budget

C. Attachment 2.1 Grant Budget Detail

Grant Budget Detail Attachment	Grant Budget Detail Term	Funding Source
Attachment 2 Grant Budget Summary / Appendix B	07/01/2021 – 06/30/2031	General Fund
Attachment 2.1 HIV Rental Subsidies / Appendix B-1	07/01/2021 – 06/30/2022	General Fund

Attachment 2.1a HIV Rental Subsidies / Appendix B-1a	07/01/2022 – 06/30/2023	General Fund
Attachment 2.1b HIV Rental Subsidies / Appendix B-1b	07/01/2023 – 06/30/2024	General Fund
Attachment 2.1c HIV Rental Subsidies / Appendix B-1c	07/01/2024 – 06/30/2025	General Fund
Attachment 2.1d HIV Rental Subsidies / Appendix B-1d	07/01/2025 – 06/30/2026	General Fund
Attachment 2.1e HIV Rental Subsidies / Appendix B-1e	07/01/2026 – 06/30/2027	General Fund
Attachment 2.1f HIV Rental Subsidies / Appendix B-1f	07/01/2027 – 06/30/2028	General Fund
Attachment 2.1g HIV Rental Subsidies / Appendix B-1g	07/01/2028 – 06/30/2029	General Fund
Attachment 2.1h HIV Rental Subsidies / Appendix B-1h	07/01/2029 – 06/30/2030	General Fund
Attachment 2.1i HIV Rental Subsidies / Appendix B-1i	07/01/2030 – 06/30/2031	General Fund

3. Services Provided by Attorneys. Any services to be provided by a law firm or attorney to the City must be reviewed and approved in writing in advance by the City Attorney. No invoices for services provided by law firms or attorneys, including, without limitation, as Sub-Grantees of Grantee, will be paid unless the provider received advance written approval from the City Attorney.

GRANT PLAN (CONTRACT) SUMMARY

Provider:	San Francisco AIDS Foundation											
Total Contract:	\$46,070,677						CID# 1000020925					
Funding Source:	HHS COUNTY GF											
Program Name:	Rental Subsidies											
System of Care:	HIV Health Services			RFP#: 39-2020								
Address / Phones:	1035 Market Street, Suite 400, San Francisco, CA 94103, Telephone/FAX: 415-487-3000/415-487-3094											
Contact Person:	LB Honey-Brooks, Chief Program Officer, lbbrooks@sfaf.org, 415-487-3078 / Michelle Lee, Government Contracts Manager, mlee@sfaf.org, 415-487-3068											
Contract Term:	7/1/2021-6/30/2031											
Appendices:	A-1 / B-1						A-1 / B-1a					
	Standard		Shallow		Partial		Standard		Shallow		Partial	
Funding Amount:	\$3,479,856		\$867,657		\$108,093		\$3,704,075		\$816,908		\$112,847	
Unspent Funding:	-\$89,399											
Funding Term:	7/1/21-6/30/22						7/1/22 - 6/30/23					
Numbers of UOS and UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
Residential Program and Subsidies	89,060	244	26,645	73	4,745	13	90,155	247	26,645	73	5,475	15
Total UDC for Program	330			Total UDC is not a sum of UDC from each mode of service.			335			Total UDC is not a sum of UDC from each mode of service.		
Appendices:	A-1 / B-1b						A-1 / B-1c					
	Standard		Shallow		Partial		Standard		Shallow		Partial	
Funding Amount:	\$3,704,076		\$816,908		\$112,846		\$3,704,075		\$816,908		\$112,847	
Funding Term:	7/1/23 - 6/30/24						7/1/24 - 6/30/25					
Numbers of UOS and UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
Residential Program and Subsidies	90,155	247	26,645	73	5,475	15	90,155	247	26,645	73	5,475	15
Total UDC for Program	335			Total UDC is not a sum of UDC from each mode of service.								
Appendices:	A-1 / B-1d						A-1 / B-1e					
	Standard		Shallow		Partial		Standard		Shallow		Partial	
Funding Amount:	\$3,704,075		\$816,908		\$112,847		\$3,704,075		\$816,908		\$112,847	
Funding Term:	7/1/25 - 6/30/26						7/1/26 - 6/30/27					
Numbers of UOS and UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
Residential Program and Subsidies	90,155	247	26,645	73	5,475	15	90,155	247	26,645	73	5,475	15
Total UDC for Program	335			Total UDC is not a sum of UDC from each mode of service.								
Appendices:	A-1 / B-1f						A-1 / B-1g					
	Standard		Shallow		Partial		Standard		Shallow		Partial	
Funding Amount:	\$3,704,075		\$816,908		\$112,847		\$3,704,075		\$816,908		\$112,847	
Funding Term:	7/1/27 - 6/30/28						7/1/28 - 6/30/29					
Numbers of UOS and UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
Residential Program and Subsidies	90,155	247	26,645	73	5,475	15	90,155	247	26,645	73	5,475	15
Total UDC for Program	335			Total UDC is not a sum of UDC from each mode of service.								

Appendices:	A-1 / B-1h						A-1 / B-1i					
	Standard		Shallow		Partial		Standard		Shallow		Partial	
Funding Amount:	\$3,704,075		\$816,908		\$112,847		\$3,704,075		\$816,908		\$112,847	
Funding Term:	7/1/29 - 6/30/30						7/1/23 - 6/30/24					
Numbers of UOS and UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
Residential Program and Subsidies	90,155	247	26,645	73	5,475	15	90,155	247	26,645	73	5,475	15
Total UDC for Program	335		Total UDC is not a sum of UDC from each mode of service.									
Definition of UOS:	One Unit of Service is One Day Subsidy											

Target Population:

STANDARD RENTAL SUBSIDY PROGRAM (STD-RSP)
 The San Francisco AIDS Foundation will serve all ethnicities and populations within San Francisco, with focused expertise to meet the unique needs of the primary focus of this program which is to serve the following clients of the STD-RSP targeted population: San Francisco residents with disabling HIV/AIDS who are homeless, at risk of homelessness or marginally housed, and have extremely low incomes, which is defined by HUD, for new clients, as 30% of median income. Program participants accepted into the program prior to July 1, 1998 are under different eligibility criteria that is very low income 50% or below median income.

SHALLOW RENTAL SUBSIDY (S-RSP)
 The San Francisco AIDS Foundation will serve all ethnicities and populations within San Francisco, with focused expertise to meet the unique needs of the primary focus of this program which is to serve the following clients of the S-RSP targeted population: San Francisco residents; HIV-positive who are chronically, currently or imminently homeless due to rent burden exceeding 50% of their income. Additionally, clients are derived from all racial and ethnic backgrounds, and meet the "severe need" or "special populations" definition who may have a history or are active drug users and/or have co-existing chronic psychiatric conditions. All clients will be extremely low income (client annual income will not exceed 30% of median income as defined by HUD).

PARTIAL RENTAL SUBSIDY (P-RSP)
 The San Francisco AIDS Foundation will serve all ethnicities and populations within San Francisco, with focused expertise to meet the unique needs of the primary focus of this program which is to serve the following clients of the P-RSP targeted population: San Francisco residents; AIDS/HIV disabling who are imminently homeless due to rent burden exceeding 50% of their income. Participants are referred to the program from the City and County of San Francisco's Plus Housing Program managed by Mayor's Office of Housing and Community Development (MOHCD) and can live independently or with in-home assistance.

Description of Services:

STANDARD RENTAL SUBSIDY PROGRAM (STD-RSP)

Provide monthly financial assistance in the form of a rental subsidy to clients with disabling HIV or AIDS to help clients secure and maintain stable, safe, and affordable housing.

SHALLOW RENTAL SUBSIDY (S-RSP)

Provide monthly financial assistance in the form of a rental subsidy to extremely low-income HIV+ clients engaged in care at San Francisco's Centers of Excellence and other community providers of HIV care, as well as individuals exiting transitional housing to help them secure and maintain stable, safe and affordable housing.

PARTIAL RENTAL SUBSIDY (P-RSP)

Provide financial assistance in the form of rental subsidy to people with disabling HIV or AIDS who are in stable housing but who are imminently homeless because a high percentage (50% or more) of their income is paid in rent.

I. IDENTIFIERS

Program Name / Address San Francisco AIDS Foundation – HIV Rental Subsidies

1035 Market St., Suite 400, SF, CA 94103

415-487-3000 / Fax: 415-487-3009

LB Honey-Brooks, Chief Program Officer, lbbrooks@sfaf.org, 415-487-3078 /

Program Contact: Michelle Lee, Government Contracts Manager, mlee@sfaf.org, 415-487-3068

II. NATURE OF DOCUMENT Amendment

III. GOALS

STANDARD RENTAL SUBSIDY PROGRAM (STD-RSP)

The program's goal is to provide monthly financial assistance in the form of a rental subsidy to clients with disabling HIV or AIDS to help clients secure and maintain stable, safe, and affordable housing.

SHALLOW RENTAL SUBSIDY (S-RSP)

The program's goal is to provide monthly financial assistance in the form of a rental subsidy to extremely low-income HIV+ clients engaged in care at San Francisco's Centers of Excellence and other community providers of HIV care, as well as individuals exiting transitional housing to help them secure and maintain stable, safe, and affordable housing.

PARTIAL RENTAL SUBSIDY (P-RSP)

The program's goal is to provide financial assistance in the form of rental subsidy to people with disabling HIV or AIDS who are in stable housing but who are imminently homeless because a high percentage (50% or more) of their income is paid in rent.

IV. TARGET POPULATION

The San Francisco AIDS Foundation welcomes all San Franciscans in need and will serve all ethnicities and populations. The primary focus of this program is to serve the following clients, anyone who falls outside these populations will be referred to other programs, either within SFAF or to an appropriate agency or city program:

STANDARD RENTAL SUBSIDY PROGRAM (STD-RSP)

STD-RSP targeted population are San Francisco residents with disabling HIV/AIDS who are homeless, at risk of homelessness or marginally housed, and have extremely low incomes, which is defined by HUD, for new clients, as 30% of median income. Program participants accepted into the program prior to July 1, 1998, are under different eligibility criteria that are very low income 50% or below median income.

New rental subsidy recipients are in the process of learning how to live independently or are already capable of living independently. Their housing situation may be within unstable living environments or may be imminently or chronically homeless. Clients are referred from the City and County of San Francisco Plus Housing Program managed by Mayor's Office of Housing and Community Development (MOHCD). Additionally, clients are derived from all racial and ethnic backgrounds, and often meet the "severe need" or "special populations" definition having a history or are active drug users and/or have co-existing chronic psychiatric conditions. Initially Plus Housing will prioritize referral of people who meet program criteria and are ready to exit one of the Residential Care Facilities for the Chronically Ill (RCFCI) or the Transitional Residential Care Facilities (TRCF) serving people living with HIV/AIDS in San Francisco to create vacancies for people in need of a higher level of care.

STD-RSP provides rental assistance for our participant's household. A household is defined as one or more persons sharing the household, which may include an individual's significant other, husband, wife, child(ren), grandparent, sibling, parent, etc.

San Francisco AIDS Foundation
HIV Rental Subsidies

Appendix A-1
07/01/2021 – 06/30/2031
General Fund

SHALLOW RENTAL SUBSIDY (S-RSP)

S-RSP targeted population is San Francisco residents; HIV-positive who are chronically, currently, or imminently homeless due to rent burden exceeding 50% of their income. Additionally, clients are derived from all racial and ethnic backgrounds, and meet the “severe need” or “special populations” definition who may have a history or are active drug users and/or have co-existing chronic psychiatric conditions. All clients will be extremely low income (client annual income will not exceed 30% of median income as defined by HUD).

PARTIAL RENTAL SUBSIDY (P-RSP)

P-RSP targeted population is San Francisco residents; AIDS/HIV disabling who are imminently homeless due to rent burden exceeding 50% of their income. Participants are referred to the program from the City and County of San Francisco’s Plus Housing Program managed by Mayor’s Office of Housing and Community Development (MOHCD) and can live independently or with in-home assistance.

All clients will be very low-income (client income will not exceed 50% of median income). If in a roommate situation or living as a couple and/or family, the client’s portion of rent must be more than 50% of his/her income.

- a) **Third Party Reimbursement:** SFAF assures that all HIV Health Services (HHS) funds are only used to pay for services that are not reimbursed by any other funding source.
- b) **Low Income:** Client enrollment priority is reserved for San Francisco residents who have low incomes and are uninsured. Secondary enrollment is reserved for San Francisco residents who have low incomes and are underinsured. Low Income status is equal to 500% of the Federal Poverty Level (FPL) as defined by the US Department of Health and Human Services.
- c) **Client Eligibility:** Client HIV diagnosis is confirmed at intake. Client eligibility determination for residency, low-income, and insurance status is confirmed at intake and at 12-month intervals thereafter and must be documented in the client file or in ARIES.

V. MODALITIES / INTERVENTIONS: Units of Service (UOS) and Unduplicated Clients (UDC)

Funds / Term	Unit of Service Description – Rental Subsidy	UOS	UDC
A-1 / B-1 General Fund 07/01/21 – 06/30/22	Housing, Resident Days – Standard 244 clients x 365 days = 89,060 Rental Subsidy Days	89,060	244
	Housing, Resident Days – Shallow 73 clients x 365 days = 26,645 Rental Subsidy Days	26,645	73
	Housing, Resident Days – Partial 13 clients x 365 days = 4,745 Rental Subsidy Days	4,745	13
	Total UOS Provided and UDC Served	120,450	330
Funds / Term	Unit of Service Description – Rental Subsidy	UOS	UDC
A-1 / B-1a General Fund 07/01/22 – 06/30/23	Housing, Resident Days – Standard 247 clients x 365 days = 90,155 Rental Subsidy Days	90,155	247
	Housing, Resident Days – Shallow 73 clients x 365 days = 26,645 Rental Subsidy Days	26,645	73
	Housing, Resident Days – Partial 15 clients x 365 days = 5,475 Rental Subsidy Days	5,475	15
	Total UOS Provided and UDC Served	122,275	335

San Francisco AIDS Foundation
HIV Rental Subsidies

Appendix A-1
07/01/2021 – 06/30/2031
General Fund

Funds / Term	Unit of Service Description – Rental Subsidy	UOS	UDC
A-1 / B-1b General Fund 07/01/23 – 06/30/24	Housing, Resident Days – Standard 247 clients x 365 days = 90,155 Rental Subsidy Days	90,155	247
	Housing, Resident Days – Shallow 73 clients x 365 days = 26,645 Rental Subsidy Days	26,645	73
	Housing, Resident Days – Partial 15 clients x 365 days = 5,475 Rental Subsidy Days	5,475	15
Total UOS Provided and UDC Served		122,275	335
Funds / Term	Unit of Service Description – Rental Subsidy	UOS	UDC
A-1 / B-1c General Fund 07/01/24 – 06/30/25	Housing, Resident Days – Standard 247 clients x 365 days = 90,155 Rental Subsidy Days	90,155	247
	Housing, Resident Days – Shallow 73 clients x 365 days = 26,645 Rental Subsidy Days	26,645	73
	Housing, Resident Days – Partial 15 clients x 365 days = 5,475 Rental Subsidy Days	5,475	15
Total UOS Provided and UDC Served		122,275	335
Funds / Term	Unit of Service Description – Rental Subsidy	UOS	UDC
A-1 / B-1d General Fund 07/01/25 – 06/30/26	Housing, Resident Days – Standard 247 clients x 365 days = 90,155 Rental Subsidy Days	90,155	247
	Housing, Resident Days – Shallow 73 clients x 365 days = 26,645 Rental Subsidy Days	26,645	73
	Housing, Resident Days – Partial 15 clients x 365 days = 5,475 Rental Subsidy Days	5,475	15
Total UOS Provided and UDC Served		122,275	335
Funds / Term	Unit of Service Description – Rental Subsidy	UOS	UDC
A-1 / B-1e General Fund 07/01/26 – 06/30/27	Housing, Resident Days – Standard 247 clients x 365 days = 90,155 Rental Subsidy Days	90,155	247
	Housing, Resident Days – Shallow 73 clients x 365 days = 26,645 Rental Subsidy Days	26,645	73
	Housing, Resident Days – Partial 15 clients x 365 days = 5,475 Rental Subsidy Days	5,475	15
Total UOS Provided and UDC Served		122,275	335
Funds / Term	Unit of Service Description – Rental Subsidy	UOS	UDC
A-1 / B-1f General Fund 07/01/27 – 06/30/28	Housing, Resident Days – Standard 247 clients x 365 days = 90,155 Rental Subsidy Days	90,155	247
	Housing, Resident Days – Shallow 73 clients x 365 days = 26,645 Rental Subsidy Days	26,645	73
	Housing, Resident Days – Partial 15 clients x 365 days = 5,475 Rental Subsidy Days	5,475	15
Total UOS Provided and UDC Served		122,275	335
Funds / Term	Unit of Service Description – Rental Subsidy	UOS	UDC
A-1 / B-1g General Fund 07/01/28 – 06/30/29	Housing, Resident Days – Standard 247 clients x 365 days = 90,155 Rental Subsidy Days	90,155	247
	Housing, Resident Days – Shallow	26,645	73

San Francisco AIDS Foundation
HIV Rental Subsidies

Appendix A-1
07/01/2021 – 06/30/2031
General Fund

	73 clients x 365 days = 26,645 Rental Subsidy Days		
	Housing, Resident Days – Partial		
	15 clients x 365 days = 5,475 Rental Subsidy Days	5475	15
Total UOS Provided and UDC Served		122,275	335
Funds / Term	Unit of Service Description – Rental Subsidy	UOS	UDC
A-1 / B-1h General Fund 07/01/29 – 06/30/30	Housing, Resident Days – Standard		
	247 clients x 365 days = 90,155 Rental Subsidy Days	90,155	247
	Housing, Resident Days – Shallow		
	73 clients x 365 days = 26,645 Rental Subsidy Days	26,645	73
	Housing, Resident Days – Partial		
	15 clients x 365 days = 5,475 Rental Subsidy Days	5475	15
Total UOS Provided and UDC Served		122,275	335
Funds / Term	Unit of Service Description – Rental Subsidy	UOS	UDC
A-1 / B-1i General Fund 07/01/30 – 06/30/31	Housing, Resident Days – Standard		
	247 clients x 365 days = 90,155 Rental Subsidy Days	90,155	247
	Housing, Resident Days – Shallow		
	73 clients x 365 days = 26,645 Rental Subsidy Days	26,645	73
	Housing, Resident Days – Partial		
	15 clients x 365 days = 5,475 Rental Subsidy Days	5475	15
Total UOS Provided and UDC Served		122,275	335

VI. METHODOLOGY

The San Francisco AIDS Foundation (SFAF) Rental Subsidy Programs will operate between the hours of 9 a.m. to 5 p.m. Monday through Friday at 1035 Market Street, San Francisco.

STANDARD RENTAL SUBSIDY (STD-RSP)

Outreach, Recruitment, and Promotion

As subsidy slots become available, SFAF staff calls the MOHCD Plus Housing program to get names as the single referral mechanism.

Admission, Enrollment, and Intake Criteria and Process

Subsidy Eligibility Criteria

- a. Resident of San Francisco
- b. Gross Annual Family Income no greater than 30% of median income as defined by HUD (2022).

Family Unit	Income Cap
1 Person Family	\$39,150
2 Person Family	\$44,750
3 Person Family	\$50,350
4 Person Family	\$55,900

Family Unit	Income Cap
5 Person Family	\$60,400
6 Person Family	\$64,850
7 Person Family	\$69,350
8 Person Family	\$73,800

- c. Individuals must be able to or be assisted to secure their own lease, and to be in the process of learning how to live independently or be capable of living independently in the unit once a lease agreement is signed.
- d. Disabling HIV or AIDS diagnosis.

Once referred to the program, the Non-Medical Case Manager (NMCM) will meet with the client to verify that eligibility criteria for the subsidy still apply to the client's current circumstances. SFAF provides the Plus Housing program staff with

updates on all individual referrals. The Housing and Benefits Manager maintains regular contact with MOHCD Plus Housing to ensure the referral process functions as intended.

A second assessment will be made by the NMCM of the client's ability to live independently or the client is in the process of learning how to live independently. If in question, the NMCM will refer the client to a medical or mental health provider for a formal assessment. If the assessment indicates that the client is unable to live independently, the NMCM links him/her to appropriate advocacy and notify the Plus Housing program of the client's particular housing needs.

Clients found not to be currently eligible for the program (for instance, those who no longer meet the program eligibility criteria) are referred to Plus Housing for a referral to the next available appropriate housing program. If the client's eligibility changes later, s/he is re-referred to SFAF for consideration when there is another opening in the Rental Subsidy Program.

Acceptance into the Program

Upon completion of the eligibility review, the NMCM goes over the STD-RSP policies and procedures booklet with the client. This document describes both the program and client general requirements and expectations. Then, NMCM completes the intake and updates electronic information in ARIES and SFAF's internal database.

Upon initial acceptance into the program, the prospective subsidy recipient is also given information regarding the unit size and rent cap for which s/he has been approved and a packet of information to assist in the housing search. This packet includes a letter of introduction explaining the subsidy program that clients may present to prospective landlords.

Individual Housing Search

The NMCM is available to clients to assist in their housing search by providing them materials, coaching and training, how to complete a rental application, how to conduct a housing interview, how to present the subsidy program to landlords, how to protect their confidentiality rights and inform them about their right and responsibilities as a tenant with fixed income and a disability. NMCM provides clients with continuing support, suggestions, organizational and informational tips, and landlord/housing advocacy to assist with the housing search. NMCM works in coordination with clients and any other City's service providers assisting them in their housing search.

Client Confidentiality

SFAF maintains a Doing Business As fictitious business name known as the San Francisco Housing Coalition (SFHC). All rental subsidy payments are sent on the Coalition's Letterhead. The SFHC has its own phone number, business cards, letterhead stationery webpage and checks, thus ensuring that client confidentiality regarding HIV status is maintained by the program.

Prospective Unit and House Inspections

When clients locate a housing unit, the NMCM inspects the unit, following the Housing Quality Standards (HQS) procedure to ensure the unit meets minimum requirements criteria for health and safety. Every NMCM is a certified house inspector, who can conduct an inspection on demand for new clients, moves or when clients need documented evidence to present to landlords/property manager for building maintenance or tenant/landlords related disputes.

SFAF HQS are adapted from the HUD guidelines, which defines the minimum requirements that ensure the unit is habitable, safe, and sanitary. The prospective client notifies the NMCM the need to inspect a unit by showing a completed, but not necessarily signed lease, rental agreement, or a letter of intent to rent the unit. At all points in the inspection process described below, clients are either directly involved with coordinating the inspection with the landlord or are in communication with the NMCM as the process proceeds.

A NMCM conducts the HQS within a week of the request. The unit is assessed in the following areas during each inspection: kitchen equipment, bathroom fixtures, building exterior, heating, and plumbing conditions, general health and safety conditions, electrical fixtures, outlets, windows, locks, doors, conditions of the walls, floors, and ceilings. The NMCM informs the client and landlord of all inspection results. A copy of the Unit Condition and Inventory Survey, which documents the inspection is placed in the individual client's chart.

If the unit fails the initial inspection, the NMCM coordinates a second HQS when the failed items have been reported as corrected by the landlord. If problems with the apartment still exist after the second inspection, the NMCM arranges for a third inspection to ensure that all initially documented problems have been corrected. If the apartment does not pass the

**San Francisco AIDS Foundation
HIV Rental Subsidies**

**Appendix A-1
07/01/2021 – 06/30/2031
General Fund**

third inspection, clients are asked to seek another unit. Once the unit passes the HQS, the NMCM notifies the client. An appointment is set up to complete the program's final paperwork, determine his/her rental share and agree upon a timeline for the first rental subsidy payment to be sent to the landlord.

Rental Share Calculation

The SFAF subsidy amount is the difference between the total rent for the unit and the client's rental share. The client's rental share is based on 30% of the client's total adjusted monthly family income.

The NMCM is responsible for reviewing, and if necessary, making a recalculation of all program participants' rental share on at least an annual basis based on the client's income at that time. The program agreement advises subsidy recipients that SFAF expects notification if their monthly income or rent increases or decreases by \$40 at any other time and if there are changes in landlord/property managers or household configuration.

Return to Work Efforts

The program supports and encourages clients' efforts to return to work and staff is trained to counsel clients regarding work related issues. The program has policies and procedures to support rental subsidy clients that have been receiving disability benefits and are interested in working. A three-step policy is designed to allow clients to try to explore if work is possible before it affects their participation in the rental subsidy program. It is also based on the idea that clients will keep their NMCM informed of their work situation on a regular basis.

Subsidy Activation

Upon completion of the rent share calculation, the NMCM submits the paperwork to the Housing and Benefits Manager (HBM) for revision and final approval. The HBM then forwards subsidy packets to the SFAF Finance and Administrative Department with instructions to begin sending monthly subsidy payments to a specific landlord/property manager. Concurrently, the NMCM mails a letter to the landlord and client displaying the amounts that are covered by the San Francisco Housing Coalition (SFHC) and the client's rental share.

SFAF mails the subsidy payment in enough time for the landlord to receive it by the 1st of each month (unless the initial rent/payment is due on another date). Program participants are expected to pay their rental share directly to the landlord on the due date, as stated in the lease. NMCM assesses the need to pay last month's rent and/or security deposit as a lease condition. If a security deposit is available through SFAF, the NMCM requires client and the landlord to sign a Security Deposit Agreement stipulating return of the deposit to San Francisco Housing Coalition (SFAF) when the client vacates the unit or to show documentation if part or the entire security deposit was used to repair the unit. When the first payment is sent, the client is responsible for finalizing and signing the lease with the landlord/property manager, as well as the security deposit agreement, if applicable. A copy of each document is kept in the client's file.

Rent Caps FY 2022 FMR

They are based on Housing Urban Development (HUD) Proposed Fair Market Rents (FMR). The program will adjust these figures to match any SF-HA increases/decreases should an adjustment take place during the contract period to ensure that clients have the best possible chance for utilizing their subsidy award.

UNIT SIZE	RENT CAPS
SRO	\$1,600
Studio	\$2,115
One Bedroom	\$2,631

UNIT SIZE	RENT CAPS
Two Bedroom	\$3,189
Three Bedroom	\$4,111

Assessment and Service Plan

After the subsidy has been activated on behalf of the client, the NMCM assists the subsidy participants to complete a comprehensive psychosocial, prevention and financial benefits assessment. Following the San Francisco DPH "Making the Connection: Standards of Care for Client-Center Services" and Center for Disease Control "Comprehensive Risk Counseling and Services", NMCM assesses eleven psychosocial, environmental, prevention and financial benefits categories. With the results, the NMCM assists clients to develop short or/long term objectives to stabilize their housing, strengthen connection to HIV care, and general well-being. Objectives on each category are recorded in ARIES' progress note section. NMCM provides information and referral to overcome any barriers to complete each objective, monitors and

**San Francisco AIDS Foundation
HIV Rental Subsidies**

**Appendix A-1
07/01/2021 – 06/30/2031
General Fund**

documents the progress and outcomes of each objective. NMCM focuses on housing and financial benefits needs and works closely with other City's service providers to prevent duplication of service and coordinate needed interventions.

SFAF Internal Referrals

Clients are also assessed for SFAF internal services. Client are invited to access other SFAF services and resources (not funded by this contract), such as prevention community building programs (Black Brothers Esteem, Latino Support Group, 50+ Network, and Trans Life); mental health and/or substance use services with Stonewall; participate in the needle exchange program and 6th Street Harm Reduction Center, and access health community resources through Strut. Depending on capacity, rental subsidy participants receive priority to access to resources within all SFAF programs and services.

Referral to Case Management and Other Services

At any time in the program's service delivery process, the rental subsidy client may be referred to a city-funded money management, legal assistance, mental health and/or primary care services. Such a referral could be made by client request and/or through the NMCM's assessment and determination of need.

Specific situations that automatically triggers a referral by the NMCM include, but are not exclusive to:

- Questions on Landlord and Tenant Rights and Responsibilities
- Budget Skills
- Declining health
- Behavioral challenges

SFAF recognizes that access to primary medical care and treatment adherence is critical to health outcomes and the well-being of the program's participants. Therefore, the NMCM makes every effort to link clients with medical services. SFAF also views client advocacy as an essential service link and a tool central to the maintenance of a stable living situation. Program staff works closely with case management providers to ensure that timely access to case management support and/or peer advocacy is available to rental subsidy individuals, when appropriate.

Due to psychosocial and environmental challenges a segment of the Rental Subsidy participants demonstrates ongoing or sporadic high-risk behaviors; NMCM will take an active role with this targeted sub-population to assess clients' behaviors and provide HIV/AIDS prevention support in the form of individual and/or group interventions to reduce the risk of infecting others and reduce the subsidy participant's exposure to other infections. To ensure clients maintain their housing, clients are required to enter money management if they show challenges in meeting financial responsibilities. This stipulation is described in the program agreement signed by the client at the time of the entry into the program. A letter of cooperation with Lutheran Social Services Money Management Program is maintained.

SHALLOW RENTAL SUBSIDIES

Outreach, Recruitment, and Promotion

As subsidy slots become available, SFAF staff calls the MOHCD Plus Housing program to get names as the single referral mechanism.

Admission, Enrollment, and Intake Criteria and Process

Subsidy Eligibility Criteria

- a. Resident of San Francisco.
- b. Gross Annual Family Income no greater than 30% of median income as defined by HUD (2022):

Family Unit	Income Cap
1 Person Family	\$39,150
2 Person Family	\$44,750
3 Person Family	\$50,350
4 Person Family	\$55,900

Family Unit	Income Cap
5 Person Family	\$60,400
6 Person Family	\$64,850
7 Person Family	\$69,350
8 Person Family	\$73,800

**San Francisco AIDS Foundation
HIV Rental Subsidies**

**Appendix A-1
07/01/2021 – 06/30/2031
General Fund**

The program will adjust these figures to match any HUD increases/decreases should an adjustment take place during the contract period.

- c. HIV-positive
- d. Currently or chronically homeless or imminently homeless (imminently homeless is defined as paying 50% or more of monthly income toward rent).

Client Access

The Plus Housing program at MOHCD will identify potential candidates and conduct a phone screening to assess client eligibility and interest in referral to S-RSP

HBM requests referrals from the Plus Housing program. The NMCM schedules an appointment with client or a case conference with community agency case manager and client (if needed) to review client's eligibility. The NMCM also reviews the S-RSP policy and procedures to ensure that client understands the program requirements and expectations. If client already lives in a stable unit, the NMCM schedules an HQS appointment.

If client is looking for a unit, the NMCM follows these steps described above:

- Acceptance into the Program
- Individual Housing Search
- Client Confidentiality
- Prospective Unit and House Inspection

Rental Share Calculation

Income and rent caps are the same as the STD-RSP. Maximum subsidy award is based on a sliding scale displayed below. The maximum subsidy is displayed in the "Maximum Award Amount" column. Participants pay a minimum of 30% of income towards rent. Their rental share also includes any remaining total rent due after 30% of income plus the maximum award amount. **[Amounts current]**

Maximum Award	1-person income	Couple income	Family of 3	Family of 4
\$545	\$1 - \$650	\$1 - \$900	\$1-\$1,000	\$1-\$1,075
\$510	\$651 - \$1,000	\$901 - \$1,425	\$1,001-\$1,575	\$1,076-\$1,900
\$460	\$1,001 - \$1,275	\$1,426 - \$1,950	\$1,576-\$1,900	\$1,901-\$2,300
\$425	\$1,276 - \$2,304	\$1,951 - \$2,633	\$1,901-\$2,962	\$2,301-\$3,663

Service Delivery Model

Clients' Continuing Participation

NMCM constantly communicates with community case managers to avoid duplication of services and ensure client maintains stable housing and a strong connection to HIV care.

Signed Formal Agreement

The cooperative relationship between community case managers and SFAF is documented in formal agreements with community agencies. The Memorandum of Understanding forms the basis for this agreement.

The agreement outlines each agencies responsibility and includes the information outlined below. Each agency is responsible for compliance with the terms of the signed agreement. If either agency expresses concern that the partner agency is not in complete compliance, HBM calls the community agency contact person to address the concerns. If this does not address the concerns, HBM contacts community agency director to address the issues and the final step is for representatives from both agencies to meet and address the concerns, develop, and implement a solution.

Responsibilities of the San Francisco AIDS Foundation

The San Francisco AIDS Foundation (SFAF) agrees to:

**San Francisco AIDS Foundation
HIV Rental Subsidies**

**Appendix A-1
07/01/2021 – 06/30/2031
General Fund**

1. Track S-RSP participant's connection to community agencies. Report to the Department of Public Health (DPH) the number of nights of shallow rent subsidy assistance each client received during a contract year. A record of all shallow rent subsidies administered by SFAF will be tracked through the ARIES and internal SFAF electronic system each month.
2. Meet with all clients referred for shallow subsidies to complete the intake process. This process entails confirming eligibility, computing the subsidy amount, signing the Program Agreement between the client and SFAF, and notifying the client, the landlord when the subsidy will begin.
3. Conduct housing inspections on all units referred and otherwise determined eligible for possible shallow rent subsidies.
4. Provide a Non-Medical Case Manager for all clients to serve as a contact person for subsidy-related services as needed. The SFAF Non-Medical Case Manager will obtain signed releases of information for community agency case managers, and work in coordination with them as necessary.
5. Re-certify clients' eligibility for the program on an annual basis, with the assistance of community agency case managers as necessary.
6. Track and monitor the number of subsidies being administered and the current expenditure levels.
7. Foster good relationships with community agencies to ensure excellent service provision for program participants and strengthen their connection to HIV care.
8. SFAF maintains the right to provide shallow subsidy services to clients according to the program policies and procedures stipulated in the Shallow Subsidy Program Agreement and the funding contract signed with the DPH.

PARTIAL RENTAL SUBSIDIES

Outreach, Recruitment, and Promotion

As subsidy slots become available, SFAF staff calls the MOHCD Plus Housing program to get names as the single referral mechanism.

A NMCM meets with client and reviews all information indicated on the comprehensive intake. This information assists staff to determine client's eligibility and ability to live independently. If substance use and/or mental health issues are evident at the time of intake and appear to be significant in scope, the client is referred to undergo a clinical assessment.

If the client is found to be ineligible for the program, for instance, cannot live independently, or is not imminently homeless as defined below, s/he is referred to Plus Housing for more appropriate housing. If the client is appropriate for the P-RSP, s/he is asked to submit additional documentation and a HQS is conducted of the client's unit. P-RSP unlike the STD-RSP, provides rental assistance for individuals rather than households.

Previous years' experience indicates that P-RSP screening prepares clients to transfer to the STD-RSP when/if their financial circumstance merits additional support and they meet criteria for participation in STD-RSP and an opening occurs, as requested documents are checked and verified, and clients' housing units have already been inspected to ensure they meet housing quality standards.

Acceptance into the Program

Upon completion of the eligibility review, the NMCM goes over the P-RSP policies and procedures booklet with the client. This document describes both the program and client general requirements and expectations. Then, NMCM completes the intake and updates electronic information in ARIES and SFAF internal database.

Eligibility Criteria

1. Client must be a resident of San Francisco
2. Client must verify "very low" income status as defined by HUD. The client's annual income may not exceed 50% of median income(\$65,250 for 2022). Acceptable forms of verification may include financial statements from the public benefits source or paycheck documentation if the client is working.

**San Francisco AIDS Foundation
HIV Rental Subsidies**

**Appendix A-1
07/01/2021 – 06/30/2031
General Fund**

3. Client's current monthly rent equals or exceeds 50% of his/her monthly income (this eliminates the rental caps used currently for participants in the full subsidy program). If in a roommate situation or a couple/family, the client's portion of rent must be more than 50% of his/her income.
4. Client must be able to live independently or with in-home assistance.
5. Client must have had stable housing in the apartment being considered for a partial subsidy for at least three months.
6. Client must present a signed copy of the current lease agreement indicating monthly rent, terms of the lease and number of residents. If the client's name is not on the lease, the program requires a letter from the named tenant indicating that the client is subletting from the primary lease holder and from the landlord indicating that client is a current tenant and has been for at least three months.
7. Client must provide a letter of diagnosis for disabling HIV/AIDS.
8. Client's rental unit must meet HQS regulations specified by HUD.

Financial Management

SFAF regularly convenes a subsidy financial management meeting, attended by the Director of Government Contracts, the Contract and Budget Manager, and Housing and Benefits Manager to monitor the performance of the SFAF Rental Subsidy Program. The group reviews the prior month financial data, monitor contract compliance, monthly landlord payment data, and allow timely program management of the subsidy program.

SFAF utilizes a Housing Subsidy Monitoring Report to monitor financial data. The report allows the program to monitor average, actual and projected subsidy program costs by funding source. The report compares actual spending to funding source budgets to avoid any cost overruns or potential under-spending of funds. The report allows the program to forecast and address future capacity of the subsidy program and enable the program staff to determine how and when to fill vacancies by set-aside population based on available funding.

Cultural Competency

SFAF ensures that the rental subsidy programs provide culturally competent services through its ongoing staff development activities. SFAF ensures that program staff is trained to recognize, understand, and respect the different cultural backgrounds of Subsidy Program participants. Spanish-speaking SFAF staff works with monolingual Spanish-speaking clients to ensure their needs are understood and met. All program promotional materials are available in English and Spanish.

Participating staff is encouraged to take an active role in program development activities and to provide feedback to managing staff through routine individual supervision meetings, and unit/program meetings to ensure a responsive and respectful program design and service delivery.

Program Staffing

The position title, job responsibilities, and minimum qualifications of each contract funded staff position involved in the delivery of program services are explained below.

The Housing and Benefits Manager (HBM) is responsible for the overall oversight of the three subsidy programs and services. The HBM is responsible for on-going monitoring of program staff progress and the contract budget to ensure overall contract compliance, including tracking staff and program progress related to contract deliverables. The HBM also oversees staff training and development. Additional duties include development and monitoring of long-range planning.

The Director of Government Contracts is responsible for coordinating all program evaluation activities, including the design, testing, implementation, and analysis of all evaluation data collection in conjunction with the HBM and other program staff. This position is also responsible for completion of all evaluation and reporting requirements to DPH.

The Contract and Budget Manager is responsible for managing the fiscal aspects of the housing subsidies program, including monitoring clients' subsidy eligibility and award calculations, developing spreadsheet and database systems to monitor client and landlord information and subsidy payments, processing monthly landlord payment requests, and generating periodic financial monitoring and forecasting reports. Supervises portions of the Payment Coordinator functions and serves as the primary liaison for HBD on fiscal matters.

**San Francisco AIDS Foundation
HIV Rental Subsidies****Appendix A-1
07/01/2021 – 06/30/2031
General Fund**

The NMCM provides direct services to persons with HIV/AIDS in acquiring services needed to assist subsidy clients in maintaining stable housing, including the administration of a housing subsidy. NMCM also ensures clients obtain all needed support services, including information and referrals, and is responsible for verifying initial housing inspections and for providing housing advocacy services. Additionally, they perform all individual rental share calculations for the STD- S- and P-RSP clients and assure that the inspections of all rental subsidy units have been completed.

NMCM is responsible for developing housing resources for the STD-RSP potential participants, as well as attempting to identify more appropriate housing options for clients no longer eligible for the program. They provide ongoing assistance and advocacy to individuals who are locating units, including assisting with lease preparation, making payment arrangements, and negotiating with landlords as needed. Each NMCM screens clients for eligibility, collect and verify admission criteria documentation, review individual income data, and make the client share and subsidy portion determinations on an annual basis.

For S- and P-RSP participants, the NMCM is responsible for all HQS and performs all individual subsidy and rental share calculations for each client. The NMCM also verifies admission criteria documentation, review individual income data, facilitate monthly subsidy payments, and make the shallow rental subsidy and client rental share determinations on an annual basis.

ARIES Database

SFAF collects and submits all required data through the AIDS Regional Information & Evaluation System (ARIES). ARIES is a client management system designed for HHS providers. ARIES enhances care provided to clients with HIV by helping agencies automate, plan, manage, and report on client data and services. ARIES is applicable for all Ryan White-eligible clients receiving services paid by any HHS source of funding. ARIES protects client records by ensuring only authorized agencies have access. ARIES data are safely encrypted and are kept confidential. Client information relating to mental health, substance abuse, and legal issues are only available to a limited group of an agency's personnel. Authorized, ARIES-trained personnel are given certificate-dependent and password-protected access to only the information for which that person's level of permission allows.

SFAF participates in the planning and implementation of its HIV client data into the ARIES database. SFAF complies with HHS policies and procedures for collecting and maintaining timely, complete, and accurate unduplicated client and service information in ARIES. Registration data is entered into ARIES within 48 hours or two working days after the data are collected, after confirming with HIV Health Services (HHS) staff that the client does not exist in the system. Service data, including units of service, for the preceding month is entered by the 15th working day of each month. Service data deliverables must match the information submitted on the "Monthly Statements of Deliverables and Invoice" form. Failure to adhere to HHS standards for quality and timeliness of data entry will risk delay of payment until all data is entered and up to date.

Incentive Distribution

Incentives, which include Grocery Safeway Cards, MUNI tokens, Household Goods Vouchers, and Fast-Food Vouchers are made available to all rental subsidy clients, upon availability. Each kind of voucher listed below is utilized by NMCM as incentives in their ongoing efforts to support the clients' needs and efforts towards housing situation stabilization and self-advocacy.

Grocery Vouchers: Depending on clients' specific needs and circumstances, NMCM provides a \$50 Gift Card.

MUNI Tokens: NMCM utilizes bus tokens to assist clients in their on-going client stabilization efforts. For example, bus tokens could be given to a client who is looking for housing, needs to keep a medical, substance abuse treatment or social support services appointments.

Household Goods Vouchers: Every new client has access to \$200 worth of Goodwill Vouchers upon admission and depending on client needs to get household goods to stabilize clients' housing condition. Thereafter, RSP clients can access up to \$50 worth of Goodwill Vouchers on a yearly basis if client confronts financial hardship. Special emergencies and circumstance are evaluated on behalf of client; NMCM consults with other services providers and HBD to dispense additional vouchers.

Fast Food Vouchers: Depending on need and client-specific circumstances, most clients receive a \$5 or \$10 Fast Food voucher at a time.

All vouchers are stored in a locked file cabinet located in the agency's Finance Department and select a small amount to place in a locked file cabinet in the locked chart room in the program and service area for easy access. NMCM distributes the vouchers according to the department's voucher policy and procedure. Every distributed voucher is recorded in a SFAF-voucher receipt and entered in ARIES as unit of service. The original copy of the voucher receipt is placed in client chart and the copy is placed in the locked file cabinet. HBD maintains an inventory of all vouchers disbursed and on hand.

VII. OBJECTIVES AND MEASUREMENTS

All objectives, and descriptions of how objectives will be measured, are contained in the SFDPH document entitled *HIV Health Services Performance Objectives*.

VIII. CONTINUOUS QUALITY IMPROVEMENT

The following is a summary of steps taken by SFAF to ensure that all services follow professional and program standards.

Quality Improvement Plan: SFAF HBD is responsible for the development, implementation, and review of the department's quality improvement plan. In general, staff oversight and performance monitoring are facilitated through bimonthly supervision and weekly departmental administrative and clinical meetings. Policies regarding staff conduct are clearly delineated in the agency's Personnel and Policy Manual, a copy of which is distributed to all new employees. Training and in-service are facilitated and scheduled as needed (Review of Staff Training Plan).

Infection Control/TB Control Universal Precautions: All program staff is required to receive annual PPD (TB) screenings or every two years present the result of chest-x rays, and an infection control/universal precautions training is provided to inform staff regarding the potential spread of infectious illnesses to persons with compromised immune systems.

Review of Staff Training Plan: SFAF requires program staff to attend in-services and training on topics relevant to the program's work with targeted client populations. In-service and training are designed to improve linkage with other service providers, facilitate access to services and improve quality of program services.

Medical Protocol: All emergencies are handled by the Manager Officer of the Day (MOD), a rotating group of managerial staff, whose function is to handle all types of emergencies including disruptive behaviors, violence or medical or substance abuse crises. In a medical emergency, the MOD first calls for medical assistance, and then personally assists the individual when possible.

Monthly statement of deliverables and invoice, narrative reports, annual administrative reports, monitoring report protocols, and any other reports or forms is submitted in a timely manner to the Department of Public Health

Chart Review: The HBM conducts a review of 15% of randomly selected subsidy participants' confidential charts and corresponding electronic record (ARIES and SFAF internal database) through regular bi-weekly chart review from all NMCM caseloads. A Quality Assurance and Quality Improvement (QA/QI) Chart Review Form is used to facilitate the process and assure that all Federal, State, Local and agency's requirements are met for each reviewed chart. If a discrepancy is identified, HBM addresses discrepancies with corresponding NMCM during individual supervision, develops and implements a correction plan to meet all requirements within a month from the meeting. The QA/QI individual Chart Review Forms is kept together with a Chart Review Log in a binder in the chart room in a locked cabinet for internal and external reviews.

Client Satisfaction Survey: At least once a year, the program will administer and analyze an anonymous Client Satisfaction Survey. The results will be documented in the client satisfaction survey summary and analysis section in the Administrative Binder. Results should show that 80% of clients responding to the anonymous client satisfaction survey are either "satisfied" or "very satisfied" with program services.

HIPAA Requirements: The HBM monitors compliance with six standards listed below:

1. DPH Privacy Policy is integrated in the program's governing policies and procedures regarding client privacy and confidentiality. As Measured by: Evidence that the policy and procedures that abides by the rules outlined in the DPH Privacy Policy have been adopted, approved, and implemented.
2. All staff who handles client health information are trained (including new hires) and annually updated in the program's privacy/confidentiality policies and procedures. As Measured by: Documentation exists showing individuals were trained.
3. A Privacy Notice that meets the requirements of the Federal Privacy Rule (HIPAA) is written and provided to all clients served in their threshold and other languages. If document is not available in the client's relevant language, verbal translation is provided. As Measured by: Evidence in client's chart or electronic file that client was "noticed".
4. A Summary of the above Privacy Notice is posted and visible in registration and common areas of treatment facility. As Measured by: Presence and visibility of posting in said areas.
5. Each disclosure of a client's health information for purposes other than treatment, payment, or operations is documented. As Measured by: Documentation exists.
6. Authorization for disclosure of a client's health information is obtained prior to release (1) to providers outside the DPH Safety Net or (2) from a substance abuse program. As Measured by: An authorization form that meets the requirements of the Federal Privacy Rule (HIPAA) is signed and in client's chart/file.

IX. REQUIRED LANGUAGE

a) Third Party Reimbursement	See Target Population, Pages 1 - 2
b) Low Income	See Target Population, Pages 1 - 2
c) Client Eligibility	See Target Population, Pages 1 - 2
d) Client Retention	N/A
e) ARIES Database	See ARIES Database, Page 10
f) Vouchers	See Incentive Distribution, Page 10
g) Performance Objectives	See Objectives and Measurements, Page 11
h) Standards of Care	N/A

**ATTACHMENT 2 of Appendix B
Grant Budget Summary**

1. Estimated Funding Allocations by Funding Source

Grant Plan	Grant Plan Term	Funding Source	Estimated Funding Allocation
Attachment 2.1 / Appendix B-1	07/01/2021 – 06/30/2022	General Fund	\$4,199,836
Attachment 2.1 / Appendix B-1	07/01/2021 – 06/30/2022	General Fund	\$255,770
Attachment 2.1 / Appendix B-1	07/01/2021 – 06/30/2022	General Fund	-\$89,399
Attachment 2.1a / Appendix B-1a	07/01/2022 – 06/30/2023	General Fund	\$4,199,836
Attachment 2.1a / Appendix B-1a	07/01/2022 – 06/30/2023	General Fund	\$255,770
Attachment 2.1a / Appendix B-1a	07/01/2022 – 06/30/2023	General Fund	\$178,224
Attachment 2.1b / Appendix B-1b	07/01/2023 – 06/30/2024	General Fund	\$4,633,830
Attachment 2.1c / Appendix B-1c	07/01/2024 – 06/30/2025	General Fund	\$4,633,830
Attachment 2.1d / Appendix B-1d	07/01/2025 – 06/30/2026	General Fund	\$4,633,830
Attachment 2.1e / Appendix B-1e	07/01/2026 – 06/30/2027	General Fund	\$4,633,830
Attachment 2.1f / Appendix B-1f	07/01/2027 – 06/30/2028	General Fund	\$4,633,830
Attachment 2.1g / Appendix B-1g	07/01/2028 – 06/30/2029	General Fund	\$4,633,830
Attachment 2.1h / Appendix B-1h	07/01/2029 – 06/30/2030	General Fund	\$4,633,830
Attachment 2.1i / Appendix B-1i	07/01/2030 – 06/30/2031	General Fund	\$4,633,830
Subtotal			\$46,070,677
Contingency			\$5,004,536
Total			\$51,075,213

2. Method of Payment

A. For the purposes of this Section, “General Fund” shall mean all those funds, which are not Work Order or Grant funds. “General Fund Appendices” shall mean all those appendices, which include General Fund monies. Compensation for all SERVICES provided by CONTRACTOR shall be paid in the following manner

(1) For Eligible Expenses reimbursable by Cost Reimbursement (Monthly Reimbursement for Actual Expenditures within Grant Budget)

Grantee shall submit a monthly Funding Request in the format attached, Appendix C, and in a form acceptable to the Grant Administrator, by the fifteenth (15th) calendar day of each month for reimbursement of the actual costs of the Eligible Expenses of the preceding month. Eligible Expenses are reimbursable only after incurred by the Grantee and in no case in advance.

3. Contingency Amount

A. Grantee understands that, of the maximum dollar obligation listed in Section 5.1 of this Agreement, **\$5,004,536** 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 Grant 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.

4. Revisions to the Grant Budget

A. Grantee agrees to comply with its Grant Budgets of Appendix B. Changes to the Grant Budget that do not increase or reduce the Maximum Amount of Grant Funds listed in Section 5.1 of the Agreement are subject to the provisions of the Department of Public Health Policy/Procedure Regarding Contract Budget Changes. Grantee agrees to comply fully with that policy/procedure.

B. Grantee understands that the CITY may need to adjust funding sources and funding allocations and agrees that these needed adjustments will be executed in accordance with Section 19.1 of this Agreement. In event that such funding source or funding allocation is terminated or reduced, this Agreement shall be terminated or proportionately reduced accordingly. In no event will Grantee be entitled to compensation in excess of these amounts for these periods without there first being a modification as provided for in Section 17.2 of the Agreement or a revision to Grant Budget, as provided for in Section 19.1 section of this Agreement.

C. The amount for each fiscal year, to be used in Grant Budget and available to Grantee for that fiscal year shall conform with the Grant Plan, Grant Budget and Cost Reporting Data Collection form, as approved by the City's Department of Public Health based on the City's allocation of funding for services for that fiscal year.

DPH 1: Department of Public Health Contract Budget Summary by Program

CID #: <u>1000020925</u>										Appendix B	
DPH Section: <u>HHS</u>					Contract Term : <u>7/1/21-6/30/31</u>						
Check one: [] Original Agreement [X] Amendment [] Revision to Program Budgets										Current Funding Notification Date: <u>12/05/22</u>	
Agency/Contractor Name: San Francisco AIDS Foundation										FN#3	
Program/Provider Name:	Rental Subsidies	Rental Subsidies	Rental Subsidies	Rental Subsidies	Rental Subsidies	Rental Subsidies	Rental Subsidies	Rental Subsidies	Rental Subsidies	Rental Subsidies	TOTALS
Appendix Number:	A-1/B-1	A-1/B-1a	A-1/B-1b	A-1/B-1c	A-1/B-1d	A-1/B-1e	A-1/B-1f	A-1/B-1g	A-1/B-1h	A-1/B-1i	
Appendix Term:	7/1/21-6/30/22	7/1/22-6/30/23	7/1/23-6/30/24	7/1/24-6/30/25	7/1/25-6/30/26	7/1/26-6/30/27	7/1/27-6/30/28	7/1/28-6/30/29	7/1/29-6/30/30	7/1/30-6/30/31	
EXPENSES											
Salaries	\$ 560,177	\$ 582,521	\$ 582,521	\$ 582,521	\$ 582,521	\$ 582,521	\$ 582,521	\$ 582,521	\$ 582,521	\$ 582,521	\$ 5,802,866
Employee Benefits	\$ 151,248	\$ 157,281	\$ 157,281	\$ 157,281	\$ 157,281	\$ 157,281	\$ 157,281	\$ 157,281	\$ 157,281	\$ 157,281	\$ 1,566,777
Total Personnel Expenses	\$ 711,425	\$ 739,802	\$ 739,802	\$ 739,802	\$ 739,802	\$ 739,802	\$ 739,802	\$ 739,802	\$ 739,802	\$ 739,802	\$ 7,369,643
Employee Fringe Benefit Rate	27.0%	27.0%	27.0%	27.0%	27.0%	27.0%	27.0%	27.0%	27.0%	27.0%	
Operating Expense	\$ 3,163,015	\$ 3,289,615	\$ 3,289,615	\$ 3,289,615	\$ 3,289,615	\$ 3,289,615	\$ 3,289,615	\$ 3,289,615	\$ 3,289,615	\$ 3,289,615	\$ 32,769,550
Subtotal Direct Costs	\$ 3,874,440	\$ 4,029,417	\$ 4,029,417	\$ 4,029,417	\$ 4,029,417	\$ 4,029,417	\$ 4,029,417	\$ 4,029,417	\$ 4,029,417	\$ 4,029,417	\$ 40,139,193
Indirect Cost Amount	\$ 581,166	\$ 604,413	\$ 604,413	\$ 604,413	\$ 604,413	\$ 604,413	\$ 604,413	\$ 604,413	\$ 604,413	\$ 604,413	\$ 6,020,883
Indirect Cost Rate (%)	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	
Total Expenses	\$ 4,455,606	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 46,160,076
REVENUES & FUNDING SOURCES											
DPH Funding Sources (select from drop-down list)											
HHS COUNTY GF	4,455,606	4,633,830	4,633,830	4,633,830	4,633,830	4,633,830	4,633,830	4,633,830	4,633,830	4,633,830	46,160,076
UnSpent Funding	(89,399)										(89,399)
Total DPH Revenues	\$ 4,366,207	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	46,070,677
Total Revenues (DPH and Non-DPH)	\$ 4,366,207	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 4,633,830	\$ 46,070,677
Cost Reimbursement (CR) or Fee-for-Service (FFS)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)	
Prepared By Michelle Lee										Phone #	

Contractor: **San Francisco ADIS Foundation**Program: **HIV Rental Subsidies**Appendix: **B-1b**Appendix Term: **7/1/23-6/30/24**Funding Source: **General Fund****UOS COST ALLOCATION BY SERVICE MODE**

Service Modes:		Residential Program and Subsidies		Residential Program and Subsidies		Residential Program and Subsidies				
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
ng & Benefits Manager	0.64	35,919	60%	21,551	36%	2,395	4%		0%	59,865
of Government Grants	0.03	1,703	60%	1,022	36%	113	4%		0%	2,838
Subsidies Administrator	0.30	14,987	60%	8,992	36%	999	4%		0%	24,978
Database Manager	0.20	18,098	60%	10,859	36%	1,206	4%		0%	30,163
Case Managers (CM)	4.00	160,424	60%	96,254	36%	10,695	4%		0%	267,373
Services Lobby Director	0.60	41,586	60%	24,952	36%	2,772	4%		0%	69,310
Triage Assistant	1.40	60,860	60%	36,516	36%	4,057	4%		0%	101,433
Data Analyst	0.10	6,931	60%	4,159	36%	462	4%		0%	11,552
Community Partner & Eng	0.10	9,005	60%	5,403	36%	601	4%		0%	15,009
	0		0%		0%		0%		0%	-
Total FTE & Salaries	7.37	349,513	60%	209,708	36%	23,300	4%	-	0%	582,521
Fringe Benefits	27.00%	94,369	60%	56,621	36%	6,291	4%	-	0%	157,281
Personnel Expenses		443,882	60%	266,329	36%	29,591	4%	-	0%	739,802
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Totals
Total Occupancy		56,241	60%	33,745	36%	3,749	4%		0%	93,735
Total Materials and Supplies		13,887	60%	8,332	36%	926	4%		0%	23,145
Total General Operating		2,706,925	85%	401,949	13%	63,861	2%		0%	3,172,735
Total Operating Expenses		2,777,053	84%	444,026	13%	68,536	2%	-	0%	3,289,615
Total Direct Expenses		3,220,935	80%	710,355	18%	98,127	2%	-	0%	4,029,417
Indirect Expenses	15.0%	483,141	80%	106,553	18%	14,719	2%	-	0%	604,413
TOTAL EXPENSES		3,704,076	80%	816,908	18%	112,846	2%	-	0%	4,633,830
Unit of Service Type		Day Subsidy		Day Subsidy		Day Subsidy		0		
Number of UOS per Service Mode		90,155		26,645		5,475				122,275
Cost Per UOS by Service Mode		\$41.09		\$30.66		\$20.61		\$0.00		N/A
Number of UDC/NOC per Service Mode										335

Rev: 02/18

BUDGET JUSTIFICATION**Contractor Name** San Francisco ADIS Foundation**Program Name:** HIV Rental SubsidiesAppendix: B-1bAppendix Term: 7/1/23-6/30/24Funding Source: General Fund**1a) SALARIES**

Staff Position 1	Housing & Benefits Manager				
Brief duties related to this program and clients served	The HBD will be responsible for the overall oversight of the Housing & Benefits Department's programs and services; including its housing programs. The position will be responsible for on-going monitoring of program staff progress and the contract budget to ensure overall contract compliance, including tracking staff and program progress related to contract deliverables. The HBM will also oversee staff training and development. Additional duties include development and monitoring of long range planning.				
Degree, license (if applicable), experience	Minimum Qualifications: B.S.W. or similar related degree; a minimum of ten years' experience in the field of human service, including a minimum of two years as program manager performing such functions as program quality assurance and improvement, budget development, and community collaboration. Ability to respond quickly and articulately in a public forum.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	93,539	0.64	12	0.64	\$ 59,865

Staff Position 2:	Director of Government Grants				
Brief duties related to this program and clients served	Coordinates program evaluation activities, including design, testing, implementation and analysis of evaluation data collection in conjunction with Housing & Benefits Director and other prog staff. also responsible for completion of all evaluation and reporting requirements to DPH.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree in Social Work, Liberal Arts or related field with two years experience in health services government contracts management and negotiations; development of applications for government contracts, and contract monitoring and compliance.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	113,500	0.15	2	0.03	\$ 2,838

Staff Position 3:	Housing Subsidies Administrator				
Brief duties related to this program and clients served	Manages fiscal aspects of housing subsidies prog, including monitoring client subsidy eligibility and award calculations, developing spreadsheet and database systems to monitor client and landlord information and subsidy payments. Processes monthly landlord payment requests.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> bachelor's and 3 yrs exp in government contract administration or accounting in a computerized non-profit accounting environment, or in lieu of a college degree six years' experience in government contract administration or accounting in a computerized non-profit accounting environment. Spreadsheet and word processing skills are required. Database management skills are preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	83,260	0.30	12	0.30	\$ 24,978

Staff Position 4:	Database Manager				
Brief duties related to this program and clients served	Responsible for the maintenance of the agencies databases. Insures data integrity for data collection & evaluation.				

Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree or at least five years experience in information technology programs.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	150,815	0.20	12	0.20	\$ 30,163

Staff Position 5:	Case Managers (CM)				
Brief duties related to this program and clients served	Provide direct services to persons with HIV/AIDS in acquiring services needed to assist subsidy clients in maintaining stable housing, including the administration of a housing subsidy. In addition to all duties related to subsidy administration, CMs will ensure that clients obtain all needed support services, including information and referrals, as needed. Each CM will be responsible for verifying initial housing inspections and for providing housing advocacy services. Additionally, the CM will perform all individual rental share calculations for the Standard, Partial and Shallow Rental Subsidy Program clients, and assure that the inspections of all rental subsidy units have been completed. The CM will also verify admission criteria documentation, review individual income data, facilitate monthly subsidy payments, and make the shallow rental subsidy and client rental share determinations on an annual basis.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years in the provision of housing advocacy services for low income individuals accessing affordable housing; experience working with people with HIV/AIDS and knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	66,843	4.00	12	4.00	\$ 267,373

Staff Position 6:	Services Lobby Director				
Brief duties related to this program and clients served	Provides support to clients in checking them in for appointments and rescheduling of future appointments; providing referral information and onsite assistance with technology equipment in services lobby area. Manage the scheduling of client rooms and flows of all clients in the lobby area. also provides supervision of all Triage Associates. Provide de-escalation efforts as needed for individual clients.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated program assistance, experience working with people with HIV/AIDS, knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	115,517	0.60	12	0.60	\$ 69,310

Staff Position 7:	Triage Assistant				
Brief duties related to this program and clients served	Provides administrative support to SFAF Housing & Benefits Department staff by maintaining housing client information; assisting with payment coordination; generating internal and external reports, and performance general office duties.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated general administrative or program assistance. High school diploma or equivalent.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	72,452	1.40	12	1.40	\$ 101,433

Staff Position 8:	Data Analyst				
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Brief duties related to this program and clients served	Responsible for coordinating data collection, quality assurance, reporting and summaries to ensure foundation programs are rigorously evaluated for process and health outcomes and public health impact. Responsible for review, abstraction from client records and database entry of all data collected from clients as well as data analysis to meet programmatic and contract requirements.				
Degree, license (if applicable), experience	Bachelor's degree or at least 2 years experience managing and ensuring quality for large client data sets.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	115,520	0.10	12	0.10	\$ 11,552

Staff Position 9:	Sr. Dir, Community Partner & Eng				
Brief duties related to this program and clients served	Oversees maintenance of an evaluation plan that assures monitoring tools are integrated with all activities and that all required data is reported; works with partner agencies and program staff on program adaptation and refinement; coordinates current and emerging health information collection; coordinates program monitoring, evaluation and quality assurance procedures.				
Degree, license (if applicable), experience	Qualifications: Previous experience in supervisory role and at least three years of experience in program implementation; Bachelor's degree.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	150,090	0.10	12	0.10	\$ 15,009

Total FTE, Base: 7.49 Annualized: 7.37

1b) EMPLOYEE FRINGE BENEFITS:

Total Salaries: \$ 582,521

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

	Component	Cost
	Social Security	\$ 44,562.86
	Retirement	\$ 11,126.15
	Medical/Dental	\$ 60,174.42
	Unemployment Insurance	\$ 3,029.11
	Disability Insurance	\$ 35,359.02
	Other (specify):	\$ 3,029.11

Total Fringe Benefit: \$ 157,281

Fringe Benefit %: 27.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: \$ 739,802
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2) OPERATING EXPENSES:

Occupancy: *(HHS funded programs must use Appropriate Cost Allocation Methodology)*

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Rent	Rental of office space at a monthly rate of \$950.00/FTE.	7.49 FTE x \$950 x 12 mos.	\$ 85,386
Repair & Maintenance	Repairs of office & facility at a rate of \$11.84/FTE.	7.49 FTE x \$11.84 x 12 mos.	\$ 1,064
Utilities	Telephone charges based on a rate of \$81.05/FTE.	7.49 FTE x \$81.05 x 12 mos.	\$ 7,285

Total Occupancy: \$ 93,735

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies	Office supplies for program staff at a rate of \$56.08/FTE.	7.49 FTE x \$56.08 x 12 mos.	\$ 5,040
Postage	Postage for monthly mailing of checks and client surveys.	approx 461/mo x \$.55 x 12	\$ 3,040
Program Materials	Household good, & food vouchers to include Safeway 345 cards @ \$35 each=\$12,075; Trader Joes gift cards 186 @ \$15 each = \$2,790; Safeway cards 20 @ \$10 each=\$200.		\$ 15,065
Total Materials & Supplies: \$			23,145

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
Subsidies	A total of 122,275 resident days of housing for 335 clients. The UOS commitment is based on 26,645 resident days of subsidized rent for 73 shallow rental clients; 5,475 resident days for 15 partial rental clients and 90,155 resident days of standard subsidized rent for 247 clients. Subsidy amounts requested are based on SFAF's experience rates.	Std Subsidies \$908.91 x12 x 247 = \$2,694,010; Partial; subsidies \$350.00 x 12 x 15 = 63,000; Shallow Subsidies \$450.00 x 12 x 73 = \$394,200	\$ 3,151,210
Insurance	Occupancy insurance allocates based on cost of \$50/FTE.	7.49 FTE x \$50 x 12 mos	\$ 4,494
Storage	Offsite storage for client records, base d on rate of \$5.00/ FTE.	7.49 FTE x \$5.25 x 12 mos	\$ 472
Staff training	Webinars and training materials relating to improving housing conditions for PLWH/A.	\$1000 per FTE annually	\$ 7,490
Rental/Maintenance of equipment	Copier leases based on SFAF's mo experience rate of \$51 per FTE. Maintenance agreements for office equipment based on SFAF's mo experience rate of \$49.90 per FTE per month.	Rental @7.49 FTE x \$51 x 12 mos = \$4,584; Maintenance @ 7.49 FTE x \$49.90 x 12 mos = \$4,485	\$ 9,069
Total General Operating: \$			3,172,735

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate/Formula	Cost
Total Staff Travel: \$				-

Consultants/Subcontractors:

Consult/Subcontractr Name	Service Description	Rate/Formula	Cost

Total Consultants/Subcontractors: \$ -

Other:

Expense Item	Brief Description	Rate/Formula	Cost

Total Other: \$ -

TOTAL OPERATING EXPENSES: \$ 3,289,615

TOTAL DIRECT COSTS: \$ 4,029,417

4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	Amount
Admin costs totaling \$381,804 which is ten percent (10%) of the contract's direct expenses to partially reimburse SFAF, which currently spends approximately 29.8% of its resources on indirect expenses to manage its programs. Administrative resources, i.e., salaries, benefits and operating expenses of Finance and Administrative Director, Controller, Assist Controller, Payroll Accountant, Payables Accountant, Budget Director, Budget Analysts; Office Svcs Mngr, Office Assistants, IT, H.R., CEO and his assistant.	\$ 604,413

Indirect Rate: 15.00%

TOTAL INDIRECT COSTS: \$ 604,413

TOTAL EXPENSES: \$ 4,633,830

Contractor: San Francisco ADIS Foundation
Program: HIV Rental Subsidies

Appendix: **B-1c**
 Appendix Term: **7/1/24-6/30/25**
 Funding Source: **General Fund**

UOS COST ALLOCATION BY SERVICE MODE

Service Modes:		Residential Program and Subsidies		Residential Program and Subsidies		Residential Program and Subsidies				
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
Housing & Benefits Manager	0.64	35,919	60%	21,551	36%	2,395	4%		0%	59,865
Director of Government Grants	0.03	1,703	60%	1,022	36%	113	4%		0%	2,838
Housing Subsidies Administrator	0.30	14,987	60%	8,992	36%	999	4%		0%	24,978
Database Manager	0.20	18,098	60%	10,859	36%	1,206	4%		0%	30,163
Case Managers (CM)	4.00	160,424	60%	96,254	36%	10,695	4%		0%	267,373
Services Lobby Director	0.60	41,586	60%	24,952	36%	2,772	4%		0%	69,310
Triage Assistant	1.40	60,860	60%	36,516	36%	4,057	4%		0%	101,433
Data Analyst	0.10	6,931	60%	4,159	36%	462	4%		0%	11,552
Sr. Dir, Community Partner & Eng	0.10	9,005	60%	5,403	36%	601	4%		0%	15,009
0	0.00		0%		0%		0%		0%	-
Total FTE & Salaries	7.37	349,513	60%	209,708	36%	23,300	4%	-	0%	582,521
Fringe Benefits	27.00%	94,369	60%	56,621	36%	6,291	4%	-	0%	157,281
Total Personnel Expenses		443,882	60%	266,329	36%	29,591	4%	-	0%	739,802
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Totals
Total Occupancy		56,241	60%	33,745	36%	3,749	4%		0%	93,735
Total Materials and Supplies		13,887	60%	8,332	36%	926	4%		0%	23,145
Total General Operating		2,706,925	85%	401,949	13%	63,861	2%		0%	3,172,735
Total Operating Expenses		2,777,053	84%	444,026	13%	68,536	2%	-	0%	3,289,615
Total Direct Expenses		3,220,935	80%	710,355	18%	98,127	2%	-	0%	4,029,417
Indirect Expenses	15.0%	483,140	80%	106,553	18%	14,720	2%	-	0%	604,413
TOTAL EXPENSES		3,704,075	80%	816,908	18%	112,847	2%	-	0%	4,633,830
Unit of Service Type		Day Subsidy		Day Subsidy		Day Subsidy		0		
Number of UOS per Service Mode		90,155		26,645		5,475				122,275
Cost Per UOS by Service Mode		\$41.09		\$30.66		\$20.61		\$0.00		N/A
Number of UDC/NOC per Service Mode										335

Rev: 02/18

BUDGET JUSTIFICATION**Contractor Name** San Francisco ADIS Foundation**Program Name:** HIV Rental SubsidiesAppendix: B-1cAppendix Term: 7/1/24-6/30/25Funding Source: General Fund**1a) SALARIES**

Staff Position 1	Housing & Benefits Manager				
Brief duties related to this program and clients served	The HBD will be responsible for the overall oversight of the Housing & Benefits Department's programs and services; including its housing programs. The position will be responsible for on-going monitoring of program staff progress and the contract budget to ensure overall contract compliance, including tracking staff and program progress related to contract deliverables. The HBM will also oversee staff training and development. Additional duties include development and monitoring of long range planning.				
Degree, license (if applicable), experience	Minimum Qualifications: B.S.W. or similar related degree; a minimum of ten years' experience in the field of human service, including a minimum of two years as program manager performing such functions as program quality assurance and improvement, budget development, and community collaboration. Ability to respond quickly and articulately in a public forum.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	93,539	0.64	12	0.64	\$ 59,865

Staff Position 2:	Director of Government Grants				
Brief duties related to this program and clients served	Coordinates program evaluation activities, including design, testing, implementation and analysis of evaluation data collection in conjunction with Housing & Benefits Director and other prog staff. also responsible for completion of all evaluation and reporting requirements to DPH.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree in Social Work, Liberal Arts or related field with two years experience in health services government contracts management and negotiations; development of applications for government contracts, and contract monitoring and compliance.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	113,500	0.15	2	0.03	\$ 2,838

Staff Position 3:	Housing Subsidies Administrator				
Brief duties related to this program and clients served	Manages fiscal aspects of housing subsidies prog, including monitoring client subsidy eligibility and award calculations, developing spreadsheet and database systems to monitor client and landlord information and subsidy payments. Processes monthly landlord payment requests.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> bachelor's and 3 yrs exp in government contract administration or accounting in a computerized non-profit accounting environment, or in lieu of a college degree six years' experience in government contract administration or accounting in a computerized non-profit accounting environment. Spreadsheet and word processing skills are required. Database management skills are preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	83,260	0.30	12	0.30	\$ 24,978

Staff Position 4:	Database Manager				
Brief duties related to this program and clients served	Responsible for the maintenance of the agencies databases. Insures data integrity for data collection & evaluation.				

Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree or at least five years experience in information technology programs.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	150,815	0.20	12	0.20	\$ 30,163

Staff Position 5: Case Managers (CM)					
Brief duties related to this program and clients served	Provide direct services to persons with HIV/AIDS in acquiring services needed to assist subsidy clients in maintaining stable housing, including the administration of a housing subsidy. In addition to all duties related to subsidy administration, CMs will ensure that clients obtain all needed support services, including information and referrals, as needed. Each CM will be responsible for verifying initial housing inspections and for providing housing advocacy services. Additionally, the CM will perform all individual rental share calculations for the Standard, Partial and Shallow Rental Subsidy Program clients, and assure that the inspections of all rental subsidy units have been completed. The CM will also verify admission criteria documentation, review individual income data, facilitate monthly subsidy payments, and make the shallow rental subsidy and client rental share determinations on an annual basis.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years in the provision of housing advocacy services for low income individuals accessing affordable housing; experience working with people with HIV/AIDS and knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	66,843	4.00	12	4.00	\$ 267,373

Staff Position 6: Services Lobby Director					
Brief duties related to this program and clients served	Provides support to clients in checking them in for appointments and rescheduling of future appointments; providing referral information and onsite assistance with technology equipment in services lobby area. Manage the scheduling of client rooms and flows of all clients in the lobby area. also provides supervision of all Triage Associates. Provide de-escalation efforts as needed for individual clients.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated program assistance, experience working with people with HIV/AIDS, knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	115,517	0.60	12	0.60	\$ 69,310

Staff Position 7: Triage Assistant					
Brief duties related to this program and clients served	Provides administrative support to SFAF Housing & Benefits Department staff by maintaining housing client information; assisting with payment coordination; generating internal and external reports, and performance general office duties.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated general administrative or program assistance. High school diploma or equivalent.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	72,452	1.40	12	1.40	\$ 101,433

Staff Position 8: Data Analyst					
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Total Occupancy: \$ 93,735

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies	Office supplies for program staff at a rate of \$56.08/FTE.	7.49 FTE x \$56.08 x 12 mos.	\$ 5,040
Postage	Postage for monthly mailing of checks and client surveys.	approx 461/mo x \$.55 x 12	\$ 3,040
Program Materials	Household good, & food vouchers to include Safeway 345 cards @ \$35 each=\$12,075; Trader Joes gift cards 186 @ \$15 each = \$2,790; Safeway cards 20 @ \$10 each=\$200.		\$ 15,065
Total Materials & Supplies: \$			23,145

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
Subsidies	A total of 122,275 resident days of housing for 335 clients. The UOS commitment is based on 26,645 resident days of subsidized rent for 73 shallow rental clients; 5,475 resident days for 15 partial rental clients and 90,155 resident days of standard subsidized rent for 247 clients. Subsidy amounts requested are based on SFAF's experience rates.	Std Subsidies \$908.91 x 12 x 247 = \$2,694,010; Partial; subsidies \$350.00 x 12 x 15 = 63,000; Shallow Subsidies \$450.00 x 12 x 73 = \$394,200	\$ 3,151,210
Insurance	Occupancy insurance allocates based on cost of \$50/FTE.	7.49 FTE x \$50 x 12 mos	\$ 4,494
Storage	Offsite storage for client records, based on rate of \$5.00/ FTE.	7.49 FTE x \$5.25 x 12 mos	\$ 472
Staff training	Webinars and training materials relating to improving housing conditions for PLWH/A.	\$1000 per FTE annually	\$ 7,490
Rental/Maintenance of equipment	Copier leases based on SFAF's mo experience rate of \$51 per FTE. Maintenance agreements for office equipment based on SFAF's mo experience rate of \$49.90 per FTE per month.	Rental @7.49 FTE x \$51 x 12 mos = \$4,584; Maintenance @ 7.49 FTE x \$49.90 x 12 mos = \$4,485	\$ 9,069
Total General Operating: \$			3,172,735

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate/Formula	Cost
Total Staff Travel: \$				-

Consultants/Subcontractors:

Consult/Subcontract Name	Service Description	Rate/Formula	Cost

Total Consultants/Subcontractors: \$ -

Other:

Expense Item	Brief Description	Rate/Formula	Cost

Total Other: \$ -

TOTAL OPERATING EXPENSES: \$ 3,289,615

TOTAL DIRECT COSTS: \$ 4,029,417

4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	Amount
Admin costs totaling \$381,804 which is ten percent (10%) of the contract's direct expenses to partially reimburse SFAF, which currently spends approximately 29.8% of its resources on indirect expenses to manage its programs. Administrative resources, i.e., salaries, benefits and operating expenses of Finance and Administrative Director, Controller, Assist Controller, Payroll Accountant, Payables Accountant, Budget Director, Budget Analysts; Office Svcs Mngr, Office Assistants, IT, H.R., CEO and his assistant.	\$ 604,413

Indirect Rate: 15.00%

TOTAL INDIRECT COSTS: \$ 604,413

TOTAL EXPENSES: \$ 4,633,830

Contractor: San Francisco ADIS FoundationProgram: HIV Rental SubsidiesAppendix: **B-1d**Appendix Term: **7/1/25-6/30/26**Funding Source: **General Fund****UOS COST ALLOCATION BY SERVICE MODE**

Service Modes:		Residential Program and Subsidies		Residential Program and Subsidies		Residential Program and Subsidies				
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
Housing & Benefits Manager	0.64	35,919	60%	21,551	36%	2,395	4%		0%	59,865
Director of Government Grants	0.03	1,703	60%	1,022	36%	113	4%		0%	2,838
Housing Subsidies Administrator	0.30	14,987	60%	8,992	36%	999	4%		0%	24,978
Database Manager	0.20	18,098	60%	10,859	36%	1,206	4%		0%	30,163
Case Managers (CM)	4.00	160,424	60%	96,254	36%	10,695	4%		0%	267,373
Services Lobby Director	0.60	41,586	60%	24,952	36%	2,772	4%		0%	69,310
Triage Assistant	1.40	60,860	60%	36,516	36%	4,057	4%		0%	101,433
Data Analyst	0.10	6,931	60%	4,159	36%	462	4%		0%	11,552
Sr. Dir, Community Partner & Eng	0.10	9,005	60%	5,403	36%	601	4%		0%	15,009
0	0.00		0%		0%		0%		0%	-
Total FTE & Salaries	7.37	349,513	60%	209,708	36%	23,300	4%	-	0%	582,521
Fringe Benefits	27.00%	94,369	60%	56,621	36%	6,291	4%	-	0%	157,281
Total Personnel Expenses		443,882	60%	266,329	36%	29,591	4%	-	0%	739,802
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Totals
Total Occupancy		56,241	60%	33,745	36%	3,749	4%		0%	93,735
Total Materials and Supplies		13,887	60%	8,332	36%	926	4%		0%	23,145
Total General Operating		2,706,925	85%	401,949	13%	63,861	2%		0%	3,172,735
Total Operating Expenses		2,777,053	84%	444,026	13%	68,536	2%	-	0%	3,289,615
Total Direct Expenses		3,220,935	80%	710,355	18%	98,127	2%	-	0%	4,029,417
Indirect Expenses	15.0%	483,140	80%	106,553	18%	14,720	2%	-	0%	604,413
TOTAL EXPENSES		3,704,075	80%	816,908	18%	112,847	2%	-	0%	4,633,830
Unit of Service Type		Day Subsidy		Day Subsidy		Day Subsidy		0		
Number of UOS per Service Mode		90,155		26,645		5,475				122,275
Cost Per UOS by Service Mode		\$41.09		\$30.66		\$20.61		\$0.00		N/A
Number of UDC/NOC per Service Mode										335

Rev: 02/18

BUDGET JUSTIFICATION**Contractor Name** San Francisco ADIS Foundation**Program Name:** HIV Rental SubsidiesAppendix: B-1dAppendix Term: 7/1/25-6/30/26Funding Source: General Fund**1a) SALARIES**

Staff Position 1	Housing & Benefits Manager				
Brief duties related to this program and clients served	The HBD will be responsible for the overall oversight of the Housing & Benefits Department's programs and services; including its housing programs. The position will be responsible for on-going monitoring of program staff progress and the contract budget to ensure overall contract compliance, including tracking staff and program progress related to contract deliverables. The HBM will also oversee staff training and development. Additional duties include development and monitoring of long range planning.				
Degree, license (if applicable), experience	Minimum Qualifications: B.S.W. or similar related degree; a minimum of ten years' experience in the field of human service, including a minimum of two years as program manager performing such functions as program quality assurance and improvement, budget development, and community collaboration. Ability to respond quickly and articulately in a public forum.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	93,539	0.64	12	0.64	\$ 59,865

Staff Position 2:	Director of Government Grants				
Brief duties related to this program and clients served	Coordinates program evaluation activities, including design, testing, implementation and analysis of evaluation data collection in conjunction with Housing & Benefits Director and other prog staff. also responsible for completion of all evaluation and reporting requirements to DPH.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree in Social Work, Liberal Arts or related field with two years experience in health services government contracts management and negotiations; development of applications for government contracts, and contract monitoring and compliance.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	113,500	0.15	2	0.03	\$ 2,838

Staff Position 3:	Housing Subsidies Administrator				
Brief duties related to this program and clients served	Manages fiscal aspects of housing subsidies prog, including monitoring client subsidy eligibility and award calculations, developing spreadsheet and database systems to monitor client and landlord information and subsidy payments. Processes monthly landlord payment requests.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> bachelor's and 3 yrs exp in government contract administration or accounting in a computerized non-profit accounting environment, or in lieu of a college degree six years' experience in government contract administration or accounting in a computerized non-profit accounting environment. Spreadsheet and word processing skills are required. Database management skills are preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	83,260	0.30	12	0.30	\$ 24,978

Staff Position 4:	Database Manager				
Brief duties related to this program and clients served	Responsible for the maintenance of the agencies databases. Insures data integrity for data collection & evaluation.				

Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree or at least five years experience in information technology programs.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	150,815	0.20	12	0.20	\$ 30,163

Staff Position 5: Case Managers (CM)					
Brief duties related to this program and clients served	Provide direct services to persons with HIV/AIDS in acquiring services needed to assist subsidy clients in maintaining stable housing, including the administration of a housing subsidy. In addition to all duties related to subsidy administration, CMs will ensure that clients obtain all needed support services, including information and referrals, as needed. Each CM will be responsible for verifying initial housing inspections and for providing housing advocacy services. Additionally, the CM will perform all individual rental share calculations for the Standard, Partial and Shallow Rental Subsidy Program clients, and assure that the inspections of all rental subsidy units have been completed. The CM will also verify admission criteria documentation, review individual income data, facilitate monthly subsidy payments, and make the shallow rental subsidy and client rental share determinations on an annual basis.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years in the provision of housing advocacy services for low income individuals accessing affordable housing; experience working with people with HIV/AIDS and knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	66,843	4.00	12	4.00	\$ 267,373

Staff Position 6: Services Lobby Director					
Brief duties related to this program and clients served	Provides support to clients in checking them in for appointments and rescheduling of future appointments; providing referral information and onsite assistance with technology equipment in services lobby area. Manage the scheduling of client rooms and flows of all clients in the lobby area. also provides supervision of all Triage Associates. Provide de-escalation efforts as needed for individual clients.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated program assistance, experience working with people with HIV/AIDS, knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	115,517	0.60	12	0.60	\$ 69,310

Staff Position 7: Triage Assistant					
Brief duties related to this program and clients served	Provides administrative support to SFAF Housing & Benefits Department staff by maintaining housing client information; assisting with payment coordination; generating internal and external reports, and performance general office duties.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated general administrative or program assistance. High school diploma or equivalent.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	72,452	1.40	12	1.40	\$ 101,433

Staff Position 8: Data Analyst					
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Total Occupancy: \$ 93,735

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies	Office supplies for program staff at a rate of \$56.08/FTE.	7.49 FTE x \$56.08 x 12 mos	\$ 5,040
Postage	Postage for monthly mailing of checks and client surveys.	approx 461/mo x \$.55 x 12	\$ 3,040
Program Materials	Household good, & food vouchers to include Safeway 345 cards @ \$35 each=\$12,075; Trader Joes gift cards 186 @ \$15 each = \$2,790; Safeway cards 20 @ \$10 each=\$200.		\$ 15,065
Total Materials & Supplies: \$			23,145

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
Subsidies	A total of 122,275 resident days of housing for 335 clients. The UOS commitment is based on 26,645 resident days of subsidized rent for 73 shallow rental clients; 5,475 resident days for 15 partial rental clients and 90,155 resident days of standard subsidized rent for 247 clients. Subsidy amounts requested are based on SFAF's experience rates.	Std Subsidies \$908.91 x12 x 247 = \$2,694,010; Partial; subsidies \$350.00 x 12 x 15 = 63,000; Shallow Subsidies \$450.00 x 12 x 73 = \$394,200	\$ 3,151,210
Insurance	Occupancy insurance allocates based on cost of \$50/FTE.	7.49 FTE x \$50 x 12 mos	\$ 4,494
Storage	Offsite storage for client records, base d on rate of \$5.00/ FTE.	7.49 FTE x \$5.25 x 12 mos	\$ 472
Staff training	Webinars and training materials relating to improving housing conditions for PLWH/A.	\$1000 per FTE annually	\$ 7,490
Rental/Maintenance of equipment	Copier leases based on SFAF's mo experience rate of \$51 per FTE. Maintenance agreements for office equipment based on SFAF's mo experience rate of \$49.90 per FTE per month.	Rental @7.49 FTE x \$51 x 12 mos = \$4,584; Maintenance @ 7.49 FTE x \$49.90 x 12 mos = \$4,485	\$ 9,069
Total General Operating: \$			3,172,735

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate/Formula	Cost
Total Staff Travel: \$				-

Consultants/Subcontractors:

Consult/Subcontract Name	Service Description	Rate/Formula	Cost

Total Consultants/Subcontractors: \$ -

Other:

Expense Item	Brief Description	Rate/Formula	Cost

Total Other: \$ -

TOTAL OPERATING EXPENSES: \$ 3,289,615

TOTAL DIRECT COSTS: \$ 4,029,417

4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	Amount
Admin costs totaling \$381,804 which is ten percent (10%) of the contract's direct expenses to partially reimburse SFAF, which currently spends approximately 29.8% of its resources on indirect expenses to manage its programs. Administrative resources, i.e., salaries, benefits and operating expenses of Finance and Administrative Director, Controller, Assist Controller, Payroll Accountant, Payables Accountant, Budget Director, Budget Analysts; Office Svcs Mngr, Office Assistants, IT, H.R., CEO and his assistant.	\$ 604,413

Indirect Rate: 15.00%

TOTAL INDIRECT COSTS: \$ 604,413

TOTAL EXPENSES: \$ 4,633,830

Contractor: San Francisco ADIS Foundation
Program: HIV Rental Subsidies

Appendix: **B-1e**
 Appendix Term: **7/1/26-6/30/27**
 Funding Source: **General Fund**

UOS COST ALLOCATION BY SERVICE MODE

Service Modes:		Residential Program and Subsidies		Residential Program and Subsidies		Residential Program and Subsidies				
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
Housing & Benefits Manager	0.64	35,919	60%	21,551	36%	2,395	4%		0%	59,865
Director of Government Grants	0.03	1,703	60%	1,022	36%	113	4%		0%	2,838
Housing Subsidies Administrator	0.30	14,987	60%	8,992	36%	999	4%		0%	24,978
Database Manager	0.20	18,098	60%	10,859	36%	1,206	4%		0%	30,163
Case Managers (CM)	4.00	160,424	60%	96,254	36%	10,695	4%		0%	267,373
Services Lobby Director	0.60	41,586	60%	24,952	36%	2,772	4%		0%	69,310
Triage Assistant	1.40	60,860	60%	36,516	36%	4,057	4%		0%	101,433
Data Analyst	0.10	6,931	60%	4,159	36%	462	4%		0%	11,552
Sr. Dir, Community Partner & Eng	0.10	9,005	60%	5,403	36%	601	4%		0%	15,009
0	0.00		0%		0%		0%		0%	-
Total FTE & Salaries	7.37	349,513	60%	209,708	36%	23,300	4%	-	0%	582,521
Fringe Benefits	27.00%	94,369	60%	56,621	36%	6,291	4%	-	0%	157,281
Total Personnel Expenses		443,882	60%	266,329	36%	29,591	4%	-	0%	739,802
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Totals
Total Occupancy		56,241	60%	33,745	36%	3,749	4%		0%	93,735
Total Materials and Supplies		13,887	60%	8,332	36%	926	4%		0%	23,145
Total General Operating		#####	85%	401,949	13%	63,861	2%		0%	3,172,735
Total Operating Expenses		#####	84%	444,026	13%	68,536	2%	-	0%	3,289,615
Total Direct Expenses		#####	80%	710,355	18%	98,127	2%	-	0%	4,029,417
Indirect Expenses	15.0%	483,140	80%	106,553	18%	14,720	2%	-	0%	604,413
TOTAL EXPENSES		#####	80%	816,908	18%	112,847	2%	-	0%	4,633,830
Unit of Service Type		Day Subsidy		Day Subsidy		Day Subsidy		0		
Number of UOS per Service Mode		90,155		26,645		5,475				122,275
Cost Per UOS by Service Mode		\$41.09		\$30.66		\$20.61		\$0.00		N/A
Number of UDC/NOC per Service Mode										335

Rev: 02/18

BUDGET JUSTIFICATION**Contractor Name** San Francisco ADIS Foundation**Program Name:** HIV Rental SubsidiesAppendix: B-1eAppendix Term: 7/1/26-6/30/27Funding Source: General Fund**1a) SALARIES**

Staff Position 1	Housing & Benefits Manager				
Brief duties related to this program and clients served	The HBD will be responsible for the overall oversight of the Housing & Benefits Department's programs and services; including its housing programs. The position will be responsible for on-going monitoring of program staff progress and the contract budget to ensure overall contract compliance, including tracking staff and program progress related to contract deliverables. The HBM will also oversee staff training and development. Additional duties include development and monitoring of long range planning.				
Degree, license (if applicable), experience	Minimum Qualifications: B.S.W. or similar related degree; a minimum of ten years' experience in the field of human service, including a minimum of two years as program manager performing such functions as program quality assurance and improvement, budget development, and community collaboration. Ability to respond quickly and articulately in a public forum.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	93,539	0.64	12	0.64	\$ 59,865

Staff Position 2:	Director of Government Grants				
Brief duties related to this program and clients served	Coordinates program evaluation activities, including design, testing, implementation and analysis of evaluation data collection in conjunction with Housing & Benefits Director and other prog staff. also responsible for completion of all evaluation and reporting requirements to DPH.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree in Social Work, Liberal Arts or related field with two years experience in health services government contracts management and negotiations; development of applications for government contracts, and contract monitoring and compliance.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	113,500	0.15	2	0.03	\$ 2,838

Staff Position 3:	Housing Subsidies Administrator				
Brief duties related to this program and clients served	Manages fiscal aspects of housing subsidies prog, including monitoring client subsidy eligibility and award calculations, developing spreadsheet and database systems to monitor client and landlord information and subsidy payments. Processes monthly landlord payment requests.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> bachelor's and 3 yrs exp in government contract administration or accounting in a computerized non-profit accounting environment, or in lieu of a college degree six years' experience in government contract administration or accounting in a computerized non-profit accounting environment. Spreadsheet and word processing skills are required. Database management skills are preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	83,260	0.30	12	0.30	\$ 24,978

Staff Position 4:	Database Manager				
Brief duties related to this program and clients served	Responsible for the maintenance of the agencies databases. Insures data integrity for data collection & evaluation.				

Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree or at least five years experience in information technology programs.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	150,815	0.20	12	0.20	\$ 30,163

Staff Position 5:	Case Managers (CM)				
Brief duties related to this program and clients served	Provide direct services to persons with HIV/AIDS in acquiring services needed to assist subsidy clients in maintaining stable housing, including the administration of a housing subsidy. In addition to all duties related to subsidy administration, CMs will ensure that clients obtain all needed support services, including information and referrals, as needed. Each CM will be responsible for verifying initial housing inspections and for providing housing advocacy services. Additionally, the CM will perform all individual rental share calculations for the Standard, Partial and Shallow Rental Subsidy Program clients, and assure that the inspections of all rental subsidy units have been completed. The CM will also verify admission criteria documentation, review individual income data, facilitate monthly subsidy payments, and make the shallow rental subsidy and client rental share determinations on an annual basis.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years in the provision of housing advocacy services for low income individuals accessing affordable housing; experience working with people with HIV/AIDS and knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	66,843	4.00	12	4.00	\$ 267,373

Staff Position 6:	Services Lobby Director				
Brief duties related to this program and clients served	Provides support to clients in checking them in for appointments and rescheduling of future appointments; providing referral information and onsite assistance with technology equipment in services lobby area. Manage the scheduling of client rooms and flows of all clients in the lobby area. also provides supervision of all Triage Associates. Provide de-escalation efforts as needed for individual clients.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated program assistance, experience working with people with HIV/AIDS, knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	115,517	0.60	12	0.60	\$ 69,310

Staff Position 7:	Triage Assistant				
Brief duties related to this program and clients served	Provides administrative support to SFAF Housing & Benefits Department staff by maintaining housing client information; assisting with payment coordination; generating internal and external reports, and performance general office duties.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated general administrative or program assistance. High school diploma or equivalent.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	72,452	1.40	12	1.40	\$ 101,433

Staff Position 8:	Data Analyst				
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Total Occupancy: \$ 93,735

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies	Office supplies for program staff at a rate of \$56.08/FTE.	7.49 FTE x \$56.08 x 12 mos.	\$ 5,040
Postage	Postage for monthly mailing of checks and client surveys.	approx 461/mo x \$.55 x 12	\$ 3,040
Program Materials	Household good, & food vouchers to include Safeway 345 cards @ \$35 each=\$12,075; Trader Joes gift cards 186 @ \$15 each = \$2,790; Safeway cards 20 @ \$10 each=\$200		\$ 15,065
Total Materials & Supplies: \$			23,145

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
Subsidies	A total of 122,275 resident days of housing for 335 clients. The UOS commitment is based on 26,645 resident days of subsidized rent for 73 shallow rental clients; 5,475 resident days for 15 partial rental clients and 90,155 resident days of standard subsidized rent for 247 clients. Subsidy amounts requested are based on SFAF's experience rates.	Std Subsidies \$908.91 x 12 x 247 = \$2,694,010; Partial; subsidies \$350.00 x 12 x 15 = 63,000; Shallow Subsidies \$450.00 x 12 x 73 = \$394,200	\$ 3,151,210
Insurance	Occupancy insurance allocates based on cost of \$50/FTE.	7.49 FTE x \$50 x 12 mos	\$ 4,494
Storage	Offsite storage for client records, based on rate of \$5.00/ FTE.	7.49 FTE x \$5.25 x 12 mos	\$ 472
Staff training	Webinars and training materials relating to improving housing conditions for PLWH/A.	\$1000 per FTE annually	\$ 7,490
Rental/Maintenance of equipment	Copier leases based on SFAF's mo experience rate of \$51 per FTE. Maintenance agreements for office equipment based on SFAF's mo experience rate of \$49.90 per FTE per month.	Rental @7.49 FTE x \$51 x 12 mos = \$4,584; Maintenance @ 7.49 FTE x \$49.90 x 12 mos = \$4,485	\$ 9,069
Total General Operating: \$			3,172,735

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate/Formula	Cost
Total Staff Travel: \$				-

Consultants/Subcontractors:

Consult/Subcontract Name	Service Description	Rate/Formula	Cost

Total Consultants/Subcontractors: \$ -

Other:

Expense Item	Brief Description	Rate/Formula	Cost

Total Other: \$ -

TOTAL OPERATING EXPENSES: \$ 3,289,615

TOTAL DIRECT COSTS: \$ 4,029,417

4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	Amount
Admin costs totaling \$381,804 which is ten percent (10%) of the contract's direct expenses to partially reimburse SFAF, which currently spends approximately 29.8% of its resources on indirect expenses to manage its programs. Administrative resources, i.e., salaries, benefits and operating expenses of Finance and Administrative Director, Controller, Assist Controller, Payroll Accountant, Payables Accountant, Budget Director, Budget Analysts; Office Svcs Mngr, Office Assistants, IT, H.R., CEO and his assistant.	\$ 604,413

Indirect Rate: 15.00%

TOTAL INDIRECT COSTS: \$ 604,413

TOTAL EXPENSES: \$ 4,633,830

Contractor: San Francisco ADIS Foundation

Program: HIV Rental Subsidies

Appendix: **B-1f**

Appendix Term: **7/1/27-6/30/28**

Funding Source: **General Fund**

UOS COST ALLOCATION BY SERVICE MODE

Service Modes:		Residential Program and Subsidies		Residential Program and Subsidies		Residential Program and Subsidies				
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
Housing & Benefits Manager	0.64	35,919	60%	21,551	36%	2,395	4%		0%	59,865
Director of Government Grants	0.03	1,703	60%	1,022	36%	113	4%		0%	2,838
Housing Subsidies Administrator	0.30	14,987	60%	8,992	36%	999	4%		0%	24,978
Database Manager	0.20	18,098	60%	10,859	36%	1,206	4%		0%	30,163
Case Managers (CM)	4.00	160,424	60%	96,254	36%	10,695	4%		0%	267,373
Services Lobby Director	0.60	41,586	60%	24,952	36%	2,772	4%		0%	69,310
Triage Assistant	1.40	60,860	60%	36,516	36%	4,057	4%		0%	101,433
Data Analyst	0.10	6,931	60%	4,159	36%	462	4%		0%	11,552
Sr. Dir, Community Partner & Eng	0.10	9,005	60%	5,403	36%	601	4%		0%	15,009
0	0.00		0%		0%		0%		0%	-
Total FTE & Salaries	7.37	349,513	60%	209,708	36%	23,300	4%	-	0%	582,521
Fringe Benefits	27.00%	94,369	60%	56,621	36%	6,291	4%	-	0%	157,281
Total Personnel Expenses		443,882	60%	266,329	36%	29,591	4%	-	0%	739,802
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Totals
Total Occupancy		56,241	60%	33,745	36%	3,749	4%		0%	93,735
Total Materials and Supplies		13,887	60%	8,332	36%	926	4%		0%	23,145
Total General Operating		2,706,925	85%	401,949	13%	63,861	2%		0%	3,172,735
Total Operating Expenses		2,777,053	84%	444,026	13%	68,536	2%	-	0%	3,289,615
Total Direct Expenses		3,220,935	80%	710,355	18%	98,127	2%	-	0%	4,029,417
Indirect Expenses	15.0%	483,140	80%	106,553	18%	14,720	2%	-	0%	604,413
TOTAL EXPENSES		3,704,075	80%	816,908	18%	112,847	2%	-	0%	4,633,830
Unit of Service Type		Day Subsidy		Day Subsidy		Day Subsidy		0		
Number of UOS per Service Mode		90,155		26,645		5,475				122,275
Cost Per UOS by Service Mode		\$41.09		\$30.66		\$20.61		\$0.00		N/A
Number of UDC/NOC per Service Mode										335

Rev: 02/18

BUDGET JUSTIFICATION**Contractor Name** San Francisco ADIS Foundation**Program Name:** HIV Rental SubsidiesAppendix: B-1fAppendix Term: 7/1/27-6/30/28Funding Source: General Fund**1a) SALARIES**

Staff Position 1	Housing & Benefits Manager				
Brief duties related to this program and clients served	The HBD will be responsible for the overall oversight of the Housing & Benefits Department's programs and services; including its housing programs. The position will be responsible for on-going monitoring of program staff progress and the contract budget to ensure overall contract compliance, including tracking staff and program progress related to contract deliverables. The HBM will also oversee staff training and development. Additional duties include development and monitoring of long range planning.				
Degree, license (if applicable), experience	Minimum Qualifications: B.S.W. or similar related degree; a minimum of ten years' experience in the field of human service, including a minimum of two years as program manager performing such functions as program quality assurance and improvement, budget development, and community collaboration. Ability to respond quickly and articulately in a public forum.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	93,539	0.64	12	0.64	\$ 59,865

Staff Position 2:	Director of Government Grants				
Brief duties related to this program and clients served	Coordinates program evaluation activities, including design, testing, implementation and analysis of evaluation data collection in conjunction with Housing & Benefits Director and other prog staff. also responsible for completion of all evaluation and reporting requirements to DPH.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree in Social Work, Liberal Arts or related field with two years experience in health services government contracts management and negotiations; development of applications for government contracts, and contract monitoring and compliance.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	113,500	0.15	2	0.03	\$ 2,838

Staff Position 3:	Housing Subsidies Administrator				
Brief duties related to this program and clients served	Manages fiscal aspects of housing subsidies prog, including monitoring client subsidy eligibility and award calculations, developing spreadsheet and database systems to monitor client and landlord information and subsidy payments. Processes monthly landlord payment requests.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> bachelor's and 3 yrs exp in government contract administration or accounting in a computerized non-profit accounting environment, or in lieu of a college degree six years' experience in government contract administration or accounting in a computerized non-profit accounting environment. Spreadsheet and word processing skills are required. Database management skills are preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	83,260	0.30	12	0.30	\$ 24,978

Staff Position 4:	Database Manager				
Brief duties related to this program and clients served	Responsible for the maintenance of the agencies databases. Insures data integrity for data collection & evaluation.				

Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree or at least five years experience in information technology programs.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	150,815	0.20	12	0.20	\$ 30,163

Staff Position 5: Case Managers (CM)					
Brief duties related to this program and clients served	Provide direct services to persons with HIV/AIDS in acquiring services needed to assist subsidy clients in maintaining stable housing, including the administration of a housing subsidy. In addition to all duties related to subsidy administration, CMs will ensure that clients obtain all needed support services, including information and referrals, as needed. Each CM will be responsible for verifying initial housing inspections and for providing housing advocacy services. Additionally, the CM will perform all individual rental share calculations for the Standard, Partial and Shallow Rental Subsidy Program clients, and assure that the inspections of all rental subsidy units have been completed. The CM will also verify admission criteria documentation, review individual income data, facilitate monthly subsidy payments, and make the shallow rental subsidy and client rental share determinations on an annual basis.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years in the provision of housing advocacy services for low income individuals accessing affordable housing; experience working with people with HIV/AIDS and knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	66,843	4.00	12	4.00	\$ 267,373

Staff Position 6: Services Lobby Director					
Brief duties related to this program and clients served	Provides support to clients in checking them in for appointments and rescheduling of future appointments; providing referral information and onsite assistance with technology equipment in services lobby area. Manage the scheduling of client rooms and flows of all clients in the lobby area. also provides supervision of all Triage Associates. Provide de-escalation efforts as needed for individual clients.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated program assistance, experience working with people with HIV/AIDS, knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	115,517	0.60	12	0.60	\$ 69,310

Staff Position 7: Triage Assistant					
Brief duties related to this program and clients served	Provides administrative support to SFAF Housing & Benefits Department staff by maintaining housing client information; assisting with payment coordination; generating internal and external reports, and performance general office duties.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated general administrative or program assistance. High school diploma or equivalent.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	72,452	1.40	12	1.40	\$ 101,433

Staff Position 8: Data Analyst					
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Total Occupancy: \$ 93,735

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies	Office supplies for program staff at a rate of \$56.08/FTE.	7.49 FTE x \$56.08 x 12 mos.	\$ 5,040
Postage	Postage for monthly mailing of checks and client surveys.	approx 461/mo x \$.55 x 12	\$ 3,040
Program Materials	Household good, & food vouchers to include Safeway 345 cards @ \$35 each=\$12,075; Trader Joes gift cards 186 @ \$15 each = \$2,790; Safeway cards 20 @ \$10 each=\$200.		\$ 15,065
Total Materials & Supplies: \$			23,145

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
Subsidies	A total of 122,275 resident days of housing for 335 clients. The UOS commitment is based on 26,645 resident days of subsidized rent for 73 shallow rental clients; 5,475 resident days for 15 partial rental clients and 90,155 resident days of standard subsidized rent for 247 clients. Subsidy amounts requested are based on SFAF's experience rates.	Std Subsidies \$908.91 x12 x 247 = \$2,694,010; Partial; subsidies \$350.00 x 12 x 15 = 63,000; Shallow Subsidies \$450.00 x 12 x 73 = \$394,200	\$ 3,151,210
Insurance	Occupancy insurance allocates based on cost of \$50/FTE.	7.49 FTE x \$50 x 12 mos	\$ 4,494
Storage	Offsite storage for client records, base d on rate of \$5.00/ FTE.	7.49 FTE x \$5.25 x 12 mos	\$ 472
Staff training	Webinars and training materials relating to improving housing conditions for PLWH/A.	\$1000 per FTE annually	\$ 7,490
Rental/Maintenance of equipment	Copier leases based on SFAF's mo experience rate of \$51 per FTE. Maintenance agreements for office equipment based on SFAF's mo experience rate of \$49.90 per FTE per month.	Rental @7.49 FTE x \$51 x 12 mos = \$4,584; Maintenance @ 7.49 FTE x \$49.90 x 12 mos = \$4,485	\$ 9,069
Total General Operating: \$			3,172,735

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate/Formula	Cost
Total Staff Travel: \$				-

Consultants/Subcontractors:

Consult/Subcontract Name	Service Description	Rate/Formula	Cost

Total Consultants/Subcontractors: \$ -

Other:

Expense Item	Brief Description	Rate/Formula	Cost

Total Other: \$ -

TOTAL OPERATING EXPENSES: \$ 3,289,615

TOTAL DIRECT COSTS: \$ 4,029,417

4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	Amount
Admin costs totaling \$381,804 which is ten percent (10%) of the contract's direct expenses to partially reimburse SFAF, which currently spends approximately 29.8% of its resources on indirect expenses to manage its programs. Administrative resources, i.e., salaries, benefits and operating expenses of Finance and Administrative Director, Controller, Assist Controller, Payroll Accountant, Payables Accountant, Budget Director, Budget Analysts; Office Svcs Mngr, Office Assistants, IT, H.R., CEO and his assistant.	\$ 604,413

Indirect Rate: 15.00%

TOTAL INDIRECT COSTS: \$ 604,413

TOTAL EXPENSES: \$ 4,633,830

Contractor: San Francisco ADIS Foundation
Program: HIV Rental Subsidies

Appendix: **B-1g**
 Appendix Term: **7/1/28-6/30/29**
 Funding Source: **General Fund**

UOS COST ALLOCATION BY SERVICE MODE

Service Modes:		Residential Program and Subsidies		Residential Program and Subsidies		Residential Program and Subsidies				
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
Housing & Benefits Manager	0.64	35,919	60%	21,551	36%	2,395	4%		0%	59,865
Director of Government Grants	0.03	1,703	60%	1,022	36%	113	4%		0%	2,838
Housing Subsidies Administrator	0.30	14,987	60%	8,992	36%	999	4%		0%	24,978
Database Manager	0.20	18,098	60%	10,859	36%	1,206	4%		0%	30,163
Case Managers (CM)	4.00	160,424	60%	96,254	36%	10,695	4%		0%	267,373
Services Lobby Director	0.60	41,586	60%	24,952	36%	2,772	4%		0%	69,310
Triage Assistant	1.40	60,860	60%	36,516	36%	4,057	4%		0%	101,433
Data Analyst	0.10	6,931	60%	4,159	36%	462	4%		0%	11,552
Sr. Dir, Community Partner & Eng	0.10	9,005	60%	5,403	36%	601	4%		0%	15,009
0	0.00		0%		0%		0%		0%	-
Total FTE & Salaries	7.37	349,513	60%	209,708	36%	23,300	4%	-	0%	582,521
Fringe Benefits	27.00%	94,369	60%	56,621	36%	6,291	4%	-	0%	157,281
Total Personnel Expenses		443,882	60%	266,329	36%	29,591	4%	-	0%	739,802
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Totals
Total Occupancy		56,241	60%	33,745	36%	3,749	4%		0%	93,735
Total Materials and Supplies		13,887	60%	8,332	36%	926	4%		0%	23,145
Total General Operating		2,706,925	85%	401,949	13%	63,861	2%		0%	3,172,735
Total Operating Expenses		2,777,053	84%	444,026	13%	68,536	2%	-	0%	3,289,615
Total Direct Expenses		3,220,935	80%	710,355	18%	98,127	2%	-	0%	4,029,417
Indirect Expenses	15.0%	483,140	80%	106,553	18%	14,720	2%	-	0%	604,413
TOTAL EXPENSES		3,704,075	80%	816,908	18%	112,847	2%	-	0%	4,633,830
Unit of Service Type		Day Subsidy		Day Subsidy		Day Subsidy		0		
Number of UOS per Service Mode		90,155		26,645		5,475				122,275
Cost Per UOS by Service Mode		\$41.09		\$30.66		\$20.61		\$0.00		N/A
Number of UDC/NOC per Service Mode										335

Rev: 02/18

BUDGET JUSTIFICATION**Contractor Name** San Francisco ADIS FoundationAppendix: B-1g**Program Name:** HIV Rental SubsidiesAppendix Term: 7/1/28-6/30/29**1a) SALARIES**

Staff Position 1	Housing & Benefits Manager				
Brief duties related to this program and clients served	The HBD will be responsible for the overall oversight of the Housing & Benefits Department's programs and services; including its housing programs. The position will be responsible for on-going monitoring of program staff progress and the contract budget to ensure overall contract compliance, including tracking staff and program progress related to contract deliverables. The HBM will also oversee staff training and development. Additional duties include development and monitoring of long range planning.				
Degree, license (if applicable), experience	Minimum Qualifications: B.S.W. or similar related degree; a minimum of ten years' experience in the field of human service, including a minimum of two years as program manager performing such functions as program quality assurance and improvement, budget development, and community collaboration. Ability to respond quickly and articulately in a public forum.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	93,539	0.64	12	0.64	\$ 59,865

Staff Position 2:	Director of Government Grants				
Brief duties related to this program and clients served	Coordinates program evaluation activities, including design, testing, implementation and analysis of evaluation data collection in conjunction with Housing & Benefits Director and other prog staff. also responsible for completion of all evaluation and reporting requirements to DPH.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree in Social Work, Liberal Arts or related field with two years experience in health services government contracts management and negotiations; development of applications for government contracts, and contract monitoring and compliance.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	113,500	0.15	2	0.03	\$ 2,838

Staff Position 3:	Housing Subsidies Administrator				
Brief duties related to this program and clients served	Manages fiscal aspects of housing subsidies prog, including monitoring client subsidy eligibility and award calculations, developing spreadsheet and database systems to monitor client and landlord information and subsidy payments. Processes monthly landlord payment requests.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> bachelor's and 3 yrs exp in government contract administration or accounting in a computerized non-profit accounting environment, or in lieu of a college degree six years' experience in government contract administration or accounting in a computerized non-profit accounting environment. Spreadsheet and word processing skills are required. Database management skills are preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	83,260	0.30	12	0.30	\$ 24,978

Staff Position 4:	Database Manager				
Brief duties related to this program and clients served	Responsible for the maintenance of the agencies databases. Insures data integrity for data collection & evaluation.				

Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree or at least five years experience in information technology programs.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	150,815	0.20	12	0.20	\$ 30,163

Staff Position 5: Case Managers (CM)					
Brief duties related to this program and clients served	Provide direct services to persons with HIV/AIDS in acquiring services needed to assist subsidy clients in maintaining stable housing, including the administration of a housing subsidy. In addition to all duties related to subsidy administration, CMs will ensure that clients obtain all needed support services, including information and referrals, as needed. Each CM will be responsible for verifying initial housing inspections and for providing housing advocacy services. Additionally, the CM will perform all individual rental share calculations for the Standard, Partial and Shallow Rental Subsidy Program clients, and assure that the inspections of all rental subsidy units have been completed. The CM will also verify admission criteria documentation, review individual income data, facilitate monthly subsidy payments, and make the shallow rental subsidy and client rental share determinations on an annual basis.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years in the provision of housing advocacy services for low income individuals accessing affordable housing; experience working with people with HIV/AIDS and knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	66,843	4.00	12	4.00	\$ 267,373

Staff Position 6: Services Lobby Director					
Brief duties related to this program and clients served	Provides support to clients in checking them in for appointments and rescheduling of future appointments; providing referral information and onsite assistance with technology equipment in services lobby area. Manage the scheduling of client rooms and flows of all clients in the lobby area. also provides supervision of all Triage Associates. Provide de-escalation efforts as needed for individual clients.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated program assistance, experience working with people with HIV/AIDS, knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	115,517	0.60	12	0.60	\$ 69,310

Staff Position 7: Triage Assistant					
Brief duties related to this program and clients served	Provides administrative support to SFAF Housing & Benefits Department staff by maintaining housing client information; assisting with payment coordination; generating internal and external reports, and performance general office duties.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated general administrative or program assistance. High school diploma or equivalent.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	72,452	1.40	12	1.40	\$ 101,433

Staff Position 8: Data Analyst					
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Brief duties related to this program and clients served	Responsible for coordinating data collection, quality assurance, reporting and summaries to ensure foundation programs are rigorously evaluated for process and health outcomes and public health impact. Responsible for review, abstraction from client records and database entry of all data collected from clients as well as data analysis to meet programmatic and contract requirements.				
Degree, license (if applicable), experience	Bachelor's degree or at least 2 years experience managing and ensuring quality for large client data sets.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	115,520	0.10	12	0.10	\$ 11,552

Staff Position 9:	Sr. Dir, Community Partner & Eng				
Brief duties related to this program and clients served	Oversees maintenance of an evaluation plan that assures monitoring tools are integrated with all activities and that all required data is reported; works with partner agencies and program staff on program adaptation and refinement; coordinates current and emerging health information collection; coordinates program monitoring, evaluation and quality assurance procedures.				
Degree, license (if applicable), experience	Qualifications: Previous experience in supervisory role and at least three years of experience in program implementation; Bachelor's degree.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	150,090	0.10	12	0.10	\$ 15,009

1b) EMPLOYEE FRINGE BENEFITS:

Total Salaries: \$ 582,521

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

	Component	Cost
	Social Security	\$ 44,562.86
	Retirement	\$ 11,126.15
	Medical/Dental	\$ 60,174.42
	Unemployment Insurance	\$ 3,029.11
	Disability Insurance	\$ 35,359.02
	Other (specify):	\$ 3,029.11

Total Fringe Benefit: \$ 157,281

Fringe Benefit %: 27.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: \$ 739,802
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2) OPERATING EXPENSES:

Occupancy: *(HHS funded programs must use Appropriate Cost Allocation Methodology)*

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Rent	Rental of office space at a monthly rate of \$950.00/FTE.	7.49 FTE x \$950 x 12 mos.	\$ 85,386
Repair & Maintenance	Repairs of office & facility at a rate of \$11.84/FTE.	7.49 FTE x \$11.84 x 12 mos	\$ 1,064
Utilities	Telephone charges based on a rate of \$81.05/FTE.	7.49 FTE x \$81.05 x 12 mos	\$ 7,285

Total Occupancy: \$ 93,735

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies	Office supplies for program staff at a rate of \$56.08/FTE.	7.49 FTE x \$56.08 x 12 mos	\$ 5,040
Postage	Postage for monthly mailing of checks and client surveys.	approx 461/mo x \$.55 x 12	\$ 3,040
Program Materials	Household good, & food vouchers to include Safeway 345 cards @ \$35 each=\$12,075; Trader Joes gift cards 186 @ \$15 each = \$2,790; Safeway cards 20 @ \$10 each=\$200.		\$ 15,065
Total Materials & Supplies: \$			23,145

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
Subsidies	A total of 122,275 resident days of housing for 335 clients. The UOS commitment is based on 26,645 resident days of subsidized rent for 73 shallow rental clients; 5,475 resident days for 15 partial rental clients and 90,155 resident days of standard subsidized rent for 247 clients. Subsidy amounts requested are based on SFAF's experience rates.	Std Subsidies \$908.91 x12 x 247 = \$2,694,010; Partial; subsidies \$350.00 x 12 x 15 = 63,000; Shallow Subsidies \$450.00 x 12 x 73 = \$394,200	\$ 3,151,210
Insurance	Occupancy insurance allocates based on cost of \$50/FTE.	7.49 FTE x \$50 x 12 mos	\$ 4,494
Storage	Offsite storage for client records, base d on rate of \$5.00/ FTE.	7.49 FTE x \$5.25 x 12 mos	\$ 472
Staff training	Webinars and training materials relating to improving housing conditions for PLWH/A.	\$1000 per FTE annually	\$ 7,490
Rental/Maintenance of equipment	Copier leases based on SFAF's mo experience rate of \$51 per FTE. Maintenance agreements for office equipment based on SFAF's mo experience rate of \$49.90 per FTE per month.	Rental @7.49 FTE x \$51 x 12 mos = \$4,584; Maintenance @ 7.49 FTE x \$49.90 x 12 mos = \$4,485	\$ 9,069
Total General Operating: \$			3,172,735

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate/Formula	Cost
Total Staff Travel: \$				-

Consultants/Subcontractors:

Consult/Subcontract Name	Service Description	Rate/Formula	Cost
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Total Consultants/Subcontractors: \$ -

Other: _____

Expense Item	Brief Description	Rate/Formula	Cost

Total Other: \$ -

TOTAL OPERATING EXPENSES: \$ 3,289,615

TOTAL DIRECT COSTS: \$ 4,029,417

4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	Amount
Admin costs totaling \$381,804 which is ten percent (10%) of the contract's direct expenses to partially reimburse SFAF, which currently spends approximately 29.8% of its resources on indirect expenses to manage its programs. Administrative resources, i.e., salaries, benefits and operating expenses of Finance and Administrative Director, Controller, Assist Controller, Payroll Accountant, Payables Accountant, Budget Director, Budget Analysts; Office Svcs Mngr, Office Assistants, IT, H.R., CEO and his assistant.	\$ 604,413

Indirect Rate: 15.00%

TOTAL INDIRECT COSTS: \$ 604,413

TOTAL EXPENSES: \$ 4,633,830

Contractor: San Francisco ADIS Foundation
Program: HIV Rental Subsidies

Appendix: **B-1h**
 Appendix Term: **7/1/29-6/30/30**
 Funding Source: **General Fund**

UOS COST ALLOCATION BY SERVICE MODE

Service Modes:		Residential Program and Subsidies		Residential Program and Subsidies		Residential Program and Subsidies				
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
Housing & Benefits Manager	0.64	35,919	60%	21,551	36%	2,395	4%		0%	59,865
Director of Government Grants	0.03	1,703	60%	1,022	36%	113	4%		0%	2,838
Housing Subsidies Administrator	0.30	14,987	60%	8,992	36%	999	4%		0%	24,978
Database Manager	0.20	18,098	60%	10,859	36%	1,206	4%		0%	30,163
Case Managers (CM)	4.00	160,424	60%	96,254	36%	10,695	4%		0%	267,373
Services Lobby Director	0.60	41,586	60%	24,952	36%	2,772	4%		0%	69,310
Triage Assistant	1.40	60,860	60%	36,516	36%	4,057	4%		0%	101,433
Data Analyst	0.10	6,931	60%	4,159	36%	462	4%		0%	11,552
Sr. Dir, Community Partner & Eng	0.10	9,005	60%	5,403	36%	601	4%		0%	15,009
0	0.00		0%		0%		0%		0%	-
Total FTE & Salaries	7.37	349,513	60%	209,708	36%	23,300	4%	-	0%	582,521
Fringe Benefits	27.00%	94,369	60%	56,621	36%	6,291	4%	-	0%	157,281
Total Personnel Expenses		443,882	60%	266,329	36%	29,591	4%	-	0%	739,802
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Totals
Total Occupancy		56,241	60%	33,745	36%	3,749	4%		0%	93,735
Total Materials and Supplies		13,887	60%	8,332	36%	926	4%		0%	23,145
Total General Operating		2,706,925	85%	401,949	13%	63,861	2%		0%	3,172,735
Total Operating Expenses		2,777,053	84%	444,026	13%	68,536	2%	-	0%	3,289,615
Total Direct Expenses		3,220,935	80%	710,355	18%	98,127	2%	-	0%	4,029,417
Indirect Expenses	15.0%	483,140	80%	106,553	18%	14,720	2%	-	0%	604,413
TOTAL EXPENSES		3,704,075	80%	816,908	18%	112,847	2%	-	0%	4,633,830
Unit of Service Type		Day Subsidy		Day Subsidy		Day Subsidy		0		
Number of UOS per Service Mode		90,155		26,645		5,475				122,275
Cost Per UOS by Service Mode		\$41.09		\$30.66		\$20.61		\$0.00		N/A
Number of UDC/NOC per Service Mode										335

Rev: 02/18

BUDGET JUSTIFICATION**Contractor Name** San Francisco ADIS Foundation**Program Name:** HIV Rental SubsidiesAppendix: B-1hAppendix Term: 7/1/29-6/30/30Funding Source: General Fund**1a) SALARIES**

Staff Position 1	Housing & Benefits Manager				
Brief duties related to this program and clients served	The HBD will be responsible for the overall oversight of the Housing & Benefits Department's programs and services; including its housing programs. The position will be responsible for on-going monitoring of program staff progress and the contract budget to ensure overall contract compliance, including tracking staff and program progress related to contract deliverables. The HBM will also oversee staff training and development. Additional duties include development and monitoring of long range planning.				
Degree, license (if applicable), experience	Minimum Qualifications: B.S.W. or similar related degree; a minimum of ten years' experience in the field of human service, including a minimum of two years as program manager performing such functions as program quality assurance and improvement, budget development, and community collaboration. Ability to respond quickly and articulately in a public forum.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	93,539	0.64	12	0.64	\$ 59,865

Staff Position 2:	Director of Government Grants				
Brief duties related to this program and clients served	Coordinates program evaluation activities, including design, testing, implementation and analysis of evaluation data collection in conjunction with Housing & Benefits Director and other prog staff. also responsible for completion of all evaluation and reporting requirements to DPH.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree in Social Work, Liberal Arts or related field with two years experience in health services government contracts management and negotiations; development of applications for government contracts, and contract monitoring and compliance.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	113,500	0.15	2	0.03	\$ 2,838

Staff Position 3:	Housing Subsidies Administrator				
Brief duties related to this program and clients served	Manages fiscal aspects of housing subsidies prog, including monitoring client subsidy eligibility and award calculations, developing spreadsheet and database systems to monitor client and landlord information and subsidy payments. Processes monthly landlord payment requests.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> bachelor's and 3 yrs exp in government contract administration or accounting in a computerized non-profit accounting environment, or in lieu of a college degree six years' experience in government contract administration or accounting in a computerized non-profit accounting environment. Spreadsheet and word processing skills are required. Database management skills are preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	83,260	0.30	12	0.30	\$ 24,978

Staff Position 4:	Database Manager				
Brief duties related to this program and clients served	Responsible for the maintenance of the agencies databases. Insures data integrity for data collection & evaluation.				

Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree or at least five years experience in information technology programs.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	150,815	0.20	12	0.20	\$ 30,163

Staff Position 5:	Case Managers (CM)				
Brief duties related to this program and clients served	Provide direct services to persons with HIV/AIDS in acquiring services needed to assist subsidy clients in maintaining stable housing, including the administration of a housing subsidy. In addition to all duties related to subsidy administration, CMs will ensure that clients obtain all needed support services, including information and referrals, as needed. Each CM will be responsible for verifying initial housing inspections and for providing housing advocacy services. Additionally, the CM will perform all individual rental share calculations for the Standard, Partial and Shallow Rental Subsidy Program clients, and assure that the inspections of all rental subsidy units have been completed. The CM will also verify admission criteria documentation, review individual income data, facilitate monthly subsidy payments, and make the shallow rental subsidy and client rental share determinations on an annual basis.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years in the provision of housing advocacy services for low income individuals accessing affordable housing; experience working with people with HIV/AIDS and knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	66,843	4.00	12	4.00	\$ 267,373

Staff Position 6:	Services Lobby Director				
Brief duties related to this program and clients served	Provides support to clients in checking them in for appointments and rescheduling of future appointments; providing referral information and onsite assistance with technology equipment in services lobby area. Manage the scheduling of client rooms and flows of all clients in the lobby area. also provides supervision of all Triage Associates. Provide de-escalation efforts as needed for individual clients.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated program assistance, experience working with people with HIV/AIDS, knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	115,517	0.60	12	0.60	\$ 69,310

Staff Position 7:	Triage Assistant				
Brief duties related to this program and clients served	Provides administrative support to SFAF Housing & Benefits Department staff by maintaining housing client information; assisting with payment coordination; generating internal and external reports, and performance general office duties.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated general administrative or program assistance. High school diploma or equivalent.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	72,452	1.40	12	1.40	\$ 101,433

Staff Position 8:	Data Analyst				
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Brief duties related to this program and clients served	Responsible for coordinating data collection, quality assurance, reporting and summaries to ensure foundation programs are rigorously evaluated for process and health outcomes and public health impact. Responsible for review, abstraction from client records and database entry of all data collected from clients as well as data analysis to meet programmatic and contract requirements.				
Degree, license (if applicable), experience	Bachelor's degree or at least 2 years experience managing and ensuring quality for large client data sets.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	115,520	0.10	12	0.10	\$ 11,552

Staff Position 9:	Sr. Dir, Community Partner & Eng				
Brief duties related to this program and clients served	Oversees maintenance of an evaluation plan that assures monitoring tools are integrated with all activities and that all required data is reported; works with partner agencies and program staff on program adaptation and refinement; coordinates current and emerging health information collection; coordinates program monitoring, evaluation and quality assurance procedures.				
Degree, license (if applicable), experience	Qualifications: Previous experience in supervisory role and at least three years of experience in program implementation; Bachelor's degree.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	150,090	0.10	12	0.10	\$ 15,009

Total FTE, Base: 7.49 Annualized: 7.37

1b) EMPLOYEE FRINGE BENEFITS: **Total Salaries: \$ 582,521**
 (Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost
Social Security	\$ 44,562.86
Retirement	\$ 11,126.15
Medical/Dental	\$ 60,174.42
Unemployment Insurance	\$ 3,029.11
Disability Insurance	\$ 35,359.02
Other (specify):	\$ 3,029.11

Total Fringe Benefit: \$ 157,281

Fringe Benefit %: 27.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: \$ 739,802

2) OPERATING EXPENSES:

Occupancy: (HHS funded programs must use Appropriate Cost Allocation Methodology)

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Rent	Rental of office space at a monthly rate of \$950.00/FTE.	7.49 FTE x \$950 x 12 mos.	\$ 85,386
Repair & Maintenance	Repairs of office & facility at a rate of \$11.84/FTE.	7.49 FTE x \$11.84 x 12 mos	\$ 1,064
Utilities	Telephone charges based on a rate of \$81.05/FTE.	7.49 FTE x \$81.05 x 12 mos	\$ 7,285
Total Occupancy:			\$ 93,735

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies	Office supplies for program staff at a rate of \$56.08/FTE.	7.49 FTE x \$56.08 x 12 mos	\$ 5,040
Postage	Postage for monthly mailing of checks and client surveys.	approx 461/mo x \$.55 x 12	\$ 3,040
Program Materials	Household good, & food vouchers to include Safeway 345 cards @ \$35 each=\$12,075; Trader Joes gift cards 186 @ \$15 each = \$2,790; Safeway cards 20 @ \$10 each=\$200.		\$ 15,065
Total Materials & Supplies: \$			23,145

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
Subsidies	A total of 122,275 resident days of housing for 335 clients. The UOS commitment is based on 26,645 resident days of subsidized rent for 73 shallow rental clients; 5,475 resident days for 15 partial rental clients and 90,155 resident days of standard subsidized rent for 247 clients. Subsidy amounts requested are based on SFAF's experience rates.	Std Subsidies \$908.91 x 12 x 247 = \$2,694,010; Partial; subsidies \$350.00 x 12 x 15 = 63,000; Shallow Subsidies \$450.00 x 12 x 73 = \$394,200	\$ 3,151,210
Insurance	Occupancy insurance allocates based on cost of \$50/FTE.	7.49 FTE x \$50 x 12 mos	\$ 4,494
Storage	Offsite storage for client records, base d on rate of \$5.00/ FTE.	7.49 FTE x \$5.25 x 12 mos	\$ 472
Staff training	Webinars and training materials relating to improving housing conditions for PLWH/A.	\$1000 per FTE annually	\$ 7,490
Rental/Maintenance of equipment	Copier leases based on SFAF's mo experience rate of \$51 per FTE. Maintenance agreements for office equipment based on SFAF's mo experience rate of \$49.90 per FTE per month.	Rental @7.49 FTE x \$51 x 12 mos = \$4,584; Maintenance @ 7.49 FTE x \$49.90 x 12 mos = \$4,485	\$ 9,069
Total General Operating: \$			3,172,735

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate/Formula	Cost
Total Staff Travel: \$				-

Consultants/Subcontractors:

Consult/Subcontract Name	Service Description	Rate/Formula	Cost

Total Consultants/Subcontractors: \$ -

Other:

Expense Item	Brief Description	Rate/Formula	Cost

Total Other: \$ -

TOTAL OPERATING EXPENSES: \$ 3,289,615

TOTAL DIRECT COSTS: \$ 4,029,417

4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	Amount
Admin costs totaling \$381,804 which is ten percent (10%) of the contract's direct expenses to partially reimburse SFAF, which currently spends approximately 29.8% of its resources on indirect expenses to manage its programs. Administrative resources, i.e., salaries, benefits and operating expenses of Finance and Administrative Director, Controller, Assist Controller, Payroll Accountant, Payables Accountant, Budget Director, Budget Analysts; Office Svcs Mngr, Office Assistants, IT, H.R., CEO and his assistant.	\$ 604,413

Indirect Rate: 15.00%

TOTAL INDIRECT COSTS: \$ 604,413

TOTAL EXPENSES: \$ 4,633,830

Contractor: San Francisco ADIS Foundation
Program: HIV Rental Subsidies

Appendix: **B-1i**
 Appendix Term: **7/1/30-6/30/31**
 Funding Source: **General Fund**

UOS COST ALLOCATION BY SERVICE MODE

Service Modes:		Residential Program and Subsidies		Residential Program and Subsidies		Residential Program and Subsidies				
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
Housing & Benefits Manager	0.64	35,919	60%	21,551	36%	2,395	4%		0%	59,865
Director of Government Grants	0.03	1,703	60%	1,022	36%	113	4%		0%	2,838
Housing Subsidies Administrator	0.30	14,987	60%	8,992	36%	999	4%		0%	24,978
Database Manager	0.20	18,098	60%	10,859	36%	1,206	4%		0%	30,163
Case Managers (CM)	4.00	160,424	60%	96,254	36%	10,695	4%		0%	267,373
Services Lobby Director	0.60	41,586	60%	24,952	36%	2,772	4%		0%	69,310
Triage Assistant	1.40	60,860	60%	36,516	36%	4,057	4%		0%	101,433
Data Analyst	0.10	6,931	60%	4,159	36%	462	4%		0%	11,552
Sr. Dir, Community Partner & Eng	0.10	9,005	60%	5,403	36%	601	4%		0%	15,009
0	0.00		0%		0%		0%		0%	-
Total FTE & Salaries	7.37	349,513	60%	209,708	36%	23,300	4%	-	0%	582,521
Fringe Benefits	27.00%	94,369	60%	56,621	36%	6,291	4%	-	0%	157,281
Total Personnel Expenses		443,882	60%	266,329	36%	29,591	4%	-	0%	739,802
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Totals
Total Occupancy		56,241	60%	33,745	36%	3,749	4%		0%	93,735
Total Materials and Supplies		13,887	60%	8,332	36%	926	4%		0%	23,145
Total General Operating		2,706,925	85%	401,949	13%	63,861	2%		0%	3,172,735
Total Operating Expenses		2,777,053	84%	444,026	13%	68,536	2%	-	0%	3,289,615
Total Direct Expenses		3,220,935	80%	710,355	18%	98,127	2%	-	0%	4,029,417
Indirect Expenses	15.0%	483,140	80%	106,553	18%	14,720	2%	-	0%	604,413
TOTAL EXPENSES		3,704,075	80%	816,908	18%	112,847	2%	-	0%	4,633,830
Unit of Service Type		Day Subsidy		Day Subsidy		Day Subsidy		0		
Number of UOS per Service Mode		90,155		26,645		5,475				122,275
Cost Per UOS by Service Mode		\$41.09		\$30.66		\$20.61		\$0.00		N/A
Number of UDC/NOC per Service Mode										335

Rev: 02/18

BUDGET JUSTIFICATION**Contractor Name** San Francisco ADIS Foundation**Program Name:** HIV Rental SubsidiesAppendix: B-1iAppendix Term: 7/1/30-6/30/31Funding Source: General Fund**1a) SALARIES**

Staff Position 1	Housing & Benefits Manager				
Brief duties related to this program and clients served	The HBD will be responsible for the overall oversight of the Housing & Benefits Department's programs and services; including its housing programs. The position will be responsible for on-going monitoring of program staff progress and the contract budget to ensure overall contract compliance, including tracking staff and program progress related to contract deliverables. The HBM will also oversee staff training and development. Additional duties include development and monitoring of long range planning.				
Degree, license (if applicable), experience	Minimum Qualifications: B.S.W. or similar related degree; a minimum of ten years' experience in the field of human service, including a minimum of two years as program manager performing such functions as program quality assurance and improvement, budget development, and community collaboration. Ability to respond quickly and articulately in a public forum.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	93,539	0.64	12	0.64	\$ 59,865

Staff Position 2:	Director of Government Grants				
Brief duties related to this program and clients served	Coordinates program evaluation activities, including design, testing, implementation and analysis of evaluation data collection in conjunction with Housing & Benefits Director and other prog staff. also responsible for completion of all evaluation and reporting requirements to DPH.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree in Social Work, Liberal Arts or related field with two years experience in health services government contracts management and negotiations; development of applications for government contracts, and contract monitoring and compliance.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	113,500	0.15	2	0.03	\$ 2,838

Staff Position 3:	Housing Subsidies Administrator				
Brief duties related to this program and clients served	Manages fiscal aspects of housing subsidies prog, including monitoring client subsidy eligibility and award calculations, developing spreadsheet and database systems to monitor client and landlord information and subsidy payments. Processes monthly landlord payment requests.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> bachelor's and 3 yrs exp in government contract administration or accounting in a computerized non-profit accounting environment, or in lieu of a college degree six years' experience in government contract administration or accounting in a computerized non-profit accounting environment. Spreadsheet and word processing skills are required. Database management skills are preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	83,260	0.30	12	0.30	\$ 24,978

Staff Position 4:	Database Manager				
Brief duties related to this program and clients served	Responsible for the maintenance of the agencies databases. Insures data integrity for data collection & evaluation.				

Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Bachelor's degree or at least five years experience in information technology programs.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	150,815	0.20	12	0.20	\$ 30,163

Staff Position 5: Case Managers (CM)					
Brief duties related to this program and clients served	Provide direct services to persons with HIV/AIDS in acquiring services needed to assist subsidy clients in maintaining stable housing, including the administration of a housing subsidy. In addition to all duties related to subsidy administration, CMs will ensure that clients obtain all needed support services, including information and referrals, as needed. Each CM will be responsible for verifying initial housing inspections and for providing housing advocacy services. Additionally, the CM will perform all individual rental share calculations for the Standard, Partial and Shallow Rental Subsidy Program clients, and assure that the inspections of all rental subsidy units have been completed. The CM will also verify admission criteria documentation, review individual income data, facilitate monthly subsidy payments, and make the shallow rental subsidy and client rental share determinations on an annual basis.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years in the provision of housing advocacy services for low income individuals accessing affordable housing; experience working with people with HIV/AIDS and knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	66,843	4.00	12	4.00	\$ 267,373

Staff Position 6: Services Lobby Director					
Brief duties related to this program and clients served	Provides support to clients in checking them in for appointments and rescheduling of future appointments; providing referral information and onsite assistance with technology equipment in services lobby area. Manage the scheduling of client rooms and flows of all clients in the lobby area. also provides supervision of all Triage Associates. Provide de-escalation efforts as needed for individual clients.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated program assistance, experience working with people with HIV/AIDS, knowledge of SF housing resources.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	115,517	0.60	12	0.60	\$ 69,310

Staff Position 7: Triage Assistant					
Brief duties related to this program and clients served	Provides administrative support to SFAF Housing & Benefits Department staff by maintaining housing client information; assisting with payment coordination; generating internal and external reports, and performance general office duties.				
Degree, license (if applicable), experience	<i>Minimum Qualifications:</i> Two years of demonstrated general administrative or program assistance. High school diploma or equivalent.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	72,452	1.40	12	1.40	\$ 101,433

Staff Position 8: Data Analyst					
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Total Occupancy: \$ 93,735

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies	Office supplies for program staff at a rate of \$56.08/FTE.	7.49 FTE x \$56.08 x 12 mos.	\$ 5,040
Postage	Postage for monthly mailing of checks and client surveys.	approx 461/mo x \$.55 x 12	\$ 3,040
Program Materials	Household good, & food vouchers to include Safeway 345 cards @ \$35 each=\$12,075; Trader Joes gift cards 186 @ \$15 each = \$2,790; Safeway cards 20 @ \$10 each=\$200.		\$ 15,065
Total Materials & Supplies: \$			23,145

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
Subsidies	A total of 122,275 resident days of housing for 335 clients. The UOS commitment is based on 26,645 resident days of subsidized rent for 73 shallow rental clients; 5,475 resident days for 15 partial rental clients and 90,155 resident days of standard subsidized rent for 247 clients. Subsidy amounts requested are based on SFAF's experience rates.	Std Subsidies \$908.91 x12 x 247 = \$2,694,010; Partial; subsidies \$350.00 x 12 x 15 = 63,000; Shallow Subsidies \$450.00 x 12 x 73 = \$394,200	\$ 3,151,210
Insurance	Occupancy insurance allocates based on cost of \$50/FTE.	7.49 FTE x \$50 x 12 mos	\$ 4,494
Storage	Offsite storage for client records, base d on rate of \$5.00/ FTE.	7.49 FTE x \$5.25 x 12 mos	\$ 472
Staff training	Webinars and training materials relating to improving housing conditions for PLWH/A.	\$1000 per FTE annually	\$ 7,490
Rental/Maintenance of equipment	Copier leases based on SFAF's mo experience rate of \$51 per FTE. Maintenance agreements for office equipment based on SFAF's mo experience rate of \$49.90 per FTE per month.	Rental @7.49 FTE x \$51 x 12 mos = \$4,584; Maintenance @ 7.49 FTE x \$49.90 x 12 mos = \$4,485	\$ 9,069
Total General Operating: \$			3,172,735

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate/Formula	Cost
Total Staff Travel: \$				-

Consultants/Subcontractors:

Consult/Subcontract Name	Service Description	Rate/Formula	Cost

Total Consultants/Subcontractors:			\$ -

Other: _____

Expense Item	Brief Description	Rate/Formula	Cost
Total Other:			\$ -

TOTAL OPERATING EXPENSES: \$ 3,289,615

TOTAL DIRECT COSTS: \$ 4,029,417

4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	Amount
Admin costs totaling \$381,804 which is ten percent (10%) of the contract's direct expenses to partially reimburse SFAF, which currently spends approximately 29.8% of its resources on indirect expenses to manage its programs. Administrative resources, i.e., salaries, benefits and operating expenses of Finance and Administrative Director, Controller, Assist Controller, Payroll Accountant, Payables Accountant, Budget Director, Budget Analysts; Office Svcs Mngr, Office Assistants, IT, H.R., CEO and his assistant.	\$ 604,413

Indirect Rate: 15.00%
TOTAL INDIRECT COSTS: \$ 604,413

TOTAL EXPENSES: \$ 4,633,830

Appendix C--Form of Funding Request

FUNDING REQUEST

1. Process

The Grantee shall request funding for eligible expenses monthly.

Monthly, the Grantee shall submit invoices for Eligible Expenses according to the procedures established by the Department of Public Health.

The Invoice Analyst for the City shall email the Grantee the appropriate invoice template to use.

Failure to use the provided invoice template by the City may result in delayed payments.

2. Certifications

With each invoice submitted, Grantee certifies that:

- a) The total amount of Grant Funds requested pursuant to this Funding Request will be used to pay Eligible Expenses, which Eligible Expenses are set forth on the monthly Invoice submitted by the Grantee. Grantee certifies that all listed expenses on the invoice are true and that all correct copies of all required documentation of such Eligible Expenses are attached to the invoice or are maintained in the Grantees office of record.
- b) After giving effect to the disbursement requested pursuant to this Funding Request, the Grant Funds disbursed as of the date of this disbursement will not exceed the maximum amount set forth in Section 5.1.
- c) The representations and warranties made in the Agreement are true and correct in all material respects as if made on the date hereof;
- d) No Event of Default has occurred and is continuing; and
- e) The undersigned is an officer of Grantee authorized to execute this Funding Request on behalf of Grantee.

3. Final Funding Request

- a) For Eligible Expenses reimbursable by Cost Reimbursement:

A final closing Funding Request clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those costs incurred during the referenced period of performance. If costs are not submitted during this period, all unexpended funding set aside for this Agreement will revert to CITY.

- b) For Eligible Expenses reimbursable by Fee for Service Reimbursement:

A final closing Funding Request, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those services rendered during the referenced period of performance. If services are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to City. City's final reimbursement to the Grantee at the close of the Agreement period shall be adjusted to conform to actual units certified multiplied by the unit rates identified in the Grant Budget attached hereto, and shall not exceed the total amount authorized and certified for this Agreement.

- c) All amounts paid by City to Grantee shall be subject to audit by City.

Appendix C--Form of Funding Request

FUNDING REQUEST

Pursuant to Section 5.3 of the Grant Agreement (the “Grant Agreement”) dated as of **July 1, 2021**, between the undersigned (“Grantee”) and the City and County of San Francisco (all capitalized terms defined in the Grant Agreement shall have the same meaning when used herein), Grantee hereby requests a disbursement of Grant Funds as follows:

Grantee will submit a MONTHLY Invoice/Funding Request in the format provided by the Department.

Total Amount Requested
in this Request: \$ _____

Maximum Amount of
Grant Funds Specified in
Section 5.1 of the Grant
Agreement: \$51,075,213

Total of All Grant Funds
Disbursed Prior to this
Request: \$ _____

Grantee certifies that:

- (a) The total amount of Grant Funds requested pursuant to this Funding Request will be used to pay Eligible Expenses, which Eligible Expenses are set forth on the attached Schedule 1, to which is attached true and correct copies of all required documentation of such Eligible Expenses.
- (b) After giving effect to the disbursement requested pursuant to this Funding Request, the Grant Funds disbursed as of the date of this disbursement will not exceed the maximum amount set forth in Section 5.1.
- (c) The representations and warranties made in the Agreement are true and correct in all material respects as if made on the date hereof;
- (d) No Event of Default has occurred and is continuing; and
- (e) The undersigned is an officer of Grantee authorized to execute this Funding Request on behalf of Grantee.

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE**

APPENDIX F-1b
07/01/2023 - 06/30/2024
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000020925

Invoice Number
A-1JUL23

Telephone: 415-487-3000
Fax:



Contract Purchase Order No: _____

Funding Source: General Fund

Program Name: HIV Rental Subsidies

Department ID-Authority ID: _____

ACE Control #: _____

Project ID-Activity ID: _____

Invoice Period: 07/1/23 - 07/31/23

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
Residential Program and Subsidies - Standard	90,155	247							90,155	247
Residential Program and Subsidies - Shallow	26,645	73							26,645	73
Residential Program and Subsidies - Partial	5,475	15							5,475	15

	UDC	UDC	UDC	UDC	UDC
Unduplicated Clients for Appendix		335			335

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$582,521				\$582,521.00
Fringe Benefits	\$157,281				\$157,281.00
Total Personnel Expenses	\$739,802				\$739,802.00
Operating Expenses:					
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$93,735				\$93,735.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$23,145				\$23,145.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$3,172,735				\$3,172,735.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$3,289,615				\$3,289,615.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$4,029,417				\$4,029,417.00
Indirect Expenses	\$604,413				\$604,413.00
TOTAL EXPENSES	\$4,633,830				\$4,633,830.00
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: aidsoffice@sfdph.org	By: _____	Date: _____
ATTN: Accounts Payable	(DPH Authorized Signatory)	

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE**

APPENDIX F-1c
07/01/2024 - 06/30/2025
PAGE A

Contractor: San Francisco AIDS Foundation Address: 1035 Market Street, Suite 400 San Francisco, CA 94103 Telephone: 415-487-3000 Fax:	Contract ID # 1000020925	Invoice Number A-1JUL24	Contract Purchase Order No:
Program Name: HIV Rental Subsidies ACE Control #:	HHS	Funding Source: General Fund	Department ID-Authority ID:
		Project ID-Activity ID:	Invoice Period: 07/1/24 - 07/31/24
		FINAL Invoice <input type="checkbox"/> (check if Yes)	

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
Residential Program and Subsidies - Standard	90,155	247							90,155	247
Residential Program and Subsidies - Shallow	26,645	73							26,645	73
Residential Program and Subsidies - Partial	5,475	15							5,475	15

	UDC	UDC	UDC	UDC	UDC
Unduplicated Clients for Appendix		335			335

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$582,521				\$582,521.00
Fringe Benefits	\$157,281				\$157,281.00
Total Personnel Expenses	\$739,802				\$739,802.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$93,735				\$93,735.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$23,145				\$23,145.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$3,172,735				\$3,172,735.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$3,289,615				\$3,289,615.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$4,029,417				\$4,029,417.00
Indirect Expenses	\$604,413				\$604,413.00
TOTAL EXPENSES	\$4,633,830				\$4,633,830.00
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: aidsoffice@sfdph.org	By: _____ (DPH Authorized Signatory)	Date: _____
ATTN: Accounts Payable		

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE**

APPENDIX F-1d
07/01/2025 - 06/30/2026
PAGE A

Contractor: San Francisco AIDS Foundation Address: 1035 Market Street, Suite 400 San Francisco, CA 94103 Telephone: 415-487-3000 Fax:	Contract ID # 1000020925	Invoice Number A-1JUL25	Contract Purchase Order No:
Program Name: HIV Rental Subsidies ACE Control #:	HHS	Funding Source: General Fund	Department ID-Authority ID:
		Project ID-Activity ID:	Invoice Period: 07/1/25 - 07/31/25
		FINAL Invoice <input type="checkbox"/> (check if Yes)	

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
Residential Program and Subsidies - Standard	90,155	247							90,155	247
Residential Program and Subsidies - Shallow	26,645	73							26,645	73
Residential Program and Subsidies - Partial	5,475	15							5,475	15

	UDC	UDC	UDC	UDC	UDC
Unduplicated Clients for Appendix		335			335

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$582,521				\$582,521.00
Fringe Benefits	\$157,281				\$157,281.00
Total Personnel Expenses	\$739,802				\$739,802.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$93,735				\$93,735.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$23,145				\$23,145.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$3,172,735				\$3,172,735.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$3,289,615				\$3,289,615.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$4,029,417				\$4,029,417.00
Indirect Expenses	\$604,413				\$604,413.00
TOTAL EXPENSES	\$4,633,830				\$4,633,830.00
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: aidsoffice@sfdph.org	By: _____ (DPH Authorized Signatory)	Date: _____
ATTN: Accounts Payable		

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE**

APPENDIX F-1e
07/01/2026 - 06/30/2027
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000020925

Invoice Number
A-1JUL26

Telephone: 415-487-3000
Fax:



Contract Purchase Order No: _____

Funding Source: General Fund

Program Name: HIV Rental Subsidies

Department ID-Authority ID: _____

ACE Control #: _____

Project ID-Activity ID: _____

Invoice Period: 07/1/26 - 07/31/26

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
Residential Program and Subsidies - Standard	90,155	247							90,155	247
Residential Program and Subsidies - Shallow	26,645	73							26,645	73
Residential Program and Subsidies - Partial	5,475	15							5,475	15

	UDC	UDC	UDC	UDC	UDC
Unduplicated Clients for Appendix		335			335

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$582,521				\$582,521.00
Fringe Benefits	\$157,281				\$157,281.00
Total Personnel Expenses	\$739,802				\$739,802.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$93,735				\$93,735.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$23,145				\$23,145.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$3,172,735				\$3,172,735.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$3,289,615				\$3,289,615.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$4,029,417				\$4,029,417.00
Indirect Expenses	\$604,413				\$604,413.00
TOTAL EXPENSES	\$4,633,830				\$4,633,830.00
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: aidsoffice@sfdph.org	By: _____	Date: _____
ATTN: Accounts Payable	(DPH Authorized Signatory)	

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE**

APPENDIX F-1f
07/01/2027 - 06/30/2028
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000020925

Invoice Number
A-1JUL27

Telephone: 415-487-3000
Fax:



Contract Purchase Order No: _____

Funding Source: General Fund

Program Name: HIV Rental Subsidies

Department ID-Authority ID: _____

ACE Control #: _____

Project ID-Activity ID: _____

Invoice Period: 07/1/27 - 07/31/27

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
Residential Program and Subsidies - Standard	90,155	247							90,155	247
Residential Program and Subsidies - Shallow	26,645	73							26,645	73
Residential Program and Subsidies - Partial	5,475	15							5,475	15

	UDC	UDC	UDC	UDC	UDC
Unduplicated Clients for Appendix		335			335

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$582,521				\$582,521.00
Fringe Benefits	\$157,281				\$157,281.00
Total Personnel Expenses	\$739,802				\$739,802.00
Operating Expenses:					
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$93,735				\$93,735.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$23,145				\$23,145.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$3,172,735				\$3,172,735.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$3,289,615				\$3,289,615.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$4,029,417				\$4,029,417.00
Indirect Expenses	\$604,413				\$604,413.00
TOTAL EXPENSES	\$4,633,830				\$4,633,830.00
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: aidsoffice@sfdph.org	By: _____	Date: _____
ATTN: Accounts Payable	(DPH Authorized Signatory)	

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE**

APPENDIX F-1g
07/01/2028 - 06/30/2029
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000020925

Invoice Number
A-1JUL28

Telephone: 415-487-3000
Fax:



Contract Purchase Order No: _____

Funding Source: General Fund

Program Name: HIV Rental Subsidies

Department ID-Authority ID: _____

ACE Control #: _____

Project ID-Activity ID: _____

Invoice Period: 07/1/28 - 07/31/28

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
Residential Program and Subsidies - Standard	90,155	247							90,155	247
Residential Program and Subsidies - Shallow	26,645	73							26,645	73
Residential Program and Subsidies - Partial	5,475	15							5,475	15

	UDC	UDC	UDC	UDC	UDC
Unduplicated Clients for Appendix		335			335

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$582,521				\$582,521.00
Fringe Benefits	\$157,281				\$157,281.00
Total Personnel Expenses	\$739,802				\$739,802.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$93,735				\$93,735.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$23,145				\$23,145.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$3,172,735				\$3,172,735.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$3,289,615				\$3,289,615.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$4,029,417				\$4,029,417.00
Indirect Expenses	\$604,413				\$604,413.00
TOTAL EXPENSES	\$4,633,830				\$4,633,830.00
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: aidsoffice@sfdph.org	By: _____	Date: _____
ATTN: Accounts Payable	(DPH Authorized Signatory)	

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE**

APPENDIX F-1h
07/01/2029 - 06/30/2030
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000020925

Invoice Number
A-1JUL29

Telephone: 415-487-3000
Fax:



Contract Purchase Order No: _____

Funding Source: General Fund

Program Name: HIV Rental Subsidies

Department ID-Authority ID: _____

ACE Control #: _____

Project ID-Activity ID: _____

Invoice Period: 07/1/29 - 07/31/29

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
Residential Program and Subsidies - Standard	90,155	247							90,155	247
Residential Program and Subsidies - Shallow	26,645	73							26,645	73
Residential Program and Subsidies - Partial	5,475	15							5,475	15

	UDC	UDC	UDC	UDC	UDC
Unduplicated Clients for Appendix		335			335

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$582,521				\$582,521.00
Fringe Benefits	\$157,281				\$157,281.00
Total Personnel Expenses	\$739,802				\$739,802.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$93,735				\$93,735.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$23,145				\$23,145.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$3,172,735				\$3,172,735.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$3,289,615				\$3,289,615.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$4,029,417				\$4,029,417.00
Indirect Expenses	\$604,413				\$604,413.00
TOTAL EXPENSES	\$4,633,830				\$4,633,830.00
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: aidsoffice@sfdph.org	By: _____	Date: _____
ATTN: Accounts Payable	(DPH Authorized Signatory)	

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE**

APPENDIX F-1h
07/01/2029 - 06/30/2030
PAGE B

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Telephone: 415-487-3000
Fax:

Program Name: HIV Rental Subsidies

ACE Control #:

Invoice Number

Contract Purchase Order No:

Fund Source:

Department ID-Authority ID:

Project ID-Activity ID:

Invoice Period:

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Housing & Benefits Manager	0.64	\$59,865				\$59,865.00
Director of Government Grants	0.03	\$2,838				\$2,838.00
Housing Subsidies Administrator	0.30	\$24,978				\$24,978.00
Database Manager	0.20	\$30,163				\$30,163.00
Case Managers (CM)	4.00	\$267,373				\$267,373.00
Services Lobby Manager	0.60	\$69,310				\$69,310.00
Triage Assistant	1.40	\$101,433				\$101,433.00
Data Analyst	0.10	\$11,552				\$11,552.00
Sr. Dir, Community Partner & Eng	0.10	\$15,009				\$15,009.00
TOTAL SALARIES	7.37	\$582,521				\$582,521.00

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 DELIVERABLES AND COST REIMBURSEMENT INVOICE**

APPENDIX F-1i
07/01/2030 - 06/30/2031
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000020925

Invoice Number
A-1JUL30

Telephone: 415-487-3000
Fax:



Contract Purchase Order No: _____

Funding Source: General Fund

Program Name: HIV Rental Subsidies

Department ID-Authority ID: _____

ACE Control #: _____

Project ID-Activity ID: _____

Invoice Period: 07/1/30 - 07/31/30

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
Residential Program and Subsidies - Standard	90,155	247							90,155	247
Residential Program and Subsidies - Shallow	26,645	73							26,645	73
Residential Program and Subsidies - Partial	5,475	15							5,475	15

	UDC	UDC	UDC	UDC	UDC
Unduplicated Clients for Appendix		335			335

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$582,521				\$582,521.00
Fringe Benefits	\$157,281				\$157,281.00
Total Personnel Expenses	\$739,802				\$739,802.00
Operating Expenses:					
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$93,735				\$93,735.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$23,145				\$23,145.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$3,172,735				\$3,172,735.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$3,289,615				\$3,289,615.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$4,029,417				\$4,029,417.00
Indirect Expenses	\$604,413				\$604,413.00
TOTAL EXPENSES	\$4,633,830				\$4,633,830.00
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: aidsoffice@sfdph.org	By: _____	Date: _____
ATTN: Accounts Payable	(DPH Authorized Signatory)	

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE**

APPENDIX F-1i
07/01/2030 - 06/30/2031
PAGE B

<p>Contractor: San Francisco AIDS Foundation Address: 1035 Market Street, Suite 400 San Francisco, CA 94103</p> <p>Telephone: 415-487-3000 Fax:</p> <p>Program Name: HIV Rental Subsidies</p> <p>ACE Control #: <input style="width: 200px;" type="text"/></p>	<p style="text-align: right;">Invoice Number <input style="width: 150px;" type="text" value="A-1JUL30"/></p> <p>Contract Purchase Order No: <input style="width: 150px;" type="text"/></p> <p>Fund Source: <input style="width: 150px;" type="text" value="General Fund"/></p> <p>Department ID-Authority ID: <input style="width: 150px;" type="text"/></p> <p>Project ID-Activity ID: <input style="width: 150px;" type="text"/></p> <p>Invoice Period: <input style="width: 150px;" type="text" value="07/1/30 - 07/31/30"/></p> <p>FINAL Invoice <input style="width: 50px;" type="checkbox"/> (check if Yes)</p>
--	---

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Housing & Benefits Manager	0.64	\$59,865				\$59,865.00
Director of Government Grants	0.03	\$2,838				\$2,838.00
Housing Subsidies Administrator	0.30	\$24,978				\$24,978.00
Database Manager	0.20	\$30,163				\$30,163.00
Case Managers (CM)	4.00	\$267,373				\$267,373.00
Services Lobby Manager	0.60	\$69,310				\$69,310.00
Triage Assistant	1.40	\$101,433				\$101,433.00
Data Analyst	0.10	\$11,552				\$11,552.00
Sr. Dir, Community Partner & Eng	0.10	\$15,009				\$15,009.00
TOTAL SALARIES	7.37	\$582,521				\$582,521.00

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: _____

Appendix D--Interests In Other City Contracts

City Department or Commission	Date of Contract	Amount of Contract
Department of Public Health	07/01/2016 – 06/30/2025	\$2,627,600
Department of Public Health	03/01/2021 – 07/31/2025	\$761,600
Department of Public Health	07/01/2020 – 06/30/2023	\$8,143,276
Department of Public Health	02/01/2016 – 06/30/2025	\$4,800,715
Department of Public Health	07/01/2016 – 06/30/2026	\$42,115,471
Department of Public Health	01/01/2023 – 06/30/2026	\$11,886,595
Department of Public Health	12/01/2022 – 06/30/2024	\$500,000
Department of Public Health	01/01/2022 – 06/30/2023	\$5,279,755
Department of Public Health	07/01/2018 – 12/31/2024	\$9,670,495

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

This Business Associate Agreement (“BAA”) supplements and is made a part of the contract by and between the City and County of San Francisco, the Covered Entity (“CE”), and Contractor, the Business Associate (“BA”) (the “Agreement”). To the extent that the terms of the Agreement are inconsistent with the terms of this BAA, the terms of this BAA shall control.

RECITALS

- A. CE, by and through the San Francisco Department of Public Health (“SFDPH”), wishes to disclose certain information to BA pursuant to the terms of the Agreement, some of which may constitute Protected Health Information (“PHI”) (defined below).
- B. For purposes of the Agreement, CE requires Contractor, even if Contractor is also a covered entity under HIPAA, to comply with the terms and conditions of this BAA as a BA of CE.
- C. CE and BA intend to protect the privacy and provide for the security of PHI disclosed to BA pursuant to the Agreement in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 (“HIPAA”), the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 (“the HITECH Act”), and regulations promulgated there under by the U.S. Department of Health and Human Services (the “HIPAA Regulations”) and other applicable laws, including, but not limited to, California Civil Code §§ 56, et seq., California Health and Safety Code § 1280.15, California Civil Code §§ 1798, et seq., California Welfare & Institutions Code §§5328, et seq., and the regulations promulgated there under (the “California Regulations”).
- D. As part of the HIPAA Regulations, the Privacy Rule and the Security Rule (defined below) require CE to enter into a contract containing specific requirements with BA prior to the disclosure of PHI, as set forth in, but not limited to, Title 45, Sections 164.314(a), 164.502(a) and (e) and 164.504(e) of the Code of Federal Regulations (“C.F.R.”) and contained in this BAA.
- E. BA enters into agreements with CE that require the CE to disclose certain identifiable health information to BA. The parties desire to enter into this BAA to permit BA to have access to such information and comply with the BA requirements of HIPAA, the HITECH Act, and the corresponding Regulations.

In consideration of the mutual promises below and the exchange of information pursuant to this BAA, the parties agree as follows:

1. Definitions.

a. Breach means the unauthorized acquisition, access, use, or disclosure of PHI that compromises the security or privacy of such information, except where an unauthorized person to whom such information is disclosed would not reasonably have been able to retain such information, and shall have the meaning given to such term under the HITECH Act and HIPAA Regulations [42 U.S.C. Section 17921 and 45 C.F.R. Section 164.402], as well as California Civil Code Sections 1798.29 and 1798.82.

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

b. Breach Notification Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and D.

c. Business Associate is a person or entity that performs certain functions or activities that involve the use or disclosure of protected health information received from a covered entity, but other than in the capacity of a member of the workforce of such covered entity or arrangement, and shall have the meaning given to such term under the Privacy Rule, the Security Rule, and the HITECH Act, including, but not limited to, 42 U.S.C. Section 17938 and 45 C.F.R. Section 160.103.

d. Covered Entity means a health plan, a health care clearinghouse, or a health care provider who transmits any information in electronic form in connection with a transaction covered under HIPAA Regulations, and shall have the meaning given to such term under the Privacy Rule and the Security Rule, including, but not limited to, 45 C.F.R. Section 160.103.

e. Data Aggregation means the combining of Protected Information by the BA with the Protected Information received by the BA in its capacity as a BA of another CE, to permit data analyses that relate to the health care operations of the respective covered entities, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

f. Designated Record Set means a group of records maintained by or for a CE, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

g. Electronic Protected Health Information means Protected Health Information that is maintained in or transmitted by electronic media and shall have the meaning given to such term under HIPAA and the HIPAA Regulations, including, but not limited to, 45 C.F.R. Section 160.103. For the purposes of this BAA, Electronic PHI includes all computerized data, as defined in California Civil Code Sections 1798.29 and 1798.82.

h. Electronic Health Record means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health care clinicians and staff, and shall have the meaning given to such term under the HITECH Act, including, but not limited to, 42 U.S.C. Section 17921.

i. Health Care Operations shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

j. Privacy Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and E.

k. Protected Health Information or PHI means any information, including electronic PHI, whether oral or recorded in any form or medium: (i) that relates to the past, present or future physical or mental condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (ii) that identifies the individual or

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

with respect to which there is a reasonable basis to believe the information can be used to identify the individual, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Sections 160.103 and 164.501. For the purposes of this BAA, PHI includes all medical information and health insurance information as defined in California Civil Code Sections 56.05 and 1798.82.

l. Protected Information shall mean PHI provided by CE to BA or created, maintained, received or transmitted by BA on CE's behalf.

m. Security Incident means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system, and shall have the meaning given to such term under the Security Rule, including, but not limited to, 45 C.F.R. Section 164.304.

n. Security Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and C.

o. Unsecured PHI means PHI that is not secured by a technology standard that renders PHI unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute, and shall have the meaning given to such term under the HITECH Act and any guidance issued pursuant to such Act including, but not limited to, 42 U.S.C. Section 17932(h) and 45 C.F.R. Section 164.402.

2. Obligations of Business Associate.

a. Attestations. Except when CE's data privacy officer exempts BA in writing, the BA shall complete the following forms, attached and incorporated by reference as though fully set forth herein, SFDPH Attestations for Privacy (Attachment 1) and Data Security (Attachment 2) within sixty (60) calendar days from the execution of the Agreement. If CE makes substantial changes to any of these forms during the term of the Agreement, the BA will be required to complete CE's updated forms within sixty (60) calendar days from the date that CE provides BA with written notice of such changes. BA shall retain such records for a period of seven years after the Agreement terminates and shall make all such records available to CE within 15 calendar days of a written request by CE.

b. User Training. The BA shall provide, and shall ensure that BA subcontractors, provide, training on PHI privacy and security, including HIPAA and HITECH and its regulations, to each employee or agent that will access, use or disclose Protected Information, upon hire and/or prior to accessing, using or disclosing Protected Information for the first time, and at least annually thereafter during the term of the Agreement. BA shall maintain, and shall ensure that BA subcontractors maintain, records indicating the name of each employee or agent and date on which the PHI privacy and security trainings were completed. BA shall retain, and ensure that BA subcontractors retain, such records for a period of seven years after the Agreement terminates and shall make all such records available to CE within 15 calendar days of a written request by CE.

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

c. Permitted Uses. BA may use, access, and/or disclose Protected Information only for the purpose of performing BA's obligations for, or on behalf of, the City and as permitted or required under the Agreement and BAA, or as required by law. Further, BA shall not use Protected Information in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so used by CE. However, BA may use Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE [45 C.F.R. Sections 164.502, 164.504(e)(2), and 164.504(e)(4)(i)].

d. Permitted Disclosures. BA shall disclose Protected Information only for the purpose of performing BA's obligations for, or on behalf of, the City and as permitted or required under the Agreement and BAA, or as required by law. BA shall not disclose Protected Information in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so disclosed by CE. However, BA may disclose Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE. If BA discloses Protected Information to a third party, BA must obtain, prior to making any such disclosure, (i) reasonable written assurances from such third party that such Protected Information will be held confidential as provided pursuant to this BAA and used or disclosed only as required by law or for the purposes for which it was disclosed to such third party, and (ii) a written agreement from such third party to immediately notify BA of any breaches, security incidents, or unauthorized uses or disclosures of the Protected Information in accordance with paragraph 2 (n) of this BAA, to the extent it has obtained knowledge of such occurrences [42 U.S.C. Section 17932; 45 C.F.R. Section 164.504(e)]. BA may disclose PHI to a BA that is a subcontractor and may allow the subcontractor to create, receive, maintain, or transmit Protected Information on its behalf, if the BA obtains satisfactory assurances, in accordance with 45 C.F.R. Section 164.504(e)(1), that the subcontractor will appropriately safeguard the information [45 C.F.R. Section 164.502(e)(1)(ii)].

e. Prohibited Uses and Disclosures. BA shall not use or disclose Protected Information other than as permitted or required by the Agreement and BAA, or as required by law. BA shall not use or disclose Protected Information for fundraising or marketing purposes. BA shall not disclose Protected Information to a health plan for payment or health care operations purposes if the patient has requested this special restriction, and has paid out of pocket in full for the health care item or service to which the Protected Information solely relates [42 U.S.C. Section 17935(a) and 45 C.F.R. Section 164.522(a)(1)(vi)]. BA shall not directly or indirectly receive remuneration in exchange for Protected Information, except with the prior written consent of CE and as permitted by the HITECH Act, 42 U.S.C. Section 17935(d)(2), and the HIPAA regulations, 45 C.F.R. Section 164.502(a)(5)(ii); however, this prohibition shall not affect payment by CE to BA for services provided pursuant to the Agreement.

f. Appropriate Safeguards. BA shall take the appropriate security measures to protect the confidentiality, integrity and availability of PHI that it creates, receives, maintains, or transmits on behalf of the CE, and shall prevent any use or disclosure of PHI other than as permitted by the Agreement or this

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

BAA, including, but not limited to, administrative, physical and technical safeguards in accordance with the Security Rule, including, but not limited to, 45 C.F.R. Sections 164.306, 164.308, 164.310, 164.312, 164.314 164.316, and 164.504(e)(2)(ii)(B). BA shall comply with the policies and procedures and documentation requirements of the Security Rule, including, but not limited to, 45 C.F.R. Section 164.316, and 42 U.S.C. Section 17931. BA is responsible for any civil penalties assessed due to an audit or investigation of BA, in accordance with 42 U.S.C. Section 17934(c).

g. Business Associate's Subcontractors and Agents. BA shall ensure that any agents and subcontractors that create, receive, maintain or transmit Protected Information on behalf of BA, agree in writing to the same restrictions and conditions that apply to BA with respect to such PHI and implement the safeguards required by paragraph 2.f. above with respect to Electronic PHI [45 C.F.R. Section 164.504(e)(2) through (e)(5); 45 C.F.R. Section 164.308(b)]. BA shall mitigate the effects of any such violation.

h. Accounting of Disclosures. Within ten (10) calendar days of a request by CE for an accounting of disclosures of Protected Information or upon any disclosure of Protected Information for which CE is required to account to an individual, BA and its agents and subcontractors shall make available to CE the information required to provide an accounting of disclosures to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.528, and the HITECH Act, including but not limited to 42 U.S.C. Section 17935 (c), as determined by CE. BA agrees to implement a process that allows for an accounting to be collected and maintained by BA and its agents and subcontractors for at least seven (7) years prior to the request. However, accounting of disclosures from an Electronic Health Record for treatment, payment or health care operations purposes are required to be collected and maintained for only three (3) years prior to the request, and only to the extent that BA maintains an Electronic Health Record. At a minimum, the information collected and maintained shall include: (i) the date of disclosure; (ii) the name of the entity or person who received Protected Information and, if known, the address of the entity or person; (iii) a brief description of Protected Information disclosed; and (iv) a brief statement of purpose of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure [45 C.F.R. 164.528(b)(2)]. If an individual or an individual's representative submits a request for an accounting directly to BA or its agents or subcontractors, BA shall forward the request to CE in writing within five (5) calendar days.

i. Access to Protected Information. BA shall make Protected Information maintained by BA or its agents or subcontractors in Designated Record Sets available to CE for inspection and copying within (5) days of request by CE to enable CE to fulfill its obligations under state law [Health and Safety Code Section 123110] and the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.524 [45 C.F.R. Section 164.504(e)(2)(ii)(E)]. If BA maintains Protected Information in electronic format, BA shall provide such information in electronic format as necessary to enable CE to fulfill its obligations under the HITECH Act and HIPAA Regulations, including, but not limited to, 42 U.S.C. Section 17935(e) and 45 C.F.R. 164.524.

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

j. Amendment of Protected Information. Within ten (10) days of a request by CE for an amendment of Protected Information or a record about an individual contained in a Designated Record Set, BA and its agents and subcontractors shall make such Protected Information available to CE for amendment and incorporate any such amendment or other documentation to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R Section 164.526. If an individual requests an amendment of Protected Information directly from BA or its agents or subcontractors, BA must notify CE in writing within five (5) days of the request and of any approval or denial of amendment of Protected Information maintained by BA or its agents or subcontractors [45 C.F.R. Section 164.504(e)(2)(ii)(F)].

k. Governmental Access to Records. BA shall make its internal practices, books and records relating to the use and disclosure of Protected Information available to CE and to the Secretary of the U.S. Department of Health and Human Services (the “Secretary”) for purposes of determining BA’s compliance with HIPAA [45 C.F.R. Section 164.504(e)(2)(ii)(I)]. BA shall provide CE a copy of any Protected Information and other documents and records that BA provides to the Secretary concurrently with providing such Protected Information to the Secretary.

l. Minimum Necessary. BA, its agents and subcontractors shall request, use and disclose only the minimum amount of Protected Information necessary to accomplish the intended purpose of such use, disclosure, or request. [42 U.S.C. Section 17935(b); 45 C.F.R. Section 164.514(d)]. BA understands and agrees that the definition of “minimum necessary” is in flux and shall keep itself informed of guidance issued by the Secretary with respect to what constitutes “minimum necessary” to accomplish the intended purpose in accordance with HIPAA and HIPAA Regulations.

m. Data Ownership. BA acknowledges that BA has no ownership rights with respect to the Protected Information.

n. Notification of Breach. BA shall notify CE within 5 calendar days of any breach of Protected Information; any use or disclosure of Protected Information not permitted by the BAA; any Security Incident (except as otherwise provided below) related to Protected Information, and any use or disclosure of data in violation of any applicable federal or state laws by BA or its agents or subcontractors. The notification shall include, to the extent possible, the identification of each individual whose unsecured Protected Information has been, or is reasonably believed by the BA to have been, accessed, acquired, used, or disclosed, as well as any other available information that CE is required to include in notification to the individual, the media, the Secretary, and any other entity under the Breach Notification Rule and any other applicable state or federal laws, including, but not limited, to 45 C.F.R. Section 164.404 through 45 C.F.R. Section 164.408, at the time of the notification required by this paragraph or promptly thereafter as information becomes available. BA shall take (i) prompt corrective action to cure any deficiencies and (ii) any action pertaining to unauthorized uses or disclosures required by applicable federal and state laws. [42 U.S.C. Section 17921; 42 U.S.C. Section 17932; 45 C.F.R. 164.410; 45 C.F.R. Section 164.504(e)(2)(ii)(C); 45 C.F.R. Section 164.308(b)]

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

o. Breach Pattern or Practice by Business Associate's Subcontractors and Agents.

Pursuant to 42 U.S.C. Section 17934(b) and 45 C.F.R. Section 164.504(e)(1)(iii), if the BA knows of a pattern of activity or practice of a subcontractor or agent that constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this BAA, the BA must take reasonable steps to cure the breach or end the violation. If the steps are unsuccessful, the BA must terminate the contractual arrangement with its subcontractor or agent, if feasible. BA shall provide written notice to CE of any pattern of activity or practice of a subcontractor or agent that BA believes constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this BAA within five (5) calendar days of discovery and shall meet with CE to discuss and attempt to resolve the problem as one of the reasonable steps to cure the breach or end the violation.

3. Termination.

a. Material Breach. A breach by BA of any provision of this BAA, as determined by CE, shall constitute a material breach of the Agreement and this BAA and shall provide grounds for immediate termination of the Agreement and this BAA, any provision in the AGREEMENT to the contrary notwithstanding. [45 C.F.R. Section 164.504(e)(2)(iii).]

b. Judicial or Administrative Proceedings. CE may terminate the Agreement and this BAA, effective immediately, if (i) BA is named as defendant in a criminal proceeding for a violation of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws or (ii) a finding or stipulation that the BA has violated any standard or requirement of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws is made in any administrative or civil proceeding in which the party has been joined.

c. Effect of Termination. Upon termination of the Agreement and this BAA for any reason, BA shall, at the option of CE, return or destroy all Protected Information that BA and its agents and subcontractors still maintain in any form, and shall retain no copies of such Protected Information. If return or destruction is not feasible, as determined by CE, BA shall continue to extend the protections and satisfy the obligations of Section 2 of this BAA to such information, and limit further use and disclosure of such PHI to those purposes that make the return or destruction of the information infeasible [45 C.F.R. Section 164.504(e)(2)(ii)(J)]. If CE elects destruction of the PHI, BA shall certify in writing to CE that such PHI has been destroyed in accordance with the Secretary's guidance regarding proper destruction of PHI. Per the Secretary's guidance, the City will accept destruction of electronic PHI in accordance with the standards enumerated in the NIST SP 800-88, Guidelines for Media Sanitization. The City will accept destruction of PHI contained in paper records by shredding, burning, pulping, or pulverizing the records so that the PHI is rendered unreadable, indecipherable, and otherwise cannot be reconstructed.

d. Civil and Criminal Penalties. BA understands and agrees that it is subject to civil or criminal penalties applicable to BA for unauthorized use, access or disclosure or Protected Information in accordance with the HIPAA Regulations and the HITECH Act including, but not limited to, 42 U.S.C. 17934 (c).

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

e. Disclaimer. CE makes no warranty or representation that compliance by BA with this BAA, HIPAA, the HITECH Act, or the HIPAA Regulations or corresponding California law provisions will be adequate or satisfactory for BA's own purposes. BA is solely responsible for all decisions made by BA regarding the safeguarding of PHI.

4. Amendment to Comply with Law.

The parties acknowledge that state and federal laws relating to data security and privacy are rapidly evolving and that amendment of the Agreement or this BAA may be required to provide for procedures to ensure compliance with such developments. The parties specifically agree to take such action as is necessary to implement the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations and other applicable state or federal laws relating to the security or confidentiality of PHI. The parties understand and agree that CE must receive satisfactory written assurance from BA that BA will adequately safeguard all Protected Information. Upon the request of either party, the other party agrees to promptly enter into negotiations concerning the terms of an amendment to this BAA embodying written assurances consistent with the updated standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations or other applicable state or federal laws. CE may terminate the Agreement upon thirty (30) days written notice in the event (i) BA does not promptly enter into negotiations to amend the Agreement or this BAA when requested by CE pursuant to this section or (ii) BA does not enter into an amendment to the Agreement or this BAA providing assurances regarding the safeguarding of PHI that CE, in its sole discretion, deems sufficient to satisfy the standards and requirements of applicable laws.

5. Reimbursement for Fines or Penalties.

In the event that CE pays a fine to a state or federal regulatory agency, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible access, use or disclosure of PHI by BA or its subcontractors or agents, then BA shall reimburse CE in the amount of such fine or penalties or damages within thirty (30) calendar days from City's written notice to BA of such fines, penalties or damages.

Attachment 1 – SFDPH Privacy Attestation, version 06-07-2017

Attachment 2 – SFDPH Data Security Attestation, version 06-07-2017

Office of Compliance and Privacy Affairs
San Francisco Department of Public Health
101 Grove Street, Room 330, San Francisco, CA 94102
Email: compliance.privacy@sfdph.org
Hotline (Toll-Free): 1-855-729-6040

Contractor Name:		Contractor City Vendor ID	
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PRIVACY ATTESTATION

INSTRUCTIONS: Contractors and Partners who receive or have access to health or medical information or electronic health record systems maintained by SFPDH must complete this form. Retain completed Attestations in your files for a period of 7 years. Be prepared to submit completed attestations, along with evidence related to the following items, if requested to do so by SFPDH.

Exceptions: If you believe that a requirement is Not Applicable to you, see instructions below in Section IV on how to request clarification or obtain an exception.

I. All Contractors.

DOES YOUR ORGANIZATION...							Yes	No*
A	Have formal Privacy Policies that comply with the Health Insurance Portability and Accountability Act (HIPAA)?						<input type="checkbox"/>	<input type="checkbox"/>
B	Have a Privacy Officer or other individual designated as the person in charge of investigating privacy breaches or related incidents?						<input type="checkbox"/>	<input type="checkbox"/>
	If yes:	Name & Title:		Phone #		Email:		
C	Require health information Privacy Training upon hire and annually thereafter for all employees who have access to health information? [Retain documentation of trainings for a period of 7 years.] [SFPDH privacy training materials are available for use; contact OCPA at 1-855-729-6040.]						<input type="checkbox"/>	<input type="checkbox"/>
D	Have proof that employees have signed a form upon hire and annually thereafter, with their name and the date, acknowledging that they have received health information privacy training? [Retain documentation of acknowledgement of trainings for a period of 7 years.]						<input type="checkbox"/>	<input type="checkbox"/>
E	Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit, or access SFPDH's health information?						<input type="checkbox"/>	<input type="checkbox"/>
F	Assure that staff who create, or transfer health information (via laptop, USB/thumb-drive, handheld), have prior supervisory authorization to do so AND that health information is only transferred or created on encrypted devices approved by SFPDH Information Security staff?						<input type="checkbox"/>	<input type="checkbox"/>

II. Contractors who serve patients/clients and have access to SFPDH PHI, must also complete this section.

If Applicable: DOES YOUR ORGANIZATION...							Yes	No*
G	Have (or will have if/when applicable) evidence that SFPDH Service Desk (628-206-SERV) was notified to de-provision employees who have access to SFPDH health information record systems within 2 business days for regular terminations and within 24 hours for terminations due to cause?						<input type="checkbox"/>	<input type="checkbox"/>
H	Have evidence in each patient's / client's chart or electronic file that a Privacy Notice that meets HIPAA regulations was provided in the patient's / client's preferred language? (English, Cantonese, Vietnamese, Tagalog, Spanish, Russian forms may be required and are available from SFPDH.)						<input type="checkbox"/>	<input type="checkbox"/>
I	Visibly post the Summary of the Notice of Privacy Practices in all six languages in common patient areas of your treatment facility?						<input type="checkbox"/>	<input type="checkbox"/>
J	Document each disclosure of a patient's/client's health information for purposes <u>other than</u> treatment, payment, or operations?						<input type="checkbox"/>	<input type="checkbox"/>
K	When required by law, have proof that signed authorization for disclosure forms (that meet the requirements of the HIPAA Privacy Rule) are obtained PRIOR to releasing a patient's/client's health information?						<input type="checkbox"/>	<input type="checkbox"/>

III. ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct and that I have authority to sign on behalf of and bind Contractor listed above.

ATTESTED by Privacy Officer or designated person	Name: (print)		Signature		Date	
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IV. *EXCEPTIONS: If you have answered "NO" to any question or believe a question is Not Applicable, please contact OCPA at **1-855-729-6040** or compliance.privacy@sfdph.org for a consultation. All "No" or "N/A" answers must be reviewed and approved by OCPA below.

EXCEPTION(S) APPROVED by OCPA	Name (print)		Signature		Date	
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Contractor Name:		Contractor City Vendor ID	
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DATA SECURITY ATTESTATION

INSTRUCTIONS: Contractors and Partners who receive or have access to health or medical information or electronic health record systems maintained by SFPDH must complete this form. Retain completed Attestations in your files for a period of 7 years. Be prepared to submit completed attestations, along with evidence related to the following items, if requested to do so by SFPDH.

Exceptions: If you believe that a requirement is Not Applicable to you, see instructions in Section III below on how to request clarification or obtain an exception.

I. All Contractors.

DOES YOUR ORGANIZATION...						Yes	No*
A	Conduct assessments/audits of your data security safeguards to demonstrate and document compliance with your security policies and the requirements of HIPAA/HITECH at least every two years? [Retain documentation for a period of 7 years]						
B	Use findings from the assessments/audits to identify and mitigate known risks into documented remediation plans?						
	Date of last Data Security Risk Assessment/Audit:						
	Name of firm or person(s) who performed the Assessment/Audit and/or authored the final report:						
C	Have a formal Data Security Awareness Program?						
D	Have formal Data Security Policies and Procedures to detect, contain, and correct security violations that comply with the Health Insurance Portability and Accountability Act (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH)?						
E	Have a Data Security Officer or other individual designated as the person in charge of ensuring the security of confidential information?						
	If yes:	Name & Title:	Phone #	Email:			
F	Require Data Security Training upon hire and annually thereafter for all employees who have access to health information? [Retain documentation of trainings for a period of 7 years.] [SFPDH data security training materials are available for use; contact OCPA at 1-855-729-6040.]						
G	Have proof that employees have signed a form upon hire and annually, or regularly, thereafter, with their name and the date, acknowledging that they have received data security training? [Retain documentation of acknowledgement of trainings for a period of 7 years.]						
H	Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit, or access SFPDH's health information?						
I	Have (or will have if/when applicable) a diagram of how SFPDH data flows between your organization and subcontractors or vendors (including named users, access methods, on-premise data hosts, processing systems, etc.)?						

II. ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct and that I have authority to sign on behalf of and bind Contractor listed above.

ATTESTED by Data Security Officer or designated person	Name: (print)		Signature		Date	
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III. *EXCEPTIONS: If you have answered "NO" to any question or believe a question is Not Applicable, please contact OCPA at **1-855-729-6040** or compliance.privacy@sfdph.org for a consultation. All "No" or "N/A" answers must be reviewed and approved by OCPA below.

EXCEPTION(S) APPROVED by OCPA	Name (print)		Signature		Date	
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APPENDIX K

Data Access and Sharing Terms

Article 1 Access

1.1 Revision to Scope of Access (RSA):

Any added access may be granted by the City to Agency and each Agency Data User through a Revision to Scope of Access in writing and executed by both parties. Any Revision to Scope of Access shall be considered a part of and incorporated into this Agreement, governed by all its terms, by reference.

1.2 Primary and Alternate Agency Site Administrator.

Before System(s) access is granted, Agency must appoint a primary and alternate Agency Site Administrator responsible for System(s) access tasks, including but not limited to the following:

1.2.1 Completing and obtaining City approval of the Account Provisioning Request documents and/or Data Set Request documents;

1.2.2 Communicating with the SFDPH IT Service Desk;

1.2.3 Providing Agency Data User(s) details to the City;

1.2.4 Ensuring that Agency Data User(s) complete required SFDPH trainings annually;

1.2.5 Ensuring that Agency Data User(s) understand and execute SFDPH's data access confidentiality agreement; and

1.2.6 Provisioning and deprovisioning Agency Data Users as detailed herein. To start the process, the Agency Site Administrator must contact the SFDPH IT Service Desk at 628-206-7378, dph.helpdesk@sfdph.org.

1.3 SFDPH IT Service Desk.

For new provisioning requests, only Agency Site Administrators are authorized to contact the SFDPH IT Service Desk. The City reserves the right to decline any call placed by other than the Agency Site Administrator. Individual Agency Data Users are not authorized to contact the SFDPH IT Service Desk.

1.4 Deprovisioning Schedule.

Agency, through the Agency Site Administrator, has sole responsibility to deprovision Agency Data Users from the System(s) as appropriate on an ongoing basis. Agency must immediately deprovision an Agency Data User upon any event ending that Data User's need to access the System(s), including job duty change and/or termination. Agency remains liable for the conduct of Agency Data Users until deprovisioned. When deprovisioning employees via the SFDPH IT Service Desk, Agency must maintain evidence that the SFDPH IT Service Desk was notified.

1.5 Active Directory.

Agency Data Users will need an SFDPH Active Directory account in order to access each System(s). These Active Directory Accounts will be created as part of the provisioning process.

1.6 Role Based Access.

Each Agency Data User's access to the System(s) will be role-based and access is limited to that necessary for treatment, payment, and health care operations. The City will assign Agency Data User roles upon provisioning and reserves the right to deny, revoke, limit, or modify Agency Data User's access acting in its sole discretion.

1.7 Training Requirements.

Before System(s) access is granted, and annually thereafter, each Agency Data User must complete SFDPH compliance, privacy, and security training. Agency must maintain written records evidencing such annual training for each Agency Data User and provide copies upon request to the City. For questions about how to complete SFDPH's compliance, privacy, and security training, contact Compliance.Privacy@sfdph.org, (855) 729-6040.

Before Agency Data User first access to System(s), system-specific training must be completed. For training information, Agency Site Administrator may contact the SFDPH IT Service Desk,

1.8 Agency Data User Confidentiality Agreement.

Before System(s) access is granted, as part of SFDPH's compliance, privacy, and security training, each Agency Data User must complete SFDPH's individual user confidentiality, data security and electronic signature agreement form. The agreement must be renewed annually.

1.9 Corrective Action.

Agency shall take corrective action, including but not limited to termination and/or suspension of any System(s) access by any Agency Data User who acts in violation of this Agreement and/or applicable regulatory requirements.

1.10 User ID and Password.

Each Agency Data User will be assigned or create a User ID and password. Agency and each Agency Data User shall protect the confidentiality of User IDs and passwords and shall not divulge them to any other person(s). Agency is responsible for the security of the User IDs and passwords issued to or created by Agency Data Users and is liable for any misuse.

1.11 Notification of Compromised Password.

In the event that a password assigned to or created by an Agency Data User is compromised or disclosed to a person other than the Agency Data User, Agency shall upon learning of the compromised password immediately notify the City, at Compliance.Privacy@sfdph.org, (855) 729-6040. Agency is liable for any such misuse. Agency's failure to monitor each Agency Data User's ID and/or password use shall provide grounds for the City to terminate and/or limit Agency's System(s) access.

1.12 Multi Factor Authentication.

Agency and each Agency Data User must use multi-factor authentication as directed by the City to access the System(s).

1.13 Qualified Personnel.

Agency shall allow only qualified personnel under Agency's direct supervision to act as Agency Data Users with access to the System(s).

1.14 Workstation/Laptop encryption.

All workstations and laptops that process and/or store City Data must be encrypted using a current industry standard algorithm. The encryption solution must be full disk unless approved by the SFDPH Information Security Office.

1.15 Server Security.

Servers containing unencrypted City Data must have sufficient administrative, physical, and technical controls in place to protect that data, based upon a risk assessment/system security review.

1.16 Removable media devices.

All electronic files that contain City Data must be encrypted using a current industry standard algorithm when stored on any removable media or portable device (i.e. USB thumb drives, CD/DVD, smart devices tapes etc.).

1.17 Antivirus software.

All workstations, laptops and other systems that process and/or store City Data must install and actively use a comprehensive anti-virus software solution with automatic updates scheduled at least daily.

1.18 Patch Management.

All workstations, laptops and other systems that process and/or store City Data must have operating system and application security patches applied, with system reboot if necessary. There must be a documented patch management process that determines installation timeframe based on risk assessment and vendor recommendations.

1.19 System Timeout.

The system must provide an automatic timeout, requiring reauthentication of the user session after no more than 20 minutes of inactivity.

1.20 Warning Banners.

All systems containing City Data must display a warning banner each time a user attempts access, stating that data is confidential, systems are logged, and system use is for business purposes only. User must be directed to log off the system if they do not agree with these requirements.

1.21 Transmission encryption.

All data transmissions of City Data outside the Agency's secure internal network must be encrypted using a current industry standard algorithm. Encryption can be end to end at the network level, or the data files containing City Data can be encrypted. This requirement pertains to any type of City Data in motion such as website access, file transfer, and e-mail.

1.22 No Faxing/Mailing.

City Data may not be faxed or mailed.

1.23 Intrusion Detection.

All systems involved in accessing, holding, transporting, and protecting City Data that are accessible via the Internet must be protected by a comprehensive intrusion detection and prevention solution.

of the City.

1.24 Security of PHI.

Agency is solely responsible for maintaining data security policies and procedures, consistent with those of the City that will adequately safeguard the City Data and the System. Upon request, Agency will provide such security policies and procedures to the City. The City may examine annually, or in response to a security or privacy incident, Agency's facilities, computers, privacy and security policies and procedures and related records as may be necessary to be assured that Agency is in compliance with the terms of this Agreement, and as applicable HIPAA, the HITECH Act, and other federal and state privacy and security laws and regulations. Such examination will occur at a mutually acceptable time agreed upon by the parties but no later than ten (10) business days of Agency's receipt of the request.

1.25 Data Security and City Data

Agency shall provide security for its networks and all internet connections consistent with industry best practices, and will promptly install all patches, fixes, upgrades, updates and new versions of any security software it employs. For information disclosed in electronic form, Agency agrees that appropriate safeguards include electronic barriers (e.g., "firewalls", Transport Layer Security (TLS), Secure Socket Layer [SSL] encryption, or most current industry standard encryption, intrusion prevention/detection or similar barriers).

1.26 Data Privacy and Information Security Program.

Without limiting Agency's obligation of confidentiality as further described herein, Agency shall be responsible for establishing and maintaining a data privacy and information security program, including physical, technical, administrative, and organizational safeguards, that is designed to: (i) ensure the security and confidentiality of the City Data; (ii) protect against any anticipated threats or hazards to the security or integrity of the City Data; (iii) protect against unauthorized disclosure, access to, or use of the City Data; (iv) ensure the proper disposal of City Data; and, (v) ensure that all of Agency's employees, agents, and subcontractors, if any, comply with all of the foregoing. In no case shall the safeguards of Agency's data privacy and information security program be less stringent than the safeguards and standards recommended by the National Institute of Standards and Technology (NIST) Cybersecurity Framework and the Health Information Technology for Economic and Clinical Health Act (HITECH).

1.27 Disaster Recovery.

Agency must establish a documented plan to protect the security of electronic City Data in the event of an emergency. Emergency means any circumstance or situation that causes normal computer operations to become unavailable for use in performing the work required under this agreement for more than 24 hours.

1.28 Supervision of Data.

City Data in paper form shall not be left unattended at any time, unless it is locked in a file cabinet, file room, desk or office. Unattended means that information is not being observed by an Agency Data User authorized to access the information. City Data in paper form shall not be left unattended at any time in vehicles or planes and shall not be checked in baggage on commercial airplanes.

1.29 As Is Access.

The City provides Agency and each Agency Data User with System(s) access on an "as is" basis with no guarantee as to uptime, accessibility, or usefulness. To the fullest extent permissible by applicable law, the City disclaims all warranties, express or implied, including, without limitation, implied warranties of merchantability, fitness for a particular purpose, title and non-infringement.

1.30 No Technical or Administrative Support.

Except as provided herein, the City will provide no technical or administrative support to Agency or Agency Data Users for System(s) access.

1.31 City Audit of Agency and Agency Data Users.

The City acting in its sole discretion may audit Agency and Agency Data Users at any time. If an audit reveals an irregularity or security issue, the City may take corrective action including but not limited to termination of such Agency's and/or Agency Data User's access to the System(s) permanently or until the City determines that all irregularities have been satisfactorily cured. Agency and each Agency Data User understands that the City may create and review an audit trail for each Agency Data User, including but not limited to, noting each Agency Data User's ID(s), the patient information accessed, and/or the date accessed. Agency and each Agency Data User understands that any inappropriate access or use of patient information, as determined by the City, may result in the temporary and/or permanent termination of Agency's or such Agency Data User's access to the System(s). Agency remains liable for all inappropriate System(s) access, misuse and/or breach of patient information, whether in electronic or hard-copy form.

1.32 Minimum Necessary.

Agency and each Agency Data User shall safeguard the confidentiality of all City Data that is viewed or obtained through the System(s) at all times. Agency and each Agency Data User shall access patient information in the System(s) only to the minimum extent necessary for its assigned duties and shall only disclose such information to persons authorized to receive it, as minimally necessary for treatment, payment and health care operations.

1.33 No Re-Disclosure or Reporting.

Agency may not in any way re-disclose SFDPH Data or otherwise prepare reports, summaries, or any other material (in electronic or hard-copy format) regarding or containing City Data for transmission to any other requesting individuals, agencies, or organizations without prior written City approval and where such re-disclosure is otherwise permitted or required by law.

1.34 Health Information Exchange.

If Agency is qualified to enroll in a health information exchange, the City encourages Agency to do so in order to facilitate the secure exchange of data between Agency's electronic health record system (EHR) and the City's Epic EHR.

1.35 Subcontracting.

Agency may not subcontract any portion of Data Access Agreement, except upon prior written approval of City. If the City approves a subcontract, Agency remains fully responsible for its subcontractor(s) throughout the term and/or after expiration of this Agreement. All Subcontracts must incorporate the terms of this Data Access Agreement. To the extent that any subcontractor would have access to a System, each such subcontractor's access must be limited and subject to the same governing terms to the same extent as Agency's access. In addition, each contract between Agency and that subcontractor must, except as the City otherwise agrees, include a Business Associate Agreement requiring such subcontractor to comply with all regulatory requirements regarding third-party access, and include a provision obligating that subcontractor to (1) defend, indemnify, and hold the City harmless in the event of a data

breach in the same manner in which Agency would be so obligated, (2) provide cyber with limits identified in Article 5, and (3) ensure that such data has been destroyed, returned, and/or protected as provided by HIPAA at the expiration of the subcontract term.

Article 2 Indemnity

2.1 Medical Malpractice Indemnification.

Agency recognizes that the System(s) is a sophisticated tool for use only by trained personnel, and it is not a substitute for competent human intervention and discretionary thinking. Therefore, if providing patient treatment, Agency agrees that it will:

- (a) Read information displayed or transmitted by the System accurately and completely;
- (b) Ensure that Agency Data Users are trained on the use of the System;
- (c) Be responsible for decisions made based on the use of the System;
- (d) Verify the accuracy of all information accessed through the System using applicable standards of good medical practice to no less a degree than if Agency were using paper records;
- (e) Report to the City as soon as reasonably practicable all data errors and suspected problems related to the System that Agency knows or should know could adversely affect patient care;
- (f) Follow industry standard business continuity policies and procedures that will permit Agency to provide patient care in the event of a disaster or the System unavailability;
- (g) Use the System only in accordance with applicable standards of good medical practice.

Agency agrees to indemnify, hold harmless and defend City from any claim by or on behalf of any patient, or by or on behalf of any other third party or person claiming damage by virtue of a familial or financial relationship with such a patient, regardless of the cause, if such claim in any way arises out of or relates to patient care or outcomes based on Agency's or an Agency Data User's System access.

Article 3 Proprietary Rights and Data Breach

3.1 Ownership of City Data.

The Parties agree that as between them, all rights, including all intellectual property rights in and to the City Data and any derivative works of the City Data shall remain the exclusive property of the City.

3.2 Data Breach; Loss of City Data.

The Agency shall notify City immediately by telephone call plus email upon the discovery of a breach (as herein). For purposes of this Section, breaches and security incidents shall be treated as discovered by Agency as of the first day on which such breach or security incident is known to the Agency, or, by exercising reasonable diligence would have been known to the Agency. Agency shall be deemed to have knowledge of a breach if such breach is known, or by exercising reasonable diligence would have been known, to any person, other than the person committing the breach, who is an employee or agent of the Agency.

Agency shall take:

- i. prompt corrective action to mitigate any risks or damages involved with the breach or security incident and to protect the operating environment; and
- ii. any action pertaining to a breach required by applicable federal and state laws.

3.2.1 Investigation of Breach and Security Incidents: The Agency shall immediately investigate such breach or security incident. As soon as the information is known and shall inform the City of:

- i. what data elements were involved, and the extent of the data disclosure or access involved in the breach, including, specifically, the number of individuals whose personal information was breached; and
- ii. a description of the unauthorized persons known or reasonably believed to have improperly used the City Data and/or a description of the unauthorized persons known or reasonably believed to have improperly accessed or acquired the City Data, or to whom it is known or reasonably believed to have had the City Data improperly disclosed to them; and
- iii. a description of where the City Data is believed to have been improperly used or disclosed; and
- iv. a description of the probable and proximate causes of the breach or security incident; and
- v. whether any federal or state laws requiring individual notifications of breaches have been triggered.

3.2.2 Written Report: Agency shall provide a written report of the investigation to the City as soon as practicable after the discovery of the breach or security incident. The report shall include, but not be limited to, the information specified above, as well as a complete, detailed corrective action plan, including information on measures that were taken to halt and/or contain the breach or security incident, and measures to be taken to prevent the recurrence or further disclosure of data regarding such breach or security incident.

3.2.3 Notification to Individuals: If notification to individuals whose information was breached is required under state or federal law, and regardless of whether Agency is considered only a custodian and/or non-owner of the City Data, Agency shall, at its sole expense, and at the sole election of City, either:

- i. make notification to the individuals affected by the breach (including substitute notification), pursuant to the content and timeliness provisions of such applicable state or federal breach notice laws. Agency shall inform the City of the time, manner and content of any such notifications, prior to the transmission of such notifications to the individuals; or
- ii. cooperate with and assist City in its notification (including substitute notification) to the individuals affected by the breach.

3.2.4 Sample Notification to Individuals: If notification to individuals is required, and regardless of whether Agency is considered only a custodian and/or non-owner of the City Data, Agency shall, at its sole expense, and at the sole election of City, either:

- i. electronically submit a single sample copy of the security breach notification as required to the state or federal entity and inform the City of the time, manner and content of any such submissions, prior to the transmission of such submissions to the Attorney General; or
- ii. cooperate with and assist City in its submission of a sample copy of the notification to the Attorney General.

3.3 Media Communications

City shall conduct all media communications related to such Data Breach, unless in its sole discretion, City directs Agency to do so.

**Attachment 1 to Appendix K
System Specific Requirements**

I. For Access to SFDPH Epic through Care Link the following terms shall apply:

A. SFDPH Care Link Requirements:

1. Connectivity.

- a) Agency must obtain and maintain connectivity and network configuration and required hardware and equipment in accordance with specifications provided by Epic and must update the configuration of all first and third-party software as required. Technical equipment and software specifications for accessing SFDPH Care Link will change over time. Current required browser, system and connection requirements can be found on the Target Platform Roadmap and Target Platform Notes sections of the Epic Galaxy website galaxy.epic.com. Agency is responsible for all associated costs. Agency shall ensure that Agency Data Users access the System only through equipment owned or leased and maintained by Agency.

2. Compliance with Epic Terms and Conditions.

- a) Agency will at all times access and use the System strictly in accordance with the Epic Terms and Conditions. The following Epic Care Link Terms and Conditions are embedded within the SFDPH Care Link application, and each Data User will need to agree to them electronically upon first sign-in before accessing SFDPH Care Link:

3. Epic-Provided Terms and Conditions

- a) Some short, basic rules apply to you when you use your EpicCare Link account. Please read them carefully. The Epic customer providing you access to EpicCare Link may require you to accept additional terms, but these are the rules that apply between you and Epic.
- b) Epic is providing you access to EpicCare Link, so that you can do useful things with data from an Epic customer's system. This includes using the information accessed through your account to help facilitate care to patients shared with an Epic customer, tracking your referral data, or otherwise using your account to further your business interests in connection with data from an Epic customer's system. However, you are not permitted to use your access to EpicCare Link to help you or another organization develop software that is similar to EpicCare Link. Additionally, you agree not to share your account information with anyone outside of your organization.

II. For Access to SFDPH Epic through Epic Hyperspace and Epic Hyperdrive the following terms shall apply:

A. SFDPH Epic Hyperspace and Epic Hyperdrive:

1. Connectivity.

- a) Agency must obtain and maintain connectivity and network configuration and required hardware and equipment in accordance with specifications provided by Epic and SFDPH and must update the configuration of all first and third-party software as required. Technical equipment and software specifications for accessing SFDPH Epic Hyperspace will change over time. Epic Hyperdrive is a web-based platform that will replace Epic Hyperspace in the future. You may request a copy of current required browser, system and connection requirements from the SFDPH IT team. Agency is responsible for all

associated costs. Agency shall ensure that Agency Data Users access the System only through equipment owned or leased and maintained by Agency.

2. Application For Access and Compliance with Epic Terms and Conditions.

- a) Prior to entering into agreement with SFDPH to access SFDPH Epic Hyperspace or Epic Hyperdrive, Agency must first complete an Application For Access with Epic Systems Corporation of Verona, WI. The Application For Access is found at: <https://userweb.epic.com/Forms/AccessApplication>. Epic Systems Corporation must notify SFDPH, in writing, of Agency's permissions to access SFDPH Epic Hyperspace or Epic Hyperdrive prior to completing this agreement. Agency will at all times access and use the system strictly in accordance with the Epic Terms and Conditions.

III. For Access to SFDPH myAvatar through WebConnect and VDI the following terms shall apply:

A. SFDPH myAvatar via WebConnect and VDI:

1. Connectivity.

- a. Agency must obtain and maintain connectivity and network configuration and required hardware and equipment in accordance with specifications provided by SFDPH and must update the configuration of all first and third-party software as required. Technical equipment and software specifications for accessing SFDPH myAvatar will change over time. You may request a copy of current required browser, system and connection requirements from the SFDPH IT team. Agency is responsible for all associated costs. Agency shall ensure that Agency Data Users access the System only through equipment owned or leased and maintained by Agency.

2. Information Technology (IT) Support.

- a. Agency must have qualified and professional IT support who will participate in quarterly CBO Technical Workgroups.

3. Access Control.

- a. Access to the BHS Electronic Health Record is granted based on clinical and business requirements in accordance with the Behavioral Health Services EHR Access Control Policy (6.00-06). The Access Control Policy is found at: <https://www.sfdph.org/dph/files/CBHSPolProcMnl/6.00-06.pdf>
- b. Each user is unique and agrees not to share accounts or passwords.
- c. Applicants must complete the myAvatar Account Request Form found at https://www.sfdph.org/dph/files/CBHSdocs/BHISdocs/UserDoc/Avatar_Account_Request_Form.pdf
- d. Applicants must complete the credentialling process in accordance with the DHCS MHSUDS Information Notice #18-019.
- e. Applicants must complete myAvatar Training.
- f. Level of access is based on "Need to Know", job duties and responsibilities.

Attachment 2 to Appendix K

**Protected Information Destruction Order
Purge Certification - Contract ID # 10000020925**

In accordance with section 3.c (Effect of Termination) of the Business Associate Agreement, attached as Appendix E to the Agreement between the City and Contractor dated July 1st, 2021 (“Agreement”), the City hereby directs Contractor to destroy all Protected Information that Contractor and its agents and subcontractors (collectively “Contractor”) still maintain in any form. Contractor may retain no copies of destroyed Protected Information.” Destruction must be in accordance with the guidance of the Secretary of the U.S. Department of Health and Human Services (“Secretary”) regarding proper destruction of PHI.

Electronic Data: Per the Secretary’s guidance, the City will accept destruction of electronic Protected Information in accordance with the standards enumerated in the NIST SP 800-88, Guidelines for Data Sanitization (“NIST”).

Hard-Copy Data: Per the Secretary’s guidance, the City will accept destruction of Protected Information contained in paper records by shredding, burning, pulping, or pulverizing the records so that the Protected Information is rendered unreadable, indecipherable, and otherwise cannot be reconstructed.

Contractor hereby certifies that Contractor has destroyed all Protected Information as directed by the City in accordance with the guidance of the Secretary of the U.S. Department of Health and Human Services (“Secretary”) regarding proper destruction of PHI.

So Certified

Signature

Title: Tyler Termeer

Date:
