

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

**Agreement between the City and County of San Francisco and  
The Regents of the University of California, A Constitutional Corporation,  
on behalf of its San Francisco Campus  
Alliance Health Project  
HIV Outpatient Mental Health**

**First Amendment**

THIS AMENDMENT (this “Amendment”) is made as of **August 1, 2020**, in San Francisco, California, by and between **Regents of the University of California San Francisco** (“Contractor”), and the City and County of San Francisco, a municipal corporation (“City”), acting by and through its Director of the Office of Contract Administration.

**Recitals**

WHEREAS, City and Contractor have entered into the Agreement (as defined below); and

WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to extend the term of the agreement; and

WHEREAS, the Agreement was competitively procured as required by San Francisco Administrative Code Chapter 21.1 through **RFP 41-2017 issued on November 09, 2017** and this modification is consistent therewith; and

WHEREAS, approval for this Amendment was obtained when the Civil Service Commission approved Contract number **PSC# 2005-07/08 on July 18, 2016**;

NOW, THEREFORE, Contractor and the City agree as follows:

**1. Definitions**

The following definitions shall apply to this Amendment:

**Agreement.** The term “Agreement” shall mean the Agreement dated March 1, 2018 Original Agreement, (Contract ID#1000008646), between and Contractor and City, as amended by the:

**First Amendment, dated August 1, 2020**

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

**2. Modifications to the Agreement**

The Agreement is hereby modified as follows:

**2.1 Sections 2 through 64 of the P-500** professional services contract template are hereby replaced in their entirety with Articles 2 through 14 of the approved P-600 professional services template. Article 2 (Term) and Article (3) below reflect the modified Term and Guaranteed Maximum Sum of this Agreement.

**START OF NEW P-600 TEMPLATE**

**Article 1 Definitions [Reserved.]**

**Article 2 “Term of the Agreement**

**2.1 Term.**

The term of this Agreement shall commence on **March 1, 2018** and expire on **February 28, 2022**, unless earlier terminated as otherwise provided herein.

**2.2 Options.**

The City and Contractor, if mutually agreed, may exercise the following options to extend the Agreement term by modifying this Agreement as provided in Section 11.5, “Modification of this Agreement” and certifying any additional amount for such extension as provided in Article 3:

- Option 1: 07/01/22-06/30/23
- Option 2: 07/01/23-06/30/24
- Option 3: 07/01/24-06/30/25
- Option 4: 07/01/25-06/30/26
- Option 5: 07/01/26-06/30/27
- Option 6: 07/01/27-06/30/28

**Article 3 Financial Matters**

**3.1 Certification of Funds; Budget and Fiscal Provisions; Termination in the Event of Non-Appropriation.**

This Agreement is subject to the budget and fiscal provisions of the City’s Charter. Charges will accrue only after prior written authorization certified by the Controller, and the amount of City’s obligation hereunder shall not at any time exceed the amount certified for the purpose and period stated in such advance authorization. This Agreement will terminate without penalty, liability or expense of any kind to City at the end of any fiscal year if funds are not appropriated for the next succeeding fiscal year. If funds are appropriated for a portion of the fiscal year, this Agreement will terminate, without penalty, liability or expense of any kind at the end of the term for which funds are appropriated. City has no obligation to make appropriations for this Agreement in lieu of appropriations for new or other agreements. City budget decisions are subject to the discretion of the Mayor and the Board of Supervisors. Contractor’s assumption of risk of possible non-appropriation is part of the consideration for this Agreement.

**THIS SECTION CONTROLS AGAINST ANY AND ALL OTHER PROVISIONS OF THIS AGREEMENT.**

### 3.2 **Guaranteed Maximum Costs (“GMC”)**

The City’s payment obligation to Contractor shall not at any time exceed the amount certified by City's Controller for the purpose and period stated in such certification. Absent an authorized Emergency per the City Charter or applicable Code, no City representative is authorized to offer or promise, nor is the City required to honor, any offered or promised payments to Contractor under this Agreement in excess of the certified maximum amount without the Controller having first certified the additional promised amount and the Parties having modified this Agreement as provided in Section 11.5, "Modification of this Agreement."

### 3.3 **Compensation.**

3.3.1 **Payment.** Compensation shall be made in monthly payments on or before the **30th** day of each month for work, as set forth in Article 4 of this Agreement, that the **Director of Public Health**, concludes has been performed as of the **last** day of the immediately preceding month. In no event shall the amount of this Agreement exceed **Nine Million Nine Hundred Fifty Thousand One Hundred Sixty-Eight Dollars (\$9,950,168)**. The breakdown of costs associated with this Agreement appears in **Appendix B**, “Calculation of Charges,” attached hereto and incorporated by reference as though fully set forth herein. In no event shall City be liable for interest or late charges for any late payments.

3.3.2 **Deficiencies; Payment Disputes.** Payments to Contractor by City shall not excuse Contractor from its obligation to replace Services not performed in accordance with the terms of this Agreement, even if such deficiencies may not have been apparent or detected at the time such payment was made. The Parties shall submit all payment disputes, if any, to dispute resolution under Section 11.6 (Dispute Resolution).

#### 3.3.3 **(Reserved.)**

3.3.4 **Invoice Format.** Invoices furnished by Contractor under this Agreement must be in a form acceptable to the Controller and City, and must include a unique invoice number. Payment shall be made by City as specified in this Article 3, to Contractor at the address specified in Section 11.1 “Notices to the Parties,” or in such alternate manner as the Parties have mutually agreed upon in writing.

#### 3.3.5 **LBE Payment and Utilization Tracking System. [Reserved.]**

#### 3.3.6 **Getting paid for goods and/or services from the City.**

(a) All City vendors receiving new contracts, contract renewals, or contract extensions must sign up to receive electronic payments through, the City's Automated Clearing House (ACH) payments service/provider. Electronic payments are processed every business day and are safe and secure. To sign up for electronic payments, visit [www.sfgov.org/ach](http://www.sfgov.org/ach).

(b) The following information is required to sign up: (i) The enroller must be their company's authorized financial representative, (ii) the company's legal name, main telephone number and all physical and remittance addresses used by the company, (iii) the company's U.S. federal employer identification number (EIN) or Social Security number (if they are a sole proprietor), and (iv) the company's bank account information, including routing and account numbers.

### 3.3.7 Federal or State Funded Contracts.

(a) **Disallowance.** If Contractor requests or receives payment from City for Services, reimbursement for which is later disallowed by the State of California or United States Government, Contractor shall promptly refund the disallowed amount to City upon City's request. At its option, City may offset the amount disallowed from any payment due or to become due to Contractor under this Agreement.

(b) **RESERVED (Grant Terms.)**

(c) **RESERVED (Subcontracts.)**

### 3.3.8 Contract Amendments; Budgeting Revisions.

3.3.8.1 **Formal Contract Amendment:** Contractor shall not be entitled to an increase in the Compensation or an extension of the Term unless the Parties agree to a Formal Amendment in accordance with the San Francisco Administrative Code and Section 11.5 (Modifications of this Agreement).

3.3.8.2 **City Revisions to Program Budgets:** The parties shall have authority, without the execution of a Formal Amendment, to provide for the purchase of additional Services and/or make changes to the work in accordance with the terms of this Agreement (including such terms that require Contractor's agreement), not involving an increase in the Compensation or the Term, by use of a written City Program Budget Revision.

### 3.4 Audit and Inspection of Records.

Contractor agrees to maintain and make available to the City, during regular business hours, accurate books and accounting records relating to its Services. Contractor will permit City to audit, examine and make excerpts and transcripts from such books and records, and to make audits of all invoices, materials, payrolls, records or personnel and other data related to all other matters covered by this Agreement, whether funded in whole or in part under this Agreement. Contractor shall maintain such data and records in an accessible location and condition for a period of not fewer than ten (10) years after final payment under this Agreement or until after final audit has been resolved, whichever is later. The State of California or any Federal agency having an interest in the subject matter of this Agreement shall have the same rights as conferred upon City by this Section. Contractor shall include the same audit and inspection rights and record retention requirements in all subcontracts.

3.4.1 Contractor shall annually have its books of accounts audited by a Certified Public Accountant and a copy of said audit report and the associated management letter(s) shall be transmitted to the Director of Public Health or his /her designee within one hundred eighty (180) calendar days following Contractor's fiscal year end date. If Contractor expends \$750,000 or more in Federal funding per year, from any and all Federal awards, said audit shall be conducted in accordance with 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. Said requirements can be found at the following website address: [https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200\\_main\\_02.tpl](https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl).

If Contractor expends less than \$500,000 a year in Federal awards, Contractor is exempt from the single audit requirements for that year, but records must be available for review or audit by appropriate officials of the Federal Agency, pass-through entity and General Accounting Office. Contractor agrees to reimburse the City any cost adjustments necessitated by this audit report. Any audit report which addresses all or part of the period covered by this Agreement shall treat the service components identified in the detailed descriptions attached to Appendix A and referred to in the Program Budgets of Appendix B as discrete program entities of the Contractor.

3.4.2 The Director of Public Health or his / her designee may approve a waiver of the audit requirement in Section 3.4.1 above, if the contractual Services are of a consulting or personal services nature, these Services are paid for through fee for service terms which limit the City's risk with such contracts, and it is determined that the work associated with the audit would produce undue burdens or costs and would provide minimal benefits. A written request for a waiver must be submitted to the DIRECTOR ninety (90) calendar days before the end of the Agreement term or Contractor's fiscal year, whichever comes first.

3.4.3 Any financial adjustments necessitated by this audit report shall be made by Contractor to the City. If Contractor is under contract to the City, the adjustment may be made in the next subsequent billing by Contractor to the City, or may be made by another written schedule determined solely by the City. In the event Contractor is not under contract to the City, written arrangements shall be made for audit adjustments.

### **3.5 Submitting False Claims.**

Pursuant to San Francisco Administrative Code Section 21.35, but and subject to any applicable statutory or constitutional exemptions, any contractor, subcontractor or consultant who submits a false claim shall be liable to the City for the statutory penalties set forth in that section. A contractor or subcontractor will be deemed to have submitted a false claim to the City if the contractor or subcontractor: (a) knowingly presents or causes to be presented to an officer or employee of the City a false claim or request for payment or approval; (b) knowingly makes, uses, or causes to be made or used a false record or statement to get a false claim paid or approved by the City; (c) conspires to defraud the City by getting a false claim allowed or paid by the City; (d) knowingly makes, uses, or causes to be made or used a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the City; or (e) is a beneficiary of an inadvertent submission of a false claim to the City, subsequently discovers the falsity of the claim, and fails to disclose the false claim to the City within a reasonable time after discovery of the false claim.

### **3.6 Payment of Prevailing Wages [Reserved (Not a Public Work).]**

## **Article 4 Services and Resources**

### **4.1 Services Contractor Agrees to Perform.**

Contractor agrees to perform the Services provided for in Appendix A, "Statement of Work." Officers and employees of the City are not authorized to request, and the City is not required to reimburse the Contractor for Services beyond the scope listed in Appendix A unless Appendix A is modified as provided in Sections 3.4 above (Contract Amendments; Budgeting Revisions).

### **4.2 Qualified Personnel.**

Contractor shall utilize only competent personnel under the supervision of, and in the employment of, Contractor (or Contractor's authorized subcontractors) to perform the Services. To the extent possible, Contractor will comply with City's reasonable requests regarding assignment and/or removal of personnel, but all personnel, including those assigned at City's request, must be supervised by Contractor. Contractor shall commit adequate resources to allow timely completion within the project schedule specified in this Agreement.

### **4.3 Subcontracting.**

4.3.1 Contractor may subcontract portions of the Services only upon prior written approval of City. Contractor shall supervise its subcontractors throughout the course of the work required to perform the Services. All Subcontracts must incorporate the terms of Article 10 "Additional

Requirements Incorporated by Reference” of this Agreement, unless inapplicable. Neither Party shall, on the basis of this Agreement, contract on behalf of, or in the name of, the other Party. Any agreement made in violation of this provision shall be null and void.

4.3.2 City's execution of this Agreement constitutes its approval of the subcontractors listed in Appendix A (Statement of Work).

(a) No Subcontractors

#### 4.4 **Independent Contractor; Payment of Employment Taxes and Other Expenses.**

4.4.1 **Independent Contractor.** Contractor shall be deemed to include not only Contractor, but also any agent or employee of Contractor. Contractor acknowledges and agrees that at all times, Contractor or any agent or employee of Contractor shall be deemed at all times to be an independent contractor and is wholly responsible for the manner in which it performs the services and work requested by City under this Agreement. Contractor, its agents, and employees will not represent or hold themselves out to be employees of the City at any time. Contractor or any agent or employee of Contractor shall not have employee status with City, nor be entitled to participate in any plans, arrangements, or distributions by City pertaining to or in connection with any retirement, health or other benefits that City may offer its employees. Contractor or any agent or employee of Contractor is liable for the acts and omissions of itself, its employees and its agents. Contractor shall be responsible for all obligations and payments, whether imposed by federal, state or local law, including, but not limited to, FICA, income tax withholdings, unemployment compensation, insurance, and other similar responsibilities related to Contractor's performing services and work, or any agent or employee of Contractor providing same. Nothing in this Agreement shall be construed as creating an employment or agency relationship between City and Contractor or any agent or employee of Contractor. Any terms in this Agreement referring to direction from City shall be construed as providing for direction as to policy and the result of Contractor's work only, and not as to the means by which such a result is obtained. City does not retain the right to control the means or the method by which Contractor performs work under this Agreement. Contractor agrees to maintain and make available to City, upon request and during regular business hours, accurate books and accounting records demonstrating Contractor's compliance with this Section in accordance with this section. Should City determine that Contractor, or any agent or employee of Contractor, is not performing in accordance with the requirements of this Section, City shall provide Contractor with written notice of such failure. Within five (5) business days of Contractor's receipt of such notice, and in accordance with Contractor policy and procedure, Contractor shall remedy the deficiency. Notwithstanding, if City believes that an action of Contractor, or any agent or employee of Contractor, warrants immediate remedial action by Contractor, City shall contact Contractor and provide Contractor in writing with the reason for requesting such immediate action.

#### 4.4.2 **Payment of Employment Taxes and Other Expenses.**

Should City, in its discretion, or a relevant taxing authority such as the Internal Revenue Service or the State Employment Development Division, or both, determine that Contractor is an employee for purposes of collection of any employment taxes, the amounts payable under this Agreement shall be reduced by amounts equal to both the employee and employer portions of the tax due (and offsetting any credits for amounts already paid by Contractor which can be applied against this liability). City shall then forward those amounts to the relevant taxing authority. Should a relevant taxing authority determine a liability for past services performed by Contractor for City, upon notification of such fact by City, Contractor shall promptly remit such amount due or arrange with City to have the amount due withheld from future payments to Contractor under this Agreement (again, offsetting any amounts already paid by Contractor which can be applied as a credit against such liability). A determination of employment status pursuant to the preceding two paragraphs shall be solely for the purposes of the particular tax in question, and for all other purposes of this Agreement, Contractor shall not be considered an employee of City.

Notwithstanding the foregoing, Contractor agrees to indemnify and save harmless City and its officers, agents and employees from, and, if requested, shall defend them against any and all claims, losses, costs, damages, and expenses, including attorney's fees, arising from this section, but only in proportion and to the extent such claims, losses, costs, damages, and expenses, including attorney's fees, are caused by or result from the negligent or intentional acts or omissions of Contractor, its officers, agents or employees.

#### 4.5 **Assignment.**

The Services to be performed by Contractor are personal in character and neither this Agreement nor any duties or obligations hereunder may be assigned or delegated by Contractor, except as provided in Paragraph 4.3 above, unless first approved by City by written instrument executed and approved in the same manner as this Agreement. Any purported assignment made in violation of this provision shall be null and void.

#### 4.6 **Warranty.**

Contractor represents to City that the Services will be performed with the degree of skill and care that is required by current, good and sound professional procedures and practices, and in conformance with generally accepted professional standards prevailing at the time the Services are performed so as to ensure that all Services performed are correct and appropriate for the purposes contemplated in this Agreement.

#### 4.7 **Liquidated Damages. [Reserved (Business Decision).]**

#### 4.8 **Bonding Requirements. [Reserved (Business Decision).]**

### **Article 5 Insurance and Indemnity**

#### 5.1 **Insurance.**

5.1.1 **Required Coverages.** Each Party shall, at such Party's own expense, obtain, maintain, and keep in full force and effect, at all times during the term hereof, insurance coverage with respect to its property, plant and equipment and its activities conducted thereon and under this Agreement consisting of:

(a) Comprehensive general liability insurance in an amount not less than Ten Million Dollars (\$10,000,000) each claim and Twenty Million Dollars (\$20,000,000) annual aggregate;

(b) Professional liability insurance in an amount not less than Ten Million Dollars (\$10,000,000) each claim and Twenty-Five Million Dollars (\$25,000,000) annual aggregate;

(c) Business interruption insurance covering loss of income for up to twelve (12) months;

(d) Cyber and privacy insurance or technology errors and omissions insurance covering liability and property losses, including liability for data breach, including notification costs, credit monitoring, costs to defend claims by state regulators, fines and penalties, loss resulting from identity theft and the like with an occurrence or per claim limit of not less than Twenty Million Dollars (\$20,000,000) annual aggregate; and

(e) Workers compensation insurance consistent not less than statutory minimums. Each Party's Workers' Compensation policy(ies) shall be endorsed with a waiver of subrogation in favor of the other Party for all work performed by that Party, its employees, agents and subcontractors.

(f) Commercial Automobile Liability Insurance with limits not less than \$1,000,000 each occurrence, "Combined Single Limit" for Bodily Injury and Property Damage, including Owned, Non-Owned and Hired auto coverage, as applicable.

The general liability coverage referred to in Section 5.1.1(a) above shall be endorsed to include each party as an additional insured. Such a provision, however, shall only apply in proportion to and to the extent of the negligent acts or omissions of the indemnifying party, its officers, agents, and/or employees.

**5.1.2 Self-Insurance.** In lieu of maintaining commercial insurance coverage, a Party may adopt alternative risk management programs which the governing body of such Party determines to be reasonable and which shall not have a material adverse impact on reimbursement from third party payers, including, without limitation, to self-insure in whole or in part individually or in connection with other institutions, to participate in programs of captive insurance companies, to participate with other health care institutions in mutual or other cooperative insurance or other risk management programs, to participate in state or federal insurance programs, to take advantage of state or federal laws now or hereafter in existence limiting medical and malpractice liability, or to establish or participate in other alternative risk management programs.

**5.1.3 Company Requirements.** Other than with respect to a party's self-insurance or other alternative risk management programs described above, all of the insurance policies required hereunder shall be issued by corporate insurers licensed to do business in California and rated A- or better by A.M. Best Company.

**5.1.4 Proof of Insurance.** Each Party shall provide the other with proof of the insurance required by this Section 5 upon the reasonable request of the other Party.

## **5.2 Indemnification.**

**5.2.1** Contractor shall defend, indemnify, and hold City, its officers, employees and agents, harmless from and against any and all liability, loss, expense, attorneys' fees, or claims for injury or damages, arising out of the performance of this Agreement, including for infringement of intellectual property, but only in proportion to and to the extent such liability, loss, expense, attorneys' fees, or claims for injury or damages are caused by or result from the negligent or intentional acts or omissions of Contractor, its officers, agents or employees.

**5.2.2** City shall defend, indemnify, and hold Contractor, its officers, employees and agents, harmless from and against any and all liability, loss, expense, attorneys' fees, or claims for injury or damages, arising out of the performance of this Agreement, including for infringement of intellectual property, but only in proportion to and to the extent such liability, loss, expense, attorneys' fees, or claims for injury or damages are caused by or result from the negligent or intentional acts or omissions of City, its officers, agents or employees.

## **Article 6 Liability of the Parties**

**6.1 Liability of City [Reserved (Business Decision).]**

**6.2 Incidental and Consequential Damages [Reserved (Waived by Contracting Officer under San Francisco Administrative Code Section 21.23).]**

**6.3 Liability for Use of Equipment.**

Subject to Section 5.2.2, City shall not be liable for any damage to persons or property as a result of Contractor's use, misuse or failure of any equipment used by Contractor, or any of its subcontractors, or by any of their employees, even though such equipment is furnished, rented or loaned by City, while such equipment is in the care, custody, and control of Contractor.



#### 6.4 **Ownership of Equipment purchased under this Agreement**

Any equipment purchased by Contractor with funds provided for that purpose under the terms of this Agreement shall be deemed to be the property of the City and title to such equipment shall vest in the City. Contractor shall notify the Contract Administrator of any purchase of equipment in writing and shall provide an inventory of such equipment to the Contract Administrator within thirty (30) days of the expiration or termination of this Agreement. If payment under this Agreement is based on a fee for service, equipment purchased using funds from this Agreement shall be referenced in Appendix B.

### **Article 7 Payment of Taxes**

#### 7.1 **Reimbursement by City for Sales and Use Taxes.**

Subject to any applicable statutory or constitutional exemptions, payment of California sales and use taxes, levied upon or as a result of this Agreement, or the services delivered pursuant hereto, shall be the obligation of Contractor. Nothing in this paragraph shall be interpreted as a waiver of any immunities or defenses that Contractor may otherwise have. Sales and use taxes maybe invoiced by Contractor and shall be reimbursed by the City.

#### 7.2 **Possessory Interest Tax.**

Subject to any applicable statutory or constitutional exemptions, and without waiving its rights afforded to it as a California Constitutional Corporation, Contractor acknowledges that this Agreement may create a “possessory interest” for property tax purposes. Generally, such a possessory interest is not created unless the Agreement entitles the Contractor to possession, occupancy, or use of City property for private gain. If such a possessory interest is created, then the following shall apply:

7.2.1 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that Contractor, and any permitted successors and assigns, may be subject to real property tax assessments on the possessory interest.

7.2.2 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that the creation, extension, renewal, or assignment of this Agreement may result in a “change in ownership” for purposes of real property taxes, and therefore may result in a revaluation of any possessory interest created by this Agreement. Contractor accordingly agrees on behalf of itself and its permitted successors and assigns to report on behalf of the City to the County Assessor the information required by Revenue and Taxation Code section 480.5, as amended from time to time, and any successor provision.

7.2.3 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that other events also may cause a change of ownership of the possessory interest and result in the revaluation of the possessory interest. (see, e.g., Rev. & Tax. Code section 64, as amended from time to time). Contractor accordingly agrees on behalf of itself and its permitted successors and assigns to report any change in ownership to the County Assessor, the State Board of Equalization or other public agency as required by law.

7.2.4 Contractor further agrees to provide such other information as may be requested by the City to enable the City to comply with any reporting requirements for possessory interests that are imposed by applicable law.

#### 7.3 **Withholding. [Reserved (Subject to San Francisco Business and Tax Regulations Code Section 6.10.2, as applicable).]**

## **Article 8 Termination and Default**

### **8.1 Termination for Convenience**

8.1.1 Either party may terminate this Agreement by giving thirty (30) calendar days advance written notice to the other party of the intention to terminate this Agreement, including the date upon which it will be effective. Upon issuance and receipt of a notice to terminate, both parties shall mitigate any outstanding financial commitments. In the event of termination of this Agreement before expiration, the Contractor agrees to file with the City all outstanding claims, cost reports and program reports within sixty (60) calendar days of such termination. Contractor shall be paid for those services performed pursuant to this Agreement to the satisfaction of City up to the date of termination and after said date for any services mutually agreed to by the parties as necessary for continuity of care, in which case the following sentence shall not apply. Costs which City shall not pay include, but are not limited to anticipated profits on this Agreement, post-termination employee salaries and/or benefits, post termination administrative expenses, or any other cost which is not reasonable and authorized under this Agreement. City's payment obligation under this Section shall survive the termination of this Agreement.

8.1.2 Upon receipt of the notice of termination, Contractor shall commence and perform, with diligence, all actions necessary on the part of Contractor to effect the termination of this Agreement on the date specified by City and to minimize the liability of Contractor and City to third parties as a result of termination. All such actions shall be subject to the prior approval of City. Such actions shall include, without limitation:

- (a) Halting the performance of all Services under this Agreement on the date(s) and in the manner specified by City.
- (b) Not placing any further orders of subcontracts for materials, services, equipment or other items.
- (c) Terminating all existing orders and subcontracts.
- (d) At City's direction, assigning to City any or all of Contractor's right, title, and interest under the orders and subcontracts terminated. Upon such assignment, City shall have the right, in its sole discretion, to settle or pay any or all claims arising out of the termination of such orders and subcontracts.
- (e) Subject to City's approval, settling all outstanding liabilities and all claims arising out of the termination of orders and subcontracts.
- (f) Taking such action as may be necessary, or as the City may direct, for the protection and preservation of any property related to this Agreement which is in the possession of Contractor and in which City has or may acquire an interest.

8.1.3 Within 30 days after the specified termination date, Contractor shall submit to City an invoice, which shall set forth each of the following as a separate line item.

(a) The reasonable cost to Contractor, without profit, for all services and other work City directed Contractor to perform prior to the specified termination date, for which services or work City has not already tendered payment. Reasonable costs may include a reasonable allowance for actual overhead not to exceed the negotiated indirect rate as set forth in Appendix B. Any overhead allowance shall be separately itemized. Contractor may also recover the reasonable cost of preparing the invoice

(b) A reasonable allowance for profit on the cost of the services and other work described in the immediately preceding subsection (1), provided that Contractor can establish, to the satisfaction of City, that Contractor would have made a profit had all services and other work under this

Agreement been completed, and provided further, that the profit allowed shall in no event exceed 5% of such cost.

(c) The reasonable cost to Contractor of handling material or equipment returned to the vendor, delivered to the City or otherwise disposed of as directed by the City.

(d) A deduction for the cost of materials to be retained by Contractor, amounts realized from the sale of materials and not otherwise recovered by or credited to City, and any other appropriate credits to City against the cost of the services or other work.

8.1.4 With respect to such post-termination costs, in no event shall City be liable for costs incurred by Contractor or any of its subcontractors after the termination date specified by City, except for those costs specifically enumerated and described in the immediately preceding subsection (c). Such non-recoverable post-termination costs include, but are not limited to, anticipated profits on this Agreement, post-termination employee salaries, post-termination administrative expenses, post-termination overhead or unabsorbed overhead, attorneys' fees or other costs relating to the prosecution of a claim or lawsuit related to post-termination costs, prejudgment interest, or any other expense which is not reasonable or authorized under such subsection (c).

8.1.5 In arriving at the amount due to Contractor under this Section, City may deduct: (i) all payments previously made by City for the same Services covered by Contractor's final invoice; (ii) any invoiced costs or expenses excluded pursuant to the immediately preceding subsection.

8.1.6 City's payment obligation under this Section shall survive termination of this Agreement.

## 8.2 Termination for Default; Remedies.

8.2.1 Each of the following shall constitute an event of default ("Event of Default") under this Agreement:

(1) Either party fails or refuses to perform or observe any other material term, covenant or condition contained in this Agreement, and such default continues for a period of ten days without cure after written notice thereof from the nonbreaching party to the breaching party. However, the parties may agree in writing to extend the cure period.

(2) Either party (a) is generally not paying its debts as they become due, (b) files, or consents by answer or otherwise to the filing against it of, a petition for relief or reorganization or arrangement or any other petition in bankruptcy or for liquidation or to take advantage of any bankruptcy, insolvency or other debtors' relief law of any jurisdiction, (c) makes an assignment for the benefit of its creditors, (d) consents to the appointment of a custodian, receiver, trustee or other officer with similar powers of such party or of any substantial part of such party's property or (e) takes action for the purpose of any of the foregoing.

(4) A court or government authority enters an order (a) appointing a custodian, receiver, trustee or other officer with similar powers with respect to such party or with respect to any substantial part of such party's property, (b) constituting an order for relief or approving a petition for relief or reorganization or arrangement or any other petition in bankruptcy or for liquidation or to take advantage of any bankruptcy, insolvency or other debtors' relief law of any jurisdiction or (c) ordering the dissolution, winding-up or liquidation of such party.

8.2.2 On and after any Event of Default, the nonbreaching party shall have the right to exercise its legal and equitable remedies, including, without limitation, the right to terminate this Agreement or to seek specific performance of all or any part of this Agreement.

8.2.3 All remedies provided for in this Agreement may be exercised individually or in combination with any other remedy available hereunder or under applicable laws, rules and

regulations. The exercise of any remedy shall not preclude or in any way be deemed to waive any other remedy.

8.2.4 Any notice of default must be sent by registered mail to the address set forth in Article 11.

### 8.3 Rights and Duties upon Termination or Expiration.

This Section and the following Sections of this Agreement listed below, shall survive termination or expiration of this Agreement:

3.3.1	Payment	11.6	Dispute Resolution Procedure
3.3.2	Deficiencies; Payment Disputes;	11.7	Agreement Made in California; Venue
3.3.7	Federal or State Funded Contracts		
3.4	Audit and Inspection of Records	11.8	Construction
3.5	Submitting False Claims	11.9	Entire Agreement
Article 5	Insurance and Indemnity	11.10	Compliance with Laws
Article 6	Liability of Parties	11.11	Severability
Article 7	Payment of Taxes	Article 12	Department Specific Terms
8.1.6	Payment Obligation	Article 13	Data and Security
Article 9	Rights in Deliverables		

8.3.1 Subject to the survival of the Sections identified in Section 8.4.1, above, upon termination of this Agreement prior to expiration of the term specified in Article 2, this Agreement shall terminate and be of no further force or effect. When all payments due under this Agreement to the time of termination, less those legally withheld, if any, have been paid by City to Contractor, Contractor shall transfer title to City, and deliver in the manner, at the times, and to the extent, if any, directed by City, any work in progress, completed work, supplies, equipment, and other materials produced as a part of, or acquired as required pursuant to this Agreement or acquired with funding provided under this Agreement, and any completed or partially completed work which, if this Agreement had been completed, would have been required to be furnished to City. This subsection shall survive termination of this Agreement.

## Article 9 Rights In Deliverables

### 9.1 Ownership of Results.

Any interest of Contractor or its subcontractors, in drawings, plans, specifications, blueprints, studies, reports, memoranda, computation sheets, computer files and media or other documents prepared by Contractor or its subcontractors specifically under the direction and control of City and identified in Appendix A, Appendix B and any attachments to Appendix A and B, to this Agreement shall become the property of City and will be transmitted to City upon request. City hereby gives Contractor a non-exclusive, royalty-free, worldwide license to use such Materials for scholarly or academic purposes when City owns the results, and Contractor gives City a non-exclusive, royalty-free, worldwide license to use such Materials for scholarly or academic purposes when Contractor owns the results. However, Contractor may retain and use copies for reference and as documentation of its experience and capabilities.

## 9.2 Works for Hire.

If, in connection with services performed specifically under the direction and control of City and identified on Appendix A to this Agreement, Contractor and/or its subcontractors create artwork, copy, posters, billboards, photographs, videotapes, audiotapes, systems designs, software, reports, diagrams, surveys, blueprints, source codes or any other original works of authorship, such works of authorship shall be works for hire as defined under Title 17 of the United States Code, and all copyrights in such works are the property of City (collectively, "Works"). City hereby gives Contractor a non-exclusive, royalty-free, worldwide license to use such Works for scholarly or academic purposes. Except as provided herein, Contractor may not sell, or otherwise transfer its license to any commercial third party for any reason whatsoever. In all other instances, Contractor shall retain ownership and shall give City a non-exclusive, royalty-free, worldwide license to use such items for scholarly or academic purposes.

## Article 10 Additional Requirements Incorporated by Reference

### 10.1 Laws Incorporated by Reference.

Contractor represents and warrants that it will comply with all applicable laws and regulations in performing the Services. Subject to the foregoing, the full text of the laws listed in this Article 10, including enforcement and penalty provisions, are incorporated by reference into this Agreement. The full text of the San Francisco Municipal Code provisions incorporated by reference in this Article and elsewhere in the Agreement ("Mandatory City Requirements") are available at [http://www.amlegal.com/codes/client/san-francisco\\_ca/](http://www.amlegal.com/codes/client/san-francisco_ca/)

### 10.2 Conflict of Interest.

Through its execution of this Agreement, Contractor acknowledges that it is familiar with the provision of Section 15.103 of the City's Charter, Article III, Chapter 2 of City's Campaign and Governmental Conduct Code, and Section 87100 et seq. and Section 1090 et seq. of the Government Code of the State of California, and certifies that it does not know of any facts which constitutes a violation of said provisions and agrees that it will immediately notify the City if it becomes aware of any such fact during the term of this Agreement.

### 10.3 Prohibition on Use of Public Funds for Political Activity.

In performing the Services, Contractor shall comply with San Francisco Administrative Code Chapter 12G, which prohibits funds appropriated by the City for this Agreement from being expended to participate in, support, or attempt to influence any political campaign for a candidate or for a ballot measure. Contractor is subject to the enforcement and penalty provisions in Chapter 12G. The Controller will not consider Contractor use of profit as a violation of this section.

### 10.4 Consideration of Salary History [Reserved pursuant to Administrative Code Section 12K.1(e) (Exception Public Agency Contract).]

### 10.5 Nondiscrimination Requirements.

10.5.1 [Reserved in consideration CMD Waiver; Administrative Code Section 12B.5.1 and 12C.5.1.]

10.5.2 In the performance of this Contract, Contractor covenants and agrees that it will not discriminate against an applicant for employment because of race, color, religion, sex, age, ancestry, national origin, sexual orientation, handicap, veteran's status, medical condition (as defined in Section 12926 of the State of California Government Code), marital status, or citizenship (within the

limits imposed by law or University's policy) because of habit, local custom, or otherwise. All applicants for employment and employees are to be treated without regard to their race, color, religion, sex, age, ancestry, and national origin, sexual orientation, handicap, veteran's status, medical condition (as defined in Section 12926 of the State of California Government Code), marital status, or citizenship (within the limits imposed by law or Contractor's policy). Such equal treatment shall apply, but not be limited to, employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship.

**10.6 Local Business Enterprise and Non-Discrimination in Contracting Ordinance. [Reserved pursuant to Administrative Code Section 14B.2 (Exception Public Agency Contract).]**

**10.7 Minimum Compensation Ordinance. [Reserved pursuant to Administrative Code Section 12.P.2(e)11 (Exception Non-Coterminous Boundaries).]**

Notwithstanding, but without waiving the foregoing reservation, Contractor understands and agrees that it shall pay employees funded under the Agreement no less than the minimum compensation required under federal or state law.

**10.8 Health Care Accountability Ordinance. [Reserved pursuant to Administrative Code Section 12.Q.2(4)(b) (Exception Public Agency status).]**

**10.9 First Source Hiring Program. [Reserved pursuant to Administrative Code Section 83.4 (Exception Public Agency status).]**

**10.10 Drug-Free Workplace.**

Contractor acknowledges that pursuant to the Federal Drug-Free Workplace Act of 1989, the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance is prohibited on City premises. Contractor agrees that any violation of this prohibition by Contractor, its employees, agents, or assigns will be deemed a material breach of this Agreement.

**10.11 Limitations on Contributions.**

Contractor acknowledges section 1.126 of the City's Campaign and Governmental Conduct Code to the extent applicable to Contractor, which prohibits any person who contracts with, or is seeking a contract with, any department of the City for the rendition of personal services, for the furnishing of any material, supplies or equipment, for the sale or lease of any land or building, for a grant, loan or loan guarantee, or for a development agreement, from making any campaign contribution to (i) a City elected official if the contract must be approved by that official, a board on which that official serves, or the board of a state agency on which an appointee of that official serves, (ii) a candidate for that City elective office, or (iii) a committee controlled by such elected official or a candidate for that office, at any time from the submission of a proposal for the contract until the later of either the termination of negotiations for such contract or twelve months after the date the City approves the contract. The prohibition on contributions applies to each prospective party to the contract; each member of Contractor's board of directors; Contractor's chairperson, chief executive officer, chief financial officer and chief operating officer; any person with an ownership interest of more than 10% in Contractor; any subcontractor listed in the bid or contract; and any committee that is sponsored or controlled by Contractor. To the extent applicable to Contractor, Contractor certifies that it has informed each such person of the limitation on contributions imposed by Section 1.126, and has provided the names of the persons required to be informed to the City department with whom it is contracting.

**10.12 Slavery Era Disclosure [Reserved pursuant to San Francisco Administrative Code Section 12Y.4 (Non - Insurance, Finance, Textile Contract).]**

**10.13 Working with Minors.**

In accordance with California Public Resources Code Section 5164, if Contractor, or any subcontractor, is providing services at a City park, playground, recreational center or beach, Contractor shall not hire, and shall prevent its subcontractors from hiring, any person for employment or a volunteer position in a position having supervisory or disciplinary authority over a minor if that person has been convicted of any offense listed in Public Resources Code Section 5164. In addition, if Contractor, or any subcontractor, is providing services to the City involving the supervision or discipline of minors, Contractor and any subcontractor shall comply with any and all applicable requirements under federal or state law mandating criminal history screening for positions involving the supervision of minors.

**10.14 Consideration of Criminal History in Hiring and Employment Decisions [Reserved pursuant to OCA Waiver, Administrative Code Section 12T.8]**

**10.15 Public Access to Nonprofit Records and Meetings.**

Notwithstanding, but without waiving the reservation above, Contractor understands and agrees that it shall comply with all state and federal rules and regulations regarding public access to meetings and records.

**10.16 Food Service Waste Reduction Requirements.**

Contractor shall comply with the Food Service Waste Reduction Ordinance, as set forth in San Francisco Environment Code Chapter 16, including but not limited to the remedies for noncompliance provided therein.

**10.17 Distribution of Beverages and Water.**

**10.17.1 Sugar-Sweetened Beverage Prohibition.** Contractor agrees that it shall not sell, provide, or otherwise distribute Sugar-Sweetened Beverages, as defined by San Francisco Administrative Code Chapter 101, as part of its performance of this Agreement.

**10.17.2 Packaged Water Prohibition.** Contractor agrees that it shall not sell, provide, or otherwise distribute Packaged Water, as defined by San Francisco Environment Code Chapter 24, as part of its performance of this Agreement.

**10.18 Tropical Hardwood and Virgin Redwood Ban.**

Pursuant to San Francisco Environment Code Section 804(b), the City urges Contractor not to import, purchase, obtain, or use for any purpose, any tropical hardwood, tropical hardwood wood product, virgin redwood or virgin redwood wood product.

**10.19 Preservative Treated Wood Products.**

In the performance of this Agreement, should Contractor purchase preservative-treated wood products on behalf of the City, Contractor shall only purchase such products from the list of alternatives adopted by the Department of the Environment, unless otherwise granted an exemption.

## Article 11 General Provisions

### 11.1 Notices to the Parties.

Unless otherwise indicated in this Agreement, all written communications sent by the Parties may be by U.S. mail or e-mail, and shall be addressed as follows:

To CITY: Office of Contract Management and Compliance  
Department of Public Health  
101 Grove Street, Room 402  
San Francisco, California 94102 e-mail: [Irene.carmona@sfdph.org](mailto:Irene.carmona@sfdph.org)

And: **Bill Blum** Email: [Bill.blum@sfdph.org](mailto:Bill.blum@sfdph.org)  
SFHN HHS Section  
25 VAN NESS, 8<sup>TH</sup> FLOOR  
San Francisco, CA 94102

To Contractor: The Regents of the University of California  
Government & Business Contracts e-mail: [cgccsfteam@ucsf.edu](mailto:cgccsfteam@ucsf.edu)

And: **James Dilley.** email: [james.dilley.ucsf.edu](mailto:james.dilley.ucsf.edu)  
Principal Contact  
Lori Thoemmes. [Lori.Thoemmes@ucsf.edu](mailto:Lori.Thoemmes@ucsf.edu)  
1930 Market St, San Francisco, CA 94102

PAYMENTS: Payee: "The Regents of the University of California"  
Mail to:  
UCSF MAIN DEPOSITORY  
PO BOX 748872  
Los Angeles, CA 90074-4872

Any notice of default must be sent by registered mail. Either Party may change the address to which notice is to be sent by giving written notice thereof to the other Party. If email notification is used, the sender must specify a receipt notice.

### 11.2 Compliance with Americans with Disabilities Act.

Contractor shall provide the Services in a manner that complies with the Americans with Disabilities Act (ADA), including, but not limited to, Title II's program access requirements, and all other applicable federal, state and local disability rights legislation.

### 11.3 Reserved.

### 11.4 Sunshine Ordinance.

In accordance with San Francisco Administrative Code §67.24(e), contracts, contractors' bids, responses to solicitations and all other records of communications between City and persons or firms seeking contracts, shall be open to inspection immediately after a contract has been awarded. Nothing in this provision requires the disclosure of a private person or organization's net worth or other proprietary financial data submitted for qualification for a contract or other benefit until and unless that person or



organization is awarded the contract or benefit. Information provided which is covered by this paragraph will be made available to the public upon request.

#### **11.5 Modification of this Agreement.**

This Agreement may not be modified, nor may compliance with any of its terms be waived, except as noted in Section 11.1, "Notices to Parties," regarding change in personnel or place, and except by written instrument executed by the parties and approved in the same manner as this Agreement. Contractor shall cooperate with Department to submit to the Director of CMD any amendment, modification, supplement or change order that would result in a cumulative increase of the original amount of this Agreement by more than 20% (CMD Contract Modification Form).

#### **11.6 Dispute Resolution Procedure.**

**11.6.1 Negotiation; Alternative Dispute Resolution.** The parties will attempt in good faith to resolve any dispute or controversy arising out of or relating to the performance of services under this Agreement by negotiation. The status of any dispute or controversy notwithstanding, Contractor shall proceed diligently with the performance of its obligations under this Agreement in accordance with the Agreement and the written directions of the City. If agreed by both parties in writing, disputes may be resolved by a mutually agreed-upon alternative dispute resolution process. Neither party will be entitled to legal fees or costs for matters resolved under this section.

**11.6.2 Government Code Claims.** No suit for money or damages may be brought against the City until a written claim therefor has been presented to and rejected by the City in conformity with the provisions of San Francisco Administrative Code Chapter 10 and California Government Code Section 900, et seq. Nothing set forth in this Agreement shall operate to toll, waive or excuse Contractor's compliance with the Government Code Claim requirements set forth in Administrative Code Chapter 10 and Government Code Section 900, et seq.

#### **11.7 Agreement Made in California; Venue.**

The formation, interpretation, and performance of this Agreement shall be governed by the laws of the State of California. Venue for all litigation relative to the formation, interpretation, and performance of this Agreement shall be in San Francisco.

#### **11.8 Construction.**

All paragraph captions are for reference only and shall not be considered in construing this Agreement.

#### **11.9 Entire Agreement.**

This contract sets forth the entire Agreement between the parties, and supersedes all other oral or written provisions. This Agreement may be modified only as provided in Section 11.5, "Modification of this Agreement."

#### **11.10 Compliance with Laws.**

The parties shall comply with all applicable laws in the performance of this Agreement. Notwithstanding any other provision of this Agreement, nothing in this Agreement shall be construed as Contractor's contractual commitment to any law, regulation or ordinance to which Contractor is exempt as a California Constitutional Corporation.

#### **11.11 Severability.**

Should the application of any provision of this Agreement to any particular facts or circumstances be found by a court of competent jurisdiction to be invalid or unenforceable, then (a) the validity of other

provisions of this Agreement shall not be affected or impaired thereby, and (b) such provision shall be enforced to the maximum extent possible so as to effect the intent of the parties and shall be reformed without further action by the parties to the extent necessary to make such provision valid and enforceable.

#### **11.12 Cooperative Drafting.**

This Agreement has been drafted through a cooperative effort of both parties, and both parties have had an opportunity to have the Agreement reviewed and revised by legal counsel. No party shall be considered the drafter of this Agreement, and no presumption or rule that an ambiguity shall be construed against the party drafting the clause shall apply to the interpretation or enforcement of this Agreement.

#### **11.13 Order of Precedence.**

Contractor agrees to perform the services described below in accordance with the terms and conditions of this Agreement, and the Statement of Work attached as Appendix A. The terms of this Agreement are to be read and interpreted together with all other documents, appendices, exhibits, and addenda attached to the Agreement as a single agreement. If the Agreement was procured under a Request for Proposals, the Parties acknowledge and agree that the scope of this Agreement may not exceed the scope of the RFP.

#### **11.14 Notification of Legal Requests.**

Contractor shall as soon as is practicable notify City upon receipt of any subpoenas, service of process, litigation holds, discovery requests and other legal requests (“Legal Requests”) related to all data given to Contractor by City in the performance of this Agreement (“City Data” or “Data”), or which in any way might reasonably require access to City’s Data, and in no event later than 5 business days after it receives the request. Except to the extent required by applicable law, regulation, or other legal or judicial proceeding, Contractor shall, at City’s sole cost, retain and preserve City Data in accordance with the City’s instruction and requests, including, without limitation, any retention schedules and/or litigation hold orders provided by the City to Contractor, independent of where the City Data is stored.

### **Article 12 Department Specific Terms**

#### **12.1 Emergency Response. [Reserved.]**

#### **12.2 Third-Party Beneficiaries**

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

#### **12.3 Certification Regarding Lobbying**

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

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

12.3.2 If any funds other than federally appropriated funds have been paid or will be paid to any persons for influencing or attempting to influence an officer or employee of an agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in

connection with this federal contract, grant, loan or cooperative agreement, Contractor shall complete and submit the appropriate Federal form, in accordance with the form's instructions.

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

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

#### **12.4 Materials Review**

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

#### **12.5 California State Entity**

Notwithstanding anything to the contrary in this Agreement, the provisions of Sections 3.5 (False Claims), 10.2 (Conflict of interest), 10.18 (Tropical Hardwood), 10.11 (Limitation on Contributions), 10.3 (Prohibition on Use of Public Funds for Political Activity), 13.1.1 (Private Information), and 10.16 (Food Service Waste Reduction Requirements) of this Agreement are enforceable only to the extent such provisions are applicable to a California state entity and constitutional corporation and are required by applicable law.

#### **12.6 Federal and State Financial Participation**

12.6.1 Contractor acknowledges that some or all of the items, products, or services that Contractor furnishes to City under this Agreement may be included, directly or indirectly, in whole or in part, in claims submitted by City to Federal or State health care programs. By executing this Agreement Contractor certifies that it is not excluded, suspended, ineligible or otherwise sanctioned from participation in any Federal or State assistance programs. Contractor shall notify City, as provided in Section 11.1, within thirty (30) days of any such exclusion, suspension, ineligibility, or other sanction, and City may terminate this Agreement immediately upon written notice to Contractor in the event of any such exclusion, suspension, ineligibility, or other sanction. This is a material term of this Agreement.

12.6.2 Contractor agrees to indemnify and hold harmless City and City's officers, directors, employees, agents, successors and permitted assigns from and against any and all (including but not limited to Federal, State, or third party) civil monetary penalties, assessments, repayment obligations, losses, damages, settlement agreements and expenses (including reasonable attorneys' fees) to the extent arising from the exclusion, suspension, ineligibility, or other sanction of Contractor and/or Contractor's workforce (including those who oversee Contractor's workforce, supervisors and governing body members) from participation in any Federal or State assistance program.

## **Article 13 Data and Security**

### **13.1 Nondisclosure of Private, Proprietary or Confidential Information.**

13.1.1 Each Party understands and agrees that, in the performance of the work or services under this Agreement or in contemplation thereof, one party may have access to private or confidential information which may be owned or controlled by the other party (“Providing Party”) and that such information may contain proprietary or confidential details, the disclosure of which to third parties may be damaging to Providing Party. Each party agrees that all information disclosed and marked as “Confidential” by the Providing Party to the other (“Receiving Party”) or that the Receiving Party should reasonably know under the circumstances is confidential with the burden on the Providing Party to prove that the Receiving Party should have so known, shall be held in confidence and used only in performance of the Agreement. Receiving Party shall exercise the same standard of care to protect such information as a reasonably prudent contractor would use to protect its own proprietary data. City acknowledges that, as a public non-profit educational institution, Contractor is subject to statutes requiring disclosure of information and records which a private corporation could keep confidential. This section does not apply to patient medical records or to confidential information regarding patients or clients.

13.1.2 Contractor shall maintain the usual and customary records for clients receiving Services under this Agreement. Subject to applicable state and federal laws and regulations, Contractor agrees that all private or confidential information concerning clients receiving the Services set forth in Appendix A under this Agreement, whether disclosed by City or by the individuals themselves, shall be held in confidence, shall be used only in performance of this Agreement, and shall be disclosed to third parties only as authorized by law. The City reserves the right to terminate this Agreement for default if the Contractor violates the terms of this section.

13.1.3 Contractor agrees that it has the duty and responsibility to make available to the Contract Administrator or his/her designee, including the Controller, the contents of records pertaining to any City client which are maintained in connection with the performance of the Contractor's duties and responsibilities under this Agreement, subject to the provisions of applicable federal and state statutes and regulations. The City acknowledges its duties and responsibilities regarding such records under such statutes and regulations.

13.1.4 If this Agreement is terminated by either party, or expires, Contractor shall provide City with copies of the following records to the extent they were created with funding provided by this Agreement or directly related to services funded by this Agreement and to the extent Contractor is permitted by law to release or disclose same: (i) all records of persons receiving Services and (ii) records related to studies and research; (iii) all fiscal records. If this Agreement is terminated by either party, or expires, such records shall be submitted to the City upon request. Notwithstanding any provision in this Agreement to the contrary, Contractor does not waive its rights under CA Evidence Code §1157, *et seq.* or any other federal and state laws and regulations pertaining to the confidentiality or privacy of Contractor, its patients, students, faculty, employees, and agents.

13.1.5 The parties will set forth on each statement of work, any reports information, or other material they deem to be confidential or proprietary. Any confidential or proprietary reports, information, or materials of the City received or created by Contractor under this Agreement shall not be divulged by Contractor to any person or entity other than the City except as required by federal, state or local law, or if not required by law, without the prior written permission of the Department of Public Health Contract Administrator listed in Appendix A.

### **13.2 RESERVED (Payment Card Industry (“PCI”) Requirements.)**

### 13.3 Business Associate Agreement.

The parties acknowledge that City is a Covered Entity as defined in the Healthcare Insurance Portability and Accountability Act of 1996 ("HIPAA") and is required to comply with the HIPAA Privacy Rule governing the access, transmission, and storage of health information and 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 Contractor 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:**

- a. **Appendix E SFDPH Business Associate Agreement (BAA) (04-12-2018)**
  1. SFDPH Attestation 1 PRIVACY (06-07-2017)
  2. SFDPH Attestation 2 DATA SECURITY (06-07-2017)
2.  **NOT do any of the activities listed above in subsection 1;** Contractor is not a Business Associate of CITY/SFDPH. Appendix E and attestations are not required for the purposes of this Agreement.  
**This option requires review and approval from the Office of Compliance and Privacy Affairs.**

The parties acknowledge and agree that the City and Contractor are each HIPAA Covered Entities and as such may use and disclose Protected Health Information for treatment, payment and health care operations and for other purposes to the extent permitted by HIPAA and other applicable law.

**13.4 Management of City Data and Confidential Information (Reserved [Covered by Section 13.1].)**

**13.5 Disposition of Confidential Information. (Reserved based on City approval of Contractor's Policy).**

### **13.6 Protected Health Information.**

Contractor, all subcontractors, all agents and employees of Contractor and any subcontractor shall comply with all federal and state laws regarding the transmission, storage and protection of all PHI disclosed to Contractor by City in the performance of this Agreement. Contractor agrees that any failure of Contractor 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 PHI given to Contractor or its subcontractors or agents by City, Contractor shall indemnify City for the amount of such fine or penalties or damages, including costs of notification, but only in proportion to and to the extent that such fine, penalty or damages are caused by or result from the impermissible acts or omissions of Contractor. This section does not apply to the extent fines or penalties or damages were caused by the City or its officers, agents, subcontractors or employees.

## **Article 14 MacBride And Signature**

### **14.1 MacBride Principles -Northern Ireland.**

The City urges companies doing business in Northern Ireland to move toward resolving employment inequities and encourages them to abide by the MacBride Principles as expressed in San Francisco Administrative Code Section 12F. The City urges San Francisco companies to do business with corporations that abide by the MacBride Principles. Contractor acknowledges that it has read and understands the above statement of the City.

### **The Appendicies listed below are Amended as follows:**

2.2 Delete Appendix A, and replace in its entirety with Appendix A to Agreement as amended. Dated: 8/01/2020.

2.3 Delete Appendix A-1, and replace in its entirety with Appendix A-1 to Agreement as amended. Dated: 8/01/2020.

2.4 Delete Appendix B, and replace in its entirety with Appendix B to Agreement as amended. Dated: : 8/01/2020.

2.5 Delete Appendix B-1c, and replace in its entirety with Appendix B-1c to Agreement as amended. Dated: 8/01/2020.

2.6 Delete Appendix B-3c, and replace in its entirety with Appendix B-3c to Agreement as amended. Dated: 8/01/2020.

2.7 Add Appendix B-4a to Agreement as amended: Dated : 8/01/2020.

2.8 Add Appendix B-4b to Agreement as amended: Dated : 8/01/2020.

2.9 Delete Appendix F-1c and replace in its entirety with Appendix F-1c to Agreement as amended. Dated: 8/01/2020.

2.10 Delete Appendix F-3c, and replace in its entirety with Appendix F-3c to Agreement as amended. Dated: 8/01/2020.

2.11 Add Appendix F-4a to Agreement as amended: Dated 8/01/2020.

2.12 Add Appendix F-4b to Agreement as amended: Dated 8/01/2020.

IN WITNESS WHEREOF, Contractor and City have executed this Amendment as of the date first referenced above.

CITY

Recommended by:

DocuSigned by:  
*Greg Wagner*  
20527524752949F...

Grant Colfax, M.D.  
For Director of Health  
Department of Public Health

Approved as to Form:

Dennis J. Herrera  
City Attorney

By: DocuSigned by:  
*Virginia Dario Elizondo*  
F013CEBF5B1B482...  
Deputy City Attorney

Approved:

DocuSigned by:  
*Linda Repola*  
42E99F6456504C9

**Alaric Degrafinried**  
City Purchaser and Director of the Office of  
Contract Administration

CONTRACTOR

Regents of the University of California  
A Constitutional Corporation,  
On behalf of its San Francisco Campus

DocuSigned by:  
*Catherine Lagarde*  
E4E986F8690B4AD...

Contract Specialist  
3333 California Street, Suite 315  
San Francisco, CA 94143-0962

Supplier ID number: 0000012360



## **Appendix A Scope of Services**

### **1. Terms**

#### **A. Contract Administrator:**

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

#### **B. Reports:**

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

For services solicited under a Group Purchasing Organization (GPO) the Contractor shall report all applicable sales under this agreement to the respective GPO.

#### **C. Evaluation:**

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

For contracts for the provision of services at San Francisco General or Laguna Honda Hospital and Rehabilitation Center, the evaluation program shall include agreed upon performance measures as specified in the Performance Improvement Plan and Performance Measure Grid which is presented in Attachment 1 to Appendix A. Performance measures are reported annually to the Zuckerberg San Francisco General performance improvement committees (PIPS and Quality Council) or the to the Administration Office of Laguna Honda Hospital and Rehabilitation Center.

The City agrees that any final written reports generated through the evaluation program shall be made available to Contractor within thirty (30) working days. Contractor may submit a written response within thirty working days of receipt of any evaluation report and such response will become part of the official report.

#### **D. Possession of Licenses/Permits:**

Contractor 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 provide the Services. Failure to maintain these licenses and permits shall constitute a material breach of this Agreement.

#### **E. Adequate Resources:**

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

F. Infection Control, Health and Safety:

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

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

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

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

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

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

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

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

G. Aerosol Transmissible Disease Program, Health and Safety:

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

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

H. Acknowledgment of Funding:

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

I. Compliance With Grant Award Notices:

Contractor recognizes that funding for this Agreement is provided to the City through federal, state or private foundation awards. Contractor agrees to comply with the provisions of the City's agreements with said funding sources, to the extent that the City provides Contractor with the terms of such agreements.

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

**2. Description of Services**

Contractor agrees to perform the following Services:

All written Deliverables, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

Detailed description of services are listed below and are attached hereto

**Appendix A-1 HIV Related Out Patient Mental Health**



**CONTRACT SUMMARY**

**Contractor/Provider:** UCSF - Alliance Health Project  
**Total Contract:** \$ 9,950,168  
**CID #** 1000008646

Funding Source:		RWPB	RWPB	RWPB	
Appendix		A-1 / B-2	A-1 / B-2a	A-1 / B-2b	Year Two
<b>Funding Amount:</b>	\$139,825	\$180,000			\$120,000
<b>Funding Term:</b>	7/1/18 - 9/29/18	9/30/18-9/29/19			7/1/19-3/31/20
<b>Number of UOS / UDC:</b>	<b>UOS</b> <b>UDC</b>	<b>UOS</b> <b>UDC</b>	<b>UOS</b> <b>UDC</b>	<b>UOS</b> <b>UDC</b>	<b>UOS</b> <b>UDC</b>
<b>Mental Health Svcs Hours</b>	<b>1,036</b> <b>57</b>	<b>1,286</b> <b>70</b>			<b>800</b> <b>70</b>

**Target Population:** low income, uninsured / under-insured symptomatic PLWHA in SF, other health issues, or impaired by behavioral health disorders - mostly among: MSM, homeless or marginally housed, transgenders, people of color, newly diagnosed, undocumented, bimonolingual, substance users, new to SF, recently incarcerated, with criminal justice histories, and/or long term survivors.

**Description of Services:** services for PLWHA to reduce symptoms and functional impairments from mental health or substance use disorders.

**Crisis Intervention:** psychosocial and counseling for acute needs of those with a psych emergency; risk assessment and de-escalation; involuntary psych holds; related monitoring and follow-up to stabilize clients, and assistance connecting to ongoing treatment and support in the community.

**Psychiatry:** for clients with a diagnosed mental illness including comprehensive evaluation to identify psychiatric disorders, mental status evaluation, differential diagnosis which may involve clinical and lab tests, case formulation, treatment plans and disposition, and medications with monitoring.

**Mental Health Services: Assessment and Outreach:** clinical evaluation and diagnosis of mental health, substance use disorders and navigation services; *Neuropsych Assessment:* administration, analysis of tests and methods to diagnose neuropsych, cognitive disorders. *Psychotherapy:* treatment for symptom reduction, functional impairments, enhance self sufficiency, resilience and recovery; evaluation for ID and treatment of psych disorders, mental status evaluation, differential diagnosis. *Psychiatry Medication Support and Monitoring:* ongoing follow up to monitor clinical effectiveness or benefit of psychotropic meds including adherence, side effects, prescription refills; and psych consultation without an encounter.

**Group Therapy:** psychosocial and counseling services conducted in group settings with facilitation by professionals to contain and manage symptoms, or by trained and supervised volunteers including psycho-educational modalities.

**Substance Use Counseling / Case Management:** rehab, outreach, linkage to improve, maintain, or restore functional or daily living skills and assist in accessing medical, educational, social, vocational support, and to remain in primary care, substance use treatment, and supportive housing.

**Community Workshops:** structured for a diverse group of long term survivors to provide potential clients with clarity about the purpose of the workshop in a safe environment to explore emotional issues.

**1. IDENTIFIERS**

**Program Name/Address** UCSF Alliance Health Project (AHP)  
1930 Market Street, SF 94102, ucsf-ahp.org  
(415) 476-3902 / FAX (415) 476-3655

**Prepared By** Lori Thoemmes, LMFT, Executive Director/Program Director  
(415) 476-3951, lori.thoemmes@ucsf.edu

**2. NATURE OF DOCUMENT** Revision to Program Budgets (RPB)**3. GOAL STATEMENT**

The program goal is to provide outpatient mental health services to people living with HIV - including Long-Term Survivors - to reduce symptoms and functional impairments resulting from mental health and/or substance use disorders.

**4. PRIOROTY POPULATION**

AHP thrives to serve all in need of services. However, this program's primary population for services is people living with HIV/AIDS in the SF Eligible Metropolitan Area (EMA) who are also low income and/or un-insured/under-insured and/or homeless and who have symptoms, other health problems, or functional impairments resulting from mental health or substance use disorders. While the program will serve all, the vast majority of clients are from the following at-risk populations: men who have sex with men (MSM), the homeless or marginally housed, transgendered persons; persons of color; newly diagnosed persons; undocumented persons; bi/monolingual persons; substance users including IVDU; persons new to SF, and persons recently released from prison or with criminal justice histories; and Long-Term Survivors of HIV/AIDS.

AHP assures that all HIV Health Services (HHS) funds are only used to pay for services that are not reimbursed by any other funding source. Client enrollment priority is reserved for SF residents who have low incomes and are uninsured. Secondary enrollment is reserved for SF 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.

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. Six-month, interim eligibility confirmation may be obtained by client self-attestation but must be documented in the client file or in ARIES.

**5. MODALITIES and INTERVENTIONS:** Units of Service (UOS) and Unduplicated Clients (UDC)

Funds/Appendix/Period	Units of Service Description	UOS	UDC
General Fund A-1 / B-1 03/01/18 - 06/30/18 (4 months)	<b>Crisis Services Hours</b> 0.82 FTE x 40 hrs. / wk. x 15 wks. x 64.4% effort	317	56
	<b>Psychiatry Encounters</b> 0.82 FTE x approx. 30 encounters x 15 wks.	368	31
	<b>Mental Health Services Hours</b> (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) 7.82 FTE x 40 hrs. / wk. x 15 wks. x 65% effort	3,050	271
	<b>Peer-Facilitated Group Therapy Hours</b> 7 groups / wk. x 2.5 hrs. / group x 15 wks.	262	34
	<b>Staff-Facilitated Group Therapy Hours</b> 8 groups / wk. x 2.5 hrs. / group x 15 wks.	300	36
	<b>Substance Use Counseling / Case Management Hours</b> 0.70 FTE x 40 hrs. / wk. x 15 wks. x ~ 66% effort	276	44
<b>Total UOS Provided and Total UDC Served</b>		<b>4,573</b>	<b>402</b>
Funds/Appendix/Period	Units of Service Description	UOS	UDC
RWPB - XO8 / A-1 / B-2 07/01/18 - 09/29/18 (3 mos)	<b>Mental Health Services Hours</b> (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) 3.98 FTE x 40 hrs/wk x 10 wks x ~ 65.07% effort	1,036	57
<b>Total UOS Provided and Total UDC Served</b>		<b>1,036</b>	<b>57</b>

Funds/Appendix/Period	Units of Service Description	UOS	UDC
RWPA A-1 / B-3 07/01/18 - 02/28/19 (8 months)	<b>Crisis Services Hours</b> 0.80 FTE X 40 hrs. / wk. x 32 wks. x ~ 65.14% effort	667	88
	<b>Psychiatry Encounters</b> 0.76 FTE x ~ 30.2 encounters x 32 wks.	736	90
	<b>Mental Health Services Hours</b> (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) 6.984 FTE x 40 hrs/wk. x 32 wks. x ~ 65% effort	5,811	400
	<b>Peer-Facilitated Group Therapy Hours</b> 7 groups / wk. x 2.5 hrs. / group x 32 wks.	560	42
	<b>Staff-Facilitated Group Therapy Hours</b> 8 groups / wk. x 2.5 hrs. / group x 32 wks.	640	48
	<b>Substance Use Counseling / Case Management Hours</b> 0.663 FTE x 40 hrs. / wk. x 32 wks. x ~ 65% effort	552	50
<b>Total UOS Provided and Total UDC Served</b>		<b>8,966</b>	<b>628</b>
Funds/Appendix/Period	Units of Service Description	UOS	UDC
General Fund A-1 / B-1.1a 07/01/18 - 06/30/19	<b>Mental Health Services Hours - Long-Term Survivors</b> (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) 0.96 FTE x 40 hrs/wk x 36 wks. x ~ 65.1% effort	349	102
	<b>Peer-Facilitated Group Therapy Hours</b> 1 groups / wk. x 2.5 hrs. / group x 36 wks.	90	34
	<b>Staff-Facilitated Group Therapy Hours</b> 1 groups / wk. x 2.5 hrs. / group x 10 wks.	25	36
	<b>Community Workshop Hours</b> 1 community workshop x 40 hrs.	40	N/A
<b>Total UOS Provided and Total UDC Served</b>		<b>504</b>	<b>102</b>
Funds/Appendix/Period	Units of Service Description	UOS	UDC
RWPB - X08 / A-1 / B-2a 09/30/18 - 09/29/19	<b>Mental Health Services Hours</b> (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) 1.03 FTE x 40 hrs. / wk. x 48 wks. x ~ 65% effort	1,286	70
<b>Total UOS Provided and Total UDC Served</b>		<b>1,286</b>	<b>70</b>
Funds/Appendix/Period	Units of Service Description	UOS	UDC
General Fund A-1 / B-1a 03/01/19 - 06/30/19 (4 months)	<b>Crisis Services Hours</b> 0.86 FTE x 40 hrs. / wk. x 15 wks. x ~ 76% effort	392	65
	<b>Psychiatry Encounters</b> 0.82 FTE x ~ 19.11 encounters x 15 wks.	235	125
	<b>Mental Health Services Hours</b> (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) 7.82 FTE x 40 hrs. / wk. x 15 wks. x ~ 59.14% effort	2,775	246
	<b>Peer-Facilitated Group Therapy Hours</b> 7 groups / wk. x 2.5 hrs. / group x 15 wks.	263	34
	<b>Staff-Facilitated Group Therapy Hours</b> 8 groups / wk. x 2.5 hrs. / group x 15 wks.	300	36
	<b>Substance Use Counseling / Case Management Hours</b> 0.70 FTE x 40 hrs. / wk. x 15 wks. x ~ 58.33% effort	245	34
<b>Total UOS Provided and Total UDC Served</b>		<b>4,210</b>	<b>470</b>
Funds/Appendix/Period	Units of Service Description	UOS	UDC
RWPB-X07 / A-1 / B-2b 07/01/19 - 03/31/20 (9 mos)	<b>Mental Health Services Hours</b> (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) .70 FTE x 40 hrs. / wk. x 35 wks. x ~ 81.6% effort	800	70
<b>Total UOS Provided and Total UDC Served</b>		<b>800</b>	<b>70</b>

Funds/Appendix/Period	Units of Service Description	UOS	UDC
RWPA A-1 / B-3a 07/01/19 - 02/29/20 (8 months)	<b>Crisis Services Hours</b> 0.50 FTE x 40 hrs. / wk. x 32 wks. x ~ 82.19% effort	526	47
	<b>Psychiatry Encounters</b> 0.76 FTE x ~ 23.85 encounters x 32 wks.	580	52
	<b>Mental Health Services Hours</b> (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) 6.00 FTE x 40 hrs. / wk. x 32 wks. x ~ 56.34% effort	4,327	491
	<b>Peer-Facilitated Group Therapy Hours</b> 7 groups / wk. x 2.5 hrs. / group x 32 wks.	560	42
	<b>Staff-Facilitated Group Therapy Hours</b> 8 groups / wk. x 2.5 hrs. / group x 32 wks.	640	48
	<b>Substance Use Counseling / Case Management Hours</b> 0.523 FTE x 40 hrs. / wk. x 32 wks. x ~ 65% effort	435	39
<b>Total UOS Provided and Total UDC Served</b>		<b>7,068</b>	<b>629</b>
Funds/Appendix/Period	Units of Service Description	UOS	UDC
General Fund A-1 / B-1b 07/01/19 - 06/30/20	<b>Crisis Services Hours</b> 0.385 FTE x 40 hrs. / wk. x 48 wks. x ~ 65% effort	480	30
	<b>Psychiatry Encounters</b> 0.443 FTE x ~ 25 encounters x 48 wks.	531	33
	<b>Mental Health Services Hours</b> (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) 3.35 FTE x 40 hrs. / wk. x 48 wks. x ~ 69.91% effort	4,497	314
	<b>Peer-Facilitated Group Therapy Hours</b> 3 groups / wk. x 2.5 hrs. / group x 35 wks.	263	34
	<b>Staff-Facilitated Group Therapy Hours</b> 3 groups / wk. x 2.5 hrs. / group x 40 wks.	300	36
	<b>Substance Use Counseling / Case Management Hours</b> 0.31 FTE x 40 hrs. / wk. x 48 wks. x ~ 66.87% effort	398	25
<b>Total UOS Provided and Total UDC Served</b>		<b>6,469</b>	<b>402</b>
Funds/Appendix/Period	Units of Service Description – Long Term Survivors	UOS	UDC
General Fund A-1 / B-1.1b 07/01/19 - 06/30/20	<b>Mental Health Services Hours</b> - (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) 1.00 FTE x 40 hrs. / wk. x 48 wks. x ~ 62.45% effort	1,199	102
	<b>Peer-Facilitated Group Therapy Hours</b> 1 group / wk. x 2.5 hrs. / group x 36 wks.	90	34
	<b>Staff-Facilitated Group Therapy Hours</b> 1 group / wk. x 2.5 hrs. / group x 10 wks.	25	36
	<b>Community Workshop Hours</b> 1 community workshop x 40 hrs.	40	N/A
<b>Total UOS Provided and Total UDC Served</b>		<b>1,354</b>	<b>102</b>
Funds/Appendix/Period	Units of Service Description – PopUp Clinic	UOS	UDC
General Fund A-1 / B-1.2a 07/01/19 - 06/30/20	<b>Psychiatry Encounters</b> 0.50 FTE x ~ 23.58 encounters x 48 wks.	566	50
	<b>Case Management Hours</b> 0.75 FTE x 40 hrs. / wk. x 48 wks. x ~ 65.63% effort	945	50
<b>Total UOS Provided and Total UDC Served</b>		<b>1,511</b>	<b>50</b>



<b>Funds/Appendix/Period</b>	<b>Units of Service Description- Long Term Survivors</b>	<b>UOS</b>	<b>UDC</b>
General Fund A-1 / B-1.1c 07/01/20 – 12/31/20 (6 months)	<b>Mental Health Services Hours</b> (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) 1.00 FTE x 40 hrs. / wk. x 22 wks. x ~ 65% effort	572	100
	<b>Peer-Facilitated Group Therapy Hours</b> 1 group / wk. x 2.5 hrs. / group x 22 wks.	55	30
	<b>Staff-Facilitated Group Therapy Hours</b> 1 group / wk. x 2.5 hrs. / group x 10 wks.	25	30
	<b>Community Workshop Hours</b> 1 community workshop x 40 hrs.	40	N/A
<b>Total UOS Provided and Total UDC Served</b>		<b>692</b>	<b>100</b>
<b>Funds/Appendix/Period</b>	<b>Units of Service Description – PopUp Clinic</b>	<b>UOS</b>	<b>UDC</b>
Ryan White (ETHE) A-1 / B-4a 03/01/20 - 02/28/21	<b>Psychiatry Encounters</b> 0.30 FTE x ~ 17.4 encounters x 48 wks.	250	34
	<b>Case Management Hours</b> 0.70 FTE x 40 hrs. / wk. x 48 wks. x ~ 65% effort	874	34
<b>Total UOS Provided and Total UDC Served</b>		<b>1,124</b>	<b>34</b>
<b>Funds/Appendix/Period</b>	<b>Units of Service Description</b>	<b>UOS</b>	<b>UDC</b>
RWPA A-1 / B-3b 07/01/20 - 02/28/21 (8 months)	<b>Crisis Services Hours</b> 0.50 FTE x 40 hrs. / wk. x 32 wks. x ~ 82.19% effort	526	47
	<b>Psychiatry Encounters</b> 0.76 FTE x ~ 23.85 encounters x 32 wks.	580	52
	<b>Mental Health Services Hours</b> (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) 6.00 FTE x 40 hrs. / wk. x 32 wks. x ~ 56.34% effort	4,327	491
	<b>Peer-Facilitated Group Therapy Hours</b> 7 groups / wk. x 2.5 hrs. / group x 32 wks.	560	42
	<b>Staff-Facilitated Group Therapy Hours</b> 8 groups / wk. x 2.5 hrs. / group x 32 wks.	640	48
	<b>Substance Use Counseling / Case Management Hours</b> 0.523 FTE x 40 hrs. / wk. x 32 wks. x ~ 65% effort	435	39
<b>Total UOS Provided and Total UDC Served</b>		<b>7,068</b>	<b>629</b>
<b>Funds/Appendix/Period</b>	<b>Units of Service Description</b>	<b>UOS</b>	<b>UDC</b>
General Fund A-1 / B-1c 07/01/20 - 06/30/21	<b>Crisis Services Hours</b> 0.385 FTE x 40 hrs. / wk. x 48 wks. x ~ 65% effort	480	30
	<b>Psychiatry Encounters</b> 0.443 FTE x ~ 25 encounters x 48 wks.	531	33
	<b>Mental Health Services Hours</b> (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) 3.35 FTE x 40 hrs. / wk. x 48 wks. x ~ 69.91% effort	4,497	314
	<b>Peer-Facilitated Group Therapy Hours</b> 3 groups / wk. x 2.5 hrs. / group x 35 wks.	263	34
	<b>Staff-Facilitated Group Therapy Hours</b> 3 groups / wk. x 2.5 hrs. / group x 40 wks.	300	36
	<b>Substance Use Counseling / Case Management Hours</b> 0.31 FTE x 40 hrs. / wk. x 48 wks. x ~ 66.87% effort	398	25
<b>Total UOS Provided and Total UDC Served</b>		<b>6,469</b>	<b>402</b>

Funds/Appendix/Period	Units of Service Description	UOS	UDC
RWPA A-1 / B-3c 03/01/21 - 02/28/22	<b>Crisis Services Hours</b> 0.50 FTE x 40 hrs. / wk. x 32 wks. x ~ 82.19% effort	526	47
	<b>Psychiatry Encounters</b> 0.76 FTE x ~ 23.85 encounters x 32 wks.	580	52
	<b>Mental Health Services Hours</b> (Assess/Outreach, Neuropsych Assess, Med Monitor, Psychotherapy) 6.00 FTE x 40 hrs. / wk. x 32 wks. x ~ 56.34% effort	4,327	492
	<b>Peer-Facilitated Group Therapy Hours</b> 7 groups / wk. x 2.5 hrs. / group x 32 wks.	560	42
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Funds/Appendix/Period	Units of Service Description – PopUp Clinic	UOS	UDC
Ryan White (ETHE) A-1 / B-4b 03/01/21 - 02/28/22	<b>Psychiatry Encounters</b> 0.30 FTE x ~ 17.4 encounters x 48 wks.	250	34
	<b>Case Management Hours</b> 0.70 FTE x 40 hrs. / wk. x 48 wks. x ~ 65% effort	874	34
<b>Total UOS Provided and Total UDC Served</b>		<b>1,124</b>	<b>34</b>

## 6. METHODOLOGY

### Outreach, Recruitment, Promotion, and Advertisement

UCSF Alliance Health Project (AHP) staff maintain ongoing consultative and collaborative relationships with a wide range of HIV/AIDS service providers and these providers are often a source of referrals for new clients. A partial list of these providers includes: medical providers including UCSF, SFGH (especially within CCHAMP CoE), DPH Clinics, San Francisco Community Health Network Clinics, and a network of private providers as well as social workers/discharge planners at San Francisco hospitals; mental health providers; substance use providers; residential providers and the supported hotels; jail health services; and other services providers. AHP's case management services include directed outreach for triply diagnosed clients through the above providers as well as other drop-in centers, and Project Homeless Connect. To welcome new clients and/or clients re-engaging in services, AHP offers a weekly drop-in support group for clients waiting to be matched to services. Triage and referral services are also available to walk-in clients on Monday, Wednesday and Friday; and by phone consolation and screening on Tuesday and Thursday. The AHP Crisis Unit is also available to provide clients living with HIV/AIDS and a co-occurring mental health disorder with immediate mental health and psychiatric care.

Staff conduct outreach in various ways including presence at community and health events. Case managers also meet with clients in their homes, at hospitals, in shelters or on the streets (depending where a client is living) to engage clients in care. AHP also has a quarterly publication, AHP Updates, describing our current support group schedule and promoting specific programs.

### Admission, Enrollment and/or Intake Criteria

Clients can access outpatient mental health services at AHP in the following ways:

a) **Crisis Team:** For clients in psychiatric crisis and their providers, the Crisis Team is open for phone or drop-in consultation Monday through Fridays from 9:00 a.m. to 5:00 p.m.; on Tuesday afternoons, the Crisis Team is closed to phone referral but will work with drop-in clients as needed.

b) **Triage Services:** Between 9:00 a.m. and 11:00 a.m. on weekdays (Mondays, Wednesdays and Fridays for walk-in clients and by phone only on Tuesdays and Thursdays), persons interested in services can call or drop-in to the clinic and speak with a triage clinician. The triage clinician will assess for risk and eligibility, as well as, appropriateness for AHP or other services. For most individuals, the next step is usually a scheduled intake/assessment with an AHP clinician.

Intake/assessment appointments are generally available within five business days of an initial request for services. If a client is not eligible for AHP services due to residency (non-San Francisco), income or if the client holds private medical insurance, the triage clinician will assist the client in accessing appropriate services outside of AHP. When outside providers call to refer their patients for services such as psychotherapy or group, a triage clinician can discuss the referral, provided an appropriate release of information has been obtained.

**c) Intake/Clinical Assessment:** If a person is determined to be both eligible and appropriate for AHP services, an appointment is made for an intake/assessment. Once the client is screened for eligibility, they are scheduled for an Electronic Health Inventory (EHI) appointment. Once that has been completed, they are then scheduled for a clinical assessment. The information gathered at the time of the EHI is used to inform the focus of the assessment and addresses the presenting problem(s) the client has self-identified as important. This intake/assessment appointment is a face-to-face interview intended to gather basic demographic and contact information as well as to complete treatment consents and other administrative paperwork. It includes a psychosocial assessment of presenting problems; client's current level of functioning; social and family support systems; living situation, education and work histories; relationship and sexual histories including detailed HIV risk assessment, and medical, psychiatric and substance use histories. The clinician and client will develop a treatment plan of care (TPOC) as part of the assessment. The AHP clinician will then complete a written assessment including a DSM diagnosis to determine medical necessity for specialty mental health services.

Development of an initial treatment plan is a collaborative effort between the client and clinician and includes the formulation of client goals and the identification of specific treatment recommendations such as psychiatry, individual and/or group psychotherapy. The assessing clinician can refer clients directly for services at AHP, however, waiting lists may exist for certain services such as psychiatry or individual psychotherapy. In these cases, the assessing clinician will work with the client to identify interim resources such as drop-in groups or other forms of support. Clients who present for an intake/assessment appointment and are determined to be in crisis can be referred directly to the Crisis Unit for further evaluation.

### ***Service Delivery Model***

The Wellness and Recovery Model has been the basis of AHP's behavioral health services for more than a decade and is fully integrated into this program's range of services. AHP's service delivery model is deeply rooted in a client-centered approach that aims to reduce the multiple barriers to care experienced by those disabled by HIV/AIDS or with symptomatic HIV diagnoses, active substance use or mental illness, and those living in poverty. AHP staff are committed to the principles of cultural humility and harm reduction. These practices provide a framework for engaging with clients from a place of openness, empathy, and compassion. Our clinical staff is trained to assess clients for how trauma and stigma, related to sexual or gender minority status or living with HIV and co-occurring mental health and substance use disorders, may impact their ability to engage in services. This work is further reinforced by our strengths-based approach that acknowledges and supports the client's own abilities and affirms their dignity, value, and resiliency.

AHP staff have experience and expertise in evidence-based and best practice treatments for serious mental illness as well as co-occurring substance use disorders. These include cognitive and behavioral therapies, motivational interviewing, mindfulness-based practices, and psychoeducation within an assertive outreach model, which emphasizes clinical case management to assist clients in accessing other resources imperative to their wellness, such as housing and healthcare.

Program activities are based at the AHP Services Center, located at 1930 Market Street and open from 9 am to 5 pm, Monday, Wednesday, Thursday and Friday and from 9 am to 9 pm on Tuesday. The AHP Services Center is easily accessible via public transportation. Services are provided both on and off site, including in clients' homes, medical clinics, and other service agencies. The AHP Services Center is wheelchair accessible and complies with all federal access for persons with disabilities regulations. The Crisis Unit has two counseling rooms which are well supervised for crisis situations.

Individual psychotherapy and time-limited and ongoing support group services are provided by appointment only. Psychiatry is also by appointment, with three drop-in clinics for clients who are unable or unwilling to keep scheduled appointments. The following services are provided at other settings:

- Groups which are co-facilitated with other agencies may be held at those agencies.
- Psychiatric consultation and case conferences may occur in the field (at clinics, hospitals, residential programs, etc.).
- Mental Health Crisis Services and Case Management may be provided in the field (at homes, shelters, clinics, etc.).

Mental Health Services include a range of services including:

- Assessment and Outreach: Clinical evaluation and communication to collect client information for demographic, contact, and eligibility documentation; diagnosis of mental health and substance use disorders; and navigation to appropriate services.
- Neuropsychological Assessment: Administration and analysis of tests or other assessment methods for purpose of diagnosis of neuropsychological and cognitive disorders.
- Psychotherapy: Psychosocial treatment to assist with symptom reduction, address functional impairments, and enhance self-sufficiency, resilience and recovery services; including evaluation for identification and treatment of psychiatric disorders, mental status evaluation, and differential diagnosis.
- Psychiatric Medication Support and Monitoring: Ongoing follow up to monitor the clinical effectiveness or benefits of psychotropic medications including adherence, side effects, and prescription refills as well as psychiatric consultation without an encounter.

Group Therapy includes the following two types:

- Staff-Facilitated Group Therapy: Psychosocial and counseling services conducted in a group setting by mental health professional including high level of directive facilitation to contain and manage symptoms and emotional regulation in the group process.
- Peer-Facilitated Group Therapy: Psychosocial and counseling services conducted in a group setting by trained and supervised volunteers, including process and psychoeducational modalities.

Crisis Intervention

- Psychosocial and counseling services to address acute needs of individuals experiencing a psychiatric emergency, including risk assessment and de-escalation strategies; involuntary psychiatric holds if clients are at immediate risk of harm to themselves or others or if they are gravely disabled; as well as related monitoring and follow up to stabilize clients and assist them in connecting to ongoing treatment and support in the community.

Psychiatry Encounters

- Psychiatric treatment services to individuals with a diagnosed mental illness, including comprehensive evaluation for identification of psychiatric disorders, mental status evaluation, differential diagnosis, which may involve use of clinical and laboratory tests, case formulation, treatment plans and disposition, as well as treatment with medications and subsequent monitoring.

Substance Use Counseling and Case Management

- Rehabilitation, outreach, and linkage services to support a client to improve, maintain, or restore functional or daily living skills as well as to assist the client in accessing medical, educational, social, and vocational support and to maintain retention in primary medical care and substance use treatment as well as supportive housing.

### **Long-Term Survivors Service Description**

The LTS program is part of AHP's Behavioral Health Services team that is responsible for providing mental health and substance use services to individuals and groups who have persistent mental illness challenges, are aged 50 and above and/or are living with HIV/AIDS. The team includes psychiatrist, nurses, social workers, marriage and family therapist, substance use counselors, case managers, and psychologist.

As part of the continuum of care for all AHP behavioral health services, the Long-Term Survivors (LTS) program will provide individual therapy/counseling/care coordination services, peer and staff support groups, workshops addressing issues such as loneliness, social isolation, grief and loss, skills building, and community building; as well as consultation to other community providers. In addition, if needed the team will address the client's linkage to medical care. Clients would also need to be referred and linked to stable, safe housing as needed, and become able to meet their other basic needs through coordinated referrals to housing programs, legal services, and nutrition services.

Outreach and needs assessment activities are an important part of the engagement and linkage aspect of the LTS program and will be a key component of the program. This will include the following programs: San Francisco AIDS Foundation (SFAF) Elizabeth Taylor 50-Plus Network, Shanti, UCSF Positive Health Practice at San Francisco General Hospital and Trauma Center (SFGH), and Open House.

Outreach: Scheduled visits to existing programs serving 50+ long-term survivors - to both present to staff and be available to clients - and tabling events that target 50+ long-term survivors.

Needs Assessment: Informal needs assessment will be part of the intake process, feedback from clients and providers as part of outreach and presentation efforts, as well as client and providers surveys.

Individual therapy, counseling and care coordination services: Individual services addressing the unique needs of 50+ long-term survivors will include interventions such as Seeking Safety, Motivational Interviewing (MI), Dialectical Behavioral Therapy (DBT), Skills Building, and Cognitive Behavioral Therapy (CBT). In addition to the specific interventions listed, AHP will continue to recruit clinicians with both professional and life experiences, which reflect the program's target population. Referral and linkage activities will be part of this service category. AHP has in-house case management services and will utilize these as appropriate.

Peer and staff support groups: Support group services is another key component of the LTS program. Both staff and peer-facilitated groups will focus on assisting clients increase their social connectedness, address symptom management, and resource sharing.

Workshops: Workshop services are a single-session modality that will be structured to provide potential participants (Long-Term Survivors over 50) with the opportunity to explore specific topics related to the psycho-social issues most important to them. These will likely include loneliness, self-esteem, skills deficits etc. The goal of the workshops is to provide a peer group of LTS over 50 to participate in skills building exercises and discussions to identify and achieve overall improvements in health and well-being. Workshops will be held at 1930 Market Street Services Center after regular working hours to be as available as possible to a diverse group of participants.

## **Pop Up Clinic Service Description**

### Overview:

- Ward 86 is the HIV Clinic at Zuckerberg San Francisco General Hospital
- POP-UP is a new program at Ward 86 launched in January 2019 that aims to reduce health disparities among homeless and unstably housed patients living with HIV (HUU PLWH)
- POP-UP is a multicomponent intervention that provides drop-in, incentivized, comprehensive whole person care and enhanced outreach to HUU PLWH
- POP-UP Behavioral Health Services are part of AHP's Behavioral Health Services team that will provide case management and psychiatry services both at Ward 86 and consultation via zoom meetings and phone calls.

Consultation: Specific consultation services will be available to community providers to address issues related to psychiatric medication management, addressing barriers to engagement and retention, as well as identifying and accessing community resources available to address additional client service needs.

### ***Discharge Planning and Exit Criteria***

The exit criteria for this program is a client's successful completion of treatment plan of care, ongoing medical care for antiviral medications, and enrollment with supportive services in the community that contribute to the client's long-term wellness and recovery. AHP's range of services effectively treat ongoing clients while considering the appropriate level of care utilizing step-up and step-down protocols as well as linkage to community resources and medical care. Clinical decision making is an ongoing process in which medical necessity and the correct level of services to meet a client's current need are constantly assessed.

For some clients, a brief course of therapy is enough to restore functioning and treatment is concluded. Others who have ongoing mental health needs and may decompensate without treatment, will be referred to care coordination, which is usually provided twice monthly and consists of a mixture of individual therapy and targeted case management services. Clients are offered medication management if they continue to meet medical necessity for mental health services. If a client has a straightforward psychiatric medication regime or no longer meets medical necessity, they may be referred to their primary care provider for ongoing medication management. Some clients who have ongoing psychiatric needs, but are stable, may be managed through medication management services only. Staff monitor a client's progress in treatment with the goal of stepping down to lower levels of care such as less frequent individual sessions, group treatment, medication management services only, or a referral to non-specialty mental health services in the community. Clinical supervisors also periodically review the level of therapy being provided. As needed, and at least annually, the client is reassessed for medical necessity and need for ongoing treatment.

Assisting clients to access supportive services in the community is a key component in helping clients achieve their treatment goals. These include medical clinics to reconnect to medical care and establish a relationship with a primary care provider; substance use services including social model detox, residential treatment, transitional residential programs, and longer-term housing for clients with substance use and dual diagnosis issues. AHP staff access a wide network of providers to address other client needs including food access, benefit navigation, financial assistance with rent payment or health-care costs, and money management services. Additionally, staff make referrals to vocational rehabilitation services for clients who are interested in returning to work or meaningful activity and who would wish to develop employment skills. Staff facilitate access to these services through direct assistance, advocacy, linkage, and navigation. This assures successful client linkage to services addressing psychosocial stressors that can contribute to mental health decompensation, substance misuse and/or discontinuation of antiretroviral medications.

### **Program Staffing**

As much as possible, AHP staff at all levels reflect the diversity in ethnicity, culture, gender, HIV status, recovery history, and languages of the populations we serve. Staff at all levels of our agency have Spanish fluency and can provide services to monolingual Spanish-speaking clients. Our onsite psychiatrist/Medical Director has treated AHP clients for more than 20 years. Direct services are provided as follows:

- Individual and Group Psychotherapy Services are provided by Master's or Doctoral level clinicians (including PhD psychologists, Licensed Clinical Social Workers, Licensed Marriage and Family Therapists, Licensed Professional Clinical Counselors, and license eligible clinicians), as well as by Clinical Trainees under the direct supervision of licensed clinicians.
- Neuropsychological Testing is provided by a PsyD level neuropsychologist.
- Peer Support Groups are facilitated by volunteers from the community who have successfully completed an intensive three-day training in group facilitation. The Groups Program Coordinator is a Licensed Professional Clinical Counselor who provides ongoing consultation and clinical oversight.
- Substance Use Counseling and Case Management are provided by licensed and unlicensed professionals with experience and expertise working with clients with co-occurring disorders, namely medical disabilities, substance use and/or mental illness.

Staff have the knowledge and skills to provide outpatient specialty mental services to clients with a significant treatment and service needs. This capacity includes comprehensive intake assessments and diagnosis as well as collaborative plan development that establishes specific interventions and goals for treatment.

### **ARIES Database**

AHP collects and submits all required data through the AIDS Regional Information & Evaluation System (ARIES). ARIES is a client management system designed for Ryan White CARE Act 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.

AHP participates in the planning and implementation of its programs into ARIES. AHP 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 in ARIES within 48 hours or two working days after the data are collected. 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.

## 7. OBJECTIVES and MEASUREMENTS

All objectives, and descriptions of how objectives will be measured, are contained in the DPH document entitled "**HHS Performance Objectives**". These objectives are measured as indicated on the various tools designed to capture this data, and as reported annually to HHS and BOCC.

## 8. CONTINUOUS QUALITY IMPROVEMENT

AHP engages in continuous and time-limited, targeted quality improvement practices. These activities evaluate the quality, timeliness, effectiveness, and responsiveness of AHP services in relation to client wellness and recovery. Many of these practices occur at the agency level to ensure adequate training, supervision, and accountability. These include:

- a) **Standards of Care:** AHP abides by the standards of care for the services specified in this appendix as described in the document entitled, "Making the Connection: Standards of Care for Client-Centered Services."
- b) **Guarantee of Compliance:** AHP guarantees that it will comply with Health Commission, Local, State, Federal, and/or Funding Source policies and requirements - such as, Harm Reduction, Health Insurance Portability and Accountability Act (HIPAA), Cultural Competency, and Client Satisfaction.

Within AHP's Behavioral Health Services (BHS) program, quality improvement activities include routine monitoring of service standards, billing compliance, and measurement of clinical and client satisfaction outcomes. AHP BHS staff meet with their clinical supervisor and as a team every week to discuss these requirements and objectives and to receive regular feedback on their work with clients. Continuing education is provided to staff members at these meetings as well as at monthly clinical consultation groups and in-service trainings.

AHP's Operations Manager serves as our in-house informaticist and oversees all continuous quality improvement activities including the review of client and service records to ensure timely, accurate, and complete data entry; units of service and other productivity measures; and monitoring of all performance objectives. These activities are carried out with strict regard for the integrity and security of the data, and ensure reporting is not only complete and accurate but also kept confidential. Specific to this contract, these activities include:

- c) **Client Eligibility:** The Operations Manager leads a team of administrative and programmatic staff that meet weekly to review eligibility documentation for all new clients. The team uses the "Pending Eligibility Documents" and "Fix-It: Eligibility Documents" reports to track missing and expired documentation and then follow up with the assigned clinician or with administrative staff tasked with following up with the client to obtain the necessary documents. This team also oversees the biannual recertification of client eligibility, including notifying clients and staff, providing tools (e.g., Eligibility Checklist) and training to staff, as well as entering the updated information in ARIES and filing in the clients' charts. Similarly, this group is responsible for running the ARIES Statistical Analysis Report (STAR) and Ryan White HIV/AIDS Program Services Report (RSR) at least monthly to review accuracy and completion of client data and to make corrections as need to reduce missing or unknown values.

- d) **Client Satisfaction:** Clients complete Client Satisfaction Questionnaires (CSQ) at least once during their course of treatment. Data is collected throughout the contract period when clients complete a 20-week course of psychotherapy treatment. Data for time-limited groups is similarly collected at the end of the group. Data for ongoing groups is collected annually. Clients receiving psychiatry services have surveys administered semi-annually over a two-week period. We also collect surveys when clients enter services at the completion of their intake/assessment interview. These questionnaires are anonymous and are submitted to a collection box in the Services Center lobby. The data is then entered into a Qualtrics database by administrative staff. The Operations Manager, BHS Managers and Supervisors, and the Director review this data quarterly. As needed, programmatic changes to address clients' concerns may occur. Staff performance issues are managed through clinical supervision, training, and corrective action. Administrative and operational issues are further evaluated by the Operations Manager, BHS Managers and Supervisors, and the Director. A plan of action is then developed and implemented to address issues as needed.
- e) **Objectives:** The Operations Manager is responsible for tracking and monitoring contract outcome and performance objectives. Data used to measure the timeliness of treatment plan creation and review, neuro-psych testing and reporting, and loss to follow up are recorded in ARIES and are reviewed monthly by the Operations and BHS Managers. Staff are informed of expectations set forth in the objectives and their performance is monitored in weekly clinical supervision. Outcome objectives are measured using a client self-report regarding severity of symptoms related to common mental health and substance use disorders. These questions are asked at the start of treatment and again prior to discharge. Clinicians review these data and any notable change with their supervisor and with clients, if clinically appropriate or useful. The Operations Manager, BHS Managers and Supervisors, and the Director review the aggregated data quarterly.
- f) **Deliverables and Productivity:** The Operations Manager is responsible for tracking and monitoring units of service and unduplicated client deliverables. The Operations Manager performs monthly reports in ARIES (e.g., Cross Tab Report by Agency Subservice and Detail Service Report by Staff). These data are reported monthly to financial staff for the purposes of invoicing and by Operations Manager, BHS Managers and Supervisors, and the Director to monitor program progress and individual staff performance.

## 9. REQUIRED LANGUAGE

- |    |                                 |                               |
|----|---------------------------------|-------------------------------|
| a) | Third Party Reimbursement:      | See Target Population, Page 1 |
| b) | Low Income:                     | See Target Population, Page 1 |
| c) | Client Eligibility:             | See Target Population, Page 1 |
| d) | Client Retention:               | N/A                           |
| e) | Vouchers:                       | N/A                           |
| f) | ARIES Database:                 | See Methodology, Pages 9-10   |
| g) | Standards of Care:              | See CQI, Page 10              |
| h) | <u>Termination of Services:</u> |                               |

If AHP decides that it can no longer provide the services for which it has contracted under this agreement AHP will send a written notice to HIV Health Services, no less than 90 days prior to the date it wishes to terminate the services. In addition, AHP will prepare a written plan for the transition of all clients receiving services to another provider of services. This plan must be approved by HHS and should demonstrate a good faith effort to contact and locate all clients both active and inactive before the termination date.



- i) Subcontractors:  
To the extent that any subcontractor of UCSF would have access to City PHI, each contract between UCSF and that subcontractor must, except as the City otherwise agrees, 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 UCSF would be so obligated under Section 13.4 hereof, (2) provide cyber and technology errors and omissions insurance with limits acceptable to the City, which approval will not be withheld on the basis that a subcontractor has failed to obtain insurance above levels reasonably typical for its industry (or for reasonably comparable providers of services) or otherwise unreasonably withheld, and (3) destroy or return all City data in an agreed upon machine readable format at the expiration of the subcontract term.

## Appendix B Calculation of Charges

### 1. Method of Payment

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

### 2. Program Budgets and Final Invoice

A. Program Budgets are listed below and are attached hereto.

#### Budget Summary

#### HIV Related Outpatient Mental Health Services

B. Contractor understands that, of the maximum dollar obligation listed in Section 5 of this Agreement, \$0 is included as a contingency amount and is neither to be used in Program Budgets attached to this Appendix, or available to Contractor without a modification to this Agreement executed in the same manner as this Agreement or a revision to the Program Budgets of Appendix B, which has been approved by Contract Administrator. Contractor further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable City and Department of Public Health laws, regulations and policies/procedures and certification as to the availability of funds by Controller. Contractor agrees to fully comply with these laws, regulations, and policies/procedures.

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

	<b>Term</b>	<b>Funding Source</b>	<b>Amount</b>
Original Agreement	3/01/2018-6/30/2021	General Fund	\$2,970,981
Original Agreement	7/01/2018-9/29/2018	RWPB State Grant	\$45,000
Original Agreement	7/01/2018-2/28/2022	RWPA Grant	\$5,748,440
Revision to Program Budget (RPB#1)	7/01/2018-9/29/2019	RWPB State Grant	\$274,825
Revision to Program Budget (RPB#2)	7/01/2018-6/30/2019	General Fund	\$189,313
Revision to Program Budget (RPB#3)	7/01/2018-6/30/2019	General Fund	\$38,714
Revision to Program Budget (RPB#4)	7/01/2018-6/30/2019	General Fund, RWPA, RWPB	\$349,647
<b>Amendment #1</b>	<b>3/01/20 – 2/28/22</b>	<b>General Fund. RWPA</b>	<b><u>\$333,248</u></b>

**Sub Total: \$9,950,168**

**Contingency: \$0**

Contingency Used 8/01/18 (\$274,825):

Contingency Used 2/01/19 (\$189,313):

Contingency Used 3/01/19 (\$38,714):

Contingency Used 12/01/19 (\$199,231):

Contingency Used 8/01/20 (\$38,714):

**(This equals the total: \$9,950,168**

**NTE)Total**

C. Contractor agrees to comply with its Program Budgets of Appendix B in the provision of Services. Changes to the budget that do not increase or reduce the maximum dollar obligation of the City are subject to the provisions of the Department of Public Health Policy/Procedure Regarding Contract Budget Changes. Contractor agrees to comply fully with that policy/procedure.

D. A final closing invoice, clearly marked "FINAL," shall be submitted no later than sixty (60) calendar days following the closing date of the Agreement, and shall include only those costs incurred during the referenced period

of performance. If costs are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to City.

## UOS COST ALLOCATION BY SERVICE MODE

Fund Notice Date: 07/16/20		SERVICE MODES								Contract Totals
Personnel Expenses Position Titles	FTE	Crisis Intervention Hours		Substance Counseling/ Case Mgmt		Psychiatry Encounters		Mental Health Services Hours		
		Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	
Program Director	0.25	8,636	20%	2,156	5%	19,403	45%	12,922	30%	43,117
Psychiatrist/Medical Directo	0.10	8,342	44%			10,618	56%			18,960
Psychiatrist	0.09	3,427	20%			13,710	80%			17,137
Psychiatrist - Intern (PGY4)	0.17	2,433	20%			9,732	80%			12,165
Psychiatrist - Intern (PGY3)	0.05	664	20%			2,657	80%			3,321
Psychiatrist - Intern (PGY2)	0.05	640	20%			2,558	80%			3,198
Nurse Practitioner	0.15	2,844	10%			2,275	8%	23,321	82%	28,440
Registered Nurse	0.34	5,634	10%					50,702	90%	56,336
Psychologist	0.29							26,998	100%	26,998
Psychologist	0.28							34,678	100%	34,678
Psychologist	0.15							13,881	100%	13,881
Supervisor - Clinical Social Worker	0.15	1,479	10%	444	3%			12,866	87%	14,789
Clinical Social Worker-Lead	0.23	-	0%	2,138	8%			24,583	92%	26,721
Clinical Social Worker	0.10	1,193	10%	477	4%			10,256	86%	11,926
Clinical Social Worker	0.15							11,828	100%	11,828
Clinical Social Worker	0.22			799	5%			15,177	95%	15,976
Clinical Social Worker	0.25	1,880	10%	752	4%			16,170	86%	18,802
Clinical Social Worker	0.34			1,296	5%			24,633	95%	25,929
Clinical Social Worker	0.56			1,647	4%			39,532	96%	41,179
Clinical Social Worker	0.34			1,215	4%			29,151	96%	30,366
Clinical Social Worker	0.10							9,591	100%	9,591
Clinical Social Worker	0.15			474	4%			11,387	96%	11,861
Social Work Associate	0.10							10,600	100%	10,600
Receptionist	0.10	1,978	32%	742	12%	1,854	30%	1,607	26%	6,180
Receptionist	0.10	1,525	32%	572	12%	1,430	30%	1,239	26%	4,765
Receptionist-Lead	0.10	1,525	32%	477	10%	1,430	30%	1,334	28%	4,765
Program Coordinator	0.32	5,613	32%	1,754	10%	5,789	33%	4,386	25%	17,542
Program Coordinator	0.35	8,570	30%	2,857	10%	9,426	33%	7,713	27%	28,565
Administrator 2	0.20	3,951	25%	1,580	10%	6,321	40%	3,951	25%	15,803
Research Administrator 2	0.15	2,989	25%	1,196	10%	4,782	40%	2,989	25%	11,956
Program Manager	0.10	3,617	25%	1,447	10%	5,788	40%	3,617	25%	14,469
Quality Manager	0.05	1,361	25%	544	10%	2,177	40%	1,361	25%	5,443
<b>Total FTE &amp; Total Salaries</b>	<b>6.08</b>	<b>68,300</b>	<b>11%</b>	<b>22,566</b>	<b>4%</b>	<b>99,949</b>	<b>17%</b>	<b>406,472</b>	<b>68%</b>	<b>597,287</b>
Fringe Benefits	40%	27,320	11%	9,026	4%	39,980	17%	162,589	68%	238,915
<b>Total Personnel Expenses</b>		<b>95,620</b>	<b>11%</b>	<b>31,592</b>	<b>4%</b>	<b>139,929</b>	<b>17%</b>	<b>569,061</b>	<b>68%</b>	<b>836,202</b>
<b>Operating Expenses</b>		<b>Expense</b>	<b>%</b>	<b>Expense</b>	<b>%</b>	<b>Expense</b>	<b>%</b>	<b>Expense</b>	<b>%</b>	<b>Contract Total</b>
Total Occupancy		10,031	11%	3,314	4%	14,680	17%	59,700	68%	87,725
Total Materials and Supplies		3,693	11%	1,220	4%	5,404	17%	21,978	68%	32,296
Total General Operating		602	11%	199	4%	881	17%	3,582	68%	5,263
Total Consulting		897	11%	296	4%	1,312	17%	5,335	68%	7,840
Data Network, CCDSS, GAEL		1,416	11%	468	4%	2,073	17%	8,430	68%	12,387
<b>Total Operating Expenses</b>		<b>16,639</b>	<b>11%</b>	<b>5,497</b>	<b>4%</b>	<b>24,350</b>	<b>17%</b>	<b>99,025</b>	<b>68%</b>	<b>145,511</b>
<b>Total Direct Expenses</b>		<b>112,260</b>	<b>11%</b>	<b>37,089</b>	<b>4%</b>	<b>164,278</b>	<b>17%</b>	<b>668,086</b>	<b>68%</b>	<b>981,714</b>
<b>Indirect Expenses</b>	9%	10,103	11%	3,338	4%	14,785	17%	60,128	68%	88,354
<b>TOTAL EXPENSES</b>		<b>122,363</b>	<b>11%</b>	<b>40,427</b>	<b>4%</b>	<b>179,063</b>	<b>17%</b>	<b>728,214</b>	<b>68%</b>	<b>1,070,066</b>
<b>UOS per Service Mode</b>		480		398		531		5,060		<b>6,469</b>
<b>Cost Per UOS by Service Mode</b>		\$255.00		\$102.00		\$337.00		\$144.00		<b>N/A</b>
<b>UDC per Service Mode</b>		30		25		33		314		<b>402</b>

**BUDGET JUSTIFICATION****1a) SALARIES**

Staff Position	<b>Program Director</b>			
Brief Job Duties:	programmatic, budget/fiscal oversight of program; responsible for all personnel issues within UC, providing guidance and support to all personnel actions, including hiring and disciplinary actions.			
Min Quals:	bachelors w appropriate major; 4 yrs exp in prog mngmt, or equivalent combination of educ & exp; 5 yrs exp in HIV services			
Annual Salary:	x FTE:	x Months per Year:	Annualized if < 12 mos	<b>Total</b>
\$172,469.52	0.25	12	1	<b>\$ 43,117</b>
Staff Position	<b>Psychiatrist/Medical Director</b>			
Brief Job Duties:	psychiatric evaluation, consultation, medication evaluation & pt management svcs, pt crisis intervention/triage svcs as required; clinical supervision to the Psychiatric RN & Nurse Practitioner; oversees medical policies/procedures at clinic.			
Min Quals:	CA licensed psychiatrist and 5 yrs clinical experience in an HIV mental health environment.			
\$189,600.00	0.10	12	1	<b>\$ 18,960</b>
Staff Position	<b>Psychiatrist</b>			
Brief Job Duties:	psychiatric assessment, evaluation and consultation services.			
Min Quals:	CA licensed Board eligible psychiatrist; proven exp with medical aspects of HIV and psychiatry.			
\$189,600.00	0.09	12	1	<b>\$ 17,137</b>
Staff Position	<b>Psychiatrist - Intern (PGY4)</b>			
Brief Job Duties:	psychiatric assessment, evaluation and consultation services.			
Min Quals:	CA Licensed MD or license eligible in CA, currently in an accredited psychiatric residence.			
\$71,559.60	0.17	12	1	<b>\$ 12,165</b>
Staff Position	<b>Psychiatrist - Intern (PGY3)</b>			
Brief Job Duties:	psychiatric assessment, evaluation and consultation services.			
Min Quals:	CA Licensed MD or license eligible in CA, currently in an accredited psychiatric residence.			
\$66,422.76	0.05	12	1	<b>\$ 3,321</b>
Staff Position	<b>Psychiatrist - Intern (PGY2)</b>			
Brief Job Duties:	psychiatric assessment, evaluation and consultation services.			
Min Quals:	CA Licensed MD or license eligible in CA, currently in an accredited psychiatric residence.			
\$63,960.36	0.05	12	1	<b>\$ 3,198</b>
Staff Position	<b>Nurse Practitioner</b>			
Brief Job Duties:	psych medication monitoring, follow-up secondary to assessment/eval by Psychiatrist; client assessment, crisis intervention/			
Min Quals:	NP CA license;. 2 yrs spvsry exp in med setting preferably HIV; 2 yrs exp in a mental hlth or subs abuse/recovery oriented tx setting; 5 yrs clinical exp in HIV mental hlth.			
\$189,600.00	0.15	12	1	<b>\$ 28,440</b>
Staff Position	<b>Registered Nurse</b>			
Brief Job Duties:	psych med monitoring, follow-up secondary to assessment/eval by Psychiatrist; client assessment, crisis intervention/ triage.			
Min Quals:	CA Licensed RN; 2 yrs spvsry exp in med setting preferably HIV; 2 yrs exp in a mental hlth or subs abuse/recovery oriented tx setting; 5 yrs clinical exp in HIV mental hlth.			
\$167,666.40	0.34	12	1	<b>\$ 56,336</b>

Staff Position	<b>Psychologist</b>				
Brief Job Duties:	clinical svcs; neuropsych testing assessments & evaluation to referred clients; supervise clinical interns & co-facilitate grps				
Min Quals:	CA licensed clinician; doctorate in psychol; 3 yrs clinical counslg; 3 yrs neuropsych testing; exp with diverse populations				
	\$94,399.84	0.29	12	1	\$ 26,998
Staff Position	<b>Psychologist</b>				
Brief Job Duties:	clinical svcs; neuropsych testing assessments & evaluation to referred clients; supervise clinical interns & co-facilitate grps				
Min Quals:	CA licensed clinician; doctorate in psychol; 3 yrs clinical counslg; 3 yrs neuropsych testing; exp with diverse populations				
	\$122,536.80	0.28	12	1	\$ 34,678
Staff Position	<b>Psychologist</b>				
Brief Job Duties:	clinical svcs; neuropsych testing assessments & evaluation to referred clients; supervise clinical interns & co-facilitate grps				
Min Quals:	CA licensed clinician; doctorate in psychol; 3 yrs clinical counslg; 3 yrs neuropsych testing; exp with diverse populations				
	\$92,540.16	0.15	12	1	\$ 13,881
Staff Position	<b>Psychologist</b>				
Brief Job Duties:	clinical svcs; neuropsych testing assessments & evaluation to referred clients; supervise clinical interns & co-facilitate grps				
Min Quals:	CA licensed clinician; doctorate in psychol; 3 yrs clinical counslg; 3 yrs neuropsych testing; exp with diverse populations				
	\$98,594.94	0.15	12	1	\$ 14,789
Staff Position	<b>Supervisor - Clinical Social Worker</b>				
Brief Job Duties:	oversight of prog clinical activities; clinical spvsn of staff; reviews protocols, assures appropriate staffing; generates programmatic contract compliance functions; liaison with CBO as needed; participation or coordination of staff in ISM case				
Min Quals:	Masters in social work, psychology or other related area. Licensed MFCC/LCSW as well as exp with diverse populations; proven crisis intervention exp; 5 yrs exp working with HIV/AIDS clients				
	\$118,762.20	0.23	12	1	\$ 26,721
Staff Position	<b>Clinical Social Worker-Lead</b>				
Brief Job Duties:	oversight of prog clinical activities; clinical spvsn of staff; reviews protocols, assures appropriate staffing; generates programmatic contract compliance functions; liaison with CBO as needed; participation or coordination of staff in ISM case				
Min Quals:	Masters in social work, psychology or other related area. Licensed MFCC/LCSW as well as exp with diverse populations; proven crisis intervention exp; 5 yrs exp working with HIV/AIDS clients				
	\$119,262.00	0.10	12	1	\$ 11,926
Staff Position	<b>Clinical Social Worker</b>				
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.				
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients				
	\$78,853.32	0.15	12	1	\$ 11,828
Staff Position	<b>Clinical Social Worker</b>				
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.				
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients				
	\$72,950.44	0.22	12	1	\$ 15,976

Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$74,609.88	0.25	12	\$ 18,802

Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$77,170.81	0.34	12	\$ 25,929

Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$73,142.64	0.56	12	\$ 41,179

Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$90,374.38	0.34	12	\$ 30,366

Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$95,911.65	0.10	12	\$ 9,591

Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$79,072.56	0.15	12	\$ 11,861

Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$105,995.28	0.10	12	\$ 10,600

Staff Position	<b>Receptionist</b>			
Brief Job Duties:	prog support svcs including maintaining evaluation databases, pt satisfaction surveys, record keeping; typing correspondence; maintain files, coordinate and set up grp space arrangements; data entry			
Min Quals:	High school grad; 3 yrs related admin/clerical exp; knowledge of computer word processing and excellent typing skills, exp with diverse populations & HIV service delivery system			
	\$61,804.80	0.10	12	\$ 6,180

Staff Position	<b>Receptionist</b>			
Brief Job Duties:	prog support svcs including maintaining evaluation databases, pt satisfaction surveys, record keeping; typing correspondence; maintain files, coordinate and set up grp space arrangements; data entry			
Min Quals:	High school grad; 3 yrs related admin/clerical exp; knowledge of computer word processing and excellent typing skills, exp with diverse populations & HIV service delivery system			
	\$47,648.16	0.10	12	\$ 4,765

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Min Quals:	High school grad; 3 yrs related admin/clerical exp; knowledge of computer word processing and excellent typing skills, exp with diverse populations & HIV service delivery system			
	\$47,648.16	0.10	12	\$ 4,765

Staff Position	<b>Receptionist-Lead</b>			
Brief Job Duties:	prog support svcs including maintaining evaluation databases, pt satisfaction surveys, record keeping; typing correspondence; maintain files, coordinate and set up grp space arrangements; data entry			
Min Quals:	High school grad; 3 yrs related admin/clerical exp; knowledge of computer word processing and excellent typing skills, exp with diverse populations & HIV service delivery system			
	\$55,164.96	0.32	12	\$ 17,542

Staff Position	<b>Program Coordinator</b>			
Brief Job Duties:	prog support including coordinating bldg maintenance/scheduling for service center; ensuring therapy rooms are clean, up to code & available for use as needed; bldg/maintain evaluation databases, pt satisfaction surveys & record keeping; typing correspondence, maintain files, coordinate/sets up grp space arrangements; data entry; work front reception desk as needed.			
Min Quals:	High school grad; 3 yrs related admin/clerical exp; knowledge of computer word processing; excellent typing skills, exp with diverse populations and HIV service delivery system.			
	\$82,798.08	0.35	12	\$ 28,565

Staff Position	<b>Program Analyst</b>			
Brief Job Duties:	Manages contract compliance and regulatory requirements. Maintains records and prepares written materials as required.			
Min Quals:	Bachelors in business, liberal arts or other relevant area; 3 yrs exp working w progs delivering publically funded svcs to vulnerable populations.			
	\$79,014.12	0.20	12	\$ 15,803

Staff Position	<b>Research Administrator 2</b>			
Brief Job Duties:	invoicies clinical/contract-related expenses using CCSF templates & instructions; assists with clinical-related procurement.			
Min Quals:	Bachelors in accounting or finance or related area; minimum of 2 yrs exp in general accounting.			
	\$79,706.64	0.15	12	\$ 11,956



Staff Position	<b>Program Manager</b>			
Brief Job Duties:	supports prog & prog leadership, including managing prog assist & analysts; coverage of duties as necessary; contract mngmt; ensures fiscal & admin compliance per funder; coordinates invoicing & billing procedures with funder.			
Min Quals:	Bachelors in accounting or finance; 3 yrs exp working with programs delivering publically funded svcs to vulnerable populations			
	\$144,690.00	0.10	12	\$ 14,469
Staff Position	<b>Quality Manager</b>			
Brief Job Duties:	billing support to prog leadership, includes monitoring accuracy & completion of billing data; developing/implementing changes to billing system to improve productivity, tracking/quality control; reconciliation of ARIES billing data/clinical documentation; production of prog UOS reports/projections; production of staff productivity reports/projections; design data collection, storage & reporting systems; communication with prog leadership/staff; data entry.			
Min Quals:	Master's or equival combination educ. & exp in pub hlth svcs & systems integration/maintenance; knowledge of HIV & mental hlth svcs, exp w ARIES & serving diverse populations.			
	\$108,857.04	0.05	12	\$ 5,443
	<b>Total FTE:</b>	<b>6.06</b>		<b>Total Salaries: \$ 597,287</b>

EMPLOYEE FRINGE BENEFITS	Component	Cost
	Social Security	\$ 14,335
	Retirement	\$ 66,896
	Medical	\$ 91,624
	Dental	\$ 9,557
	Unemployment Insurance	\$ 478
	Disability Insurance	\$ 19,113
	Paid Time Off	\$ 36,912
	<b>Fringe Benefit %:</b>	<b>40.00%</b>
	<b>Total Fringe Benefit:</b>	<b>238,915</b>
	<b>TOTAL SALARIES &amp; EMPLOYEE FRINGE BENEFITS:</b>	<b>836,202</b>

**2) OPERATING EXPENSES:**

Occupancy:	Brief Description	Rate	Cost
Rent	Monthly expense for proportion of clinic space utilized by program.	\$6.96/sq. ft. x 1012 sq. ft = \$7,040.08 x 12 mos	84,481
Utilities	Monthly phone expenses for proportionate program utilization .	\$44.62 / mo x 6.06 FTE x 12 mos	3,244
		<b>Total Occupancy:</b>	<b>87,725</b>

Materials/Supplies	Brief Description	Rate	Cost
Supplies Postage	pens, paper, medical chart supplies, and postage expenses for client communication proportionate to program utilization	\$200 / mo x 6.06 FTE x 12 mos	14,543
Hardware Software	Routine replacement of computers and peripherals for contract staff	\$244.13 / mo x 6.06 FTE x 12 mos	17,753
		<b>Total Materials/Supplies</b>	<b>32,296</b>

General Operating:	Brief Description	Rate	Cost
Staff Training	fees for work-related conferences & related expns to train career staff to stay current in knowledge & skills necessary to perform jobs	\$200 per training x 6.06 FTE	1,212
Temporary Staffing	provided by UC temp employ pool, Robert Half, or other interim staffing agency; covers temp vacancies & leaves	Hourly rate variable contingent on interim staff needed	3,000
Equip Rental	photocopiers, network printers and scanners.	\$14.45 / mo x 6.06 FTE x 12 mos	1,051
<b>Total General Operating:</b>			<b>5,263</b>

Consultant:	Brief Description	Rate	Cost
Hook 42	Design and maintenance of clinical website	\$160/hour blended rate	7,840
<b>Total Consulting:</b>			<b>7,840</b>

Other: Recharge	Brief Description	Rate	Cost
Data Network	Use of the UCSF data network	\$44/FTE x 6.06 FTE x 12 mos	3,199
CCDSS	IT Desktop support services (Basic Support level)	\$59/FTE x 6.06 FTE x 12 mos	4,290
GAEL	General Automobile and Employee Liability Charges insurance charges associated with payroll	\$.82/\$100 of payroll x 6.06 FTE x 12 mos	4,898
<b>Total Other:</b>			<b>12,387</b>

<b>TOTAL OPERATING EXPENSES:</b>	<b>145,511</b>
<b>TOTAL DIRECT COSTS:</b>	<b>981,713</b>

4) INDIRECT COSTS			
9% on Total Direct Costs	<b>Indirect Rate:</b>	<b>9%</b>	88,354
<b>TOTAL INDIRECT COSTS:</b>			<b>88,354</b>
<b>TOTAL EXPENSES:</b>			<b>1,070,066</b>

## UOS COST ALLOCATION BY SERVICE MODE

Fund Notice Date: 07/16/20		SERVICE MODES								
Personnel Expenses		Crisis Intervention Hours		Substance Counseling/ Case Mgmt Hours		Psychiatry Encounters		Mental Health Services Hours		Contract Totals
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	
Program Director	0.20			3,794	11%	20,351	59%	10,348	30%	34,494
Psychiatrist/Medical Director	0.25	9,480	20%			37,920	80%			47,400
Psychiatrist	0.17	6,446	20%			25,786	80%			32,232
Psychiatrist - Intern (PGY4)	0.10	1,431	20%			5,725	80%			7,156
Psychiatrist - Intern (PGY3)	0.10	1,328	20%			5,314	80%			6,642
Psychiatrist - Intern (PGY2)	0.05	640	20%			2,558	80%			3,198
Nurse Practitioner	0.10	1,896	10%					17,064	90%	18,960
Registered Nurse	0.35	5,868	10%					52,815	90%	58,683
Psychologist	0.30							28,320	100%	28,320
Psychologist	0.38							46,564	100%	46,564
Psychologist	0.28							27,409	100%	27,409
Supervisor - Clinical Social Worker	0.33	5,110	13%	1,966	5%			32,234	82%	39,310
Clinical Social Worker	0.40	4,416	14%	1,262	4%			25,864	82%	31,541
Clinical Social Worker	0.13	730	8%	-	0%			8,389	92%	9,119
Clinical Social Worker	0.40	895	3%	1,492	5%			27,456	92%	29,844
Clinical Social Worker	0.40	3,395	11%	2,161	7%			25,312	82%	30,868
Clinical Social Worker	0.40	585	2%	1,755	6%			26,916	92%	29,257
Clinical Social Worker	0.40	723	2%	2,169	6%			33,258	92%	36,150
Clinical Social Worker	0.40	767	2%	2,302	6%			35,296	92%	38,365
Clinical Social Worker	0.40			3,392	8%			39,006	92%	42,398
Receptionist	0.30	5,575	39%	715	5%	3,002	21%	5,003	35%	14,294
Receptionist	0.30	5,575	39%	715	5%	3,002	21%	5,003	35%	14,294
Receptionist-Lead	0.25	5,378	39%	690	5%	2,896	21%	4,827	35%	13,791
Program Coordinator	0.30	8,445	34%	1,242	5%	5,216	21%	9,936	40%	24,839
Program Analyst	0.05	1,343	34%	198	5%	830	21%	1,580	40%	3,951
Administrator 2	0.05	1,474	37%	80	2%	837	21%	1,594	40%	3,985
Program Manager	0.05	2,605	36%	217	3%	1,519	21%	2,894	40%	7,235
Quality Manager	0.08	3,309	38%	87	1%	1,829	21%	3,484	40%	8,709
<b>Total FTE &amp; Total Salaries</b>	<b>6.91</b>	<b>77,417</b>	<b>11%</b>	<b>24,235</b>	<b>4%</b>	<b>116,784</b>	<b>17%</b>	<b>470,572</b>	<b>68%</b>	<b>689,008</b>
Fringe Benefits	37%	28,644	11%	8,967	4%	43,210	17%	174,112	68%	254,933
<b>Total Personnel Expenses</b>		<b>106,061</b>	<b>11%</b>	<b>33,202</b>	<b>4%</b>	<b>159,995</b>	<b>17%</b>	<b>644,684</b>	<b>68%</b>	<b>943,941</b>
<b>Operating Expenses</b>		<b>Expense</b>	<b>%</b>	<b>Expense</b>	<b>%</b>	<b>Expense</b>	<b>%</b>	<b>Expense</b>	<b>%</b>	<b>Contract Total</b>
Total Occupancy		10,718	11%	3,355	4%	16,169	17%	65,150	68%	95,392
Total Materials and Supplies		1,725	11%	540	4%	2,603	17%	10,488	68%	15,356
Total General Operating		366	11%	114	4%	551	17%	2,222	68%	3,253
Data Network, CCDSS, GAEL		1,595	11%	499	4%	2,406	17%	9,695	68%	14,196
<b>Total Operating Expenses</b>		<b>14,404</b>	<b>11%</b>	<b>4,509</b>	<b>4%</b>	<b>21,729</b>	<b>17%</b>	<b>87,554</b>	<b>68%</b>	<b>128,197</b>
<b>Total Direct Expenses</b>		<b>120,465</b>	<b>11%</b>	<b>37,711</b>	<b>4%</b>	<b>181,724</b>	<b>17%</b>	<b>732,238</b>	<b>68%</b>	<b>1,072,138</b>
<b>Indirect Expenses</b>	9%	10,842	11%	3,394	4%	16,355	17%	65,901	68%	96,492
<b>TOTAL EXPENSES</b>		<b>131,307</b>	<b>11%</b>	<b>41,105</b>	<b>4%</b>	<b>198,079</b>	<b>17%</b>	<b>798,139</b>	<b>68%</b>	<b>1,168,630</b>
<b>UOS per Service Mode</b>		526		435		580		5,527		7,068
<b>Cost Per UOS by Service Mode</b>		\$250.00		\$94.00		\$341.00		\$144.00		N/A
<b>UDC per Service Mode</b>		47		39		52		491		629

**BUDGET JUSTIFICATION****1a) SALARIES**

Staff Position	<b>Program Director</b>				
Brief Job Duties:	programmatic, budget/fiscal oversight of program; responsible for all personnel issues within UC, providing guidance and support to all personnel actions, including hiring and disciplinary actions.				
Min Quals:	bachelors w appropriate major; 4 yrs exp in prog mngmt, or equivalent combination of educ & exp; 5 yrs exp in HIV services				
	Annual Salary:	x FTE:	x Months per Year:	Annualized if < 12 mos	<b>Total</b>
	\$172,469.52	0.20	12	1	<b>\$ 34,494</b>
Staff Position	<b>Psychiatrist/Medical Director</b>				
Brief Job Duties:	psychiatric evaluation, consultation, medication evaluation & pt management svcs, pt crisis intervention/triage svcs as required; clinical supervision to the Psych RN & Nurse Practitioner; oversees medical policies/procedures at clinic.				
Min Quals:	CA licensed psychiatrist and 5 yrs clinical experience in an HIV mental health environment.				
	\$189,600.00	0.25	12	1	<b>\$ 47,400</b>
Staff Position	<b>Psychiatrist</b>				
Job Duties:	psychiatric assessment, evaluation and consultation services.				
Min Quals:	CA licensed Board eligible psychiatrist; proven exp with medical aspects of HIV and psychiatry.				
	\$189,600.00	0.17	12	1	<b>\$ 32,232</b>
Staff Position	<b>Psychiatrist - Intern (PGY4)</b>				
Brief Job Duties:	psychiatric assessment, evaluation and consultation services.				
Min Quals:	CA Licensed MD or CA license eligible, currently in an accredited psychiatric residence.				
	\$71,559.60	0.10	12	1	<b>\$ 7,156</b>
Staff Position	<b>Psychiatrist - Intern (PGY3)</b>				
Brief Job Duties:	psychiatric assessment, evaluation and consultation services.				
Min Quals:	CA Licensed MD or CA license eligible, currently in an accredited psychiatric residence.				
	\$66,422.76	0.10	12	1	<b>\$ 6,642</b>
Staff Position	<b>Psychiatrist - Intern (PGY2)</b>				
Brief Job Duties:	psychiatric assessment, evaluation and consultation services.				
Min Quals:	CA Licensed MD or CA license eligible, currently in an accredited psychiatric residence.				
	\$63,960.36	0.05	12	1	<b>\$ 3,198</b>
Staff Position	<b>Nurse Practitioner</b>				
Brief Job Duties:	psych medication monitoring, follow-up secondary to assessment/eval by Psychiatrist; client assessment, crisis				
Min Quals:	NP CA license;. 2 yrs spvsry exp in med setting preferably HIV; 2 yrs in a mental hlth or subs abuse/recovery oriented tx setting; 5 yrs clinical exp in HIV mental hlth.				
	\$189,600.00	0.10	12	1	<b>\$ 18,960</b>
Staff Position	<b>Registered Nurse</b>				
Brief Job Duties:	psych med monitoring, follow-up secondary to assessment/eval by Psychiatrist; client assessment, crisis intervention/				
Min Quals:	CA Licensed RN; 2 yrs spvsry exp in med setting preferably HIV; 2 yrs exp in a mental hlth or subs abuse/recovery oriented tx setting; 5 yrs clinical exp in HIV mental hlth.				
	\$167,666.40	0.35	12	1	<b>\$ 58,683</b>

Staff Position	<b>Psychologist</b>			
Brief Job Duties:	clinical svcs; neuropsych testing assessments & evaluation to referred clients; supervise clinical interns & co-facilitate grps			
Min Quals:	CA licensed clinician; doctorate in psychol; 3 yrs clinical counslg; 3 yrs neuropsych testing; exp with diverse populations			
	\$94,399.84	0.30	12	\$ 28,320
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Min Quals:	CA licensed clinician; doctorate in psychol; 3 yrs clinical counslg; 3 yrs neuropsych testing; exp with diverse populations			
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Staff Position	<b>Supervisor - Clinical Social Worker</b>			
Brief Job Duties:	oversight of prog clinical activities; clinical spvsn of staff; reviews protocols, assures appropriate staffing; generate programmatic contract compliance functions; liaison w CBO as needed; participation or coordination of staff in ISM case			
Min Quals:	Masters in social work, psychology or other related area. Licensed MFCC/LCSW as well as exp with diverse populations; proven crisis intervention exp; 5 yrs exp working with HIV/AIDS clients			
	\$118,762.20	0.33	12	\$ 39,310
Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$78,853.32	0.40	12	\$ 31,541
Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$72,950.44	0.13	12	\$ 9,119
Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$74,609.88	0.40	12	\$ 29,844
Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$77,170.81	0.40	12	\$ 30,868

Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$73,142.64	0.40	12	\$ 29,257
Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$90,374.38	0.40	12	\$ 36,150
Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$95,911.65	0.40	12	\$ 38,365
Staff Position	<b>Clinical Social Worker</b>			
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.			
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients			
	\$105,995.28	0.40	12	\$ 42,398
Staff Position	<b>Receptionist</b>			
Brief Job Duties:	prog support svcs including maintaining evaluation databases, pt satisfaction surveys, record keeping; typing correspondence; maintain files, coordinate and set up grp space arrangements; data entry			
Min Quals:	High school grad; 3 yrs related admin/clerical exp; knowledge of computer word processing and excellent typing skills, exp with diverse populations & HIV service delivery system			
	\$47,648.16	0.30	12	\$ 14,294
Staff Position	<b>Receptionist</b>			
Brief Job Duties:	prog support svcs including maintaining evaluation databases, pt satisfaction surveys, record keeping; typing correspondence; maintain files, coordinate and set up grp space arrangements; data entry			
Min Quals:	High school grad; 3 yrs related admin/clerical exp; knowledge of computer word processing and excellent typing skills, exp with diverse populations & HIV service delivery system			
	\$47,648.16	0.30	12	\$ 14,294
Staff Position	<b>Receptionist-Lead</b>			
Brief Job Duties:	prog support svcs including maintaining evaluation databases, pt satisfaction surveys, record keeping; typing correspondence; maintain files, coordinate and set up grp space arrangements; data entry			
Min Quals:	High school grad; 3 yrs related admin/clerical exp; knowledge of computer word processing and excellent typing skills, exp with diverse populations & HIV service delivery system			
	\$55,164.96	0.25	12	\$ 13,791

Staff Position	<b>Program Coordinator</b>			
Brief Job Duties:	prog support including coordinating bldg maintenance/scheduling for service center; ensuring therapy rooms are clean, up to code & available for use as needed; bldg/maintain evaluation databases, pt satis surveys & record keeping; typing correspondence, maintain files, coordinate/sets up grp space arrangements; data entry; work front reception desk as			
Min Quals:	High school grad; 3 yrs related admin/clerical exp; knowledge of computer word processing; excellent typing skills, exp with diverse populations and HIV service delivery system.			
	\$82,798.08	0.30	12	\$ 24,839
Staff Position	<b>Program Analyst</b>			
Brief Job Duties:	Manages contract compliance & regulatory requirements; maintains records & prepares written materials as required.			
Min Quals:	Bachelors in business, liberal arts or other relevant area; 3 yrs exp working w progs delivering publically funded svcs to vulnerable populations.			
	\$79,014.12	0.05	12	\$ 3,951
Staff Position	<b>Research Administrator 2</b>			
Brief Job Duties:	invoicies clinical/contract-related expenses using CCSF templates & instructions; assists with clinical-related procurement.			
Min Quals:	Bachelors in accounting or finance or related area; minimum of 2 yrs exp in general accounting.			
	\$79,706.64	0.05	12	\$ 3,985
Staff Position	<b>Program Manager</b>			
Brief Job Duties:	supports prog & prog leadership, including managing prog assist & analysts; coverage of duties as necessary; contract mngmt; ensures fiscal & admin compliance per funder; coordinates invoicing & billing procedures with funder.			
Min Quals:	Bachelors in accounting or finance; 3 yrs exp working w progs delivering publically funded svcs to vulnerable populations			
	\$144,690.00	0.05	12	\$ 7,235
Staff Position	<b>Quality Manager</b>			
Brief Job Duties:	billing support to prog leadership, includes monitoring accuracy & completion of billing data; developing/implementing changes to billing system to improve productivity, tracking/quality control; reconciliation of ARIES billing data/clinical documentation; production of prog UOS reports/projections; production of staff productivity reports/projections; design data collection, storage & reporting systems; communication with prog leadership/staff; data entry.			
Min Quals:	Master's or equival combination educ. & exp in pub hlth svcs & systems integration/maintenance; knowledge of HIV & mental hlth svcs, exp w ARIES & serving diverse populations.			
	\$108,857.04	0.08	12	\$ 8,709
	<b>Total FTE:</b>	<b>6.91</b>		<b>Total Salaries: \$689,008</b>

1b) EMPLOYEE FRINGE BENEFITS	Component	Cost
	Social Security	\$ 15,296
	Retirement	\$ 71,381
	Medical	\$ 97,767
	Dental	\$ 10,197
	Unemployment Insurance	\$ 510
	Disability Insurance	\$ 20,395
	Paid Time Off	\$ 39,387

**Fringe Benefit %: 37% Total Fringe Benefit: 254,933**

**TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 943,941**

**2) OPERATING EXPENSES:**

Occupancy:	Brief Description	Rate	Cost
Rent	Monthly expense for the proportion of clinic space utilized by prog	\$6.96/sq. ft. x 1096 sq. ft = \$7,627 x 12 mos	91,522
Utilities	Monthly phone expenses for proportionate program utilization	\$46.64 /mo x 6.91 FTE x 12 mos	3,870
<b>Total Occupancy:</b>			<b>95,392</b>

Materials/Supplies	Brief Description	Rate	Cost
Supplies & Postage	Pens, paper, medical chart supplies, postage for client communication, proportionate to program utilization.	\$64.59 /mo x 6.91 FTE x 12 mos	5,356
Hardware & Software	Regular replacement of computers and peripherals for contract staff	\$120.60 /mo x 6.91 FTE x 12 mos	10,000
<b>Total Materials &amp; Supplies:</b>			<b>15,356</b>

General Operating:	Brief Description	Rate	Cost
Staff Training	fees for work-related conferences & related expense to train career staff to stay current in knowledge & skills necessary to perform work	\$289 per training x 6.91 FTE	2,000
Rental of Equipment	photocopiers, network printers and scanners.	\$15.10/mo x 6.91 FTE x 12 mos	1,253
<b>Total General Operating:</b>			<b>3,253</b>

Other Expenses: UC Recharges	Brief Description	Rate	Cost
Data Network	Use of the UCSF data network	\$44/FTE x 6.91 FTE x 12 mos	3,651
CCDSS	IT Desktop support services (Basic Support level)	\$59/FTE x 6.91 FTE x 12 mos	4,895
GAEL	General Automobile and Employee Liability Charges insurance charges associated with payroll	\$.82/\$100 of payroll x 6.91 FTE x 12 mos	5,650
<b>Total Other:</b>			<b>14,196</b>

<b>TOTAL OPERATING EXPENSE</b>	<b>128,197</b>
<b>TOTAL DIRECT COSTS</b>	<b>1,072,138</b>

**4) INDIRECT COSTS**

9% on Total Direct Costs	<b>Indirect Rate:</b>	<b>9%</b>	96,492
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<b>TOTAL INDIRECT COSTS:</b>	<b>96,492</b>
<b>TOTAL EXPENSES:</b>	<b>1,168,630</b>



UCSF - Alliance Health Project  
HIV Outpatient Mental Health Services  
W 86 Pop Up Clinic

Appendix B-4a, Page 1  
03/01/20 - 02/28/21  
RWPA - ETHE

Fund Notice Date: 7/16/20

UOS COST ALLOCATION BY SERVICE MODE

		SERVICE MODES				
Personnel Expenses		Substance Counseling/ Case Mgmt Hours		Psychiatry Encounters		Contract Totals
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	
Psychiatrist/Medical Director	0.30			59,190	100%	59,190
Supervisor - Clinical Social Worker	0.23	21,251	100%			21,251
Clinical Social Worker	0.50	28,459	100%			28,459
<b>Total FTE &amp; Total Salaries</b>	<b>1.03</b>	<b>49,710</b>	<b>46%</b>	<b>59,190</b>	<b>54%</b>	<b>108,900</b>
Fringe Benefits	38.0%	18,890	46%	22,492	54%	41,382
<b>Total Personnel Expenses</b>		<b>68,600</b>	<b>46%</b>	<b>81,682</b>	<b>54%</b>	<b>150,282</b>
<b>Operating Expenses</b>						
		<b>Expense</b>	<b>%</b>	<b>Expense</b>	<b>%</b>	<b>Contract Total</b>
Total Occupancy		6,498	75%	2,166	25%	8,664
Total Materials and Supplies		2,037	75%	679	25%	2,716
Total General Operating		983	75%	328	25%	1,310
Other: Data Network Recharge, CCDSS, GAEL		1,625	75%	542	25%	2,166
<b>Total Operating Expenses</b>		<b>11,142</b>	<b>75%</b>	<b>3,714</b>	<b>25%</b>	<b>14,856</b>
<b>Total Direct Expenses</b>		79,742	46%	85,396	54%	165,138
<b>Indirect Expenses</b>	9%	6,837	46%	8,026	54%	14,862
<b>TOTAL EXPENSES</b>		<b>86,579</b>	<b>48%</b>	<b>93,422</b>	<b>52%</b>	<b>180,000</b>
<b>UOS per Service Mode</b>						
		874		250		1,124
<b>Cost Per UOS by Service Mode</b>		\$99.00		\$374.00		N/A
<b>UDC per Service Mode</b>		34		34		34

**BUDGET JUSTIFICATION****1a) SALARIES**

Staff Position	<b>Psychiatrist/Medical Director</b>				
Brief Job Duties:	psychiatric evaluation, consultation, medication evaluation & pt management svcs, pt crisis intervention/triage svcs as required; clinical supervision, oversees medical policies/procedures at clinic.				
Min Quals:	CA licensed psychiatrist and 5 yrs clinical experience in an HIV mental health environment.				
	Annual Salary:	x FTE:	x Months per Year:	Annualized if < 12 mos	<b>Total</b>
	\$197,300.00	0.30	12	1	<b>\$ 59,190</b>
Staff Position	<b>Clinical Social Worker-Lead</b>				
Brief Job Duties:	oversight of prog clinical activities; clinical spvsn of clinical staff; reviews protocols, assures appropriate staffing; generates programmatic contract compliance functions; liaison with CBO as needed; participation or coordination of staff in ISM case conference.				
Min Quals:	Masters in social work, psychology or other related area. Licensed MFCC/LCSW as well as exp with diverse populations; proven crisis intervention exp; 5 yrs exp working with HIV/AIDS clients				
	\$92,394.00	0.23	12	1	<b>\$ 21,251</b>
Staff Position	<b>Clinical Social Worker</b>				
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.				
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients				
	\$56,918.00	0.50	12	1	<b>\$ 28,459</b>
	<b>Total FTE:</b>	<b>1.03</b>		<b>Total Salaries:</b>	<b>\$ 108,900</b>

<b>1b) EMPLOYEE FRINGE BENEFITS:</b>	<b>Component</b>	<b>Cost</b>
	Social Security	\$ 2,483
	Retirement	\$ 11,587
	Medical	\$ 15,870
	Dental	\$ 1,655
	Unemployment Insurance	\$ 83
	Disability Insurance	\$ 3,311
	Paid Time Off	\$ 6,394
	<b>Fringe Benefit</b>	<b>38%</b>
	<b>Total Fringe Benefit:</b>	<b>41,382</b>
	<b>TOTAL SALARIES &amp; EMPLOYEE FRINGE BENEFITS:</b>	<b>150,282</b>

**2) OPERATING EXPENSES:**

<b>Occupancy:</b>	<b>Brief Description</b>	<b>Rate</b>	<b>Cost</b>
Rent	Monthly expense for proportion of clinic space utilized by program	mos	8,112
Utilities	Monthly phone expenses for proportionate program utilization	\$44.62/mo x 1.03 FTE x 12 mos	552
	<b>Total Occupancy:</b>		<b>8,664</b>

**UCSF - Alliance Health Project**  
**HIV Outpatient Menal Health Services**  
**Pop-Up Clinic**

**Appendix B-4a, Page 3**  
**03/01/20 - 02/28/21**  
**Ryan White ETHE**

<b>Materials/Supplies</b>	<b>Brief Description</b>	<b>Rate</b>	<b>Cost</b>
Office Supplies & Postage	Pens, paper, medical chart supplies, client furniture, postage for client communication, proportionate to program utilization.	\$97.09/mo x 1.03 FTE x 12 mos	1,200
Computer Hardware & Software	Routine replacement of computers and peripherals for contract staff	\$122.65/mo x 1.03 FTE x 12 mos	1,516
<b>Total Materials &amp; Supplies:</b>			<b>2,716</b>

<b>General Operating</b>	<b>Brief Description</b>	<b>Rate</b>	<b>Cost</b>
Staff Training	Registration fees for work-related conferences and related exp to train career staff to stay current in knowledge and skills	\$1,099 per training x 1.03 FTE	1,132
Rental of Equipment	photocopiers, network printers and scanners.	\$14.45/mo x 1.03 FTE x 12 mos	179
<b>Total General Operating:</b>			<b>1,310</b>

<b>Other</b>	<b>Brief Description</b>	<b>Rate</b>	<b>Cost</b>
Data Network Recha	Use of the UCSF data network	\$44/FTE x 1.03 FTE x 12 mos	544
CCDSS:	Computing and Communication Device Support Services IT Desktop support services (Basic Support level)	\$59/FTE x 1.03 FTE x 12 mos	729
GAEL:	General Automobile and Employee Liability Charges Liability insurance charges associated with payroll	\$.82/\$100 of payroll x 1.03 FTE x 12 mos	893
<b>Total Other:</b>			<b>2,166</b>

<b>TOTAL OPERATING EXPENSES:</b>	<b>14,856</b>
<b>TOTAL DIRECT COSTS:</b>	<b>165,138</b>

**4) INDIRECT COSTS**      Indirect Rate:      **9%**

9% on Total Direct Costs	<b>TOTAL INDIRECT COSTS:</b>	<b>14,862</b>
<b>TOTAL EXPENSES:</b>		<b>180,000</b>

UCSF - Alliance Health Project  
HIV Outpatient Mental Health Services  
W 86 Pop Up Clinic

Appendix B-4b, Page 1  
03/01/21 - 02/28/22  
RWPA - ETHE

Fund Notice Date: 7/16/20

UOS COST ALLOCATION BY SERVICE MODE

		SERVICE MODES				
Personnel Expenses		Substance Counseling/ Case Mgmt Hours		Psychiatry Encounters		Contract Totals
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	
Psychiatrist/Medical Director	0.30			60,966	100%	60,966
Supervisor - Clinical Social Worker	0.22	20,936	100%			20,936
Clinical Social Worker	0.50	29,313	100%			29,313
<b>Total FTE &amp; Total Salaries</b>	<b>1.02</b>	<b>50,249</b>	<b>45%</b>	<b>60,966</b>	<b>55%</b>	<b>111,215</b>
Fringe Benefits	38.0%	19,095	45%	23,167	55%	42,262
<b>Total Personnel Expenses</b>		<b>69,344</b>	<b>45%</b>	<b>84,133</b>	<b>55%</b>	<b>153,477</b>
<b>Operating Expenses</b>						
		<b>Expense</b>	<b>%</b>	<b>Expense</b>	<b>%</b>	<b>Contract Total</b>
Total Occupancy		7,619	88%	1,039	12%	8,658
Total Materials and Supplies		399	88%	54	12%	453
Total General Operating		332	88%	45	12%	377
Other: Data Network Recharge, CCDSS, GAEL		1,912	88%	261	12%	2,173
<b>Total Operating Expenses</b>		<b>10,261</b>	<b>88%</b>	<b>1,399</b>	<b>12%</b>	<b>11,661</b>
<b>Total Direct Expenses</b>		79,605	46%	85,532	54%	165,138
<b>Indirect Expenses</b>	9%	6,837	46%	8,026	54%	14,862
<b>TOTAL EXPENSES</b>		<b>86,442</b>	<b>48%</b>	<b>93,558</b>	<b>52%</b>	<b>180,000</b>
<b>UOS per Service Mode</b>		874		250		1,124
<b>Cost Per UOS by Service Mode</b>		\$99.00		\$374.00		N/A
<b>UDC per Service Mode</b>		34		34		34

**BUDGET JUSTIFICATION**

**1a) SALARIES**

Staff Position	<b>Psychiatrist/Medical Director</b>				
Brief Job Duties:	psychiatric evaluation, consultation, medication evaluation & pt management svcs, pt crisis intervention/triage svcs as required; clinical supervision, oversees medical policies/procedures at clinic.				
Min Quals:	CA licensed psychiatrist and 5 yrs clinical experience in an HIV mental health environment.				
	Annual Salary:	x FTE:	x Months per Year:	Annualized if < 12 mos	<b>Total</b>
	\$203,219.00	0.30	12	1	<b>\$ 60,966</b>
Staff Position	<b>Clinical Social Worker-Lead</b>				
Brief Job Duties:	oversight of prog clinical activities; clinical spvsn of clinical staff; reviews protocols, assures appropriate staffing; generates programmatic contract compliance functions; liaison with CBO as needed; participation or coordination of staff in ISM case conference.				
Min Quals:	Masters in social work, psychology or other related area. Licensed MFCC/LCSW as well as exp with diverse populations; proven crisis intervention exp; 5 yrs exp working with HIV/AIDS clients				
	\$95,165.82	0.22	12	1	<b>\$ 20,936</b>
Staff Position	<b>Clinical Social Worker</b>				
Brief Job Duties:	mental health/substance abuse assessments of clients; consultation to providers on the assessment/management of clients; back-up to intake team at Svcs Center as needed.				
Min Quals:	Masters in social work, psychology or other related area; 3 yrs clinical counseling exp. Preferred: licensed LMFT/LCSW & exp with diverse populations; 1 yr exp working with HIV/AIDS clients				
	\$58,625.54	0.50	12	1	<b>\$ 29,313</b>
	<b>Total FTE:</b>	<b>1.02</b>		<b>Total Salaries:</b>	<b>\$ 111,215</b>

<b>1b) EMPLOYEE FRINGE BENEFITS:</b>	<b>Component</b>	<b>Cost</b>
	Social Security	\$ 2,536
	Retirement	\$ 11,833
	Medical	\$ 16,207
	Dental	\$ 1,690
	Unemployment Insurance	\$ 85
	Disability Insurance	\$ 3,381
	Paid Time Off	\$ 6,529
	<b>Fringe Benefit</b>	<b>38%</b>
	<b>Total Fringe Benefit:</b>	<b>42,262</b>
	<b>TOTAL SALARIES &amp; EMPLOYEE FRINGE BENEFITS:</b>	<b>153,477</b>

**2) OPERATING EXPENSES:**

<b>Occupancy:</b>	<b>Brief Description</b>	<b>Rate</b>	<b>Cost</b>
Rent	Monthly expense for proportion of clinic space utilized by program	mos	8,112
Utilities	Monthly phone expenses for proportionate program utilization	\$44.62/mo x 1.02 FTE x 12 mos	546
	<b>Total Occupancy:</b>		<b>8,658</b>

**UCSF - Alliance Health Project**  
**HIV Outpatient Menal Health Services**  
**Pop-Up Clinic**

**Appendix B-4b, Page 3**  
**03/01/21 - 02/28/22**  
**Ryan White ETHE**

<b>Materials/Supplies</b>	<b>Brief Description</b>	<b>Rate</b>	<b>Cost</b>
Office Supplies & Postage	Pens, paper, medical chart supplies, client furniture, postage for client communication, proportionate to program utilization.	\$16.34/mo x 1.02 FTE x 12 mos	200
Computer Hardware & Software	Routine replacement of computers and peripherals for contract staff	\$20.67/mo x 1.02 FTE x 12 mos	253
<b>Total Materials &amp; Supplies:</b>			<b>453</b>

<b>General Operating</b>	<b>Brief Description</b>	<b>Rate</b>	<b>Cost</b>
Staff Training	Registration fees for work-related conferences and related expense to train career staff to stay current in knowledge and skills	\$196.08 per training x 1.02 FTE	200
Rental of Equipment	photocopiers, network printers and scanners.	\$14.45/mo x 1.02 FTE x 12 mos	177
<b>Total General Operating:</b>			<b>377</b>

<b>Other</b>	<b>Brief Description</b>	<b>Rate</b>	<b>Cost</b>
Data Network Recha	Use of the UCSF data network	\$44/FTE x 1.02 FTE x 12 mos	539
CCDSS:	Computing and Communication Device Support Services IT Desktop support services (Basic Support level)	\$59/FTE x 1.02 FTE x 12 mos	722
GAEL:	General Automobile and Employee Liability Charges Liability insurance charges associated with payroll	\$.82/\$100 of payroll x 1.02 FTE x 12 mos	912
<b>Total Other:</b>			<b>2,173</b>

<b>TOTAL OPERATING EXPENSES:</b>	<b>11,661</b>
<b>TOTAL DIRECT COSTS:</b>	<b>165,138</b>

<b>4) INDIRECT COSTS</b>	<b>Indirect Rate:</b>	<b>9%</b>
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9% on Total Direct Costs	<b>TOTAL INDIRECT COSTS:</b>	<b>14,862</b>
<b>TOTAL EXPENSES:</b>		<b>180,000</b>

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

APPENDIX F-1c  
7/01/20-6/30/21  
PAGE A

**Contractor: Regents UCSF AHP**  
**Address: UCSF AHP MCB Box 0884**  
**SF, CA 94143**

**Contract ID #**  
1000008646

**Invoice Number**  
A-1JUL21

**Contract Purchase Order No:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_



**Funding Source:** General Fund

**Grant Code/Detail:** \_\_\_\_\_

**Program Name: HIV OPMH**

**Project Code/Detail:** \_\_\_\_\_

**ACE Control #:** \_\_\_\_\_

**Invoice Period:** 07/1/21 - 07/31/21

**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
Crisis Intervention Hours	480	30							480	30
Substance Counseling CM Hours	398	25							398	25
Psych Encounters	531	33							531	33
Mental Health Svcs Hours	5,060	314							5,060	314

	UDC	UDC	UDC	UDC	UDC
Unduplicated Clients for Appendix	402				402

**EXPENDITURES**

	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$597,287				\$597,287.00
Fringe Benefits	\$238,915				\$238,915.00
<b>Total Personnel Expenses</b>	<b>\$836,202</b>				<b>\$836,202.00</b>
<b>Operating Expenses:</b>					
<b>Occupancy</b> -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$87,725				\$87,725.00
<b>Materials and Supplies</b> -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$32,296				\$32,296.00
<b>General Operating</b> -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$5,263				\$5,263.00
<b>Staff Travel</b> - (e.g., Local & Out of Town)					
<b>Consultant/Subcontractor</b> see budget justification	\$7,840				\$7,840.00
<b>Other</b> - Network recharge	\$12,387				\$12,387.00
<b>Total Operating Expenses</b>	<b>\$145,511</b>				<b>\$145,511.00</b>
<b>Capital Expenditures</b>					
<b>TOTAL DIRECT EXPENSES</b>	<b>\$981,713</b>				<b>\$981,713.00</b>
Indirect Expenses	\$88,354				\$88,354.00
<b>TOTAL EXPENSES</b>	<b>\$1,070,067</b>				<b>\$1,070,067.00</b>
<b>LESS: Initial Payment Recovery</b>					
<b>Other Adjustments</b> (Enter as negative, if appropriate)					
<b>REIMBURSEMENT</b>					

NOTES: \_\_\_\_\_

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 423 San Francisco, CA 94103	By: _____	Date: _____
<b>Attn: Contract Payments</b>		(DPH Authorized Signatory)	100008646





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

APPENDIX F-1c  
7/01/20-6/30/21  
PAGE B

<p><b>Contractor: Regents UCSF AHP</b> <b>Address: UCSF AHP MCB Box 0884</b> <b>SF, CA 94143</b></p> <p>Telephone: _____ Fax: _____</p> <p>Program Name: <b>HIV OPMH</b></p> <p>ACE Control #: _____</p>	<p align="right"><b>Invoice Number</b> A-1JUL21</p> <p>Contract Purchase Order No: _____</p> <p>Fund Source: <b>General Fund</b></p> <p>Grant Code/Detail: _____</p> <p>Project Code/Detail: _____</p> <p>Invoice Period: <b>07/1/21 - 07/31/21</b></p> <p>FINAL Invoice <input type="checkbox"/> (check if Yes)</p>
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**DETAIL PERSONNEL EXPENDITURES**

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Program Director	0.25	\$43,117				\$43,117.00
Psych / Med Director	0.10	\$18,960				\$18,960.00
Psychiatrist	0.09	\$17,137				\$17,137.00
Psychiatrist Intern (PGY4)	0.17	\$12,165				\$12,165.00
Psychiatrist Intern (PGY3)	0.05	\$3,321				\$3,321.00
Psychiatrist Intern (PGY2)	0.05	\$3,198				\$3,198.00
Nurse Practitioner	0.15	\$28,440				\$28,440.00
Registered Nurse	0.34	\$56,336				\$56,336.00
Psychologist	0.29	\$26,998				\$26,998.00
Psychologist	0.28	\$34,678				\$34,678.00
Psychologist	0.15	\$13,881				\$13,881.00
Supervisor - Clinical Social Worker	0.15	\$14,789				\$14,789.00
Clinical Social Worker Lead	0.23	\$26,721				\$26,721.00
Clinical Social Worker	0.10	\$11,926				\$11,926.00
Clinical Social Worker	0.15	\$11,828				\$11,828.00
Clinical Social Worker	0.22	\$15,976				\$15,976.00
Clinical Social Worker	0.25	\$18,802				\$18,802.00
Clinical Social Worker	0.34	\$25,929				\$25,929.00
Clinical Social Worker	0.56	\$41,179				\$41,179.00
Clinical Social Worker	0.34	\$30,366				\$30,366.00
Clinical Social Worker	0.10	\$9,591				\$9,591.00
Clinical Social Worker	0.15	\$11,861				\$11,861.00
Social Work Associate	0.10	\$10,600				\$10,600.00
Receptionist	0.10	\$6,180				\$6,180.00
Receptionist	0.10	\$4,765				\$4,765.00
Receptionist-Lead	0.10	\$4,765				\$4,765.00
Program Coordinator	0.32	\$17,542				\$17,542.00
Program Coordinator	0.35	\$28,565				\$28,565.00
Administrator 2	0.20	\$15,803				\$15,803.00
Research Administrator 2	0.15	\$11,956				\$11,956.00
Program Manager	0.10	\$14,469				\$14,469.00
Quality Manager	0.05	\$5,443				\$5,443.00
<b>TOTAL SALARIES</b>	<b>6.08</b>	<b>\$597,287</b>				<b>\$597,287.00</b>

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-3c  
3/01/21-2/28/22  
PAGE A

**Contractor: Regents UCSF AHP**  
**Address: UCSF AHP MCB Box 0884**  
**SF, CA 94143**

**Contract ID #**  
1000008646

**Invoice Number**  
A-1MAR21

**Contract Purchase Order No:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_



**Funding Source:** RWPA

**Grant Code/Detail:** \_\_\_\_\_

**Program Name: HIV OPMH**

**Project Code/Detail:** \_\_\_\_\_

**ACE Control #:** \_\_\_\_\_

**Invoice Period:** 03/1/21 - 03/31/21

**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
Crisis Intervention Hours	526	47							526	47
Substance Counseling CM Hours	435	39							435	39
Psych Encounters	580	52							580	52
Mental Health Svcs Hours	5,527	492							5,527	492

	UDC	UDC	UDC	UDC	UDC
<b>Unduplicated Clients for Appendix</b>	629				629

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$689,008				\$689,008.00
Fringe Benefits	\$254,933				\$254,933.00
<b>Total Personnel Expenses</b>	<b>\$943,941</b>				<b>\$943,941.00</b>
<b>Operating Expenses:</b>					
<b>Occupancy</b> -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$95,392				\$95,392.00
<b>Materials and Supplies</b> -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$15,356				\$15,356.00
<b>General Operating</b> -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$3,253				\$3,253.00
<b>Staff Travel</b> - (e.g., Local & Out of Town)					
<b>Consultant/Subcontractor</b>					
<b>Other</b> - Network recharge	\$14,196				\$14,196.00
<b>Total Operating Expenses</b>	<b>\$128,197</b>				<b>\$128,197.00</b>
<b>Capital Expenditures</b>					
<b>TOTAL DIRECT EXPENSES</b>	<b>\$1,072,138</b>				<b>\$1,072,138.00</b>
Indirect Expenses	\$96,492				\$96,492.00
<b>TOTAL EXPENSES</b>	<b>\$1,168,630</b>				<b>\$1,168,630.00</b>
<b>LESS: Initial Payment Recovery</b>					
<b>Other Adjustments</b> (Enter as negative, if appropriate)					
<b>REIMBURSEMENT</b>					

NOTES:

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 423 San Francisco, CA 94103	By: _____	Date: _____
<b>Attn: Contract Payments</b>		(DPH Authorized Signatory)	1000008646



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

APPENDIX F-3c  
3/01/21-2/28/22  
PAGE B

<b>Contractor: Regents UCSF AHP</b>	<b>Invoice Number</b> A-1MAR21
<b>Address: UCSF AHP MCB Box 0884 SF, CA 94143</b>	<b>Contract Purchase Order No:</b> _____
<b>Telephone:</b>	<b>Fund Source:</b> RWPA
<b>Fax:</b>	<b>Grant Code/Detail:</b> _____
<b>Program Name: HIV OPMH</b>	<b>Project Code/Detail:</b> _____
<b>ACE Control #:</b> _____	<b>Invoice Period:</b> 03/1/21 - 03/31/21
	<b>FINAL Invoice</b> <input type="checkbox"/> (check if Yes)

**DETAIL PERSONNEL EXPENDITURES**

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Program Director	0.20	\$34,494				\$34,494.00
Psych / Med Director	0.25	\$47,400				\$47,400.00
Psychiatrist	0.17	\$32,232				\$32,232.00
Psychiatrist Intern (PGY4)	0.10	\$7,156				\$7,156.00
Psychiatrist Intern (PGY3)	0.10	\$6,642				\$6,642.00
Psychiatrist Intern (PGY2)	0.05	\$3,198				\$3,198.00
Nurse Practitioner	0.10	\$18,960				\$18,960.00
Registered Nurse	0.35	\$58,683				\$58,683.00
Psychologist	0.30	\$28,320				\$28,320.00
Psychologist	0.38	\$46,564				\$46,564.00
Psychologist	0.28	\$27,409				\$27,409.00
Supervisor - Clinical Social Worker	0.33	\$39,310				\$39,310.00
Clinical Social Worker	0.40	\$31,541				\$31,541.00
Clinical Social Worker	0.13	\$9,119				\$9,119.00
Clinical Social Worker	0.40	\$29,844				\$29,844.00
Clinical Social Worker	0.40	\$30,868				\$30,868.00
Clinical Social Worker	0.40	\$29,257				\$29,257.00
Clinical Social Worker	0.40	\$36,150				\$36,150.00
Clinical Social Worker	0.40	\$38,365				\$38,365.00
Clinical Social Worker	0.40	\$42,398				\$42,398.00
Receptionist	0.30	\$14,294				\$14,294.00
Receptionist	0.30	\$14,294				\$14,294.00
Resectionist Lead	0.25	\$13,791				\$13,791.00
Program Coordinator	0.30	\$24,839				\$24,839.00
Program Analyst	0.05	\$3,951				\$3,951.00
Administrator 2	0.05	\$3,985				\$3,985.00
Program Manager	0.05	\$7,235				\$7,235.00
Quality Manager	0.08	\$8,709				\$8,709.00
<b>TOTAL SALARIES</b>	<b>6.92</b>	<b>\$689,008</b>				<b>\$689,008.00</b>

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

Certified By: \_\_\_\_\_ Date: \_\_\_\_\_  
Title: \_\_\_\_\_



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

APPENDIX F-4a  
3/01/20-2/28/21  
PAGE A

<b>Contractor: Regents UCSF AHP</b> <b>Address: UCSF AHP MCB Box 0884</b> <b>SF, CA 94143</b>	<b>Contract ID #</b> 1000008646	<b>Invoice Number</b> A-1MAR20	<b>Contract Purchase Order No:</b> _____
<b>Telephone:</b> _____ <b>Fax:</b> _____	<div style="border: 1px solid black; padding: 5px; width: 50px; margin: 0 auto;"> <b>HHS</b> </div>	<b>Funding Source:</b> RWPA ETHE	<b>Department ID-Authority ID:</b> _____
<b>Program Name: HIV OPMH</b>		<b>Project ID-Activity ID:</b> _____	
<b>ACE Control #:</b> _____	<b>Invoice Period:</b> 03/1/20 - 03/31/20	<b>FINAL Invoice</b> <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
Custance Counseling CM Hours	874	34							874	34
Psychiatry Encounters	250	34							250	34

	UDC	UDC	UDC	UDC	UDC
<b>Unduplicated Clients for Appendix</b>					

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$108,900				\$108,900.00
Fringe Benefits	\$41,382				\$41,382.00
<b>Total Personnel Expenses</b>	<b>\$150,282</b>				<b>\$150,282.00</b>
Operating Expenses:					
<b>Occupancy</b> -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$8,664				\$8,664.00
<b>Materials and Supplies</b> -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$2,716				\$2,716.00
<b>General Operating</b> -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$1,310				\$1,310.00
<b>Staff Travel</b> - (e.g., Local & Out of Town)					
<b>Consultant/Subcontractor</b>					
<b>Other - See Justification</b>	\$2,166				\$2,166.00
<b>Total Operating Expenses</b>	<b>\$14,856</b>				<b>\$14,856.00</b>
<b>Capital Expenditures</b>					
<b>TOTAL DIRECT EXPENSES</b>	<b>\$165,138</b>				<b>\$165,138.00</b>
Indirect Expenses	\$14,862				\$14,862.00
<b>TOTAL EXPENSES</b>	<b>\$180,000</b>				<b>\$180,000.00</b>
<b>LESS: Initial Payment Recovery</b>					
<b>Other Adjustments</b> (Enter as negative, if appropriate)					
<b>REIMBURSEMENT</b>					

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

APPENDIX F-4a  
3/01/20-2/28/21  
PAGE B

**Contractor: Regents UCSF AHP**  
**Address: UCSF AHP MCB Box 0884**  
**SF, CA 94143**

**Telephone:**  
**Fax:**

**Program Name: HIV OPMH**

**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**

<b>PERSONNEL</b>	<b>FTE</b>	<b>BUDGETED SALARY</b>	<b>EXPENSES THIS PERIOD</b>	<b>EXPENSES TO DATE</b>	<b>% OF BUDGET</b>	<b>REMAINING BALANCE</b>
Psychiatrist Med Director	0.30	\$59,190				\$59,190.00
Supervisor CSW	0.23	\$21,251				\$21,251.00
Clinical Social Worker	0.50	\$28,459				\$28,459.00
<b>TOTAL SALARIES</b>	<b>1.03</b>	<b>\$108,900</b>				<b>\$108,900.00</b>

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

Certified By: \_\_\_\_\_ Date: \_\_\_\_\_  
Title: \_\_\_\_\_



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

APPENDIX F-4b  
3/01/21-2/28/22  
PAGE A

<b>Contractor: Regents UCSF AHP</b> <b>Address: UCSF AHP MCB Box 0884</b> <b>SF, CA 94143</b>	<b>Contract ID #</b> 1000008646	<b>Invoice Number</b> A-1MAR21	<b>Contract Purchase Order No:</b>
<b>Telephone:</b> <b>Fax:</b>	HHS	<b>Funding Source:</b> RWPA ETHE	<b>Department ID-Authority ID:</b>
<b>Program Name: HIV OPMH</b>  <b>ACE Control #:</b>		<b>Project ID-Activity ID:</b>	<b>Invoice Period:</b> 03/1/21 - 03/31/21
		<b>FINAL Invoice</b> <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
Custance Counseling CM Hours	874	34							874	34
Psychiatry Encounters	250	34							250	34

	UDC	UDC	UDC	UDC	UDC
<b>Unduplicated Clients for Appendix</b>					

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$111,215				\$111,215.00
Fringe Benefits	\$42,262				\$42,262.00
<b>Total Personnel Expenses</b>	<b>\$153,477</b>				<b>\$153,477.00</b>
Operating Expenses:					
<b>Occupancy</b> -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$8,658				\$8,658.00
<b>Materials and Supplies</b> -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$453				\$453.00
<b>General Operating</b> -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$377				\$377.00
<b>Staff Travel</b> - (e.g., Local & Out of Town)					
<b>Consultant/Subcontractor</b>					
<b>Other - See Justification</b>	\$2,173				\$2,173.00
<b>Total Operating Expenses</b>	<b>\$11,661</b>				<b>\$11,661.00</b>
<b>Capital Expenditures</b>					
<b>TOTAL DIRECT EXPENSES</b>	<b>\$165,138</b>				<b>\$165,138.00</b>
Indirect Expenses	\$14,862				\$14,862.00
<b>TOTAL EXPENSES</b>	<b>\$180,000</b>				<b>\$180,000.00</b>
<b>LESS: Initial Payment Recovery</b>					
<b>Other Adjustments</b> (Enter as negative, if appropriate)					
<b>REIMBURSEMENT</b>					

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

APPENDIX F-4b  
3/01/21-2/28/22  
PAGE B

<b>Contractor: Regents UCSF AHP</b>	<b>Invoice Number</b> A-1MAR21
<b>Address: UCSF AHP MCB Box 0884 SF, CA 94143</b>	<b>Contract Purchase Order No:</b> _____
<b>Telephone:</b>	<b>Fund Source:</b> RWPA ETHE
<b>Fax:</b>	<b>Department ID-Authority ID:</b> _____
<b>Program Name: HIV OPMH</b>	<b>Project ID-Activity ID:</b> _____
<b>ACE Control #:</b> _____	<b>Invoice Period:</b> 03/1/21 - 03/31/21
	<b>FINAL Invoice</b> <input type="checkbox"/> (check if Yes)

**DETAIL PERSONNEL EXPENDITURES**

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Psychiatrist Med Director	0.30	\$60,966				\$60,966.00
Supervisor CSW	0.22	\$20,936				\$20,936.00
Clinical Social Worker	0.50	\$29,313				\$29,313.00
<b>TOTAL SALARIES</b>	<b>1.02</b>	<b>\$111,215</b>				<b>\$111,215.00</b>

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: \_\_\_\_\_