File No.
 221277
 Committee Item No.
 5
 Board Item No.

# **COMMITTEE/BOARD OF SUPERVISORS**

AGENDA PACKET CONTENTS LIST

Committee:	Budget and Finance Committee	Date	February 1, 2023
Board of Sup	pervisors Meeting	Date	

# **Cmte Board**

	Motion Resolution Ordinance Legislative Digest Budget and Legislative Analyst Report Youth Commission Report Introduction Form Department/Agency Cover Letter and/or Report MOU Grant Information Form Grant Budget Subcontract Budget Contract/Agreement Form 126 – Ethics Commission Award Letter Application Public Correspondence
OTHER	(Use back side if additional space is needed)
	FY23-24 NCC Progress ReportAgreements and Compliance Assurances 10/3/2022Staffing and SF HIV Health Services Organization ChartSF HIV Community Planning Council 9/28/2022RWHAP Part A Budget Summary FY23-24Maintenance of EffortNCC Progress Report - Submission ConfirmationPerformance NarrativeDPH Part A Waiver 9/8/2022DPH Part A HCPC Roster - 2022-23DPH Part A Planned Allocations Report - 2022-23DPH Letter 10/28/2022DPH Statement on Retroactivity 1/26/2023

Completed by:	Brent Jalipa	_Date_	January 26, 2023
Completed by:	Brent Jalipa	Date	

FILE NO. 221277

1	[Apply for Grant - Retroactive - Health Resources Services Administration - Ryan White Act HIV/AIDS Emergency Relief Grant Program - \$15,962,602]
2	
3	Resolution retroactively authorizing the Department of Public Health to submit an
4	application to continue to receive funding for the Ryan White Act HIV/AIDS Emergency
5	Relief Grant Program grant from the Health Resources Services Administration; and
6	requesting \$15,962,602 in HIV Emergency Relief Program funding for the San Francisco
7	Eligible Metropolitan Area for the period of March 1, 2023, through February 29, 2024.
8	
9	WHEREAS, San Francisco Administrative Code 10.170., requires Board review of
10	proposed annual or otherwise recurring grant applications of \$5,000,000 or more prior to their
11	submission; and
12	WHEREAS, San Francisco Department of Public Health (DPH) is currently a recipient
13	of the "Ryan White Act HIV/AIDS Emergency Relief Grant Program" grant in the amount of
14	approximately \$15,590,728 from the Health Resources Services Administration (HRSA) for
15	Fiscal Year 2022; and
16	WHEREAS, For this round of funding, SFDPH was instructed by HRSA to submit an
17	application request in the amount of \$15,962,602; and
18	WHEREAS, SFDPH uses these funds to cover a multitude of health services to HIV
19	positive persons residing in the three counties within the San Francisco Eligible Metropolitan
20	Areas; and
21	WHEREAS, Ordinance No. 265-05 requires that City Departments submit applications
22	for approval at least 60 days prior to the grant deadline for review and approval; and
23	WHEREAS, HRSA released the application guidance on August 26, 2022, with a due
24	date of October 3, 2022 allowing 38 business days for the entire process; and
25	

1	WHEREAS, In the interest of timeliness, SFDPH is making this request for approval by
2	submitting its most recent draft of the grant application, also including supporting documents
3	as required, all of which are on file with the Clerk of the Board of Supervisors in File
4	No. 221277, which is hereby declared to be part of the Resolution as if set forth fully herein;
5	now, therefore, be it
6	RESOLVED, That the Board of Supervisors hereby retroactively approves SFDPH's
7	application submission to HRSA for the "Ryan White Act HIV/AIDS Emergency Relief Grant
8	Program (Ryan White Programs, Part A)" grant for the funding period of March 1, 2023,
9	through February 29, 2024, submitted October 3, 2022.
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1	RECOMMENDED:
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5	Dr. Grant Colfax
6	Director of Health
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#### San Francisco, California EMA

#### Fiscal Year (FY) 2023 Non-Competing Continuation (NCC) Progress Report for the Ryan White HIV/AIDS Program (RWHAP) Part A HIV Emergency Relief Grant Program

#### Proposed Ryan White 2023-2024 Fiscal Year Medical / Support Services Percentages

For the FY 2023-2024 Ryan White Part A fiscal year, the SF Eligible Metropolitan Area anticipates the following funding percentages for core medical versus support services, apart from Administrative and Continuous Quality Management activities:

**Core Medical Services: 60.49%** 

Support Services: 39.51%

# Appendix A

# FY 2023 AGREEMENTS AND COMPLIANCE ASSURANCES Ryan White HIV/AIDS Program Part A HIV Emergency Relief Grant Program

I, the Chief Elected Official of the Eligible Metropolitan Area or Transitional Grant Area Greg Wagner \_\_\_\_\_\_, (hereinafter referred to as the EMA/TGA) assure that:

#### Pursuant to Section $2602(a)(2)^{2,3}$

The EMA/TGA will establish a mechanism to allocate funds and a Planning Council that comports with section 2602(b).

#### Pursuant to Section 2602(a)(2)(B)

The EMA/TGA has entered into intergovernmental agreements with the Chief Elected Officials of the political subdivisions in the EMA/TGA that provide HIV-related health services and for which the number of AIDS cases in the last 5 years constitutes not less than 10 percent of the cases reported for the EMA/TGA.

#### Pursuant to Section 2602(b)(4)

The EMA/TGA Planning Council will determine the size and demographics of the population of people with HIV, as well as the size and demographics of the estimated population of people with HIV who are unaware of their HIV status; determine the needs of such population, and develop a comprehensive plan for the organization and delivery of health and support services. The plan must include a strategy with discrete goals, a timetable, and appropriate funding, for identifying people with HIV who do not know their HIV status, making such individuals aware of their HIV status, and enabling such individuals to use the health and support services. The strategy should particularly address disparities in access and services among affected subpopulations and historically underserved communities.

#### Pursuant to Section 2603(c)

The EMA/TGA will comply with statutory requirements regarding the timeframe for obligation and expenditure of funds, and will comply with any cancellation of unobligated funds.

<sup>&</sup>lt;sup>2</sup> All statutory references are to the Public Health Service Act, unless otherwise specified.

<sup>&</sup>lt;sup>3</sup> TGAs are exempted from the requirement related to Planning Councils, but must provide a process for obtaining community input as described in **section 2609(d)(1)(A)** of the PHS Act. TGAs that have currently operating Planning Councils are strongly encouraged to maintain that structure.

FY 2023 RWHAP Part A Non-Competing Continuation Instructions

#### **Pursuant to Section 2603(d)**

The EMA/TGA will make expenditures in compliance with priorities established by the Planning Council/Planning Body.

#### Pursuant to Section 2604(a)

The EMA/TGA will expend funds according to priorities established by the Planning Council/Planning Body, and for core medical services, support services, and administrative expenses only.

#### Pursuant to Section 2604(c)

The EMA/TGA will expend not less than 75 percent of service dollars for core medical services, unless waived by the Secretary.

#### Pursuant to Section 2604(f)

The EMA/TGA will, for each of such populations in the eligible area expend, from the grants made for the area under Section 2601(a) for a FY, not less than the percentage constituted by the ratio of the population involved (infants, children, youth, or women in such area) with HIV/AIDS to the general population in such area of people with HIV, unless a waiver from this provision is obtained.

#### Pursuant to Section 2604(g)

The EMA/TGA has complied with requirements regarding the Medicaid status of providers, unless waived by the Secretary.

#### Pursuant to Section 2604(h)(2), Section 2604(h)(3), Section 2604(h)(4)

The EMA/TGA will expend no more than 10 percent of the grant on administrative costs (including Planning Council or planning body expenses), and in accordance with the legislative definition of administrative activities, and the allocation of funds to subrecipients will not exceed an aggregate amount of 10 percent of such funds for administrative purposes.

#### Pursuant to Section 2604(h)(5)

The EMA/TGA will establish a CQM Program that meets HRSA requirements, and that funding for this program shall not exceed the lesser of five percent of program funds or \$3 million.

#### Pursuant to Section 2604(i)

The EMA/TGA will not use grant funds for construction or to make cash payments to recipients.

#### Pursuant to Section 2605(a)

With regard to the use of funds,

FY 2023 RWHAP Part A Non-Competing Continuation Instructions

- a. funds received under Part A of Title XXVI of the Act will be used to supplement, not supplant, state funds made available in the year for which the grant is awarded to provide HIV related services to individuals with HIV disease;
- b. during the period of performance, political subdivisions within the EMA/TGA will maintain at least their prior FY's level of expenditures for HIV related services for individuals with HIV disease;
- c. political subdivisions within the EMA/TGA will not use funds received under Part A in maintaining the level of expenditures for HIV related services as required in the above paragraph; and
- d. documentation of this MOE will be retained.

#### Pursuant to Section 2605(a)(3)

The EMA/TGA will maintain appropriate referral relationships with entities considered key points of access to the health care system for the purpose of facilitating EIS for individuals diagnosed with HIV infection.

#### Pursuant to Section 2605(a)(5)

The EMA/TGA will participate in an established HIV community based continuum of care, if such continuum exists within the EMA/TGA.

#### Pursuant to Section 2605(a)(6)

Part A funds will not be used to pay for any item or service that can reasonably be expected to be paid under any state compensation program, insurance policy, or any Federal or state health benefits program (except for programs related to the Indian Health Service) or by an entity that provides health services on a prepaid basis.

#### Pursuant to Section 2605(a)(7)(A)

Part A funded HIV primary medical care and support services will be provided, to the maximum extent possible, without regard to a) the ability of the individual to pay for such services or b) the current or past health conditions of the individuals to be served.

#### Pursuant to Section 2605(a)(7)(B)

Part A funded HIV primary medical care and support will be provided in settings that are accessible to low-income individuals with HIV disease.

#### Pursuant to Section 2605(a)(7)(C)

A program of outreach services will be provided to low-income individuals with HIV disease to inform them of the HIV primary medical care and support services.

#### Pursuant to Section 2605(a)(8)

The EMA/TGA has participated in the Statewide Coordinated Statement of Need (SCSN) process initiated by the state, and the services provided under the EMA/TGA comprehensive plan are consistent with the SCSN.

#### **Pursuant to Section 2605(a)(9)**

The EMA/TGA has procedures in place to ensure that services are provided by appropriate entities.

#### Pursuant to Section 2605(a)(10)

The EMA/TGA will submit audits every 2 years to the lead state agency under Part B of Title XXVI of the PHS Act.

#### **Pursuant to Section 2605(e)**

The EMA/TGA will comply with the statutory requirements regarding imposition of charges for services.

#### **Pursuant to Section 2681(d)**

Services funded will be integrated with other such services, programs will be coordinated with other available programs (including Medicaid), and that the continuity of care and prevention services of individuals with HIV is enhanced.

#### **Pursuant to Section 2684**

No funds shall be used to fund AIDS programs, or to develop materials, designed to directly promote or encourage intravenous drug use or sexual activity, whether homosexual or heterosexual.

Signature Cry Wagner

Date 10/3/2022 | 11:00:07 PDT

Position Title	FTE on Project	Name of Incumbent	Brief Summary of Position Responsibilities / Rationale						
Director of HIV Health Services	.40	William S. Blum	Charged with primary oversight for the administration of services and day-to- day operations of HIV Health Services and the Ryan White Part A grant.						
Director of Contractual Development & Technical Assistance	.22	Michelle Long	Charged with oversight of contract development, modifications, and renewals of all Ryan White Part A grant.						
Manager of Community- Based Organization Contracting	.50 Dean Goodwin guidance initia		Supervise two Contracts Office units that focus primarily on non-profit, community-based organizations. In addition to supervising these two units, this position serves as the point person for contractual planning and interactions with Community-Based Organization (CBO) provider agencies who require guidance initiating the contracting process, among other coordination, process improvement, and supervisor activities						
Health Program 1.00 Coordinator III		Francine Austin, Marshia Herring	Charged with contract development, programmatic oversight and monitoring Part A MAI programs.						
Health Program Coordinator III	.15	TBD	Serving as HIV Health Services Program Manager, the Health Program Coordinator III is responsible the review and approval of HIV Health Services, provides TA to agencies on contracting and HRSA requirements, liaisons with local Planning Council .05 GF, .80 RWPB						
Health Program Coordinator II	1.00	TBD	Manages the HHS QM training program which provides many QM/QI/ and capacity development related trainings annually for our RWPA funded providers. Researches and recruits trainers and consultants for the trainings. Develops contracts and monitors payment mechanism. Works with trainers to develop training materials and identifies training goals. Creates pre-test and post-test evaluations for attendees. Provides analysis of these trainings to HHS leadership and our local Planning Council. Creates, distributes and analyzes annual survey to HHS HIV System of Care on QM/QI/CD Training questions and topics of interest. <b>(1.00 RWPA CQM)</b>						

Position Title	FTE on Project	Name of Incumbent	Brief Summary of Position Responsibilities / Rationale						
Acting Assistant Director of HIV Health Services	.50	Beth Neary	Responsible for the overall oversight, planning, evaluation and quality management for HHS as the grantee for the San Francisco HIV System of Care in coordination with our Ryan White mandated HIV Community Planning Council. Leads HHS Internal CQI Committee and works directly with funded CBOs on CQI initiatives. Directs Health Care Analyst for Qualtiy Management on writing of HHS QM/QI Plan and all QM/QI presentations. Reviews program QI data with HHS Internal CQI Committee to suggest CQI activites for discussion at HHS CBO CQI bimonthly review meetings. Meets with system of care providers and SMEs with HHS Director to discuss future CQI needs/ interests. <b>(.50 RWPA CQM &amp; .50</b> <b>GF)</b>						
Epidemiologist III .33		TBD	Principal duties include reviewing data quality, conducting statistical analyses, interpreting findings, preparing manuscripts, and disseminating data findings and outcomes. Also supervises epidemiology, data entry, and data managemen staff.						
Health Care Analyst	.50	John Aynsley	Participates in HHS Internal CQI Committee and works directly with funded CBOs on CQI initiatives. Integrally involved in data oversight and importing functions related to services and ARIES reporting, Provides CQI analysis and presentations to local HIV Community Planning Council.						
Health Worker III	.50	Maria Lacayo	Serves as ARIES Manager to train users and provide oversight of quality and accuracy of ARIES data for HRSA reporting, including usage for HHS CQI purposes. Participates in HHS Internal CQI Committee and works directly with funded CBOs on CQI initiatives.						
Principal Administrative Analyst	.30	Nora Macias	Supervises Contracts Unit staff and assures contract development compliance to ensure timely payment of funded providers. Works with HIV Health Services to produce and assess RFPs.						
Sr. Administrative Analyst	.15	TBD	Processes HIV service contracts and ensures compliance with government regulations.						
Administrative Analyst	.20	William Gaitan	Processes HIV service contracts and ensures compliance with government regulations.						

## FY 2023 San Francisco, California Eligible Metropolitan Area Program Organizational Chart

Part A Grantee Agency: City & County of San Francisco Department of Public Health London Breed, Mayor Grant Colfax, MD, Director of Public Health

County of Marin Health & Human Services Benita McLarin, Director Jessica Regala Paran, Chief Operating Officer

Marin County HIV/AIDS Program Cicily Emerson, Division Director of Communicable Disease & Community Preparedness Part A Administrative Agency: Roland Pickens, Director of SF Health Network Claire Horton, MD, Chief Medical Officer, SF Health Network Hali Hammer, MD, Director of Ambulatory Care Bill Blum, Director, HIV Health Services

San Francisco HIV Community Planning Council & Steering Committee Irma Parada, David Gonzales, Mike Shriver Community Co-Chairs; Thomas Knoble & Vacant Government Co-Chairs



Continuous consumer input & participation through Planning Council Membership Committee and meeting attendance, town hall meetings, and consumer feedback mechanisms

San Mateo County Health Louise Rogers, Chief of Health Marc Meulman, Director of Public Health, Policy & Planning

San Francisco Board of

**Supervisors** 

San Mateo County STD/HIV Program Matt Geltmaker, Clinical Services Manager – Public Health

## San Francisco HIV Community Planning Council San Francisco Eligible Metropolitan Area San Francisco, San Mateo, and Marin Counties

David Gonzalez, *Co-Chair* Thomas Knoble, Co-Chair Irma Parada, *Co-Chair* Richard Sullivan, *Co-Chair* 

Chuck Adams Cesar Cadabes Ed Chitty Billie J. Cooper Zachary Davenport Pedro Felix Elaine Flores Matt Geltmaker Paul Harkin Ronaldo Hernandez R. Lee Jewell Juba Kalamka Chris Kent Nga Le T.J. Lee-Miyaki Helen Lin Derrick Mapp Ken Pearce Gwen Smith John Paul Soto Laura Thomas Manuel Vasquez

David Jordan Program Director

Mark Molnar *Planner* 

Kira Perez Angeles Program Manager September 28, 2022

Chrissy Abrahms-Woodland, MBA Director, Division of Metropolitan HIV/AIDS Programs Health Resources and Services Administration 5600 Fishers Lane Rockville, Maryland 20857

Dear Ms. Abrahms-Woodland:

As Co-Chairs of the San Francisco HIV Community Planning Council, and on behalf of the Planning Council as a whole, we are writing to provide assurance of the following procedural elements related to the FY 2023 Ryan White Part A noncompeting application being submitted to HRSA by the San Francisco Department of Public Health:

#### a) Planning:

i. The most recent comprehensive EMA-wide HIV needs assessment process for the San Francisco EMA was conducted in 2016, in conjunction with the development and production of our region's first Integrated HIV Prevention and Care Plan for the period 2017 - 2021. All members of the San Francisco HIV Community Planning Council participated in the process, and Council members are active on a wide range of additional local and regional planning bodies and groups. On an annual basis, the Planning Council commissions and conducts focused needs assessments related to specific subpopulations that are disproportionately impacted by the HIV epidemic in our region, such as homeless persons, transgender persons, and persons who use substances.

ii. The Planning Council continually leads and participates in ongoing, comprehensive HIV planning on behalf of the San Francisco EMA, and participates in the development of the California Statewide Coordinated Statement of Need (SCSN) when the process is conducted by the State of California.

# San Francisco HIV Community Planning Council San Francisco Eligible Metropolitan Area San Francisco, San Mateo, and Marin Counties

#### b) Priority Setting and Resource Allocation (PSRA):

i. A wide range of data sources - including data on HIV epidemiology, service utilization, unmet service needs, and disparities related to affected subpopulations - were used in the FY 2023 priority setting and allocation process, to ensure that: a) the needs of all populations with HIV were addressed (including those with unmet need for HIV-related services, disparities in access and services among affected populations and historically underserved communities, and those unaware of their HIV status), and b) resources were allocated in accordance with the local demographic incidence of HIV infection, including appropriate allocations for women, infants, children, and youth.

ii. Persons with HIV were actively involved in the Part A planning and allocation process, and their priorities are considered as part of the annual prioritization and allocation process.

iii. Formula, supplemental, and MAI funds awarded to the San Francisco EMA for the FY 2022 period of performance continue to be expended according to priorities established by the Planning Council.

iv. All RWHAP HIV core medical and support services were prioritized during the PSRA process per sections 2602(b)(4)(C) and 2602(d)(1) of the PHS Act

#### c) Training:

i. Ongoing and annual Planning Council member trainings over the past 18 months occurred on the following dates:

- Latinx Health Training April 2021
- Drug User Health Training May 2021
- Annual Quality Improvement Indicators Training June 2021 & June 2022
- Trans 101 & Gender Health in San Francisco Training July 2021
- Annual Legislative Mandate Training August 2021 & August 2022
- Annual Ryan White Service Categories Training September 2021 & September 2022
- Annual New Member Orientation February 2022
- Substance User Services Training April 2022

## San Francisco HIV Community Planning Council San Francisco Eligible Metropolitan Area San Francisco, San Mateo, and Marin Counties

#### d) Assessment of Administrative Mechanism:

i. The last Planning Council assessment of grant recipient activities was conducted in 2019, with results released in early 2020. A new assessment process began prior to the end of 2021, with results expected to be released before the end of 2022.

Thank you for your continuing support of the San Francisco region and its merged HIV Community Planning Council. We look forward to continuing our partnership to provide effective, comprehensive, and high-quality services to low-income and severely impacted persons living with HIV in our region.

Sincerely,

**M.O.J.** ard Sullivan (Sep 28, 2022 15:17 PDT)

Thomas Knoble

Richard Sullivan Irma Parada David Gonzalez Community Co-Chair Community Co-Chair Community Co-Chair Government Chair

Thomas Knoble

# FY 2023 Part A SF Planning Council Letter

**Final Audit Report** 

2022-09-28

Created:	2022-09-28
Greated.	2022-05-20
By:	Mark Molnar (mmolnar@shanti.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAoJrQ6Gceo6c4gPhv5wnNUsSgoxI2DNJI

# "FY 2023 Part A SF Planning Council Letter" History

1	Document created by Mark Molnar (mmolnar@shanti.org)
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- Document emailed to dgonzalez.cpg@gmail.com for signature 2022-09-28 - 8:41:24 PM GMT
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- Signer dgonzalez.cpg@gmail.com entered name at signing as David Gonzalez 2022-09-28 - 9:23:26 PM GMT- IP address: 35.199.168.37
- Document e-signed by David Gonzalez (dgonzalez.cpg@gmail.com) Signature Date: 2022-09-28 - 9:23:27 PM GMT - Time Source: server- IP address: 35.199.168.37
- Signer richardsullivan6734@gmail.com entered name at signing as Richard Sullivan 2022-09-28 - 10:17:33 PM GMT- IP address: 50.1.125.168
- Document e-signed by Richard Sullivan (richardsullivan6734@gmail.com) Signature Date: 2022-09-28 - 10:17:35 PM GMT - Time Source: server- IP address: 50.1.125.168

Agreement completed. 2022-09-28 - 10:17:35 PM GMT

RWHAP PART A BUDGET SUMMARY APPLICANT: SF EMA FISCAL YEAR: 23-24													
	Part AMinority AIDS Initiative (MAI)Total											Total	
Object Class Categories	et Class Categories Administration CQM HIV Services Administration CQM HIV Services												
a. Personnel	\$	445,932	\$	315,411			\$	58,768		\$	-	\$	820,110
b. Fringe Benefits	\$	178,373	\$	126,164	\$	-	\$	23,507		\$	-	\$	328,044
c. Travel	\$	1,944	\$	-	\$	-	\$	-		\$	-	\$	1,944
d. Equipment	\$	-	\$	-	\$	-	\$	-		\$	-	\$	-
e. Supplies	\$	7,995	\$	1,000	\$	-	\$	-		\$	-	\$	8,995
f. Contractual	\$	757,192	\$	84,397	\$	13,181,571	\$	-		\$	740,473	\$	14,763,633
g. Other	\$	31,436	\$	-	\$	-	\$	-		\$	-	\$	31,436
Direct Charges	\$	1,422,872	\$	526,971	\$	13,181,571	\$	82,275	\$	- \$	740,473	\$	15,954,162
Indirect Charges	\$	-	\$	8,440			\$	-				\$	8,440
TOTALS	\$	1,422,872	\$	535,411	\$	13,181,571	\$	82,275		\$	740,473	\$	15,962,602
Program Income												\$	-

FY2022 Funding Ceiling:	
Part A Funding	\$ 15,139,854
MAI Funding	\$ 822,748
Total:	\$15,962,602

Administrative Budget 10% Part A and MAI \_\_\_\_\_\_ Within Limit

CQM Budget 5% Part A and MAI Within Limit

			P	PART A ADMINISTRATIVE BUDGET		
				APPLICANT: SF EMA		
				FISCAL YEAR: 23-24		
S	alary			Personnel	1	
[Inse an	ert total nual	<b>FTE</b> [Insert as decimal]	Name, Position [Insert name, position title]	Budget Impact Justification [Description of duties, impact on program goals and outcomes, payment source for balance of FTE.]		Amount
sa	lary]	-	Michelle Long,	Charged with primary oversight of contract development, modifications, and renewals of	-	
\$	187,000	0.22	Director of CDTA	all Ryan White Part A grants78 FTE GF	\$	40,710
			Deer Coolain	Supervise two Contracts Office units that focus primarily on non-profit, community-based		
			Dean Goodwin, Manager of Community	organizations. In addition to supervising these two units, this position serves as the point person for contractual planning and interactions with Community-Based Organization		
			Based Organization	(CBO) provider agencies who require guidance initiating the contracting process, among		
\$	175,867	0.50	Contracting	other coordination, process improvement, and supervisor activities.	\$	87,934
¢	175.967	0.40	Bill Blum, Director of	Charged with primary oversight for the administration of services and day to day	¢	70.247
\$	175,867	0.40	HIV Health Services Marsha Herring.	operations of HIV Health Services and the Ryan White Part A grant60 FTE GF	\$	70,347
			Compliance Program	Provides oversight of contractor performance and compliance for Ryan White Part A		
\$	140,568	0.60	Manager.	grants40 GF	\$	84,341
				Serving as HIV Health Services Program Manager, the Health Program Coordinator III is		
				responsible the review and approval of HIV Health Services, provides TA to agencies on contracting and HRSA requirements, liaisons with local Planning Council .05 GF, .80		
\$	140,568	0.15	TBD, HPC III	RWPB	\$	21,085
				Principal duties include data quality, satistical analysis and interpretation of findings,		
\$	142,670	0.33	TBD, Epidemologist	manuscript preparation and dissemination of findings67 FTE GF	\$	47,081
			Nora Maciae Contracte	Supervises Contracts Unit staff and assures contract development compliance to ensure timely payment of funded providers. Works with HIV Health Services to produce and		
\$	163,445	0.30	Manager	assess RFPs70 FTE GF	\$	49,034
			TBD, Sr Contract	Processes contracts and assures compliance with local, state and federal regulations85		
\$	141,168	0.15	Analyst	FTE GF	\$	21,175
\$	121,130	0.20	William Gaitan, Contract Analyst	Processes contracts and assures compliance with local, state and federal regulations80 FTE GF	\$	24,226
Ŷ	121,100	0120	Contract Finalyst		\$	
				Personnel Total	\$	445,932
				Fringe Benefits		
Perc	entage			Components		Amount
[Inser	t as %]			ponents that comprise the fringe benefit rate.]		
		Insurance(Mee	,		\$	65,240
		Social Securit Retirement	У		\$ \$	34,114 53,512
		Workers Com	pensation		\$	6,689
	4.22%	Others (Disab	ility, Unemployment, Me	dicare, Life Insurance, and Supp. Ret.)	\$	18,818
				די ה פינה נ	\$ \$	178,373
				Fringe Benefit Total	φ	178,373
				Travel		
			1	Local	1	
Milea	nge Rate	Number of Miles	Name, Position of Traveler(s)	<b>Travel Expenses/Budget Impact Justification</b> [Lodging, parking, per diem, etc., and the impact of the travel on program objectives/goals.] Show breakdown of costs.		Amount
			various staff	To purchase monthly bus passes to travel to sites/meetings (\$81 bus pass/mo. x 2 staff x 12 mo)	\$	1,944
			l	Local Travel Sub-Total	\$	1,944
				Long Distance		-,- ••
	Type of	Travel	Name, Position of Traveler(s)	<b>Travel Expenses/Budget Impact Justification</b> [Lodging, parking, per diem, etc., and the impact of the travel on program		Amount
			ravelet(5)	objectives/goals.] Show breakdown of costs.		
				T Distance man 10.1 m ( 1	¢	
				Long Distance Travel Sub-Total Travel Total	Ф \$	- 1,944
				11avei 10tai	Ý	1,2 14

	P	PART A ADMINISTRATIVE BUDGET APPLICANT: SF EMA FISCAL YEAR: 23-24		
[Equipment is defined as a t		<b>Equipment</b> re and a useful life of 1 or more years. (If your agency uses a different definition, please defer to your agency's definition.)]		
List of Equi	ipment	Budget Impact Justification [Description of need to carry out the program's objectives/goals.] Show breakdown of costs.		Amount
		Equipment Total	\$	-
[Supplies is defined as prope		<b>Supplies</b> <i>x</i> \$5,000. <u>Note</u> : Items such as laptops, tablets, and desktop computers are classified as a if the value is under the \$5,000 threshold.]		
List of Su	pplies	<b>Budget Impact Justification</b> [Description of need to carry out the program's objectives/goals.]		Amount
General Office Supplies, Pen,	pencil, paper, binders,	125/mos X 5.33 FTE X 12 months	\$	7,993
		Supplies Total	\$	7,99
		Contractual		/
List of Contract	Deliverables	<b>Budget Impact Justification</b> [Description of how the contract impacts the program's objectives/goals and how the costs were estimated.] Show breakdown of costs.		Amount
Robert Whirry	Hours of grant writing and planning	Grant Writing/Consulting	\$	63,50
Shanti/ALRP	Hours of Planning Council and Consumer Advocacy Services	Planning Council Support + HIV Consumer Advocacy	\$	457,07
HR360	Hours of staff support	HHS Progam/Fiscal Admin	\$	236,61
	[List all	Contracts Total Other costs that do not fit into any other category]	φ	757,192
List of O	ther	<b>Budget Impact Justification</b> [Impact on the program's objectives/goals.] Show breakdown of costs.		Amount
Rent		1.966/sq ft x 250 x 5.33 fte x 12 mos	\$	31,43
		Other Costs Total	\$	31,436
		Total Direct Cost		
			\$	1,422,872
Type of Indirect Cost [Select from dropdown list]		Indirect Cost Insert Base	[Ins	Total ert Indirect]
		Part A Administrative Total	\$	1,422,872

		PART A	PLANNING COUNCIL BUDGET		
		APPL	ICANT: Shanti Planning Council FISCAL YEAR: 23-24		
			Personnel		
Salary	FTE	Name, Position	Budget Impact Justification		
[Insert total	[Insert as	[Insert name, position	[Description of duties, impact on program goals and outcomes,		Amount
annual salary]	decimal]	title]	payment source for balance of FTE.]		
sataryj			Responsible for the direction and executive oversight of all HHSPC		
		Mark Molnar, Program	Support tasks, functions as an alternative liaison between the HHSPC		
\$ 99,500	0.72	Director	and stakeholders, government entitites, and community bodies	\$	71,403
¢ (7.00	1.00	D. Jordan, Program	Admin oversight & implementation of all trainings & orientations;	¢	(7 (00
\$ 67,600	1.00	Manager 1	supervises annual needs assessment & community outreach listening Maintaining compliance with CA State protocols & HCPC by-laws,	\$	67,600
		Ali Cone, Program	policies, procedures; tracks membership attendance & demographics;		
\$ 67,600	0.48	Manager 2	liason with Mayor's Office.	\$	32,516
		J Williams, Program			
\$ 67,600	0.07	Manager 3	Grantee assessment and other duties as needed.	\$	5,047
		M. Clark Dr.	Notetaking & minutes at Council meetings; maintenance of recordings &		
\$ 49,483	0.76	M. Clark Program Coordinator	website; coordinates requests for information; facilitates focus group meetings.	\$	37,756
φ 49,483	0.70	Liz Strum, Program	Responsible for notetaking & minutes at Council meetings; other duties	ф	57,730
\$ 47,840	0.50	Assistant	as needed	\$	23,920
				\$	_
				\$	-
			Personnel Total	\$	238,241
			Fringe Benefits		
Percentage			Components		Amount
[Insert as %1			mponents that comprise the fringe benefit rate.]		Amount
	Social Securi	ity		\$	18,226
	Medical			\$	20,820
1.50%	Dental Unemployme	ant Incurance		\$ \$	3,574 2,383
1.00%	Unempioying			\$	
			Fringe Benefit Total	\$	45,003
			Travel		
			Local		
2.50			Travel Expenses/Budget Impact Justification		
Mileage Rate	Number of Miles	Name, Position of Traveler(s)	[Lodging, parking, per diem, etc., and the impact of the travel on		Amount
Kate	willes	Traveler(s)	program objectives/goals.] Show breakdown of costs.		
			I coal Transl Sub Total	\$	-
			Local Travel Sub-Total	φ	-
			Long Distance		
Type of	Travel	Name, Position of	<b>Travel Expenses/Budget Impact Justification</b> [Lodging, parking, per diem, etc., and the impact of the travel on		Amount
Type of	IIavei	Traveler(s)	program objectives/goals.] Show breakdown of costs.		Amount
			Long Distance Travel Sub-Total		-
			Travel Total	Þ	-
[Equipment is			<b>Equipment</b> nore and a useful life of 1 or more years. (If your agency uses a different ur agency's definition.)] Show breakdown of costs.		
	T		Budget Impact Justification		
	List of Equ	upment	[Description of need to carry out the program's objectives/goals.]		Amount

		Equipment Total	\$	-	
		<b>Supplies</b> ost under \$5,000. <u>Note</u> : Items such as laptops, tablets, and desktop e value is under the \$5,000 threshold.] Show breakdown of costs.			
List of Su	pplies	<b>Budget Impact Justification</b> [Description of need to carry out the program's objectives/goals].		Amount	
Pens, Paper,	folder, etc	Costs for office supplies (509 FTE x 3.76 FTE)	\$	1,91	
		Supplies Total	\$	1,91	
		Contractual			
List of Contracts	Deliverables	Budget Impact Justification [Description of how the contract impacts the program's objectives/goals and how the costs were estimated.] Show breakdown		Amount	
		Contracts Total	\$		
		Other	Ψ		
[List	all costs that do not fit	into any other category.] Show breakdown of costs.			
List of C	Other	<b>Budget Impact Justification</b> [Impact on the program's objectives/goals.]	Amount		
Rent		Montly rent expense for the proportion of office space utilized by (Anuual Rent 7982.57/FTE x 3.76 FTE @ Polk St location + storage 79.04/FTE x 3.76 FTE)	\$	30,31	
Phone		Costs for phone and internet usage, proportionate to program utilization (409.04/FTE x 3.76 FTE)	\$	1,53	
IT support/shredding		IT (1,494.98 x 3.76 FTE)	\$	5,62	
Insurance		Proportionate share of cost for general liability insurance required for operations. 453.03 x 3.76 FTE)	\$	1,70	
Rental of Equipment		Proportionate share of cost to operate leased copiers for printing and reproduction of materials and reports (414.28 x 3.76 FTE)	\$	1,56	
		Other Costs Total	\$	40,733	
		Total Direct Cost		,	
			\$	325,891	
		Indirect Cost			
Indirect Rate Cost (Insert rate [Select from below)		Insert Base		Total [Insert ndirect]	
Final 9%	\$	325,891		29,33	
	Part A	A Planning Council Total			
			\$	355,22	

			RT A PLANNING COUNCIL BUDGET PLICANT: AIDS Legal Referral Panel FISCAL YEAR: 23-24		
			Personnel		
Salary [Insert total annual salary]	<b>FTE</b> [Insert as decimal]	<b>Name, Position</b> [Insert name, position title]	<b>Budget Impact Justification</b> [Description of duties, impact on program goals and outcomes, payment source for balance of FTE.]	Amou	nt
\$ 68,931	1.00	Stephen Spano, HCAP Attorney	Conduct outreach activities, provide advocacy, and offer mediation services; provide technical assistance to providers; prepare quarterly reports on consumer issues and their resolution	\$	68,931
\$ 118,326	0.02	Bill Hirch, ED	Supervise HCAP Attorney; oversee agency collaborations and attorney-client relations; conduct program evaluation activities; oversee compliance with contract objectives and requirements including ARIES data implementation. Conduct Client Services meetings at which client services staff discuss trends, cases and client feedback. Personnel Total	\$ \$ \$ 7	2,122 - - <b>1,053</b>
			Fringe Benefits		
<b>Percentage</b> [Insert as %]		[Lis	<b>Components</b> t components that comprise the fringe benefit rate.]	Amou	nt
9.00% 0.50%	Social Securi Medical Dental Unemployme			\$ \$ \$ \$	5,436 6,395 355 284
0.75%	Worker Com	pensation Insurance		\$	533
			Fringe Benefit Total	\$ 1	3,003
			Travel Local		
Mileage Rate	Number of Miles	Name, Position of Traveler(s)	<b>Travel Expenses/Budget Impact Justification</b> [Lodging, parking, per diem, etc., and the impact of the travel on program objectives/goals.] Show breakdown of costs.	Amou	nt
			Local Travel Sub-Total	\$	-
			Long Distance	Ŧ	
Type of 7	Fravel	Name, Position of Traveler(s)	Travel Expenses/Budget Impact Justification [Lodging, parking, per diem, etc., and the impact of the travel on program objectives/goals.] Show breakdown of costs.	Amou	nt
			Long Distance Travel Sub-Total		-
			Travel Total	\$	-
[Equipment is			<b>Equipment</b> or more and a useful life of 1 or more years. (If your agency uses a different o your agency's definition.)] Show breakdown of costs.		
]	List of Equip	ment	<b>Budget Impact Justification</b> [Description of need to carry out the program's objectives/goals.]	Amou	nt
			Equipment Total	\$	-
			<b>Supplies</b> t under \$5,000. <u>Note</u> : Items such as laptops, tablets, and desktop computers alue is under the \$5,000 threshold.] Show breakdown of costs.		

List of Supplies		lies	<b>Budget Impact Justification</b> [Description of need to carry out the program's objectives/goals].		Amount
Off	ice Suppl	lies	13% of supplies, allocated by shared cost based on FTE (\$18,500 X13%)	\$	74(
	Postage		13% of postage cost, allocated by shared cost based on FTE (\$5,000 X13%)	\$	200
			Supplies Total	\$	94(
			Contractual		
List of Contra	ets	Deliverables	<b>Budget Impact Justification</b> [Description of how the contract impacts the program's objectives/goals and how the costs were estimated.] Show breakdown of costs.		Amount
IT Consultant	te	Hours of IT Consultant Services	IT and database consultation costs, allocated by shared cost based on FTE (\$15,000 X 13%)	\$	600
			Contracts Total	\$	600
			Other	Ŷ	000
	[List	all costs that do not	fit into any other category.] Show breakdown of costs.		
Lis	st of Oth	er	<b>Budget Impact Justification</b> [Impact on the program's objectives/goals.]		Amount
	Rent		5% of office space, allocated by shared cost based on FTE (\$99,717 X 5%)	\$	3,989
Т	Felephone	2	5% of phone costs, allocated by shared cost based on FTE ( $$99,717 \times 5\%$ )	\$	1,294
General L	Liability I	nsurance	13% of insurance premium, allocated by shared cost based on FTE (\$7,617 X 13%)	\$	305
Professiona	l Liability	y Insurance	\$1,802 per attorney FTE	\$	1,802
Equipme	ent Renta	l/Repair	13% of equipment rental and repair, allocated by shared cost based on FTE (\$9,200 X 13%)	\$	460
			Other Costs Total	\$	7,850
			Total Direct Cost		
				\$	93,446
			Indirect Cost		
irect Cost (Inse	<b>Rate</b> ert rate elow)		Insert Base	[In:	Total sert Indirect]
d	9%	\$	93,446		8,410
		Pai	rt A Planning Council Total		
				\$	101,85

### PART A CLINICAL QUALITY MANAGEMENT BUDGET APPLICANT: SF EMA FISCAL YEAR: 23-24

			FISCAL YEAK: 23-24		
	•		Personnel		
<b>Salary</b> [Insert total annual salary]	FTE [Insert as decimal]	<b>Name, Position</b> [Insert name, position title]	<b>Budget Impact Justification</b> [Description of duties, impact on program goals and outcomes, payment source for balance of FTE.]		Amount
\$ 163,445	0.50	Beth Neary, Acting Assistant Director of HIV Health Services	Responsible for the overall oversight, planning, evaluation and quality management for HHS as the grantee for the San Francisco HIV System of Care in coordination with our Ryan White mandated HIV Community Planning Council. Leads HHS Internal CQI Committee and works directly with funded CBOs on CQI initiatives. Directs Health Care Analyst for Quality Management on writing of HHS QM/QI Plan and all QM/QI presentations. Reviews program QI data with HHS Internal CQI Committee to suggest CQI activites for discussion at HHS CBO CQI bimonthly review meetings. Meets with system of care providers and SMEs with HHS Director to discuss future CQI needs/ interests. <b>(.50</b> <b>RWPA COM &amp; .50 GF)</b> Participates in HHS Internal CQI Committee and works directly with funded CBOs on CQI	\$	81,723
\$ 123,205	0.50	John Aynsley, Health Care Analyst	initiatives. Integrally involved in data oversight and importing functions related to services and ARIES reporting, Provides CQI analysis and presentations to local HIV Community Planning Council. Produces all HHS written QM/QI plans. Ensures proper importation from DPH EMRs to ARIES database for accuracy of data related to QI of health for both annual program evaluations as part of the program monitoring cycle and for the aggregate analysis HHS continually reviews and frequently produces and reports to our local Planning Council, Health Commission, local SF Board of Supervisors. <b>(.50 RWPA</b> <b>CQM &amp; .50 GF)</b>	\$	61,603
\$ 93,011	0.50	Maria Lacayo, HWIII	Serves as ARIES Manager to train users, provide oversight of quality and accuracy of ARIES data for HRSA reporting as well as for usage for HHS CQI purposes. Participates in HHS Internal CQI Committee and works directly with funded CBOs on CQI initiatives. Ensures proper program identifications and designs (set-ups) in ARIES for DPH EMRs to import client level data into ARIES database to have accurate and correctly sorted data related to QI of health for both annual program evaluations as part of the program monitoring cycle. This is necessary for aggregate analysis HHS continually reviews as part of our ongoing CQI work and frequently produces and reports to our local Planning Council, Health Commission, local SF Board of Supervisors. Also trains ARIES users on proper usage and report generation in ARIES which includes who to run and utilize program data and how to utilize this data for CQI related program level work. <b>(.50 RWPA</b> <b>CQM &amp; .50 GF)</b>	\$	46,506
\$ 125,580	1.00	Kevin Hutchcrofit, Program Manager & ADAP Coordinator	Manages the HHS QM training program which provides many QM/QI/ and capacity development related trainings annually for our RWPA funded providers. Researches and recruits trainers and consultants for the trainings. Develops contracts and monitors payment mechanism. Works with trainers to develop training materials and identifies training goals. Creates pre-test and post-test evaluations for attendees. Provides analysis of these trainings to HHS leadership and our local Planning Council. Creates, distributes and analyzes annual survey to HHS HIV System of Care on QM/QI/CD Training questions and topics of interest. (1.00 RWPA CQM)	\$	125,580
			Personnel Total		315,411
			Fringe Benefits		
<b>Percentage</b> [Insert as %]		[List o	<b>Components</b> components that comprise the fringe benefit rate.]		Amount
	Insurance(Me			\$	46,145
	Social Security	ý		\$ ¢	24,129
	Retirement Workers Com	pensation		\$ \$	37,849 4,731
4.22%			Medicare, Life Insurance, and Supp. Ret.)	\$	13,310
		<u></u> .		\$	- 126,164
Fringe Benefit Total					
			Travel		
			Local		

Mileage Rate	Number of Miles	Name, Position of Traveler(s)	<b>Travel Expenses/Budget Impact Justification</b> [Lodging, parking, per diem, etc., and the impact of the travel on program objectives/goals.] Show breakdown of costs.		Amount
				¢	
			Local Travel Sub-Total Long Distance	\$	
Type of Travel Name, Position of Traveler(s)			<b>Travel Expenses/Budget Impact Justification</b> [Lodging, parking, per diem, etc., and the impact of the travel on program objectives/goals.] Show breakdown of costs.		Amount
				_	
			Long Distance Travel Sub-Total Travel Total		-
[Equipment			<b>Equipment</b> or more and a useful life of 1 or more years. (If your agency uses a different your agency's definition.).] Show breakdown of costs.		
	List of Equip	ment	<b>Budget Impact Justification</b> [Description of need to carry out the program's objectives/goals.]		Amount
			Equipment Total	\$	-
			Supplies	Ψ	
[Supplies is de			nder \$5,000. <u>Note</u> : Items such as laptops, tablets, and desktop computers are the is under the \$5,000 threshold.] Show breakdown of costs.		
	List of Supp	lies	<b>Budget Impact Justification</b> [Description of need to carry out the program's objectives/goals.]		Amount
D:1	Office Supp	lies	Office Supplies and postal services.	\$	50
	1' D A.	• .		¢	50
DUII	ding Repar/Ma	intanence	Keys, lock smith services and etc. Supplies Total	\$ \$	50 1,00
Bull	ding Repar/Ma	iintanence	Keys, lock smith services and etc.		
List of Co		Deliverables	Keys, lock smith services and etc. Supplies Total	\$	
	ontracts		Keys, lock smith services and etc. Supplies Total Contractual Budget Impact Justification [Description of how the contract impacts the program's objectives/goals and	\$	1,00 Amount
List of C	ontracts 360	Deliverables Development of training materals, presentations of trainings, creating video of onling trainings for	Supplies Total         Supplies Total         Contractual         Budget Impact Justification         [Description of how the contract impacts the program's objectives/goals and how the costs were estimated.] Show breakdown of costs.         Consultants: Assisting with QI analysis, data collection, programming, etc.         John Szumowski, MD, Associate Clinical Director of Ward 86 has committed to be available about .10 FTE of his time to join HHS Internal CQI Committee meetings and broader HHS Community CQI Meetings, in our work toward our SF CQI goals. He meets with HHS leadership to discuss CQI questions and to discuss issues related to provider level details of EPIC (the EMR used by DPH) that might be useful when reviewing current and emerging CQI efforts. He also meets often with HHS funded clinical staff to review their CQI goals and panel	\$	<b>1,00</b> <b>Amount</b> 24,04
List of C	ontracts 360 SF Ward 86	Deliverables Development of training materals, presentations of trainings, creating video of onling trainings for posting on HHS	Supplies Total         Supplies Total         Contractual         Budget Impact Justification         [Description of how the contract impacts the program's objectives/goals and how the costs were estimated.] Show breakdown of costs.         Consultants: Assisting with QI analysis, data collection, programming, etc.         John Szumowski, MD, Associate Clinical Director of Ward 86 has committed to be available about .10 FTE of his time to join HHS Internal CQI Committee meetings and broader HHS Community CQI Meetings, in our work toward our SF CQI goals. He meets with HHS leadership to discuss CQI questions and to discuss issues related to provider level details of EPIC (the EMR used by DPH) that might be useful when reviewing current and emerging CQI efforts. He also	\$	1,00 Amount 24,04 31,87
List of C HR: SFGH/ UCS	ontracts 360 SF Ward 86	Deliverables Development of training materals, presentations of trainings, creating video of onling trainings for posting on HHS HIV QI MD Consultant Hours of time spent on Programs and Imports QI level data from all DPH clinics and SFGH programs into	Supplies Total         Supplies Total         Contractual         Budget Impact Justification         [Description of how the contract impacts the program's objectives/goals and how the costs were estimated.] Show breakdown of costs.         Consultants: Assisting with QI analysis, data collection, programming, etc.         John Szumowski, MD, Associate Clinical Director of Ward 86 has committed to be available about .10 FTE of his time to join HHS Internal CQI Committee meetings and broader HHS Community CQI Meetings, in our work toward our SF CQI goals. He meets with HHS leadership to discuss CQI questions and to discuss issues related to provider level details of EPIC (the EMR used by DPH) that might be useful when reviewing current and emerging CQI efforts. He also meets often with HHS funded clinical staff to review their CQI goals and panel management practices.	\$\$\$	1,00

	[List	<b>Other</b> all costs that do not fit into any other category]Show breakdown of costs.	
	List of Othe	Rudget Impact Justification	Amount
		Other Costs Total	\$-
		Total Direct Cost	
			\$ 526,971
		Indirect Cost	
Type of Indirect Cost [Select from dropdown list]	<b>Rate</b> (Insert rate below)	Insert Base	Total [Insert Indirect]
Fixed	10%	\$ 84,397	\$ 8,440
		Part A Clinical Quality Management Total	
			\$ 535,411

			PART A HIV SERVICES BUDGET				
			APPLICANT: SF EMA				
			FISCAL YEAR: 23-24				
	Personnel						
Salary [Insert total annual	FTE [Insert as decimal]	Name, Position [Insert name, position title]	<b>Budget Impact Justification</b> [Description of duties, impact on program goals and outcomes, payment source for balance of FTE]	Amount			
salary]		<i>F</i> • • • • • • • • • • • • • • • • • • •		¢			
				\$ - \$ -			
				\$-			
				\$ - \$ -			
			Personnel Total				
			Fringe Benefits				
<b>Percentage</b> [Insert as %]	Percentage Components						
				\$-			
				\$ -			
			Fringe Benefit Total	<b>ð</b> -			
			Travel				
			Local				
Mileage Rate	Number of Miles	Name, Position of Traveler(s)	<b>Travel Expenses/Budget Impact Justification</b> [Lodging, parking, per diem, etc., and the impact of the travel on program objectives/goals]Show breakdown of costs.	Amount			
			Local Travel Sub-Total	\$-			
			Long Distance				
Type of	Travel	Name, Position of Traveler(s)	<b>Travel Expenses/Budget Impact Justification</b> [Lodging, parking, per diem, etc., and the impact of the travel on program objectives/goals]Show breakdown of costs.	Amount			
			Long Distance Travel Sub-Total	\$-			
			Travel Total	\$-			
[Equipment	is defined as a		<b>Equipment</b> or more and a useful life of 1 or more years. (If your agency uses a different please defer to your agency's definition.)]				
	List of Equip	nent	Budget Impact Justification [Description of need to carry out the program's objectives/goals]Show breakdown of costs	Amount			
			Equipment Total	\$-			
[Supplies is de			<b>Supplies</b> under \$5,000. <u>Note:</u> Items such as laptops, tablets, and desktop computers are lue is under the \$5,000 threshold.]Show breakdown of costs.				
	List of Suppl	lies	<b>Budget Impact Justification</b> [Description of need to carry out the program's objectives/goals]	Amount			
			Supplies Total	\$ -			
	Contractual						

List of Contracts	Deliverables	<b>Budget Impact Justification</b> [Description of how the contract impacts the program's objectives/goals and how the costs were estimated]Show breakdown of costs.	Amount
Outpatient/Ambulatory Health Services	Outpatient/ Ambulatory Heatlh Encounters	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$ 698,035
Oral Health Care	Oral Health Encounters	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$ 830,193
EIS	Hours of EIS services	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$ 115,224
Health Insurance Assistance	Health Insurance Assistance grants	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$ 54,950
Home Health Care	visits	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$ 275,378
Hospice	-	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$ 823,592
Mental Health	Psychiatric Encounters, Hours of Individual and Group Outpatient Mental Health	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$ 1,445,906
Substance Abuse Services (outpatient)	Hours of Outpatient Substance Use Services	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$ 214,725
Medical Case Management	•	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$ 3,475,534
Non-Medical Case Management	Hours of Non- Medical Case Management	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$ 2,019,435
Emergency Financial Assistance	Emergency Financial Assistance grants	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$ 1,157,816
Food		All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$ 257,584

Medical Transportation       All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.       \$ 9,817         Outreach       Hours of Outreach       All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.       \$ 9,817         Psycho-Social Support       Hours of Individual or Group Psycho-Social Services       All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.       \$ 498,966         Other Professional Services       Hours of Legal       All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.       \$ 498,966         Other Professional Services       Hours of Legal       All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.       \$ 295,558         Impose to the professional Services       Hours of Legal       Hours of Li into any other category [Show breakdown o	Housing	Days of Housing	based on last year's expenditures and actual service deliverabels by each service category.	¢	720 804					
OutreachHours of Outreachgoals and priorities of the local HIV Planning Council, costs were estimated a 277,964Psycho-Social SupportHours of Individual or Group Psycho- social ServicesAll items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.\$ 498,966Other Professional ServicesHours of Legal Services.All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.\$ 498,966Other Professional ServicesHours of Legal Services.All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.\$ 498,966Other Professional ServicesHours of Legal Services.All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service a 2 95,558Other Professional ServicesAll items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service a 2 95,558Image: Deliver ServicesS Deliver ServicesImage:	Medical Transportation		All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service	\$	730,894 9,817					
Psycho-Social Support     Individual or Group Psycho- social Services     goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service all times are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service acegory.     \$ 498,966       Other Professional Services     Hours of Legal Services.     All times are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service acegory.     \$ 295,558       Image: Services     Image: Services     \$ 295,558       Image: Services     Image: Services     \$ 295,558       Image: Services     Image: Services     \$ 13,181,571       Image: Services     S Image: Services     \$ 13,181,571       Image: Services     Image: Services     \$ Amount       Image: Services     Image: Services     \$ Amount       Image: Services     Image: Services     \$ Image: Services       Image: Services     Image: Services     \$ Image: Services <t< td=""><td>Outreach</td><td colspan="9">Outreach Hours of Outreach goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service</td></t<>	Outreach	Outreach Hours of Outreach goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service								
Other Professional Services       goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.       \$ 295,558         Image: Services       Image: Services       \$ 13,181,571         Image: Services       Image: Services       S 13,181,571         Image: Servi	Psycho-Social Support	Individual or Group Psycho-	goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service	\$						
Contrast Form           Other           I.ist all costs that do not fit into any other category]Show breakdown of costs.           Budget Impact Justification           I.ist of Other         Budget Impact on the program's objectives/goals]         Amount           [Impact on the program's objectives/goals]         4           Impact on the program's objectives/goals]         5           Impact on the program's objectives/goals]         5           Impact on the program's objectives/goals]         5           Impact o	Other Professional Services	U	goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service	\$	295,558					
Other           Itist all costs that do not fit into any other category]Show breakdown of costs.           Budget Impact Justification         Amount           List of Other         [Impact on the program's objectives/goals]         Amount										
Other           List all costs that do not fit into any other category]Show breakdown of costs.         Amount           List of Other         Budget Impact Justification         Amount           [Impact on the program's objectives/goals]         – <th></th> <th></th> <th></th> <th></th> <th></th>										
List of Other         Budget Impact Justification [Impact on the program's objectives/goals]         Amount           [Impact on the program's objectives/goals]         —         —         —         —         —         —         —         —         —         —         —         —         —         …			Contracts Total	\$	13,181,571					
List of Other         [Impact on the program's objectives/goals]         Amount           Impact on the program's objectives/goals]         Impact on the program's objectives/goals]         Impact on the program's objectives/goals]           Impact on the program's objectives/goals]         Impact on the program's objectives/goals]         Impact on the program's objectives/goals]           Impact on the program's objectives/goals]         Impact on the program's objectives/goals]         Impact on the program's objectives/goals]           Impact on the program's objectives/goals]         Impact on the program's objectives/goals]         Impact on the program's objectives/goals]           Impact on the program's objectives/goals]         Impact on the program's objectives/goals]         Impact on the program's objectives/goals]           Impact on the program's objectives/goals]         Impact on the program's objectives/goals]         Impact on the program's objectives/goals]           Impact on the program's objectives/goals]         Impact Other Cost         Impact on the program's objectives/goals]           Impact on the program's objectives/goals]         Impact Other Cost         Impact on the program's objectives/goals]           Impact on the program's objectives/goals]         Impact Other Cost         Impact on the program's objectives/goals]           Impact Other Cost         Impact Other Cost         Impact on the program's objectives/goals]         Impact on the program's objectives/goals]				\$	13,181,571					
Total Direct Cost         \$ 13,181,571         Indirect Cost       \$ 13,181,571         Type of Indirect Cost       Rate (Insert rate below)       Total [Insert Indirect]         Select from dropdown list]       Rate (Insert rate below)       Total [Insert Indirect]	[Li	st all costs that do ne	<b>Other</b> of fit into any other category]Show breakdown of costs.	\$	13,181,571					
Total Direct Cost         \$ 13,181,571         Indirect Cost       \$ 13,181,571         Type of Indirect Cost       Rate (Insert rate below)       Total [Insert Indirect]         Select from dropdown list]       Rate (Insert rate below)       Total [Insert Indirect]			Other of fit into any other category]Show breakdown of costs. Budget Impact Justification	\$						
Total Direct Cost         \$ 13,181,571         Indirect Cost       \$ 13,181,571         Type of Indirect Cost       Rate (Insert rate below)       Total [Insert Indirect]         Select from dropdown list]       Rate (Insert rate below)       Total [Insert Indirect]			Other of fit into any other category]Show breakdown of costs. Budget Impact Justification	\$						
Indirect Cost       Indirect Cost         Indirect Cost       Rate       Total         [Select from dropdown list]       Insert Base       Total         Insert Indirect       Insert Indirect       Insert Indirect			Other of fit into any other category]Show breakdown of costs. Budget Impact Justification [Impact on the program's objectives/goals]							
Indirect Cost         Type of Indirect Cost       Rate (Insert rate below)       Total [Insert Indirect]         [Select from dropdown list]       Image: Cost (Cost Cost (Cost Cost (Cost Cost Cost (Cost Cost (Cost Cost (Cost Cost (Cost Cost (Cost (Co			Other of fit into any other category]Show breakdown of costs. Budget Impact Justification [Impact on the program's objectives/goals] Other Costs Total							
Type of Indirect Cost [Select from dropdown list]Rate (Insert rate below)Total [Insert Indirect]Image: Select from dropdown list]Total (Insert Indirect]Total (Insert Indirect]			Other of fit into any other category]Show breakdown of costs. Budget Impact Justification [Impact on the program's objectives/goals] Other Costs Total	\$	Amount -					
Indirect Cost     Kate     Total       [Select from dropdown list]     [Insert rate below)     Total       Insert Base     [Insert Indirect]			Other of fit into any other category]Show breakdown of costs. Budget Impact Justification [Impact on the program's objectives/goals] Other Costs Total Total Direct Cost	\$	Amount -					
Part A HIV Services Total	List of Oth		Other of fit into any other category]Show breakdown of costs. Budget Impact Justification [Impact on the program's objectives/goals] Other Costs Total Total Direct Cost	\$	Amount -					
Part A HIV Services Total	Type of Indirect Cost [Select from     Rate (Insert rate below)		Other of fit into any other category]Show breakdown of costs. Budget Impact Justification [Impact on the program's objectives/goals] Cother Costs Total Total Direct Cost Indirect Cost	\$	Amount - 13,181,571 Total					
	Type of Indirect Cost [Select from     Rate (Insert rate below)		Other of fit into any other category]Show breakdown of costs. Budget Impact Justification [Impact on the program's objectives/goals] Cother Costs Total Total Direct Cost Indirect Cost	\$	Amount - 13,181,571 Total					

		M	AI ADMINISTRATIVE BUDGET	
		Ι <b>ν</b> Ι	APPLICANT: SF EMA	
			FISCAL YEAR: 23-24	
			Personnel	
Salary	FTE	Nome Desition	Dudget Import Instification	
[Insert total	FIE [Insert as	Name, Position [Insert name, position	<b>Budget Impact Justification</b> [Description of duties, impact on program goals and outcomes, payment	Amount
annual	decimal]	title]	source for balance of FTE]	
salary]		TBD, CDTA Program	Provides programmatic oversight and monitoring of case management and	
\$ 146,919	0.40	Manager	integrated services program60 FTE GF	\$ 58,
				\$
				\$
				\$ \$
			Personnel Total	-
			Fringe Benefits	
Percentage			Components	
[Insert as %]			ponents that comprise the fringe benefit rate]	
	Insurance(Me	,		\$ 8,
	Social Securit	У		\$ 4, \$ 7,
	Workers Com	pensation		\$ 7, \$
			dicare, Life Insurance, and Supp. Ret.)	\$ 2,
			Fringe Benefit Total	\$ 23,5
			Travel	
			Local	
	Number of	Nome Desition of	Travel Expenses/Budget Impact Justification	
Mileage Rate	Miles	Name, Position of Traveler(s)	[Lodging, parking, per diem, etc., and the impact of the travel on program	Amount
	111105		objectives/goals]Show breakdown of costs.	
			Local Travel Sub-Total	\$
			Long Distance	
			Travel Expenses/Budget Impact Justification	
Type of	Travel	Name, Position of Traveler(s)	[Lodging, parking, per diem, etc., and the impact of the travel on program	Amount
		Traveler(5)	objectives/goals]Show breakdown of costs.	
			Long Distance Travel Sub-Total	\$
			Travel Total	
			Equipment	
[Equipme			more and a useful life of 1 or more years. (If your agency uses a different your agency's definition.)]Show breakdown of costs.	
	List of Ferry	mmont	Budget Impact Justification	A
	List of Equi	pment	[Description of need to carry out the program's objectives/goals]	Amount
			Equipment Total	\$
[Supplies is			<b>Supplies</b> der \$5,000. <u>Note:</u> Items such as laptops, tablets, and desktop computers are e is under the \$5,000 threshold.]Show breakdown of costs.	
	List of Suj	oplies	<b>Budget Impact Justification</b> [Description of need to carry out the program's objectives/goals]	Amount
			[2000 phon of new to carry our me program's objectives goals]	
			<u> </u>	

Supplies Total \$									
	Contractual								
List of Co	ontracts	Deliverables	<b>Budget Impact Justification</b> [Description of how the contract impacts the program's objectives/goals and how the costs were estimated]Show breakdown of costs.	Amount					
			Contracts Total	\$	-				
	[Li	ist all costs that do not f	<b>Other</b> <i>it into any other category</i> ] <i>Show breakdown of costs.</i>						
	List of Other         Budget Impact Justification           [Impact on the program's objectives/goals]								
			Other Costs Total	\$	-				
			Total Direct Cost						
				\$	82,275				
			Indirect Cost						
Type of Indirect Cost [Select from dropdown list]	Indirect Cost (Insert rate [Select from below)								
	MAI Administrative Total								
				\$	82,275				

	MAI HIV SERVICES BUDGET								
	APPLICANT: SF EMA								
			FISCAL YEAR: 23-24						
	Personnel								
Salary [Insert total annual	FTE [Insert as decimal]	<b>Name, Position</b> [Insert name, position title]	<b>Budget Impact Justification</b> [Description of duties, impact on program goals and outcomes, payment source for balance of FTE]	Amount					
salary]		Postion		\$ -					
				\$ -					
				\$-					
				\$ - \$ -					
		1	Personnel Total	\$-					
			Fringe Benefits						
<b>Percentage</b> [Insert as %]		[List co	<b>Components</b> omponents that comprise the fringe benefit rate]	Amount					
				\$-					
			Fringe Benefit Total	\$ - \$ -					
			Travel	Ψ					
			Local						
Mileage Rate	Number of Miles	Name, Position of Traveler(s)	<b>Travel Expenses/Budget Impact Justification</b> [Lodging, parking, per diem, etc., and the impact of the travel on program objectives/goals]Show breakdown of costs.	Amount					
			Local Travel Sub-Total	\$ -					
			Long Distance						
Type of	Travel	Name, Position of Traveler(s)	<b>Travel Expenses/Budget Impact Justification</b> [Lodging, parking, per diem, etc., and the impact of the travel on program objectives/goals]Show breakdown of costs.	Amount					
			Long Distance Travel Sub-Total	\$-					
			Travel Total	\$ -					
[Equipme			<b>Equipment</b> or more and a useful life of 1 or more years. (If your agency uses a different to your agency's definition.)]Show breakdown of costs.						
	List of Equip	ment	<b>Budget Impact Justification</b> [Description of need to carry out the program's objectives/goals]	Amount					
	Equipment Total \$								
[Supplies is	<b>Supplies</b> [Supplies is defined as property with a unit cost under \$5,000. <u>Note:</u> Items such as laptops, tablets, and desktop computers are classified as a supply if the value is under the \$5,000 threshold.]Show breakdown of costs.								
	List of Supp	lies	<b>Budget Impact Justification</b> [Description of need to carry out the program's objectives/goals]	Amount					
	Supplies Total \$								
	Contractual								

List of Contracts	Deliverables	<b>Budget Impact Justification</b> [Description of how the contract impacts the program's objectives/goals and how the costs were estimated]Show breakdown of costs.		Amount				
Outpatient/Ambulatory Health Services	Outpatient/ Ambulatory Health Services Encounters	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$	\$ 444,614				
Medical Case Management	Hours of Medical Case Management	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$	207,890				
Substance Abuse Services (Outpatient)	Hours of Outpatient Substance Use Services	All items are currently part of the broad System of HIV Care and align with the goals and priorities of the local HIV Planning Council, costs were estimated based on last year's expenditures and actual service deliverabels by each service category.	\$	87,969				
		Contracts Total	\$	740,473				
[[	ist all costs that do no	<b>Other</b> of fit into any other category]Show breakdown of costs.	1					
List of Oth	ner	<b>Budget Impact Justification</b> [Impact on the program's objectives/goals]	Amount					
		Other Costs Total	\$	-				
		Total Direct Cost						
			\$	740,473				
		Indirect Cost						
Type of Indirect Cost [Select from dropdown list]Rate (Insert rate below)		Insert Base						
MAI HIV Services Total								
			\$	740,473				

# BUDGET INFORMATION - Non-Construction Programs

OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY										
Grant Program Catalog of Federal Function Domestic Assistance			bligated Funds		New or Revised Budget					
Number (b)		Federal (c)	Non-Federal (d)		Federal (e)	Non-Federal (f)		Total (g)		
93.914	\$		\$	\$	1,505,147.00		\$	1,505,147.00		
93.914					535,411.00			535,411.00		
93.914					13,922,044.00			13,922,044.00		
								0.00		
	\$	0.00	\$ 0.00	\$	15,962,602.00	\$ 0.00	\$	15,962,602.00		
	T	SECTIO					1			
es								Total		
	(1) \$		\$	\$	HIV Services	HIV Services \$	\$	<b>(5)</b> 820,110.00		
								328,044.00		
			120,104.00	' 						
		1,944.00						1,944.00		
								0.00		
		7,995.00	1,000.00	)				8,995.00		
		757,192.00	84,397.00	)	13,922,044.00			14,763,633.00		
								0.00		
h. Other		31,436.00						31,436.00		
i. Total Direct Charges (sum of 6a-6h)		1,505,147.00	526,971.00	)	13,922,044.00	0.00		15,954,162.00		
5			8,440.00					8,440.00		
of 6i and 6j)	\$	1,505,147.00	\$ 535,411.00	\$	13,922,044.00	\$ 0.00	\$	15,962,602.00		
	\$		\$	\$		\$	\$	0.00		
	Number (b)           93.914           93.914           93.914           93.914	Domestic Assistance Number (b)         I           93.914         \$           93.914         [] <t< td=""><td>Catalog of Federal Domestic Assistance Number         Estimated Unc Federal           (b)         Federal           (c)         93.914           93.914         (c)           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         1.940.00           93.914         1.944.00           93.914         7.995.00           757,192.00         757,192.00           93.91,436.00         31,436.00           93.91,436.00         1.505,147.00           95         1.505,147.00</td><td>Catalog of Federal Domestic Assistance Number (b)         Estimated Unobligated Funds           93.914         Federal (c)         Non-Federal (d)           93.914         \$         \$           93.91</td><td>Catalog of Federal Domestic Assistance Number         Estimated Unobligated Funds           (b)         Federal (c)         Non-Federal (d)           93.914         \$         \$           93.914         \$         \$           93.914         \$         \$           93.914         \$         \$           93.914         \$         \$           93.914         \$         \$           93.914         \$         \$           93.914         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         \$         \$         \$           \$         \$         \$         \$     </td></t<> <td>Catalog of Federal Domestic Assistance Number         Estimated Unobligated Funds         Federal (d)         Federal (e)           93.914         \$         Non-Federal (d)         Federal (e)           93.914         \$         \$         1,505,147.00           93.914         \$         \$         535,411.00           93.914         13,922,044.00         \$         13,922,044.00           93.914         \$         0.00         \$         15,962,602.00           93.914         \$         0.00         \$         15,962,602.00           \$         0.00         \$         0.00         \$         15,962,602.00           \$         0.00         \$         0.00         \$         15,962,602.00           \$         0.00         \$         0.00         \$         15,962,602.00           \$         \$         0.00         \$         15,962,602.00         \$           \$         \$         0.00         \$         15,962,602.00         \$           \$         0.00         \$         11,962,602.00         \$         11,922,040.00         \$           \$         \$         0.00         \$         31,41.00         \$         \$         13,922,044.00</td> <td>Catalog of Federal Domestic Assistance         Estimated Unobligated Funds         New or Revised Budge (c)           Number (b)         Federal (c)         Non-Federal (d)         Federal (e)         Non-Federal (f)           93.914         \$         \$         1,505,147.00         \$           93.914         \$         13,922,044.00         \$         \$           93.914         \$         0.00         \$         15,962,602.00         \$         0.00           93.914         \$         0.00         \$         0.00         \$         0.00         \$         0.00           93.914         \$         0.00         \$         0.00         \$         0.00         \$         0.00           93.914         \$         0.00</td> <td>Catalog of Federal Domestic Assistance Number (b)         Estimated Unobligated Funds         New or Revised Budget           Number (b)         Federal (c)         Non-Federal (d)         Federal (e)         Non-Federal (f)         Non-Federal (f)           93.914         \$         \$         \$         1,505,147.00         \$         \$           93.914         -         -         535,411.00         -         -         -           93.914         -         -         13,922,044.00         -</td>	Catalog of Federal Domestic Assistance Number         Estimated Unc Federal           (b)         Federal           (c)         93.914           93.914         (c)           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         0.00           93.914         1.940.00           93.914         1.944.00           93.914         7.995.00           757,192.00         757,192.00           93.91,436.00         31,436.00           93.91,436.00         1.505,147.00           95         1.505,147.00	Catalog of Federal Domestic Assistance Number (b)         Estimated Unobligated Funds           93.914         Federal (c)         Non-Federal (d)           93.914         \$         \$           93.91	Catalog of Federal Domestic Assistance Number         Estimated Unobligated Funds           (b)         Federal (c)         Non-Federal (d)           93.914         \$         \$           93.914         \$         \$           93.914         \$         \$           93.914         \$         \$           93.914         \$         \$           93.914         \$         \$           93.914         \$         \$           93.914         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         0.00         \$         \$           \$         \$         \$         \$           \$         \$         \$         \$	Catalog of Federal Domestic Assistance Number         Estimated Unobligated Funds         Federal (d)         Federal (e)           93.914         \$         Non-Federal (d)         Federal (e)           93.914         \$         \$         1,505,147.00           93.914         \$         \$         535,411.00           93.914         13,922,044.00         \$         13,922,044.00           93.914         \$         0.00         \$         15,962,602.00           93.914         \$         0.00         \$         15,962,602.00           \$         0.00         \$         0.00         \$         15,962,602.00           \$         0.00         \$         0.00         \$         15,962,602.00           \$         0.00         \$         0.00         \$         15,962,602.00           \$         \$         0.00         \$         15,962,602.00         \$           \$         \$         0.00         \$         15,962,602.00         \$           \$         0.00         \$         11,962,602.00         \$         11,922,040.00         \$           \$         \$         0.00         \$         31,41.00         \$         \$         13,922,044.00	Catalog of Federal Domestic Assistance         Estimated Unobligated Funds         New or Revised Budge (c)           Number (b)         Federal (c)         Non-Federal (d)         Federal (e)         Non-Federal (f)           93.914         \$         \$         1,505,147.00         \$           93.914         \$         13,922,044.00         \$         \$           93.914         \$         0.00         \$         15,962,602.00         \$         0.00           93.914         \$         0.00         \$         0.00         \$         0.00         \$         0.00           93.914         \$         0.00         \$         0.00         \$         0.00         \$         0.00           93.914         \$         0.00	Catalog of Federal Domestic Assistance Number (b)         Estimated Unobligated Funds         New or Revised Budget           Number (b)         Federal (c)         Non-Federal (d)         Federal (e)         Non-Federal (f)         Non-Federal (f)           93.914         \$         \$         \$         1,505,147.00         \$         \$           93.914         -         -         535,411.00         -         -         -           93.914         -         -         13,922,044.00         -		

		SECTION	<b>C</b> -	NON-FEDERAL RE	SC	OURCES			
(a) Grant Program				(b) Applicant		(c) State		(d) Other Sources	(e) TOTALS
8.			\$		\$		\$		\$ 0.00
9.									0.00
10.									0.00
11.									0.00
12. TOTAL (sum of lines 8-11)			\$	0.00	\$	0.00	\$	0.00	\$ 0.00
		SECTION	D٠	- FORECASTED CAS	SH	INEEDS			
		Total for 1st Year		1st Quarter		2nd Quarter		3rd Quarter	4th Quarter
13. Federal	\$	15,963,602.00	\$	3,990,900.50	\$	3,990,900.50	\$	3,990,900.50	\$ 3,990,900.50
14. Non-Federal		0.00							
15. TOTAL (sum of lines 13 and 14)	\$	15,963,602.00	\$	3,990,900.50	\$	3,990,900.50	\$	3,990,900.50	\$ 3,990,900.50
SECTION E - BU	DGE	T ESTIMATES OF	FE	DERAL FUNDS NEE	D	ED FOR BALANCE (	OF	THE PROJECT	
(a) Grant Program					-	FUTURE FUNDING	ΞP	· · · · ·	
				(b) First	_	(c) Second		(d) Third	 (e) Fourth
16.			\$		\$		\$		\$
17.									
18.									
19.									
20. TOTAL (sum of lines 16-19)				0.00	\$	0.00	\$	0.00	\$ 0.00
		SECTION F	- C	OTHER BUDGET INF	0	RMATION			
21. Direct Charges: 15,962,602				22. Indirect 8,440	C	harges:			
23. Remarks:									

# Section 2. Maintenance of Effort Documentation

# 1) Maintenance of Effort Table – See table below

	SF EMA MAINTENANCE OF EFFORT REPORTING CATEGORIES	Actual FY 2021-22	Anticipated FY 2022-23
	CORE MEDICAL SERVICE	S	
	AMBULATORY / OUTPATIENT MED	DICAL CARE	
•	San Francisco County: Total charges for ambulatory services from local General Funds spent on program expenses over and above costs of direct core medical service and support services to Ryan White eligible clients not otherwise funded by separate program agreements and/or outside revenue. (UCSF COE – AA, CCHAMP, Women's, CMHC, TWUHC-SFHN)	\$6,196,703	\$6,196,703
•	San Mateo County Primary Medical Care: Total charges for ambulatory services from local General Funds spent on program expenses over and above costs of direct core medical service and support services to Ryan White eligible clients not otherwise funded by separate program agreements and/or outside revenue.	\$345,756	\$350,000
	MENTAL HEALTH SERVIC	ES	
•	San Francisco County: Total charges for mental health services from local General Funds spent on a program expenses over and above costs of mental health services to Ryan White eligible clients not otherwise funded by separate program agreements and/or outside revenue. (SVABHS & UCSF Outpatient)	\$1,153,361	\$1,153,361
•	San Mateo County: Total charges for mental health services from local General Funds spent on a program expenses over and above costs of mental health services to Ryan White eligible clients not otherwise funded by separate program agreements and/or outside revenue.	\$74,265	\$74,500
	MEDICAL CASE MANAGEMENT	SERVICES	
	Marin County: Total charges for medical case management services from local General Funds spent on a program expenses over and above costs of medical case management services to Ryan White eligible clients not otherwise funded by separate program agreements and/or outside revenue.	\$79,143	\$81,787

SF EMA MAINTENANCE OF EFFORT REPORTING CATEGORIES	Actual FY 2021-22	Anticipated FY 2022-23
HOME HEALTH CARE SERV	ICES	
San Francisco County: Total charges for home health care services from local General Funds spent on a program expenses over and above costs of home health care services to Ryan White eligible clients not otherwise funded by separate program agreements and/or outside revenue. (Health at Home & Westside)	\$368,808	\$444,744
HOME & COMMUNITY BASED HEAL	TH SERVICES	
San Francisco County: Total charges for home & community-based health services from local General Funds spent on a program expenses over and above costs of home health care services to Ryan White eligible clients not otherwise funded by separate program agreements and/or outside revenue. (Westside)	\$515,417	\$578,609
SUPPORT SERVICES		
RESIDENTIAL SUBSTANCE ABUSE	SERVICES	
San Francisco County: Total charges for residential substance abuse services from local General Funds spent on a program expenses over and above costs of residential substance abuse services to Ryan White eligible clients not otherwise funded by separate program agreements and/or outside revenue. *This service category is not currently tracked by HIV status and as a result we are no longer including this in San Francisco's Maintenance of Effort due to reporting challenges	\$0*	\$0*
NON-MEDICAL CASE MANAGEMEN	IT SERVICES	
San Francisco County: Total charges for referral for Non- Medical Case Management (Benefits Counseling and Referrals) from local General Funds spent on a program expenses over and above costs of health care and supportive services to Ryan White eligible clients not otherwise funded by separate program agreements and/or outside revenue. (SFAF – Benefits Counseling)	\$291,690	\$291,690

	SF EMA MAINTENANCE OF EFFORT REPORTING CATEGORIES	Actual FY 2021-22	Anticipated FY 2022-23
•	San Francisco County: Total charges for non-medical case management (benefits counseling) services from local General Funds spent on a program expenses over and above costs of medical case management services to Ryan White eligible clients not otherwise funded by separate program agreements and/or outside revenue. (PRC work order)	\$252,072	\$252,072
•	San Francisco County: Total charges for non-medical case management (employment training and readiness services) services from local General Funds spent on a program expenses over and above costs of mental health services to Ryan White eligible clients not otherwise funded by separate program agreements and/or outside revenue. (PRC)	\$433,141	\$433,141
•	<b>San Francisco County:</b> Total charges for housing services from local General Funds spent on a program expenses over and above costs of housing services to Ryan White eligible clients not otherwise funded by separate program agreements and/or outside revenue.	\$6,039,951	\$6,039,951
	TOTAL MAINTENANCE OF EFFORT	\$15,750,307	\$15,896,558

#### 2) Description of Process to Determine Reported Expenditures

The San Francisco Office of AIDS Administration utilizes a diverse range of expense fields to track and monitor maintenance of effort expenditures, as described in the table above. This includes expenditures for core and non-core Part A services and expenditures that incorporate all three counties of the San Francisco EMA. Utilizing a cross-service approach provides a reliable indicator of continuing support for HIV/AIDS services throughout the region.

#### 3) Waiver

A waiver was not requested for the Maintenance of Effort section in the previous Ryan White Part A fiscal year.

SF-PPR

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration PERFORMANCE PROGRESS REPORT - SF-PPR NCC Progress Report Tracking (#): 00208343

Grantee Organization Information				
Federal Agency and Organization Element to Which Report is Submitted	Health Resources and Services Administration (HRSA)	Federal Grant or Other Identifying Number Assigned by Federal Agency	H89HA00006	
UEI	DCTNHRGU1K75	Employer Identification Number (EIN)	946000417	
Recipient Organization (Name and complete address including zip code)	CITY & COUNTY OF SAN FRANCISCO, 1380 HOWARD ST., SAN FRANCISCO California 94103 - 2614	Recipient Identifying Number or Account Number	208343	
Project / Grant Period	Start Date : 04/04/1991 End Date : 02/28/2025	Reporting Period End Date	02/29/2024	
Report Frequency	[X] annual [] semi-annual [] quarterly [] other			

Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.
Typed or Printed Name and Title of Authorizing Official John Aynsley , Authorizing Official John Aynsley , Authorizing Official (415) 437-6286

of Authorized Certifying Official		extension)	· · /
Email Address	john.aynsley@sfdph.org	Date Report Submitted (Month, Day, Year)	10/03/2022

SF-PPR-2 (Cover Page Continuation)	
DEPARTMENT OF HEALTH AND HUMAN SERVICES NCC Health Resources and Services Administration PERFORMANCE PROGRESS REPORT - SF-PPR-2 (Cover Page Continuation)	C Progress Report Tracking (#) : 00208343

Supplemental Continuation of SF-PPR Cover Page				
Department Name	San Francisco Dept of Public Health	Division Name	HIV Health Services	
Name of Federal Agency	Health Resources and Service Administration	Funding Opportunity Number	5-H89-23-001	
Funding Opportunity Title	Ryan White Part A HIV Emergency Relief Grant Program			

#### Lobbying Activities

Have you paid any funds for any lobbying activities related to this grant application (progress report)? Reminder, no Federal appropriated funds may be used for lobbying.

🗭 Yes 🕼 No

▼ OMB SF-LLL Disclosure of Lobbying Activities Form

No documents attached

Areas Affected by Project (Cities, County, State, etc.)		
Area Type	Affected Area(s)	
CA-12	Other	
CA-12	Other	

Point of Contact (POC) Information				
Title of Position	Name	Phone	Email	
Point of Contact	Mr. Bill Blum	(628) 206-7672	Bill.blum@sfdph.org	

Progress Report (Continuation Sheet)

### San Francisco, California EMA

#### Fiscal Year (FY) 2023 Non-Competing Continuation (NCC) Progress Report for the Ryan White HIV/AIDS Program (RWHAP) Part A HIV Emergency Relief Grant Program

#### **Performance Narrative**

A performance narrative is not required for this non-competing continuation application.

**RWHAP Part C recipient** 

# HRSA Ryan White HIV/AIDS Program (RWHAP) Core Medical Services Waiver Request Attestation Form

This form is to be completed by the Chief Elected Official, Chief Executive Officer, or a designee of either.

Please initial to attest to meeting each requirement after reading and understanding the explanation.

#### Name of recipient San Francisco Department of Public Health, HIV Health Services

	_	
	- 1	

X

Initial request

**RWHAP Part A recipient** 

Renewal request

**RWHAP Part B recipient** 

Year of request FY 2023-2024

REQUIREMENT No ADAP waiting lists	<b>EXPLANATION</b> By initialing here and signing this document, you attest there are no AIDS Drug Assistance Program (ADAP) waiting lists in the service area.
Availability of, and accessibility to core medical services to all eligible individuals	By initialing here and signing this document, you attest to the availability of and access to core medical services for all HRSA RWHAP eligible individuals in the service area within 30 days. Such access is without regard to funding source, and without the need to spend on these services, at least 75 percent of funds remaining from your RWHAP award after reserving statutory permissible amounts for administrative and clinical quality management. You also agree to provide HRSA HAB supportive evidence of meeting this requirement upon request.
Evidence of a public process	By initialing here and signing this document, you attest to having had a public process during which input related to the availability of core medical services and the decision to request this waiver was sought from impacted communities, including clients and RWHAP funded core medical services providers. You also agree to provide supportive evidence of such process to HRSA HAB upon request.

—DocuSigned by: Gry Wagner

SIGNATURE OF CHIEF ELECTED OFFICIAL OR CHIEF EXECUTIVE OFFICER (OR DESIGNEE)

Grant Colfax, MD

PRINT NAME

Director of Health, San Francisco Department of Public Health

TITLE

September 8, 2022

DATE

**Public Burden Statement:** An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is **0906-0065** and is **valid until 09/30/2024**. Public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N39, Rockville, Maryland, 20857.

# Instructions for filling out the Planning Council/Planning Body Membership Roster

Before the submission of your Membership Roster, please ensure you have adequately responded to the questions and they concur with your

Note: Most questions have a drop down menu of options, please click in the cell you want to respond in and the drop down arrow will present itself.

Name: Provide the name of the Planning Council (PC) or Planning Body (PB) member, with their permission. Please use an asterisk for self-identified PC/PB Position: Select the position that best reflect the PC/PB member's role.

**Agency Affiliation:** Provide the name of the provider agency the PC/PB member is an employee/affiliated

**Gender:** Select the gender that was self-reported for the PC/PB member from the drop-down menu.

**Race/Ethnicity:** Select the race that best reflect the PC/PB member from the drop-down menu.

**Membership Category:** Select the membership category that best reflects the PC/PB member from the drop-down menu. However, there are three exceptions to the rule on separate representation:

• One person may represent both the substance abuse provider and the mental health provider categories if his/her agency provides both types of services and the person is familiar with both programs.

• A single PC/PB member may represent both the Ryan White Part B program and the State Medicaid agency if that person is in a position of responsibility for both programs.

**Member Since:** Provide the year the PC/PB member became a PC/PB representative.

**Non-conflicted Client:** For each PC/PB member on the roster, enter 1 for unaligned and 0 for aligned.

**Terms:** Indicate how many terms the PC/PB member has served.

# Instructions for filling out the Planning Council/Planning Body Reflectiveness

Per Section 2602 (b)(1) of the Ryan White HIV/AIDS Treatment Extension Act of 2009 - the chief elected official shall establish or designate an HIV health services planning council that shall reflect in its composition the demographics of the population of individuals with HIV/AIDS in the eligible area involved, with particular consideration given to disproportionately affected and historically underserved groups and subpopulations. Reflectiveness must be based on the prevalence of HIV Disease (AIDS Prevalence plus HIV Prevalence, real or estimated) in your EMA/TGA as Auditionary, the PC/PB shall include representatives as instea in Section 2002(b)(2)(A-M) of the Ryan winte HIV/AIDS Treatment Extension Act of 2009

**Note**: the grant recipient must be able to demonstrate that the PC/PB is reflective of any disproportionately affected or historically underserved resultations in the invitediation for if MCM makes and for a first of a total accordance to the resistant must be able to demonstrate that this Please provide the most current HIV prevalence in the EMA/TGA in numbers and percentage, including the following elements:

**1.** Race and ethnicity: by number and percentage of people with HIV, by PC/PB membership and by unaligned client members of the PC/PB.

**2: Gender:** by number and percentage of people with HIV, by PC/PB membership and by unaligned members of the PC/PB.

**3. Age:** by number and percentage of people living with HIV, by PC/PB membership and by unaligned members of the PC/PB.

Please enter at the bottom of the PC/PB Roster comments explaining any non-compliance with Reflectiveness/Representation, please provide a detailed yet succint narrative on how you plan to comply; in addition, please list the membership categories that are currently vacant.

Note: This form should demonstrate reflectiveness at the date completed.

Membership Categories	Vacant (Y/N/NA)	Vacancy Duration (if applicable)	Comments (plan to fill position and if applicable challenges to fill position, explanation of all reported not-applicable categories):
Healthcare providers, including Federally Qualified Health Centers			
	No		
CBOs serving affected populations/AIDS Service Organizations (ASOs)	No		
Social Service Provider - housing and homeless services	No		
	No		
Social Service Provider - other	No		
Mental Health Provider	No		
Substance Abuse Provider	No		
Mental Health & Substance Abuse Provider			
Local Public Health Agencies	No		
Hospital planning agencies or other healthcare planning agencies	No		
Affected Communities, including PWH and historically underserved subpopulations	No		
Non-elected community leaders	No		
State Medicaid Agency			
State Part B Agency	Yes		
State Part B Agency & State Medicaid Agency	No		
Part C Recipient (s)			
	No		

Part D Recipients, or if none present, representatives of organizations addressing the needs of children, youth, and families with HIV	No	
Other Federal HIV Programs, including HIV Prevention programs	No	
Representatives of/or formerly-incarcerated PWH	No	

# FY 2022 Part A Planning Council/Planning Body N

Date the form was completed?

What is the minimum authorized/prescribed number of PC/PB members according to PC/PB bylaws?

How many individuals are currently serving PC/PB members?

What is the number of vacancies, if any?

What percentage of PC/PB members are unaligned clients?

Do at least two members of the PC/PB publicly disclose their HIV status?

Per the most current PC/PB bylaws are there term limits? If there are term limits, what are they?

Name (use an * to self-identify)	PC Position	Agency Affilation	Gender	Race/Ethnicity	Membership Categor
					Affected Communities,
Charles Adams					including PLWH and
charles Adams					historically underserved
	<b>PLWHA Representative</b>		Male	White	subpopulations
Bill Blum	Member	SFDPH HIV Health Services	Male	White	Recipients
Cesar Cadabes		UCSF			Non-elected community
Cesal Cauabes	PLWHA Representative	0031	Male	Asian	leaders
					Affected Communities,
Ed Chitty					including PLWH and
Ed Chitty					historically underserved
	PLWHA Representative		Male	White	subpopulations
Ms. Billie Cooper	PLWHA Representative		Transgen	Black or African American	Affected Communities, in
Zachary Davenport	Member	Alliance Health Project	Male	White	Mental Health Provider
Elaine Flores	Member		Female	Hispanic or Latino	Affected Communities, in
Matt Geltmaker	Member	San Mateo DPH	Male	White	Local Public Health Ager
David Gonzalez	Chair	Kaiser	Male	Hispanic or Latino	Non-elected community
Paul Harkin	Member	Healthright 360	Male	White	Substance Abuse Provid
Ronaldo Hernandez	PLWHA Representative		Male	Asian	Affected Communities, i
R. Lee Jewell	PLWHA Representative		Male	White	Affected Communities, in
Juba Kalamka	Member	St. James Infirmary	Male	Black or African American	Social Service Provider -
Chris Kent	Member	CA State Office on AIDS	Male	White	State Part B Agency & S
		SFDPH CHEP (Community			
Thomas Knoble	Chair	Health Equity & Promotion)	Male	Hispanic or Latino	Local Public Health Ager
Nga Le	Member	Marin DPH	Female	Asian	Local Public Health Ager
T.J. Lee-Miyaki	PLWHA Representative	Positive Resource Center	Male	White	CBOs serving affected po
Helen Lin	Member	UCSF	Female	Asian	Healthcare providers, in
Derrick Mapp	Member	Shanti Project	Male	Black or African American	CBOs serving affected po
Irma Parada	Chair	Jail Health Services	Female	Hispanic or Latino	Representatives of/or fo
Ken Pearce	PLWHA Representative		Male	White	Affected Communities, in
Courses Conside		SFDPH - Southeast Medical			
Gwen Smith	Member	Center	Female	Black or African American	Hospital planning agence
John Paul Soto	Member	Lutheran Social Services	Male	Hispanic or Latino	Social Service Provider -
Richard Sullivan	PLWHA Representative		Male	White	Affected Communities, in
Laura Thomas	Member	San Francisco AIDS Foundation	Female	White	CBOs serving affected po
Total					

Comments (If you are not in compliance with the Reflectiveness/Representation requirements of RWHAP Legislation such as but not limited to the the 33% non-conflicted client mandate, please provide a detailed and succint narrative on how you plan to comply; in addition, please list the membership categories that are currently vacant): Currently actively recruiting nonaligned consumers, especially from communities of color and youth. Recruitment efforts primarily through community needs assessment/focus groups and council member networks- last year's recruitment was particularly difficult because of in-person limitations due to COVID.

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includ       2008       1       7         - othe       2019       0       1         State M       2021       0       1         encies       2018       0       2         encies       2022       0       1         oopula       2014       1       4         ncludi       2019       0       1         oopula       2017       0       1         oopula       2020       0       1         oopula       2020       0       1         cies or       2016       0       3         - hous       2003       0       10         includ       2020       1       1	ders	2016		
- othe         2019         0         1           State N         2021         0         1           encies         2018         0         2           encies         2022         0         1           oopula         2014         1         4           ncludi         2019         0         1           oopula         2014         1         4           ncludi         2019         0         1           oopula         2020         0         1           former         2017         0         3           includ         1999         1         12           cies or         2016         0         3           - hous         2003         0         10           includ         2020         1         1	includ			
State N       2021       0       1         encies       2018       0       2         encies       2022       0       1         popula       2014       1       4         ncludi       2019       0       1         popula       2020       0       1         cies or       2016       0       3         - hous       2003       0       10         includ       2020       1       3			1	
2018       0       2         encies       2022       0       1         popula       2014       1       4         ncludi       2019       0       1         popula       2020       0       1         cormer       2017       0       3         includ       1999       1       12         cies or       2016       0       3         - hous       2003       0       10         includ       2020       1       3	- othe	2019	0	1
encies       2022       0       1         popula       2014       1       4         ncludi       2019       0       1         popula       2020       0       3         cormer       2017       0       3         cies or       2016       0       3         - hous       2003       0       10         includ       2020       1       3	State M	2021	0	1
Dopula         2014         1         4           ncludi         2019         0         1           Dopula         2020         0         1           Dopula         2020         0         1           Dopula         2020         0         1           Dopula         2020         0         1           Former         2017         0         3           includ         1999         1         12           cies or         2016         0         3           - hous         2003         0         10           includ         2020         1         1				
ncludi       2019       0       1         popula       2020       0       1         former       2017       0       3         includ       1999       1       12         cies or       2016       0       3         - hous       2003       0       10         includ       2020       1       1				
Dopula         2020         0         1           Former         2017         0         3           includ         1999         1         12           cies or         2016         0         3           - hous         2003         0         10           includ         2020         1         1				
Former         2017         0         3           includ         1999         1         12           cies or         2016         0         3           - hous         2003         0         10           includ         2020         1         1				
includ       1999       1       12         cies or       2016       0       3         - hous       2003       0       10         includ       2020       1       1         2016       0       3				
cies or     2016     0     3       - hous     2003     0     10       includ     2020     1     1				
cies or     2003     0     10       - hous     2020     1     1       includ     2020     0     3	includ	1999	1	12
includ 2020 1 1			0	
2016 0 3				
2016 0 3	includ	2020	1	1
	opula	2016	0	3

Planning Council/Planning Body Reflectiveness (Use HIV/AIDS Prevalence data as reported in your FY 2022 Application)												
		evalence in A/TGA		mbers of the C/PB	-	ed RWHAP on PC/PB						
Race/Ethnicity	Number	Percentage (include % with # )	Number	Percentage (include % with # )	Number	Percentage (include % with # )						
White, not Hispanic	7897	52.79%	12	48.00%	5	62.50%						
Black, not Hispanic	1859	12.43%	4	16.00%	1	12.50%						
Hispanic	3529	23.59%	5	20.00%	1	12.50%						
Asian/Pacific Islander	1098	7.34%	4	16.00%	1	12.50%						
American Indian/Alaska Native	0	0.00%	0	0.00%	0	0.00%						
Multi-Race	0	0.00%	0	0.00%	0	0.00%						
Other/Not Specified	577	3.86%	0	0.00%	0	0.00%						
Total	14960	100%	25	100%	8	100%						
Gender	Number	Percentage (include % with # )	Number	Percentage (include % with # )	Number	Percentage (include % with # )						
Male	13563	, 90.66%	18	72.00%	6	75.00%						
Female	1002	6.70%	6	24.00%	1	12.50%						
Transgender: male-to-female	395	2.64%	1	4.00%	1	12.50%						
Transgender: female-to-male	0	0.00%	0	0.00%	0	0.00%						
Additional gender identity	0	0.00%	0	0.00%	0	0.00%						
Total	14960	100%	25	100%	8	100%						
Age	Number	Percentage (include % with # )	Number	Percentage (include % with # )	Number	Percentage (include % with # )						
13-19 years	4	0.01%	0	0.00%	0	0.00%						
20-29 years	159	0.53%	0	0.00%	0	0.00%						
30-39 years	3893	13.01%	3	12.00%	0	0.00%						
40-49 years	8737	29.20%	2	8.00%	2	25.00%						
50-59 years	2167	7.24%	15	60.00%	2	25.00%						
60+ years	14960	50.00%	5	20.00%	4	50.00%						
Total	29920	100%	25	100%	8	100%						

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Recipient Information	Budget Year Award Information	
Official Mailing Address: 1380 Howard St, San Francisco, California, 94103-2638	RWHAP Part A Formula Award Amount\$9,169,2	292
EIN: 194600041	RWHAP Part A MAI Award Amount \$783,5	570
UEI: DCTNHRGU1K75	RWHAP Part A Supplemental Award Amount \$5,249,6	317
	Total RWHAP Part A Funds \$15,202,4	179
Preparer's Name: John Aynsley	HCPC Co-Chair: David Gonzalez (Dct 14, 2022	
Preparer's Title:		
Preparer's Phone: 4154376286	HCPC Co-Chair: Oct 14, 2022	
Preparer's Fax:	HCPC Co-Chair: Richard Stimuter (04:14, 2022	
Preparer's Email: john.aynsley@sfdph.org		

	Part A Program Totals													
	RWHAP Part A Award Amount		RWHAP Part A Amount	MAI Award	RWHAP Part A Award Amount		Total RWHAP	Part A Funds						
	Amount	Percent	Amount	Percent	Amount	Percent	Amount	Percent						
Non-Services														
a. Clinical Quality Management	\$350,000	2.60%	\$0	0.00%	\$0	0.00%	\$350,000	2.46%						
b. Administrative	\$833,172	6.20%	\$78,357	\$78,357 10.00%		0.00%	\$911,529	6.41%						
Non-services Subtotal	\$1,183,172	8.80%	\$78,357	10.00%	\$0	0.00%	\$1,261,529	8.87%						
c. Core Medical Services	\$7,135,483	53.09%	\$705,213	90.00%	\$0	0.00%	\$7,840,696	55.13%						
d. Support Services	\$5,120,655	38.10%	\$0	0.00%	\$0	0.00%	\$5,120,655	36.00%						
Total Service Allocations	\$12,256,138	91.20%	\$705,213	90.00%	\$0	0.00%	\$12,961,351	91.13%						
Total Allocations (Service + Non-service)	\$13,439,310	100.00%	\$783,570	100.00%	\$0	0.00%	\$14,222,880	100.00%						

**Breakdown of Services** 

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	RWHAP Part A Award Ar		RWHAP Part A Amou		RWHAP Part A S Award A		Total RWHAP Part A Funds		
Service	Amount Percen		Amount Percent		Amount	Percent	Amount	Percent	
Core Medical Services									
a. AIDS Drug Assistance Program Treatments	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	
b. AIDS Pharmaceutical Assistance	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	
c. Early Intervention Services (EIS)	\$129,176	1.05%	\$0	0.00%	\$0	0.00%	\$129,176	1.00%	
d. Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals	\$34,783	0.28%	\$0	0.00%	\$0	0.00%	\$34,783	0.27%	
e. Home and Community- Based Health Services	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	
f. Home Health Care	\$271,003	2.21%	\$0	0.00%	\$0	0.00%	\$271,003	2.09%	
g. Hospice	\$685,751	5.60%	\$0	0.00%	\$0	0.00%	\$685,751	5.29%	
h. Medical Case Management, including Treatment Adherence Services	\$2,952,773	24.09%	\$481,836	68.32%	\$0	0.00%	\$3,434,609	26.50%	
i. Medical Nutrition Therapy	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	
j. Mental Health Services	\$1,478,191	12.06%	\$223,377	31.68%	\$0	0.00%	\$1,701,568	13.13%	
k. Oral Health Care	\$832,918	6.80%	\$0	0.00%	\$0	0.00%	\$832,918	6.43%	
I. Outpatient/Ambulatory Health Services	\$750,888	6.13%	\$0	0.00%	\$0	0.00%	\$750,888	5.79%	
m. Substance Abuse Outpatient Care	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	
1. Core Medical Services Subtotal	\$7,135,483	58.22%	\$705,213	100.00%	\$0	0.00%	\$7,840,696	60.49%	

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Support Services	<b>*</b> ~	0.000/	<b></b>	0.000/	<b>\$</b>	0.000/	<b></b>	
a. Child Care Services	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%
b. Emergency Financial Assistance	\$879,675	7.18%	\$0	0.00%	\$0	0.00%	\$879,675	6.79%
c. Food Bank/Home Delivered Meals	\$462,492	3.77%	\$0	0.00%	\$0	0.00%	\$462,492	3.57%
d. Health Education/Risk Reduction	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%
e. Housing	\$328,208	2.68%	\$0	0.00%	\$0	0.00%	\$328,208	2.53%
f. Linguistic Services	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%
g. Medical Transportation	\$17,177	0.14%	\$0	0.00%	\$0	0.00%	\$17,177	0.13%
h. Non-Medical Case Management Services	\$2,351,766	19.19%	\$0	0.00%	\$0	0.00%	\$2,351,766	18.14%
i. Other Professional Services	\$300,118	2.45%	\$0	0.00%	\$0	0.00%	\$300,118	2.32%
j. Outreach Services	\$282,253	2.30%	\$0	0.00%	\$0	0.00%	\$282,253	2.18%
k. Psychosocial Support Services	\$498,966	4.07%	\$0	0.00%	\$0	0.00%	\$498,966	3.85%
I. Referral for Health Care and Support Services	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%
m. Rehabilitation Services	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%
n. Respite Care	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%
o. Substance Abuse Services (residential)	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%
2. Support Services Subtotal	\$5,120,655	41.78%	\$0	0.00%	\$0	0.00%	\$5,120,655	39.51%
3. Total Service Allocations	\$12,256,138	100.00%	\$705,213	100.00%	\$0	0.00%	\$12,961,351	100.00%

Recipient received waiver for 75% core medical services requirement: Yes

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#### Public Burden Statement:

The purpose of this data collection system is to collect allocations/expenditures information regarding Ryan White HIV/AIDS Program (RWHAP) Parts A, B, C, D grant funding. HAB will use these data to show the impact of RWHAP funding on the care and treatment of people with HIV in the United States. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 0915-0318 and it is valid until 09/30/2023. This information collection is mandatory (through increased Authority under the Public Health Service Act, Section 311(c) (42 USC 243(c)) and title XXVI (42 U.S.C. §§ 300ff-11 et seq.). Public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov

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Provider Registra tion Code	r Org ID	Name of Contractor / Consortium / Subcontract or / Provider	Street Address	City	State	Zip Code	Phone Number	EIN	Minority Provider	Faith - Based Org	Executed	Provides Direct Client Services	
17121	712	Catholic Charities Archdiocese of San Francisco	990 Eddy Street	San Francisco	CA	94109	(415)972-1211	94149847 2	No	Yes	Yes	Yes	
	Contrac t Number	Service Id	Service Name				Amount						
	401719	20	Non-Medical Case M	anagement S	Services				\$619,771	.00			
			SubTotal Per Provide	r:					\$619,771.00				
27145	714	Community Forward San Francisco	1171 Mission St	San Francisco	CA	94103- 1519	(415)241-1194	94233562 6	No	No	Yes	Yes	
	Contrac	Service Id	Service Name	ervice Name									
	τ Number												
	401720	26	Housing						\$230,977	.00			
			SubTotal Per Provide	r:					\$230,977	.00			
27292	729	HEALTH AT HOME/COM MUNITY HEALTH NETWORK, SFDPH	375 Laguna Honda Blvd., F5	SAN FRANCIS CO	CA	94116	(415)759-4782	94600041 7	No	No	Yes	Yes	
	Contrac t Number	Service Id	Service Name						Amount				

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27292	401734	13	Home Health Care						\$271,003	.00			
			SubTotal Per Provide	er:				\$271,003	.00				
27522	752	Rafiki Coalition for Health and Wellness	601 Cesar Chavez Street	San Francisco	CA	94124	(415)615-9945	94309887 9	No No Yes Yes				
	Contrac t Number	Service Id	Service Name				Amount						
	401730	20	Non-Medical Case M	lanagement	Services	6			\$450,359	.00			
			SubTotal Per Provide	er:					\$450,359	.00			
27574	757	San Mateo County AIDS Program	225 37th Ave	San Mateo	CA	94403	(650)573-2077	94600053 2	No	No	No	Yes	
	Contrac t Number	Service Id	Service Name			Amount							
	401731	11	Early Intervention Se	rvices (EIS)					\$129,176	.00			
	401731	23	Emergency Financia	Assistance					\$100,000.00				
	401731	24	Food Bank/Home De	livered Mea	s				\$348,000	.00			
	401731	26	Housing						\$20,000.0	00			
	401731	18	Medical Case Manag	jement, inclu	iding Tre	eatment /	Adherence Servi	ces	\$500,257	.00			
	401731	16	Mental Health Servic	es					\$99,579.00				
	401731	10	Oral Health Care	\$75,000.00									
	401731	8	Outpatient/Ambulato	ry Health Se	rvices				\$90,803.00				
			SubTotal Per Provide	er:					\$1,362,8 <sup>-</sup>	15.00			

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33533		UCSF Pediatric HIV/AIDS Program	533 Parnassus Ave. U-127	San Francisco	CA	94143	(415)514-2947	0	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name	Service Name								
	401742	18	Medical Case Manag	ement, inclu	ding Tre	atment A	Adherence Servi	ces	\$135,204	.00		
			SubTotal Per Provide	er:					\$135,204	.00		
35363		SFDPH City Clinic/STD Prevention Services	356 7th Street	San Francisco	CA	94103	415-487-5501	94- 6000417	No	No	No	Yes
	Contrac	Service Id	Service Name						Amount			
	ι Number											
	401732	18	Medical Case Manag	ement, inclu	ding Tre	atment A	Adherence Servi	ces	\$122,907	.00		
	401732	8	Outpatient/Ambulator	y Health Ser	vices				\$4,863.00	)		
,			SubTotal Per Provide	er:					\$127,770.00			
37104		ASIAN PACIFIC ISLANDER/ WELLNESS CENTER	730 POLK STREET, 4TH FLOOR	SAN FRANCIS CO	CA	94109	(415)292-3420	94309610 9	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name	rvice Name								
	401716	18	Medical Case Manag	edical Case Management, including Treatment Adherence Services						.00		
	401718	18	Medical Case Management, including Treatment Adherence Services \$701,563.00							.00		
,	401718	16	Mental Health Services \$36,940.00									
,			SubTotal Per Provide	er:					\$876,721.00			

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37336		INSTITUTO FAMILIAR DE LA RAZA	2919 MISSION STREET	SAN FRANCIS CO	CA	94116	(415)229-0500	94252360 8	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401722	18	Medical Case Manag	ement, inclu	ding Tre	eatment A	Adherence Servi	ces	\$138,546	.00		
	401722	16	Mental Health Service	es					\$105,854	.00		
			SubTotal Per Provide	er:					\$244,400	.00		
37393	739	MAITRI COMPASSIO NATE CARE	401 DUBOCE AVENUE	SAN FRANCIS CO	CA	94117	(415)558-3006	94318919 8	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401724	15	Hospice						\$685,751	.00		
			SubTotal Per Provide	er:					\$685,751	.00		
37442		MISSION NEIGHBORH OOD HEALTH CENTER	240 SHOTWELL STREET	SAN FRANCIS CO	CA	94110	(415)552-1013	94228436 5	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401727	18	Medical Case Manag	ement, inclu	ding Tre	eatment A	Adherence Servi	ces	\$681,529	.00		
	401727	16	Mental Health Service	es					\$223,377	.00		
	401727	8	Outpatient/Ambulator	y Health Sei	rvices				\$352,419	.00		
	401727	30	Outreach Services						\$282,253	.00		
			SubTotal Per Provide	er:					\$1,539,57	78.00		

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38538			1001 Potrero Avenue, Suite 7M12	San Francisco	CA	94110	(628)206-8797	94603649 3W	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401744	8	Outpatient/Ambulator	y Health Ser	vices				\$188,219	.00		
			SubTotal Per Provide	er:					\$188,219	.00		
47071			1663 Mission Street, Suite 500	SAN FRANCIS CO	CA	94103	(415)701-1200	94311173 8	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401714	42	Other Professional Se	ervices					\$300,118	.00		
			SubTotal Per Provide	er:					\$300,118	.00		
47474			973 Market St., 6th flr.	San Francisco	CA	94103	(415)972-0804	94307843 1	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401729	23	Emergency Financial	Assistance					\$686,635	.00		
	401729	20	Non-Medical Case Ma	anagement S	Services	;			\$608,303	.00		
			SubTotal Per Provide	er:					\$1,294,93	38.00		
47628		UCSF Positive Health Program	SFGH-Bldg 80, Ward 84-995 Potrero	San Francisco	CA	94110	(415)305-4882	94603649 3	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			

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47628	401743	18	Medical Case Manag	gement, inclu	ding Tre	atment /	Adherence Servi	ces	\$64,126.0	00		
			SubTotal Per Provide	ər:					\$64,126.0	00		
53288		County of Marin	3260 Kerner Blvd	San Rafael	CA	94901	(415)473-3373	0	No	No	No	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401725	24	Food Bank/Home De	livered Meal	S				\$114,492	.00		
			SubTotal Per Provide	ər:					\$114,492	.00		
63553		Native American Health Center	160 Capp Street	San Francisco	CA	94110	(415)621-8054	0	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401728	10	Oral Health Care						\$68,805.0	00		
	401728	10	Oral Health Care SubTotal Per Provide	er:					\$68,805.0 \$68,805.0			
66108	8312			er: San Francisco	CA	94102	(415)657-1742	94- 6000417			Yes	Yes
	8312	San Francisco Department of Public Health - COPC- Dental	SubTotal Per Provide	San	CA	94102	(415)657-1742		\$68,805.0	00	Yes	Yes
	8312 Contrac	San Francisco Department of Public Health - COPC- Dental Services Service Id	SubTotal Per Provide	San	CA	94102	(415)657-1742		\$68,805.0	D0 No	Yes	Yes

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67371	737	LUTHERAN SOCIAL SERVICES OF NORTHERN CALIFORNIA	290 8th Street	SAN FRANCIS CO	CA	94103	(415)581-0891	94165968 7	No	Yes	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401723	20	Non-Medical Case M	anagement	Services	;			\$555,333	.00		
			SubTotal Per Provide	er:					\$555,333	.00		
67661		UCSF Department of Psychiatry AIDS Health Project	UNIV OF CAL.SF BOX 0884	SAN FRANCIS CO	CA	94143	(415)476-3951	94603649 3	No	No	Yes	Yes
	t	Service Id	Service Name						Amount			
	Number 401741	18	Medical Case Manag	iomont inclu	uding Tro	atmont	Adhoronco Sorvi	005	\$51,560.0	0		
					iung ne	auneni	Authenenice Servi	663	ψ51,500.0			
					-				¢1 205 0/	10 00		
	401741		Mental Health Service	es					\$1,205,81			
	401741	16	Mental Health Service SubTotal Per Provide	es er:					\$1,257,37	78.00		
77268	401741		Mental Health Service	es	CA	94103	(415)539-2966	94600041 7			No	No
77268	401741 726	16 HIV & Integrated Services (HIVIS)	Mental Health Service SubTotal Per Provide 798 BRANNAN	es er: SAN FRANCIS	CA	94103	(415)539-2966		\$1,257,37	78.00	No	No
77268	401741 726	16 HIV & Integrated Services (HIVIS)	Mental Health Service SubTotal Per Provide 798 BRANNAN STREET	es er: SAN FRANCIS	CA	94103	(415)539-2966		\$1,257,37 No	78.00	No	No
77268	401741 726 <b>Contrac</b> t	16 HIV & Integrated Services (HIVIS) Service Id	Mental Health Service SubTotal Per Provide 798 BRANNAN STREET	es er: SAN FRANCIS CO				7	\$1,257,37 No	78.00 No	No	No
77268	401741 726 Contrac t Number	16 HIV & Integrated Services (HIVIS) Service Id 18	Mental Health Service SubTotal Per Provide 798 BRANNAN STREET Service Name	es er: SAN FRANCIS CO	iding Tre			7	\$1,257,37 No Amount	78.00 No	No	No

Report ID: 122471

#### H89HA00006 - SAN FRANCISCO PUBLIC HEALTH DEPARTMENT

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77613	761	SHANTI PROJECT	730 POLK STREET	SAN FRANCIS CO	CA	94109	(415)674-4754	94229749 7	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401737	18	Medical Case Manag	ement, inclu	ding Tre	atment A	Adherence Servi	ces	\$148,194	.00		
,	401737	32	Psychosocial Suppor	t Services					\$483,966	.00		
			SubTotal Per Provide	er:					\$632,160	.00		
77691	769	Health Right 360	520 TOWNSEND STREET	SAN FRANCIS CO	CA	94103	(415)762-3712	94171010 3	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401721	26	Housing						\$77,231.0	00		
			SubTotal Per Provide	er:					\$77,231.0	00		
83255		UCSF - 360 - Positive Care Center	400 Parnassus Ave.	San Francisco	CA	94143	(415)353-2282	0	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401740	18	Medical Case Manag	ement, inclu	ding Tre	atment A	Adherence Servi	ces	\$333,092	.00		
			SubTotal Per Provide	er:					\$333,092	.00		
87414	741	The Spahr Center	910 Irwin Street	SAN RAFAEL	CA	94901	(415)457-2487	68007247 0	No	No	No	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401726	23	Emergency Financial	Assistance					\$93,040.0	00		
	401726	12	Health Insurance Pre Individuals	mium and C	ost Shar	ing Assi	stance for Low-I	ncome	\$34,783.0	00		

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									-			
87414	401726	18	Medical Case Manag	jement, inclu	ding Tre	eatment /	Adherence Servi	ces	\$102,000	.00		
	401726	29	Medical Transportation	on					\$17,177.0	00		
	401726	16	Mental Health Servic	es					\$30,000.0	00		
	401726	20	Non-Medical Case M	anagement	Services	5			\$118,000	.00		
	401726	32	Psychosocial Suppor	t Services					\$15,000.0	00		
			SubTotal Per Provide	er:					\$410,000	.00		
87685		UOP SCHOOL OF DENTISTRY CARE PROGRAM	2155 WEBSTER STREET, CARE PROGRAM	SAN FRANCIS CO	CA	94115	(415)929-6672	94115626 6	No	No	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401745	10	Oral Health Care						\$447,241	.00		
			SubTotal Per Provide	er:					\$447,241	.00		
94711		CWH-St. Mary's Medical Center	2235 Hayes Street, 5th Floor	San Francisco	CA	94117	(415)750-5959	72- 1561126	No	Yes	Yes	Yes
	Contrac t Number	Service Id	Service Name						Amount			
	401739	18	Medical Case Manag	jement, inclu	ding Tre	eatment /	Adherence Servi	ces	\$180,292	.00		
	401739	8	Outpatient/Ambulator	ry Health Se	rvices				\$3,200.00	)		
			SubTotal Per Provide	er:					\$183,492	.00		
	Total for	All Contracts	Awarded:						\$12,961,3	351.00		

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**Report Status: Working** 

Last Modified Date: 08/03/2022 11:35 AM

	J	Name of Contractor / Consortium / Subcontract or / Provider	Street Address	City	State	Zip Code	Phone Number	EIN	ls Execut ed	Provides Direct Client Services		Service ID	Service Name		Minority Provider	Faith - Based Org
17121	712	Catholic Charities Archdiocese of San Francisco	990 Eddy Street	San Francis co	CA	94109	(415)972- 1211	9414984 72	Yes	Yes	401719	20	Non- Medical Case Manageme nt Services	\$619,771.00	No	Yes
27145	714	Community Forward San Francisco	1171 Mission St	San Francis co	CA	94103- 1519	(415)241- 1194	9423356 26	Yes	Yes	401720	26	Housing	\$230,977.00	No	No
27292	729	HEALTH AT HOME/COM MUNITY HEALTH NETWORK, SFDPH	375 Laguna Honda Blvd., F5	SAN FRANC ISCO	CA	94116	(415)759- 4782	9460004 17	Yes	Yes	401734	13	Home Health Care	\$271,003.00	No	No
27522	752	Rafiki Coalition for Health and Wellness	601 Cesar Chavez Street	San Francis co	CA	94124	(415)615- 9945	9430988 79	Yes	Yes	401730		Non- Medical Case Manageme nt Services	\$450,359.00	No	No
27574	757	San Mateo County AIDS Program	225 37th Ave	San Mateo	CA	94403	(650)573- 2077	9460005 32	No	Yes	401731	8	Outpatient/ Ambulatory Health Services	\$90,803.00	No	No
27574	757	San Mateo County AIDS Program	225 37th Ave	San Mateo	CA	94403	(650)573- 2077	9460005 32	No	Yes	401731	10	Oral Health Care	\$75,000.00	No	No
27574	757	San Mateo County AIDS Program	225 37th Ave	San Mateo	CA	94403	(650)573- 2077	9460005 32	No	Yes	401731		Early Intervention Services (EIS)	\$129,176.00	No	No
27574	757	San Mateo County AIDS Program	225 37th Ave	San Mateo	CA	94403	(650)573- 2077	9460005 32	No	Yes	401731	16	Mental Health Services	\$99,579.00	No	No

#### **CONSOLIDATED LIST OF CONTRACTS - Flat**

#### H89HA00006 - SAN FRANCISCO PUBLIC HEALTH DEPARTMENT

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27574	757	San Mateo County AIDS Program	225 37th Ave	San Mateo	CA	94403	(650)573- 2077	9460005 32	No	Yes	401731		Medical Case Manageme nt, including Treatment Adherence Services	\$500,257.00	No	No
27574	757	San Mateo County AIDS Program	225 37th Ave	San Mateo	CA	94403	(650)573- 2077	9460005 32	No	Yes	401731	23	Emergency Financial Assistance	\$100,000.00	No	No
27574	757	San Mateo County AIDS Program	225 37th Ave	San Mateo	CA	94403	(650)573- 2077	9460005 32	No	Yes	401731	24	Food Bank/Home Delivered Meals	\$348,000.00	No	No
27574	757	San Mateo County AIDS Program	225 37th Ave	San Mateo	CA	94403	(650)573- 2077	9460005 32	No	Yes	401731	26	Housing	\$20,000.00	No	No
33533	3533	UCSF Pediatric HIV/AIDS Program	533 Parnassus Ave. U-127	San Francis co	CA	94143	(415)514- 2947	0	Yes	Yes	401742		Medical Case Manageme nt, including Treatment Adherence Services	\$135,204.00	No	No
35363	3932	SFDPH City Clinic/STD Prevention Services	356 7th Street	San Francis co	CA	94103	415-487- 5501	94- 6000417	No	Yes	401732	8	Outpatient/ Ambulatory Health Services	\$4,863.00	No	No
35363	3932	SFDPH City Clinic/STD Prevention Services	356 7th Street	San Francis co	CA	94103	415-487- 5501	94- 6000417	No	Yes	401732		Medical Case Manageme nt, including Treatment Adherence Services	\$122,907.00	No	No
37104	710	ASIAN PACIFIC ISLANDER/W ELLNESS CENTER	730 POLK STREET, 4TH FLOOR	SAN FRANC ISCO	CA	94109	(415)292- 3420	9430961 09	Yes	Yes	401716		Medical Case Manageme nt, including Treatment Adherence Services	\$138,218.00	No	No
37104	710	ASIAN PACIFIC ISLANDER/W ELLNESS CENTER	730 POLK STREET, 4TH FLOOR	SAN FRANC ISCO	CA	94109	(415)292- 3420	9430961 09	Yes	Yes	401718	16	Mental Health Services	\$36,940.00	No	No

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37104	710	ASIAN PACIFIC ISLANDER/W ELLNESS CENTER	730 POLK STREET, 4TH FLOOR	SAN FRANC ISCO	CA	94109	(415)292- 3420	9430961 09	Yes	Yes	401718		Medical Case Manageme nt, including Treatment Adherence Services	\$701,563.00	No	No
37336	733	INSTITUTO FAMILIAR DE LA RAZA	2919 MISSION STREET	SAN FRANC ISCO	CA	94116	(415)229- 0500	9425236 08	Yes	Yes	401722	16	Mental Health Services	\$105,854.00	No	No
37336	733	INSTITUTO FAMILIAR DE LA RAZA	2919 MISSION STREET	SAN FRANC ISCO	CA	94116	(415)229- 0500	9425236 08	Yes	Yes	401722		Medical Case Manageme nt, including Treatment Adherence Services	\$138,546.00	No	No
37393	739	MAITRI COMPASSIO NATE CARE	401 DUBOCE AVENUE	SAN FRANC ISCO	CA	94117	(415)558- 3006	9431891 98	Yes	Yes	401724	15	Hospice	\$685,751.00	No	No
37442	744	MISSION NEIGHBORH OOD HEALTH CENTER	240 SHOTWELL STREET	SAN FRANC ISCO	CA	94110	(415)552- 1013	9422843 65	Yes	Yes	401727	8	Outpatient/ Ambulatory Health Services	\$352,419.00	No	No
37442	744	MISSION NEIGHBORH OOD HEALTH CENTER	240 SHOTWELL STREET	SAN FRANC ISCO	CA	94110	(415)552- 1013	9422843 65	Yes	Yes	401727	16	Mental Health Services	\$223,377.00	No	No
37442	744	MISSION NEIGHBORH OOD HEALTH CENTER	240 SHOTWELL STREET	SAN FRANC ISCO	CA	94110	(415)552- 1013	9422843 65	Yes	Yes	401727	18	Medical Case Manageme nt, including Treatment Adherence Services	\$681,529.00	No	No
37442	744	MISSION NEIGHBORH OOD HEALTH CENTER	240 SHOTWELL STREET	SAN FRANC ISCO	CA	94110	(415)552- 1013	9422843 65	Yes	Yes	401727	30	Outreach Services	\$282,253.00	No	No
38538	9570	UCSF/ Dept. of Psych./ DSAAM	1001 Potrero Avenue, Suite 7M12	San Francis co	CA	94110	(628)206- 8797	9460364 93W	Yes	Yes	401744	8	Outpatient/ Ambulatory Health Services	\$188,219.00	No	No

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47071	707	AIDS LEGAL REFERRAL PANEL	1663 Mission Street, Suite 500	SAN FRANC ISCO	CA	94103	(415)701- 1200	9431117 38	Yes	Yes	401714	42	Other Professional Services	\$300,118.00	No	No
47474	747	Positive Resource Center	973 Market St., 6th flr.	San Francis co	CA	94103	(415)972- 0804	9430784 31	Yes	Yes	401729		Non- Medical Case Manageme nt Services	\$608,303.00	No	No
47474	747	Positive Resource Center	973 Market St., 6th flr.	San Francis co	CA	94103	(415)972- 0804	9430784 31	Yes	Yes	401729		Emergency Financial Assistance	\$686,635.00	No	No
47628	762	UCSF Positive Health Program	SFGH-Bldg 80, Ward 84 -995 Potrero		CA	94110	(415)305- 4882	9460364 93	Yes	Yes	401743		Medical Case Manageme nt, including Treatment Adherence Services	\$64,126.00	No	No
53288	8102	County of Marin	3260 Kerner Blvd	San Rafael	CA	94901	(415)473- 3373	0	No	Yes	401725		Food Bank/Home Delivered Meals	\$114,492.00	No	No
63553	3553	Native American Health Center	160 Capp Street	San Francis co	CA	94110	(415)621- 8054	0	Yes	Yes	401728	10	Oral Health Care	\$68,805.00	No	No
66108	8312	San Francisco Department of Public Health - COPC- Dental Services	50 Ivy Street	San Francis co	CA	94102	(415)657- 1742	94- 6000417	Yes	Yes	401733	10	Oral Health Care	\$241,872.00	No	No
67371	737	LUTHERAN SOCIAL SERVICES OF NORTHERN CALIFORNIA	290 8th Street	SAN FRANC ISCO	CA	94103	(415)581- 0891	9416596 87	Yes	Yes	401723		Non- Medical Case Manageme nt Services	\$555,333.00	No	Yes
67661	766	UCSF Department of Psychiatry AIDS Health Project	UNIV OF CAL.SF BOX 0884	SAN FRANC ISCO	CA	94143	(415)476- 3951	9460364 93	Yes	Yes	401741	16	Mental Health Services	\$1,205,818.00	No	No

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67661	766	UCSF Department of Psychiatry AIDS Health Project	UNIV OF CAL.SF BOX 0884	SAN FRANC ISCO	CA	94143	(415)476- 3951	9460364 93	Yes	Yes	401741		Medical Case Manageme nt, including Treatment Adherence Services	\$51,560.00	No	No
77268	726	HIV & Integrated Services (HIVIS)	798 BRANNAN STREET	SAN FRANC ISCO	CA	94103	(415)539- 2966	9460004 17	No	No	401736	8	Outpatient/ Ambulatory Health Services	\$111,384.00	No	No
77268	726	HIV & Integrated Services (HIVIS)	798 BRANNAN STREET	SAN FRANC ISCO	CA	94103	(415)539- 2966	9460004 17	No	No	401736		Medical Case Manageme nt, including Treatment Adherence Services	\$137,121.00	No	No
77613	761	SHANTI PROJECT	730 POLK STREET	SAN FRANC ISCO	CA	94109	(415)674- 4754	9422974 97	Yes	Yes	401737		Medical Case Manageme nt, including Treatment Adherence Services	\$148,194.00	No	No
77613	761	SHANTI PROJECT	730 POLK STREET	SAN FRANC ISCO	CA	94109	(415)674- 4754	9422974 97	Yes	Yes	401737	32	Psychosoci al Support Services	\$483,966.00	No	No
77691	769	Health Right 360	520 TOWNSEN D STREET	SAN FRANC ISCO	CA	94103	(415)762- 3712	9417101 03	Yes	Yes	401721	26	Housing	\$77,231.00	No	No
83255	3255	UCSF - 360 - Positive Care Center	400 Parnassus Ave.	San Francis co	CA	94143	(415)353- 2282	0	Yes	Yes	401740		Medical Case Manageme nt, including Treatment Adherence Services	\$333,092.00	No	No
87414	741	The Spahr Center	910 Irwin Street	SAN RAFAE L	CA	94901	(415)457- 2487	6800724 70	No	Yes	401726	12	Health Insurance Premium and Cost Sharing Assistance for Low- Income Individuals	\$34,783.00	No	No

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CenterStreetRAFAE248787414741The Spahr Center910 Irwin StreetSAN RAFAE LCA94901(415 248787414741The Spahr Center910 Inwin StreetSAN RAFAE LCA94901(415 248787414741The Spahr Center910 Inwin StreetSAN RAFAE LCA94901(415 248787414741The Spahr Center910 Inwin StreetSAN RAFAE LCA94901(415 248787414741The Spahr Center910 Inwin StreetSAN RAFAE LCA94901(415 248787414741The Spahr Center910 Inwin StreetSAN RAFAE LCA94901(415 248787685768UOP SCHOOL OF DENTISTRY CARE PROGRAM2155 WEBSTER STREET, CARE PROGRAMSAN RAFAC CACA94115(415 6672	15)457-       6800724       No         187       70       No         15)457-       6800724       No	o Yes 4	01726 18 K 01726 20 K 01726 20 K 01726 20 K	Mental Health Services\$30,000.00Medical Case Manageme nt, including Treatment Adherence Services\$102,000.00Non- Medical 	No No
CenterStreetRAFAE248787414741The Spahr Center910 Irwin StreetSAN RAFAE LCA94901(415 248787414741The Spahr Center910 Irwin StreetSAN RAFAE LCA94901(415 248787414741The Spahr Center910 Irwin StreetSAN RAFAE LCA94901(415 248787414741The Spahr Center910 Irwin StreetSAN RAFAE LCA94901(415 248787414741The Spahr Center910 Irwin StreetSAN RAFAE LCA94901(415 248787685768UOP SCHOOL OF DENTISTRY CARE PROGRAM2155 WEBSTER STREET, CARE PROGRAMSAN RAFAE CACA94115(415 6672	487 <sup>°</sup> 70 15)457- 487 <sup>°</sup> 6800724 <sup>°</sup> No 15)457-6800724 <sup>°</sup> No	o Yes 4	01726 20 N C N C N C N	Case Manageme nt, including Treatment Adherence Services Non- Medical Case	
CenterStreetRAFAEL248787414741The Spahr Center910 Irwin StreetSAN RAFAE LCA94901(415 248787414741The Spahr Center910 Irwin StreetSAN RAFAE LCA94901(415 248787414741The Spahr Center910 Irwin StreetSAN RAFAE LCA94901(415 248787685768UOP SCHOOL OF DENTISTRY CARE PROGRAM2155 WEBSTER STREET, CARE PROGRAMSAN RAFAE LCA94115(415 6672	487 70 15)457- 6800724 No		N C N	Medical Case	No No
CenterStreetRAFAE248787414741The Spahr Center910 Irwin StreetSAN RAFAECA94901(415 2487)87414741The Spahr Center910 Irwin StreetSAN RAFAECA94901(415 2487)87685768UOP SCHOOL OF DENTISTRY CARE PROGRAM2155 				nt Services	
CenterStreetRAFAE248787414741The Spahr Center910 Irwin StreetSAN RAFAECA94901(415 2487)87685768UOP SCHOOL OF DENTISTRY CARE PROGRAM2155 WEBSTER STREET, CARE PROGRAMSAN FRANC SCOCA94115(415 6672)			F	Emergency \$93,040.00 Financial Assistance	No No
CenterStreetRAFAE248787685768UOP SCHOOL OF DENTISTRY CARE PROGRAM2155 WEBSTER STREET, 	15)457- 6800724 No 487 70	o Yes 4	Т	Medical \$17,177.00 Transportati on	No No
SCHOOL OF WEBSTER FRANC DENTISTRY STREET, ISCO CARE CARE PROGRAM PROGRAM	15)457- 6800724 No 487 70	o Yes 4	a	Psychosoci \$15,000.00 al Support Services	No No
	15)929- 9411562 Yes 672 66	es Yes 4		Oral Health \$447,241.00 Care	No No
94711 8313 CWH-St. 2235 Hayes San CA 94117 (415 Mary's Street, 5th Francis 5959 Medical Floor co	15)750- 72- Yes 959 1561126	es Yes 4	Д Н	Outpatient/ \$3,200.00 Ambulatory Health Services	No Yes
94711 8313 CWH-St. 2235 Hayes San CA 94117 (415 Mary's Street, 5th Francis Medical Center Co	15)750- 72- 1561126 Yes	es Yes 4	C N n T A	Medical \$180,292.00 Case Manageme nt, including Treatment Adherence Services	No Yes
		Total for All Contra	cts Awarded:	\$12,961,351.00	

# File Upload

#### H89HA00006 - SAN FRANCISCO PUBLIC HEALTH DEPARTMENT

 Budget Year: 3/1/2022 - 2/28/2023 11:59:59
 Report ID: 122471

 Report Status: Working
 Last Modified Date: 08/03/2022 11:35 AM

 Submission Components
 Support Status
 Size
 Date Attached

 Document Name
 Description
 Uploaded File
 Size
 Date Attached

# SFDPH - HHS - Part A - Planned Allocations Report - 2022-23 (v.2)

Final Audit Report

2022-10-14

Created:	2022-10-14
By:	Mark Molnar (mmolnar@shanti.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAc4yEGSXkxZIFqDfPRMbmZkgS-1ZMO4j1

# "SFDPH - HHS - Part A - Planned Allocations Report - 2022-23 (v.2)" History

- Document created by Mark Molnar (mmolnar@shanti.org) 2022-10-14 - 8:41:30 PM GMT- IP address: 98.234.234.17
- Document emailed to dgonzalez.cpg@gmail.com for signature 2022-10-14 - 8:42:51 PM GMT
- Document emailed to richardsullivan6734@gmail.com for signature 2022-10-14 - 8:42:51 PM GMT
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- Email viewed by richardsullivan6734@gmail.com 2022-10-14 - 8:42:56 PM GMT- IP address: 66.249.84.69
- Email viewed by malena.parada@icloud.com 2022-10-14 - 9:03:39 PM GMT- IP address: 104.28.124.101
- Signer malena.parada@icloud.com entered name at signing as Irma Parada 2022-10-14 - 9:04:44 PM GMT- IP address: 98.35.64.118
- Document e-signed by Irma Parada (malena.parada@icloud.com) Signature Date: 2022-10-14 - 9:04:45 PM GMT - Time Source: server- IP address: 98.35.64.118
- Signer richardsullivan6734@gmail.com entered name at signing as Richard Sullivan 2022-10-14 9:21:53 PM GMT- IP address: 50.1.125.168
- Document e-signed by Richard Sullivan (richardsullivan6734@gmail.com) Signature Date: 2022-10-14 - 9:21:54 PM GMT - Time Source: server- IP address: 50.1.125.168

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- Email viewed by dgonzalez.cpg@gmail.com 2022-10-14 - 11:34:49 PM GMT- IP address: 66.249.84.67
- Signer dgonzalez.cpg@gmail.com entered name at signing as David Gonzalez 2022-10-14 11:54:05 PM GMT- IP address: 104.129.198.211
- Document e-signed by David Gonzalez (dgonzalez.cpg@gmail.com) Signature Date: 2022-10-14 - 11:54:06 PM GMT - Time Source: server- IP address: 104.129.198.211

Agreement completed. 2022-10-14 - 11:54:06 PM GMT

, Adobe Acrobat Sign

From:	Altman, Claire (DPH)
To:	Chan, Connie (BOS); Mandelman, Rafael (BOS); Safai, Ahsha (BOS)
Cc:	Jalipa, Brent (BOS); Hsieh, Frances (BOS); Prager, Jackie (BOS); Thornhill, Jackie (BOS); Chung, Lauren (BOS); Trainor, Nikole (DPH); Blum, Bill (DPH); Neary, Beth (DPH); Scarafia, Jeff (DPH); Janssen, Julia (DPH); Taylor, Anthony (DPH); Wong, Greg (DPH); Validzic, Ana (DPH)
Subject:	2/1 Budget & Finance: DPH Retroactive Items
Date:	Thursday, January 26, 2023 4:34:14 PM

Hello Supervisors Chan, Mandelman and Safai,

The Department of Public Health (DPH) will request approval for five (5) retroactive items at the February 1<sup>st</sup> Budget & Finance committee meeting. We've provided a brief description of the items and our DPH representatives. Please let us know if you have questions or if you'd like to meet and discuss any of these items.

**File 221276 - Apply for Grant - Centers for Disease Control and Prevention - Integrated HIV Surveillance and Prevention Programs for Health Departments - \$7,804,306 -** Resolution authorizing the Department of Public Health to submit a one-year application for Calendar Year 2023 to continue to receive funding for the Integrated HIV Surveillance and Prevention Programs for Health Departments from the Centers of Disease Control and Prevention, and requesting \$7,804,306 in HIV prevention funding for San Francisco from January 1, 2023, through May 31, 2024.

- **Description**: These grant funds are awarded to the Department on an annual basis to cover an integrated HIV Surveillance and Prevention Program for San Francisco residents. The funds are utilized to support epidemiological activities required to support this system of HIV surveillance and prevention as well as direct services provided by the Department, or those subcontracted to qualified contractors selected through RFP.
- **<u>Reason for Retroactive Request</u>**: DPH is respectfully requesting retroactive approval for this grant application. Ordinance No. 265-05 requires that City Departments submit applications at least 60 days prior to the grant deadline for review and approval. For this grant, the CDC released the application announcement on September 17<sup>th</sup>, 2022, with a due date of October 17<sup>th</sup>, 2022, allowing 30 business days for the entire process. In the interest of timeliness, the Department is seeking retroactive approval by submitting this year's grant application.
- **DPH Representative**: Nikole Trainor | Budget, Contract and Communication Manager, Department of Public Health | email: <u>nikole.trainor@sfdph.org</u>

**File 221277 - Apply for Grant - Retroactive - Health Resources Services Administration - Ryan White Act HIV/AIDS Emergency Relief Grant Program - \$15,962,602** - Resolution retroactively authorizing the Department of Public Health to submit an application to continue to receive funding for the Ryan White Act HIV/AIDS Emergency Relief Grant Program grant from the Health Resources Services Administration; and requesting \$15,962,602 in HIV Emergency Relief Program funding for the San Francisco Eligible Metropolitan Area for the period of March 1, 2023, through February 29, 2024.

• **Description**: This application represents approximately \$15,962,602 in funding for the San Francisco Eligible Metropolitan Area (EMA). The San Francisco EMA includes the City and County of San Francisco, Marin County and San Mateo County. The funding supports a multitude of health services to HIV positive persons residing in these three counties.

**Reason for Retroactive Request**: DPH is respectfully requesting retroactive approval of this grant application. Ordinance No. 265-05 requires that City Departments submit applications at least 60 days prior to the grant deadline for review and approval. For this grant, HRSA released the application announcement on August 26<sup>th</sup>, 2022, with a due date of October 3<sup>rd</sup>, 2022, allowing 38 business days for the entire process. In the interest of timeliness, the Department is seeking retroactive approval by submitting the grant application.

- DPH Representatives:
  - Bill Blum | Director of Program, Primary Care & Director of HIV Health Services, Department of Public Health | email: <u>bill.blum@sfdph.org</u>
  - Beth Neary | HIV Health Services Assistant Director, Department of Public Health | email: <u>beth.neary@sfdph.org</u>

**File 230029 - Accept and Expend Grant - Retroactive - San Francisco Health Plan - CalAIM Incentive Payment Program (IPP) - \$316,800** - Resolution retroactively authorizing the Department of Public Health to accept and expend a grant in the amount of \$316,800 from the San Francisco Health Plan for participation in a program, entitled "CalAIM Incentive Payment Program (IPP)," for the period of September 12, 2022, through February 28, 2023.

- **Description**: This funding will be used to hire DPH information technology (IT) staff to support the approvals process, technical build, and implementation of CareLink, and increase the number of organizations and individuals who are able to use CareLink.
- <u>Reason for Retroactive Request</u>: DPH received the award agreement on September 14<sup>th</sup>, 2022, for a project start date of September 12<sup>th</sup>, as determined by the San Francisco Health Plan. Upon receiving the award agreement, DPH worked to prepare the budget and legislative packet. Once the budget and legislative packet were prepared, this grant required review by the City Attorney and the Controller's Office. The grant was sent to the City Attorney's Office on October 21<sup>st</sup>, and once reviewed was sent to the Controller's Office on November 8<sup>th</sup>. Once finalized, it was sent to the Mayor's Office on December 29<sup>th</sup>, 2022, for introduction on January 10<sup>th</sup>, 2023. We respectfully request retroactive approval to accept and expend these funds.
- **DPH Representative**: Jeff Scarafia | Deputy Chief Information Officer, Department of Public Health | email: jeff.scarafia@sfdph.org

#### File 230028 - Accept and Expend Grant - Retroactive - California Department of Public Health -Monkeypox Response Funding Award Number MPX-012 City & County of San Francisco -

**\$1,616,252** - Resolution retroactively authorizing the Department of Public Health to accept and expend a grant in the amount of \$1,616,252 from the California Department of Public Health for participation in a program, entitled "Monkeypox Response Funding Award Number MPX-012 City & County of San Francisco," for the period of July 1, 2022, through June 30, 2023.

- **Description**: The grant funding will provide Public Health Laboratory (PHL) with necessary equipment and supplies to support the ongoing Human Monkeypox Virus (MPX) response and testing of other communicable diseases.
- **<u>Reason for Retroactive Request</u>**: DPH received the award letter on October 7<sup>th</sup>, 2022, for a program start date of July 1<sup>st</sup>, 2022, as determined by the California Department of Public Health. Upon receiving the award letter, DPH worked to prepare the budget and legislative

packet. Once prepared, the grant was sent to the Controller's Office for review on November 17<sup>th</sup>. Once the Controller's Office review was complete, the packet was sent to the Mayor's Office on December 22<sup>nd</sup>, 2022, for introduction on January 10<sup>th</sup>, 2023. We respectfully request retroactive approval to accept and expend these funds.

• **<u>DPH Representative</u>**: Julia Janssen | Deputy Medical Director, STI Prevention and Control Section, Department of Public Health | email: <u>julia.janssen@sfdph.org</u>

**File 230027 - Accept and Expend Grant - Retroactive - California Department of Public Health -Sexually Transmitted Disease Program Management and Collaboration - \$1,365,222** - Resolution retroactively authorizing the Department of Public Health to accept and expend a grant increase in the amount of \$386,274 from the California Department of Public Health for a total amount of \$1,365,222 for participation in a program, entitled "Sexually Transmitted Disease Program Management and Collaboration," for the period of July 1, 2019, through June 30, 2024.

- **Description**: The funds will be used for the implementation of public health activities to monitor, investigate, and prevent sexually transmitted diseases (STD) in collaboration with community-based organizations within the local health jurisdiction.
- **Reason for Retroactive Request**: DPH received the original grant on December 3<sup>rd</sup>, 2019, for a project start date of July 1<sup>st</sup>, 2019. The original grant was approved by the Board of Supervisors on July 17<sup>th</sup>, 2020 (file 200639). In 2022, DPH received two grant increases: the first on March 25<sup>th</sup>, 2022, and the second on October 24<sup>th</sup>, 2022. Upon receiving these grant increases, the Department worked to prepare the updated program budget and the legislative packet. DPH forwarded the complete budget and grant packet to the Controller's Office for review on December 6<sup>th</sup>, 2022. Once the review was complete, the legislative packet was sent to the Mayor's Office on December 29<sup>th</sup>, 2022, for introduction on January 10<sup>th</sup>, 2023. We respectfully request retroactive approval to accept and expend these funds.
- **DPH Representative**: Anthony Taylor | HIV/STI Program Manager, Department of Public Health | email: <u>anthony.taylor@sfdph.org</u>

Thank you for your time and consideration of these items.

#### Claire

#### Claire Altman (Lindsay), MPH

Senior Health Planner | Office of Policy and Planning San Francisco Department of Public Health <u>claire.altman@sfdph.org</u> – updated email address City and County of San Francisco

## **Department of Public Health**



London N. Breed, Mayor

Grant Colfax, MD Director of Health

October 28, 2022

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

# RE: Resolution authorizing the San Francisco Department of Public Health (SFDPH) to apply for the Ryan White HIV/AIDS Program Part A HIV Emergency Relief Grant Program.

Dear Ms. Cavillo:

Attached please find an original and four copies of a proposed resolution for the approval of the Board of Supervisors, which authorizes the San Francisco Department of Public Health (SFDPH) to submit an application for the Ryan White Act HIV/AIDS Emergency Relief Grant Program (Ryan White Programs, Part A) to the Health Resources Services Administration (HRSA). This application is required to receive continued funding for the period of March 1, 2023 to February 29, 2024. This application represents approximately \$15,962,602 in funding for the San Francisco Eligible Metropolitan Area (EMA). The San Francisco EMA includes the City and County of San Francisco, Marin County and San Mateo County. The funding supports a multitude of health services to HIV positive persons residing in these three counties.

This resolution is required by Ordinance No. 265-05, which amends Section 10-170 of the Administrative Code to require Board of Supervisors review of recurring grant applications of \$5,000,000 or more prior to their submission. SFDPH received from HRSA the application guidance on August 26, 2022. The application deadline is October 3, 2022.

I hope that the Board will support this resolution. If you have any questions regarding the County Plan or this resolution, please contact Beth Neary, HIV Health Services Assistant Director at 628-206-7675.

Sincerely,

DocuSigned by: Greg Wagner 28527524752949F

Grant Colfax, MD Director of Health Greg Wagner, COO for Enclosures

cc: Bill Blum, Director of Program SFDPH Primary Care & Director of HIV Health Services Beth Neary, HIV Health Services Assistant Director Sajid Shaikh, Sr Admin Analyst, Community Programs Business Office City and County of San Francisco



London N. Breed, Mayor

Grant Colfax, MD Director of Health

#### Ryan White HIV Emergency Relief Grant Program (CARE Part A)

Funding Criteria

The San Francisco Department of Public Health (SFDPH) is currently a recipient of the Ryan White HIV/AIDS HIV Emergency Relief Grant Program (Ryan White Programs, Part A) in the amount of \$15,202,479 from the Health Resources Services Administration (HRSA). The Part A grant is awarded to the San Francisco Eligible Metropolitan Area which is comprised of the City and County of San Francisco, Marin County, and San Mateo County.

Eligible Metropolitan Areas (EMA) include communities with populations of 500,000 or more that have reported to the Centers of Disease Control and Prevention a total of more than 2,000 cases of AIDS in the most recent five calendar years.

#### Department's Most Recent Draft of Grant Applications Materials

Please see Attachment A for the SFDPH's most recent draft of application materials. SFDPH's most recent application was submitted to HRSA on October 3, 2022 for the funding period of March 1, 2023 to February 29, 2024.

#### Anticipated Funding Categories

The Part A funds are awarded to SFDPH on an annual basis to cover a multitude of health services to HIV positive persons residing in the three counties within the San Francisco EMA.

Please see Attachment B for an example of the FY 23-24 Planned Service Mode Allocations for the San Francisco EMA. The service modes are defined by HRSA. The San Francisco HIV Health Services Planning Council, a citizen advisory board, is responsible for determining the priorities and the allocation of funds within each HRSA service mode for the San Francisco EMA.

#### Comments from Relevant Citizen Advisory Board

The San Francisco HIV Community Planning Council, a citizen advisory board, is responsible for determining the priorities and the allocation of CARE Part A funds. A list of the members of the HIV Community Planning Council is included in Attachment C.

# INSTRUCTIONS FOR SENDING E-MAIL TO THE BOARD OF SUPERVISORS REGARDING PROPOSED LEGISLATION

As of Sept. 20, 2000, all legislation and attachments to be introduced to the Board of Supervisors are to be sent to the Board as attachment(s) to an e-mail message.

Please use the e-mail format between the double underlines below these messages. You must use it EXACTLY as shown (i.e., complete the fields, copy the entire area between the double underlines, start a new message in cc:Mail, and then paste the copy into the message area).

**NOTE:** all typeface is in Courier 12 pt so that, when copied/pasted, it will translate correctly in cc:Mail area, line up correctly, etc. Do not convert to any other typeface. Do not change tabs or spacing. Do NOT copy the double underlines.

**ADDITIONAL VITAL NOTE:** New Proposed Legislation <u>**MUST**</u> be e-mailed to BOS Legislation **no later than 9:00 a.m. Wednesday** in order to be included in the regular Board Agenda at the following week's regular Board meeting or for referral to Committee.

Remember to add the attachment(s) to the cc:Mail before you send it to BOS Legislation.

## CITY & COUNTY OF SAN FRANCISCO DEPARTMENT NAME: Public Health

## BOARD OF SUPERVISOR LEGISLATION

To: BOS Legislation

Date: Thursday, December 15, 2022

RE: New Proposed Resolution from Department of Health

Attached is proposed legislation concerning Ryan White Act HIV/AIDS Emergency Relief Grant Program (Ryan White Programs, Part A) Grant. This proposed legislation will be introduced by the Mayor or his designee shortly.

The attachments are listed below.

#### Attachment

# 1 File Name: Resolution authorizing the Department of Public Health to submit an application to continue to receive funding for the Ryan White Act HIV/AIDS Emergency Relief Grant Program grant from the Health Resources Services Administration, requesting \$15,962,602 in HIV Emergency Relief Program funding for the San Francisco Eligible Metropolitan Area for the period of March 1, 2023, through February 29, 2024.

Description: Grant Application - Health Resources Services Administration - Ryan White Act HIV/AIDS Emergency Relief Grant Program - \$15,962,602

- 1. Grant Application
- 2. Required Information, Per SF Administrative Code Sec. 10.170(B)
- 3. Board Letter and HIV Prevention Planning Council Membership List
- 4. 23-24 Waiver Percentages
- 5. Agreements and Compliance Assurances
- 6. Staffing and SF HIV Health Services RWPA Org Chart
- 7. Board Email
- 8. Board Resolution
- 9. Board Letter
- 10. FY 2023 Part A SF Planning Council Letter
- 11. FY 23-24 Budget Narrative and SF4242A
- 12. Maintenance of Effort
- 13. Mayors Office Cover Memo
- 14. NCC Progress Report- Submission Confirmation
- 15. Performance Narrative
- 16. SF HIV Health Services RWPA Org Chart 9.29.22
- 17. SFDPH HHS Part A 2023-24 NCC 75% Waiver Signed
- 18. SFDPH HHS Part A HCPC Roster 2022-23
- 19. SFDPH HHS Part A Planned Allocations Report 2022-23 (v.2) Signed

Contacts:

Name: Gregory Wong

Phone: 554-2521

# City and County of San Francisco



London N. Breed Mayor

TO:	Susanna Conine-Nakano, Liaison to the Board of Supervisors
FROM:	Gregory Wong Grants Analyst
DATE:	Thursday, December 15, 2022
SUBJECT:	Grant Application Accept and Expend

Attached, please find the original and 2 copies of the following Accept and Expends:

# Ryan White Act HIV/AIDS Emergency Relief Grant Program application - \$15,962,602

Please Note: This Accept and Expend packet is for the approval of the Ryan White Act HIV/AIDS Emergency Relief Grant Program application. This is a grant application for to continue to receive funding for the Ryan White Act HIV/AIDS Emergency Relief Grant Program (Ryan White Programs, Part A) grant from the Health Resources Services Administration, requesting \$15,962,602 in HIV emergency relief program funding for the San Francisco Eligible Metropolitan Area for the period of March 1, 2023, through February 28, 2024.

Please contact me at 415-554-2521 or via email at <u>greg.wong@sfdph.org</u> should you have any questions or concerns.

Thank You,

Gregory Wong