| Fil | le l | No. | 10 | 0( | 64 | 7 |
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|     |      |     |    |    |    |   |

| Committee Item No. | 7  |
|--------------------|----|
| Board Item No      | ). |

# COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

| Sub - Comm  | nittee: <u>Budget and Finance</u>              | Date: <u>June 9, 2010</u> |
|-------------|--|---------------------------|
| Board of Su | pervisors Meeting                              | Date:                     |
| Cmte Boa    | rd   |                           |
|             | Motion   |                           |
|             | Resolution                                     |                           |
|             | Ordinance                                      |                           |
|             | Legislative Digest                             |                           |
|             | Budget Analyst Report                          |                           |
|             | Legislative Analyst Report                     | •                         |
|             | Introduction Form (for hearing                 | •                         |
|             | Department/Agency Cover Let                    | tter and/or Report        |
|             | MOU  |                           |
|             | Grant Information Form                         |                           |
|             | Grant Budget                                   |                           |
|             | Subcontract Budget                             | ·                         |
|             | Contract/Agreement                             |                           |
|             | Award Letter                                   |                           |
|             | Application                                    |                           |
|             | Public Correspondence                          |                           |
| OTHER       | (Use back side if additional sp                | ·                         |
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|             | <u>,                                      </u> |                           |
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|             |  |                           |
| Completed I | by: Andrea S. Ausberry                         | Date Friday, June 4, 2010 |
| Completed I | by:  | Date                      |
| •           |  |                           |

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

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

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

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

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

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

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

RECOMMENDED;

Mitchell Katz, M.D. Director of Health APPROVED:

Mark Morewitz, Secretary to the Health Commission

# FORM SFEC-126: NOTIFICATION OF CONTRACT APPROVAL

(S.F. Campaign and Governmental Conduct Code § 1.126)

| City Elective Officer Information (Please print clearly.)   | 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2  |
|---|--|
| Name of City elective officer(s):   | City elective office(s) held:  |
| Members, Board of Supervisors   | Members, Board of Supervisors  |
| •   |  |
|   |  |
| Contractor Information (Please print clearly.)  |  |
| Name of contractor:   |  |
| Regents of the University of California   |  |
| Please list the names of (1) members of the contractor's board of a   | directors; (2) the contractor's chief executive officer, chief   |
| financial officer and chief operating officer; (3) any person who ha  | as an ownership of 20 percent or more in the contractor; (4)   |
| any subcontractor listed in the bid or contract; and (5) any political  | at committee sponsored or controlled by the contractor. Use  |
| additional pages as necessary.  (1) please see attached list of the Regents of the University of Cali                                 | forma  |
| (1) please see attached his of the Regents of the Oniversity of Carr (2) Mark G. Yudof, President, UC; J. Michael Bishop, Chancellor, | UCSF: Randy Lonez, Interim Vice Chancellor.  |
| Finance & Administration, UCSF  | t and the second second second to the second |
| (3) the University of California is a constitutional corporation  |  |
| (4) N/A   |  |
| (5) not reported  |  |
| Contractor address:   |  |
| Contracts & Grants Officer, UCSF Contracts & Grants/OSR 3333  | California St. Suite 315 San Francisco, CA 94118   |
| Date that contract was approved:  | Amount of contract:  |
| The Mark Mark Mark Mark Mark Mark Mark Mark   | \$12,818,814   |
| Describe the nature of the contract that was approved: (CCHAM   | P)   |
| Positive Health Program for the Chronic Ca  | are HIV/AIDS Multi-Disciplinary Program  |
|   |  |
| Comments:   |  |
|   | •  |
|   |  |
| This contract was approved by (check applicable):   | J  |
| ☐ the City elective officer(s) identified on this form  |  |
| X a board on which the City elective officer(s) serves: San Fr  | ancisco Board of Supervisors   |
|   | Print Name of Board  |
| ☐ the board of a state agency (Health Authority, Housing Auth   | hority Commission, Industrial Development Authority  |
| Board, Parking Authority, Redevelopment Agency Commissi   |  |
| Development Authority) on which an appointee of the City el   |  |
| Development randomy) on which an appointed of the City of   | toon to other (s) tookhileet on tills tolin sits   |
| Print Name of Board   |  |
|   |  |
| Filer Information (Please print clearly.)   |  |
| Name of filer:  | Contact telephone number:  |
| Clerk of the SF Board of Supervisors  | (415) 554-5184   |
| Address:  | E-mail:  |
| City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., SF, CA 94102  |  |
|   |  |
|   |  |
| Signature of City Elective Officer (if submitted by City elective off   | icer) Date Signed  |
| Signature of City Elective Officer (it sublitudes by City elective of   | zon) Date organia  |
|   |  |
| Signature of Board Secretary or Clerk (if submitted by Board Secre  | etary or Clerk) Date Signed  |
| S:\ALL FORMS\2(   | 1008\Form SFEC-126 Contractors doing business with the City 11.08.doc  |

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

#### Monica Lozano

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

## Hadi Makarechian

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

#### George M. Marcus

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

### Norman J. Pattiz

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

#### **Bonnie Reiss**

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

### Frederick Ruiz

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

### **Leslie Tang Schilling**

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

### D'Artagnan Scorza

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

## Bruce D. Varner

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

#### **Paul Wachter**

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

#### **Charlene Zettel**

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

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

## Faculty Representatives to The Regents

### Mary Croughan

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

#### **Harry Powell**

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

## Staff Advisors to The Regents

#### Bill Johansen

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

## Ed Abeyta

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

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

| City Elective Officer Information (Please print clearly.)  |  |
|--|--|
| Name of City elective officer(s):  | City elective office(s) held:  |
| Members, SF Board of Supervisor  | Members, SF Board of Supervisors   |
|  | -  |
|  |  |
| Contractor Information (Please print clearly.)   |  |
| Name of contractor:  |  |
| Regents of the University of California  |  |
| Please list the names of (1) members of the contractor's board of dire financial officer and chief operating officer; (3) any person who has any subcontractor listed in the bid or contract; and (5) any political additional pages as necessary.  (1) Please see attached list of the Regents of the University of C (2) Mark G. Yudof, President, UC; J. Michael Bishop, Chancell Finance and Administration, UCSF  (3) The University of California is a constitutional corporation (4) N/A  (5) Not reported  | an ownership of 20 percent or more in the contractor; (4) committee sponsored or controlled by the contractor. Use alifornia |
| Contractor address: Contracts and Grants Officer, UCSF Contract & Grants/OSR 3333 Contract & Grants/OSR 333 Contract & Grants/OSR 333 Contract & Grants/OSR 333 Contract & Grants/OSR 3 | alifornia St. Suite 315 San Francisco. CA 94118  |
| Date that contract was approved:   | Amount of contract:  |
| Date that contract was approved.   | \$14,501,626   |
| Describe the nature of the contract that was approved: Integrated substance abuse, mental health and medical services for comments:  | lients in the Opiate Treatment Program   |
|  |  |
| This contract was approved by (check applicable):  □the City elective officer(s) identified on this form  ☑ a board on which the City elective officer(s) serves: SF Board  Prio  □ the board of a state agency (Health Authority, Housing Authority, Parking Authority, Redevelopment Agency Commission Development Authority) on which an appointee of the City elections.   | nt Name of Board<br>rity Commission, Industrial Development Authority<br>a, Relocation Appeals Board, Treasure Island        |
| Print Name of Board  |  |
| Filer Information (Please print clearly.)  |  |
| Name of filer:   | Contact telephone number:  |
| Clerk of the San Francisco Board of Supervisors  | (415) 554-5184   |
| Address:   | E-mail:  |
| 1 Dr. Carlton B. Goodlett Pl. City Hall, Room 244, SF CA 94102   | Bos.legislation@sfgov.org  |
|  |  |
| Signature of City Elective Officer (if submitted by City elective office   | r) Date Signed   |
| Signature of Board Secretary or Clerk (if submitted by Board Secretar  | y or Clerk) Date Signed  |

## City and County of San Francisco

## **Department of Public Health**

Mitchell H. Katz, MD Director of Health



## Gavin Newsom Mayor

May 5, 2010

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

Dear Ms. Calvillo:

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

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

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

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

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

Sincerely,

Mitch Katz

Director of Health

cc: Gregg Sass, Chief Financial Officer, DPH

Barbara A. Garcia, Deputy Director of Health, Director Community Programs

Bill Blum, Director, DPH HIV Services

Anne Okubo, Chief Financial Officer, DPH Community Programs

Jacquie Hale, DPH Office of Contract Management and Compliance

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

#### SIXTH Amendment

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

## RECITALS

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

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

NOW THEREFORE, Contractor and the City agree as follows:

- 1. **Definitions.** The following definitions shall apply to this Amendment:
- a. Agreement. The term "Agreement" shall mean the Agreement dated November 1, 2005 (BPHC06500029and DPHC06500232) between Contractor and City, as amended by the FIRST Amendment dated February 28, 2007 (BPHC06500029/DPHC07000860), as amended by the SECOND Amendment dated November 28, 2007 (BPHC06500029/DPHC08000629), as amended by the THIRD Amendment dated February 5, 2008 (BPHC06500029/DPHC08000629), as amended by the FOURTH Amendment dated March 1, 2008 (BPHC06500029/DPHC08001215) and by the FIFTH Amendment dated July 1, 2009, (BPHC06500029/DPHC10000120)
- b. Other Terms. Terms used and not defined in this Amendment shall have the meanings assigned to such terms in the Agreement.
- 2. Modifications to the Agreement. The Agreement is hereby modified as follows:
- a. 2. Term of the Agreement

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

2. Term of the Agreement

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

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

1 of 4

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

Option 5: 03/01/2010-02/28/2011

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

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

## 2. Term of the Agreement

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

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

| 03/01/2006-02/28/2007 | Exercised   |
|-----------------------|---|
| 03/01/2007-02/28/2008 | Exercised   |
| 03/01/2008-02/28/2009 | Exercised   |
| 03/01/2009-02/28/2010 | Exercised   |
| 03/01/2010-02/28/2011 | Exercised   |
| 03/01/2011-02/28/2012 | Exercised   |
| 03/01/2012-02/28/2013 |   |
| 03/01/2013-02/28/2014 | •   |
| 03/01/2014-02/28/2015 |   |
|                       | 03/01/2007-02/28/2008<br>03/01/2008-02/28/2009<br>03/01/2009-02/28/2010<br>03/01/2010-02/28/2011<br>03/01/2011-02/28/2012<br>03/01/2012-02/28/2013<br>03/01/2013-02/28/2014 |

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

## 5. Compensation

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

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

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

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

## 5. Compensation

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

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

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

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

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

- a. Add Appendix A 03/01/10-02/29/12, Pages 1-4
- b. Add Appendix A-1 03/01/10-02/29/12, Pages 1-9
- c. Add Appendix B 03/01/10-02/29/12, Pages 1-5.
- d. Add Appendix B-1 03/01/10-02/28/11, Pages 1-3
- e. Add Appendix B-1a 03/01/10-02/28/11, Pages 1-3.
- f. Add Appendix B-1b 03/01/10-02/28/11, Pages 1-2.
- g. Add Appendix B-1c 03/01/10-02/28/11, Pages 1-2.
- h. Add Appendix B-1d 03/01/11-02/29/12, Pages 1-3.
- i. Add Appendix B-1e 03/01/11-02/29/12, Pages 1-3.
- j. Add Appendix B-1f 03/01/11-02/29/12, Pages 1-2.
- k. Add Appendix B-1g 03/01/11-02/29/12, Pages 1-2.
- I. Add Appendix F -1 03/01/10-02/28/11, Pages 1-2.
- m. Add Appendix F-1a 03/01/10-02/28/11, Pages 1-2.
- n. Add Appendix F-1b 03/01/10-02/28/11, Pages 1-2.
- o. Add Appendix F-1c 03/01/10-02/28/11, Pages 1-2.
- p. Add Appendix F-1d 03/01/11-02/29/12, Pages 1-2.
- q. Add Appendix F-1e 03/01/11-02/29/12, Pages 1-2.
- r. Add Appendix F-1f 03/01/11-02/29/12, Pages 1-2.
- s. Add Appendix F-1g 03/01/11-02/29/12, Pages 1-2.
- 3. Effective Date. Each of the modifications set forth in Section 2 shall be effective on and after the date of this Amendment.
- 4. Legal Effect. Except as expressly modified by this Amendment, all of the terms and conditions of the Agreement shall remain unchanged and in full force and effect.

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

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|          | CITY   |          | CONTRACTOR The Regents of the University of California Fax: (415) 476-8158   |   |
|----------|--|----------|--|---|
|          | Recommended by:  |          | UCSF Office of Sponsored Research<br>Contracts and Grants Division           |   |
|          |  |          | 3333 California Street, Suite 315  | •                                       |
|          | 1  |          | San Francisco, CA 94143-0962   |   |
|          | mul()  | 5/10/10  | (if overnight, use zip code 94118)   | ,                                       |
|          | MITCHELL H. KATZ, M.D. /                                     | Date     | By signing this Agreement, I certify   |   |
|          | Director of Health   |          | comply with the requirements of the  |   |
|          |  |          | Compensation Ordinance, which enti-<br>Covered Employees to certain minim    |   |
|          | Ammound on to Form:  |          | wages and compensated and uncomp   |   |
|          | Approved as to Form:   |          | time off.  |   |
|          | Dennis J. Herrera  |          | I have read and understood paragraph   |   |
|          | City Attorney  |          | City's statement urging companies d  |   |
|          |  |          | business in Northern Ireland to move<br>resolving employment inequities, end |   |
|          |  |          | compliance with the MacBride Princ   |   |
|          | ·  |          | urging San Francisco companies to d  |   |
|          |  |          | with corporations that abide by the M  | lacBride                                |
|          |  |          | Principles.  |   |
| By:      | Aleeta Van Runkle / Deputy City Attorney                     | Date     |  |   |
|          |  | (        | 27 Padlow  | 15-7-                                   |
|          |  |          | Erik Lium  | Date                                    |
|          |  |          | Contracts and Crants Officer   | NINI DADIZONIOZI                        |
|          | Approved:  |          | 4444 I autornia St. Suite 313  | OHN RADKOWSKI ONTRACTS & GRANTS OFFICER |
|          | . <del>**</del>  |          | San Francisco, CA 94143-0962   | MALLIMO 12 of Character of LIOPLIA      |
|          |  |          | City vendor number: 18373  |   |
|          | Naomi Kelly  | Date     |  |   |
|          | Director Office of Contract                                  | 22 420   |  |   |
|          | Administration and Purchaser                                 |          |  |   |
|          |  |          |  |   |
| <b>A</b> | Appendices   |          |  |   |
| A:       | Services to be provided by Contractor Calculation of Charges |          |  |   |
| B:<br>C: | Insurance Waiver   |          |  |   |
| D:       | Additional Terms   |          |  |   |
| E:       | HIPAA Business Associate Agreement (                         | omitted) |  |   |
| F:       | Invoice  | •        |  |   |
|          |  |          |  |   |

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UCSF Positive Health Program (PHP) - C-CHAMP Center of Excellence Ryan White Part A 03/01/10 - 02/29/12

# Appendix A Services to be provided by Contractor

#### 1. Terms

## A. Contract Administrator:

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

#### B. Reports:

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

## C. Evaluation:

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

## D. Possession of Licenses/Permits:

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

### E. Adequate Resources:

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

## F. Admission Policy:

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

## G. San Francisco Residents Only:

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

## H. Grievance Procedure:

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

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November 1, 2005

## UCSF Positive Health Program (PHP) – C-CHAMP Center of Excellence Ryan White Part A 03/01/10 – 02/29/12

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

## I. Infection Control, Health and Safety:

- (1) Contractor must have a Bloodborne Pathogen (BBP) Exposure Control plan as defined in the California Code of Regulations, Title 8, Section 5193, Bloodborne Pathogens (http://www.dir.ca.gov/title8/5193.html), and demonstrate compliance with all requirements including, but not limited to, exposure determination, training, immunization, use of personal protective equipment and safe needle devices, maintenance of a sharps injury log, post-exposure medical evaluations, and record keeping.
- (2) Contractor must demonstrate personnel policies/procedures for protection of staff and clients from other communicable diseases prevalent in the population served. Such policies and procedures shall include, but not be limited to, work practices, personal protective equipment, staff/client Tuberculosis (TB) surveillance, training, etc.
- (3) Contractor must demonstrate personnel policies/procedures for Tuberculosis (TB) exposure control consistent with the Centers for Disease Control and Prevention (CDC) recommendations for health care facilities and based on the Francis J. Curry National Tuberculosis Center: Template for Clinic Settings, as appropriate.
- (4) Contractor is responsible for correcting known site hazards, the proper use of equipment located at the site, the health and safety of their employees, and for all other persons who work at or visit the job site as per local and/or state regulations.
- (5) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as BBP and TB and demonstrate appropriate policies and procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.
- (6) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.
- (7) Contractor assumes responsibility for procuring all medical equipment and supplies for use by their staff, including safe needle devices, and provides and documents all appropriate training.
- (8) Contractor shall demonstrate compliance with all state and local regulations with regard to handling and disposing of medical waste.

## J. Acknowledgment of Funding:

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

## K. Research Study Records:

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

## L. Client Fees and Third Party Revenue:

- (1) Fees required by federal, state or City laws or regulations to be billed to the client, client's family, or insurance company, shall be determined in accordance with the client's ability to pay and in conformance with all applicable laws. Such fees shall approximate actual cost. No additional fees may be charged to the client or the client's family for the Services. Inability to pay shall not be the basis for denial of any Services provided under this Agreement.
- (2) Contractor agrees that revenues or fees received by Contractor related to Services performed and materials developed or distributed with funding under this Agreement shall be used to increase the gross program funding such that a greater number of persons may receive Services. Accordingly, these revenues and fees shall not be deducted by Contractor from its billing to the City.

## M. Patients Rights:

All applicable Patients Rights laws and procedures shall be implemented.

## N. <u>Under-Utilization Reports:</u>

## UCSF Positive Health Program (PHP) - C-CHAMP Center of Excellence Ryan White Part A 03/01/10 - 02/29/12

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

#### O. Quality Assurance:

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

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

## Other Miscellaneous Optional Provisions:

## P. Compliance With Grant Award Notices:

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

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

## 2. Description of Services

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

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

Program Summary

Chronic Care HIV/AIDS Multi-Disciplinary Program

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

(C-CHAMP) Center for Excellence

## UCSF Positive Health Program (PHP) – C-CHAMP Center of Excellence Ryan White Part A 03/01/10 – 02/29/12

## SUMMARY

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

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

Program Address: 995 Potrero Ave., Ward 86 City, State, Zip Code: San Francisco, CA 94110

Telephone: 415-206-6585 Facsimile: 415-502-9566

Nature of Document: Renewal

## 3. Goal Statement

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

4. Target Population

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

## 5. Modalities/Interventions

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

UCSF-Positive Health Program (Lead Agency)

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

UCSF- AIDS Health Project (AHP)

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

**UCSF-Substance Treatment Outpatient Program (STOP)** 

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

San Francisco AIDS Foundation (SFAF) Stonewall Project

| Period             | Mode of Service/Intervention Description                        |     | UDC |
|--------------------|---|-----|-----|
| 03/01/10- 02/28/11 | Substance Use Counseling Hours                                  |     |     |
| 00/01/10 01210/11  | 0.25 FTE x 37.5 hours per week x 45 weeks x approx 65.2% effort | 275 | 35  |
| 03/01/10- 02/28/11 | Substance Use Counseling Group Hours                            | ,   |     |
|                    | Three -1 hour groups per week x 45 weeks                        | 135 | 30  |
| Total UOS and U    | DC  | 410 | 35  |

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

## YEAR TWO

**UCSF-Positive Health Program (Lead Agency)** 

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

UCSF- AIDS Health Project (AHP)

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

UCSF-Substance Treatment Outpatient Program (STOP)

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

San Francisco AIDS Foundation (SFAF) Stonewall Project

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

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| 03/01/11-02/29/12 Grand Total UOS and UDC  |  |
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## **METHODOLOGY**

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

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

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

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

## **CLIENT OUTREACH**

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

## **ADMISSION INTO CCHAMP**

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

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

### SERVICE DELIVERY

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

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

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

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

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

The Stonewall Project's staff is responsible for:

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

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

## REASSESSMENT and DISCHARGE PLANS

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

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

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

UCSF / Positive Health Program / C-CHAMP Center of Excellence Ryan White Part A March 1, 2010 – February 29, 2012

### Substance Abuse Services:

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

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

## **Vouchers / Client Incentives**

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

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

## **Centralized Client Registration Database**

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

## 6. OBJECTIVES AND MEASUREMENTS

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

## 7. CONTINUOUS QUALITY IMPROVEMENT

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

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

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

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

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

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

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

The CQI committee works with:

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

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

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

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

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

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

## Substance Treatment Outpatient Program (STOP)

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

## **AIDS Health Project**

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

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

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

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

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

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The Stonewall Project

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

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

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

## **CLIENT PRIVACY / HIPAA**

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

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

# Appendix B Calculation of Charges

## 1. Method of Payment

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

## 2. Program Budgets and Final Invoice

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

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

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

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

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

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

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

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

|                 |  |              |  |           |                    |               |             | ,              |
|-----------------|--|--------------|--|-----------|--------------------|---------------|-------------|----------------|
|                 |  | ·            | ·                                      |           | C -                | I · D         | T           | · .            |
|                 | <u>A</u>   | <u></u>      | В                                      |           |                    | Appendix B    | Page :      |                |
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| 3               | 00   |              | T BUDGET SUMM                          |           |                    |               |             |                |
| 4               | Contractor's Name                                |              | sity of California,                    |           |                    | Contract Tern |             |                |
| 5               | Contractor's warne                               | <b></b>      | e Health Program                       |           |                    | {             | /1/10-2     | 128/12         |
| 6               |  | L            |  | 1400      | lification         |               |             |                |
| 7               | (Check One) New                                  | Renev        | al x                                   | MOC       | inication          |               |             |                |
| 8               | If modification, Effective Date of Mod.          | N            | lo. of Mod.                            |           |                    | <del>,</del>  | <del></del> |                |
|                 | Program Name:                                    | ) c          | CHAMP CoE                              | (         | CCHAMP CoE         |               |             |                |
| 9               | i logian raino.                                  | <del> </del> | an White Part A                        | Pv        | an White Part A    |               | 1           |                |
| , ,             | Dragram Narrativa Evhibit/Daga Na (a)            | , .          | pp. A-1, pp1-9                         |           | pp. A-1, pp1-9     |               |             | Contract Total |
|                 | Program Narrative Exhibit/Page No.(s)            | <del> </del> | /01/10-02/28/11                        |           | 3/01/11-02/29/12   |               |             |                |
|                 | Program Term  Expenditures:                      | 03           | 101110-02120111                        |           | 3/0 1/1 1-02/23/12 |               | -           |                |
| 12              | Experiorures. Salaries & Benefits                | \$           | 1,735,098                              | \$        | 1,735,098          |               | \$          | 3,470,196      |
|                 | Operating Expense                                | \$           | 46,759                                 | \$        | 46,759             | ļ             | \$          | 93,518         |
|                 | Capital Expenditure                              | 1            |  |           |                    |               | \$          |                |
|                 | Direct Cost                                      | \$           | 1,781,857                              | \$        | 1,781,857          |               | \$          | 3,563,714      |
|                 | Indirect Cost                                    | \$           | 160,368                                | \$        | 160,368            |               | \$          | 320,736        |
| -               | Indirect Percentage (%) of direct cost (Line 16) |              |  |           |                    |               |             |                |
| 18              |  |              | 9.0%                                   |           | 9.0%               | <u> </u>      | <u> </u>    | 9.0%           |
| 19              |  | \$           | 1,942,226                              | \$        | 1,942,226          | <u> </u>      | \$          | 3,884,452      |
| 20              | DPH Revenues by Source:                          |              |  |           |                    |               |             |                |
| 21              | (include CFDA# for Federal funding)              |              | 1.040.000                              | <u> </u>  | 4 042 226          |               | \$          | 3,884,452      |
|                 | CARE I - CFDA#93.914                             | \$           | 1,942,226                              | \$        | 1,942,226          |               | \$<br>\$    | 3,004,432      |
| 23              |  | <b> </b>     |  |           |                    |               | \$          |                |
| 24              |  | <del> </del> | ······································ |           |                    |               | \$          |                |
| 25              |  | <del> </del> |  |           |                    |               | \$          |                |
| 26<br>27        |  | <b> </b>     |  | <b></b> - |                    |               | \$          | -              |
| <u>21</u><br>28 | TOTAL DPH REVENUES                               | \$           | 1,942,226                              | \$        | 1,942,226          |               | \$          | 3,884,452      |
| 29              | Other Revenues:                                  | <u> </u>     |  |           |                    |               |             |                |
| 30              |  |              |  |           |                    |               | \$.         |                |
| 31              |  |              |  |           | -                  |               | \$          |                |
| 32              |  |              |  |           |                    |               | \$          | -              |
| 33              |  |              |  |           |                    |               | \$          | -              |
| 34              |  | ļ            |  |           |                    |               | \$          | -              |
| 35              | Total Revenues                                   | \$           | 1,942,226                              | \$        | 1,942,226          |               | \$          | 3,884,452      |
| 36              | Total Units of Service                           |              | 15,638                                 |           | 15,638             |               |             | 31,276         |
| 37              | Cost Per Unit of Service                         |              | \$124.20                               |           | \$124.20           |               |             | NA             |
|                 | Full Time Equivalent (FTE)                       |              | 15.75                                  |           | 15.75              |               |             | 31.50          |
|                 |  | 1            | rv-rv                                  | <u> </u>  | Telephone No.      | : 206-6585    |             |                |
|                 | Prepared by: Richard Bargetto                    |              |  |           | 10.0p.10110 110.   | <del></del>   |             |                |
| 41              | DPH-CO Review Signature:                         |              |  |           |                    | _             |             |                |
| 42              | DPH#1  |              |  |           |                    |               |             | April 1995     |

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| 1              |                                       | ,               |               |                           | i               | Appendix B F Document Date: 3 |                   |
| L              | Ryan White Part A                     |                 |               |                           | !               | Document Date.                | 3) (3)/2010       |
| 3<br>4<br>5    |                                       | Ç               |               | OF CLIENT S<br>BY PROGRAM |                 |                               |                   |
|                | Program Name UCSF-CCHA                | AMP Positive He | aith Progra   | m (PHP)                   |                 | TERM_                         | 03/01/10-02/28/11 |
| 8<br>9         |                                       |                 |               | Total                     | Na. of<br>Units | No. of<br>Clients             | Cost Per<br>Unit  |
| -              | Mode/Service Function & Unit Type (i. |                 | T.            | Cost                      |                 |                               |                   |
| 11             | Case Management, Individual           | Hours           | \$            | 177,316                   | 2,192           | 500                           | \$80.89           |
| 12             | Primary Medical Care Encount          | ers             | \$            | 1,045,003                 | 5,868           | 600                           | \$178.09          |
| 13             | Mental Health Hours                   |                 | \$            | 18,576                    | 240             | 120                           | \$77.40           |
| 14             | Substance Use Individual Cnsl         | . Hours         | \$            | 19,782                    | 240             | 120                           | \$82.43           |
| 15             | CoE Coordination, Planning &          | Evaluation      | \$            | 170,813                   | 1,620           | N/A                           | \$105.44          |
| 16             | Totals Tota                           | I UDC = 600     | \$            | 1,431,490                 | 10,160          | NA                            | \$140.89          |
| 17<br>18<br>19 | Program Name UCSF-CCH.                | AMP AIDS Healti | h Project (A  | .HP)                      |                 | TERM_                         | 03/01/10-02/28/11 |
| 20             | Mode/Service Function & Unit Type (i  | .e. hour)       | Total<br>Cost |                           | No. of<br>Units | No. of<br>Clients             | Cost Per<br>Unit  |
|                | Mental Health Encounters (Psy         |                 | \$            | 184,607                   | 950             | 250                           | \$194.32          |
| 23             | Case Management Hours                 |                 | \$            | 254,798                   | 3,850           | 140                           | \$66.18           |
| 24             | Totals Tota                           | d UDC = 250     | \$            | 439,405                   | 4,800           | NA                            | \$91.54           |
| 25<br>26<br>27 | Program Name UCSF-CCH                 | AMP Substance   | Treatment     | Outpatient Pro            | gram (STOP)     | TERM                          | 03/01/10-02/28/11 |
| 28             | Mode/Service Function & Unit Type (i  | .e. hour)       | Total<br>Cost |                           | No. of<br>Units | No. of<br>Clients             | Cost Per<br>Unit  |
| 30             | Substance Use Counseling H            |                 | \$            | 33,553                    | 265             | 50                            | \$126.62          |
| 31             |                                       |                 |               |                           |                 |                               |                   |
| 32             | Totals Tot                            | al UDC = 50     | \$            | 33,553                    | 265             | NA                            | \$126.62          |
| 33<br>34       | Program Name CCHAMP S                 | tonewall (SFAF) | - Laboura     |                           |                 | TERM                          | 03/01/10-02/28/11 |
| 35<br>36<br>37 | Mode/Service Function & Unit Type (i  | i.e. hour)      | ····          | Total<br>Cost             | No. of<br>Units | No. of<br>Clients             | Cost Per<br>Unit  |
| 38             | Substance Use Counseling Ho           | ours            | \$            | 24,458                    | 275             | 35                            | \$88.94           |
| 39<br>40       | Substance Use Counseling Gr           | oup Hours       | \$            | 13,320                    | 135             | 30                            | \$98.67           |
| 41             | Totals Tot                            | al UDC = 35     | \$            | 37,778                    | 410             | NA                            | \$92.14           |
| 42             |                                       |                 |               |                           |                 | I                             |                   |
| 40             |                                       |                 |               |                           |                 |                               |                   |
| 44             |                                       |                 |               |                           |                 | L'                            |                   |

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| 1        |                       | <u></u>                    |           |  | JE-10-11-11-11-11-11-11-11-11-11-11-11-11- | Appendix B Document Date: | Page 5<br>3/5/2010 |
| 3        | Ryan White Part A     |                            |           |  |  | Document Date.            | 3/3/2010           |
| 4        |                       | SI                         | JMMAR     | Y OF CLIENT                            |  |                           |                    |
| 5        |                       |                            |           | BY PROGRAI                             | VI   |                           |                    |
| 7        | Program Name          | UCSF-CCHAMP Positive Healt | h Progr   | am (PHP)                               |  | TERM                      | 03/01/11-02/29/12  |
| 8        |                       |                            | •         | Total                                  | No. of                                     | No. of                    | Cost Per           |
| 10       | Mode/Service Function | & Unit Type (i.e. hour)    |           | Cost                                   | Units                                      | Clients                   | Unit               |
| 11       | Case Management       | , Individual Hour          | \$        | 177,316                                | 2,192                                      | 500                       | \$80.89            |
| 12       | Primary Medical Ca    | are Encounter              | \$        | 1,045,003                              | 5,868                                      | 600                       | \$178.09           |
| 13       | Mental Health Hour    | S                          | \$        | . 18,576                               | 240  | 120                       | \$77.40            |
| 14       | Substance Use Ind     | ividual Cnsl. Hours        | \$        | 19,782                                 | 240  | 120                       | \$82.43            |
| 15       | CoE Coordination,     | Planning & Evaluation      | \$.       | 170,813                                | 1,620                                      | N/A                       | \$105.44           |
| 16       | Totals                | Total UDC = 600            | \$        | 1,431,490                              | 10,160                                     | N/A                       | \$140.89           |
| 17       |                       |                            |           |  |  |                           | •                  |
|          | Program Name          | UCSF-CCHAMP AIDS Health F  | roject (/ | AHP)                                   |  | TERM_                     | 03/01/11-02/29/12  |
| 19<br>20 |                       |                            | Total     |  | No. of                                     | No. of                    | Cost Per           |
|          | Mode/Service Function | & Unit Type (i.e. hour)    | Cost      |  | Units                                      | Clients                   | Unit               |
| 22       | Mental Health Enco    | ounters (Psychiatrist)     | \$        | 184,607                                | 950  | 250                       | \$194.32           |
| 23       | Case Management       | Hours                      | \$        | 254,798                                | 3,850                                      | 140                       | \$66.18            |
| 24       | Totals                | Total UDC = 250            | \$        | 439,405                                | 4,800                                      | N/A                       | \$91.54            |
| 25       |                       |                            |           |  |  |                           |                    |
| 26<br>27 | Program Name          | UCSF-CCHAMP Substance Tr   | eatment   | Outpatient Pro                         | gram (STOP)                                | TERM                      | 03/01/11-02/29/12  |
| 28       | ,                     |                            | Total     |  | No. of                                     | No. of                    | Cost Per           |
| 29       | Mode/Service Function | & Unit Type (i.e. hour)    | Cost      |  | Units                                      | Clients                   | Unit               |
| 30       | Substance Use Co      | unseling Hours             | \$        | 33,553                                 | 265  | 50                        | \$126.62           |
| 31       |                       |                            | <u> </u>  |  |  |                           |                    |
| 32       | Totals                | Total UDC = 50             | \$        | 33,553                                 | 265  | N/A                       | \$126.62           |
| 33       |                       | OOTHERD OF THE PROPERTY.   |           | •                                      |  | و به البرد ساليف          | nalnalias natonian |
| 34       | Program Name          | CCHAMP Stonewall (SFAF)    |           |  | •  | TERM_                     | 03/01/11-02/29/12  |
| 36       |                       |                            |           | Total                                  | No. of                                     | No. of                    | Cost Per           |
| 1        | Mode/Service Function | & Unit Type (i.e. hour)    | ·         | Cost                                   | Units                                      | Clients                   | Unit               |
| 38       | Substance Use Co      | unseling Hours             | \$        | 24,458                                 | 275  | 35                        | \$88.94            |
| 39<br>40 | Substance Use Co      | unseling Group Hours .     | \$        | 13,320                                 | 135  | 30                        | \$98.67            |
|          | Totals                | Total UDC = 35             | \$        | 37,778                                 | 410  | N/A                       | \$92.14            |
| 42       |                       |                            |           | ······································ |  |                           |                    |
| ਕਰ       |                       |                            | T-        |  |  |                           |                    |
| 44       |                       |                            |           |  |  |                           |                    |

|          | V                                       | ) l                        | _         |   | ш       | ī                  | ď       | I   |                  | -             | -             |            | -             | Σ       | Z           | 0         | Ω                       |           |
|----------|---|----------------------------|-----------|---|---------|--------------------|---------|---|------------------|---------------|---------------|------------|---------------|---------|-------------|-----------|-------------------------|-----------|
| ]-       | Name:                                   | F Positi                   | ealth Pro | ogram                                   | 1       | -                  |         |   | ,                |               | •             |            |               |         | Appe        | 7.        | Page 1                  |           |
|          | •                                       |                            |           |   | •       |                    |         | ¥   |                  |               |               |            |               |         | Docume      | int Date: | Document Date: 3/5/2010 |           |
| 1 W      | Appendix Term :                         | 03/01/10-02/28/11          | 2/28/11   |   | •       |                    |         |   |                  |               |               |            |               |         |             |           |                         |           |
| 4        | Fund Source:                            | Ryan White Part A          | e Part A  |   |         | !                  | 1       | ;<br>;  | 1                | (             | į             |            |               |         |             |           |                         | ,         |
| က ထ      |   |                            |           |   |         | SF DEPA<br>UOS (   | RTMEN:  | SF DEPARTMENT OF PUBLIC HEALTH CONTRACT UOS COST ALLOCATION BY SERVICE MODE | C HEAL<br>BY SEF | TH CONT       | RACT          |            |               |         |             |           |                         |           |
| r &      | UCSF Positive Health Program            | rogram                     |           |   |         |                    |         | ,   | ERVICE           | SERVICE MODES |               |            |               |         |             |           |                         |           |
| <u>}</u> |   | 0                          |           |   |         |                    |         |   |                  |               |               |            | Coordination, | tion,   |             |           |                         |           |
|          |   |                            | Case      | Case Management                         |         | Primary Care       | are     | Mental Health   | lealth           | Subst         | Substance Use |            | Planning &    | -త      |             |           | Contract Totals         | otals     |
| 0        | Personnel Expenses                      |                            |           | Hours                                   | _       | Medical Encounters | ounters | Hours   | TS               | Counse        | 21            |            | ξſ            | Hours   |             |           |                         |           |
| 5        | Position Titles                         | FTE                        | Salaries  |   | % Total | Salaries           | % Total | Salaries  | % Tota           | Salaries      | ss % Total    |            | Salaries      | % Total | Salaries    | % Total   |                         |           |
| 7        | Physicians                              | 2,12                       |           | *************************************** |         | 356,754            | 100%    |   |                  |               |               |            |               |         |             |           |                         | 356,754   |
| 72       |   | 76.0                       |           |   | 07      | \$ 125,000         | 100%    |   |                  |               |               |            |               |         |             | ·         | €\$                     | 125,000   |
| 55       |   | 0.64                       |           |   |         | \$ 90,000          | 100%    |   |                  |               |               |            |               |         |             |           | ₩.                      | 90,000    |
| 14       | - <del></del>                           | 17.0 (Or                   |           |   |         | \$ 100,000         | 100%    |   |                  |               |               | -          |               |         |             |           | €9                      | 100,000   |
| 15       | <del>~</del> ~~                         | -                          |           |   |         | \$ 84,800          | 100%    |   |                  |               |               |            |               |         |             |           | €                       | 84,800    |
| 16       | *************************************** | 0,71                       | \$ 52     | 52,079                                  | 81%     |                    |         |   |                  | \$ 12,080     |               | 19%        |               |         |             |           | ↔                       | 64,159    |
| 1,       | Case Manager (MSW)                      | 1,47                       | 8         | 84,000 8                                | 83%     |                    |         | \$ 14,300   | 0 14%            | 3,            | 3,149 3       | 3%         |               |         |             |           |                         | 101,449   |
| 18       |   | 0.75                       |           |   |         | \$ 27,909          | 100%    |   |                  |               |               |            |               |         |             |           | €-9-                    | 27,909    |
| 19       | +                                       | 0.01                       |           |   |         |                    |         |   |                  |               |               | ↔          | 2,503         | 100%    |             |           | ₩                       | 2,503     |
| 2        |   | sor 0.07                   |           |   |         | \$ 9,846           | 100%    |   |                  |               |               |            |               |         |             |           | \$                      | 9,846     |
| 27       |   | 4) 0.60                    |           |   |         |                    |         |   |                  |               |               | €>         | 41,800        | 100%    |             |           | ↔                       | 41,800    |
| 2        | +-                                      | 0.19                       |           |   |         |                    |         |   |                  |               |               | ↔          | 8,645         | 100%    |             |           | \$                      | 8,645     |
| 23       |   | mmer 0.89                  |           |   |         |                    |         |   |                  |               |               | ₩          | 78,548        | 100%    |             |           | ₩                       | 78,548    |
| 24       | Total FTE & Total Salaries              | 11.10                      | l ⇔       | 136,079                                 | 12%     | \$ 794,309         | L       | \$ 14,300   | 0 1%             | \$ 15,        |               | 1%   \$    | 131,496       | 12%     |             |           | \$                      | 1,091,413 |
| 25       | Fringe Benefits                         | 19.2%                      | 69        | 26,092                                  | 12%     | \$ 152,300         | 73%     | \$ 2,742  | 2 1%             | \$ 2,         | 2,920         | 1% \$      | 25,212        | 12%     |             |           |                         | 209,266   |
| 26       |   | 98                         | \$ 16.    | 162,171                                 | 12%     | \$ 946,609         | 73%     | \$ 17,042   | 2 1%             | \$ 18,        | 18,149 1      | 1%<br>\$   | \$ 156,708    | 12%     |             |           | €\$-                    | 1,300,679 |
| 128      |   |                            | Expen     |   | =       | Expenditure        | % Total | Expenditure   | e   % Total      | I Expenditure |               | % Total Ex | Expenditure   | % Total | Expenditure | % Total   | - 1                     | Totals    |
| 58       | General Operating                       |                            | ₩.        | \$ 505                                  | L       | \$ 12,109          | %96     |   |                  |               |               |            |               |         |             |           | <b>&amp;</b> ≯          | 12,614    |
| 30       | Total Operating Expenses                | 38                         | es-       | 505                                     | 4%      | \$ 12,109          | %96     |   |                  |               |               |            |               |         |             |           | \$                      | 12,614    |
| 76       |   |                            |           |   |         |                    | Ш       |   |                  |               | Ц             | H          |               |         |             |           |                         |           |
| 33       | Total Direct Expenses                   |                            |           | 162,676                                 |         | \$ 958,718         |         | -   |                  | - 1           | _             | 一          | 156,708       | 12%     |             |           | -                       | 1,313,293 |
| 32       | 34 Indirect Expenses                    |                            | \$        | 14,641                                  | 12%     | \$ 86,285          |         | \$ 1,534  |                  | \$ 1,         | 1,633         |            | 14,105        | 12%     |             |           | 6/3                     | 118,198   |
| 35       | TOTAL EXPENSES                          |                            | \$ 17     | 177,316                                 | 12%     | \$ 1,045,003       | 73%     | \$ 18,576   | 6 1%.            | &<br>10,      | 19,782        | 1%   \$    | 170,813       | 12%     |             |           |                         | 1,431,490 |
| 36       |   | Number of Units of Service | 8         | 2,192                                   |         | 5,868              | 8       | 240   | 01               |               | 240           |            | 1,620         | 0       |             |           | 10,160                  | 00        |
| 37       |   | Cost Per Unit of Service   | ec<br>ec  | \$80.89                                 |         | \$178.(            | 60      | \$77  | \$77.40          |               | \$82.43       | $\dashv$   | \$105.44      | 44      |             |           | \$140,89                | 88        |

•

## **Budget Justification**

## Salaries and Benefits

## **Physician**

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

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

## **Nurse Practitioner Team Leader and Providers**

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

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

#### Registered Nurse

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

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

#### **Clincal Pharmacist**

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

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

### **Medical Assistant**

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

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

## Licensed Clinical Social Worker

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

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

#### Social Worker (MSW)

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

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

## Front Desk Clerk

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

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

27,909

## Primary Investigator

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

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

## Nurse Practitioner Supervisor

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

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

#### CoE Coodinator

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

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

## CoE Administrative Assistant

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

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

## CoE IT - Computer Programmer

**TOTAL EXPENSE** 

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

| for the entire CCHAIMP population.  |   |       |           |
|---|---|-------|-----------|
|   | Annual Salary \$88,005 x 0.892540 FTE = | \$    | 78,548    |
| Total Salaries:   |   | \$    | 1,091,413 |
| Benefits @ 19.1739 % of total salaries  |   | \$    | 209,266   |
| TOTAL SALARIES & BENEFITS:  |   | \$    | 1,300,679 |
| General Operating Expenses Occupancy Rental of space for HERO staff @ \$736.34 per mo per 0.9 FTE | •                                       | \$    | 7,952     |
| UCSF Computer Network Charges<br>Standard charge for staff use, maintenence and setup of comput   | er network @ approx \$35/mo x 11.1 FTE  | \$    | 4,662     |
| Subtotal Expenses:  |   | \$    | 12,614    |
| Total Operating Expenses  |   | \$    | 1,313,293 |
| INDIRECTS Administrative Cost Indirect expense charged by UCSF at 9% of total direct cost of the  |   | ing e | expenses  |

incurred by the University, including building maintenance, library and student services.

| INDIRECT COSTS (@ 9% of direct costs) | _\$ | 118,198   |
|---------------------------------------|-----|-----------|
| TOTAL EXPENSE                         | •   | 1,431,490 |

Н K F G Appendix B-1a Page 1 Contractor Name: UCSF Positive Health Program Document Date: 3/5/2010 03/01/10-02/28/11 Appendix Term: 3 Ryan White Part A 4 Fund Source: SF DEPARTMENT OF PUBLIC HEALTH CONTRACT 5 6 UOS COST ALLOCATION BY SERVICE MODE SERVICE MODES AIDS Health Project (AHP) Mental Health Case Management Contract **Encounters** Hours 9 Personnel Expenses **Totals** % of Total % of Total Salaries FTE Salaries 10 Position Titles 140,733 100% 0.80 \$140,733 11 Psychiatrist \$ 125,874 \$ 125,874 2.600 Case Manager \$ 39,488 0.400 39,488 Clinical Supervisor 13 \$ 4,114 4,114 0.100 Program Assistant \$ 15 \$ 16 \$ 17 \$ 18 \$ 310,209 55% \$ 169,476 3.90 \$140,733 45% Total FTE & Total Salaries 19 65,271 \$ 55% 45% 35,659 21.0% \$ 29,612 Fringe Benefits 375,480 55% 45% \$ 205,135 Total Personnel Expenses \$170,344 22 Contract Totals Expenditure % of Total Expenditure % of Total 23 Operating Expenses 16,386 \$ 16,386 Occupancy 24 5,621 \$ \$ 5,621 Materials and Supplies 2,718 \$ \$ 2,718 General Operating \$ 1,283 1,283 Staff Travel 27 \$ Consultants/Subcontractor: 28 \$ 29 30 Other: 1,636 134 1,502 \$ 31 Computer Network Charges 32 33 34 35 36 37 38 39 40 \$ 27,644 27,510 134 **Total Operating Expenses** \$ 41 42 Capital Expenditures 43 44 45 46 Total Capital Expenditures \$ 403,124 \$ 232,645 58% 42% Total Direct Expenses \$170,478 47 \$ 36,281 61% \$ 14,129 39% 22,152 48 Indirect Expenses 439,405 58% 42% \$ 254,798 \$184,607 TOTAL EXPENSES 49 50 4,800 Number of Units of Service 3,850 950 51 \$91.54 \$66.18 Cost Per Unit of Service \$194.32 52 53 Rev. 1/98 54 DPH #1A(1)

USCF - CCHAMP Center of Excellence AIDS Health Project Ryan White Part A 03/01/10 - 2/28/11

## Budget Justification UCSF CCHAMP AIDS Health Project

#### Salaries and Benefits

### **Psychiatrist**

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

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

### Case Manager

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

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

125,874

### Clincal Social Worker Supervisor

Responsible for oversight of ase managers, as well as planing, coordination and delivery of servcies to clients.

Minimum qualifications: LCSW required. Experience with severe

need clients and supervising case management staff. Knowledge of HIV/AIDS. Responsible for ARIES/HERO compliance, and other administrative tasks as assigned.

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

\$ 39,488

### **Program Assistant**

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

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

| Annual Salary \$41,136 x .10 FTE = | \$<br>4,114 |
|------------------------------------|-------------|
|                                    |             |

Total Salaries \$ 310,209

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

TOTAL Salaries and Benefits \$ 375,480

|  | enaix : | s-ra, Page |
|--|---------|------------|
| AIDS Health Project Ryan White Part A  |         |            |
| 03/01/10 - 2/28/11   |         |            |
| · · ·  |         |            |
|  |         |            |
| Occupancy:   |         |            |
| Rent:  |         |            |
| Monthly rent expense for the proportion (11%) of clinic space utilized by program.                         | ,       |            |
| • • -  | \$      | 40.200     |
| \$12,414 per month x 11% x 12 months =   | Φ       | 16,386     |
| Materials and Supplies:  |         |            |
| Office Supplies:   |         |            |
| General office supplies such as pens, paper, medical chart   |         |            |
| supplies, and postage expenses for client communication,   |         |            |
| proportionate to program utilization.  |         |            |
| \$151.09 per month x 3.1 FTE x 12 months =   | \$      | 5,621      |
|  |         |            |
| General Operating:   |         |            |
| Staff Training:  |         |            |
| Staff training activities  |         |            |
| 3.1 FTE x \$200 per training   | \$      | 620        |
| o, i i i i i i i i i i i i i i i i i i i   | Ψ.      | 020        |
| Computer Software/Hardware:  |         |            |
| Includes updating computer hardware and software to maintain   |         |            |
| equiptment that holds client medical records, cliet satisfation data                                       |         |            |
| etc. \$56.41 per month x 3.1 FTE x 12 months =   | \$      | 2,098      |
|  |         |            |
| Staff Travel (Local & Out of Town):  |         |            |
| Travel expenses for Outreach and Case Management Staff for   |         |            |
| transportation to client homes, appointment escorts, meetings, and   |         |            |
| inservices.  |         | 4.000      |
| \$41.13 per month x 2.6 FTE x 12 months =  | \$      | 1,283      |
| 046  |         |            |
| Other:   |         |            |
| UCSF Computer Network Charges:   |         |            |
| Standard charge from UCSF for staff use, maintenence and setup   |         |            |
| of computer network. The network services rate will be approximately \$35/month per pro-rated FTE.         |         |            |
| \$35 per month x 3.8951 FTE x 12 months =  | \$      | 1,636      |
| Total Operating Expenses   | \$      | 27,644     |
| Total Opogating Expenses   | •       | ,,         |
| Total Direct Expenses  | \$      | 403,124    |
|  | •       | 7          |
| Indirect Expense   |         |            |
| Indirect expense is charged by UCSF at 9% of total direct cost to cover operating expenses incurred by the |         |            |
| University, including building maintenance, library and student services.                                  |         |            |
| Total Indirect Expense   | \$      | 36,281     |
| Total Indirect Expense   | *       | 00,20      |
| TOTAL EVDENCE  | \$      | 439,405    |
| TOTAL EXPENSE  | φ       | ~~;**UJ    |

**USCF - CCHAMP Center of Excellence** 

|          |  |                |             |                                       |          | ·                                      |  |  |  |      |            |             |             |
|----------|--|----------------|-------------|---------------------------------------|----------|--|--|--|--|------|------------|-------------|-------------|
|          | A .   B  | ТсП            |             | D                                     | E        | F                                      | T G                                    | Т  | 1 1  | TJT  | К          |             | L           |
| 1        |  | Positive Hea   | lth P       |                                       | h        | ······································ |  |  | <del></del>                                      |      | dix B-1b I | Page 1      |             |
| 2        | Contractor Name  | · collive tree |             |                                       |          |  |  |  |  |      | nt Date: 3 |             |             |
| 3        | Appendix Term:   | 03/01/10-02/   | 28/11       |                                       |          |  |  |  |  |      |            |             |             |
|          | Fund Source:   | Ryan White F   |             |                                       |          |  |  |  |  |      |            |             |             |
| 5        |  |                |             |                                       | ENT OF P | UBLIC HEA                              | LTH CON                                | TRACT  |  |      |            |             |             |
| 6        |  |                |             |                                       |          | TION BY S                              |  |  |  |      |            |             |             |
| 7        |  |                |             |                                       | •        |  |  |  |  |      |            |             |             |
| ·        | a la de la companya d | ¢ D            |             |                                       |          |  |  |  |  |      |            |             |             |
|          | Substance Treatment Outpatie   | nt Program     |             |                                       |          |  |  |  |  |      |            |             |             |
| 8        | (STOP)   |                |             |                                       |          | SER                                    | VICE MOD                               | )ES  |  | 7    |            |             |             |
|          | •  | j              | •           | ubstance /                            |          |  |  |  |  |      | 27         | Co          | ntract      |
|          | Personnel Expenses   | <del></del>    |             | ounseling                             |          |  | <del></del>                            | -  | <del></del>                                      | ₩    |            | τ.          | otals       |
|          | Position Titles  | FTE            |             | alaries                               | % Total  |  |  | 1  | <del></del>                                      | ╢    |            | \$          | 20,748      |
|          | Substance Use Counselor (PhD)  | 0.160          | \$          | 20,748                                |          |  |  | <del></del>                                      | +  | ╂──┼ |            | \$          | 1,786       |
|          | Data Entry Specialist  | 0.045          | \$          | 1,786                                 | 100%     |  |  |  |  | ╂──┼ |            | ₹           | 1,700       |
| 13       |  |                | <u> </u>    |                                       |          |  | -                                      | 1  | 1  | ╂──┼ |            |             |             |
| 14       |  |                | ļ           |                                       |          |  | +                                      |  | 1  | ╢──┼ |            |             |             |
| 15       |  | _              | <u> </u>    | ·····                                 |          |  |  | -  | +  | ╂──┼ |            |             |             |
| 16       |  |                | ļ           |                                       |          |  |  | -  | 1  | ╂──┼ |            | ·····       |             |
| 17       |  | 0.005          | -           | 22.624                                | 100%     |  |  |  | -  | ╫──┼ |            | \$          | 22,534      |
| 18       |  | 0.205<br>19.9% | \$          | 22,534<br>4,480                       | 100%     | ]                                      | <u> </u>                               | <del>                                     </del> | +  | ╂──┼ |            | \$          | 4,480       |
|          | Fringe Benefits  | 19.976         | \$          | 27,014                                | 100%     |  |  | -  |  | ╂    |            | \$          | 27,014      |
| 20       | Total Personnel Expenses   | !              | Φ           | 27,014                                | 10076    | <u> </u>                               | _1                                     | <u> </u>   |  |      |            | Ψ           | 2017A1.1    |
| 21       | B  | ı              |             |                                       | % Total  | · · · · · · · · · · · · · · · · · · ·  | ······································ | 1  | 7  | T    |            | Conf        | ract Totals |
|          | Operating Expenses   |                | \$          | penditure<br>3,357                    | 100%     | ļ                                      |  | <del> </del>                                     | <del>-  </del>                                   | ╂──┼ |            | \$          | 3,357       |
| 23       | Occupancy  |                | Φ.          | 3,357                                 | 10076    | <u> </u>                               | <del></del>                            |  | +  | ╫┈┼  |            | Ψ           | 0,001       |
|          | Materials and Supplies   |                | <del></del> |                                       |          | <u> </u>                               |  |  |  | ╂─┼  |            | <del></del> |             |
|          | General Operating Staff Travel   |                | ļ           |                                       |          | <u> </u>                               |  |  | -  | ╂──┼ |            |             |             |
| 27       | Consultants/Subcontractor:   |                |             |                                       |          |  |  | <u> </u>   | -  | 1    |            |             |             |
| 28       | Consultants/Subcontractor.   |                |             | · · · · · · · · · · · · · · · · · · · |          |  | +                                      | <b></b>  | <del>                                     </del> | 1 1  |            |             |             |
| ~~~~     | Other:   |                |             |                                       |          |  | 1 .                                    |  | <b></b>  |      |            | -           |             |
|          | Operating expense - Utilities  |                | \$          | 316                                   |          | <b></b>                                |  |  | 1  | 1 1  |            | \$          | 316         |
| 31       | Computer Network Charges   |                | \$          | 96                                    |          |  |  |  | 1  |      |            | \$          | 96          |
| 32       | Compace Action Charges   | ·              | <u> </u>    |                                       |          |  |  |  |  |      |            |             |             |
| 33       |  |                |             |                                       |          |  |  |  |  |      |            |             |             |
|          |  |                |             |                                       |          |  |  |  |  |      |            |             |             |
| 34<br>35 |  |                |             |                                       |          |  |  |  |  |      |            |             |             |
| 36       |  |                |             |                                       |          |  |  |  |  |      |            |             |             |
| 37       |  |                |             |                                       |          |  |  |  |  |      |            |             |             |
| 38       |  |                |             |                                       |          |  |  |  |  |      |            |             |             |
| 39       |  |                |             |                                       |          |  |  |  |  |      |            |             |             |
| 40       |  |                |             |                                       |          |  |  |  |  | 1    |            |             |             |
| 41       |  |                |             |                                       |          |  |  |  |  | 1    |            |             |             |
| 42       | Total Operating Expenses   |                | \$          | 3,769                                 | 100%     |  | <u> </u>                               |  |  |      |            | \$          | 3,769       |
| 43       |  |                |             |                                       |          |  |  |  |  |      | •          |             |             |
| 44       | Capital Expenditures   |                | τ           |                                       | 1        |  |  | II.  | · · · · · · · · · · · · · · · · · · ·            |      |            |             |             |
| 45       |  |                |             |                                       | ļ        | ļ                                      |  | -  |  | 4    |            |             |             |
| 46       |  |                |             |                                       |          |  |  | <b></b>  |  |      |            |             |             |
| 47       | Total Capital Expenditures   |                |             |                                       |          |  |  |  |  | 4    |            |             |             |
| 48       |  |                | \$          | 30,783                                | 100%     |  |  |  |  | 4    |            | \$          | 30,783      |
|          | Indirect Expenses  |                | \$          | 2,770                                 | 100%     |  |  |  | <del></del>                                      | 4    |            | \$          | 2,770       |
| 50       | TOTAL EXPENSES   |                | \$          | 33,553                                | 100%     | <u> </u>                               |  | <u> </u>   |  | 11   | i          | \$          | 33,553      |
| 51       |  |                | т           |                                       |          |  |  | - <del>1</del>                                   |  | п    |            |             | ~~~         |
| 52       | Number of Un   | its of Service |             | 268                                   |          |  |  |  |  |      |            |             | 268         |
| 53       | Cost Per U   | nit of Service | <u> </u>    | \$125.2                               | U        | 1                                      |  | 1  |  |      | j          | \$          | 125.20      |
|          | i  |                |             |                                       |          |  |  |  |  |      |            |             |             |
| 54       | DPH #1A(1)   |                |             |                                       |          |  |  |  |  |      |            |             | Rev. 1/9    |

20.748

33,553

USCF - CCHAMP Center of Excellence DSAAM - STOP Ryan White Part A 03/01/10 - 2/28/11

## Budget Justification UCSF CCHAMP

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

## **Addiction Medicine Psychologist**

TOTAL EXPENSE

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

| Altitudi Galary \$120,000 x 110000 1 12  | Ψ. | 20,1.10 |
|--|----|---------|
| Data Entry Specialist  |    |         |
| Responsible for data entry of data base for STOP program and Reggie & ARIES data base systems and other clerical duties as assigned.   |    |         |
| Annual Salary \$39,338 x .04541 FTE =  | \$ | 1,786   |
| Total Salaries   | \$ | 22,534  |
| Fringe Benefits:   |    |         |
| Social Security, Worker's Comp., health benefits, unemployment, state and federal taxes @ 19.9%  | \$ | 4,480   |
| TOTAL SALARIES & BENEFITS  | \$ | 27,014  |
|  |    |         |
| Operating Expenses   |    |         |
| Rent - based on FTE @ 279.79/month   | \$ | 3,357   |
| Utilities - based on FTE, \$26.33/month  | \$ | 316     |
| UCSF Computer Network Charges: Standard charge from UCSF for staff use, maintenence and setup  |    |         |
| of computer network @ approximately \$35/month per pro-rated 0.23 FTE.   | \$ | 96      |
| Total Operating Expenses   | \$ | 3,769   |
| TOTAL Direct Expenses  | \$ | 30,783  |
| INDIRECT COSTS   |    |         |
| Indirect expense is charged by UCSF at 9% of total direct cost to cover operating expenses incurred by the University, including building maintenance, library and student services. |    |         |
| by the University, including building maintenance, notary and diadent convictor.   | \$ | 2,770   |
|  |    |         |

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

|                  | Α                    | В                       | С         |           | D              | E            |              | F         | G          | Н        | 1  | <u> </u> | }                                      | K        |             | L               |
|------------------|----------------------|-------------------------|-----------|-----------|----------------|--------------|--------------|-----------|------------|----------|--|----------|--|----------|-------------|-----------------|
| 1                | Contractor Name:     | UCSF Po                 |           | ealth     |                |              | <u> </u>     |           |            |          |  | A        | ppend                                  | x B-1c   | Page 1      |                 |
| 2                | COMMISSION NUMBER    |                         |           |           |                | •            |              |           |            |          |  |          |  | t Date:  |             |                 |
| 3                | Term:                | 0                       | 3/01/10-2 | 2/28/1    | 1              |              |              |           |            |          |  |          |  |          |             |                 |
|                  | Fund Source:         | R                       | yan White | Part      | A              |              |              |           |            |          |  |          |  |          |             |                 |
| 5                |                      |                         |           |           | SF DEPA        |              |              |           |            | CONTRAC  | T  |          |  |          |             |                 |
| 6                |                      |                         |           |           | uos            | COST AL      | LOC          | CATION    | BY SERVI   | CE MODE  |  |          |  |          |             |                 |
| 4<br>5<br>6<br>7 |                      |                         | _         |           |                |              |              |           |            |          |  |          |  |          |             |                 |
|                  | Stonewall            |                         |           |           |                |              |              | SE        | RVICE MO   | DDES     |  |          |  |          |             |                 |
|                  |                      |                         |           |           | *****          |              |              | Substanc  | e Use      |          |  |          |  |          |             |                 |
|                  |                      |                         | Į         |           | Substance      | Use          | Co           | ounseling | g Group    |          |  |          |  |          | Co          | ontract         |
| 9                | Personnel Expense    | s                       |           | ~~~~      | unseling       |              | <u> </u>     | Hou       |            |          | ···  |          |  |          |             |                 |
|                  | Position Titles      |                         | FTE       |           | alaries        | % of Total   |              | alaries   | % of Total |          | <u> </u>   |          |  |          |             | otals           |
| _                | Counselor            |                         | 0.37      | \$        | 12,714         | 63%          | \$           | 7,453     | 37%        |          |  |          |  |          | \$          | 20,167          |
|                  | Psychologist         |                         | 0.09      | \$        | 4,986          | 68%          | \$           | 2,347     | 32%        |          | -  | _        |  |          | \$          | 7,333           |
| 13               |                      |                         |           |           |                |              | <u> </u>     |           |            |          | <del> </del>                                     |          |  |          | <del></del> |                 |
| 14               |                      |                         |           |           |                |              | <u> </u>     |           |            |          |  |          |  |          |             |                 |
| 15               |                      |                         |           |           |                |              |              |           |            |          |  |          |  |          |             | ····            |
| 16               |                      |                         |           | <b> </b>  |                | <b> </b>     | <del> </del> |           |            |          | <b> </b>   |          | <del></del>                            |          |             |                 |
| 17               | Total FTE & Total S  | darios                  | 0.460     | \$        | 17,700         | 64%          | \$           | 9,800     | 36%        |          | +  | -        |  |          | \$          | 27,500          |
|                  | Fringe Benefits      | aidiles                 | 23.0%     | \$        | 4,071          | 64%          | \$           | 2,254     | 36%        |          |  |          |  |          | \$          | 6,325           |
|                  | Total Personnel Exp  | ences                   | 2.0.0.0   | \$        | 21,771         | 64%          | \$           | 12,054    | 36%        |          |  |          |  |          | \$          | 33,825          |
| <u>20</u><br>21  | TOTAL T EISDING! EXP | 011000                  |           |           |                |              | 11 <u> </u>  | ,         |            | L        |  | 11       |  | 4        | <u> </u>    |                 |
| ~~~              | Operating Expense    | s                       |           | Ex        | penditure      | % of Total   | Ex           | penditure | % of Total |          |  |          |  |          | Conf        | tract Totals    |
|                  | Occupancy            |                         |           |           |                |              |              |           |            |          |  |          |  |          |             |                 |
| 24               | Materials and Suppl  | es                      |           | \$        | 567            | 68%          | \$           | 267       | 32%        |          |  |          |  |          | \$          | 834             |
|                  | General Operating    |                         |           |           | <i>'</i>       |              |              |           |            |          |  |          |  |          |             |                 |
| 26               | Staff Travel         |                         |           |           |                |              | <u> </u>     |           |            |          |  |          |  |          |             |                 |
| 27               | Consultants/Subcon   | tractor:                |           |           |                |              | <b> </b>     |           |            |          |  |          |  |          |             |                 |
| 28               |                      |                         |           |           |                |              | <b> </b>     |           |            |          |  |          |  |          |             |                 |
| 29               | Other:               |                         |           |           |                |              | <u> </u>     |           |            |          | <del>- </del>                                    |          |  |          | <u> </u>    |                 |
| 30               |                      |                         |           |           |                |              |              |           |            |          | -  |          |  |          |             |                 |
| 31               |                      |                         |           | <u> </u>  |                | <u> </u>     | ļ            |           |            |          |  |          | -                                      |          |             |                 |
| 32               |                      |                         |           |           |                | <b></b>      | <b> </b> -   |           |            |          |  |          | -                                      |          |             |                 |
| 33               |                      | <del></del>             |           |           |                | <del> </del> | ┞            |           |            |          | <del>                                     </del> |          |  |          |             |                 |
| 34               |                      |                         |           |           |                | <del> </del> | <b> </b>     |           |            |          |  |          |  |          |             |                 |
| 35               |                      |                         |           |           |                | ļ            | $\vdash$     |           |            |          | 1  |          |  |          | -           |                 |
| 36<br>37         |                      | ·····                   |           | <b>-</b>  |                | <del> </del> | -            |           |            |          |  |          |  |          |             |                 |
| 38               |                      |                         |           |           |                |              |              |           |            |          | 1  |          |  |          |             |                 |
| 39               |                      |                         |           |           |                | <b> </b>     |              |           |            |          | 1  |          |  |          |             |                 |
| 40               |                      |                         |           |           |                |              |              |           |            |          |  |          |  |          |             |                 |
|                  | Total Operating Ex   | penses                  |           | \$        | 567            | 68%          | \$           | 267       | 32%        |          |  |          |  |          | \$          | 834             |
| 42               |                      |                         |           |           |                |              |              |           |            |          |  |          |  |          |             |                 |
|                  | Capital Expenditur   | es                      |           |           |                | ·            | <del></del>  |           |            | ···      |  |          |  |          |             | ····            |
| 44               |                      |                         |           |           |                |              |              |           |            |          |  |          |  |          |             |                 |
| 45               |                      |                         |           |           | .,             |              | <u> </u>     |           |            |          | <u> </u>   |          |  |          |             |                 |
|                  | Total Capital Exper  |                         |           |           |                |              | <u> </u>     |           |            |          |  |          |  |          |             | 0.4.055         |
|                  |                      | ses                     |           | \$        | 22,338         | 64%          | \$           | 12,321    | 36%        |          |  |          |  |          | \$          | 34,659          |
|                  | Indirect Expenses    |                         |           | \$ -      | 2,121          | 68%          | \$           | 998       | 32%<br>35% |          | -  |          |  |          | \$<br>\$    | 3,119<br>37,778 |
| 49               | TOTAL EXPENSES       |                         |           | \$        | 24,458         | 65%          | \$           | 13,320    | 35%        | <u> </u> | ل  | <u> </u> |  |          | Ψ           | 31,110          |
| 50               |                      | - # + 4                 |           | ·         | 275            |              | -            | 135       |            | F        |  | - 11     |  | <u>-</u> |             | 410             |
| 51               |                      | of Units of Per Unit of |           |           | 275<br>\$88.94 | 1            | -            | \$98.0    |            | <b> </b> |  |          |  |          | 4           | 92.14           |
| 52<br>53         | Cost                 | r er OIIII O            | SCIVICE   | ـــــــــ | φυυ. 34        | T            | ji .         | φουι      | V I        | <u> </u> |  |          | ······································ | 1        |             |                 |
| . 2              | 1                    |                         |           |           |                |              |              |           |            |          |  |          |  |          |             |                 |

USCF - CCHAMP Center of Excellence SFAF - Stonewall Ryan White Part A 03/01/10 - 2/28/11

## Budget Justification UCSF CCHAMP SFAF Stonewall

## Substance Use Counselor

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

| trainings. Requires a Master's license or licensed eligible clinician and at least two years of experience in substance use, mental health counseling or HIV counseling.                           |    |        |
|--|----|--------|
| Annual Salary \$54,997x .366693 FTE =  | \$ | 20,167 |
| Supervising Povehologist   |    |        |
| Supervising Psychologist   |    |        |
| Responsible for the clinical oversight and supervision of the substance use couselors. Backup clinican for services. Oversees quality assurance of services delivery, data collections and program |    |        |
| improvements. Requires a PhD in Clinical or Counseling Psychology and at least five years experience   |    |        |
| in program management.   | đ: | 7,333  |
| Annual Salary \$80,001 x .091661 FTE =   | Ą  | 1,000  |
| Total Salaries   | \$ | 27,500 |
| Total Outained   | •  | ,      |
| Fringe Benefits  |    |        |
| Social Security, Worker's Comp, health benefits, unemployment, state and federal taxes @ 23% =   | \$ | 6,325  |
| Total Salaries and Benefits  | \$ | 33,825 |
| Other Direct Expenses  |    |        |
| Program/Educational Supplies   |    |        |
| cost of materials based on previous history of expenses \$69.52 per month x 12 mos =   | \$ | 834    |
| Total Direct Expenses  | \$ | 34,659 |
| Indirect Expense   |    |        |
| Expenses charged by the SFAF at 9% of total direct cost to cover indirect operating such as payroll,   |    | •      |
| HR, accounting, administration, and planning   | \$ | 3,119  |
| TOTAL EXPENSE  | \$ | 37,778 |

| 4   | 8 2001                     | ပ                                      | מיי   | ш            | ഥ                | 9                                    | Ξ.  |                      | Ð                 | У                                       | 7                                | Σ              | N           | 0 N N N N                                      | P P   |
|---|----------------------------|--|---|--------------|------------------|--------------------------------------|---|----------------------|-------------------|---|----------------------------------|----------------|-------------|--|---|
| Contractor Name:  Annew Anne Anne | UCSF Posi<br>03/0          | Positive Health P<br>03/01/11-02/29/12 | UCSF Positive Health Program<br>03/01/11-02/29/12 | · · · · · ·  |                  | ٠                                    |   |                      |                   |   |                                  |                | Append      | Appendix b* ld Page 1<br>ocument Date: 3/5/201 | Appendix b-1d Page 1<br>Document Date: 3/5/2010 |
| T T T   | Ryan                       | Ryan White Part A                      | Part A  |              | SF DEPA<br>UOS C | PARTIMEN<br>S COST A                 | DEPARTMENT OF PUBLIC HEALTH CONTRACT<br>UOS COST ALLOCATION BY SERVICE MODE | IC HEAL'<br>I BY SEF | TH CONTRIVICE MOI | ACT<br>DE                               |                                  |                |             |  |   |
| 7<br>8 UCSF Positive Health Program   | Ith Progran                |  |   |              |                  |                                      |   | SERVICE MODES        | MODES             |   |                                  |                |             |  |   |
|   |                            |  | Case Management                                   | ement        | Prima            | Primary Care                         | Me  | -lealth              | Substa            | Substance Use                           |                                  | ation,<br>ng & |             |  | Contract Totals                                 |
| 9 Personnel Expenses 10 Position Titles   |                            | 쁘                                      | Hours<br>Salaries 19                              | S<br>% Total | Medical El       | Medical Encounters Salaries  % Total | Hours Salaries  | rs<br>% Tota         |                   | Counseling Hours Salaries % Total       | Evaluation Hours Salaries % Tota | " Hours        | Salaries    | % Total  |   |
| 11 Physicians   |                            | 2.12                                   |   |              | \$ 356,754       | 4                                    | <u></u>   |                      | <u> </u>          | i                                       | <u> </u>                         |                |             |  | \$ 356,754                                      |
| 12 Nurse Practitioners  |                            | 0.97                                   |   |              | \$ 125,000       | 30 100%                              |   |                      |                   |   |                                  |                |             |  | \$ 125,000                                      |
| 13 Registered Nurses  |                            | 0.64                                   |   |              | 000'06 \$        | 00 100%                              |   |                      |                   |   |                                  | ,              |             |  | 000'06 \$                                       |
| 14 Clinical Pharmacist (PharmD)   | harmD)                     | 0.71                                   |   |              | \$ 100,000       | 20 100%                              |   |                      |                   |   |                                  |                |             | ,  | \$ 100,000                                      |
| 15 Medical Assistant  |                            | 1.95                                   |   |              | \$ 84,800        | 00 100%                              |   |                      |                   |   |                                  |                |             |  | \$ 84,800                                       |
| 16 Licensed Social Worker   | , io                       | 0.71                                   | \$ 52,079   | 81%          |                  |                                      |   |                      | \$ 12,080         | 0 19%                                   |                                  |                |             |  | \$ 64,159                                       |
| 17 Case Manager (MSW)   |                            | 1,47                                   | \$ 84,000   | 83%          |                  |                                      | \$ .14,300  | 0 14%                | \$ 3,149          | 9 3%                                    |                                  |                |             |  | <b>,</b>  |
| 18 Front Desk Clerk   | ,                          | 0.75                                   |   |              | \$ 27,909        | 09 100%                              |   |                      |                   |   |                                  |                |             |  | \$ 27,909                                       |
| 19 Primary Investigator (MD)  | MD)                        | 0.01                                   |   |              |                  |                                      |   |                      |                   |   | \$ 2,503                         | 100%           |             |  | \$ 2,503  |
| 20 Nurse Practitioner Supervisor  | pervisor                   | 0.07                                   |   |              | \$ 9,846         | 46   100%                            |   |                      |                   |   |                                  |                |             |  |   |
| 21 CoE Coordinator (Analyst 4)  | alyst 4)                   | 09'0                                   |   |              |                  |                                      |   |                      |                   |   | \$ 41,800                        |                |             |  | \$ 41,800                                       |
| 22 Administrative Assistant 3   | ınt 3                      | 0.19                                   |   |              |                  |                                      |   |                      |                   |   | \$ 8,645                         |                |             |  |   |
| 23 Information Tech Programmer  | ogrammer                   | 0.89                                   |   |              |                  |                                      |   |                      |                   |   | \$ 78,548                        | 100%           |             |  | \$ 78,548                                       |
| 24 Total FTE & Total Salaries   |                            | 11.10                                  | \$ 136,079  | 12%          | \$ 794,309       | 09 73%                               | 43  | 0 1%                 | \$ 15,229         | <u> </u>                                | \$ 131,496                       |                |             |  | \$ 1,091,413                                    |
| 25 Fringe Benefits  |                            | 19.2%                                  | \$ 26,092   | 12%          | \$ 152,300       | 00 73%                               | ક્ક   | 2 1%                 | \$ 2,920          | 20 1%                                   | \$ 25,212                        | 12%            |             |  | \$ 209,266                                      |
| 26 Total Personnel Expenses   | enses                      |  | \$ 162,171  | 12%          | \$ 946,609       | 09 73%                               | \$ 17,042   | 2 1%                 | \$ 18,149         | 18 1%                                   | \$ 156,708                       | 12%            |             |  | \$ 1,300,679                                    |
| 28 Operating Expenses   |                            |  | Expenditure                                       | % Total      | Expenditure      | re % Total                           | al Expenditure  | e % Total            | Expenditure       | ire   % Total                           | Expenditure                      | % Total        | Expenditure | % Total  | Contract  |
| 29 General Operating  |                            |  | \$ 205  |              | \$ 12,1          | 60                                   |   |                      |                   |   |                                  |                |             |  | \$ 12,614                                       |
| 30 Total Operating Expenses   | enses                      |  | \$ 505  |              | \$ 12,109        | 60                                   |   |                      |                   |   |                                  |                |             |  | \$ 12,614                                       |
| 32  |                            |  |   |              |                  |                                      |   |                      |                   |   |                                  |                |             |  |   |
| 33 Total Direct Expenses  | 88                         |  | \$ 162,676  | 12%          | "                |                                      | ↔   |                      |                   |   | · I                              |                | -<br>ج      |  | 1   |
| 34 Indirect Expenses  |                            |  | \$ 14,641   | 12%          | \$ 86,285        | 85 73%                               | \$ 1,534  | 4 1%                 | \$ 1,633          | 33 1%                                   | \$ 14,105                        | 12%            |             |  | \$ 118,198                                      |
| 35 TOTAL EXPENSES   |                            |  | \$ 177,316  | 12%          | \$ 1,045,003     | 03 73%                               | \$ 18,576   | 6 1%                 | \$ 19,782         | 32 1%                                   | \$ 170,813                       | 12%            | ·           |  | \$ 1,431,490                                    |
| N   | Number of Units of Service | Service                                |   | <u> </u>     | ů,               | 5,868                                | 240   | 0                    | 2                 | 240                                     | 1,620                            | 20             |             |  | 10,160  |
| 200   | Cost Dorlinit of Condon    | 0                                      | 400 00  | c            | 0470 C           | 000                                  | - rr-   |                      | •                 | < · · · · · · · · · · · · · · · · · · · | ~ " ! < " €                      | ~              | =           |  | .000 01 10                                      |

### **Budget Justification**

#### Salaries and Benefits

### Physician

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

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

## Nurse Practitioner Team Leader and Providers

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

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

Registered Nurse

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

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

#### **Clincal Pharmacist**

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

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

**Medical Assistant** 

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

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

#### Licensed Clinical Social Worker

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

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

#### Social Worker (MSW)

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

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

#### Front Desk Clerk

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

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

27,909

## **Primary Investigator**

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

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

### **Nurse Practitioner Supervisor**

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

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

#### CoE Coodinator

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

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

#### CoE Administrative Assistant

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

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

## CoE IT - Computer Programmer

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

| tol the entire Conavir population.  |   |                 |
|---|---|-----------------|
|   | Annual Salary \$88,005 x 0.892540 FTE = | \$<br>78,548    |
| Total Salaries:   |   | \$<br>1,091,413 |
| Benefits @ 19.1739 % of total salaries  |   | \$<br>209,266   |
| TOTAL SALARIES & BENEFITS:  |   | \$<br>1,300,679 |
| General Operating Expenses Occupancy Rental of space for HERO staff @ \$736.34 per mo per 0.9 FTE |   | \$<br>7,952     |
|   |   | ·               |
| UCSF Computer Network Charges Standard charge for staff use, maintenence and setup of compute     | er network @ approx \$35/mo x 11.1 FTE  | \$<br>4,662     |
| Subtotal Expenses:  |   | \$<br>12,614    |
| Total Operating Expenses  |   | \$<br>1,313,293 |
|   |   |                 |

#### INDIRECTS Administrative Cost

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

| INDIRECT COSTS (@ 9% of direct costs) | *** | \$ 118,198   |
|---------------------------------------|-----|--------------|
|                                       |     |              |
| TOTAL EYDENCE                         |     | \$ 1,431,490 |

| Α   | В                                      | С        | D           | E ,        | F                                       | G              | Н        |         |          | K            | <u> </u>   | <u> </u>        |
|---|--|----------|-------------|------------|---|----------------|----------|---------|----------|--------------|------------|-----------------|
| Contractor Name: U                        | JCSF Po                                | sitive H | ealth Progr | am         |   |                |          |         | , .      | dix B-1e     |            |                 |
| · ·                                       |  |          |             |            |   |                |          |         | Docume   | nt Date:     | 3/5/2      | .010            |
| Appendix Term:                            | 03/0                                   | 01/11-02 | /29/12      |            |   |                |          |         |          |              |            |                 |
| Fund Source:                              | Rya                                    | n White  | Part A      |            |   |                |          | ~=      |          |              |            |                 |
|   |  |          |             |            | OF PUBLIC                               |                |          |         |          |              |            |                 |
|   |  |          | UOS         | COST AL    | LOCATION                                | BA SEKAI       | CE MODE  | <b></b> |          |              |            |                 |
|   |  | :        |             |            |   |                |          |         |          |              | 7          |                 |
| AIDS Health Project                       | (AHP)                                  |          |             | ·          | S                                       | ERVICE M       | DDES     |         |          |              | <u> </u>   |                 |
|   |  |          | Mental      | Health     | Case Man                                |                |          | ,       |          |              | C          | ontract         |
| Personnel Expenses                        | ;                                      |          | Encou       | nters      | Hot                                     |                |          |         |          | т            | ┨ .        | t               |
| Position Titles                           |  | FTE      | Salaries    | % of Total | Salaries                                | % of Total     |          |         |          | <b> </b>     | -{}        | Totals          |
| Psychiatrist                              |  | 0.80     | \$140,733   | 100%       |   | ļ              |          |         |          | <u> </u>     | \$         | 140,73          |
| Case Manager                              |  | 2.600    |             |            | \$ 125,874                              |                |          |         |          | ļ            | \$         | 125,87          |
| Clinical Supervisor                       |  | 0.400    |             |            | \$ 39,488                               | <u> </u>       |          |         |          | <u> </u>     | \$         | 39,48           |
| Program Assistant                         |  | 0.100    |             |            | \$ 4,114                                | <del> </del>   |          |         |          | <del> </del> | \$         | 4,11            |
| 5   |  |          |             |            |   | <del> </del>   |          |         |          | <del> </del> | \$         |                 |
| 3   |  | ` .      |             |            | <b> </b>                                | <del> </del>   |          |         |          | ╂            | \$         |                 |
| 7   |  |          |             |            |   | ļ              |          |         |          | <del> </del> | \$         |                 |
| 3   |  |          | A           | 450/       | 0 400 470                               | F F C /        |          |         |          | <del> </del> | \$         | 310,20          |
| Total FTE & Total Sal                     |  | 3.90     | \$140,733   | 45%<br>45% | \$ 169,476<br>\$ 35,659                 |                |          |         |          | <u> </u>     | \$         | 65,27           |
| Fringe Benefits                           |  | 21.0%    | \$ 29,612   |            | <u> </u>                                |                |          |         |          | <del> </del> | \$         | 375,48          |
| Total Personnel Expe                      | nses                                   |          | \$170,344   | 45%        | \$ 205,135                              | 1 5576         |          |         |          |              | μΨ         | 370,40          |
| <u> </u>                                  |  |          |             |            | Expenditure                             | % of Total     | 1        |         |          | T            | Cor        | ntract Total    |
| Operating Expenses                        | <u> </u>                               |          | Expenditure | % of Total | \$ 16,386                               |                |          |         | _        | <b>-</b>     | \$         | 16,38           |
| 1 Occupancy                               |  |          |             |            | \$ 10,300                               |                |          | _       |          | <del> </del> | \$         | 5,62            |
| Materials and Supplie                     | 98                                     |          |             |            | \$ 2,718                                |                |          |         |          | <b>†</b>     | \$         | 2,71            |
| General Operating Staff Travel            |  |          |             |            | \$ 1,283                                | ~ <del>{</del> | ····     |         |          | <b>-</b>     | \$         | 1,28            |
|   | cactor:                                |          |             |            | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | <del> </del>   |          |         |          | 1            |            |                 |
| 3 Consultants/Subconti<br>9               | actor.                                 |          |             |            | 1                                       |                |          |         |          |              |            |                 |
| Other:                                    | ······································ |          |             |            |   | 1              |          |         |          | 1            |            |                 |
| 1 Computer Network C                      | harges                                 |          | \$ 134      |            | \$ 1,502                                |                |          |         |          |              | \$         | 1,63            |
| 2   |  |          |             |            | <u> </u>                                |                |          |         |          |              |            |                 |
| 3   |  |          |             |            |   |                |          |         |          | ļ            | ][         |                 |
| 1   |  |          |             |            |   |                |          |         |          |              |            |                 |
| 3   |  |          |             |            |   |                |          |         |          |              | <u> </u>   |                 |
| 5   |  |          |             |            |   |                |          |         |          | <u> </u>     | ــــــــ   |                 |
| 7   |  |          |             |            |   |                | ·        |         |          | <u> </u>     | <u> </u>   |                 |
| 3   |  |          |             |            |   | <u> </u>       |          |         |          |              | <u> </u>   |                 |
| 6   7   7   8   8   8   8   8   8   8   8 |  |          |             |            | ·                                       |                |          |         |          | <u> </u>     | <b>_</b>   |                 |
| 0   |  |          |             |            |   |                |          |         |          | <u> </u>     | <b></b>    |                 |
| 1 Total Operating Exp                     | enses                                  |          | \$ 134      |            | \$ 27,510                               | <u> </u>       |          |         | <u> </u> | <u> </u>     | \$         | 27,64           |
| 2   |  |          |             |            |   |                |          |         |          |              |            |                 |
| 3 Capital Expenditure                     | s                                      |          | ·           | r          | 1                                       | T              | 1        |         | · II     | Т            | T          |                 |
| 4 <u> </u>                                |  |          |             |            |   | <u> </u>       |          |         |          | -            | ┨          |                 |
|   |  |          |             |            | <u> </u>                                |                |          |         |          | <del></del>  | ╢          |                 |
| Total Capital Expen                       |  |          |             |            | 1                                       | <del> </del>   |          |         |          | <del> </del> | ╂          | A00 40          |
| 7 Total Direct Expens                     | es                                     |          | \$170,478   | 42%        | \$ 232,645                              |                |          |         |          | -            | \$         | 403,12<br>36,28 |
| 8 Indirect Expenses                       |  |          | \$ 14,129   | 39%        | \$ 22,152                               |                |          |         |          | <del> </del> | \$         | 439,40          |
| 9 TOTAL EXPENSES                          | ····                                   |          | \$184,607   | 42%        | \$ 254,797                              | 58%            | ll       |         |          |              | <u>П</u> Ф | 7,50,41         |
| 0   |  |          | II          |            | 1                                       |                | II       |         | TI TI    |              | 1          | 4,800           |
| 0 Number of Cost Pe                       |  |          |             |            | 3,8                                     | 50<br>5.18     | <b></b>  |         |          |              |            | \$91.54         |
| 2 Cost Pe                                 | er Unit of                             | Service  | \$19        | 4.32       | 1 300                                   | . 10           | <u> </u> | war     | U        |              |            | 401,00          |
|   |  |          |             |            |   |                |          |         |          |              |            |                 |

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USCF - CCHAMP Center of Excellence AIDS Health Project Ryan White Part A 03/01/11 - 2/29/12

## Budget Justification UCSF CCHAMP AIDS Health Project

#### Salaries and Benefits

## Psychiatrist

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

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

### Case Manager

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

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

\$ 125,874

## Clincal Social Worker Supervisor

Responsible for oversight of ase managers, as well as planing, coordination and delivery of servcies to clients.

Minimum qualifications: LCSW required. Expereince with severe need clients and supervising case management staff. Knowledge of HIV/AIDS. Responsible for ARIES/HERO compliance, and other administrative tasks as assigned.

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

**TOTAL Salaries and Benefits** 

\$ 39.488

375,480

## **Program Assistant**

**Total Salaries** 

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

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

| Annual Salary \$41,136 x .10 FTE = |   | \$<br>4,114   |
|------------------------------------|---|---------------|
|                                    |   | \$<br>310,209 |
| BENEFITS @ 21.04% of salaries =    |   | \$<br>65,271  |
|                                    | • |               |

439,405

| USCF - CCHAMP Center of Excellence<br>AIDS Health Project                                 | Appendix B                    | -1e, Page 3 |
|---|-------------------------------|-------------|
| Ryan White Part A<br>03/01/11 - 2/29/12   | •                             |             |
| Occupancy:  |                               |             |
| Rent:  Monthly rent expense for the proportion (11%) of clinic space utilized by program. | •                             |             |
| \$12,414 per month x 11% x 12 months =  | * \$                          | 16,386      |
| Materials and Supplies:   |                               |             |
| Office Supplies:  |                               |             |
| General office supplies such as pens, paper, medical chart                                |                               |             |
| supplies, and postage expenses for client communication,                                  |                               |             |
| proportionate to program utilization.   |                               |             |
| \$151.09 per month x 3.1 FTE x 12 months =  | <b>\$</b>                     | 5,621       |
| General Operating:  |                               |             |
| Staff Training:   |                               |             |
| Staff training activities   |                               |             |
| 3.1 FTE x \$200 per training  | \$                            | 620         |
| Computer Software/Hardware:   |                               |             |
| Includes updating computer hardware and software to maintain                              |                               | н           |
| equiptment that holds client medical records, cliet satisfation data                      | •                             |             |
| etc. \$56.41 per month x 3.1 FTE x 12 months =  | \$                            | 2,098       |
| Staff Travel (Local & Out of Town):   |                               |             |
| Travel expenses for Outreach and Case Management Staff for                                |                               |             |
| transportation to client homes, appointment escorts, meetings, and inservices.            |                               |             |
| \$41.13 per month x 2.6 FTE x 12 months =   | \$                            | 1,283       |
| Other:  |                               | •           |
| UCSF Computer Network Charges:  |                               |             |
| Standard charge from UCSF for staff use, maintenence and setup                            |                               |             |
| of computer network. The network services rate will be                                    | ·                             |             |
| approximately \$35/month per pro-rated FTE.   | •                             |             |
| \$35 per month x 3.8951 FTE x 12 months =   | \$                            | 1,636       |
| Total Operating Expenses  | \$                            | 27,644      |
| Total Direct Expenses   | \$                            | 403,124     |
| Indirect Expense  |                               |             |
| _   | ting expenses incurred by the |             |
| Indirect expense is charged by UCSF at 9% of total direct cost to cover operate           | and expenses mounted of the   |             |
| University, including building maintenance, library and student services.                 | Evnopoo                       | 36,281      |
| Total Indirect  | Expense \$                    | JU,ZO I     |
|   |                               | 400 405     |

TOTAL EXPENSE

G Н E Appendix B-1f Page 1 1 Contractor Name: UCSF Positive Health Program Document Date: 3/5/2010 3 Appendix Term: 4 Fund Source: 03/01/11-02/29/12 Ryan White Part A SF DEPARTMENT OF PUBLIC HEALTH CONTRACT UOS COST ALLOCATION BY SERVICE MODE **Substance Treatment Outpatient Program** SERVICE MODES (STOP) 8 Substance Abuse Contract **Counseling Hours** 9 Personnel Expenses Totals % Total % Total Salaries 10 Position Titles FTE Salaries 19,225 100% 11 Substance Use Counselor (PhD) 0.15 19,225 \$ 3,309 100% 0.08 3,309 12 Data Entry Specialist 13 14 15 16 17 22,534 0.227 22,534 100% 18 Total FTE & Total Salaries 4,480 \$ 4,480 19.9% 100% 19 Fringe Benefits \$ 27,014 \$ 27,014 100% Total Personnel Expenses 20 21 % Total % Total **Contract Totals** Expenditure Expenditure Operating Expenses 22 100% 3,357 3,357 23 Occupancy \$ 24 Materials and Supplies 25 General Operating Staff Travel 26 Consultants/Subcontractor: 27 28 29 Other: 316 316 Operating expense - Utilities \$ 96 31 Computer Network Charges \$ 32 33 34 35 36 37 38 39 40 41 3,769 3,769 100% 42 Total Operating Expenses 43 44 Capital Expenditures 45 46 Total Capital Expenditures 47 30,783 30,783 100% Total Direct Expenses 2,770 100% \$ 2,770 Indirect Expenses 33,553 100% 33,553 TOTAL EXPENSES 50 51 268 52 Number of Units of Service 268 \$125.20 Cost Per Unit of Service \$125.20 53 54 55 DPH #1A(1) Rev. 1/98 USCF - CCHAMP Center of Excellence DSAAM - STOP Ryan White Part A 03/01/11 - 2/29/12

## Budget Justification UCSF CCHAMP

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

## **Addiction Medicine Psychologist**

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

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

## **Data Entry Specialist**

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

| and other clerical duties as assigned.  |     |        |
|---|-----|--------|
| Annual Salary \$39,338 x .08412 FTE =   | \$  | 3,309  |
| Total Salaries  | \$  | 22,534 |
| Fringe Benefits:  |     |        |
| Social Security, Worker's Comp., health benefits, unemployment, state and federal taxes @ 20% | \$  | 4,480  |
| TOTAL SALARIES & BENEFITS   | \$  | 27,014 |
| Office Supplies:  |     |        |
| Rent - based on FTE @ 279.79/month  | \$  | 3,357  |
| Utilities - based on FTE, \$26.33/month   | \$  | 316    |
| UCSF Computer Network Charges: Standard charge from UCSF for staff use, maintenence and setup |     |        |
| of computer network @ approximately \$35/month per pro-rated 0.23 FTE.                        | \$  | 96     |
| Operating expenses  | \$. | 3,769  |
| TOTAL Direct Expenses   | \$  | 30,783 |
| INDIRECT COSTS @ 9% of direct expenses  | \$  | 2,770  |
| TOTAL EXPENSE   | \$  | 33,553 |

| - 1              | A B                        |              |             | D                                      | E            | ĺ        | F         | G          | H.       |               | l J         |             |                | <u> </u>       |
|------------------|----------------------------|--------------|-------------|--|--------------|----------|-----------|------------|----------|---------------|-------------|-------------|----------------|----------------|
| 1                | Contractor Name: UCSF P    | ositive He   | alth        | Program                                |              |          | ·····     |            |          |               |             | opendix B-  |                |                |
| 2                |                            |              |             |  |              |          |           |            |          |               | Doc         | cument Dat  | e: 3/5/201     | 0              |
|                  | Term:                      | 03/01/11-2   | 2/29/1      | 2                                      |              |          |           |            |          |               |             | ,           |                |                |
|                  | Fund Source:               | Ryan White   | Part        | Α                                      |              |          |           |            |          |               |             |             |                |                |
| 5                | •                          |              |             | SF DEPA                                | RTMEN        | TOF      | PUBLIC    | HEALTH     | CONTR    | RACT          |             |             |                |                |
| 5<br>6<br>7      | •                          |              |             | UOS                                    | COST AL      | LO       | CATION E  | SY SERV    | CE MOL   | <b>)</b> ⊨    |             |             |                |                |
| 7                |                            |              |             |  |              |          |           |            |          |               |             |             |                |                |
| 8                | Stonewall                  |              |             |  |              |          | SEI       | RVICE M    | DDES     |               |             |             | _              |                |
|                  |                            |              |             |  |              | :        | Substand  | e Use      |          |               |             |             |                |                |
|                  |                            |              | l .         | ubstance                               |              | C        | ounseling | _          |          |               |             |             |                | ontract        |
| 9                | Personnel Expenses         |              |             | unseling                               |              | <b> </b> | Hou       |            | <u> </u> |               |             | <u>-</u>    | -∦ ,           | ·              |
| 10               | Position Titles            | FTE          | <del></del> | alaries                                | % of Total   |          | alaries   | % of Total | ļ        |               | ·           |             |                | otals          |
|                  | Counselor                  | 0.37         | \$          | 12,714                                 | 63%          | \$       | 7,453     | 37%        | <u> </u> |               |             |             | \$<br>\$       | 20,16<br>7,333 |
| 12               | Psychologist               | 0.09         | \$          | 4,986                                  | 68%          | \$       | 2,347     | 32%        | <u> </u> |               |             |             |                | 7,33           |
| 13               |                            | <u> </u>     | <u> </u>    |  |              | <b>∤</b> |           |            |          |               |             |             |                |                |
| 14               |                            |              | <u> </u>    |  |              | ╂        |           |            |          |               |             |             |                |                |
| 15               |                            | ╁            | ļ           |  |              | ╟        |           |            |          |               |             |             | I              |                |
| <u>16</u><br>17  | ,                          | <del> </del> | <b> </b>    |  |              | ╂─       |           |            | <u> </u> |               |             | <del></del> |                |                |
|                  | Total FTE & Total Salaries | 0.460        | \$          | 17,700                                 | 64%          | \$       | 9,800     | 36%        |          |               | _           |             | \$             | 27,50          |
|                  | Fringe Benefits            | 23.0%        | \$          | 4,071                                  | 64%          | \$       | 2,254     | 36%        |          |               |             |             | \$             | 6,32           |
|                  | Total Personnel Expenses   | 1 20,0 %     | \$          | 21,771                                 | 64%          | \$       | 12,054    | 36%        |          |               |             |             | \$             | 33,82          |
| <u>20</u><br>21  | Total Fersonines Expenses  |              | II          |  | 1            | н        |           | <u> </u>   |          |               |             |             |                |                |
|                  | Operating Expenses         |              | Exi         | penditure                              | % of Total   | Ex       | penditure | % of Total |          |               |             |             | Con            | tract Totals   |
|                  | Occupancy                  |              |             | ······································ |              |          |           |            |          |               |             |             |                |                |
|                  | Materials and Supplies     |              | \$          | 567                                    | 68%          | \$       | 267       | 32%        |          |               |             |             | \$             | 83             |
|                  | General Operating          |              |             |  |              | ]        |           |            | <b> </b> |               |             |             |                |                |
|                  | Staff Travel               |              |             |  |              |          |           |            | <b> </b> |               |             |             |                |                |
| 27               | Consultants/Subcontractor: |              |             |  |              | <u> </u> |           |            | <u></u>  |               |             |             |                |                |
| 28               |                            |              |             |  |              | Щ.       |           |            |          |               |             |             |                |                |
| 29               | Other:                     |              | <u> </u>    |  |              | ∄—       |           |            | <b></b>  |               |             |             |                |                |
| 30               |                            |              | <u> </u>    |  |              | 4        |           |            | ∄        |               |             |             |                | <del></del>    |
| 31               |                            |              | ļ           |  |              | ╂—       |           | <u> </u>   | ╂        |               |             |             |                |                |
| 32               |                            |              | <b> </b>    | <del></del>                            | <u> </u>     |          |           |            | <b> </b> |               |             |             |                |                |
| 33               |                            |              | ⊪—          |  |              | -}       |           |            | ╟        |               |             |             | _              |                |
| 34               |                            |              | <b> </b>    |  | <del> </del> | ╢        |           | <u> </u>   | <b> </b> |               | —— <b> </b> |             |                |                |
| 35               |                            |              | <b> </b>    |  | <u> </u>     | ╢        |           | <u> </u>   | <b> </b> |               |             |             |                |                |
| 36               |                            |              | <b> </b>    |  |              | +        |           | <u> </u>   | ╂        |               |             |             |                |                |
| 37<br>38         |                            |              | <b> </b>    |  | <b></b>      | 1        |           |            | 1        |               |             |             |                | *******        |
| <i>3</i> 8<br>39 |                            |              | <b> </b>    |  | <u> </u>     | 1        |           | <b></b>    | 1        |               |             |             |                |                |
| 40               |                            |              |             |  | <b> </b>     | 1        |           |            |          |               |             |             |                |                |
| 41               | Total Operating Expenses   |              | \$          | 567                                    | 68%          | \$       | 267       | 32%        |          |               |             |             | \$             | 83             |
| 42               |                            |              | 4           |  |              |          |           | 7          |          | , <del></del> |             |             |                |                |
| 43               | Capital Expenditures       |              |             |  |              |          |           | ·          |          |               |             |             |                |                |
| 44               |                            |              |             |  |              |          |           |            | <b> </b> |               |             |             |                |                |
| 45               |                            |              |             |  |              |          |           | <u></u>    |          |               |             |             | _              |                |
| 46               | Total Capital Expenditures |              |             |  |              | 1        |           | <u> </u>   | <u> </u> |               |             |             | <del>-  </del> | ~              |
|                  |                            |              | \$          | 22,338                                 | 64%          | \$       | 12,321    | 36%        | <b> </b> |               |             |             | <u> </u>       | 34,65          |
| 48               | Indirect Expenses          |              | \$          | 2,121                                  | 68%          | \$       | 998       | 32%        | <b> </b> |               |             |             | \$             | 3,11<br>37,77  |
| 49               | TOTAL EXPENSES             |              | \$          | 24,458                                 | . 65%        | \$       | 13,320    | 35%        | 1        |               |             |             | \$             | 31,11          |
| 50               |                            |              | η           |  |              | 7        |           | <u></u>    | 14       |               | <u>II</u>   |             | <u>-</u>       | 410            |
| 51               | Number of Units            |              |             | 275                                    |              |          | 13:       |            | <b> </b> |               |             |             |                | \$92.14        |
| 52               | <del></del>                | of Service   | 1           | \$88.9                                 | 4            |          | \$98.     | 0/         | 11       |               | L           |             |                | YUL. 17        |
| 53               | 1                          |              |             |  |              |          |           |            |          |               |             |             |                |                |

## **Budget Justification UCSF CCHAMP** SFAF Stonewall

## **Substance Use Counselor**

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

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

## **Supervising Psychologist**

Responsible for the clinical oversight and supervision of the substance use couselors. Backup clinican for services. Oversees quality assurance of services delivery, data collections and program

| improvements. Requires a PhD in Clinical or Counseling Psyc  |              |
|--|--------------|
| Annual Salary \$80,001 x .091661 FTE =   | \$<br>7,333  |
| Total Salaries   | \$<br>27,500 |
| Fringe Benefits  |              |
| Social Security, Worker's Comp, health benefits, unemployment, state and federal taxes @ 23% =       | \$<br>6,325  |
| Total Salaries and Benefits  | \$<br>33,825 |
| Other Direct Expenses  |              |
| Program/Educational Supplies   |              |
| cost of materials based on previous history of expenses \$69.52 per month x 12 mos =                 | \$<br>834    |
| Total Direct Expenses  | \$<br>34,659 |
| Indirect Expense   |              |
| Expenses charged by the SFAF at 9% of total direct cost to cover indirect operating such as payroll, |              |
| HR, accounting, administration, and planning   | \$<br>3,119  |
| TOTAL EXPENSE  | \$<br>37,778 |

Appendix C Insurance Waiver



# CITY AND COUNTY OF SAN FRANCISCO

## RISK MANAGEMENT PROGRAM

WILLIE L. BROWN, JR. MAYOR

## MEMORANDUM

TO:

Galen Leung, Director

DPH Office of Contract Management

FROM:

Nancy Johnston-Bellard

Deputy Risk Manager

DATE:

October 22, 2003

RE:

Request for Approval to Waive Requirement for Proof of Insurance

for Regents of the University of California

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

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

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

cc: Errol Fitzpatrick
Risk Management Staff
Judith Blackwell
Mike Ward

City Hall, Room 370

1 Dr. Cartion B. Goodlett Place, San Francisco, CA 94102
Telephone (415) 554-6278; Fax (415) 554-6168

### Appendix D Additional Terms

| _  |          |   |
|----|----------|---|
| 7  | HIPA     | 4 |
| 4. | 1211 717 | 1 |

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

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

## 2. THIRD-PARTY BENEFICIARIES

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

## 3. CERTIFICATION REGARDING LOBBYING

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

- A. No federally appropriated funds have been paid or will be paid, by or on behalf of Contractor to any persons for influencing or attempting to influence an officer or an employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the entering into of any federal cooperative agreement, or the extension, continuation, renewal, amendment, or modification of a federal contract, grant, loan or cooperative agreement.
- B. If any funds other than federally appropriated funds have been paid or will be paid to any persons for influencing or attempting to influence an officer or employee of an agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan or cooperative agreement, Contractor shall complete and submit the appropriate Federal form, in accordance with the form's instructions.
- C. Contractor shall require the language of this certification be included in the award documents for all subawards at all tiers, (including subcontracts, subgrants, and contracts under grants, loans and cooperation agreements) and that all subrecipients shall certify and disclose accordingly.
- D. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

#### 4. MATERIALS REVIEW

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

## 5. CALIFORNIA STATE ENTITY

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

Appendix E Omitted By Agreement of the Parties

Appendix F Invoice

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

EXHIBIT F-1 PAGE A

02/24/99

Invoice Number Control Number 6049A1MAR08O HP-11-06376-AI CONTRACTOR: Regents of the University of California Address: Mail Remittance Cashier **UCSF Accounting Office** Contract Purchase DP No. 1855 Folsom Street, Suite 425 San Francisco, CA 94143-0815 Fund Source: RWPA Telephone: (415) 476-2977 HCPD13/0801 Grant Code/Detail: FAX: (415) 476-8158 Invoicing Period: CONTRACT NAME: HIV Health Services FINAL invoice (check if Yes) CONTRACT TERM: March 1, 2010 - February 29, 2012 EXHIBIT TERM: March 1, 2010 - February 28, 2011 3916-0TBC-A1 ACE Control No. PROGRAM / EXHIBIT: PHP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP) REMAINING % OF DELIVERED DELIVERED TOTAL **DELIVERABLES** TO DATE TOTAL CONTRACTED THIS PERIOD Clients UOS Clients UOS Clients UOS UOS Clients **DELIVERABLES** UOS Clients 2,192 400 2,192 400 Case Management, Individual Hour 600 5,868 5,868 600 Primary Medical Care, Encounter 240 120 240 120 Mental Health, Hour 120 240 240 120 Substance Use Counseling Hr - Individua 1.620 N/A 1,620 N/A CoE Coord, Planning & Evaluation 146 SE 146 SE 1 13 S. M. S. Unduplicated Clients for Exhibit 600 % OF REMAINING **EXPENSES EXPENSES EXPENDITURES** THIS PERIOD **BUDGET** BALANCE TO DATE BUDGET \$1,091,413.00 Total Salaries (See Page B) \$1.091,413.00 \$209,266.00 Fringe Benefits \$209,266.00 \$1,300,679.00 \$1,300,679.00 **Total Personnel Expenses** Operating Expenses: Occupancy Materials and Supplies General Operating Staff Travel Consultant/Subcontractor Other: \$12,614.00 \$12,614.00 Total Operating Expenses Capital Expenditures \$1,313,293.00 TOTAL DIRECT EXPENSES \$1,313,293.00 \$118,198.00 \$118,198.00 Indirect Expenses \$1,431,491.00 \$1,431,491.00 TOTAL EXPENSES NOTES: LESS: Initial Payment Recovery Other Adjustments (Enter as negative, if appropriate) REIMBURSEMENT I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Date: Signature: SFDPH CHS/AIDS OFFICE Authorization For Payment: SFDPH - AIDS OFFICE Send to: 1380 Howard, 4th Floor Date: San Francisco, CA 94103

## DÉPARTMENT OF PUBLIC HEALTH CONTRACTOR MONTHLY STATEMENT OF DELIVERABLES AND INVOICE

EXHIBIT F-1 PAGE B

Invoice Number

CONTRACTOR: Regents of the University of California

Address: Mail Remittance Cashier

UCSF Accounting Office 1855 Folsom Street, Suite 425 San Francisco, CA 94143-0815

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

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2010 - February 29, 2012 EXHIBIT TERM: March 1, 2010 - February 28, 2011 HP-11-06376-AI 6049A1MAR080

Contract Purchase DP No. RWPA

**Control Number** 

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

FINAL invoice (check it Yes)
ACE Control No. 3916-0TBC-A1

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

**DETAIL PERSONNEL EXPENDITURES** 

| DETAIL PLISOINIEL LA           | -14D11 | BUDGETED       | EXPENSES    | EXPENSES | % OF   | REMAINING      |
|--------------------------------|--------|----------------|-------------|----------|--------|----------------|
| PERSONNEL                      | FTE    | SALARY         | THIS PERIOD | TO DATE  | BUDGET | BALANCE        |
| Physicians                     | 2.12   | \$356,754.00   |             |          |        | \$356,754.00   |
| Nurse Practitioners            | 0.97   | \$125,000.00   |             |          |        | \$125,000.00   |
| Registered Nurses              | 0.64   | \$90,000.00    |             |          |        | \$90,000.00    |
| Clinical Pharmacist (PharmD)   | 0.71   | \$100,000.00   |             |          |        | \$100,000.00   |
| Medical Assistant              | 1.95   | \$84,800.00    |             |          |        | \$84,800.00    |
| Licensed Social Worker         | 0.71   | \$64,159.00    | : .         |          |        | \$64,159.00    |
| Licensed Social Worker (MSW)   | 1.47   | \$101,449.00   |             |          |        | \$101,449.00   |
| Front Desk Clerk               | 0.75   | \$27,909.00    |             |          |        | \$27,909.00    |
| Primary Investigator           | 0.01   | \$2,503.00     |             |          |        | \$2,503.00     |
| Nurse Practitioner Sprvsr (NP) | 0.07   | \$9,846.00     |             |          |        | \$9,846.00     |
| CoE Coordinator (Analyst 4)    | 0.60   | \$41,800.00    |             |          |        | \$41,800.00    |
| CoE Administrative Asst 3      | 0.19   | \$8,645.00     |             |          |        | \$8,645.00     |
| CoE Info Tech - Programmer     | 0.89   | \$78,548.00    |             |          |        | \$78,548.00    |
|                                |        |                |             |          |        |                |
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|                                |        |                |             |          |        |                |
|                                |        |                |             |          |        |                |
| TOTAL SALARIES                 | 11.08  | \$1,091,413.00 |             |          |        | \$1,091,413.00 |

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

| Certified By: | Date: |
|---------------|-------|
| Titla         |       |

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

Appendix F-1a PAGE A

02/24/99

Invoice Number Control Number 3916-A1AMAR090 CONTRACTOR: Regents of the University of California HP-12-06376-AI Address: Mail Remittance Cashier **UCSF Accounting Office** Contract Purchase DP No. 1855 Folsom Street, Suite 425 San Francisco, CA 94143-0815 Fund Source: RWPA Telephone: (415) 476-2977 Grant Code/Detail: HCPD13/0901 FAX: (415) 476-8158 CONTRACT NAME: HIV Health Services Invoicing Period: (check if Yes) CONTRACT TERM: March 1, 2011 - February 29, 2012 FINAL invoice EXHIBIT TERM: March 1, 2010 - February 28, 2011 ACE Control No. 3916-0TBC-A1 PROGRAM / EXHIBIT: AHP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP) REMAINING DELIVERED % OF TOTAL DELIVERED **DELIVERABLES** TOTAL THIS PERIOD TO DATE CONTRACTED UOS Clients UOS Clients **DELIVERABLES** Clients UOS Clients UOS Clients UOS 950 200 950 200 Mental Health, Encounters 3,850 3,850 Case Management **基础的** 300 12.00 Unduplicated Clients for Exhibit **建設部 200 開始的** % OF REMAINING **EXPENSES EXPENSES EXPENDITURES BUDGET** BALANCE THIS PERIOD TO DATE **BUDGET** \$310,209.00 Total Salaries (See Page B) \$310,209.00 \$65,271.00 \$65,271.00 Fringe Benefits \$375,480.00 \$375,480,00 **Total Personnel Expenses** Operating Expenses: \$16,386.00 \$16,386.00 Occupancy \$5,621.00 Materials and Supplies \$5,621.00 \$2,718.00 \$2,718.00 General Operating \$1,283.00 \$1,283.00 Staff Travel Consultant/Subcontractor Other: \$1,636.00 Computer network charges \$1,636.00 \$27,644.00 Total Operating Expenses \$27,644.00 Capital Expenditures \$403,124.00 \$403,124.00 TOTAL DIRECT EXPENSES \$36,281.00 \$36,281.00 Indirect Expenses \$439,405,00 \$439,405.00 TOTAL EXPENSES **NOTES: LESS: Initial Payment Recovery** Other Adjustments (Enter as negative, if appropriate) REIMBURSEMENT I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature: Title: SFDPH CHS/AIDS OFFICE Authorization For Payment: SFDPH - AIDS OFFICE Send to: 1380 Howard, 4th Floor Date: \_

By:

San Francisco, CA 94103

## Appendix F-1a PAGE B

3916-0TBC-A1

ACE Control No.

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

Invoice Number Control Number 3916-A1AMAR090 HP-12-06376-AI CONTRACTOR: Regents of the University of California Address: Mail Remittance Cashier **UCSF Accounting Office** Contract Purchase DP No. 1855 Folsom Street, Suite 425 San Francisco, CA 94143-0815 RWPA Fund Source: HCPD13/0901 Grant Code/Detail: Telephone: (415) 476-2977 Invoicing Period: FAX: (415) 476-8158 (check if Yes) FINAL invoice CONTRACT NAME: HIV Health Services

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

## **DETAIL PERSONNEL EXPENDITURES**

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

| DETAIL PERSONNELL   | _//         | BUDGETED     | EXPENSES    | EXPENSES | % OF   | REMAINING       |
|---------------------|-------------|--------------|-------------|----------|--------|-----------------|
| PERSONNEL           | FTE         | SALARY       | THIS PERIOD | TO DATE  | BUDGET | BALANCE         |
|                     | 0.80        | \$140,733.00 |             |          |        | \$140,733.00    |
| Psychiatrist        |             | \$125,874.00 |             |          |        | \$125,874.00    |
| Case manager        | 2.60        |              |             |          |        | \$39,488.00     |
| Clinical Supervisor | 0.40        | \$39,488.00  |             |          |        | \$4,114.00      |
| Program Assistant   | 0.10        | \$4,114.00   |             |          |        | ψ4,114.00       |
|                     |             |              |             |          |        |                 |
|                     |             |              |             |          |        |                 |
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|                     |             |              |             |          |        |                 |
|                     |             |              |             | <u> </u> |        | <del> </del>    |
|                     |             |              |             |          |        | \$310,209.00    |
| TOTAL SALARIES      | 3.90        | \$310,209.00 |             | 1        |        | JE \$310,209.00 |

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

| Certified By: | Date: |
|---------------|-------|
| Title:        |       |

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

EXHIBIT F-1b PAGE A

| CONTRACTOR Regents of the University   | of Califor                | mia                      |                   |                          |             | Number<br>6376-Al |                            |                                     | oice Num   |   |
|--|---------------------------|--------------------------|-------------------|--------------------------|-------------|-------------------|----------------------------|-------------------------------------|------------|---|
| CONTRACTOR: Regents of the University of California Address: Mail Remittance Cashier UCSF Accounting Office 1855 Folsom Street, Suite 425                                    |                           |                          |                   | Contract Purchase DP No. |             |                   | e DP No.                   |                                     |            |   |
| San Francisco, CA 94143-0  | 0815                      |                          |                   |                          |             | Fund              | Source:                    |                                     | RWPA       |   |
| Telephone: (415) 476-2977<br>FAX: (415) 476-8158   |                           |                          |                   |                          | G           | rant Cod          | e/Detail:                  | НС                                  | PD13/08    | 301                                     |
| CONTRACT NAME: HIV Health Services   |                           |                          |                   |                          | 1           | nvoicing          | g Period:                  |                                     |            |   |
| CONTRACT TERM: March 1, 2010 - February 2<br>EXHIBIT TERM: March 1, 2010 - February 2  |                           |                          |                   |                          |             | FINAL             | _ invoice                  |                                     | (check if  | Yes)                                    |
| ROGRAM / EXHIBIT: STOP - Chronic Care HIV/A  | AIDS Muli                 | fi-Discin                | dinary Pro        | oram (                   |             |                   | ntrol No.                  | 391                                 | 6-0TBC-    | A1C                                     |
|  | TOT<br>CONTR              | ΓAL                      | DELIVE<br>THIS PE | RED                      | DELIV       | ,<br>ERED<br>DATE |                            | OF<br>TAL                           |            | INING<br>RABLES                         |
| DELIVERABLES   | UOS                       | Clients                  |                   | Clients                  | UOS         | Clients           | uos                        | Clients                             | uos        | Clients                                 |
| Substance Use Cnsing (Phd) Hr - Individu   | 268                       | ⊹35÷                     |                   |                          |             |                   |                            |                                     | 268        | 35                                      |
|  |                           |                          |                   |                          |             |                   |                            |                                     |            |   |
|  |                           |                          |                   |                          |             |                   |                            |                                     |            |   |
|  |                           |                          |                   |                          |             |                   |                            |                                     |            |   |
|  |                           |                          | <b> </b>          |                          |             |                   |                            |                                     |            |   |
|  |                           | <u> </u>                 | <b> </b>          |                          |             |                   |                            |                                     |            |   |
|  |                           |                          | <u> </u>          |                          | И           | I                 | <u> </u>                   |                                     | <u> </u>   | L                                       |
| Unduplicated Clients for Exhibit   |                           | 35                       |                   |                          | 影響響陰        | ?                 |                            |                                     | 影響器於       |   |
| EXPENDITURES   | BUIN                      | GET                      | EXPEN<br>THIS PE  |                          |             | NSES<br>DATE      |                            | OF<br>GET                           |            | UNING ANCE                              |
| Total Salaries (See Page B)  | \$22,53                   |                          | 1111011           | INOD                     | 102         | 77111             |                            |                                     |            | 34.00                                   |
| Fringe Benefits  | \$4,48                    |                          |                   |                          | 1           |                   |                            |                                     |            | 30.00                                   |
| Total Personnel Expenses   | \$27,0                    | 14.00                    |                   |                          |             |                   |                            |                                     | \$27,0     | 14.00                                   |
| Operating Expenses:  |                           |                          |                   |                          |             | ····              |                            |                                     |            |   |
| Occupancy  | \$3,35                    | 7.00                     | <b></b>           |                          | <b></b>     |                   |                            | ····                                | \$3,35     | 57.00                                   |
| Materials and Supplies General Operating   |                           |                          |                   |                          | -           |                   |                            |                                     |            |   |
| Staff Travel   |                           |                          |                   |                          |             |                   |                            |                                     |            |   |
| Consultant/Subcontractor   |                           |                          | <b></b>           |                          |             |                   |                            |                                     |            |   |
| Other:   |                           |                          |                   |                          |             |                   |                            | •                                   |            |   |
| Utilities  | \$316                     |                          |                   |                          | <u> </u>    | _,_,              |                            |                                     |            | 6.00                                    |
| Computer Network   | \$96                      | .00                      | ļ                 |                          | <b>!</b>    | ·                 |                            |                                     | .\$96      | 5.00                                    |
|  |                           |                          |                   |                          |             |                   |                            |                                     |            |   |
| Total Operating Expenses   | \$3,76                    | 9.00                     |                   |                          | <u> </u>    |                   |                            |                                     | \$3,76     | 9.00                                    |
| Capital Expenditures   |                           | X . X                    |                   |                          |             |                   |                            |                                     |            |   |
| TOTAL DIRECT EXPENSES  | \$30,78                   | 83.00                    |                   |                          |             |                   |                            |                                     |            | 83.00                                   |
| Indirect Expenses  | \$2,77                    |                          |                   |                          |             |                   |                            |                                     | \$2,77     |   |
| TOTAL EXPENSES   | \$33,5                    | <u>53.00</u>             | <u> </u>          |                          | I<br>NOTES  |                   |                            |                                     | \$33,5     | 53.00                                   |
| LESS: Initial Payment Recovery   |                           | <del> i</del>            | <u> </u>          |                          | MOLES       | •                 |                            |                                     |            |   |
| Other Adjustments (Enter as negative, if an REIMBURSEMENT  | opropriate)               |                          | <u> </u>          |                          | 1           |                   |                            |                                     |            |   |
| I certify that the information provided above is, to the accordance with the budget approved for the contra records for those claims are maintained in our office Signature: | et cited for<br>at the ad | r services<br>dress indi | provided un       | der the                  | provision o | f that con        | t requested<br>tract. Full | for reimbi<br>ustification<br>Date: | n and back | s in<br>up                              |
| Title:   |                           |                          | SEUD              | ri Cric                  | /AIDS OF    | FICE A            | thorizatio                 | n For Pay                           | lweut.     | *************************************** |
| Send to: SFDPH - AIDS OFFICE<br>1380 Howard, 4th Floor   |                           |                          | SEUF              | 110113                   | MIDO OF     | · IVE AL          | and Kall                   | aros Fa                             | riiGitt.   |   |
| San Francisco, CA 94103  | }                         | By:                      |                   |                          |             |                   |                            | Date:                               |            |   |

## EXHIBIT F-1b PAGE B

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

|                |  | Control Number           | Mivoice Maintner |
|----------------|--|--------------------------|------------------|
| CONTRACTOR:    | Regents of the University of California                                      | HP-10-06376-Al           | 6049A1CMAR08O    |
|                | Mail Remittance Cashier UCSF Accounting Office 1855 Folsom Street, Suite 425 | Contract Purchase DP No. |                  |
|                | San Francisco, CA 94143-0815   | Fund Source:             | RWPA             |
| Telephone:     | (415) 476-2977   | Grant Code/Detail:       | HCPD13/0801      |
|                | (415) 476-8158   | Invoicing Period:        |                  |
| CONTRACT NAME: | HIV Health Services  | FINAL invoice            | (check it Yes)   |
| CONTRACT TERM: | March 1, 2010 - February 29, 2012  | ACE Control No.          | 3916-0TBC-A1C    |

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

DETAIL PERSONNEL EXPENDITURES

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

| DETAIL PERSONNEL EXP    | . LIADEL   | BUDGETED    | EXPENSES                               | EXPENSES | % OF     | REMAINING   |
|-------------------------|--|-------------|--|----------|----------|-------------|
| PERSONNEL               | FTE  | SALARY      | THIS PERIOD                            | TO DATE  | BUDGET   | BALANCE     |
| Substance Use Counselor | 0.16   | \$20,748.00 |  |          |          | \$20,748.00 |
| Data Entry Specialist   | 0.05   | \$1,786.00  |  |          |          | \$1,786.00  |
|                         |  |             |  | <u> </u> |          |             |
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|                         | <del>                                     </del> |             |  |          |          |             |
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|                         | <del>  </del>                                    |             |  |          |          |             |
|                         |  |             |  | -        |          |             |
| TOTAL SALARIES          | 0.21   | \$22,534.00 | ······································ |          |          | \$22,534.00 |

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

| Certified By: | Date: |  |
|---------------|-------|--|
| Title:        |       |  |

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

EXHIBIT F-1c PAGE A

|  |                                |   |                          |   | Control                   | ······          | Т                            |  | VOICE NUM   |                   |
|--|--------------------------------|---|--------------------------|---|---------------------------|-----------------|------------------------------|--|---|-------------------|
| CONTRACTOR: Regents of the University of California Address: Mail Remittance Cashier UCSF Accounting Office  |                                |   | ı                        | HP-10-06376-Al Contract Purchase DP No. |                           |                 | A1BMAF                       | <b>1080</b>                                  |   |                   |
| 1855 Folsom Street, Suite<br>San Francisco, CA 94143-  |                                |   |                          | •                                       | Dilliau.                  |                 | ,                            |  |   |                   |
|  |                                |   |                          |   |                           | Fund            | i Source:                    | <u></u>                                      | RWPA  |                   |
| Telephone: (415) 476-2977  |                                |   |                          |   |                           |                 |                              |  | +010  | · 4               |
| FAX: <b>(415) 476-8158</b>   |                                |   |                          |   | Gr                        | rant Coo        | de/Detail:                   | HU   | CPD13/08  | 301               |
| CONTRACT NAME: HIV Health Services   |                                |   |                          | -                                       | . ,                       | Invoicing       | g Period:                    |  |   |                   |
| CONTRACT TERM: March 1, 2010 - February 2  | 29. 2012                       |   |                          |   |                           | FINA'           | L invoice                    |  | ](check if  | í Yes)            |
| EXHIBIT TERM: March 1, 2010 - February 2   | 28, 2011                       |   |                          |   |                           |                 | ontrol No.                   |  | 6-0TBC-   | -A1B              |
| ROGRAM / EXHIBIT: Stonewall - Chronic Care I   | HIV/AIDS                       | Multi-Di                                | isciplinar               | ry Progr                                |                           |                 |                              |  |   |                   |
| 00,000,000   | TOT                            | TAL                                     | DELIV                    | /ERED                                   | DELIV                     | VERED           |                              | OF   |   | AINING<br>ERABLES |
| and the company of soft banks  |                                | RACTED                                  |                          | PERIOD                                  |                           | DATE<br>Clients |                              | TAL<br>Clients                               | UOS   | ERABLES Clients   |
| DELIVERABLES   | UOS<br>1 275                   | Clients                                 | UOS                      | Clients                                 | 11 000                    | Tuence          | 11                           | T Clicino                                    | 275   | 30                |
| Substance Use Chslng Hr - Individual   | 275                            | 30                                      | <b>!</b>                 | 1                                       |                           | <u> </u>        | <b> </b>                     | <del></del>                                  | 4}  | 30                |
| Substance Use Cnslng Hr - Group  | 180                            | 30                                      | <b></b> '                | <b></b>                                 | <b></b> '                 |                 | <b> </b> '                   | <del></del>                                  | 180   | 1 30              |
|  | <u> </u>                       |   | <b>.</b>                 |   | <b></b> :                 | <u> </u>        | <b> </b>                     |  | <b>{</b> '  | 1                 |
|  | <b></b> '                      | <u> </u>                                | <b></b> '                | <u> </u>                                | <u> </u>                  | <b></b> '       | <b> </b>  '                  | <b></b> '                                    | <b></b> '   | 4                 |
|  | <b></b> '                      |   | <b></b>                  |   |                           |                 | <b></b>                      | 1'   | <b> </b> '  | <u> </u>          |
|  | /                              | '                                       | .l                       |   |                           | <u> </u>        | <b></b>                      | <u> </u> '                                   | 1   | 1                 |
|  |                                |   | <u>[</u>                 | <u></u>                                 |                           | <u> </u>        | <b></b> '                    | <u> </u>                                     | <b>-</b>  |                   |
|  |                                |   | <u></u> '                |   |                           |                 | <u> </u>                     | <u>                                     </u> | <u></u>   | <del></del>       |
|  | The State Book                 |   | and the same plants      |   | , and the second          |                 | H-rancesemmen                | <del></del>                                  | Transcription   |                   |
| Unduplicated Clients for Exhibit   |                                | <sup>®</sup> 30                         |                          | \$                                      |                           | <u>k</u>        |                              | <u> </u>                                     |   | ż                 |
| Equippe de la constant de la constan |                                | -                                       |                          |   | ~                         |                 | 9/                           | -  | ·<br>~=====   |                   |
| EXPENDITURES   | ~                              |   |                          | ENSES                                   |                           | ENSES           | • -                          | OF   |   | AINING            |
|  |                                | DGET                                    | THIS r                   | PERIOD                                  | TU L                      | DATE            | ₽∪∪                          | DGET   |   | ANCE              |
| Total Salaries (See Page B)  |                                | 00.00                                   |                          |   |                           |                 | <u> </u>                     |  |   | 500.00            |
| Fringe Benefits  |                                | 25.00                                   |                          |   |                           |                 | 1                            |  | al lucumonium descrip   | 25.00             |
| Total Personnel Expenses   | \$33,8                         | 325.00                                  |                          |   |                           |                 | <u> </u>                     |  | <u>\$33,8</u>   | 325.00            |
| Operating Expenses:  |                                |   |                          |   |                           |                 | <u> </u>                     |  |   |                   |
| Occupancy  |                                |   |                          |   |                           |                 |                              |  |   |                   |
| Materials and Supplies   | \$83/                          | 4.00                                    |                          |   |                           |                 |                              | ,  | \$83  | 34.00             |
| General Operating  |                                |   |                          |   |                           |                 |                              | ,  |   |                   |
| Staff Travel   |                                |   |                          |   |                           |                 |                              |  |   |                   |
| Consultant/Subcontractor   |                                |   |                          |   | 1                         |                 |                              |  |   |                   |
| Other:   | <b> </b>                       | *************************************** |                          |   | 1                         |                 |                              | ,  |   |                   |
| Ono.   | -                              |   |                          |   | 1                         |                 | 1                            | <del></del> ,                                |   |                   |
|  |                                | <del></del>                             |                          |   |                           |                 |                              |  |   |                   |
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| ,  | -                              |   | 1                        |   | 1                         |                 | <b></b>                      |  | 1   |                   |
| Total Operating Expenses   | <b>1</b> \$83                  | 4.00                                    | 1                        |   | 1                         |                 | 1                            | -  | \$83  | 34.00             |
| Capital Expenditures   |                                | 1,00                                    | 1                        | <u> </u>                                |                           |                 | 1                            |  | 1   |                   |
| TOTAL DIRECT EXPENSES  | # <u>\$34 F</u>                | 559.00                                  | <del> </del>             |   | 1.                        |                 | 1                            |  | \$34,F  | 559.00            |
|  |                                | 19.00                                   | 1                        |   | -                         |                 | 1                            |  | nd because in the contract of | 19.00             |
| Indirect Expenses  |                                | 778.00                                  | 1                        |   | -                         |                 |                              |  |   | 778.00            |
| TOTAL EXPENSES   | <u> </u>                       | /0.00                                   | <del></del>              |   | NOTES                     | 5               | 1                            |  | <u>1</u>  | 10.0              |
| LESS: Initial Payment Recovery   | * - * -                        |   |                          | -                                       | 110                       | /•              |                              |  |   |                   |
| Other Adjustments (Enter as negative, if a   | appropriate/                   | 1                                       | <b>!</b>                 |   | 4                         |                 |                              |  |   |                   |
| REIMBURSEMENT  |                                |   | 1                        |   |                           |                 |                              |  |   |                   |
| I certify that the information provided above is, to the accordance with the budget approved for the contractords for those claims are maintained in our office Signature:   | ract cited for<br>ce at the ad | or services<br>ddress indi              | s provided u<br>licated. | under the                               | accurate; the provision o | of that con     | it requested<br>itract. Full | d for reimbe<br>justification<br>Date:       | n and back  | s in<br>.up       |
| Title:   | •                              |   |                          |   |                           |                 |                              | •  |   |                   |
| Send to: SFDPH - AIDS OFFICE   | SALES DE LA CONTRACTOR         |   | SFD                      | PH CHS                                  | S/AIDS OF                 | FICE A          | uthorizatic                  | n For Pa                                     | yment:  |                   |
| 1380 Howard, 4th Floor<br>San Francisco, CA 9410   | /3                             | Ву:                                     | :                        |   |                           |                 |                              | Date:  | -   |                   |

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

EXHIBIT F-1c PAGE B

Invoice Number **Control Number** HP-10-06376-AI 6049A1BMAR08O CONTRACTOR: Regents of the University of California Address: Mail Remittance Cashier **UCSF** Accounting Office Contract Purchase DP No. 1855 Folsom Street, Suite 425 San Francisco, CA 94143-0815 **RWPA** Fund Source: Grant Code/Detail: HCPD13/0801 Telephone: (415) 476-2977 Invoicing Period: FAX: (415) 476-8158 (check it Yes) FINAL invoice CONTRACT NAME: HIV Health Services ACE Control No. 3916-0TBC-A1B CONTRACT TERM: March 1, 2010 - February 29, 2012

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

## **DETAIL PERSONNEL EXPENDITURES**

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

|                |      | BUDGETED    | EXPENSES    | EXPENSES | % OF   | REMAINING   |
|----------------|------|-------------|-------------|----------|--------|-------------|
| PERSONNEL      | FTE  | SALARY      | THIS PERIOD | TO DATE  | BUDGET | BALANCE     |
| Counselor      | 0.37 | \$20,167.00 |             |          |        | \$20,167.00 |
| Pscychologist  | 0.09 | \$7,333.00  |             |          |        | \$7,333.00  |
|                |      |             |             |          |        |             |
|                |      |             |             |          |        |             |
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|                |      |             |             | <u> </u> |        | l           |
| TOTAL SALARIES | 0.46 | \$27,500.00 |             | ]        |        | \$27,500.00 |

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

| Certified By: |    | Date: |
|---------------|----|-------|
| Title:        | -, | •     |

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

Appendix F-1d PAGE A

02/24/99

Invoice Number **Control Number** 3916-A1MAR090 HP-12-06376-AI CONTRACTOR: Regents of the University of California Address: Mail Remittance Cashier **UCSF Accounting Office** Contract Purchase DP No. 1855 Folsom Street, Suite 425 San Francisco, CA 94143-0815 Fund Source: RWPA Telephone: (415) 476-2977 HCPD13/0901 Grant Code/Detail: FAX: (415) 476-8158 Invoicing Period: CONTRACT NAME: HIV Health Services (check if Yes) CONTRACT TERM: March 1, 2010- February 29, 2012 FINAL invoice EXHIBIT TERM: March 1, 2011- February 29, 2012 3916-0TBC-A1 ACE Control No. PROGRAM / EXHIBIT: PHP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP) REMAINING **DELIVERED** % OF DELIVERED TOTAL **DELIVERABLES** CONTRACTED THIS PERIOD TO DATE TOTAL UOS UOS Clients UOS Clients UOS Clients UOS Clients Clients **DELIVERABLES** 2,192 400 Case Management, Individual Hour 2,192 400 5,868 600 Primary Medical Care, Encounter 5.868 600 240 150 240 1 150 Mental Health, Hour Substance Use Counseling Hr - Individua 240 150 240 150 1,620 N/A CoE Coord, Planning & Evaluation 1,620 | N/A Unduplicated Clients for Exhibit 600 % OF REMAINING **EXPENSES EXPENSES** EXPENDITURES **BUDGET** BALANCE THIS PERIOD TO DATE BUDGET \$1,091,413.00 Total Salaries (See Page B) \$1,091,413.00 \$209,266.00 Fringe Benefits \$209,266.00 \$1,300,679.00 \$1,300,679.00 Total Personnel Expenses Operating Expenses: Occupancy Materials and Supplies General Operating Staff Travel Consultant/Subcontractor Other: \$12,614.00 \$12,614.00 Total Operating Expenses Capital Expenditures \$1,313,293.00 \$1,313,293.00 TOTAL DIRECT EXPENSES \$118,198.00 \$118,198.00 Indirect Expenses \$1,431,491.00 \$1,431,491.00 TOTAL EXPENSES NOTES: **LESS: Initial Payment Recovery** Other Adjustments (Enter as negative, if appropriate) REIMBURSEMENT I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Date: Signature: Title: SFDPH CHS/AIDS OFFICE Authorization For Payment: SFDPH - AIDS OFFICE Send to: 1380 Howard, 4th Floor San Francisco, CA 94103 Date:

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

Appendix F-1d PAGE · B

CONTRACTOR: Regents of the University of California

Address: Mail Remittance Cashier UCSF Accounting Office

1855 Folsom Street, Suite 425 San Francisco, CA 94143-0815

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

CONTRACT NAME: HIV Health Services

CONTRACT TERM: March 1, 2010- February 29, 2012 EXHIBIT TERM: March 1, 2011- February 29, 2012 Control Number Invoice Number
HP-12-06376-AI 3916-A1MAR090

Contract Purchase DP No.

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

FINAL invoice (check if Yes)

ACE Control No. 3916-0TBC-A1

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

## **DETAIL PERSONNEL EXPENDITURES**

| Sold State Reserved to the second second |       | BUDGETED       | EXPENSES    | EXPENSES | % OF   | REMAINING      |
|--|-------|----------------|-------------|----------|--------|----------------|
| PERSONNEL                                | FTE   | SALARY         | THIS PERIOD | TO DATE  | BUDGET | BALANCE        |
| Physicians                               | 2.12  | \$356,754.00   | 22.000      |          |        | \$356,754.00   |
| Nurse Practitioners                      | 0.97  | \$125,000.00   | ·           |          |        | \$125,000.00   |
| Registered Nurses                        | 0.64  | \$90,000.00    |             |          |        | \$90,000.00    |
| Clinical Pharmacist (PharmD)             | 0.71  | \$100,000.00   |             |          |        | \$100,000.00   |
| Medical Assistant                        | 1.95  | \$84,800.00    |             |          |        | \$84,800.00    |
| Licensed Social Worker                   | 0.71  | \$64,159.00    | _           |          |        | \$64,159.00    |
| Case Manager (MSW)                       | 1.47  | \$101,449.00   |             |          |        | \$101,449.00   |
| Front Desk Clerk                         | 0.75  | \$27,909.00    |             |          |        | \$27,909.00    |
| Primary Investigator                     | 0.01  | \$2,503.00     |             |          |        | \$2,503.00     |
| Nurse Practitioner Sprvsr (NP)           | 0.07  | \$9,846.00     |             |          |        | \$9,846.00     |
| CoE Coordinator (Analyst 4)              | 0.60  | \$41,800.00    | ,           |          |        | \$41,800.00    |
| CoE Administrative Asst 3                | 0.19  | \$8,645.00     |             |          |        | \$8,645.00     |
| CoE Info Tech - Programmer               | 0.89  | \$78,548.00    |             | •        |        | \$78,548.00    |
|  |       |                |             |          |        |                |
|  | 1     |                |             |          |        |                |
|  |       |                |             | <b> </b> |        |                |
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|  | 1     |                |             | <u> </u> |        |                |
|  |       |                |             |          |        |                |
| TOTAL SALARIES                           | 11.08 | \$1,091,413.00 |             |          |        | \$1,091,413.00 |

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

|               |   | •         |
|---------------|---|-----------|
| Certified By: |   | <br>Date: |
| 4             | • |           |
| Title:        | • |           |

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

Appendix F-1e PAGE A

02/24/99

Invoice Number Control Number HP-11-06376-AI 3916-A1AMAR090 CONTRACTOR: Regents of the University of California Address: Mail Remittance Cashier **UCSF Accounting Office** Contract Purchase DP No. 1855 Folsom Street, Suite 425 San Francisco, CA 94143-0815 Fund Source: RWPA Telephone: (415) 476-2977 Grant Code/Detail: HCPD13/0901 FAX: (415) 476-8158 Invoicing Period: CONTRACT NAME: HIV Health Services FINAL invoice (check if Yes) CONTRACT TERM: March 1, 2010 - February 29, 2012 EXHIBIT TERM: March 1, 2011 - February 29, 2012 ACE Control No. 3916-0TBC-A1 PROGRAM / EXHIBIT: AHP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP) DELIVERED REMAINING **DELIVERED** % OF TOTAL **DELIVERABLES** THIS PERIOD TO DATE TOTAL CONTRACTED UOS UOS UOS Clients **DELIVERABLES** UOS Clients UOS Clients Clients Clients 950 200 Mental Health, Encounters 950 200 3,850 3,850 Case Management Hours Unduplicated Clients for Exhibit **网络数据等** 2000000 **建筑地** 1000000 DEPENDENT 200 **EXPENSES** % OF REMAINING **EXPENSES EXPENDITURES** TO DATE THIS PERIOD BUDGET BALANCE BUDGET \$310,209.00 \$310,209.00 Total Salaries (See Page B) \$65,271.00 Fringe Benefits \$65.271.00 \$375,480.00 Total Personnel Expenses \$375,480.00 Operating Expenses: \$16,386.00 Occupancy \$16,386.00 Materials and Supplies \$5,621.00 \$5,621.00 \$2,718.00 \$2,718.00 General Operating \$1,283.00 Staff Travel \$1,283.00 Consultant/Subcontractor Other: \$1,636.00 Computer Network Charge \$1,636,00 \$27,644.00 \$27,644.00 **Total Operating Expenses** Capital Expenditures \$403,124.00 \$403,124.00 TOTAL DIRECT EXPENSES \$36,281.00 \$36,281.00 Indirect Expenses \$439,405,00 \$439,405.00 TOTAL EXPENSES NOTES: **LESS: Initial Payment Recovery** Other Adjustments (Enter as negative, if appropriate) REIMBURSEMENT I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Date: Signature: Title: SFDPH CHS/AIDS OFFICE Authorization For Payment: SFDPH - AIDS OFFICE Send to: 1380 Howard, 4th Floor San Francisco, CA 94103

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

Appendix F-1e PAGE B

Invoice Number **Control Number** 3916-A1AMAR090 HP-11-06376-AI CONTRACTOR: Regents of the University of California Address: Mail Remittance Cashier **UCSF Accounting Office** Contract Purchase DP No. 1855 Folsom Street, Suite 425 San Francisco, CA 94143-0815 RWPA Fund Source: HCPD13/0901 Grant Code/Detail: Telephone: (415) 476-2977 Invoicing Period: FAX: (415) 476-8158 (check if Yes) FINAL invoice CONTRACT NAME: HIV Health Services 3916-0TBC-A1 ACE Control No. CONTRACT TERM: March 1, 2010 - February 29, 2012

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

### DETAIL PERSONNEL EXPENDITURES

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

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|                     |                | BUDGETED                              | EXPENSES                              | EXPENSES | % OF   | REMAINING    |
| PERSONNEL           | FTE            | SALARY                                | THIS PERIOD                           | TO DATE  | BUDGET | BALANCE      |
| Psychiatrist        | 0.80           | \$140,733.00                          |                                       |          |        | \$140,733.00 |
| Case manager        | 2.60           | \$125,874.00                          |                                       |          |        |              |
| Clinical Supervisor | 0.40           | \$39,488.00                           |                                       | · .      |        |              |
| Program Assistant   | 0.10           | \$4,114.00                            |                                       |          |        |              |
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|                     | 200            | #240 200 00                           |                                       |          |        | \$310,209.00 |
| TOTAL SALARIES      | 3.90           | \$310,209.00                          |                                       | <u> </u> |        |              |

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

| Certified By: |   | Date: |
|---------------|---|-------|
| Title:        | • |       |

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

Appendix F-1f PAGE A

Invoice Number Control Number HP-12-06376-AI 3916-A1MAR090 CONTRACTOR: Regents of the University of California Address: Mail Remittance Cashier **UCSF Accounting Office** Contract Purchase DP No. 1855 Folsom Street, Suite 425 San Francisco, CA 94143-0815 Fund Source: RWPA Telephone: (415) 476-2977 Grant Code/Detail: HCPD13/0901 FAX: (415) 476-8158 Invoicing Period: CONTRACT NAME: HIV Health Services CONTRACT TERM: March 1, 2010 - February 29, 2012 FINAL invoice (check if Yes) EXHIBIT TERM: March 1, 2011- February 29, 2012 ACE Control No. 3916-0TBC-A1 PROGRAM / EXHIBIT: STOP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP) REMAINING DELIVERED DELIVERED % OF TOTAL CONTRACTED THIS PERIOD TO DATE TOTAL DELIVERABLES UOS Clients **DELIVERABLES** UOS Clients UOS Clients UOS Clients UOS Clients Substance Use Cnsing (Phd) HOURS 271 35 271 35 Unduplicated Clients for Exhibit **建筑** 35 **BOARD 大学教育 1** 经金融分 (0) (0) **EXPENSES EXPENSES** % OF REMAINING **EXPENDITURES** BUDGET THIS PERIOD TO DATE **BUDGET BALANCE** \$22,534,00 \$22,534.00 Total Salaries (See Page B) Fringe Benefits \$4,480.00 \$4,480.00 \$27,014.00 \$27,014.00 **Total Personnel Expenses** Operating Expenses: \$3,357.00 Occupancy \$3,357.00 Materials and Supplies General Operating Staff Travel Consultant/Subcontractor Other: \$316.00 Utilities \$316.00 Computer Nbetwork Charges \$96.00 \$96.00 \$3,769.00 \$3,769.00 **Total Operating Expenses** Capital Expenditures TOTAL DIRECT EXPENSES \$30,783.00 \$30,783.00 \$2,770.00 \$2,770.00 Indirect Expenses \$33,553.00 \$33,553,00 TOTAL EXPENSES NOTES: LESS: Initial Payment Recovery Other 'Adjustments (Enter as negative, if appropriate) REIMBURSEMENT I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature: Title: SFDPH CHS/AIDS OFFICE Authorization For Payment: SFDPH - AIDS OFFICE Send to: 1380 Howard, 4th Floor San Francisco, CA 94103 By: Date:

DEPARTMENT OF PUBLIC HEALTH CONTRACTOR Appendix F-1f MONTHLY STATEMENT OF DELIVERABLES AND INVOICE PAGE B Invoice Number **Control Number** HP-12-06376-AI 3916-A1MAR090 CONTRACTOR: Regents of the University of California Address: Mail Remittance Cashier **UCSF Accounting Office** Contract Purchase DP No. 1855 Folsom Street, Suite 425 San Francisco, CA 94143-0815 RWPA Fund Source: Grant Code/Detail: HCPD13/0901 Telephone: (415) 476-2977 FAX: (415) 476-8158 Invoicing Period: (check it Yes) FINAL invoice CONTRACT NAME: HIV Health Services ACE Control No. CONTRACT TERM: March 1, 2010 - February 29, 2012 3916-0TBC-A1 EXHIBIT TERM: March 1, 2011- February 29, 2012 'ROGRAM / EXHIBIT: STOP - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP) **DETAIL PERSONNEL EXPENDITURES EXPENSES** % OF REMAINING BUDGETED **EXPENSES** THIS PERIOD TO DATE **BUDGET** BALANCE **PERSONNEL** SALARY FTE \$19,225.00 \$19,225.00 Substance Use Counselor (PhD) 0.15 \$3,309.00 0.08 \$3,309.00 Data Entry Specialist

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

\$22,534.00

| Certified By: | <br> | Date: |  |
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## DEPARTMENT OF PUBLIC HEALTH CONTRACTOR MONTHLY STATEMENT OF DELIVERABLES AND INVOICE

Appendix F-1g PAGE A

Invoice Number Control Number HP-11-06376-Al 3916-A1MAR090 CONTRACTOR: Regents of the University of California Address: Mail Remittance Cashier **UCSF Accounting Office** Contract Purchase DP No. 1855 Folsom Street, Suite 425 San Francisco, CA 94143-0815 **Fund Source: RWPA** Telephone: (415) 476-2977 Grant Code/Detail: HCPD13/0901 FAX: (415) 476-8158 Invoicing Period: CONTRACT NAME: HIV Health Services FINAL invoice (check if Yes) CONTRACT TERM: March 1, 2011- February 29, 2012 EXHIBIT TERM: March 1, 2011 - February 29, 2012 ACE Control No. 3916-0TBC-A1 PROGRAM / EXHIBIT: Stonewall - Chronic Care HIV/AIDS Multi-Disciplinary Program (CCHAMP) DELIVERED REMAINING **DELIVERED** % OF TOTAL **DELIVERABLES** CONTRACTED THIS PERIOD TO DATE TOTAL UOS **DELIVERABLES** UOS Clients UOS Clients UOS Clients Clients UOS Clients 275 30 Substance Use Cnslng Hr - Individual 275 30 Substance Use Cnslng Hr - Group 135 30 135 30 Unduplicated Clients for Exhibit 444 **海影響** 能性的歌 30 **一型性中的性 EXPENDITURES EXPENSES EXPENSES** % OF REMAINING BUDGET THIS PERIOD TO DATE BUDGET BALANCE Total Salaries (See Page B) \$27,500.00 \$27,500.00 \$6,325.00 Fringe Benefits \$6,325.00 \$33,825.00 \$33,825.00 Total Personnel Expenses Operating Expenses: Occupancy \$834,00 \$834.00 Materials and Supplies General Operating Staff Travel Consultant/Subcontractor Other: \$834.00 Total Operating Expenses \$834.00 Capital Expenditures \$34,659.00 \$34,659.00 TOTAL DIRECT EXPENSES \$3,119.00 Indirect Expenses \$3,119.00 \$37,778.00 \$37,778.00 TOTAL EXPENSES NOTES: **LESS: Initial Payment Recovery** Other Adjustments (Enter as negative, if appropriate) REIMBURSEMENT I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Date: Signature: Title: SFDPH CHS/AIDS OFFICE Authorization For Payment: SFDPH - AIDS OFFICE Send to: 1380 Howard, 4th Floor San Francisco, CA 94103

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

Appendix F-1g PAGE B

Invoice Number Control Number 3916-A1MAR090 HP-11-06376-AI CONTRACTOR: Regents of the University of California Address: Mail Remittance Cashier **UCSF Accounting Office** Contract Purchase DP No. 1855 Folsom Street, Suite 425 San Francisco, CA 94143-0815 Fund Source: **RWPA** HCPD13/0901 Grant Code/Detail: Telephone: (415) 476-2977 Invoicing Period: FAX: (415) 476-8158 (check it Yes) FINAL invoice CONTRACT NAME: HIV Health Services ACE Control No. 3916-0TBC-A1 CONTRACT TERM: March 1, 2011- February 29, 2012

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

## **DETAIL PERSONNEL EXPENDITURES**

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

| DE ME LECONOLITIES AND A   | ,  | BUDGETED    | EXPENSES                               | EXPENSES | % OF   | REMAINING   |
|--|--|-------------|--|----------|--------|-------------|
| PERSONNEL  | FTE  | SALARY      | THIS PERIOD                            | TO DATE  | BUDGET | BALANCE     |
| Counselor  | 0.37   | \$20,167.00 |  |          |        | \$20,167.00 |
| Pscychologist (PhD)  | 0.09   | \$7,333.00  |  |          |        | \$7,333.00  |
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| TOTAL SALARIES   | 0.46   | \$27,500.00 |  |          |        | \$27,500.00 |

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

| Certified By: | Date: |
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| Title:        |       |