

**COUNTY OF SAN DIEGO
BOARD OF SUPERVISORS
TUESDAY, MAY 20, 2025**

MINUTE ORDER NO. 4

SUBJECT: ACCEPT HIV SERVICES GRANT FUNDING, AUTHORIZE REQUEST FOR STATEMENT OF QUALIFICATIONS (RFSQ) AND AWARD CONTRACTS FROM THE RFSQ FOR OUTPATIENT AMBULATORY HEALTH SERVICES AND RE-ENGAGEMENT IN CARE SERVICES, ORAL HEALTH SERVICES AND PSYCHIATRIC SERVICES, AUTHORIZE AMENDMENTS TO EXTEND EXISTING CONTRACTS, AND AUTHORIZE APPLICATIONS FOR FUTURE FUNDING OPPORTUNITIES (DISTRICTS: ALL)

OVERVIEW

Since 1991, the San Diego County Board of Supervisors (Board) has authorized grants and agreements with the United States Health Resources and Services Administration (HRSA) to provide care and treatment services to persons living with HIV. These funding sources include the *Ryan White HIV/AIDS Treatment Extension Act of 2009* (RWTEA) Part A and RWTEA Part A Minority AIDS Initiative (MAI), and *Ending the HIV Epidemic: A Plan for America - Ryan White HIV/AIDS Program Parts A and B*.

RWTEA Part A and RWTEA Part A MAI comprise the single largest federal funding program focused on care, treatment and support services for persons living with diagnosed HIV. In San Diego County, this funding supports medical treatment, oral health care, mental health treatment, substance use disorder treatment, temporary housing assistance, and other critical services for persons living with HIV. This funding also supports operations of the HIV Planning Group, an official advisory body to the Board that, under the Ryan White legislation, has responsibility to assess unmet need and services gaps, and then allocate funding to address those gaps. On October 2, 2024, the County of San Diego (County), Health and Human Services Agency (HHSA) applied for a three-year cycle of funding. The County received a notice of award on January 14, 2025 and is estimating a three-year total funding of \$40 million.

The *Ending the HIV Epidemic: A Plan for America - Ryan White HIV/AIDS Program Parts A and B* funding supports community engagement, leadership development, linkage and retention in HIV care, workforce development, benefits navigation, and housing supports for persons living with diagnosed HIV. On October 12, 2024, the County applied for a five-year cycle of funding. The County received a notice of award on January 6, 2025 and is estimating a five-year total funding of \$12.8 million.

Today's action requests the Board accept an estimated three-year total of approximately \$37.4 million for RWTEA Part A and \$2.6 million in RWTEA Part A MAI, accept an estimated five-year total of approximately \$12.8 million in EHE funding, and authorize a Request for Statement of Qualifications for Outpatient Ambulatory Health Services and Re-engagement in HIV care, Oral Health Services, and Psychiatric Services, and to award contracts as needed.

This item supports the County vision of a just, sustainable, and resilient future for all, specifically those communities and populations in San Diego County that have been historically left behind as well as our ongoing commitment to the regional *Live Well San Diego* vision of healthy, safe, and thriving communities. This will be accomplished through education, prevention, and intervention to interrupt

transmission of disease in the region. This item also supports the County Getting to Zero initiative by planning and allocating resources dedicated to services for residents who are vulnerable to or living with HIV.

RECOMMENDATION(S)

CHIEF ADMINISTRATIVE OFFICER

1. Waive Board Policy B-29, Fees, Grant, Revenue Contracts - Department Responsibility for Cost Recovery, which requires prior approval of grant applications and full-cost recovery of grants.
2. Authorize the acceptance of approximately \$37.4 million and \$2.6 million in grant funds from the Health Resources and Services Administration for the period of March 1, 2025 through February 29, 2028, for Ryan White Part A and Ryan White Part A Minority AIDS Initiative respectively, and authorize the Deputy Chief Administrative Officer, Health and Human Services Agency, or designee, to execute all required grant documents, upon receipt, including any annual extensions, amendments and/or revisions thereto that do not materially impact or alter the services or funding level.
3. Authorize the acceptance of approximately \$12.8 million in grant funds from the Health Resources and Services Administration for the period of March 1, 2025 through February 28, 2030 for Ending the HIV Epidemic, and authorize the Deputy Chief Administrative Officer, Health and Human Services Agency, or designee, to execute all required grant documents, upon receipt, including any annual extensions, amendments and/or revisions thereto that do not materially impact or alter the services or funding level.
4. In accordance with Section 401, Article XXIII of County Administrative Code, authorize the Director, Department of Purchasing and Contracting, to issue a Request for Statement of Qualifications (RFSQ), for Outpatient Ambulatory Health Services and Re-engagement in HIV care, Oral Health Services, and Psychiatric Services, and upon successful negotiations and determination of a fair and reasonable price, award contracts as needed for a term of one year with four option years and up to an additional six months if needed, and to amend the contracts as needed to reflect changes in services and funding, subject to the approval of the Deputy Chief Administrative Officer, Health and Human Services Agency.
5. In accordance with Board Policy A-87, Competitive Procurement, and Administrative Code Section 401, approve and authorize the Director, Department of Purchasing and Contracting, subject to successful negotiations and a determination of a fair and reasonable price, to amend the following contracts to extend the contract term through December 31, 2025; and amend the contracts as required in order to reflect changes to services and funding allocations, subject to the approval of the Deputy Chief Administrative Officer, Health and Human Services Agency:
 - a. Contract #556170 with AIDS Healthcare Foundation for Outpatient Ambulatory Health Services.
 - b. Contract #556172 with Family Health Centers of San Diego for Outpatient Ambulatory Health Services and Re-engagement in HIV Care Services, Oral Health Services, and Psychiatric Services.
 - c. Contract #556175 with San Diego American Indian Health Center for Oral Health Services.

- d. Contract #556212 with University of California San Diego, Owen Clinic for Outpatient Ambulatory Health Services and Re-engagement in HIV Care Services, and Psychiatric Services.
 - e. Contract #563231 with University of California San Diego, Mother Child, and Adolescent Program for Outpatient Ambulatory Health Services and Re-engagement in HIV Care Services, and Psychiatric Services.
 - f. Contract #563284 with North County Health Project, dba TrueCare for Outpatient Ambulatory Health Services.
 - g. Contract #566466 with Vista Community Clinics for Outpatient Ambulatory Health Services and Re-engagement in HIV Care Services, Oral Health Services, and Psychiatric Services.
 - h. Contract #566476 with San Ysidro Health for Outpatient Ambulatory Health Services and Re-engagement in HIV Care Services, Oral Health Services, and Psychiatric Services.
6. In accordance with Board Policy A-87, Competitive Procurement, and Administrative Code Section 401, approve and authorize the Director, Department of Purchasing and Contracting, subject to successful negotiations and a determination of a fair and reasonable price, to amend contracts #507645 and #554288 with United HealthCare (dba AmeriChoice) for administrative services organization services to extend the contract term through December 31, 2025, and amend the contracts as required in order to reflect changes to services and funding allocations, subject to the approval of the Deputy Chief Administrative Officer, Health and Human Services Agency.
7. Authorize the Deputy Chief Administrative Officer, Health and Human Services Agency, or designee, to apply for any additional funding opportunity announcements, if available, to address the prevention, testing, care and treatment needs of those impacted by HIV.

EQUITY IMPACT STATEMENT

In San Diego County, gay, bisexual, and other men who have sex with men comprise 62% of recent HIV diagnoses and 70% of persons living with HIV. Moreover, like much of the United States, HIV has disproportionately impacted some of San Diego County's most vulnerable residents, which include Black and Hispanic communities, gay, bisexual, and other men who have sex with men. According to the 2024 local surveillance data, Black residents comprise 4.4% of the San Diego County population, but proportionately they represent 20% of recent HIV diagnoses. Likewise, Hispanic residents comprise 35% of the San Diego County population, yet proportionally they represent 53% of recent HIV diagnoses.

The County of San Diego Health and Human Services Agency, Public Health Services in partnership with the HIV Planning Group, an official advisory board to the San Diego County Board of Supervisors, conducts need assessments of residents living with or vulnerable to HIV and assessments of system capacity and capabilities every three years. This process includes engaging with different impacted communities through focus groups annually. These engagement efforts play a crucial role in informing decisions and ensuring resources are effectively and equitably distributed to serve the needs of those most impacted by HIV in San Diego County. Accepting grant funding and establishing new contracts for services will support equity by ensuring populations and services align with addressing health disparities.

SUSTAINABILITY IMPACT STATEMENT

The proposed actions align with the County of San Diego (County) Sustainability Goal #2 to provide just and equitable access to County services and resources, and Sustainability Goal #4 to protect the health and well-being of San Diegans. This will be accomplished by increasing capacity and services aimed to prevent, identify, and treat HIV. Testing identification, and treatment of HIV will improve the overall health of communities, reduce the demand of associated care services, while increasing effectiveness of care providers and lowering operating costs.

FISCAL IMPACT

Recommendation #2: Authorize acceptance of Ryan White Part A and Part A Minority AIDS Initiative funds

Funds for this request are included in the Fiscal Year (FY) 2024-25 Operational Plan and FY 2025-27 CAO Recommended Operational Plan in the Health and Human Services Agency. If approved, this request will result in estimated annual program costs of \$4,310,334 and revenue of \$4,234,475 in FY 2024-25, costs of \$13,146,521 and revenue of \$12,915,150 in FY 2025-26, and costs of \$13,803,847 and revenue of \$13,560,907 in FY 2026-27, for a total cost of \$40,764,990 and revenue of \$40,047,550 through FY 2027-28. The funding for this grant is the United States Health Resources and Services Administration.

A waiver of Board Policy B-29 is requested because the funding does not offset all costs. These unrecovered costs are estimated to be \$75,859 in FY 2024-25, \$231,371 in FY 2025-26, and \$242,940 in FY 2026-27, for a total of \$717,440 through FY 2027-28. The funding source for these costs will be existing Realignment. The public benefit for providing these services far outweighs the costs.

There will be no change in net General Fund cost and no additional staff years.

Recommendation #3: Authorize acceptance of Ending the HIV Epidemic funding

Funds for this request are included in the Fiscal Year (FY) 2024-25 Operational Plan and FY 2025-27 CAO Recommended Operational Plan in the Health and Human Services Agency. If approved, this request will result in estimated annual program costs of \$884,889 and revenue of \$854,696 in FY 2024-25, and costs of \$2,654,672 and revenue of \$2,564,088 in FY 2025-26 and FY 2026-27, for a total cost of \$13,273,358 and revenue of \$12,820,440 through FY 2029-30. The funding for this grant is the United States Health Resources and Services Administration.

A waiver of Board Policy B-29 is requested because the funding does not offset all costs. These unrecovered costs are estimated to be \$30,193 for FY 2024-25, and \$90,584 for FY 2025-26 and FY 2026-27, for a total of \$452,918 through FY 2029-30. The funding source for these costs will be existing Realignment. The public benefit for providing these services far outweighs the costs.

There will be no change in net General Fund cost and no additional staff years.

Recommendation #4: Authorize the Director, Department of Purchasing and Contracting, to issue a Request for Statement of Qualifications (RFSQ)

Funds for this request are included in the Fiscal Year (FY) 2025-27 CAO Recommended Operational Plan in the Health and Human Services Agency. If approved, this request will result in estimated costs and revenue of \$993,988 in FY 2025-26, and estimated costs and revenue of approximately \$993,988 in

FY 2026-27. The funding source is the United States Health Resources and Services Administration Ryan White Part A funding. There will be no change in net General Fund cost and no additional staff years.

Recommendation #5: Authorize Contract Amendments for Extensions

Funds for this request are included in the Fiscal Year (FY) 2025-27 CAO Recommended Operational Plan in the Health and Human Services Agency. If approved, this request will result in estimated costs and revenue of \$496,994 in FY 2025-26. The funding source is the United States Health Resources and Services Administration Ryan White Part A funding \$467,174 (Outpatient Ambulatory Health Services, Oral Health and Psychiatric service contracts) and Ending the HIV Epidemic \$29,820. There will be no change in net General Fund cost and no additional staff years.

Recommendation #6: Authorize Contract Amendments for Extensions

Funds for this request are included in the Fiscal Year (FY) 2025-27 CAO Recommended Operational Plan in the Health and Human Services Agency. If approved, this request will result in estimated costs and revenue of \$480,000 in FY 2025-26. The funding source is the United States Health Resources and Services Administration Ryan White Part A funding. There will be no change in net General Fund cost and no additional staff years.

BUSINESS IMPACT STATEMENT

N/A

ACTION:

ON MOTION of Supervisor Montgomery Steppe, seconded by Supervisor Desmond, the Board of Supervisors took action as recommended, on Consent.

AYES: Anderson, Lawson-Remer, Montgomery Steppe, Desmond

ABSENT: (District 1 Seat Vacant)

State of California)

County of San Diego) §

I hereby certify that the foregoing is a full, true and correct copy of the Original entered in the Minutes of the Board of Supervisors.

ANDREW POTTER

Clerk of the Board of Supervisors



Signed

by Andrew Potter

