

BARBARA FERRER, Ph.D., M.P.H., M.Ed. Director

MUNTU DAVIS, M.D., M.P.H. County Health Officer

ANISH P. MAHAJAN, M.D., M.S., M.P.H. Chief Deputy Director

313 North Figueroa Street, Room 806 Los Angeles, California 90012 TEL (213) 288-8117 • FAX (213) 975-1273

www.publichealth.lacounty.gov

February 27, 2024

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

Dear Supervisors:



BOARD OF SUPERVISORS

Hilda L. Solis First District Holly J. Mitchell Second District Lindsey P. Horyoth

Third District

Janice Hahn

Janice Hahn Fourth District

Kathryn Barger Fifth District

ADOPTED

BOARD OF SUPERVISORS COUNTY OF LOS ANGELES

45 February 27, 2024

JEFF LEVINSON INTERIM EXECUTIVE OFFICER

APPROVAL TO AMEND 49 SOLE SOURCE CORE HIV CARE SERVICES CONTRACTS TO EXTEND THE TERM EFFECTIVE MARCH 1, 2024 THROUGH FEBRUARY 28, 2025 (ALL SUPERVISORIAL DISTRICTS) (3 VOTES)

SUBJECT

Request approval to execute contract amendments to 49 sole source Core HIV Care Services contracts to extend the term effective March 1, 2024 through February 28, 2025.

IT IS RECOMMENDED THAT THE BOARD:

- 1. Delegate authority to the Director of the Department of Public Health (Public Health), or designee, to execute contract amendments to 49 sole source Core HIV Care Services contracts to extend the term effective March 1, 2024 through February 28, 2025, with the providers identified in Attachments A through D, for a total maximum obligation of \$32,998,411, 100 percent offset by Health Resources and Services Administration (HRSA) Ryan White Program (RWP) Part A funds, subject to review and approval by County Counsel.
- 2. Delegate authority to the Director of Public Health, or designee, to execute amendments to the contracts that extend the term through February 28, 2026, at amounts to be determined by the Director of Public Health, contingent upon the availability of funds and contractor performance; allow the rollover of unspent contract funds, if allowable by the grantor; provide an increase or decrease in funding up to 25 percent above or below the annual base maximum obligation, effective upon amendment execution, or at the beginning of the applicable contract period; allow for reallocation of funds between budgets; and correct errors in the contracts' terms and conditions, and/or update the statement of work and/or scope

of work, as necessary, subject to review and approval by County Counsel, and notification to your Board and the Chief Executive Office (CEO).

- 3. Delegate authority to the Director of Public Health, or designee, to execute change notices to the contracts that authorize modifications to the budget with corresponding modifications to the statement of work and/or scope of work, that are within the same scope of services, as necessary, and changes to hours of operation and/or service locations.
- 4. Delegate authority to the Director of Public Health, or designee, to immediately suspend or terminate contracts upon issuing a written notice to contractors who fail to perform and/or fully comply with program requirements, and terminate contracts for convenience by providing a 30-calendar day advance written notice to contractors.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Approval of Recommendation 1 will allow for the continuation of Core HIV Care Services that includes 16 Ambulatory Outpatient Medical (AOM) contracts, 16 Medical Care Coordination (MCC) contracts, five Mental Health (MH) contracts, 11 Oral Healthcare (OHC) contracts, and one Legal Services contract, in alignment with Commission on HIV (COH) priorities and current service utilization patterns.

HIV care and treatment services for people with HIV (PWH) are vital to optimize patient health and help reduce the transmission and spread of HIV. Public Health must ensure there are no gaps in services.

The immediate and necessary justifications to extend the contracts for Core HIV Care Services are as follows: (1) AOM services help delay the progression of HIV disease: prevent and treat opportunistic infections; promote optimal health and quality of life; and reduce further HIV transmission by providing clients with education and support to implement risk reduction strategies; (2) MCC services deliver patient-centered activities that focus on addressing health status and co-morbid conditions; engagement and retention in care; adherence to antiretroviral medications; and HIV risk reduction; (3) OHC services significantly improve oral health and quality of life for PWH and provides an entry point into the health care system where eligible PWH can enter and be directed to primary medical care if they have fallen out of care; (4) coordinated and integrated HIV MH services to improve clients' mental health outcomes and retention in primary and HIV health care services, resulting in viral suppression and decreased risk of HIV transmission; and (5) Legal Services provide legal support to PWH and training and technical assistance to community-based organizations serving PWH with matters involving denial of public benefits, tenant rights issues, immigration status concerns, and debtor-creditor conflicts that impact social determinants of health and health outcomes.

Approval of Recommendation 2 will allow Public Health to execute amendments to the contracts to extend the term through February 28, 2026; rollover unspent funds; increase or decrease funding up to 25 percent above or below the annual base maximum obligation; allow for reallocation of funds between budgets; correct errors in the contracts' terms and conditions; and update the statement of work and/or scope of work.

Approval of Recommendation 3 will allow Public Health to execute change notices to the contracts that authorize modifications to the budget with corresponding modifications to the statement of work and/or scope of work, that are within the same scope of services, as necessary, and changes to hours of operation and/or service locations.

Approval of Recommendation 4 will allow Public Health to immediately suspend or terminate contracts with contractors who fail to perform and/or fully comply with program requirements, and to terminate contracts for convenience by providing 30-calendar days' advance written notice to contractors.

Implementation of Strategic Plan Goals

The recommended actions support Strategy I.2, Enhance Our Delivery of Comprehensive Interventions, of the County's Strategic Plan.

FISCAL IMPACT/FINANCING

The total County maximum obligation for the amendments as detailed in Attachments A through D, is \$32,998,411, consisting of \$7,744,394 for AOM services; \$12,439,886 for MCC services; \$9,569,932 for OHC services; \$1,806,571 for MH services; and \$1,437,628 for Legal Services for the period effective March 1, 2024, through February 28, 2025, 100 percent funded by HRSA RWP Part A funds.

There is no net County cost associated with this action.

Funding for these extensions is included in Public Health's Final Adopted Budget for fiscal year (FY) 2023-24 and will be included in future FYs, as necessary.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Public Health's allocations for each of the service categories are aligned with the COH recommended allocations. As required by Board Policies 5.100 and 5.120, your Board was notified on December 22, 2023, of Public Health's intent to extend the term of these Core HIV Care Services contracts as sole source with an intent to request approval increase or decrease these Board-approved contracts up to 25 percent.

Attachment E is the set of five sole source checklists for each Core HIV Care Service signed by the CEO.

CONTRACTING PROCESS

Since the original award and execution of the 49 referenced contracts, the contracts have undergone multiple amendments including term extensions, adjustments to funding allocations, and revisions to the statements of work.

The Division of HIV and STD Programs (DHSP) oversees approximately 26 service categories, which make up approximately 200 service contracts. Given the volume of this large service portfolio, DHSP, in coordination with Public Health Contracts and Grants, has developed a timeline for the solicitation for services, which must be staggered. Additionally, resource constraints amidst the COVID-19 pandemic and workload associated with the pandemic greatly affected the schedule of solicitations between 2020 and 2021. The pandemic also affected staff and the ability of our community partners to respond. Public Health resumed the release of solicitations starting in 2022, that included a solicitation timeline for the next three years, including, but not limited to: AOM, MCC, MH, OHC, and Legal Services. Prior to any solicitation, Public Health must consider potential adjustments in COH priorities and pending revised federal award notices, which can affect the timing or funding available for contracted services; therefore, shifts in solicitation schedules may be necessary. Until this process is finalized, Public Health is seeking to extend these Core HIV Care Services contracts for the continued provision of care.

AOM and MCC

On February 26, 2019, your Board approved 38 new contracts, consisting of 19 AOM and 19 MCC contracts as a result of a solicitation for the term effective March 1, 2019 through February 28, 2022, and delegated authority to extend the term through February 29, 2024. On February 25, 2022, Public Health exercised that delegated authority to extend 18 AOM contracts through February 29, 2024, and 18 MCC contracts through February 28, 2023. In addition, Public Health notified your Board that two contracts with Saban Community Clinic, one for AOM and one for MCC, that were part of the original 2019 Board approval action were not being extended, as those contracts were relinquished by the agency.

On February 24, 2023, I notified your Board that I was exercising delegated authority to extend the term of 18 MCC contracts for the period effective March 1, 2023 through February 29, 2024.

Under this Board action, Public Health is requesting Board approval to extend the term of 16 AOM contracts and 16 MCC contracts for 12 months effective March 1, 2024.

Mental Health

On August 8, 2017, your Board approved eight new MH contracts as a result of a solicitation, effective for the term August 8, 2017 through February 29, 2020, and an automatic option to extend through February 28, 2022.

On February 15, 2022, your Board approved the execution of amendments to the eight MH contracts to extend the terms effective March 1, 2022 through February 28, 2023, with an automatic option to extend through February 29, 2024.

On June 1, 2022, Venice Family Clinic notified Public Health that due to the expansion of Medi-Cal, there were significantly fewer RWP-eligible clients, and therefore, the agency relinquished its MH contract effective June 30, 2022.

On January 19, 2024, Tarzana Treatment Centers, Inc. notified Public Health that due to the underutilization of the fee-for-service contract funds, the agency would not renew the MH contract beyond the contract end date of February 29, 2024.

Under this Board action, Public Health is requesting approval to extend the term of five MH contracts for 12 months effective March 1, 2024.

Oral Health

On June 11, 2019, your Board approved 12 new OHC contracts as a result of a solicitation, effective for the term of July 1, 2019 through February 28, 2022, and delegated authority to extend the term through February 29, 2024, which was exercised on February 23, 2022.

Under this Board action, Public Health is requesting approval to extend the term of 11 OHC contracts for 12 months effective March 1, 2024.

Legal Services

On December 15, 2020, your Board delegated authority to the Chief Executive Office to approve the delegation and assignment of services under Contract Number PH-003553 with Public Counsel to the InnerCity Law Center, effective December 15, 2020 through February 28, 2022, and delegated authority to extend the term through February 29, 2024, which was exercised on February 23, 2022.

Due to the need for revisions to this Board letter as advised by County Counsel, Public Health was unable to present the recommended contract amendments three weeks prior to the contract amendments' effective date in accordance with Board Policy 5.015.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommended actions will allow Public Health to continue to provide uninterrupted delivery of critical core HIV care services to Los Angeles County residents.

Respectfully submitted,

Basa Tener

Barbara Ferrer, Ph.D., M.P.H., M.Ed. Director

BF:ml #07401

Enclosures

c: Chief Executive Officer County Counsel Executive Officer, Board of Supervisors

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH CORE HIV CARE SERVICES

AMBULATORY OUTPATIENT MEDICAL SERVICES

No.	Provider Name	Contract Number		extension Term 8/1/24 - 2/28/25	Supervisorial District of Site(s)	Service Planning Area of Site(s)
	AMBULATORY OUTPATI			MEDICAL		
1	AIDS Healthcare Foundation	PH-003737	\$	2,669,151	1 through 5	1 through 8
2	AltaMed Health Services Corporation	PH-003739	\$	875,215	1 & 4	3 & 7
3	APLA Health & Wellness	PH-003741	\$	524,964	2 & 4	4, 6 & 8
4	Children's Hospital Los Angeles	PH-003743	\$	15,146	3	4
5	Dignity Health d.b.a St. Mary Medical Center	PH-003745	\$	356,270	4	8
6	East Valley Community Health Center, Inc.	PH-003747	\$	298,740	1	3
7	JWCH Institute, Inc.	PH-003751	\$	581,123	1 & 5	3 & 4
8	Long Beach Department of Health and Human Services	PH-003753	\$	123,019	4	8
9	Los Angeles LGBT Center	PH-003755	\$	987,994	3	4
10	Men's Health Foundation	PH-003757	\$	341,697	2 & 3	4 & 6
11	Northeast Valley Health Corporation	PH-003759	\$	314,754	3	2
12	St. John's Well Child and Family Center	PH-003763	\$	42,723	2	6
13	THE Clinic, Inc.	PH-003767	\$	93,769	2	6
14	The Regents of the University of California	PH-003769	\$	389,605	2	5
15	Venice Family Clinic	PH-003771	\$	46,519	3	5
16	Watts Healthcare Corporation	PH-003773	\$	83,705	2	6
	TOTAL ANNUAL MAXIMUM OBLIGATION PE	\$7,744,394				
	CORE HIV CARE SERVICES GRAND TO			\$32,998,411		

MEDICAL CARE COORDINATION

No.	Provider Name	Contract Number	Extended Term 3/1/24 - 2/28/25	Supervisorial District of Site(s)	Service Planning Area of Site(s)
	MEC	DICAL CARE COOR	RDINATION SERVICES		
1	AIDS Healthcare Foundation	PH-003738	\$ 1,400,000	1 through 5	1 through 8
2	AltaMed Health Services Corporation	PH-003740	\$ 913,708	1 & 4	3 & 7
3	APLA Health & Wellness	PH-003742	\$ 1,603,915	2 & 4	4, 6, & 8
4	Children's Hospital Los Angeles	PH-003744	\$ 101,663	3	4
5	Dignity Health d.b.a St. Mary Medical Center	PH-003746	\$ 942,832	4	8
6	East Valley Community Health Center, Inc.	PH-003748	\$ 337,690	1	3
7	JWCH Institute, Inc.	PH-003752	\$ 856,659	1 & 5	3 & 4
8	Long Beach Department of Health and Human Services	PH-003754	\$ 493,387	4	8
9	Los Angeles LGBT Center	PH-003756	\$ 2,547,636	3	4
10	Men's Health Foundation	PH-003758	\$ 987,330	2 & 3	4 & 6
11	Northeast Valley Health Corporation	PH-003760	\$ 385,053	3	2
12	St. John's Well Child and Family Center	PH-003764	\$ 421,111	2	6
13	THE Clinic, Inc.	PH-003768	\$ 240,092	2	6
14	The Regents of the University of California	PH-003770	\$ 723,216	2	5
15	Venice Family Clinic	PH-003772	\$ 308,246	3	5
16	Watts Healthcare Corporation	PH-003774	\$ 177,348	2	6
	TOTAL ANNUAL MAXIMUM OBLIGAT	TION		\$12,439,886	

No.	Provider Name	Contract Number		ended Term /24 - 2/28/25	Supervisorial District of Site(s)	Service Planning Area of Site(s)
ORAL HEALTHCARE SE			RVICE	:s		
1	AIDS Healthcare Foundation	PH-003799	\$	1,117,367	1	4
2	AltaMed Health Services Corporation	PH-003800	\$	400,000	1	7
3	APLA Health & Wellness	PH-003801	\$	1,550,000	1, 2, & 4	4,6, & 8
4	Dignity Health d.b.a St. Mary Medical Center	PH-003802	\$	827,565	4	8
5	East Valley Community Health Center, Inc.	PH-003803	\$	197,000	1	3
6	JWCH Institute, Inc.	PH-003805	\$	980,000	2 & 5	1,3,4 & 6
7	Northeast Valley Health Corporation	PH-003806	\$	348,000	2	3
8	St. John's Well Child and Family Center	PH-003807	\$	200,000	2	6
9	The Regents of the University of California	PH-003808	\$	1,650,000	3	5
10	University of Southern California	PH-003809	\$	2,000,000	2	6
11	Watts Healthcare Corporation	PH-003810	\$	300,000	2	6
	TOTAL ANNUAL MAXIMUM OBLIGATION				\$9,569,932	

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH CORE HIV CARE SERVICES FOR PERSONS LIVING WITH HIV

No.	Provider Name	Contract Number	Extended Term 3/1/24 - 2/28/25	Supervisorial District of Site(s)	Service Planning Area of Site(s)
MEN			TAL HEALTH SERVICES		
1	AIDS Healthcare Foundation	PH-003359	\$ 614,225	1,2, &3	2, 4 & 5
2	AltaMed Health Services Corporation	PH-003360	\$ 230,109	1	3&7
3	JWCH Institute, Inc.	PH-003361	\$ 343,864	1,2,3 &5	3&4
4	Northeast Valley Health Corporation	PH-003362	\$ 118,554	3	2
5	5 St. John's Well Child and Family Center PH-003364		\$ 499,819	2	6
	TOTAL ANNUAL MAXIMUM OBL	GATION	\$1,806,571		
No.	Provider Name	Provider Name Contract Number Extended Term 3/1/24 - 2/28/25		Supervisorial District of Site(s)	Service Planning Area of Site(s)
•		LEGAL SERVICES			
1	Inner City Law Center	PH-003553	\$ 1,437,628	1-5	2-6
TOTAL ANNUAL MAXIMUM OBLIGATION				\$1,437,628	

SOLE SOURCE CHECKLIST FOR AMBULATORY OUTPATIENT MEDICAL (AOM) CONTRACTS

	MEDIOAE (AOM) CONTRACTO
Departm	nent Name:
	New Sole Source Contract
	Sole Source Amendment to Existing Contract Date Existing Contract First Approved:
Check (✓)	JUSTIFICATION FOR SOLE SOURCE CONTRACTS AND AMENDMENTS Identify applicable justification and provide documentation for each checked item.
	Only one bona fide source (monopoly) for the service exists; performance and price competition are not available. A monopoly is an "Exclusive control of the supply of any service in a given market. If more than one source in a given market exists, a monopoly does not exist."
	Compliance with applicable statutory and/or regulatory provisions.
	Compliance with State and/or federal programmatic requirements.
	Services provided by other public or County-related entities.
	Services are needed to address an emergent or related time-sensitive need.
	The service provider(s) is required under the provisions of a grant or regulatory requirement.
	Services are needed during the time period required to complete a solicitation for replacement services; provided services are needed for no more than 12 months from the expiration of an existing contract which has no available option periods.
	Maintenance and support services are needed for an existing solution/system during the time to complete a solicitation for a new replacement solution/system; provided the services are needed for no more than 24 months from the expiration of an existing maintenance and support contract which has no available option periods.
	Maintenance service agreements exist on equipment which must be serviced by the original equipment manufacturer or an authorized service representative.
	It is more cost-effective to obtain services by exercising an option under an existing contract.
	It is in the best economic interest of the County (e.g., significant costs and time to replace an existing system or infrastructure, administrative cost and time savings and excessive learning curve for a new service provider, etc.). In such cases, departments must demonstrate due diligence in qualifying the cost-savings or cost-avoidance associated with the best economic interest of the County.

AOM Contractors

1	AIDS Healthcare Foundation
2	AltaMed Health Services Corporation
3	APLA Health & Wellness
4	Children's Hospital Los Angeles
5	Dignity Health d.b.a St. Mary Medical Center
6	East Valley Community Health Center, Inc.
7	JWCH Institute, Inc.
8	Long Beach Department of Health and Human Services
9	Los Angles LGBT Center
10	Men's Health Foundation
11	Northeast Valley Health Corporation
12	St. John's Well Child and Family Center
13	THE Clinic, Inc.
14	The Regents of the University of California
15	Venice Family Clinic
16	Watts Healthcare Corporation

Date

SOLE SOURCE CHECKLIST FOR MEDICAL CARE COORDINATION (MCC) CONTRACTS

Departmen	Department Name:				
	New Sole Source Contract				
	Sole Source Amendment to Existing Contract Date Existing Contract First Approved:				
Check (✓)	JUSTIFICATION FOR SOLE SOURCE CONTRACTS AND AMENDMENTS Identify applicable justification and provide documentation for each checked item.				
	Only one bona fide source (monopoly) for the service exists; performance and price competition are not available. A monopoly is an "Exclusive control of the supply of any service in a given market. If more than one source in a given market exists, a monopoly does not exist."				
	Compliance with applicable statutory and/or regulatory provisions.				
	Compliance with State and/or federal programmatic requirements.				
	> Services provided by other public or County-related entities.				
	> Services are needed to address an emergent or related time-sensitive need.				
	The service provider(s) is required under the provisions of a grant or regulatory requirement.				
	Services are needed during the time period required to complete a solicitation for replacement services; provided services are needed for no more than 12 months from t expiration of an existing contract which has no available option periods.	he			
	Maintenance and support services are needed for an existing solution/system during the time to complete a solicitation for a new replacement solution/system; provided the services are needed for no more than 24 months from the expiration of an existing maintenance and support contract which has no available option periods.	Э			
	Maintenance service agreements exist on equipment which must be serviced by the original equipment manufacturer or an authorized service representative.				
	It is more cost-effective to obtain services by exercising an option under an existing contract.				
	It is in the best economic interest of the County (e.g., significant costs and time to replace an existing system or infrastructure, administrative cost and time savings and excessive learning curve for a new service provider, etc.). In such cases, departments must demonstrate due diligence in qualifying the cost-savings or cost-avoidance associated with the best economic interest of the County.				

MCC Contractors

1	AIDS Healthcare Foundation
2	AltaMed Health Services Corporation
3	APLA Health & Wellness
4	Children's Hospital Los Angeles
5	Dignity Health d.b.a St. Mary Medical Center
6	East Valley Community Health Center, Inc.
7	JWCH Institute, Inc.
8	Long Beach Department of Health and Human Services
9	Los Angles LGBT Center
10	Men's Health Foundation
11	Northeast Valley Health Corporation
12	St. John's Well Child and Family Center
13	THE Clinic, Inc.
14	The Regents of the University of California
15	Venice Family Clinic
16	Watts Healthcare Corporation

SOLE SOURCE CHECKLIST FOR ORAL HEALTHCARE (OHC) CONTRACTS

Departm	nent i	Name:
	New	Sole Source Contract
		e Source Amendment to Existing Contract e Existing Contract First Approved:
Check (✓)		JUSTIFICATION FOR SOLE SOURCE CONTRACTS AND AMENDMENTS Identify applicable justification and provide documentation for each checked item.
	\	Only one bona fide source (monopoly) for the service exists; performance and price competition are not available. A monopoly is an "Exclusive control of the supply of any service in a given market. If more than one source in a given market exists, a monopoly does not exist."
	\	Compliance with applicable statutory and/or regulatory provisions.
	>	Compliance with State and/or federal programmatic requirements.
	\wedge	Services provided by other public or County-related entities.
	\wedge	Services are needed to address an emergent or related time-sensitive need.
		The service provider(s) is required under the provisions of a grant or regulatory requirement.
	A	Services are needed during the time period required to complete a solicitation for replacement services; provided services are needed for no more than 12 months from the expiration of an existing contract which has no available option periods.
	→	Maintenance and support services are needed for an existing solution/system during the time to complete a solicitation for a new replacement solution/system; provided the services are needed for no more than 24 months from the expiration of an existing maintenance and support contract which has no available option periods.
	A	Maintenance service agreements exist on equipment which must be serviced by the original equipment manufacturer or an authorized service representative.
	\	It is more cost-effective to obtain services by exercising an option under an existing contract.
	A	It is in the best economic interest of the County (e.g., significant costs and time to replace an existing system or infrastructure, administrative cost and time savings and excessive learning curve for a new service provider, etc.). In such cases, departments must demonstrate due diligence in qualifying the cost-savings or cost-avoidance associated with the best economic interest of the County.
		Crika Bonilla Chief Executive Office Date

OHC Contractors

1	AIDS Healthcare Foundation
2	AltaMed Health Services Corporation
3	APLA Health & Wellness
4	Dignity Health d.b.a St. Mary Medical Center
5	East Valley Community Health Center, Inc.
6	JWCH Institute, Inc.
7	Northeast Valley Health Corporation
8	St. John's Well Child and Family Center
9	The Regents of the University of California
10	University of Southern California
11	Watts Healthcare Corporation

SOLE SOURCE CHECKLIST FOR MENTAL HEALTH (MH) CONTRACTS

Departm	nent i	Name:
	New	v Sole Source Contract
		e Source Amendment to Existing Contract e Existing Contract First Approved:
Check (✓)		JUSTIFICATION FOR SOLE SOURCE CONTRACTS AND AMENDMENTS Identify applicable justification and provide documentation for each checked item.
	A	Only one bona fide source (monopoly) for the service exists; performance and price competition are not available. A monopoly is an "Exclusive control of the supply of any service in a given market. If more than one source in a given market exists, a monopoly does not exist."
	\	Compliance with applicable statutory and/or regulatory provisions.
	>	Compliance with State and/or federal programmatic requirements.
	\wedge	Services provided by other public or County-related entities.
	\wedge	Services are needed to address an emergent or related time-sensitive need.
		The service provider(s) is required under the provisions of a grant or regulatory requirement.
	A	Services are needed during the time period required to complete a solicitation for replacement services; provided services are needed for no more than 12 months from the expiration of an existing contract which has no available option periods.
	→	Maintenance and support services are needed for an existing solution/system during the time to complete a solicitation for a new replacement solution/system; provided the services are needed for no more than 24 months from the expiration of an existing maintenance and support contract which has no available option periods.
	A	Maintenance service agreements exist on equipment which must be serviced by the original equipment manufacturer or an authorized service representative.
	\	It is more cost-effective to obtain services by exercising an option under an existing contract.
	A	It is in the best economic interest of the County (e.g., significant costs and time to replace an existing system or infrastructure, administrative cost and time savings and excessive learning curve for a new service provider, etc.). In such cases, departments must demonstrate due diligence in qualifying the cost-savings or cost-avoidance associated with the best economic interest of the County.
		<u>Crika Bonilla</u> Chief Executive Office Date

MH Contractors

1	AIDS Healthcare Foundation
2	AltaMed Health Services Corporation
3	JWCH Institute, Inc.
4	Northeast Valley Health Corporation
5	St. John's Well Child and Family Center

SOLE SOURCE CHECKLIST FOR LEGAL SERVICES CONTRACT

Departm	ent Name:	
	New Sole Source Contract	
	Sole Source Amendment to Existing Contract Date Existing Contract First Approved:	
Check (✓)	JUSTIFICATION FOR SOLE SOURCE CONTRACTS AND AMENDMENTS Identify applicable justification and provide documentation for each checked item.	
	Only one bona fide source (monopoly) for the service exists; performance and price competition are not available. A monopoly is an "Exclusive control of the supply of any service in a given market. If more than one source in a given market exists, a monopoly does not exist."	
	Compliance with applicable statutory and/or regulatory provisions.	
	Compliance with State and/or federal programmatic requirements.	
	Services provided by other public or County-related entities.	
	Services are needed to address an emergent or related time-sensitive need.	
	The service provider(s) is required under the provisions of a grant or regulatory requirement.	
	Services are needed during the time period required to complete a solicitation for replacement services; provided services are needed for no more than 12 months from the expiration of an existing contract which has no available option periods.	
	Maintenance and support services are needed for an existing solution/system during the time to complete a solicitation for a new replacement solution/system; provided the services are needed for no more than 24 months from the expiration of an existing maintenance and support contract which has no available option periods.	
	Maintenance service agreements exist on equipment which must be serviced by the original equipment manufacturer or an authorized service representative.	
	It is more cost-effective to obtain services by exercising an option under an existing contract.	
	It is in the best economic interest of the County (e.g., significant costs and time to replace an existing system or infrastructure, administrative cost and time savings and excessive learning curve for a new service provider, etc.). In such cases, departments must demonstrate due diligence in qualifying the cost-savings or cost-avoidance associated with the best economic interest of the County.	

Legal Services Contractor

1	Inner City Law Center