



## Recommendation for Action

**File #: 21-2919, Agenda Item #: 73.**

**9/2/2021**

### **Posting Language**

Authorize negotiation and execution of agreements to enhance and support local HIV-related treatment services for an initial 7-month term with three 12-month extension options, with the following subrecipient-providers: Central Texas Community Health Centers, Inc. in an amount not to exceed \$264,519 for the initial term and \$179,310 for each extension option, for a total agreement amount not to exceed \$1,145,715; AIDS Healthcare Foundation in an amount not to exceed \$229,567 for the initial term and \$45,256 for each extension option, for a total agreement amount not to exceed \$510,875; AIDS Services of Austin, Inc. d/b/a Vivent Health in an amount not to exceed \$133,794 for the initial term and \$75,434 for each extension option, for a total agreement amount not to exceed \$651,490; and ASHWell in an amount not to exceed \$615,131 for the initial term and \$174,587 for each extension option, for a total agreement amount not to exceed \$1,407,492.

### **Lead Department**

Austin Public Health

### **Fiscal Note**

Funding in the amount of \$1,243,011 is available in the Fiscal Year 2021-2022 Austin Public Health Department Operating Budget Special Revenue Fund. The Ending the HIV Epidemic grant contract period is March 1, 2021 through February 28, 2022. Funding for the remaining terms is contingent upon available funding in future budgets.

### **For More Information:**

Adrienne Sturup, Interim Director, (512) 972-5167; Laura LaFuente, Interim Assistant Director, (512) 972-5077; Justin Ferrill, Manager for HIV Resource Administration Unit, (512) 972-5146; Anthony Kitzmiller, Financial Analyst I, (512) 972-5078; Ruth Dalrymple, Agenda Coordinator (512) 972-5024.

### **Additional Backup Information:**

Approval of this item will authorize the Austin Public Health Department to negotiate and execute agreements to enhance and support local HIV-related treatment services for an initial 7-month term with three optional 12-month extensions, with the following subrecipient-providers: Central Texas Community Health Centers, Inc. in an amount not to exceed \$264,519 for the initial term and \$179,310 for each extension option, for a total agreement amount not to exceed \$1,145,715; AIDS Healthcare Foundation in an amount not to exceed \$229,567 for the initial term and \$45,256 for each extension option, for a total agreement amount not to exceed \$510,875; AIDS Services of Austin, Inc. d/b/a Vivent Health in an amount not to exceed \$133,794 for the initial term and \$75,434 for each extension option, for a total agreement amount not to exceed \$651,490; and ASHWell in an amount not to exceed \$615,131 for the initial term and \$174,587 for each extension option, for a total agreement amount not to exceed \$1,407,492.

The funding for these agreements is provided by the Health Resources and Services Administration for Fiscal Year 2021-2022 beginning March 1, 2021 through February 28, 2022, to support the development and implementation of programs tailored to ending the HIV epidemic in Austin/Travis County. These services will be provided through subrecipient agreements with local HIV service providers and community-based organizations.

Recent scientific advances in HIV treatment have made ending the HIV epidemic in America a realistic possibility. The U.S. Department of Health and Human Services set an ambitious goal of reducing all new HIV infections by 75% in five years and by 90% by 2030. The contract funding for the "Ending the HIV Epidemic" initiative will enhance and support local HIV treatment services.

Proposed subrecipient contract maximums include increases from the Fiscal Year 2021 "base" that are recommended to 1) adjust contracts to actual federal awards as they are received; 2) adjust contracts based on service allocations and reallocations; and 3) avoid repeated request to Council for contract amendments based on potentially late Notices of Awards or the need to shift funds from one community partner to another in a timely manner as required by the grant.

**Strategic Outcome(s):**

Health and Environment.