MEMORANDUM

TO: DISABILITY AND AGING SERVICES COMMISSION

THROUGH: SHIREEN MCSPADDEN, EXECUTIVE DIRECTOR

FROM: CINDY KAUFFMAN, DEPUTY DIRECTOR
ESPERANZA ZAPIEN, ACTING DIRECTOR OF CONTRACTS

DATE: JUNE 3, 2020

SUBJECT: CONTRACT MODIFICATION: RTZ ASSOCIATES, INC (FOR PROFIT) TO PROVIDE ACCESS, DEVELOPMENT, SUPPORT, MAINTENANCE, AND TRAINING OF SF-GETCARE

<table>
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MODIFICATION AMOUNT: FY20/21
$1,170,140

FUNDING:

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PERCENTAGE: 100%

The Department of Disability and Aging Services (DAS) requests authorization to modify the existing contract with RTZ ASSOCIATES, INC for the period July 1, 2020 through June 30, 2021, in an amount of $1,170,140, plus a 10% contingency for a total amount not to exceed $8,348,202. The purpose of the contract is to provide access, development, support, maintenance, and training of the SF-GetCare system.

Background
In 1999, RTZ began working with the San Francisco DAS to develop an information system to track services for older adults in San Francisco. In October 2003, as part of its commitment to streamline discharge planning and increase access to community-based services, the San Francisco Department of Public Health (DPH) contracted with RTZ to further develop an application to support Laguna
Honda Hospital discharge processes. A number of additional applications and functions have since been added to the core system, known as SF-GetCare, which has evolved into a comprehensive information system that coordinates, tracks and manages adult services across San Francisco county programs.

Between 2003 through 2018, DPH directly managed RTZ’s SF-GetCare contract on their and DAS’s behalf. DPH’s share of the contract has historically been over 50% of the overall contract. During this time, any portion of the contract that was attributed to DAS, was paid through a work order of funds to DPH. However, in 2018 DPH began to move to discontinue their portion of the contract as DPH worked to develop a new system to manage services historically provided to them through the SF-GetCare system. In July 1, 2018, DAS is took over the management of the SF-GetCare contract to continue services through this transition, with the intention of renewing thereafter as the sole administering agency. However, DPH has been delayed in developing their new system and has asked the HSA to extend the current contract an additional year through June 30, 2021.

**Services to be Provided**
RTZ will provide access to its proprietary information system allowing for tracking, coordinating, management, and reporting of adult services across San Francisco county programs. Additionally, over the contract term, RTZ will provide development, technical support, data integration, data analysis, reporting, updates, and staff training of the SF-GetCare System. For a detailed breakdown of service components, please see Appendix A3 & A4: Scope of Service.

**Selection**
Contractor is a sole source provider. RTZ owns the SF-GetCare intellectual property and is the exclusive distributor for the product and product support. No other vendor may use, modify or license SF-GetCare. Based on the proprietary nature of the product and extensive previous development history of the SF-GetCare system for the City, RTZ was determined to be the only qualified vendor.

**Funding**
Funding for these services will be provided through County General Funds. During the fiscal year 2020-2021, DPH is anticipated to work order $615,960 in funds to the HSA to cover DPH expenditures associated with this grant, and the HSA will cover the remaining $554,180 in funds to cover its own expenditures associated with this grant.

**ATTACHMENTS**
Appendix A3
Appendix B3
Appendix A4
Appendix B4

**Funding**
This grant will be funded entirely through County General Funds.
Appendix A3
Scope of Services (FY 20-21)
RTZ Associates, Inc. for San Francisco Department of Disability and Aging Services (DAS)

Background: In 1999, RTZ Associates, Inc. (RTZ) began working with the San Francisco Department of Aging and Adult Services (DAAS) to develop a web-based information system to track services provided to older adults in the City/County of San Francisco (City). Over the years, that system, generally known as SF-GetCare, has dramatically evolved, and today is used to coordinate, track, and manage a variety of services across various City/County programs. This document describes the components of the system funded by HSA/DAS and the costs of each for fiscal year 2020-21.

Definitions:

AAA  Area Agency on Aging: a public or private nonprofit agency designated by a state to address the needs and concerns of older persons at the regional and local levels

CARS  California Aging Reporting System: a software system used to transmit National Aging Program Information to the California Department of Aging.

CDA  California Department of Aging

CHAMPSS  Choosing Healthy Appetizing Meal Plan Solution for Seniors: a program through which participants to get meals from a dietitian-approved menu at specified area restaurants

CLF  Community Living Fund: a program to connect individuals to needed medical and psychosocial services that will support independent living

CMIPSII  Case Management, Information, and Payrolling System (Version 2): a statewide database and central processing for IHSS payrolling, case management and reporting

CTP  Care Transitions Program: a hospital-to-home service that bridges the gap between a hospital discharge and recovery

DAS  San Francisco Department of Disability and Aging Services

DCIP  Diversion and Community Integration Program: a program that existed between 2008 and 2013 to assist individuals referred to or discharged from Laguna Honda Hospital to access the most integrated setting appropriate to their needs and preferences

DPH  San Francisco Department of Public Health
HDM  | Home Delivered Meals: a program that provides meals to participants who cannot prepare or obtain nutritionally adequate meals for themselves

IHIS  | Integrated Housing Information System: A database of client housed in scattered site housing units

IHSS  | In-Home Supportive Services: a program that offers housecleaning, meal preparation, laundry, personal services, accompaniment to medical appointments, and protective supervision to Medi-Cal eligible and low-income older and disabled adults

I&R/A | Information and Referral / Assistance: a program which provides information, referral, assistance, and options counseling to those seeking services

NAPIS | National Aging Program Information System: service utilization and demographic data that is reported by local Area Agencies on Aging to the states to comply with federal Administration for Community Living (ACL) reporting requirements for submission of annual performance reports

RTZ  | RTZ Associates, Inc. / RTZ Systems: this vendor

SaaS | Software as a Service: a method of software delivery and licensing in which software is accessed over the internet via a subscription, rather than bought and installed on individual computers

**Item 1: Integrated Housing Information System**

**Item 1: Integrated Housing Information System (IHIS)** – This tool provides a database of clients housed in units managed by the DAS scattered site housing vendor. For the referrals to the scattered site system from the Community Living Fund (CLF), this tool pulls all the referral information directly from the (CLF) database, allowing CLF users to make a referral with a simple push of a button to upload information into the IHIS. The tool includes a database of clients and a database of housing units, as well as a tracking system for managing move-in and move-out information, and a number of operational reports. Management tools allow DAS to oversee housing and client information in real-time.

DCIP data is housed in the back end of the IHIS and is available in an expanded report, as well as ad hoc reports as requested.

**Charge Items:**
- Ongoing software as a service (SaaS) hosting / maintenance costs
- Ongoing technical support
- Ongoing import, filtering, and integration of CLF information

**FY 2020-21:** $4,880 per month ($58,560 per year)
Item 2: CA-GetCare / IR2 Information System

Item 2a: CA-GetCare service management component – This component supports multiple operational areas: managing client data, including all NAPIS-required data elements and nutritional and functional assessments; managing service data using either a daily or monthly input screen; barcode scanning for client-level service recording; a client facing portal for the CHAMPSS food program and a CHAMPSS application management system; Interface with the California Aging Reporting System (CARS) allowing seamless integration with the statewide CARS reporting system (obviating the need to upload quarterly files), and meeting all current and future CDA specifications for data reporting; a case management tool that supports the daily operational needs of DAS-funded community-based case managers; medication management; HDM waiting list clearinghouse, and generating operational/outcome reports using a library of standard reports designed to support common AAA business needs, as well as an ability to create custom report templates, export select client data elements, and periodic special data requests.

Charge Items:
- Ongoing software as a service (SaaS) hosting / maintenance costs
- Ongoing compliance with NAPIS reporting requirements
- Ongoing integration (file transfers) with the statewide CARS system
- Ongoing technical support
- Periodic training for end-users, as needed

FY 2020-21: $13,130 per month ($157,560 per year)

Item 2b: Integrated Intake Service Management – This tool includes I&R/A, integrated intake, Waiting List tool and a care transitions case management tool. It includes the ability to conduct basic assessments, identify appropriate services, make referrals, place these referrals on a waiting list and/or track their progress. Referrals to CLF, Home-Delivered Meals, IHSS, Care Transitions and Case Management are made from the module directly to the programs. CLF referrals populate the CLF CaseCare tool with specified data from the intake.

Community providers, such as hospital discharge planners, case managers, home health providers, Laguna Honda social workers, and home-delivered meal providers can complete an online referral on a secure cloud-based portal for submission to the DAS Intake Team. The Intake Team reviews the online referral and can return it to the submitter for more information or move the referral forward – which includes actions from withdrawing the referral to placing it on a waiting list to seeing the referral through to enrollment. Because this module is part of the integrated GetCare database, staff can view service enrollments and the system automatically updates records using CMIPS-II data.

The Care Transitions component includes assessments; service plans; progress notes; purchase of service requests, and the authorization, verification and reconciliation of purchases. Automatic e-mail notifications facilitate communication between intake staff, supervisors, and Transition Specialists. This system includes a separate Readmission Tool component that allows hospital staff to track CTP clients who have been readmitted to the acute setting.
**Charge Items:** Ongoing software as a service (SaaS) hosting / maintenance costs
Ongoing technical support
Periodic data analysis, as requested
Periodic training for end-users, as needed

**FY 2020-21:** $12,560 per month ($150,720 per year)

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**Item 2c: Development and customization** – RTZ will primarily utilize FY20-21 budget dollars allocated for development/customization to upgrade the City to the next-generation CA-GetCare platform. CA-GetCare is a cloud-based system specifically designed by RTZ to help California AAAs collect and report Older American Act (OAA) Title III and VII data to the California Department of Aging (CDA) via the California Aging Reporting System (CARS). GetCare is the only system on the market to offer seamless integration with CARS.

Counties across the state use the CA-GetCare platform – from some of smallest to the most populous. The City/County of San Francisco was one of the first users of the legacy system; however, there have been significant developments to web-based development frameworks in recent years. Today, DAS remains the only California AAA that continues to use the previous generation system. While innovative for its time, the previous generation system was built on a now outdated application framework and has been deprecated by RTZ.

By contrast the newest generation of GetCare is built on a modern web-development framework that includes functionality / usability, security, and resiliency enhancements. DAS will also benefit by receiving all general system updates made to the current generation system at no cost.

**Charge Items:** Coding DAS-specific customizations made to legacy system into new platform
Configuring system pull-downs and options for DAS
Developing a script to convert/migrate data in the legacy format to the new format
Testing conversion/migration script and system configurations in sandbox site
Migrate / set-up user accounts and permissions in new system
Provide training on the new system
Work with DAS leadership to schedule system cutover
Launch production system and provide intensive support at Go-Live
Cold archive legacy database and sanitize servers per NIST 800-88 guidelines

**FY 2020-21:** $119,240 one-time

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**Item 3: Data warehousing in AWS GovCloud environment (optional)**

**Item 3 (optional): Data warehouse set-up and maintenance** – In Fall 2019, HSA requested a proposal for a data warehousing option. RTZ submitted a proposal but has yet to receive formal go-ahead / approval. RTZ is reiterating its preferred approach to data warehousing below in case there is still a departmental interest in pursuing this option.
Specifically, RTZ proposed / proposes first transitioning all SF-GetCare components from our legacy physical hosting model to our cloud-hosting model (which utilizes AWS GovCloud "U.S. West" data centers – a FedRAMP-certified environment). Although there are one-time costs associated with this transition and AWS GovCloud is a more expensive hosting service than our legacy data center model, it offers increased security, resiliency, and scalability and would not only meet but exceed the City’s new "P-648" requirements for SaaS contracts.

Moreover, the transition to AWS enables RTZ to meet HSA’s request for data warehousing in a secure and straightforward manner. In lieu of manually uploading a copy each month to a City-maintained SFTP site or developing / maintaining an automated and secure file transmission routine that populates a local data warehouse, we can write code that automatically and securely sends the raw (non-normalized) database to an HSA/DAS AWS instance on a regular basis. During the transmission, City data will never leave the secure AWS environment.

RTZ will complete all migration activities within six months of formal approval of this component. The timing of setting-up a client-facing copy of the database depends on HSA/DAS establishing its own AWS instance; RTZ will assist with this process and collaboratively work with the City to schedule deployment of this component.

Please note that HSA would be responsible for all AWS fees charged to its account, including those for moving or processing data within its own instance. HSA will receive a copy of raw production data; pricing does not include creating a normalized dataset or a dataset meeting a set of HSA-specifications, nor does it include documentation or consulting to decode raw data fields.

**Charge Items:**
- Recoding foundational parts of SF-GetCare for new environment
- Migrating system code and database
- Testing migration, including load-balancing and replication
- Paying ongoing AWS fees for storage, processing, and services
- Using AWS & partner services to continually monitor security and responsiveness
- Monitoring replication to City AWS instance and addressing issues

**FY 2020-21:** $59,100 one-time ($59,100 for the year)
$1,500 per month ($9,000 for six months)

SaaS arrangement includes all licensing fees and hosting costs, including (but not limited to): (1) maintaining secure and redundant hosting environments, (2) monitoring system performance, security, and redundancy, (3) providing unlimited technical support and account maintenance, (4) communicating with administrators and end-users on an ongoing basis to ensure that the system continues to meet local needs, and (5) making minor client-specific customizations (in addition to implementing general system enhancements excluding generational platform changes).
Appendix B3
FY 2020-21 Budget
RTZ Associates, Inc. for San Francisco Department of Disability & Aging Services (DAS)

The table below summarizes the total cost by component for fiscal year 2020-21.

| Item 1: Integrated Housing Information System | 58,560 |
| Item 2a: CA-GetCare Information System       | 157,560 |
| Item 2b: Integrated Intake Service Management| 150,720 |
| Item 2c: Development and Customization       | 119,240 |
| **Total cost for FY 2020-21:**               | **$ 486,080** |
| Item 3 (optional): Data warehousing / AWS migration | + $ 68,100 |
Appendix A4
Scope of Services (FY 20-21)
RTZ Associates, Inc. for San Francisco Department of Public Health (DPH)

Background: In 1999 RTZ Associates began working with the San Francisco Department of Aging and Adult Services (UAAS) to develop an information system to track services for older adults in San Francisco. In October 2003, as part of its commitment to streamline discharge planning and increase access to community-based services, the San Francisco Department of Public Health (DPH) contracted with RTZ Associates, Inc. (RTZ) to build on that web-based system to develop an application to support Laguna Honda Hospital discharge planning. Over the years, that system, generally known as SF-GetCare, has dramatically evolved, and today is used to coordinate, track, and manage a variety of services across various City/County programs. This document describes the components of the system funded by DPH and the costs of each for fiscal year 2020-21.

Definitions:

City                      City/County of San Francisco
DPH                      San Francisco Department of Public Health
EHR                      Electronic Health Record
Epic                     Epic Systems Corporation
IMD                      Institutions for Mental Diseases
LCR                      Lifetime Clinical Record
LHH                      Laguna Honda Hospital
RCF/E                    Residential Care Facility for the Elderly
RCFEs                    Residential Care Facilities for the Elderly
RTZ                      RTZ Associates, Inc. / RTZ Systems
SaaS                     Software as a Service
SFHN                     San Francisco Health Network
SNF                      Skilled Nursing Facility

Item 1: DPH “Transitions” placement system

Item 1a: DPH “Transitions” placement system – RTZ currently provides DPH with a “Transitions” community/housing placement system – an interactive directory of DPH-funded beds (with detailed information on the availability, cost, and requirements of each unit). DPH intends to migrate this functionality into its EHR system developed by Epic; however, the Transitions system remains operational and there is a renewed interest in preserving a placement system that could be enhanced to span and coordinate multiple City programs and populations served, including across departments.

This interactive housing placement system includes an online interactive directory of DPH-funded beds (with detailed information on the availability, cost, and requirements of each unit), a client database, an
interface to match clients with appropriate housing units, and a holding pool system. The system can produce management reports on bed utilization/availability as well as billing invoices. Multiple residence types are included, such as IMD, RCF/E, and SNF.

**Charge Items:**
- Ongoing software as a service (SaaS) hosting / maintenance costs
- Ongoing technical support
- Ongoing assistance in managing/updating housing list
- Periodic updates to accommodate revised billing and reporting standards
- Periodic data analysis, as requested
- Periodic training for end-users, as needed
- Project management to support transition to Epic EHR, as needed

**FY 2020-21: $13,206 per month ($158,472 per year)**

**Item 1b: ZSFG placement component** – This tool was designed to securely import client-level data from the LCR/Invision system and support the identification and disposition of discharge-ready patients. RTZ used these data to provide analytic reports on non-acute/admin days for senior DPH staff. Transitions team staff also documented progress notes in this tool and ZSFG Social Worker progress notes were imported into this tool from the LCR. This system remains operational and is currently used to access historical data.

**Charge Items:**
- Ongoing software as a service (SaaS) hosting / maintenance costs
- Ongoing technical support
- Periodic revisions to data importation scripts, as needed
- Periodic data analysis, as requested
- Periodic training for end-users, as needed
- Project management to support transition to Epic EHR, as needed

**FY 2020-21: $2,678 per month ($32,136 per year)**

**Item 2: Laguna Honda Hospital (LHH) Information system**

**Item 2a: Laguna Honda Hospital information system** – This tool includes the original information system developed for Social Services discharge planning, which was later expanded to include Nursing, Clinical Nutrition, Activity Therapy, and Vocational Rehabilitation. Core functionality includes (but is not limited to) a client tracking system that records clinical information, integrated progress notes with multiple flags and templates specific to each discipline, a progress notes management tool, specialized assessments for each discipline, care planning, e-alerts, and a reporting module that provides client and operational outcomes. DPH intends to migrate this functionality into its FHR system developed by Epic; however, the system remains operational and is routinely accessed. This is also the system that LHH social workers use to access referral and other information in CA-GetCare – a separate system used by HSA/DAAS.

**Charge Items:**
- Ongoing software as a service (SaaS) hosting / maintenance costs
- Ongoing technical support

**FY 2020-21: $19,086 per month ($229,032 per year)**
Item 2b: LHH Rehab Database — This tool is a comprehensive database for the LHH Rehabilitation Department. It allows each therapy type to enter documentation, track hours of service, and create billing documentation directly from the documentation. Other features include (but are not limited to): assessment, scheduling, tracking and reporting. Dashboards assist with tracking productivity. DPH intends to migrate this functionality into its EHR system developed by Epic; however, the system remains operational and is routinely accessed to view historical data.

Charge Items:  
- Ongoing software as a service (SaaS) hosting / maintenance costs
- Ongoing technical support
- Periodic data analysis, as requested
- Periodic training for end-users, as needed

FY 2020-21: $12,360 per month ($148,320 per year)

Item 3: Bed management system for persons receiving residential substance abuse disorder treatment

Item 3: Bed Management System (Substance Abuse Disorder) — In October 2019, Tipping Point Community (a San Francisco-based non-profit organization) supplied one-time funding for RTZ to develop a new citywide availability system for vendor-offered beds that will be maintained and used by DPH. Given that RTZ expects the “HopeSP” system it developed to not be used in FY20-21, these funds will instead be used to support the ongoing hosting and maintenance of this new bed management system.

This new system gives providers the ability to directly update bed information in real-time, improving the quality of data and minimizing DPH workload. In addition to availability status, the system displays detailed information for each bed within each facility, and enables DPH to filter by common variables, allowing staff to quickly identify available, good-fit placements and make timely referrals. The initial build focuses on persons receiving residential substance abuse disorder treatment, but the system could be expanded to include additional functionality and/or serve additional populations / providers (such as mental health) as funding allows.

Charge Items:  
- Ongoing software as a service (SaaS) hosting / maintenance costs
- Ongoing technical support
- Periodic training for end-users, as needed

FY 2019-20 $4,000 per month ($48,000 per year)

Note: This scope of work does not include the new COVID-19 bed management system RTZ developed for DPH under a separate emergency procurement. The duration of that deployment (and therefore the duration of monthly fees for hosting and support) is tied to the Mayoral Declaration related to the City’s pandemic response but will likely extend into FY20-21; however, DPH is drafting a separate contract for that project.

SaaS arrangement includes all licensing fees and hosting costs, including (but not limited to): (1) maintaining secure and redundant hosting environments, (2) monitoring system performance, security, and redundancy, (3) providing unlimited technical support and account maintenance, (4) communicating with administrators and end-users on an ongoing basis to ensure that the system continues to meet local needs, and (5) making minor client-specific customizations (in addition to implementing general system enhancements excluding generational platform changes).
Appendix B4
FY 2020-21 Budget
RTZ Associates, Inc. for San Francisco Department of Public Health (DPH)

The table below summarizes the total cost by component for fiscal year 2020-21.

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<th>Item</th>
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<th>Cost</th>
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<td>Transitions placement system</td>
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<td>1b</td>
<td>ZSFG placement component</td>
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<td>2a</td>
<td>LHH information system</td>
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<td>2b</td>
<td>LHH rehab database component</td>
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<td>3</td>
<td>Bed management system</td>
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*Total cost for FY 2020-21: $615,980

**Note:** This total does not include the new COVID-19 bed management system RTZ developed for DPH under a separate emergency procurement. The duration of that deployment (and therefore the duration of monthly fees for hosting and support) is tied to the Mayoral Declaration related to the City’s pandemic response but will likely extend into FY20-21; however, DPH is drafting a separate contract for that project.