

**AMENDMENT NO. 1  
CBE NO. 606081-21  
RAPID START PROGRAM**

**THIS AMENDMENT** is made and entered into this \_\_\_\_ day of \_\_\_\_\_ 2023, by and between CLARK COUNTY, NEVADA (hereinafter referred to as "COUNTY"), and UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA (hereinafter referred to as "UMC").

**WITNESSETH:**

**WHEREAS**, the parties entered into an agreement under CBE Number 606081-21, entitled "Rapid stART Program" dated March 1, 2022 (hereinafter referred to as AGREEMENT); and

**WHEREAS**, the parties desire to amend the AGREEMENT.

**NOW, THEREFORE**, the parties agree to amend the AGREEMENT as follows:

1. Article I: Scope of Work, 3.0 Definitions

To add:

**Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals (HIP-CS)** provides financial assistance for eligible clients living with HIV to maintain continuity of health insurance or to receive medical and pharmacy benefits under a health care coverage program. The service provision consists of either or both of the following: 1) Paying health insurance premiums to provide comprehensive HIV Outpatient/Ambulatory Health Services and pharmacy benefits that provide a full range of HIV medications for eligible clients, not currently covered by Part B; and 2) Paying cost-sharing (copay, co-insurance, deductible) on behalf of the client for Physician appointments and labs.

**Outpatient/Ambulatory Health Services (OAHS)** are diagnostic and therapeutic services provided directly to a client by a licensed healthcare provider in an outpatient medical setting. Outpatient medical settings include clinics, medical offices, and mobile vans where clients do not stay overnight. Emergency room or urgent care services are not considered outpatient settings. Allowable activities include:

- Medical history taking
- Physical examination
- Diagnostic testing, including laboratory testing
- Treatment and management of physical and behavioral health conditions
- Behavioral risk assessment, subsequent counseling, and referral
- Preventive care and screening
- Pediatric developmental assessment
- Prescription, and management of medication therapy
- Treatment adherence
- Education and counseling on health and prevention issues
- Referral to and provision of specialty care related to HIV diagnosis

2. Article I: Scope of Work, 5.0 Services, first item

Originally written:

“Respond to any internal and external referrals for Rapid stART services.”

Revised to read:

“Respond to any internal and external referrals for Rapid stART services, including EIS, OAHs and HIP-CS as defined in section 3.0 of this scope of work.”

3. Article I: Scope of Work, 7.0 Performance Outcomes, to be removed in its entirety and replace by

**7.0 Performance Outcomes**

All outcomes align with COUNTY’s EHE Plan and the Rapid stART Learning Collaborative:

<b>Goal: Increase access to care and improve health outcomes for patients newly diagnosed with HIV and/or patients returning to care.</b>
<b>Measure 1: Linkage to HIV medical care within 7 days</b>
<b>Definition:</b> Percentage of persons with HIV newly diagnosed, new to care, and/or out of care patients who are linked to medical care within 7 days of [time zero]. <b>Numerator:</b> Number of persons in the denominator who are linked to HIV medical care within 7 days of [time zero]. <b>Denominator:</b> Number of persons with HIV newly diagnosed, new to care, and/or out of care in the reporting period. <b>Exclusions:</b> Patients who died, transferred, moved, or were incarcerated in the reporting period.
<b>Measure 2: Initiation of ART within 7 days</b>
<b>Definition:</b> Percentage persons with HIV newly diagnosed, new to care, and/or out of care who are prescribed HIV antiretroviral therapy within seven days from [time zero]. <b>Numerator:</b> Number of persons in the denominator who are prescribed HIV antiretroviral therapy within seven days from [time zero]. <b>Denominator:</b> Number of persons with HIV newly diagnosed, new to care, and/or out of care in the reporting period. <b>Exclusions:</b> Patients who died, transferred, moved, or were incarcerated in the reporting period.
<b>Measure 3: Median days to initiation of ART</b>
<b>Definition:</b> The median number of days from [time zero] to initiation of ART for newly diagnosed, new to care, and/or out of care patients. <b>Numerator:</b> not applicable <b>Denominator:</b> Number of persons with HIV newly diagnosed, new to care, and/or out of care who were initiated on ART in the reporting period. <b>Exclusions:</b> Patients who died, transferred, moved, or were incarcerated in the reporting period. <b>Calculation:</b> <ol style="list-style-type: none"><li>1. Determine the number of days from [time zero] to initiation of ART for each patient in the denominator</li><li>2. Sort the number of days in ascending order</li><li>3. Determine the middle value</li></ol>

<b>Measure 4: Viral load suppression</b>	
<p><b>Definition:</b> Percentage of persons with HIV newly diagnosed, new to care, and/or out of care with a HIV viral load less than 200 copies/ml at last viral load test by 60 days after initiation of ART.</p> <p><b>Numerator:</b> Number of persons in the denominator who have an HIV viral load less than 200 copies/ml at last viral load test by 60 days after initiation of ART.</p> <p><b>Denominator:</b> Number of persons with HIV newly diagnosed, new to care, and/or out of care who initiated ART at least 60 days prior to measurement.</p> <p><b>Exclusions:</b> Patients who died, transferred, moved, or were incarcerated in the reporting period</p>	
<b>Measure 5: Retention in Care</b>	
<p><b>Definition:</b> Percentage of persons with HIV newly diagnosed, new to care, and/or out of care who initiated on ART with at least 1 medical visit in each six-month period at least 90 days apart</p> <p><b>Numerator:</b> Number of persons in the denominator who had at least 1 medical visit in each six-month period of the reporting period at least 90 days apart.</p> <p><b>Denominator:</b> Number of persons with HIV newly diagnosed, new to care, and/or out of care who initiated ART in the reporting period</p> <p><b>Exclusions:</b> Patients who died, transferred, moved, or were incarcerated in the reporting period</p>	
<b>Number of unduplicated clients to be served:</b> 60-80	<b>Number of service units to be provided:</b> 350-650

**Definitions related to Performance Measures:**

**Rapid stART**

- **Rapid stART:** Initiation of HIV ART within 7 days of [time zero]
- **Initiation of ART:** Starter pack provided or ART prescription written
- **Linked to Care:** A kept medical visit
- **Date of Diagnosis:** Positive rapid HIV screening test, Confirmatory HIV test, and/or HIV Viral Load

**Patient Category**

- **Newly Diagnosed:** Any person with a new positive HIV rapid, confirmatory, or detectable viral load test result within 12 months.
- **New to Care:** Any person diagnosed with HIV greater than 12 months who has not attended a HIV care medical visit.
- **Out of Care:** Any person diagnosed with HIV with previous engagement in primary HIV care who has no medical visit or laboratory test result for greater than 12 months and has agreed to return to care.

Time Zero

<b>Term</b>	<b>Notification Type</b>	<b>Definition</b>
<b>Newly Diagnosed</b>	Internal HIV Testing	Date of diagnosis
	External Testing and/or Referral	Date referral agency notifies provider or date of self-referral
<b>New to Care</b>	Internal Never Linked and/or External Referral	Date of first contact with site
<b>Out of Care</b>	Internal Out of Care	Date of re-contact with or by site and agreement to return to care
	External Referral	Date referral agency notifies provider of agreement to return to care or date of self-referral

4. Article II: Term of Agreement, first sentence

Originally written:

“Commencing from the date of execution of AGREEMENT, the term shall be from July 1, 2021 through February 28, 2023.”

Revised to read:

“The initial term of the AGREEMENT shall be from July 1, 2021 through February 28, 2023, with the option to extend for 3, one-year periods.”

5. Article III: Price, Payment, and Submission of Invoice, first paragraph, first sentence

Originally written:

“COUNTY agrees to pay AGENCY for performance of services described in this Scope of Work not to exceed the amount of \$345,000.”

Revised to read:

“COUNTY agrees to pay AGENCY for performance of services described in this Scope of Work not to exceed the amount of \$1,185,000.”

6. Article III: Price, Payment, and Submission of Invoice, fourth paragraph

Originally written:

The table below reflects a budget that corresponds to the scope of work:

<b>Time Period</b>	<b>Amount</b>
July 1, 2021 – February 28, 2022	\$115,000
March 1, 2022 – February 28, 2023	\$230,000
<b>TOTAL</b>	<b>\$345,000</b>

Revised to read:

The table below reflects the total budget for the duration of the contract:

<b>Time Period</b>	<b>Amount</b>
July 1, 2021 – February 28, 2022	
March 1, 2022 – February 28, 2023	
March 1, 2023 – February 29, 2024	
March 1, 2024 – February 28, 2025	
March 1, 2025 – February 28, 2026	
<b>TOTAL AMOUNT not to exceed (for the duration of the Contract)</b>	<b>\$1,185,000</b>

7. The revisions contained herein are effective as of March 1, 2022.

This Amendment No. 1 represents an increase of \$840,000.

Except as expressly amended herein, the terms and conditions of the AGREEMENT shall remain in full force and effect.

COUNTY OF CLARK:

BY: \_\_\_\_\_  
JAMES B. GIBSON, CHAIR  
Clark County Commissioners

UNIVERSITY MEDICAL CENTER OF SOUTHERN  
NEVADA:

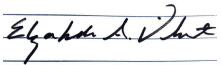
BY:  \_\_\_\_\_  
MASON VAN HOUWELING  
Chief Executive Officer

ATTEST:

BY: \_\_\_\_\_  
LYNN MARIE GOYA  
County Clerk

APPROVED AS TO FORM:

Steven Wolfson, District Attorney

BY:  \_\_\_\_\_  
ELIZABETH A. VIBERT  
Deputy District Attorney