

ARLINGTON COUNTY, VIRGINIA
OFFICE OF THE PURCHASING AGENT
2100 CLARENDON BOULEVARD, SUITE 500
ARLINGTON, VIRGINIA 22201

NOTICE OF CONTRACT AMENDMENT

TO: KAISER FOUNDATION HEALTH PLUS OF THE MID-ATLANTIC STATES, INC. 2101 EAST JEFFERSON STREET ROCKVILLE, MARYLAND 20849	ORIGINAL DATE ISSUED: DECEMBER 16, 2014 CONTRACT NO: 564-14 CONTRACT TITLE: HEALTH CARE SERVICES
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THIS IS A NOTICE OF AMENDMENT OF CONTRACT AND NOT AN ORDER. NO WORK IS AUTHORIZED UNTIL THE VENDOR RECEIVES A VALID COUNTY PURCHASE ORDER ENCUMBERING CONTRACT FUNDS.

The contract documents consist of the terms and conditions of AGREEMENT No. 564-14 including any attachments or amendments thereto.

EFFECTIVE DATE: JULY 1, 2022

EXPIRES: DECEMBER 30, 2022

RENEWALS: TWO (2) ADDITIONAL TWELVE (12) MONTH PERIODS FROM DECEMBER 31, 2022 THRU DECEMBER 30, 2024.

LIVING WAGE: N

EMPLOYEES NOT TO BENEFIT:

NO COUNTY EMPLOYEE SHALL RECEIVE ANY SHARE OR BENEFIT OF THIS CONTRACT NOT AVAILABLE TO THE GENERAL PUBLIC.

VENDOR CONTACT: TRACEY LAMBRIX

VENDOR TEL. NO.: (703) 728-4914

EMAIL ADDRESS: TRACEY.LAMBRIX@KP.ORG

COUNTY CONTACT: COLLEEN DONNELLY

COUNTY TEL. NO.: (703) 228-3447

COUNTY CONTACT EMAIL: CDONNELLY@ARLINGTONVA.US

PURCHASING DIVISION AUTHORIZATION:

DR. SHARON T. LEWIS TITLE: PURCHASING AGENT DATE: 6/23/2022

ARLINGTON COUNTY, VIRGINIA

**AGREEMENT NO. 564-14
AMENDMENT NUMBER 3**

This Amendment Number 3 ("Amendment") is made on the date of execution of this Amendment by the County and amends Arlington County Agreement Number 564-14, dated December 16, 2014 ("Main Agreement" between Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. ("Contractor"), and the County Board of Arlington County, Virginia ("County").

The County and the Contractor agree to amend the main contract called for under the Main Agreement as follows:

- **AMEND EXHIBIT B: PRICIING, PAYMENTS, AND PERFORMANCE GURANTTES, IN ACCORDANCE WITH KAISER PERMANTE FY23 RATES EFFECTIVE 7/1/22 – 6/30/23 (Attached)**
- **DELETE AND REPLACE PARAGRAPH: 47. NOTICES** with the following:
Unless otherwise provided in writing, all written notices and other communications required by this Contract are deemed to have been given when either (a) delivered in person; (b) delivered by an agent, such as a delivery service; or (c) deposited in the United States mail, postage prepaid, certified or registered and addressed as follows:

TO THE CONTRACTOR:

Tracey Lambrix
Kaiser Foundation Health Plus Of The Mid-Atlantic States, Inc.
2101 East Jefferson Street
Rockville, Maryland
Tel. (703) 728-4914
Email: tracey.lambrix@kp.org

TO THE COUNTY:

Colleen Donnelly, Project Officer
Arlington County Government
Human Resources Department
Arlington, Virginia 22201
Tel. (703) 228-3447
Email cdonnelly@arlingtonva.us
AND

Dr. Sharon T. Lewis, LL.M, MPS, VCO, CPPB
Purchasing Agent
Arlington County, Virginia
2100 Clarendon Boulevard, Suite 500
Arlington, Virginia 22201
Phone: (703) 228-3294

Email: slewis1@arlingtonva.us

TO COUNTY MANAGER’S OFFICE (FOR PROJECT CLAIMS):

Mark Schwartz, County Manager
Arlington County, Virginia
2100 Clarendon Boulevard, Suite 318
Arlington, Virginia 22201

- **INCORPORATION OF COVID-19 POLICY FOR CONTRACTORS: Clause Number 53 is hereby added:**

53. COVID-19 VACCINATION POLICY FOR CONTRACTORS

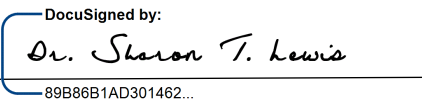
Due to the ongoing COVID-19 pandemic, the County has taken various steps to protect the welfare, health, safety, and comfort of the workforce and public at large. As part of these steps, the County has implemented various requirements with respect to health and safety including policies with respect to social distancing, the use of face-coverings and vaccine mandates. To protect the County’s workforce and the public at large, all employees and subcontractors of the Contractor who are assigned to this Contract, should be fully vaccinated against COVID-19. Any contractor employee or subcontractor who is not fully vaccinated should be following a weekly testing protocol as established by the Contractor, unless exempt pursuant to a valid reasonable accommodation under state or federal law.

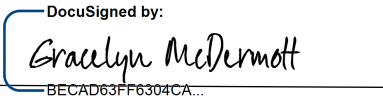
All other terms and conditions of the Main Agreement remain in effect.

WITNESS THESE SIGNATURES:

THE COUNTY BOARD OF ARLINGTON
COUNTY, VIRGINIA

KAISER FOUNDATION HEALTH PLAN OF THE
MID-ATLANTIC STATES, INC.

AUTHORIZED SIGNATURE: 
89B86B1AD301462...

AUTHORIZED SIGNATURE: 
BECAD63FF6304CA...

PRINT
NAME: DR. SHARON T. LEWIS

PRINT
NAME GRACELYN McDERMOTT

TITLE: PURCHASING AGENT

TITLE: Vice President

DATE: 6/23/2022

DATE: 6/21/2022

