

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

## AGREEMENT NO. 20-052-RFP-1-LW AMENDMENT NUMBER 4

This **Amendment Number 4** is made on the date of execution by the County and amends **Agreement Number 20-052-RFP-1-LW** ("Main Agreement") dated March 1, 2021, between **National Capital Treatment & Recovery** ("Contractor") and the County Board of Arlington County, Virginia ("County").

The County and the Contractor agree to amend the Main Agreement as follows:

# 1. PURSUANT TO PARAGRAPH 4. CONTRACT TERM, THIS AGREEMENT IS HEREBY RENEWED FROM MARCH 1, 2024 TO FEBRUARY 28, 2025.

## 2. REPLACE PARAGRAPH 5. CONTRACT AMOUNT WITH THE FOLLOWING:

#### 5. CONTRACT AMOUNT

This is a cost-reimbursement contract. The contract price is up to a maximum of \$375,326.00. The Contractor will complete the Work for the total amount specified in this section ("Contract Amount").

The County will not compensate the Contractor for any goods or services beyond those included in Exhibit A unless those additional goods or services are covered by a fully executed amendment to this Contract. The County will consider amending the contract based on changes in Medicaid and eligibility criteria/requirements.

## 3. PARAGRAPH 46. NOTICES IS REPLACED WITH THE FOLLOWING:

#### 46. <u>NOTICES</u>

Unless otherwise provided in writing, all legal 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:

Deborah S. Taylor, President/CEO National Capital Treatment & Recovery 200 North Glebe Road, Arlington Virginia 22203 Phone: (703) 841-0703 x3000 Email: <u>dtaylor@natcaptreatment.org</u>

#### TO THE COUNTY:

Hamza Yasin, Project Officer Arlington County, VA 2120 Washington Blvd 4th Floor Arlington VA 22204 Phone: (703) 228-5250 Email: <u>hyasin@arlingtonva.us</u>

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: <u>slewis1@arlingtonva.us</u>

## TO COUNTY MANAGER'S OFFICE (FOR PROJECT CLAIMS):

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

- 4. REMOVE PARAGRAPH 55. COVID-19 VACCINATION POLICY FOR CONTRACTORS.
- 5. REPLACE EXHIBIT B, CONTRACT PRICING IN ITS ENTIRETY WITH THE REVISED EXHIBIT B, CONTRACT PRICING ATTACHED.
- 6. REMOVE EXHIBIT G CONTRACTOR COVID-19 VACCINATION CERTIFICATION.
- 7. REMOVE EXHIBIT H CONTRACTOR COVID-19 VACCINATION QUARTERLY COMPLIANCE CERTIFICATION.

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

WITNESS THESE SIGNATURES:

THE COUNTY BOARD OF ARLINGTON COUNTY, VIRGINIA

PRINT: \_\_\_\_\_\_ Antonino Mautino

SIGNATURE: Antonino Mantino C89CE96AA36F4AD...

TITLE: <u>Buyer</u>

DATE: 2/28/2024

#### NATIONAL CAPITAL TREATMENT & RECOVERY

PRINT: \_\_\_\_

SIGNATURE: Deboral S. taylor

TITLE: \_\_\_\_\_\_

DATE: 2/28/2024

#### **REVISED EXHIBIT B, CONTRACT PRICING**

## (March 1, 2024 to February 28, 2025)

Line Item Description															Amendment 3		22025	endment 4	S21		
	Sala	nry	and the second second	rement	FICA		Healt	h	Life		1000000000	.Com		Other	Total Co	st		otal Cost	Change (%)	_	FTE
Director of Clinical Operations 2726	\$	-	\$		\$	8	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	0	- T.	10
Nurse 2726	\$	19,218	\$	1,153	\$	1,470	\$	2,400	\$	32	\$	125	\$	110		,825	\$	24,507	7%	\$	
Program Manager 2726	\$	101,930	\$	6,116	\$	7,798		9,600	\$	168	\$	663	\$	438		,959	\$	126,712	4%	-	
UR Administrator	\$	-	\$	· · ·	\$	-	\$	-	\$	-	\$	-	\$	-	\$	1.00	\$	+	0%	· ·	1
Residential Supervisor	\$	66,550	\$	3,993	\$	5,091		9,600	\$	110	\$	433	\$	438		,991	\$	86,215	-10%		
Residential Specialist 2726 1	\$	54,900	\$	3,294	\$	4,200	\$	9,600	\$	91	\$	357	\$	438		,019	\$	72,879	6%		
Residential Specialist 2726 2	\$	49,955	\$	2,997	\$	3,822	10.0	9,600	\$	82	\$	325	\$	438	\$ 6	,620	\$	67,219	7%	\$	
Residential Specialist 2726 6	\$	14,303	\$	858	\$	1,094	\$	2,880	\$	24	\$	93	\$	131		,868	\$	19,383	3%	\$	
Residential Specialist	\$	15,466	\$	928	\$	1,183	\$	2,880	\$	26	\$	101	\$	131	\$ 1	,749	\$	20,714	5%	\$	1
Residential Specialist 2726 7	\$	30,931	\$	1,856	\$	2,366	\$	5,760	\$	51	\$	201	\$	263	\$ 3	,706	\$	41,428	10%	\$	
Residential Specialist 2726 PRN	\$	27,643	\$	1,659	\$	2,115	\$	5,280	\$	46	\$	180	\$	241	\$ 2	,094	\$	37,163	76%	\$	
Shift Differentials	\$	8,760	\$	526	\$	670	\$	-	\$	14	\$	57	\$		\$ 1	6,717	\$	10,027	49%		
Merit Pool	\$	20,568	\$	1,234	\$	1,573	\$	20	\$	34	\$	134	\$		\$ 1	,511	\$	23,544	74%		
Overtime	\$	10,820	\$	649	\$	828	\$		\$		\$	1998	\$		\$ 1	,585	\$	12,297	6%		
Total Personnel Expenditures	\$	421,043	\$	25,263	\$	32,210	\$	57,600	\$	677	\$	2,666	\$	2,629	\$ 50	,644	\$	542,087	8%	\$	
Utilization Management															\$ 1	,500	\$	7,500	-44%		
Communications/ IT/Cell Phones			-								-		-		s	,566	Ś	720	-54%		
Postage			-				-				-					,070		300	-72%	1	
Patient Travel											-		-			,463	1000	1,420	-72%		
Rent - Equipment- Copiers			-				-				1		-			,608	\$	4,617	0%	1	
Operating Supplies/Kitchen Supplies			-								+				100000	,246		2,904	133%	1	
Office Supplies			-				-				-	-	-			,754	Ś	1,725	-2%		
Household supplies	-		-								-					,987	Ś	3,828	-36%	1	
Food Cost			-				<u> </u>				+		-			,833	Ś	33,477	20%		
IT Software Expenses			-								-					,707	Ś	6,985	48%	1	
Payroll Service			-				1				+		-			,876	Ś	2,283	22%	1	
IT licenses			<u> </u>				-				t		-			,599	Ś	3,053	17%	ł	
Recreational Supplies			-				-				-		-		\$	174	Ś	276	59%		
Medical & Dental Supplies			<u> </u>				-				+		-		Ś	814	Ś	480	-41%	1	
Medical - Toxicology Supplies	-		-	1		)	2	3			-				T	,284	Ś	4,500	-41%	ł	
Laboratories	_		-					-			-		2		\$	142	Ś	200	41%	1	
Insurance			-				-				-					,018	Ś	11,018	41%		
Meals and Meeting expenses			-				2				-	10	1		\$ 1.	236	Ś	11,018	-22%	1	
Ground Maintenance	~		-				-				-		35		Ś	143	Ś	59	-59%	1	
Administrative Costs- Contracts (21.8%)			-	0			0				<u> </u>					143		136,821	-35%	1	
Total Operating Expenditures	1			Ą			6	1					12				Ś	222,350	2%		
Building Lodging Expenses for Medicaid Covered Clients	-				-		5							-		,704		- 222,550	270	1	
Total Program Costs																,428		764,438			
Total Direct Service Provision Cost							-				-				\$ 71	,428	Ś	764,438			
Medicaid Payments less 3% claw back reserve			-									11				,294)	-	(385,294)			
Estimated Patient Contribution			-				-						-0		+ 1	,818)		(3,818)			
Total estimated amount invoiced to Arlington County	_														Y 1	,316		375,326			