

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

CONTRACT AMENDMENT COVERPAGE

<b>TO:</b> ARLINGTON FREE CLINIC 2921 11 <sup>TH</sup> STREET S ARLINGTON, VIRGINIA 22204	<b>DATE ISSUED:</b> <b>CONTRACT NO:</b> <b>CONTRACT TITLE:</b>	<u>6/12/2020</u> <u>20-777-EP</u> <u>PATIENT CENTERED MEDICAL HOME</u>
---	--	--

---

**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. 20-777-EP including any attachments or amendments thereto.

**EFFECTIVE DATE:** IMMEDIATELY

**EXPIRES:** 6/30/2021

**RENEWALS:** THIS IS THE FIRST YEAR OF A POSSIBLE 5 YEAR CONTRACT

**COMMODITY CODE(S):** 95278

**LIVING WAGE:** N

**ATTACHMENTS:**

AGREEMENT No. 20-777-EP

**EMPLOYEES NOT TO BENEFIT:**

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

---

**VENDOR CONTACT:** CORALIE MILLER **VENDOR TEL. NO.:** (703) 979-1425

**EMAIL ADDRESS:** CMILLER@ARLINGTONFREECLINIC.ORG

**COUNTY CONTACT:** ERROL CHIN-LOY (PHD) **COUNTY TEL. NO.:** (703) 228-1275

**COUNTY CONTACT EMAIL:** ECHINLOY@ARLINGTONVA.US

---

**PURCHASING DIVISION AUTHORIZATION**

*Lucas Alexander*

**Title** PROCUREMENT OFFICER

**Date** 6/12/2020

ARLINGTON COUNTY, VIRGINIA

AGREEMENT NO. 20-777-EP  
AMENDMENT NUMBER 1

This Amendment Number 1 is made on the date of execution by the County and amends Agreement Number 20-777-EP ("Main Agreement") dated May 22, 2020 between Arlington Free Clinic ("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:

**ADD THE FOLLOWING REQUIREMENTS TO ATTACHMENT A – SCOPE OF WORK**

The Contractor must provide case management services to clients who tested positive for COVID-19. The County will provide contact information of identified individuals. Case management services must include but are not limited to:

1. Conduct follow-up phone calls with individuals to identify and meet Covid-19 related health needs.
2. Provide COVID-19 related counseling to help individuals navigate through the illness.
3. If needed, refer individuals to long-term health care facilities.
4. Purchase necessary supplies required to meet the health and daily needs of individuals infected with coronavirus.
5. Provide documentation of all contacts, referrals and any expenses related to individuals' health and daily needs with each monthly reimbursement request.

**ADD THE FOLLOWING TO PARAGRAPH 5. CONTRACT AMOUNT**

The County will pay up to \$25,000 through June 30, 2021 to reimburse the Contractor for case management services and items needed to meet clients' health and daily needs. Invoices must be submitted to the Project Officer by the 15<sup>th</sup> of each month and must include documentation for all expenses invoiced. Invoices must be submitted in the format of the attached Exhibit A – Invoice Template.

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

WITNESS these signatures:

THE COUNTY BOARD OF ARLINGTON  
COUNTY, VIRGINIA  
AUTHORIZED:  
SIGNATURE: Lucas Alexander  
NAME: LUCAS ALEXANDER  
TITLE: PROCUREMENT OFFICER  
DATE: 6/12/2020

ARLINGTON FREE CLINIC  
AUTHORIZED:  
SIGNATURE: Donna White  
NAME: Donna T. White  
TITLE: President  
DATE: 6-11-20