



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

**AGREEMENT NO. 22-DHS-EP-189
AMENDMENT NUMBER 1**

This **Amendment Number 1** is made on the date of execution by the County and amends **Agreement Number 22-DHS-EP-189** ("Main Agreement") dated February 23, 2022, between **Genetics & IVF Institute, Inc.** ("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. PARAGRAPH 46. NOTICES IS REPLACED WITH THE FOLLOWING:**

46. NOTICES

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:

Sean Swindell
Genetics and IVF Institute
3015 Williams Drive
Fairfax, VA 22031
Phone: (703) 698-7355
Email: sswindell@givf.com

TO THE COUNTY:

Yvette Wright, Project Officer
Arlington County, VA
2100 Washington Blvd 2nd Floor PHD
Arlington VA 22204
Phone: (703) 228-1275
Email: ywright@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

- 3. REMOVE PARAGRAPH 22. COVID-19 VACCINATION POLICY FOR CONTRACTORS.
- 4. REMOVE EXHIBIT C: CONTRACTOR COVID-19 VACCINATION CERTIFICATION.
- 5. REMOVE EXHIBIT D: CONTRACTOR COVID-19 VACCINATION QUARTERLY COMPLIANCE CERTIFICATION.

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

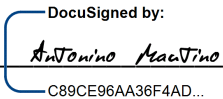
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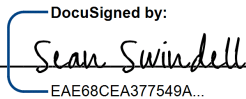
THE COUNTY BOARD OF ARLINGTON
COUNTY, VIRGINIA

GENETICS & IVF INSTITUTE, INC.

PRINT: Antonino Mautino

PRINT: Sean Swindell

SIGNATURE: 
C89CE96AA36F4AD...

SIGNATURE: 
EAE68CEA377549A...

TITLE: Buyer

TITLE: CEO

DATE: 1/29/2024

DATE: 1/26/2024

EXHIBIT B
PRICING SCHEDULE (March 1, 2024 to February 28, 2025)

Service	CPT Codes	County Payment
Genetic Counseling	99244	\$50.00
Ultrasound Evaluation + Guidance for Amniocentesis or	76805 & 76946	\$125.00
Ultrasound Evaluation + Guidance for CVS	76801 & 76805	\$125.00
Amniocentesis or	59000	\$225.00
CVS, physician procedure	59015	\$225.00
Chromosome Analysis, interpretation and clinical report to patient (per blood sample, per Amniotic fluid sample, or per	82106, 88235-22, 88269, 88280,88285, 88291	\$325.00
Chromosome Analysis, interpretation and clinical report to patient (per blood simple, per CVS sample)	88235-22, 88267, 88280, 88285, 88291	\$325.00
Amniotic Fluid AFB	82106	\$ 25.00
Prenatal DNA Analysis for Sickle Cell or Cystic Fibrosis including maternal cell contamination testing (when parents are known carriers)	83891x2units, 83900, 83901, 83909, 83912, 83893, 83894, 83896 x3units, 83898, 83912	\$325.00
Rhogam as needed	90384	\$120.00
Maximum Per Client Charge		\$750.00