

**ARLINGTON COUNTY, VIRGINIA**

**AGREEMENT NO. 22-DHS-SS-258  
AMENDMENT NUMBER 1**

This Amendment Number 1 is made on 7/5/2022 by the County and amends Agreement Number 22-DHS-SS-258 (“Main Agreement”) dated July 1, 2021, between Neighborhood Health (“Contractor”) and the County Board of Arlington County, Virginia (“County”).

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

- 1. CONTRACT TERM IS HEREBY RENEWED FROM JULY 1, 2022, TO JUNE 30, 2023, WITH NO RENEWALS REMAINING.**
- 2. ADD CLAUSE 52, COVID-19 VACCINATION POLICY FOR CONTRACTORS, TO THE CONTRACT AS FOLLOWS:**

**52. Covid19 Vaccination Policy for Contractors**

Due to the 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. All County Contractors, entering County-owned, controlled, or leased facilities or facilities operated by a contractor if the services provided at that location are exclusive to Arlington County Government or contractors with public-facing responsibilities must adopt these policies for implementation with their employees and subcontractors working on County contracts.

Contractors are required to obtain and maintain the COVID-19 vaccine status of employees or subcontractors and require any unvaccinated or not fully vaccinated employees to follow a weekly testing protocol established by the Contractor to submit to weekly testing and provide any accommodations as required by law. Contractor should submit the certification of compliance to the Purchasing Agent at the time of contract execution and within five working days of the end of each quarter (see Exhibits F and G). In addition, all Contractor and subcontractor employees subject to the requirements of this section must also comply with the County COVID-19 masking and social distancing protocols, as signed at each County location.

It is recognized that the COVID-19 pandemic is an ongoing health crisis. As such, requirements with respect to health and safety, including vaccines and face-coverings may change over time. Contractors are expected to adhere to the County’s requirements as they evolve in response to the crisis.

For questions, the Contractor may email [contractorvaccineinfo@arlingtonva.us](mailto:contractorvaccineinfo@arlingtonva.us).

**3. REVISE EXHIBIT A, SCOPE OF WORK, AS FOLLOWS:**

**M. Reporting Responsibilities – add paragraph number 4**

4. Weekly/Bi-weekly Reports -Submit to the project officer:

- Weekly on Fridays – list of upcoming appointments for the following week for Arlington CSB clients with the provider.
- Bi-weekly on Mondays - provider clinic notes of all CSB clients that have been seen in the clinic during the last two weeks.

**4. REPLACE EXHIBIT E, REPORTS, WITH REVISED EXHIBIT E ATTACHED**

**5. ADD EXHIBIT F CONTRACTOR COVID-19 VACCINATION CERTIFICATION.**

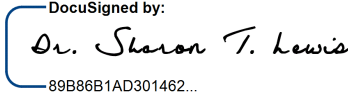
**6. ADD EXHIBIT G CONTRACTOR COVID-19 VACCINATION QUARTERLY COMPLIANCE CERTIFICATION.**

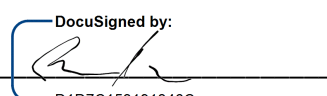
All other terms and conditions of the Main Agreement remain in effect.

WITNESS these signatures:

THE COUNTY BOARD OF ARLINGTON  
COUNTY, VIRGINIA

NEIGHBORHOOD HEALTH

AUTHORIZED SIGNATURE:  DocuSigned by:  
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AUTHORIZED SIGNATURE:  DocuSigned by:  
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NAME: DR. SHARON T. LEWIS

NAME: Dr. Basim Khan

TITLE: PURCHASING AGENT

TITLE: Executive Director

DATE: 7/5/2022

DATE: 7/5/2022

**REVISED EXHIBIT E REPORTS**

<u>Reports</u>	<u>Due Date or Frequency</u>	<u>Submitted to</u>
<b><u>Incidents</u></b>		
<u>Incidents involving client or staff safety</u>	<u>Within 24 hours</u>	<u>Project Officer/Medical Director</u>
<b><u>Reports</u></b>		
Weekly/Biweekly reports	Weekly report submitted each Friday for upcoming appointments for Arlington CSB clients with the provider.  Bi-weekly report to be submitted on Monday for clinic notes for all CSB clients in the 2 weeks.	Project Officer/Nursing supervisor
DHS client roster report	10th of the month after the end of the quarter (10th of October, January, April, and June 30th)	Project Officer/Medical Director
Quarterly report to include the unduplicated number of DHS clients, the total number of DHS and non-DHS clients, number of client visits, no-show and cancellations for the quarter, age/race demographic data, outcome measures, and insurance breakdown for clients.	10th of the month after the end of the quarter (10th of October, January, April, and June 30th)	Project Officer/Medical Director
Financial Reports (submitted together with the quarterly invoice): The reports shall include total client revenue for	10th of the month after the end of the quarter (10th of	Administrative Officer

the site, and total operational costs.	October, January, April, and June 30th)	
Third-Party Payment Report (submitted together with the quarterly invoice)- the number of services billed, and the amount and type of third-party reimbursement received (i.e., Medicaid, Medicare, and Individual Insurance companies).	10th of the month after the end of the quarter (10th of October, January, April, and June 30th)	Administrative Officer
<b><u>Annual</u></b>		
Client Satisfaction Survey	July 15th.	Project Officer/Medical Director
Annual Summary Report- A year-end summary report with the number of new and total CSB clients seen, percent of patients seen who were uninsured, had Medicaid, Medicare, and who had private insurance, race, age, and outcome measures to be submitted.	July 15th.	Project Officer/Medical Director
Financial Report The report shall include total annual client revenue for the site, and total operational costs.	July 15th.	Project Officer
<b><u>As Requested</u></b>		
Policies and Procedures	Upon Request	Project Officer/ Medical Director
Other reports deemed as necessary.	Upon Request	Project Officer/Medical Director


**EXHIBIT F**

**CONTRACTOR COVID-19 VACCINATION CERTIFICATION**

I hereby certify that all Neighborhood Health employees and subcontractors who will be working on Contract No. 22-DHS-SS-258 are fully vaccinated against COVID- 19, being tested on a weekly basis, or are exempt pursuant to a valid reasonable accommodation under state or federal law.

**Please do not include any of your employees' medical documentation, including vaccination records or test results.**

Date: 7/5/2022

Signature:  \_\_\_\_\_  
DocuSigned by:  
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Printed Name: Dr. Basim Khan

Title: Executive Director

**EXHIBIT G**

**CONTRACTOR COVID-19 VACCINATION QUARTERLY COMPLIANCE CERTIFICATION**

**By Email:** Please complete the report below and return it to: [contractorvaccineinfo@arlingtonva.us](mailto:contractorvaccineinfo@arlingtonva.us).

I hereby certify that all Neighborhood Health (Contractor Name) employees and subcontractors working on Contract No. 22-DHS-SS-258 are fully vaccinated against COVID-19, being tested on a weekly basis, or are exempt pursuant to a valid reasonable accommodation under state or federal law.

**Please do not include any of your employees' medical documentation, including vaccination records or test results.**

Date: 7/5/2022

Signature: \_\_\_\_\_  
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Printed Name and Title: Dr. Basim Khan Executive Director

Company Name: Neighborhood Health

Company Address: \_\_\_\_\_