

PERFORMANCE WORK STATEMENT (PWS)

FOR

Human Performance Program Services

1.0 General:

1.1 Scope: The contractor shall provide all personnel, equipment, tools, materials, supervision, and quality control necessary, except as specified in Paragraph 3.0 as Government Furnished, to perform on-base injury prevention and mitigation, rehabilitation services, and human performance optimization services to rated personnel assigned to the 173 Fighter Wing (FW), Kingsley Field, Klamath Falls, OR, USA. The Contractor shall furnish consultation and reports, similar to the range of services found in a commercial facility, as well as services specialized to meet the needs of fighter pilots. Performance shall be in accordance with the professional standards of the Accreditation Association for Ambulatory Health Care (AAAHC), and as defined in this PWS

1.2 Background: 100% of the 173 FW rated pilots have experienced some type of spine discomfort during their career. The Human Performance Program (HPP) is designed to meet the unique physical needs of the rated pilots. Conditioning is accomplished through a comprehensive, coordinated, multidisciplinary “pre-habilitative” physical training program with focused strength and conditioning, performance nutrition, and physical therapy. The purpose of placing HPP Specialists on base is to reduce frequency and severity of injuries and time lost from service, improve long term quality of life, optimize human performance/ readiness, avoid injury prior to occurrence, increase pilot production, and support pilot retention.

1.3 Period of Performance (PoP): The Period of Performance shall be one Base Year of 12 months and two 12-month option years, with one option period of 6 months as defined in FAR 52.217-8.

1.4 General Information:

1.4.1 Quality Assurance (QA): The Government will evaluate the contractor's performance under this contract in accordance with the Quality Assurance Surveillance Plan (QASP). This plan is primarily focused on what the Government must do to ensure that the contractor has performed in accordance with the performance standards. It defines how the performance standards will be applied, the frequency of surveillance, and acceptable quality level(s) (defect rate(s)).

1.4.2 Recognized Holidays: The following are recognized US holidays. The contractor shall not perform services on these days:

- 1.4.2.1 New Year's Day: January 1st
- 1.4.2.2 Martin Luther King, Jr.'s Birthday
- 1.4.2.3 President's Day
- 1.4.2.4 Memorial Day
- 1.4.2.5 Independence Day: July 4th
- 1.4.2.6 Labor Day
- 1.4.2.7 Columbus Day
- 1.4.2.8 Veteran's Day: November 11th
- 1.4.2.9 Thanksgiving Day
- 1.4.2.10 Christmas Day

1.4.3 Place and Performance of Services: The contractor shall provide services between the hours of 0600-1500 Monday through Friday and during 173 FW Unit Training Assemblies (UTAs), except on recognized US holidays or when the Government facility/installation is closed due to local or national emergencies, administrative closings, or similar Government-directed facility/installation closings. On scheduled night weeks, the standard times will fluctuate based on the flying schedule, but will not be in excess of a 9 hour day. The 173 FW will provide at least two weeks' notice requiring a change to the standard operating hours. Performance shall be at Kingsley Field Air National Guard Base, OR current facilities are housed in building 243. The contractor shall at all times maintain an adequate work force for the uninterrupted performance of all tasks defined within this PWS when the Government facility/installation is not closed for the above reasons. When hiring personnel, the contractor shall keep in mind that the stability and continuity of the work force are essential. Telecommuting is not authorized.

1.4.3.1 Unscheduled gate closures by the Security Police may occur at any time causing all personnel entering or exiting a closed installation to experience a delay. This cannot be predicted or prevented. Contractors are not compensated for unexpected closures or delays. Vehicles operated by contractor personnel are subject to search pursuant to applicable regulations. Any moving violation of any applicable motor vehicle regulation may result in the termination of the contractor employee's installation driving privileges.

1.4.3.2 The contractor's employees shall become familiar with and obey the regulations of the installation; including fire, traffic, safety and security regulations while on the installation. Contractor employees should only enter restricted areas when required to do so and only upon prior approval. All contractor employees shall carry proper identification with them at all times. The contractor shall ensure compliance with all regulations and orders of the installation which may affect performance.

1.4.4 Security Requirements. The 173d Security Forces Squadron, completes a vetting process on all contractors, vendors and visitors who are requesting access to the installation on a frequent basis. This process is a review of individual criminal history, driving status and any prior revocations from military installations. Those who pass the

vetting process will receive an annual Anti-Terrorism briefing prior to being issued either a Defense Biometric Identification Card or temporary pass. Contractors, Venders, and Visitors will complete the vetting process annually if entry to the installation is still required. Real ID Act; Implemented 2013 requires states and territories to meet federal guidelines for issuing acceptable identification and or driver's license by January 2017. The Real ID Act was established to better secure state issued documents which should assist with deterring terrorist activity. Currently most states are meeting the guidelines with the exception of the following non-compliant states; Kentucky, Maine, Oklahoma, Pennsylvania, South Carolina, Minnesota, Missouri and Washington State. Individuals from these states will need to provide additional Identification for vetting, such as Passport, Birth Certificate, Permanent Resident Card, Foreign passport with I-551 stamp, Merchant Mariner Legacy Card, or new Coast Guard version, Federal issued PIV card, Homeland Security Trusted Traveler card or Veterans ID card.

1.4.4.1 General requirements.

The contracting office will coordinate with the 173 SFS Pass and ID section all work that will be performed on this installation at a minimum 72 hours in advance. Contracting office should provide the following:

- a. Location of work
- b. Type of work being performed
- c. Time span of work
- d. Hours work will be performed
- e. Contractor officer point of contact
- f. Completed DD Form 369 with all information and signatures (see attachment 1)
- g. Turn all DD Forms 369 over to SF for vetting
- h. Responsible area POC where work is being performed.
- i. Identify to SF the lead construction crew POC

1.4.4.2 Contractors and Venders requirements:

- a. Complete DD Form 369 and appropriate signatures and return to the contracting office
- b. When cleared to work on base via vetting process, come to building 172 for DBIDs issue. (Please coordinate with Mr. Stuart prior to just showing up)
- c. Contractors, Venders will receive an ATO briefing prior to being given unescorted access to the installation.
- d. Contractors will enter south gate each day for work between the hours of 0700 – 1600 unless otherwise coordinated.
- e. Contractors/vendors are responsible for all state traffic law while operating a vehicle on this installation. Vehicle operators must have current driver's license.
- f. Contractor vehicles will be searched each time entering the installation. Contractors will surrender their issued DBIDs card or pass to the officer at the gate for inspection. Drivers will then open all compartments, hood, trunk, doors of the vehicle for search.
- g. No weapons, firearms are authorized on the installation. Knives with blades 3 inches or shorter are allowed if they are used to perform their job.

1.4.4.3 Vetting and disqualifying factors:

- a. All personnel requesting unescorted access to the installation will be vetted by performing a criminal background check. Once a person clears the criminal history the contracting office will be advised the requestor is authorized to proceed for AT Brief and DBIDs card issue.
- b. Failure to meet the vetting process the contracting office will only be told the individual did not meet the process with no further information.
- c. Disqualifying factors:
 - U.S. Citizenship, immigration status or Social Security Number cannot be verified.
 - Barred from entry/access to any military installation or facility
 - Wanted by federal or civil law enforcement authorities, regardless of offense or violation.
 - Conviction of firearms or explosives violations.
 - Conviction or espionage, sabotage, treason or terrorism, murder, sexual assault, armed assault/robbery, rape, child molestation, drug possession with intent to manufacture, sell or distribute.
 - Name appears on federal agency watch list or hit list for criminal behavior, or terrorist watch list.
 - Felony Conviction.

1.4.4.4 Work being performed in controlled or restricted areas.

- a. When working is being performed in a controlled or restricted area, the contractor(s) must be under escort by military personnel during the time of the project. Normally owner/user is responsible for escort duties. SF will not be responsible for escort duties.
- b. Contracting office will need to coordinate a free zone letter through the Wing Commander and Security Forces with detailed information of work being performed and attached drawings of free zone information.
- c. Contractor will be responsible for the security of all personal tools and supplies.
- d. Supplies will not be left within 25 meters of the internal and external of the boundary.
- e. Containers, equipment or other materials will remain 25 meters away from all occupied facilities.
- f. Unattended vehicles shall be rendered immobile by removing the keys or other suitable means.
- g. During increased Force Protection Conditions, contractors, vendors maybe denied entry to the installation.

1.4.4.5 Completion of work.

- a. When work is completed and the contract is closed out, the contracting office is responsible to collect all issued DBIDs cards or temporary passes and turn them into SF for accountability and destruction.

1.4.4.6 COMSEC/IT Security. All communications with DOD organizations are subject to communications security (COMSEC) review. All telephone communications networks are continually subject to intercept by unfriendly intelligence organizations. DOD has authorized the military departments to conduct COMSEC monitoring and recording of telephone calls originating from, or terminating at, DOD organizations. Therefore, the contractor is advised that any time contractor place or receive a call they are subject to COMSEC procedures. The contractor shall ensure wide and frequent dissemination of the above information to all employees dealing with DOD information. The contractor shall abide by all Government regulations concerning the authorized use of the Government's computer network, including the restriction against using the network to recruit Government personnel or advertise job openings.

1.4.4.7 Use of Government Information Systems (IS) and access to Government networks is a revocable privilege, not a right. Users are the foundation of the DoD strategy and their actions affect the most vulnerable portion of the AEI. Contractor employees shall have a favorable background investigation or hold a security clearance and access approvals commensurate with the level of information processed or available on the system. Contractor employees shall:

- a. Comply with the command's Acceptable Use Policy (AUP) for Government owned IS and sign an AUP prior to or upon account activation.
- b. Complete initial and/or annual Information Assurance (IA) training as defined in the IA Best Business Practices (BBP) training (<https://informationassurance.us.army.mil>).
- c. Mark and safeguard files, output products, and storage media per classification level and disseminate them only to individuals authorized to receive them with a valid need to know.
- d. Protect IS and IS peripherals located in their respective areas in accordance with physical security and data protection requirements.
- e. Practice safe network and Internet operating principles and take no actions that threaten the integrity of the system or network.

1.4.4.8 Protection of Personally Identifiable Information (PII). The contractor shall protect all Personally Identifiable Information (PII) encountered in the performance of services in accordance with DFARS 224.103 and DoDD 5400.11, Department of Defense Privacy Program, and DoD 5400.11-R. If a PII breach results from the contractor's violation of the aforementioned policies, the contractor shall bear all notification costs, call-center support costs, and credit monitoring service costs for all individuals who's PII has been compromised.

- a. Since the health care workers under this contract have access to and/or process information requiring protection under the privacy act of 1974, these positions are

considered "ADP III" positions. Compliance with DoD Directive 8500.1, DoD Directive 5200.2, AFI 31-501 and AFI 33-202 is mandatory for ADP III positions. Therefore, a National Agency Check with Inquiries (NACI) is required for each health care worker under this contract. The Contractor shall fully adhere to the provisions of referenced publications by having each of their employees who are performing under this contract make an appointment (through the COR) with the appropriate security organization at the installation where service is provided. Each individual will be fingerprinted and required to complete the appropriate forms, usually a Standard Form 85-P, Questionnaire for Public Trust Positions. The contractor shall advise their employees that a favorable report is a required condition of employment under this contract. The Contractor shall apply for the NACI prior to the start of performance for each health care worker.

1.4.4.9 CAC Requirements: The Common Access Card (CAC) is the Department of Defense (DOD) Federal Personal Identity Verification (PIV) credential. In accordance with Directive Type Memorandum (DTM) 08-003, December 1, 2008, incorporating Change 5, October 8, 2013, Initial issuance of a CAC requires at a minimum, the completion of FBI fingerprint check with favorable results reflecting "No Record" and submission of a National Agency Check with Inquiries (NACI) to the Office of Personnel Management (OPM), or a DoD-determined equivalent investigation. The issuance of a CAC will be based on four criteria; (a) eligibility for a CAC; (b) verification of DoD affiliation from an authoritative data source; (c) completion of background vetting requirements according to the Federal Information Processing Standards Publication 201-1, Personal Identity Verification (PIV) of Federal Employees and Contractors, March 2006, and DOD Regulation 5200.2-R, Department of Defense Personnel Security Program, January 1987, and (d) verification of a claimed identity. CAC eligible personnel must be registered in the Defense Enrollment Eligibility Reporting System (DEERS) through either an authoritative personnel data feed from the appropriate Service or Agency or Trusted Associate Sponsorship System (TASS).

1.4.4.10 AT Level 1 Awareness Training (AT): All contractor employees requiring access to Army Installations, facilities, and controlled access areas shall complete Level 1 AT within 30 calendar days after contract start date and within 30 calendar days of new employees commencing performance. The contractor shall submit certificates of completion for each affected contractor and subcontractor employee, to the COR, or to the KO if a COR is not assigned, within 15 calendar days after completion of training. Level 1 AT is available at <https://atlevel1.dtic.mil/at/>.

1.4.4.11 Information Assurance (IA)/Information Technology (IT) Training: All contractor employees shall complete the DoD IA Awareness Training before issuance of network access and annually thereafter. All contractor employees performing services involving IA/IT functions shall comply with DoD and Army training requirements in DoDD 8570.01, DoD 8570.01-M and AR 25-2 within six months of the start of contract performance. In accordance with DoD 8570.01-M , DFARS 252.239.7001 and AR 25-2, contractor employees performing services supporting IA/IT functions shall be appropriately

certified upon contract award. The baseline certification as stipulated in DoD 8570.01-M shall be completed upon contract award.

1.4.4.12 OPSEC Training. In accordance with AR 530-1, Operations Security, new contractor employees shall complete Level I OPSEC training within 30 calendar days of their reporting for duty and annually thereafter. The contractor shall submit certificates of completion for each affected contractor employee, to the COR, or to the KO if a COR is not assigned, within 15 calendar days after completion of training. Level 1 OPSEC training is available at <http://cdsetrain.dtic.mil/opsec/>.

1.4.5 Physical Security. The contractor shall safeguard all Government property provided for contractor use. At the close of each work period, Government facilities, equipment and materials shall be secured.

1.4.6 Special Qualifications: Copies of current certification from the National Athletic Trainer's Association (NATA) and the license to practice in the State of Oregon and copies of current license from the Oregon State Board of Physical Therapy must be provided. Athletic Trainer's and Physical Therapist's medical/preventative services will be determined by the unit commander (commander may delegate this authority to unit medical personnel) based on medical laws governing the State of Oregon. Contractor is required to provide résumés detailing experience and qualifications sufficient to perform the requirements of this PWS, including, at a minimum, Bachelors of Science in Athletic Training and/or Physical Therapy, Masters of Science, NATA Member (if Athletic Trainer), ATC and PT License for State of Oregon, CPR/AED Certified, NATA and PT continuing education compliant, evidence (s)he has worked directly with workers' compensation patients under the supervision of a Licensed United States Physician or Physical Therapist. These qualifications are necessary in order to work with injured industrial employees who fall under the jurisdiction of the Federal Employees Compensation Act and the special needs of working with United States DoD fighter pilots.

1.4.6.1 The Physical Therapist must be a current Oregon Licensed Physical Therapist by the Oregon Physical Therapy Association (OPTA) and hold a degree from an American Physical Therapy Association (APTA) accredited institution specifically for "Physical Therapy." No other degree will be accepted for this position. The initial Physical Therapist must have experience treating professional and/or collegiate athletes, or equivalent. A minimum of four (4) years' experience is desired. The Physical Therapist must have experience working in an orthopedic out-patient physical therapy clinic. A minimum of five (5) years' experience is desired. Past experience working with combat related injuries and MedX™ experience is strongly preferred.

1.4.6.2 The initial Athletic Trainer must be a current Oregon Licensed Athletic Trainer by the OATA, a current Athletic Trainer (AT) Certification from the National Athletic Trainers' Association (NATA), and hold a degree from an NATA accredited institution specifically for "Athletic Trainer." No other degree will be accepted for this position. The initial Athletic Trainer must have experience working with professional and/or collegiate

athletes. A minimum of four (4) years' experience is desired. The initial Athletic Trainer must have experience working in an orthopedic out-patient physical therapy clinic. A minimum of three (3) years' experience is desired. Past experience working with combat related injuries, insurance authorizations, and MedX™ experience is strongly preferred.

1.4.6.3 The Strength and Conditioning Specialist must possess a Bachelor's Degree (Master's preferred) in an accredited exercise science, health science, or physical education-related discipline. A minimum of five (5) years of experience is desired. The contractor shall possess and maintain current certification by the National Strength and Conditioning Association (NSCA) as a Certified Strength and Conditioning Specialist (CSCS). Maintenance of this certification shall be an enduring element of the requirement. Demonstrated sustained experience working with elite athlete populations is highly desired. Creditable specialized experience includes: developing long and short-range planning and coordination of sport/mission specific performance programs resulting in attributable results with elite athletes (i.e. Division I collegiate, Olympic, professional level athletes or SOF- specific tactical professionals). Current certification in basic Cardiopulmonary Resuscitation (CPR) to include Automated External Defibrillator (AED) training. The contractor shall be physically proficient to demonstrate all prescribed exercises / techniques and to hike over rough terrain and function in austere environments. Contractor must be able to lift and manipulate loads and plates up to 25 kilograms. Past experience working with MedX™ and insurance authorizations is strongly preferred.

1.4.7 Post Award Conference/Periodic Progress Meetings: The contractor agrees to attend any post award conference convened by the KO in accordance with Federal Acquisition Regulations Subpart 42.5. The KO, Contracting Officer's Representative (COR), and other Government personnel, as appropriate, may meet periodically with the contractor to review the contractor's performance. At these meetings, the Contracting Officer will apprise the contractor of how the Government views the contractor's performance and the contractor shall apprise the Government of problems, if any, being experienced. The contractor shall resolve outstanding issues raised by the Government. Contractor attendance at these meetings shall be at no additional cost to the Government.

1.4.8 Contract Manager (CM): The contractor shall designate a CM who shall ensure performance under this contract. The name of this person, and an alternate who shall act for the contractor when the CM is absent, shall be designated in writing to the KO. The CM or alternate shall have full authority to act for the contractor on all contract matters relating to daily operation of this contract. The CM shall work through the COR, (or the KO if a COR is not assigned), to resolve issues, receive technical instructions, and ensure adequate performance of services. The CM shall ensure that contractor employees do not perform any services outside the scope of the contract without an official modification issued by the KO. The CM shall ensure contractor employees understand that services performed outside the scope of the contract are performed wholly at the expense of the contractor.

1.4.9 Identification of Contractor Employees: All contractor personnel attending meetings, answering Government telephones and working in other situations where their contractor status is not obvious to third parties are required to identify themselves as such to avoid creating an impression that they are Government employees. The contractor shall ensure that all documents or reports produced by contractor personnel are suitably marked as contractor products or that contractor participation is appropriately disclosed. The contractor's status as a "contractor" shall be predominantly displayed in all correspondence types (to include signature blocks on e-mail) and dealings with Government or non-Government entities/ Contractor personnel shall wear identification badges distinguishing themselves as such. The badges shall have the company name, employee name and the word "contractor" displayed. The contractor shall retrieve all identification media (including vehicle passes) from their employees who depart employment for any reason. All identification media (i.e., badges and vehicles passes) shall be returned to the KO within 14 days of an employee's departure. **(Add as a deliverable to TE2)**

1.4.10. Combating Trafficking in Persons: The United States Government has adopted a zero tolerance policy regarding trafficking in persons. Contractors and contractor employees shall not engage in severe forms of trafficking in persons during the period of performance of the contract; procure commercial sex acts during the period of performance of the contract; or use forced labor in the performance of the contract. The Contractor shall notify its employees of the United States Government's zero tolerance policy, the actions that will be taken against employees for violations of this policy. Such actions may include, but are not limited to, removal from the contract, reduction in benefits, or termination of employment. The contractor shall take appropriate action, up to and including termination, against employees or subcontractors that violate the US Government policy as described at FAR 22.17.

1.4.11 Data Rights: The Government has unlimited rights to all documents/material produced under this contract. All documents and materials, to include the source codes of any software, produced under this contract shall be Government owned and are the property of the Government with all rights and privileges of ownership/copyright belonging exclusively to the Government. These documents and materials may not be used or sold by the contractor without written permission from the KO. All materials supplied to the Government shall be the sole property of the Government and may not be used for any other purpose. This right does not abrogate any other Government rights.

1.4.12 Organizational Conflicts of Interest (OCI): The contractor and subcontractor personnel performing services under this contract may receive, have access to or participate in the development of proprietary or source selection information (e.g., cost or pricing information, budget information or analyses, specifications or work statements, etc.) or perform evaluation services which may create a current or subsequent OCIs, as defined in FAR Subpart 9.5. The contractor shall notify the KO immediately whenever it becomes aware that such access or participation may result in any actual or potential OCI and shall promptly submit a plan to the KO to avoid or

mitigate any such OCI. The contractor's mitigation plan will be determined to be acceptable solely at the discretion of the KO and in the event the KO unilaterally determines that any such OCI cannot be satisfactorily avoided or mitigated, the KO may affect other remedies as he or she deems necessary, including prohibiting the contractor from participation in subsequent contracted requirements which may be affected by the OCI.

2.0 Definitions and Acronyms:

2.1.1 CONTRACTOR. A supplier or vendor awarded a contract to provide specific supplies or service to the government. The term used in this contract refers to the prime.

2.1.2 CONTRACTING OFFICER (KO). A person with authority to enter into, administer, and or terminate contracts, and make related determinations and findings on behalf of the government. Note: The only individual who can legally bind the government.

2.1.3 CONTRACTING OFFICER'S REPRESENTATIVE (COR). An employee of the U.S. Government designated by the KO to monitor contractor performance. Such appointment will be in writing and will state the scope of authority and limitations. This individual has authority to provide technical direction to the Contractor as long as that direction is within the scope of the contract, does not constitute a change, and has no funding implications. This individual does NOT have authority to change the terms and conditions of the contract.

2.1.4 DEFECTIVE SERVICE. A service output that does not meet the standard of performance associated with the Performance Work Statement.

2.1.5 DELIVERABLE. Anything that can be physically delivered and includes non-manufactured things such as meeting minutes or reports.

2.1.6 KEY PERSONNEL. Contractor personnel that are evaluated in a source selection process and that may be required to be used in the performance of a contract by the Key Personnel listed in the PWS. When key personnel are used as an evaluation factor in best value procurement, an offer can be rejected if it does not have a firm commitment from the persons that are listed in the proposal.

2.1.7 PHYSICAL SECURITY. Actions that prevent the loss or damage of Government property.

2.1.8 QUALITY ASSURANCE. The government procedures to verify that services being performed by the Contractor are performed according to acceptable standards.

2.1.9 QUALITY ASSURANCE SURVEILLANCE PLAN (QASP). An organized written document specifying the surveillance methodology to be used for surveillance of contractor performance.

2.1.10 QUALITY CONTROL. All necessary measures taken by the Contractor to assure that the quality of an end product or service shall meet contract requirements.

2.1.11 SUBCONTRACTOR. One that enters into a contract with a prime contractor. The Government does not have privity of contract with the subcontractor.

2.1.12 WORK DAY. The number of hours per day the Contractor provides services in accordance with the contract.

2.1.13 WORK WEEK. Monday through Friday, unless specified otherwise.

2.2 ACRONYMS:

ATC - Certified Athletic Trainer

HPP - Human Performance Program – includes Physical Therapist, Athletic Trainer, and Strength and Conditioning coach

PT - Licensed Physical Therapist

NATA - National Athletic Trainers Association COR - Contracting Officer's Representative MTF - Military Treatment Facility

OMS - Occupational Medical Services NCM - Nurse Case Manager

PWS - Performance of Work Statement

APTA - American Physical Therapy Association DoD - Department of Defense

ANG- Air National Guard

ORANG- Oregon Air National Guard ADA - Americans with Disabilities Act

EEOC - Equal Employment Opportunity Commission USAF - United States Air Force

NSCA - National Strength & Conditioning Association ACSM - American College of Sports Medicine

CSCS – Certified Strength and Conditioning Specialist NATA - National Athletic Trainers Association

AHLTA - Armed Forces Longitudinal Technology Application CHCS - Composite Health Care System

HPP - Human Performance Program

HIPAA - Health Insurance Portability and Accountability Act

3.0 Government Furnished Property, Material, Equipment and Services (GFP/M/E/S): The Government will provide the property, material, equipment, and/or services listed below solely for the purpose of performance under this contract:

3.1 Property: The Government will furnish the necessary workspace for the contractor to perform services outlined in this PWS to include desk space, telephones, computers and other items necessary to maintain an office environment.

3.2 Materials: None.

3.3 Equipment:

3.3.1 The contractor shall may have use of Government computers in the immediate work area.

3.4 Services:

3.4.1 Long distance and Defense Switched Network (DSN) telephone services will be provided for official use only. The contractor specialists shall participate in government energy conservation programs.

3.4.2 The Government will assist in patient scheduling, working together with contractor's scheduler and contractor as appropriate. Complete administrative control of the patient shall remain with the Government.

3.5 Utilities: All utilities in the facility will be available for the contractor's use in the performance of this contract. The contractor shall instruct employees in utilities conservation practices. The contractor shall operate under conditions that preclude the waste of utilities, which include turning off the water faucets or valves after using the required amount.

4.0 Contractor Furnished Property, Materials, and Equipment (CFP/M/E):

4.1 General: Except for those items specifically stated to be Government-Furnished in Paragraph 3.0, the contractor shall furnish everything required to perform these services as indicated in Paragraph 1.1.

4.1.1 Software capable of viewing MRI imaging performed at off-base medical facilities and access to Orthopedic M.D. who can assist in interpreting the images for the Operator.

4.1.2 HIPAA compliant software to perform all functions and communication of Electronic Medical Records.

4.1.3 Housekeeping services will be provided by the Contractor in the immediate work area.

5.0 SPECIFIC TASKS: Services provided by the Contractor shall include the following: initial assessment of each pilot, care for personnel who individually seek (or are medically or command-directed to engage) the services of HPP Specialist services; subject matter expertise concerning injury evaluation/assessment, injury prevention, rehabilitation, all 3 phases of medical injury prevention, accommodation processes and implementation, ergonomic assessment and implementation, remedial training, and physical training. The contractor shall provide the following resources under this contract: Oregon Licensed Physical Therapist, and an Oregon Licensed Athletic Trainer, and a licensed Strength and Conditioning coach.

5.1 Primary Injury Rehabilitation: Evaluate and provide rehabilitation of all injured personnel who request the services of the HPP Specialist. Fully communicate with referring provider (if necessary), unit medical staff, and unit management in a fully HIPAA compliant fashion during the full duration of treatment in regards to injured personnel's progress and return to duty status.

5.1.2 Each patient shall receive an initial appointment as soon as practical after injury and/or when referred for HPP services by member's medical treatment provider. Follow up appointments will be based on medical need, and treatment plans developed in coordination with members' military and/or civilian healthcare team.

5.1.2.1 Contractor is to provide an evaluation and prognosis after initial appointment, and an expected Return to Full Duty Date (RFDD) will be established by the contractor. The source of the RFDD will be the Medical Disability Adviser or other authoritative medical reference.

5.1.3 The Contractor shall track the status of all patients who are currently being followed in the HPP program. Due no later than the final business day of each month, the Contractor shall provide the COR a status report which will include an aggregate number of (1) "new patients" (in the program less than one week), (2) "progressing patients" (whose progress is on track to recover by the RFDD), and (3) "prolonged patients" (who are not expected to recover by the RFDD). In conjunction with the written report to the COR, the Contractor shall brief squadron-assigned military medical personnel on the status of each prolonged patient, in order to establish or adjust additional treatment plans and/or referrals. Briefing date(s) shall be coordinated with unit medical staff.

5.1.4 Contractor shall provide post-surgical rehabilitative services to patients as referred by the treating physician with the concurrence of the unit medical staff. Contractor shall notify unit medical staff of all initial patient contacts.

5.1.5 Contractor shall establish relationships with Klamath Falls/Medford/Bend, Oregon-area orthopedic physicians who accept Tri-Care medical coverage, to facilitate full-spectrum treatment, continuity of care, and coordinated case management. Establishment and maintenance of such relationships shall include, but is not limited to, in-person and telephone communication. Ultimate control of members' medical referral

activity is retained by the member, with oversight and management by squadron medical personnel. Contractor shall analyze all Primary Injury cases for potential Secondary Injury likelihood and impacts. These factors will be considered in all treatment plans, and when identified, will be communicated in writing, or via E-Mail NLT the close of business of the same day of determination to unit medical staff. Contractor shall evaluate and provide secondary-prevention rehabilitation for all eligible members when requested by member or unit medical staff. This includes job-related and off duty musculoskeletal pain which is not duty-limiting at the time of analysis, but affects member quality of life at work and may lead to a lost-time or duty-limiting injury in the future.

5.1.6 Personnel choosing the HPP Specialist for secondary prevention shall receive an initial evaluation within two weeks of referral unless for reasons outside the Contractor's control. Justifiable reasons for delay include installation closure, employee vacation, Unit Drill schedule in the case of geographically distant Traditional Guardsmen, contractor capacity restraints, or acts of God.

5.2 Injury Prevention Services: Provide all forms of "primary" injury (acute and/or duty-limiting) prevention services; to include but not limited to: physical capacity as well as new member assessments, personnel health education, nutrition advising.

5.2.1 New member evaluations shall be performed in conjunction with initial on-base medical examinations. At the time of new member evaluations, Contractor shall explain to members the current HPP capabilities and limitations, describe how care is accessed through HPP, and brief member which HPP personnel are best-qualified in the subject areas described in 1.4.6

5.2.1.1 Individual Training Plans will be initiated beginning at the contract start date and shall include individual fitness assessment results, feedback sessions, unique training plans, and any modifications to the plan due to injuries for the pilots in the 173 FW.

5.2.2 Advise management on provision of medical accommodation in accordance with Americans with Disabilities Act (ADA) and Equal Employment Opportunity Commission (EEOC). These services are to include but not limited to: services to meet job requirements from physical capacity assessments, fitness training, and ergonomics.

5.2.3 Initiate and maintain medical records in accordance with Air Force Instruction (AFI) 41-210 "Patient Administration Functions" and AFI 41-211 "Management of Medical Information Services", and any governing Air Force or Air National Guard Instructions which may supersede those AFIs.

5.2.4 The Contractor shall manage patient appointment schedules, individual HPP Specialist work schedules, and reporting of all patients who fail to attend their scheduled appointments in writing or E-mail to the COR within 24 hours of the missed appointment.

5.3 The Contractor is responsible for the treatment and preventative services of spinal injuries, when medically appropriate, utilizing MedX™ equipment or equal to include: Medical Lumbar, Medical Cervical, Exercise Rotary Torso, and Exercise Stretch.

5.4 The Contractor must have personnel on staff who have verifiable past experience in utilizing AHLTA and CHCS for patient charting. Contractor shall chart all members' treatment and progress using Armed Forces Longitudinal Technology Application (AHLTA) and Composite Health Care System (CHCS). Contractor shall provide chart notes when created or updated to unit medical staff or when required by military healthcare providers.

5.5 HPP Specialist services are only available for military members, with priority of access given to Instructor Pilots. At 114 FS/173 OSS/173 OG Commander's discretion on a case- by-case basis, in coordination with HPP Specialists, limited access to HPP Specialist services may be granted to non-rated 173 FW (ORANG) personnel. At no point will non- rated utilization of HPP services negatively impact rated operators' access to HPP services. Any data collected regarding injury trending and related metrics of pilots will be separated from data collection and reporting on 173 FW rated members. The contractor will be given a list of individuals authorized care under this program.

5.6 "Human Performance" and "Injury Trending" Metrics. NLT the last business day of each month, the contractor shall produce an "Injury Trending" metrics written report to include but not limited to: injuries within the 173 FW pilot populace, age of injury types, origin of injury, types of injuries, deployed vs. non- deployed injuries, cost analysis of injury rehabilitation sessions, comparative billing of each injury rehabilitation session, cancellation/no-show rates, injuries which require surgery, deployed injuries, and trends of injuries over periods of time. "Human Performance" metrics shall be gathered bi-yearly (NLT 31 March & 30 September) to assess Fighter Pilots compliance with the human performance optimization program. The factors for the "Human Performance" metrics will be low back strength, measured at varying weights and angles. However, these metrics may be adjusted with concurrence of the contractor and Government.

5.7 Contractor Manpower Reporting Application (CMRA): The contractor shall report ALL contractor labor hours (including subcontractor labor hours) required for performance of services provided under this contract for both ARMY and AIR FORCE collection site. The contractor is required to completely fill in all required data fields using the following web ad-dress: <http://www.ecmra.mil/>. Reporting inputs will be for the labor executed during the period of performance during each Government fiscal year (FY), which runs October 1 through September 30. While inputs may be reported any time during the FY, all data shall be reported no later than October 31 of each calendar year. Contractors may direct questions to the help desk at <http://www.ecmra.mil>.

6.0 Applicable Publications: Publications applicable to this PWS are listed below:

Publication (Chapter/Page)	Date of Publication	Mandatory or Advisory	Website
AFI 41-210, TRICARE OPERATIONS AND PATIENT ADMINISTRATION FUNCTIONS	06 Jun 2012	Mandatory	http://www.e-publishing.af.mil/
AFI31-501, PERSONNEL SECURITY PROGRAM MANAGEMENT	27 Jan 2005	Mandatory	http://www.e-publishing.af.mil/

Technical Exhibit 1 - Service Delivery Summary

High level Objective	Task	Standard	Acceptable Quality Levels	Method of Inspection
Primary injury rehabilitation	<p>5.</p> <p>5.1</p> <p>5.1.2</p> <p>5.1.2.1</p> <p>5.1.3</p> <p>5.1.4</p> <p>5.1.5</p> <p>5.1.6</p>	<ul style="list-style-type: none"> • Contractor performed initial assessment of current and new incoming 173 FW members. • Evaluate and provide rehabilitation to all injured personnel who request services of HPP Specialist(s). Communicate with referring provider, unit medical staff, and 173 FW management during full duration of treatment • Each patient will receive an initial appointment as soon as practical after injury and/or when referred for HPP services by member's military or civilian medical provider. • Contractor is to provide an evaluation and prognosis after initial appointment, and an expected Return to Full Duty Date (RFDD) will be established by the contractor. The source of the RFDD will be the Medical Disability Adviser or other authoritative medical reference. • The Contractor will track the status of all patients who are currently being followed in the HPP program. Provide at least a monthly status report of 1) new patients, 2) progressing patients, and 3) prolonged patients. Brief squadron-assigned military medical personnel on the status of each prolonged patient. • Provide post-surgical rehabilitative services to patients as referred by the treating physician with the concurrence of the unit medical staff • Contractor shall establish and maintain relationships with Klamath Falls/Medford/Bend, Oregon- area orthopedic physicians who accept Tri-Care medical coverage, to facilitate full-spectrum treatment, continuity of care, and coordinated case management. • Personnel choosing the HPP Specialist for secondary prevention shall receive an initial evaluation within two weeks of referral unless for reasons outside the Contractor's control 	<ul style="list-style-type: none"> • 100% of all personnel • 100% of all occurrences • 100% of the time • 100% of all occurrences. • At least once every calendar month (100%) • 100% of all occurrences. • 100% of the time • 100% of all occurrences. 	<ul style="list-style-type: none"> • Monthly record/report reviews and client feedback • Records review and client feedback • Continuous monitoring and check ins with provider(s), and unit medical staff • Review of Monthly reports and client feedback • Monthly record/report reviews • Review of Monthly reports and client feedback • Continuous monitoring and check ins with provider(s), and unit medical staff • Review of Monthly reports and client feedback
Task		Standard	Acceptable Quality	Method of Inspection

			Levels	
Injury Prevention Services	5. 2	<ul style="list-style-type: none"> Provide all forms of “primary” injury (acute and/or duty-limiting) prevention services; to include but not limited to: physical capacity as well as new member assessments, personnel health education, and nutrition advising. 	<ul style="list-style-type: none"> 100% of the time 	<ul style="list-style-type: none"> Continuous monitoring and check ins with provider(s), and unit medical staff
	5.2.1	<ul style="list-style-type: none"> At the time of initial assessment, explain to each members the current HPP capabilities and limitations, describe how care is accessed through HPP, and brief member which HPP personnel are best-qualified in the subject areas described in 5.1.2. 	<ul style="list-style-type: none"> 100% of personnel 	<ul style="list-style-type: none"> Review of Monthly reports and client feedback
Conduct, Professionalism, And qualifications	5	<ul style="list-style-type: none"> Provide qualified/licensed Physical Therapist, Athletic Trainer, and Strength and Conditioning coach. Maintain excellent communication skills, customer service skills, and telephone etiquette. Maintain highest medical ethics. 	<ul style="list-style-type: none"> 100% of the time 	<ul style="list-style-type: none"> Continuous monitoring and feedback with clients
	5.2.2	<ul style="list-style-type: none"> Advise management on provision of medical accommodation in accordance with Americans with Disabilities Act (ADA) and Equal Employment Opportunity Commission (EEOC). 	<ul style="list-style-type: none"> 100% of the time 	<ul style="list-style-type: none"> Continuous monitoring and feedback with clients, medical staff, and 3rd party providers
	5.2.3	<ul style="list-style-type: none"> Initiate and maintain medical records in accordance with AFI 41-210 “Patient Administration Functions” and AFI 41-211 “Management of Medical Information Services 	<ul style="list-style-type: none"> 100% of the time 	<ul style="list-style-type: none"> Review of Monthly reports
	5.2.4	<ul style="list-style-type: none"> The Contractor is responsible for managing patient appointment schedules, managing individual HPP Specialist work schedules, and reporting all patients who fail to attend their scheduled appointments 	<ul style="list-style-type: none"> 100% of the time 	<ul style="list-style-type: none"> Continuous monitoring and monthly review of reports
	5.3	<ul style="list-style-type: none"> The Contractor is responsible for the treatment and preventative services of spinal injuries, when medically appropriate, utilizing MedX™ equipment or equal to include: Medical Lumbar, Medical Cervical, Exercise Rotary Torso, and Exercise Stretch. 	<ul style="list-style-type: none"> 100% of the time 	<ul style="list-style-type: none"> Continuous monitoring and monthly review of reports
	5.4	<ul style="list-style-type: none"> Personnel on staff have verifiable past experience in utilizing AHLTA and CHCS for patient charting. Staff will chart all members’ treatment and progress appropriately. At a minimum, chart notes in a clinically acceptable format will be provided to unit medical staff when created or updated, and when requested by unit medical staff or military healthcare providers. 	<ul style="list-style-type: none"> No deviations 	<ul style="list-style-type: none"> Initial assessment of staff past experience and continuous monitoring of chart notes

			Levels	
Conduct, Professionalism, And qualifications	<p>5.5</p> <ul style="list-style-type: none"> • HPP Specialist services are only available for military members, Unit Leadership/Staff and Combat Mission Support personnel. Allowable exceptions, as defined in contract's Performance Work Statement section 5.5, will be documented by Contractor and COR. <p>5.6</p> <ul style="list-style-type: none"> • NLT the last business day of each month, the contractor shall produce an "Injury Trending" metrics written report to include but not limited to: injuries within the 173 FW pilot populace, age of injury types, origin of injury, types of injuries, deployed vs. non- deployed injuries, cost analysis of injury rehabilitation sessions, comparative billing of each injury rehabilitation session, cancellation/no-show rates, injuries which require surgery, deployed injuries, and trends of injuries over periods of time. <p>5.7</p> <ul style="list-style-type: none"> • The contractor shall report ALL contractor labor hours (including subcontractor labor hours) required for performance of services provided under this contract for both ARMY and AIR FORCE collection site. The contractor is required to completely fill in all required data fields using the following web ad-dress: http://www.ecmra.mil/. 	<ul style="list-style-type: none"> • 100% of the time • 100% of the time • 100% of the time 	<ul style="list-style-type: none"> • Continuous monitoring and feedback with clients • Continuous monitoring and feedback with clients, medical staff, and 3rd party providers • Review of Monthly reports 	

TECHNICAL EXHIBIT 2

Deliverables Schedule

PWS Reference / Deliverable Title	Frequency	Number of Copies	Medium/Format	Submit To
5.1.3 Patient Status Report	Provide by last business day of every month	1	Electronic Submission	COR
5.6 "Human Performance" and "Injury Trending" Metrics	NLT 31 March & 30 September	1	Electronic Submission	COR
1.4.4.10 AT Level 1 Awareness Training Certificates	Provide within 15 calendar days after employee completes training.	1	Electronic Submission	COR
1.4.10 Identification Media	Return within 14 days of employee's departure from contract performance.	Original(s)	Hard Copy	KO
1.4.4.12 OPSEC Training Certificates	Provide within 15 calendar days after employee completes training.	1	Electronic Submission	COR