



PERFORMANCE WORK STATEMENT

Ground Ambulance Services
United States Air Force Academy
Colorado Springs, Colorado

Solicitation Number: HT940723Q0001
Date: 30 May 2023

PART 1

1.0. GENERAL INFORMATION

1.1. This is a non-personal services contract to provide Ground Ambulance Services at the United States Air Force Academy in Colorado Springs, Colorado (CO).

1.2. Introduction: The Contractor shall provide all personnel, equipment, supplies, facilities, transportation, tools, materials, supervision, and other items and non-personal services necessary to perform Ground Ambulance Services as defined in this Performance Work Statement (PWS) except for those items specified as Government-furnished property and services. The Contractor shall perform to the standards in this PWS.

1.3. Background: The United States Air Force Academy (USAFA) requires full emergency patient transport services to include, but not limited to, the USAFA Flight Line, Cadet Area, Community Center, Jack's Valley, Pine Valley housing area, Douglass Valley housing area, and the I-25 Corridor bordering the base (I-25 North and Southbound lanes between mile markers 150-157). This emergency patient transport service shall consist of a minimum of three (3) dedicated ambulances permanently positioned on USAFA. A static map of the required service area is included as Technical Exhibit (TE) 3 of this PWS.

1.4. Objectives: The purpose of this contract is to provide cost effective, efficient, and expeditious transfer of patients (to include in-hospital pick-up and delivery) services. Specific tasks are described in Part 5 of this PWS.

1.5. Scope: The Contractor shall furnish 24-hour ground ambulance, Emergency Medical Technician (EMT) and paramedic services. The Contractor shall establish and maintain a system to ensure that backup ambulances and related emergency support is provided in the event of simultaneous responses, equipment failures, or other unforeseen circumstances. The Contractor shall always be available to provide the required services.

1.6. Period of Performance (PoP): The period of performance shall be for a thirty (30) day phase-in period, an eleven (11) month base period, and two (2) one-year option periods thereafter.

1.6.1. Phase-in. During the Phase-in period, the Contractor shall prepare to assume full responsibility for all areas of operation in accordance with the terms and conditions of this contract. The Contractor shall have all personnel on board by the end of the thirty (30) calendar day Phase-in period. During the Phase-in period, the Contractor shall become familiar with performance requirements in order to commence full performance of services on the start of the base period of performance. Phase-in activities include, but are not limited to, the following:

- The Contractor shall obtain base access for its employees and complete any specific government training during the Phase-in period;

- The Contractor shall obtain the insurance required by FAR clause 52.228-5 no later than the end of the Phase-in period;
- The Contractor shall have Key Personnel identified in PWS paragraph 1.13 on-board during the entire Phase-in period.

1.6.2. Phase-out. Prior to the completion of this contract, an observation period may occur, at which time team management personnel of the incoming Contractor may observe operations. This will allow for orderly turnover of facilities, equipment, and records and will help to ensure continuity of services. The outgoing Contractor is ultimately responsible for performing full services in accordance with the contract, during this period, and shall not defer any requirements for the purpose of avoiding responsibility or of transferring such responsibility to the succeeding Contractor. The outgoing contractor shall fully cooperate with the succeeding contractor and the Government, so as not to interfere with their work or duties.

1.7. Administrative Specifications

1.7.1. Place of performance: The required service area covers all areas designated USAFA including USAFA flight line, cadet area, community center, Jacks Valley (3,300-acre training complex, the required terrain use for these services can be accessed with normal road capable ambulance unit capabilities), Pine Valley housing area, Douglass Valley housing area and I-25 Corridor bordering the base (I-25 North and South between mile markers’ 150-157). All covered locations will be referred to as USAFA in this PWS.

1.7.2. Recognized Federal holidays: The Contractor shall perform services on all days of the year including federal holidays and any other days affecting operational or open status of USAFA. This includes but is not limited to the following federal holiday observances:

- | | |
|-----------------------------------|------------------|
| New Year’s Day | Labor Day |
| Martin Luther King Jr.’s Birthday | Columbus Day |
| President’s Day | Veteran’s Day |
| Memorial Day | Thanksgiving Day |
| Juneteenth Day | Christmas Day |
| Independence Day | |

NOTE: Any of the above holidays falling on a Saturday will be observed on the preceding Friday; holidays falling on a Sunday will be observed on the following Monday. Any holidays that are declared by Presidential Executive Order shall be observed in the same manner as the holidays listed above.

1.7.3. Hours of Operation:

1.7.3.1. Hours of operation: The Contractor shall provide services 24 hours per day, 365 days per year including all holidays. Section 5 of this PWS contains details regarding each of the service areas and variations in operations.

1.7.3.2. Performance of services during crisis declared by the President/Secretary of Defense/USAFA Base Commander. The Contractor shall perform services during a crisis or

emergency per the contractual requirements on a modified schedule provided by the Contracting Officer (CO). The Contractor shall provide, to the CO and Contracting Officer's Representative (COR), a list of employees performing duties during the crises to include name, address and phone number. All services identified in the PWS shall continue during a crisis unless otherwise directed by the CO.

1.8. Contractor Travel: There is no travel reimbursement authorized under this contract.

1.9. Tricare Reimbursement and Non-Tricare Reimbursement

1.9.1. For TRICARE Prime or TRICARE Select beneficiaries, the Contractor will be reimbursed by the Managed Care Support Contractor in accordance with the TRICARE Reimbursement Manual. If the Contractor does not obtain full reimbursement or collects less than the billed amount, the Contractor shall NOT balance bill any TRICARE Prime or Select beneficiary for the balance due, no exceptions. In these circumstances, the Contractor shall contact the TRICARE Managed Care Support contractor for resolution. If the TRICARE Managed Care Support contractor cannot resolve the issue, the Contractor shall contact the 10th Medical Group Tricare Operations and Patient Administration (TOPA) Flight (719-333-5752/5672/5856/7978) and coordinate with the Contracting Officer's Representative (COR).

1.9.2. For TRICARE Plus beneficiaries, the Contractor will be reimbursed up to the CHAMPUS Maximum Allowable by Wisconsin Physician Services (WPS) P.O. Box 77028 Madison, WI 53707-7028. If the Contractor does not obtain full reimbursement or collects less than the billed amount from WPS, the Contractor shall NOT balance bill any TRICARE Plus beneficiary for the balance due, no exceptions. In these circumstances, the Contractor shall contact WPS billing for resolution. If WPS cannot resolve the issue, the Contractor shall contact the 10th Medical Group Tricare Operations and Patient Administration (TOPA) Flight (719-333-5752/5672/5856/7978) and coordinate with the COR.

1.9.3. For non-TRICARE beneficiaries, the Contractor shall seek reimbursement through its normal billing procedures such as billing private insurance, Medicare, or the individual patient.

1.9.4. The Contractor's failure to obtain reimbursement, or collection of less than the billed amount, will not financially obligate the 10th Medical Group, the United States Air Force, Defense Health Agency or the United States Government.

1.9.5. The Contractor shall seek the appropriate reimbursement for the type of ambulance services provided. If only Basic Life Support (BLS) service is provided, the Contractor shall bill for a BLS, not Advanced Life Support (ALS) response. If the Contractor responds to an emergency and does not treat any patients, then the Contractor shall not bill. The Contractor shall not send and bill for wheelchair accessible ambulances unless medically indicated.

1.9.6. The Contractor shall establish an agreement with the TRICARE Managed Care Support contractor as a participating, network provider no later than the end of the Phase-in period.

1.10. Other Direct Costs (ODC): Not Applicable

1.11. Quality

1.11.1 Quality Control (QC): The Contractor shall develop and maintain an effective QC program to ensure services are performed in accordance with this PWS. The Contractor shall develop and implement procedures to identify, prevent, and ensure nonrecurrence of defective services. The Contractor shall develop a Quality Control Plan (QCP) to address risk management issues and detail the Contractor's established QC processes that are in place to evaluate the standard of care. The Contractor's QCP shall be delivered to the CO and COR no later than 10 days after the beginning of the Phase-in period. Changes/updates to QCP shall be submitted to the CO no later than five (5) days after changes/updates. The initial QCP and any changes are subject to review and written acceptance by the CO.

1.11.2 Quality Assurance (QA): The Government will evaluate the Contractor's performance under this contract in accordance with a Quality Assurance Surveillance Plan (QASP). This plan provides a systematic method for the Government to evaluate performance and 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.

1.12. Contractor Personnel

1.12.1. CAC Requirements: For all contractor personnel who will work in Government facilities, the Contractor shall provide the Government all the required information per the common access card (CAC) request process. A CAC is the standard identification for eligible DoD contractor personnel. The Contractor shall return all CACs to the COR upon the departure of the contractor personnel.

1.12.2. Physical Security: The Contractor shall be responsible for safeguarding all Government equipment, information and property provided for contractor use. At the close of each work period, Government facilities, equipment, and materials shall be secured.

1.12.3. Compliance Items

1.12.3.1. Occupational Safety and Health: The Contractor shall be solely responsible for compliance with Occupational Safety and Health Act (OSHA) (Public Law 91-596) and the resulting standards, OSHA standard 29 CFR 1910, 1926, and the protection of their employees. The Contractor shall be responsible for all federal, state, and local regulations ensuring that all safety requirements are met.

1.12.3.2. Conflict of Interest: The Contractor shall not employ any person who is an employee of the US Government if employing that person would create a conflict of interest or interfere with the performance of their Government position. Additionally, the Contractor shall not employ any person who is an employee of the Department of the Air Force or Defense Health Agency, either military or civilian, unless such person has received approval according to DoDD 5500.7 Standards of Conduct.

1.12.3.3. Privacy and Health Insurance Portability and Accountability Act: The Contractor shall comply with the provisions of the Privacy Act of 1974 and the Health Insurance Portability and Accountability Act (HIPAA) of 1996 to protect personal health information that the Contractor may encounter while completing the tasks associated with this contract.

The Contractor shall ensure that it does not use or disclose Protected Health Information (PHI):

- (PHI) or Personally Identifiable Information (PII) received in any way that will remove or transfer the PHI/PII from a jurisdiction is subject to the laws of the United States. The Contractor shall not release Government data without approval by the CO or COR.
- The Contractor shall ensure that all electronic transactions comply with HIPAA rules and regulations.
- Pursuant to FAR Part 24, the requirements of the Privacy Act (5 U.S.C. 552a) and the Department of Defense Privacy Program (DoD 5400.11-R) are applicable to this contract and the systems of records operated and maintained by the Contractor on behalf of DHA and USAFA.
- In the event the Contractor receives a Freedom of Information Act (FOIA) request, the Contractor shall return it to the requestor for submission to the DHA Freedom of Information Service Center at the following address DHA Freedom of Information Service Center, 7700 Arlington Boulevard, Suite 5101, Falls Church, Virginia 22042-5101. The best method to submit a FOIA Request to DHA is online via the National FOIA Portal at www.FOIA.gov Goes to FOIA website. Click “Start Request”, then type “Defense Health Agency” into the search box. For more information go to <https://www.health.mil/About-MHS/OASDHA/Defense-Health-Agency/Administration-and-Management/FOIA>

1.12.3.4. Controlled Unclassified Information (CUI): If the Contractor determines that unauthorized personnel have accessed CUI, the contract manager shall immediately notify the COR and fully cooperate with any investigation. The Contractor shall comply with DoD Manual 5400.07 Freedom of Information Act (FOIA) Program, 4.1., and DODI 5200.48, *Controlled Unclassified Information*. These instructions and manuals establish policy and procedures for the disclosure of records to the public and for marking, handling, transmitting, and safeguarding CUI material.

1.12.3.5. The Contractor shall comply with existing Colorado Department of Public Health and Environment, Health Facilities and Emergency Medical Services Division, Code of Colorado Regulations (CCR), 6 CCR 1015-3, State Board of Health, Rules Pertaining to Emergency Medical Services and future amendments thereto, and current and future emergency medical service rules, regulations, and directives published for El Paso County, Colorado.

1.13. Key Personnel (Contractor): The following personnel are considered Key Personnel for this contract:

- Contract Manager
- Medical Director

The Contractor shall provide a Contract Manager who shall be responsible for the performance of the work. The name of this person and an alternate(s) who shall act for the Contract Manager when the manager is absent shall be designated in writing to the CO and COR no later than 5 days after the beginning of the Phase-in period.

The Contract Manager and alternate shall have full authority to act for the Contractor on all contract matters relating to daily operation of this contract and shall be available during normal business hours (0800 -1700 hours) and within one hour (via cell phone) during all other hours.

The Contractor shall also provide a Medical Director in accordance with 6 CCR 1015-3. The Medical Director shall be a licensed physician in good standing. The Contractor shall provide the name of this person, in writing, to the CO and COR no later than 5 days after the beginning of the Phase-in period.

The Contractor shall provide the CO and COR notice of change in staffing for any Key Personnel no later than 2 business days after the change occurs.

1.14. Reporting: Patient information shall be treated as privileged information. Lists and/or names of patients shall not be disclosed to or revealed in any manner for any use outside the MTF without prior written permission by the MTF Director. All patient information shall be handled in accordance with all applicable HIPPA regulations and guidelines. The Contractor shall provide reasonable access to information related to transports to the MTF within 24 hours.

1.14.1 Run Report. The Contractor shall prepare and submit to the COR and 10 MDG Risk Manager, documentation of the ambulance response (Run Report) twice a month, unless requested by the Functional Service Manager (FSM), Risk Manager, or COR. The Contractor shall submit the Run Report no later than the closest business date to (but not exceeding) the 15th day of each month and the closest business date to (but not exceeding) the last business day of each month. The report shall be legible, accurate, thorough, and must contain a signature of an ambulance crewmember.

1.14.2. Incident/Mishap Reporting: In the event of a safety incident/mishap, the Contractor shall take reasonable and prudent action to establish control of the scene, prevent further damage to persons or property, and preserve evidence until released by the investigative authority. The Contractor shall immediately report the incident to the COR and the USAFA Safety Office. If the Government elects to investigate, the Contractor shall cooperate fully and assist Government personnel until completed. An incident/mishap report shall be submitted to the CO and COR no later than two (2) days after the event.

1.14.3. Patient Care Report (PCR): No later than the last day of each month, the Contractor shall provide the COR with a PCR. The report shall be accomplished according to relevant HIPAA guidelines and IAW Air Force Instruction 91-204, paragraph 1.14, Safety Investigations and Reports. This information shall include, but is not limited to: Date, Response time, type of run (BLS or ALS), available patient information [full name, military (last 4 of SSN) or civilian, patient condition, address responded to, the name of the hospital transported to] and an

explanation of any exceptions to response time required. All patient refusals shall be documented to the same level of information described within this paragraph.

1.14.4. Emergency: In the event of an emergency, the Police, Medical and Fire departments can be reached by calling 911. The caller will reach El Paso County dispatcher and shall identify that they are located on the United States Air Force Academy.

1.14.4.1. No later than the last day of the Phase-in period, the Contractor shall provide, to the Chief of the Fire Department, a written plan detailing the Contractor's response to a mass casualty event. In the event of a mass casualty, the Contractor shall coordinate with and support requests from the Incident Commander, USAFA Fire, 10 CE.

1.15. Government's COR: The COR monitors all technical aspects of the contract and assists in contract administration. The COR is authorized to perform the following functions:

- Ensure that the Contractor performs the technical requirements of the contract; perform inspections necessary in connection with contract performance;
- Maintain written and oral communications with the Contractor concerning technical aspects of the contract; issue written interpretations of technical requirements;
- Monitor Contractor's performance and notify both the CO and Contractor of any deficiencies; and
- Coordinate availability of Government furnished property; and provide site entry of contractor personnel.

The COR is not authorized to change any of the terms and conditions of this contract.

1.15.1. Notice Regarding Contractor Support: DHA contractor support may provide administrative support during this acquisition for pre-award and post-award actions. Contractor support personnel will not be voting members of any source selection team, nor will they perform contracting officer duties.

1.15.2. Inspection: COR will inspect the services provided. The COR will be appointed by the CO with the authority to monitor contract performance and to inspect and accept services. The Contractor will receive a copy of the official COR appointment.

1.15.3. Post Award Meeting and Progress Meetings: The Contractor shall attend any post award conference convened by the contracting activity or contract administration office in accordance with FAR Subpart 42.5. The CO, COR, and other Government personnel, as appropriate, may meet periodically with the Contractor to review the Contractor's performance. At these meetings the CO or COR will apprise the Contractor of how the Government views the Contractor's performance and the Contractor will apprise the Government of problems, if any, being experienced. Appropriate action shall be taken to resolve outstanding issues. These meetings shall be at no additional cost to the Government.

1.15.4. Performance Evaluation Meetings. The CO may require the Contractor to meet with the CO, contract specialist, COR and other Government personnel as often as deemed necessary

to discuss contract performance. The Contractor may request a meeting with the CO at any time during the term of this contract. All formal performance evaluation meetings will be recorded in writing by the Government and shall be signed by the Contractor's representative. Meeting minutes will be filed in the official contract file. Should the Contractor not concur with the minutes, such non-concurrence shall be provided in writing to the CO and COR no later than ten (10) days after receipt of the minutes.

1.16. Contractor Identification

1.16.1. All contractor personnel shall wear a Government-issued badge at all times to identify themselves as a contractor employee. Contractor employees shall identify themselves as being a contractor when attending meetings, answering Government telephones, and working in other situations where their contractor status is not obvious to third parties (e.g., clients, vendors, customers, public contacts, etc.) to avoid creating an impression that they are Government officials.

1.16.2. Contractor personnel may be required to attend meetings or otherwise communicate with Government and/or other contract representatives to meet the requirements of this contract, to include quarterly EMS Working Group meetings at the 10th MDG. Contractor personnel shall make their contractor status known during introductions.

1.16.3. Contractor personnel, while performing in a contractor capacity, are prohibited from using their retired or reserve component military rank or title in any written or verbal communications associated with the contracts in which they provide services.

1.17. Personnel Security

1.17.1. The Contractor shall comply with DoD Manual (DoDM) 6025.18, *Implementation of the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule Compliance in DoD Health Care Programs*, dated March 13, 2019, and Department of Defense Instruction (DoDI) 6025.18, *HIPAA Privacy Rule Compliance in DoD Health Care Programs*, dated March 13, 2019. Contractor responsibilities for ensuring personnel security include, but are not limited to, meeting the following requirements: Initiate, maintain, and document personnel security investigations appropriate to the individual's responsibilities and required access to Controlled Unclassified Information (CUI).

PART 2

2.0. DEFINITIONS, ACRONYMS, AND APPLICABLE PUBLICATIONS AND INSTRUCTIONS

2.1. Definitions:

2.1.1. Contracting Officer (CO): A person with the authority to enter into, administer, and/or terminate contracts and make related determinations and findings.

2.1.2. Contracting Officer's Representative (COR): An individual, including a contracting officer's technical representative (COTR), designated and authorized in writing by the CO to perform specific technical or administrative functions. This individual does NOT have authority to change the terms and conditions of the contract.

2.1.3. Nonpersonal Services Contract: a contract under which the personnel rendering the services are not subject, either by the contract's terms or by the manner of its administration, to the supervision and control usually prevailing in relationships between the Government and its employees.

PART 3

3.0. GOVERNMENT FURNISHED SERVICES, FACILITIES, EQUIPMENT, AND INFORMATION

The 10th MDG has assessed the need for Government Furnished Services, Facilities, Equipment, and Information and determined:

3.1. Services: The Government:

Will **NOT** provide Government Furnished Services in support of this contract. As a result, this paragraph is Not Applicable.

WILL provide Government Furnished Services required in support of this contract. These Services are described below:

The 306th Operations Support Squadron (OSS) will provide a train-the-trainer course for Special Flight Line Driving to a contract representative within 15 days of the start the Phase-in period. This course will allow the Contractor to train their employees. The Contractor shall schedule this training through 306oss.airfieldmanagement@us.af.mil.

3.2. Facilities: The Government:

Will **NOT** provide Facilities in support of this contract. As a result, this paragraph is Not Applicable.

WILL provide Facilities in support of this contract. The Government will provide the Contractor with at least two individual facilities/structures for the use of housing ambulances and ambulance crews. The Government will provide heat, electricity, water, wastewater service and trash disposal service to these individual structures.

Facilities available to the Contractor are as follows:

- Cadet quarters located at 2360 Vandenberg Dr, Room 1C8
- Flight Line quarters located at 9201 Talon Dr (no room number)

3.3. Equipment: The Government:

Will **NOT** provide Equipment in support of this contract. As a result, this paragraph is Not Applicable.

WILL provide Equipment in support of this contract. The Government provided Equipment is described below:

3.4. Information: The Government:

Will **NOT** provide Information in support of this contract. As a result, this paragraph is Not Applicable.

IS providing Information in support of this contract. The Government-provided Information is described below:

The Government will provide the Contractor copies of the USAFA's most recent grid-map and DAFI 91-204, *Safety Investigations and Reports* during the Phase-in period.

PART 4

4.0. CONTRACTOR FURNISHED ITEMS AND SERVICES

4.1. Services: The Contractor:

Will **NOT** provide Contractor Furnished Services in support of this contract/task order. As a result, this paragraph is Not Applicable.

WILL provide Contractor Furnished Services required in support of this contract. These Services are described below:

The Contractor shall have a staff of State of Colorado certified Paramedics to receive radio command medical orders from the USAFA Fire Department, thereby being able to render life-saving techniques to patients. The sole purpose of this contract is to provide cost effective, efficient, and expeditious transfer of 10 MDG patients.

4.1.1. Emergency Medical Response and Patient Transport: The Contractor shall provide ambulance and EMT/paramedic resources in order to respond to emergencies as requested by the USAFA Fire Department, with whom constant collaboration is imperative to mission success. The Contractor shall typically transfer patients to the nearest appropriate civilian medical facility. Patients with minor acute injuries and illnesses shall be transported to Evans Army Community Hospital (EACH) on Ft. Carson in accordance with established protocols and in consultation with an attending provider at the hospital, if such patient has the proper eligibility to be treated at EACH. Non TRICARE beneficiaries shall be transferred to the nearest appropriate civilian medical facility.

4.1.2. The Contractor shall travel to response sites in the required medical response vehicle within the response times required by this PWS. The Contractor shall respond to requests from dispatch and shall provide the full range of EMT, paramedic, and ambulance services provided in the local community to include local protocols or standing orders and staffing minimums in accordance with the most current State of Colorado and National Registry of Emergency Medical Technicians (NREMT).

4.1.3. The Contractor shall provide medical care and treatment appropriate to each patient's condition. The Contractor shall respect and maintain the basic rights of patients, demonstrating concern for personal dignity and human relationships. The Contractor will be notified if an EMT or EMT-P receives complaints validated by the COR and Chief of the Medical Staff.

4.1.4. The Contractor shall provide in-field care and emergency medical flight line care with capability to address decompression sickness and injuries related to in-flight emergencies, to include ALS, in accordance with protocols developed by the Contractor's Medical Director. The USAFA flight surgeon on call shall be notified of ambulance transport of any in-flight emergency patient as soon as medically possible.

PART 5

5.0. SPECIFIC TASKS

5.1. Minimum Requirements for Coverage of Service:

The Contractor shall provide a minimum of three (3) dedicated ambulances at USAFA covering the following areas:

- Entire North area of USAFA (referred to as the North Cadet Area). The ambulance must be physically located in the North Cadet Area.
- Entire Flight Line (referred to as Flight Line area). The ambulance must be physically located in the Flight Line area.
- Roving area covering the Southern and Central Areas (referred to as Roving area).

5.2. Other Requirements for Standard Coverage of Service:

- The Contractor shall provide services during USAFA base exercises, special events, sports/athletic events, specialized training, and in-flight emergencies (AFI 11-418 chapter 4).
- The Contractor shall provide all services in accordance with current State of Colorado regulations and protocols. The Contractor shall abide by any changes to the State of Colorado regulations and protocols that occur during the term of this contract. This includes local protocols, standing orders and minimum requirements of staffing.
- The Contractor shall provide labor, management, supervision, vehicles, supplies, equipment and transportation according to all laws and regulations of the State of Colorado.
- The Contractor shall meet all professional standards for accreditation set forth by either the state of Colorado or El Paso County.

5.3. Emergency Response and Patient Transport Service: In addition to the locations identified in the sections below, ambulance services shall be provided for the I-25 corridor, North and Southbound lanes between mile markers 150-157, as this section of interstate is within USAFA's Area of Responsibility (AOR). Emergency responses provided for the I-25 corridor, off base, often result in civilian transport.

5.3.1. Response to Emergencies Requested by the USAFA Fire Department: Responses to emergencies from the USAFA Fire Department shall be transferred to the nearest appropriate civilian medical facility. Otherwise, patients with minor acute injuries and illnesses shall be transported to Evans Army Community Hospital (EACH) on Ft. Carson, when patients qualify for care at EACH in accordance with established protocols and in consultation with an attending provider at the hospital. Non TRICARE beneficiaries shall be transferred to the nearest appropriate civilian medical facility.

5.3.2. Response to North, South, and Central Area:

- Responses to the North and South Area shall include ambulance services and patient transport to the nearest appropriate civilian medical facility. The North and South Area services shall be performed 24 hours per day 365 days per year including all holidays.
- One ambulance shall be physically located in or near the cadet area to cover the entire North area of USAFA. When not in use, the ambulance shall remain physically located in or near Vandenberg Hall, inside the cadet campus.
- A second ambulance shall be roving USAFA, to include the Southern and Central areas. When not in use, the ambulance may be used as coverage in the event another ambulance is transporting a patient.

5.3.3. Response to Flight Line Area:

- A third ambulance shall be physically located on the flight line to cover all Flight Line related incidents
- Responses to the Flight Line Area shall include ambulance services and patient transport to the nearest appropriate civilian medical facility.
- The Flight Line services shall only be performed during the scheduled flying hours. Flying hours are regulary scheduled Monday through Saturday. On occasion, the flight line will be open on Sundays, and the Contractor shall perform services during those times. Flight hours can vary, but are typically during daylight hours. The Contractor is responsible for coordinating with USAFA to determine the exact flying schedule during the performance of this contract.
- When the Contractor is not performing the Flight Line services, the Contractor shall perform emergency ambulance services throughout USAFA.
- The ambulance servicing the Flight Line shall remain physically located at 9201 Talon Dr while there is an active airfield, except when providing flight line area responses.

5.3.4. 10th Air Base Wing, USAFA and MTF Exercise, Special Events, Sports Events, and Specialized Training.

The Contractor shall participate in 10th Air Base Wing, USAFA and MTF training, exercises, and special events to include but not limited to sporting/athletic events, cadet graduation, Basic Cadet Training, MTF training day (as needed), and other related events. The Contractor shall provide approximately 780 hours of ambulance stand-by coverage per year to cover, but not limited to, the aforementioned activities. This coverage is in addition to the normal services specified in PWS paragraphs 5.3.2 and 5.3.3. The Government will notify the Contractor of the number of dedicated ambulances required for each event. This amount is subject to change each year. Any change in the maximum number of stand-by hours required each year will be executed via a bilateral modification to the contract. The COR will provide the Contractor no less than 48 hours advance notice prior to the exercise/event/training date. However, the Contractor may occasionally be required to respond to short notice events due to unique situations on the installation. Specific Contractor responsibilities include:

- Participating in advance and post exercise meetings.
- Responding with EMTs to exercise sites and performing simulated duties.
- Coordinating all activities during exercises with the Medical On-Scene Commander and Incident Commander.
- Providing ambulance stand-by during live-structural fire training and aerial flight operations.
- Providing one (1) ambulance to stand-by during sporting/athletic events and special events. Periodically, up to four (4) ambulances may be required for these types of events. The ambulance requirements set forth in this paragraph are in addition to the ambulance services identified in PWS paragraphs 5.3.2 and 5.3.3.

5.3.5. Other Emergency Response Services

The Government will provide the Contractor with notification of other required Emergency Response Services outside of PWS paragraphs 5.3.1, 5.3.2., and 5.3.3. no less than 24 hours prior to the service need.

5.3.6. Continuity of Services and Response Times

5.3.6.1. The Contractor shall establish and maintain a system to ensure that backup ambulances and related emergency support is provided in the event of simultaneous responses, equipment failures, or other unforeseen circumstances. Services must always be available. This “Response System” established by the Contractor shall be submitted, in writing, to the CO and COR no later than fifteen (15) days after the start of the Phase-in period.

5.3.6.1.1. The calculation of response time begins from the time of receipt of the call from dispatcher to the time of arrival at the emergency location identified by dispatch. Response time for all emergent requests for service on USAFA, to include BLS and ALS shall be within twelve (12) minutes. Response time for all emergent requests for service on the I-25 corridor shall be within fourteen (14) minutes. This requirement does not apply to non-emergent or transfer calls. Non-emergent calls are defined as non life threatening illness/injury(i.e. calls that wouldn’t require ALS). Transfer calls or Inter-facility transfers (IFT) are defined as the transportation of patients from one facility to another, i.g. from 10 MDG to EACH. The Contractor shall comply with Federal and State occupational safety and health standards for its employees. For detailed response time requirements, See DoDI 6055.06 Section 7.2. Table 1.

5.4. Communication: The Contract Manager and alternate(s) shall be able to read, write, speak, and understand English clearly and effectively enough to communicate with patients and healthcare staff. The Contract Manager shall be available to respond to the COR and CO regarding any contract issues or questions within 10 minutes of contact between 0800 – 1700 hours, Monday through Friday (excluding Federal Holidays), and within one hour (via pager or

cell phone access) during all other hours. The senior vehicle crewmember shall also be available to the COR or CO if questions arise. If questions or direction to the crew are deferred to the Contract Manager, the above response time requirements apply. The Contractor shall be responsible for ensuring contractor employees have appropriate communication equipment to include pagers or cellular telephones.

5.4.1. During a real or simulated incident, the Contractor shall operate and communicate under the Incident Command System and follow the directions of the Incident Commander. The Contractor shall also make notification to the Cadet Clinic as soon as possible, but no later than 12 hours after transporting a cadet to a local hospital. The Cadet Clinic can be reached by telephone at 719-333-5187. The notification shall include name of person, name of hospital, and medical condition. If notification is delayed due to response to another emergent call, then notification shall be made as soon as possible.

5.4.2. Maintain Radio Communications: The Contractor shall ensure they have capability to maintain radio communications on both the 400MHz system operated by the 10 CS and 800MHz system operated by the Pikes Peak Communications Network (El Paso Red). Each vehicle must have a mobile and portable 400MHz and 800MHz radio that allows for immediate voice communications with the USAFA Fire Emergency Services, the Incident Commander, and the El Paso County dispatch center.

5.4.3. Coordinate Patient Transport: The Contractor shall coordinate patient transport with local civilian and military hospitals when transporting patients from USAFA to local hospitals.

5.5. Special Qualifications, License, Certifications and Health Requirements: The following qualifications, license, certifications and health requirements must be provided to the COR no later than fifteen (15) days after the start of the Phase-in period (unless a different timeline is noted). If any personnel changes are made that require any of these licenses, certifications and Health certifications/requirements, the Contractor shall provide the COR all certifications, health certificates and license(s) no later than two (2) days after any contractor personnel change.

5.5.1. Labor Certification Requirements:

5.5.1.1. Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS): All paramedics shall be BLS and ACLS certified. The Contractor shall provide current BLS and ACLS certification for all paramedics.

5.5.1.2. Licensing or Certification: All paramedics and emergency medical technicians shall have a license issued by the State of Colorado or a certification from the National Registry of Emergency Medical Technicians (NREMT) in order to perform EMT and Paramedic services.

5.5.1.3. Special Flight Line Driving Certification: All drivers performing flight line driving services shall have the base required flight line driving certification. Special Flight Line Driving Certification for all drivers performing services under this contract shall be submitted to the COR no later than the end of the Phase-in period or within fifteen (15) days of onboarding a new

employee.

5.5.1.4. License Requirements:

5.5.1.4.1. Driver's license: All drivers operating an emergency ambulance in the State of Colorado shall possess a valid Class "C" Colorado driver's license.

5.5.2. Health Requirements:

5.5.2.1. Contractor personnel providing services under this contract shall have a pre-employment physical examination; TB testing; Measles, Mumps, Rubella (MMR) immunization; Varicella immunization; Hepatitis B immunization; Diphtheria, Tetanus, Pertussis (TDap) immunization; Influenza immunization; Polio immunization; and Tuberculin Skin Test prior to commencement of work with updates as required.

5.5.2.2. The Contractor shall submit a certification to the COR indicating personnel have completed medical evaluation, testing and all immunizations required above, no later than fifteen (15) days after the start of the Phase-in period. Certification of new employees who onboard during contract performance shall be submitted to the COR no later than five (5) days before the contractor employee starts work. This certification shall state the date on which the examination was completed, the doctor's name that performed the examination, and a statement concerning the physical health of the individual. The certification shall also contain the following statement: "(name of contract employee) is suffering from no contagious diseases to include but not limited to Tuberculosis, Hepatitis, and Sexually Transmitted Diseases."

5.5.2.3. Non-Reimbursement for Costs: All costs associated with on-boarding contractor personnel, including required examinations, testing, licenses and immunizations are the Contractor's responsibility and will not be reimbursed by the Government nor provided by the Government.

5.5.3. Personnel Records: The Contractor shall maintain files to ensure that all EMTs performing work under this contract shall have current certifications and/or documents. Upon request, the Contractor shall allow the Government access to review these documents for any EMTs performing under this contract. The Contractor shall provide copies to the CO of certifications upon request.

PART 6
TECHNICAL EXHIBIT (TE) LISTING

TE 1: Performance Requirements Summary

TE 2: Deliverables

TE 3: Static map of service area

TE 1
PERFORMANCE REQUIREMENTS SUMMARY (PRS)

The contractor service requirements are summarized into performance objectives that relate directly to mission essential items. The performance threshold briefly establishes the minimum Acceptable Quality Levels (AQLs) of service required for each requirement. These thresholds are critical to mission success. These minimums do not relieve the contractor from performing 100% of work performance outlined in the contract and PWS.

Performance Objective	PWS Reference	Acceptable Quality Level (AQL)	Method of Surveillance
# 1. Response time for all emergent requests for service on USAFA, to include BLS and ALS, shall be within twelve (12) minutes applicable maximum. Response time for all emergent requests for service on the I-25 corridor shall be within fourteen (14) minutes applicable maximum. This requirement does not apply to non-emergent or transfer calls	5.3.6.1.1	90% of emergent responses each month must meet the twelve minute maximum response time.	COR will be sent a monthly run log on the first day of the month reflecting the previous months calls and times. (Times will be validated against call log and PCRs)
# 2. The Contractor shall provide the full range of EMT, paramedic, and ambulance transport services, and provide medical care and treatment appropriate to patient's condition.	4.1.4	No more than 1 validated customer complaint per quarter*.	COR will document any valid customer complaints in monthly COR report.
# 3. The Contractor shall prepare and submit to the COR and 10 MDG Risk Manager, documentation of the ambulance response twice a month (Run Reports)	1.14.1	Reports shall be sent/received on the 15th and last day of each month. No more than one late report per month.	COR will validate PCRs monthly against Run Report to ensure all calls are accounted for.
# 4. The Contractor shall not balance bill TRICARE eligible members for any balance due, no exceptions. Unnecessary or excessive expenses denied by insurance; Contractor shall not seek further direct reimbursement from the patient or the Government.	1.9.1	100% compliance, no validated patient/customer complaints related to improper billing.	COR will document any valid customer complaints in monthly COR report

Performance Objective	PWS Reference	Acceptable Quality Level (AQL)	Method of Surveillance
#5. Contractor shall maintain files to ensure that all EMTs performing work under this contract have current certifications and/or documents.	5.5.3	100% compliance with required certifications and documents for every contractor personnel	Periodic visual inspection by COR

*A quarter is defined as the period of time between 1 Jan – 31 Mar, 1 Apr – 30 Jun, 1 Jul – 30 Sep, and 1 Oct – 31 Dec.

**TE 2
DELIVERABLES**

Deliverable	Frequency	Medium/ Format	Submit To	PWS Reference
Evidence of insurance to work on a Government installation (FAR 52.228-5)	No later than the end of the Phase-in period, and annually thereafter.	Electronic	CO	1.6.1
List of contractor employees performing during crisis	As occurs	Electronic	CO, COR	1.7.3.2
QCP	10 after start of Phase-in period and annually thereafter. If awarded an option, 10 working days after the start of each option period.	Electronic	CO, COR	1.11.1
Names of Key Personnel	5 days after start of Phase-in period.	Electronic	CO, COR	1.13
Run Report	Twice a month (15 th day and last day of month)	Electronic	COR, Risk Mgr	1.14.1
Incident/Mishap Reporting	No later than two days after the event	Electronic	CO, COR	1.14.2
Mass Casualty Plan	No later than the last day of the Phase-in period	Electronic	COR	1.14.4.1
Non-Concurrence of Performance Meeting Minutes	No later than ten days after receipt of meeting minutes	Electronic	CO, COR	1.14.7
Patient Care Report (PCR)	No later than the last day of each month	Electronic	COR	1.14.3
Response System	Not later than fifteen (15) days after the start of the Phase-in period.	Electronic	COR	5.3.6.1
Copy of BLS, ACLS, EMT, and Paramedic licenses for contractor employees	Not later than fifteen (15) days after the start of the Phase-in period.	Electronic	CO, COR	5.5.1.1 5.5.2.2
Copy of flight line driving certificate(s) for contractor employees driving flight line	Not later than the end of the Phase-in period.	Electronic	CO, COR	5.5.1.3
Certification of medical evaluation, testing, and immunization of contractor employees	Not later than fifteen (15) days after the start of the Phase-in period.	Electronic	CO, COR	5.5.2.2

TE 3 MAP OF SERVICE AREA

