

**PERFORMANCE WORK STATEMENT (PWS)
AMBULATORY SERVICES
JBSA – RANDOLPH,
TEXAS
25 June 2021**

1. DESCRIPTION OF SERVICES / GENERAL INFORMATION. The contractor shall provide full Emergency Medical Services (EMS) ground transport services, to include Advanced Life Support (ALS), 24/7 for patients requiring emergency transportation from Randolph to higher levels of care in the surrounding geographical areas. Types of vehicles used for transport will include, but are not be limited to Ambulance transportation services to other hospitals or treatment facilities shall be utilized only when deemed necessary.

JBSA-R (Joint Base San Antonio-Randolph) services many beneficiaries who transit on and off the base regularly. Response time for all emergent requests for service on JBSA-R, to include ALS shall be within twelve (12) minutes (7 minutes for first response and 12 minutes for transport unit, IAW DoDI 6055.06, Table E3.T1).

In order to reduce risk to our populace, JBSA-R requires 24 hr./7 days/wk. ALS EMS response within 12 minutes for at least 90% of all 911 calls monthly. These EMS services require at least 1x EMT and 1x Paramedic to transport patients for an estimated 300 events per year. These services must be able to triage, treat and transport. These services must be coordinated with JBSA-R Fire Department and other on-base emergency response systems, communications, and security systems. The requested EMS services must be able to response to 2x simultaneous calls. The requested EMS services must also be able to participate in JBSA-R military exercises.

JBSA-R will be able to provide space for one ambulance at the fire station and one crew, two members within the JBSA-R Fire Station if necessary as part of consideration. JBSA-R will be able to provide two mobile radios if necessary as part of consideration.

1.1. DESCRIPTION OF SERVICES. The contractor shall provide full emergency patient response services at Joint Base San Antonio, Randolph (JBSA-R). The contractor shall participate in JBSA-R base exercises. Emergent dispatch calls take precedence over base exercises. The contractor shall furnish all labor, management, supervision, vehicles, supplies, equipment, and transportation except as provided in Section 3, Incidental Furnished Property and Services. The contractor shall, at a minimum, transport patients based on injury or illness according to STRAC (Southwest Texas Regional Advisory

Council) guidelines. Performance shall comply with the requirements contained in this Performance Work Statement (PWS) and professional standards of the Department of Transportation and the National Registry of Emergency Medical Technicians (NREMT).

1.2. EMERGENCY MEDICAL RESPONSE AND PATIENT TRANSPORT

The contractor shall provide ambulance and EMT/paramedic resources, and respond to emergencies as requested by the JBSA-Randolph Emergency Communications Center (ECC) in an appropriate medical response vehicle with transport capability. Patients shall typically be transferred to the nearest appropriate medical facility.

1.2.1. Coverage: JBSA-R ambulance coverage includes services 24 hours per day 365 days per year including all holidays. This contract is the sole avenue for JBSA-R emergency patient transport. The contractor shall establish and maintain a system to ensure that backup ambulance and related emergency support is provided in the event of simultaneous responses, equipment failures, or other unforeseen circumstances. Services must always be available with surge capabilities.

1.2.1.1. Annual Service Estimates:

These EMS services require transport of patients for an estimated 300 runs per year. The EMS contractor shall be able to respond up to two (2) simultaneous calls.

1.2.1.2. Additional Support: In the event that the Government has a requirement for EMS services that exceed those stated in 1.2.1.1, the Contractor shall be responsible for providing additional support that conforms to the requirements of this PWS. The Government estimates that additional support could be up to 10% to than the estimates for para 1.2.1.1. The Government will determine when additional support is required and will indicate during dispatch. In no event shall the Contractor be allowed to bill for services that are in excess of the Government requested services.

1.2.1.3. Notification:. For transfers from Randolph Clinic, the contractor will provide written or electronic Memorandum of Transport, to be filed in the patient record. Electronic documentation may be sent to arthur.g.gonzales.civ@mail.mil.

1.2.1.3.1. Emergency Medical Services (EMS) will be via the dispatchers assigned to the JBSA Randolph Emergency Communications Center.

1.2.2. Response Time: Response time is defined as the time between the receipt of call and the time of arrival at the emergency location identified. Response time for all emergent requests for service on JBSA-R, to include ALS shall be within twelve (12) minutes (7 minutes for first response and 12 minutes for transport unit, IAW DoDI 6055.06, Table E3.T1). This requirement does not apply to non-emergent or transfer calls.

1.2.3. Patient Treatment and Care: Providing medical care and treatment appropriate to 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 is the subject of complaints validated by the Contracting Officers Representative (COR) and submitted to the Chief of the Medical Staff.

1.2.4. Flightline Care: 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 physician advisor.

1.2.5. Coordination: The contractor will coordinate patient transport with local civilian and military hospitals when transporting patients from JBSA-R to local hospitals.

1.2.6. Unavailability of Emergency Transport: If unable to meet response time as defined in paragraph 1.2.2., the contractor shall immediately, but not later than three (3) minutes of dispatch notification, contact the 559th Medical Squadron Dispatcher at Primary: (210) 292-1800 Alternate: (210) 292-7654. The government reserves the right to procure such services from another source pending full restoration of full paramedic emergency patient transport services by the contractor. The government shall only be subject to billing for a particular service at the contract price. Any late response or failure to respond will require a review by the Government to assess the contractor's ability to provide services.

1.2.7. Payment for Services: These services will be paid for by the government, the contractor shall not bill TRICARE Prime patients, under age 65. The responsibility for insurance billing (ex. Tricare or other commercial plan) and collection is the ultimate responsibility of 59th Medical Wing. The contractor shall ensure complete patient identifying information and patient's signature is on all third party billing information. The price on this contract shall cover the cost of all services required under this contract to include but not limited to standby ambulance services.

1.2.7.1. Invoicing, Billing, and Receiving: The contractor will provide to the COR the following documents for all transports on the 5th business day of each month (for the previous month):

a. Monthly Run Report: Contractor shall submit a report, on a monthly basis, that contains the following information: Date of service, and run number, time spent on the transport (time each call was received, dispatched, enroute, at scene, arrival, time patient was accepted at receiving facility), mileage in conjunction with transport and total of ambulance utilization hours. Monthly Run reports are due on the 5th business day of each month (for the previous month).

b. Services will be billed on a monthly basis at a flat-rate. These services will include response, standby, ALS. These EMS services require transport of patients for an estimated 160 to 300 runs per year.

c. DD Form 2569 patient demographics (full name, date of birth, age and gender), complete address and phone number, third party insurance and policy number, Services Provided, Patient's complete address and phone number, Third Party Insurance to include insurance company name, policy and group number. DD Form 2569 is due on the 5th business day of each month (for the previous month).

d. Memorandum of Transport (Government authorization to transport) for all transports. A Memorandum of Transfer (MOT) will not be required for emergency 911 calls.

e. Contractor shall submit invoices through the Wide Area Work Flow (WAWF) system on monthly for all services performed the previous month by the 10th day of every month. Contractor shall NOT bill to third party insurance.

1.2.8. MTF Exercises and Specialized Training: The contractor shall be responsible for participating in 559th Medical squadron, and Medical Treatment Facility (MTF) training, exercises to include the following:

- a. Participating in advance and post exercise meetings.
- b. Responding with EMTs to exercise sites and performing simulated duties.
- c. Coordinating all activities during exercises with the Randolph Emergency Control Center.
- d. Providing a written plan to the MTF for contractor's response to a mass casualty event.

1.3. QUALITY CONTROL. The contractor shall be responsible for quality control for all work accomplished during the performance of the task. The contractor shall provide and maintain a Quality Control Plan (QCP) which ensures the requirements in this PWS are met. The QCP will be considered acceptable and approved unless the contractor is notified by the Contracting Officer (CO) prior to award. The QCP shall be included in the technical proposal for evaluation and acceptance. As a minimum, the contractor shall develop quality control procedures that address the areas identified in section 2, Service Delivery Summary.

1.3.1.1 Performance Evaluation Meetings: The CO may require the contractor or representative to meet with the CO, contract administrator, COR and other government personnel as often as deemed necessary. The contractor may request a meeting with the CO when necessary. Meetings will be documented in the contract file with written minutes signed by the contractor POC and CO or contract administrator. Should the contractor not concur with the minutes, such non-concurrence shall be provided in writing to the CO within 10 work days of receipt of the minutes.

1.3.2. HOURS OF OPERATION. Contractor shall adhere to 24-hour Paramedic and emergency ambulance service vehicle and crew for patient transport at JBSA-R TX and schedule personnel to the 24-hours service.

1.3.3. HOLIDAYS OBSERVED. The Contractor shall be required to provide services on the following observed holidays:

New Year's Day (Observed 1 January)
Martin Luther King Jr's Birthday (Observed the third Monday in January)
Presidents – Day (Observed the third Monday in February)
Memorial Day (Observed the last Monday in May)
Independence Day (Observed 4 July)
Labor Day (Observed the first Monday in September)
Columbus Day (Observed the second Monday in October)
Veterans Day (Observed 11 November)
Thanksgiving Day (Observed the fourth Thursday in November)
Christmas Day (Observed 25 December)

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.

1.3.4. SECURITY REQUIREMENTS. The Contractor shall ensure personnel, information, system, facility, and international security requirements are met in accordance with DoD 5220.22-M, *National Industrial Security Program Operating Manual (NISPOM)*, and AFI 31-101, *Integrated Defense*. The contractor shall ensure all contract personnel and contractor representatives entering JBSA-R and any other military facilities abide by all security regulations and/or directives to include being subject to security checks. Any violation of installation regulations, or of state or federal statutes may result in the termination of the privilege to enter one or more military installations.

1.3.4.1. Background Investigation: DBIDS and Local Check only

1.3.4.1.1 All EMTs performing under this contract will have a State of TEXAS background check, which includes a Criminal Record Check. No individuals will be assigned to the JBSA-R site until their background check is verified as not having felony convictions. Documentation of Licensing requirements and training will be maintained by the contractor and available for inspection by the COR at any given time.

1.3.4.2. Access to Government Facilities: During performance of the contract, the contractor shall be responsible for providing information necessary for base passes for newly assigned contract personnel and for the prompt return of base passes for any contract personnel who no longer require access to JBSA-R. Upon completion or termination of the contract or expiration of the base passes, the prime contractor shall ensure all base passes issued to employees and subcontractor employees are returned to the issuing office. In the event of a lost or stolen base pass, the contractor shall ensure that the COR is notified the same day the employee reports the loss.

1.3.4.3. Contractor Identification Badges:

The contractor shall complete all necessary documents for all contractor personnel requiring access to JBSA-R. The contractor will ensure that each employee contacts Trusted Agent/COR for the 559th Medical Squadron to obtain one year base access through Defense Biometric Identification System (DBIDS). Additional instructions for applications will be sent to the e-mail address provided for the application. Prior to application approval, each individual will submit AF Form 2583 and receive a local background check.

1.3.4.4. Access to Government Systems: The Government will not allow contract personnel access to the medical network systems to perform tasks under contract. All patient information will be done on paper and turned into the MTF.

1.3.4.5. Classification: Work under this contract is UNCLASSIFIED. The contractor shall comply with all applicable DoD security regulations and procedures during the performance of this contract. The contractor shall not disclose and must safeguard computer systems and data, Privacy Act data, and Government personnel work products obtained or generated in the performance of this contract. The contractor shall comply with all applicable DoD security regulations and procedures during the performance of this contract. The contractor must safeguard and not disclose sensitive information, information protected by the Privacy Act and Health Information Portability and Accountability Act (HIPAA). The contractor shall comply with DoD Manual 5400.7, DoD Freedom of Information Act Program. The Freedom of Information Act (FOIA) sets policy and procedures for the disclosure of records to the public and for marking, handling, transmitting and safeguarding For Official Use Only (FOUO) materials.

Contract personnel shall not disclose or cause to disseminate any information concerning operations of military activities. Such action(s) could result in violation of the contract and possible legal actions. All inquiries, comments or complaints arising from any matter observed, experienced, or learned of as a result of or in connection with the performance of this contract, the resolution of which may require the dissemination of official information, shall be directed to the contracting officer representative (COR) and the contracting officer (CO). The contractor shall only conduct business with designated CORs listed as points of contact. US Government records, copies of original results and reports, verified original data, corrected data and corrected supporting final reports remain the property of the U.S Government. The contractor shall ensure compliance with OPSEC requirements including procedures to protect classified and/or sensitive, but unclassified, Government projects and/or programs. The contractor shall ensure contract personnel who perform work at JBSA-R or another Government installation comply with the OPSEC procedures of the installation.

1.3.4.6. Security Incident or Violation: The contractor shall immediately notify the Government Security Office of any potential or actual security incident(s) or violation(s) including potential or actual unauthorized disclosure(s) or compromise of classified and/or sensitive, but unclassified, information.

1.3.4.7. Building/Facility Access Control: The contractor shall establish and implement methods of making sure all access provided by the government to the contractor are not lost or misplaced and are not used by unauthorized persons. The contractor shall include procedures for immediate reporting to the COR or CO any occurrences of lost, unauthorized uses (i.e., Entering unauthorized areas of the facility), or unauthorized duplication of keys, badges or lock combinations.

1.3.4.8. Physical Security: The contractor shall comply with Force Protection Condition (FPCON) procedures, Random Antiterrorism Measures (RAMS) and local search/identification requirements.

1.3.4.9. Safeguard Government Property: The contractor shall safeguard all government property, including controlled forms, provided for contractor use. At the close of each work period, government training equipment, ground aerospace vehicles, facilities, support equipment, and other valuable materials shall be secured.

1.3.4.10. Weapons, Firearms, and Ammunition: Contractor employees are prohibited from possessing weapons, firearms, or ammunition, on themselves or within their contractor-owned vehicle or privately owned vehicle while on JBSA Installations.

1.3.4.11. Key Control and Lock Combinations: The contractor shall abide by all current JBSA-R key control and lock combination procedures. The contractor shall safeguard all keys issued by the government and ensure they are used only by authorized contractor personnel. The contractor shall ensure that its employees are not allowed government-issued keys be used by personnel other than those currently authorized. The contractor shall not duplicate keys issued. All references to keys include key cards. Keys issued to the contractor by the Government shall not be duplicated. The contractor shall develop procedures covering key control that shall be included in the Quality Control Plan. Such procedures shall include turn-in of any issued keys by

personnel who no longer require access to locked areas. The contractor shall immediately report any occurrences of lost or duplicate keys/key cards to the CO.

1.3.4.11.1. Lost Keys: The contractor will be charged for lost keys or stolen keys, re-keying of locks. Unauthorized personnel shall not be allowed entry into the locked area. Keys shall not be used to open work areas for personnel other than personnel engaged in performance of their duties, unless authorized by the Government functional area chief. Contractor staff shall use keys issued to them to secure/open areas only as directed by the COR and/or functional area chief.

1.3.4.11.1.2. Lost keys and/or locks shall be reported to the issuing party and COR immediately upon recognition of the loss. The COR shall notify the PMO of the lost key. Reimbursement shall be provided before the Government replaces lost keys or performs re-keying. The Contractor shall establish and implement methods to ensure all keys/key cards issued to the Contractor by the Government are not lost or misplaced and are not used by unauthorized persons.

1.3.4.11.2. The Contractor shall prohibit the opening of locked areas by Contractor employees to permit entrance of persons other than Contractor employees engaged in the performance of assigned work in those areas, or personnel authorized entrance by the COR and/or area functional chief.

1.3.4.12. Reporting Requirements: The contractor shall comply with AFI 71-101, Volume 1, Criminal Investigations Program. Contractor shall report to Security Forces any information or circumstances which may pose a threat to DoD or Contractor, resources, or DoD information.

1.3.4.13. Removal of Contractor: The Government, through the CO, reserves the right to require immediate removal from contract performance on the installation or any Government facility, any individual whose actions raise reasonable suspicion that patient care or services may be compromised in any way, or that pose a threat of harm to other contractor/Government personnel or self. Removal under other circumstances will be subsequent to, and at the direction of the CO only.

1.3.4.13.1. The CO will notify the Contractor if and when permanent removal is required. In the event of a disagreement between the Government and the Contractor, the decision of the CO will be final. During the period of time between the removal and the final decision of the CO, the Contractor agrees to provide backup/replacement Contractor in accordance with the terms of this contract.

1.3.4.14. Drug/Alcohol Testing: The Contractor may be required to submit to drug/alcohol testing. The Government may require temporary or permanent removal from contract performance any individual who refuses or fails testing.

1.3.4.15. Installation Access: Criminal History Check will be conducted on all prime/subcontractor employees requiring base access. The contractor shall provide the Contracting Officer and the Information Protection Office a current list of employees needing access within 10 working days after receiving award or Notice of Award. The list shall include

employee's name, date of birth, social security number, state driver's license/state ID number and state of issue. Notifications of contractor employee additions and deletions shall be provided with the same information listed above and within 3 working days. Within 10 business days after receipt of the list the Government will notify the Contractor that installation access passes are available for those employees. The duration of any pass issued will not exceed one year or the duration of the contract, whichever is shorter. This process will be repeated at the exercise of any option period.

1.3.5. SPECIAL QUALIFICATIONS. The contractor will provide certified and licensed contract personnel. Certifications shall be granted by the Texas Department of Health (TDH), or the National Registry of Emergency Medical Technicians (NREMT). Contractor shall maintain files to assure that all EMTs performing work under this contract have current certifications and/or documents listed in paragraph 1.3.5.1. 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 of certifications upon request.

1.3.5.1. Certification/Licensure: Contractors shall possess and maintain current Texas Department of Health (TDH) Emergency Medical Service Provider certification and licensure for each level of ambulance service:

- a. Advanced Life Support (ALS). Contractors must be certified and licensed as an Emergency Medical Technician Paramedic (EMT-P).
- b. Contractors serving in the capacity of a paramedic must maintain current American Heart Association Advanced Cardiac Life Support (ACLS) and Pediatric Advanced Life Support (PALS) certification.
- c. Documentation of training, certification, licensure and CEUs for contractor personnel shall be current and in good standing at all times and available for inspection by the COR at any given time.
- d. Each ambulance crew will consist of two (2) personnel. At least one must be certified and licensed at the EMT-P level.

1.3.5.2. Ambulance Operation Service License: Contractor's Company shall maintain an active service license with Texas Department of State Health Services and abide by all laws, rules and regulations according to Texas Administrative Code 157.11. A copy of the ambulance license and the EMS Vehicle Identification shall be submitted with proposal and provided to the COR prior to operating on JBSA-R.

1.3.5.3. Vehicle Requirements: All vehicles shall be specifically designed for transporting the sick and injured and contain stretchers, linens, first aid supplies, oxygen equipment and such other safety and life-saving equipment as required by state and local law and staffed by personnel trained to provide first aid treatment. Type I and II vehicles size and shape requirements must meet the requirements as stated in the Federal Specification, Ambulance, Emergency Medical Care Vehicle published by the Federal General Services Administration 2007. A vehicle not meeting these specifications may be licensed only if it has been continuously authorized by the TDH under the current ownership. A new vehicle which exceeds the size specification may be licensed if the TDH reviews the manufacturer's specifications and approves the vehicle. Vehicle specifications are as follows, but are not limited to:

- a. Capabilities to accommodate ALS transports.
- b. Interior climate control.
- c. Electrical outlets, connectors for ventilators, monitors, suction, and oxygen.
- d. Lift with capacity of 1000 lbs. (used for lift/transport of Extra Corporeal Membrane Oxygenation [ECMO] equipment and bariatric patient) as required.
- e. Communication features allowing two way communication between EMS personnel and medical crew on board.

1.3.5.4. Flightline Driving Certification: The contractor shall ensure that all employees involved in activities that require certification or licensing shall meet all such requirements for Special Flight Line Driving Certification for all drivers performing services under this contract within fifteen (15) days of the start of contract performance or within fifteen (15) days of new employee performance. All flight line drivers shall receive proper government provided flight line drivers training or be escorted by authorized government personnel. Contractor shall ensure flight line drivers training annual requirements are met. Upon award the Contractor shall contact the COR to schedule this training.

1.3.6. HEALTH, SAFETY AND OCCUPATIONAL PROGRAMS

1.3.6.1. Occupational Health Program: The contractor shall be responsible for ensuring that an Occupational Health Program (OHP) is instituted and maintained on all contract personnel in compliance with all state and federal OSHA laws and regulations. The contractor will identify workplace hazards, monitor exposure to hazards, provide appropriate personal protective equipment (unless otherwise specified), and accomplish the required medical surveillance, treatment, employee notification, education, training and documentation. The contractor may use OSHA or Safety Data Sheets on hazards specific to the contractor work areas, if available (for example, hazardous noise data collection on government personnel working in the same area as

the contractor). The government will not be responsible for gathering data, or monitoring workplace hazards specifically for contractor personnel. Documentation showing compliance with state and federal OSHA laws and regulations will be maintained by the contractor and available for periodic inspection by COR at any given time.

1.3.6.2. Occupational Safety and Health Administration (OSHA): In order to reduce or eliminate the hazards of occupational exposure to bloodborne pathogens, the contractor must implement an exposure control plan for the worksite with details on employee protection measures. The plan must also describe how an employer will use engineering and work practice controls, personal protective clothing and equipment, employee training, medical surveillance, hepatitis B vaccinations, and other provisions as required by OSHA's Bloodborne Pathogens Standard (29 CFR 1910.1030). Engineering controls are the primary means of eliminating or minimizing employee exposure and include the use of safer medical devices, such as needleless devices, shielded needle devices, and plastic capillary tubes. Contractor shall maintain documented proof of immunization or proof of immunity for each contractor personnel and shall ensure that a copy of the Exposure Control Plan is accessible to employees in accordance with 29 CFR 1910.20 (e) and shall be reviewed and updated at least annually and whenever necessary.

1.3.6.3. Contractor Safety Program: The contractor shall establish and maintain an acceptable safety program in accordance with accepted Safety and Health Plan. No more than two Class C mishaps (work related mishap, with direct cost totaling \$50,000 or more but less than \$500,000/permanent change of job/permanent mission degradation of a vehicle) per contract year and Zero Class A or B mishaps (resulting in fatality/permanent disability/destruction of DoD aircraft/Inpatient hospitalization) will be tolerated, IAW AFMAN 91-223, *Aviation Safety Investigations and Reports*

1.3.6.3.1. Safety Mishap/Incident Reporting: The contractor shall report all mishaps/incidents. The contractor shall immediately secure the mishap scene and damaged property and impound pertinent maintenance and training records until released by the Government's Safety Office. Such release shall be accomplished through the COR. The contractor shall cooperate and assist Government personnel in the investigation of the incident and submit an Accident/Incident Report to the COR within 24 hours of the accident/incident. The contractor shall require all subcontractors to comply with required safety, health and fire standards.

1.3.6.4. Sexual Assault: The contractor shall comply with reporting incidents of Sexual Assault and Sexual Harassment under the Sexual Assault Prevention and Response Program, 12 Nov 2013. The SAPR reporting requirements apply only to knowledge obtained by contractor personnel while performing services under this contract. The contractor shall require all Contract Service Providers with knowledge of an incident of sexual assault occurring on a Government facility, to include a Government leased facility, where the contractor is providing services under this contract, to report the incident to the contractor who shall immediately (within 24 hours) report the incident in writing to the government's COR. This reporting policy also applies to sexual assault incidents involving Air Force Medical Service personnel that occur on the contractor's owned or leased facility under this contract. All incidents shall be reported whether they involve contractor personnel or Government personnel, or other individuals, when the incidents occur on a Government facility or a Government leased facility.

1.3.6.5. Hazardous Medical Waste: -The contractor shall not introduce materials, or pollutants into the Randolph AFB water or sanitary sewer systems that would otherwise meet the 40 CFR 261 definition of hazardous waste without written approval from Randolph Facilities Management. The contractor will take every reasonable precaution to prevent the spillage of hazardous wastes and pollutants and will promptly report any accidental spills to the Fire Department. The contractor shall have puncture resistant containers on all vehicles for the disposal of sharps and is responsible for arranging the exchange of full for empty containers with a hospital or licensed private entity.

1.3.6.6. 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, either military or civilian, unless such person has received approval according to DODD 5500.7 Standards of Conduct.

1.3.7. RECORDS MANAGEMENT. All documents and records used in administration of the contract provided by the government will remain government property. The COR will provide guidance in the maintenance and disposal of records in accordance with Records Disposition Procedures and Responsibilities.

1.3.8. AIR FORCE ANTITERRORISM (AT) PROGRAM

The AT program seeks to deter or limit the effects of terrorist acts against the AF by giving guidance on collecting and disseminating timely threat information, providing training to all AF members, developing comprehensive plans to deter and counter terrorist incidents, allocating funds and personnel and implementing AT measures. DOD contractors and sub-contractors personnel shall be offered Level 1 – AT Awareness Training. Compliance with the training will be monitored by the contracting officer representatives.

1.3.9. CONTRACTOR FURNISHED ITEMS AND SERVICES

The contractor shall furnish items and services required to perform the services of the contract with the exception of items or services to be furnished by the government stated in Section 2. Items and services include, but are not limited to: qualified personnel (paramedics, EMTs, etc.), drivers, all emergency transport vehicles, medical equipment, stretchers, expendable medical supplies (drugs, IV tubing, bandages, etc.) and gases used in transport, GPS and roadmaps, etc. The contractor shall ensure all equipment and vehicles meet federal, state and local requirements in the provision of emergency patient transport.

1.3.10. CONTRACTOR POINT OF CONTACT

1.3.10.1 Contract Point of Contact (POC): The contractor shall provide a POC who shall be responsible for the performance of the work as specified in the Performance Work Statement. The name of this person and an alternate(s) who shall act for the contractor when the POC is absent shall be designated in writing to the CO and 559th Medical Squadron COR prior to contract start date and prior to each contract renewal period. Meeting Availability: The Contractor Project Manager, or alternate shall be available during normal duty hours to meet on the installation with the COR to discuss issues as they arise. After normal duty hours, the manager, alternate or liaison

shall be available within 1 hour of notification for emergency matters. The contractor shall provide a point of contact that shall be available via telephone, 24 hours per day, 7 days a week.

The POC or alternate shall have full authority to act for the contractor on all contract matters relating to daily operation of this contract and be available during normal business hours (0800 - 1700 hours). The contract POC must be available or respond to the COR and CO for any contract issues or questions within 10 minutes 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 crew member will also be available to the COR and Government POC or CO if questions arise. If questions or direction to the crew are deferred to the POC, the above response time limits apply. The contractor shall be responsible for ensuring contractor employees have appropriate communication equipment to include cellular telephones. The contractor shall inform the COR and CO in writing of the phone numbers for this equipment and notify the government immediately upon any subsequent changes.

1.3.11. CONTRACTOR DELIVERABLES

1.3.12.1.1. 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 Commander. All patient information shall be handled in accordance with all applicable HIPPA regulations and guidelines. The EMTs and Paramedics shall only release medical information obtained during the course of this contract to other MTF staff involved in the care and treatment of that individual patient (i.e., do not release to the media or community).

1.3.12.2. Work Roster: Names of contractor authorized personnel shall be provided in writing to the COR within 10 days of award and updated as necessary throughout the contract period. The government reserves the right to request a detailed work roster from the contractor after the 15th day of the month for the following month.

1.3.12.3. Monthly Run Report: The contractor shall prepare and submit not later than the 10th business day of each month a report containing the following information: Date of service, and run number, time spent on the transport (time each call was received, dispatched, enroute, at scene, arrival, time patient was accepted at receiving

2. GOVERNMENT FURNISHED PROPERTY AND SERVICES.

2.1. MAPS: The government will provide the contractor copies of the JBSA-R most recent grid-map.

2.2. EMT Space: The government will furnish the contractor with two individual birthing and sleeping facilities/structures for the use of housing ambulances and ambulance crews. The government will furnish heat, electricity, water, waste water service and trash disposal service to the individual structures. These structures are located in the fire station bldg. 700 adjacent to the airfield.

2.3. Radio: The Government will provide a portable radio(s) for their assigned unit(s) that stays at

our Station 8 here, at Randolph. Government will furnish contractor with a portable and charger for their dispatch center that's signed out on a hand-receipt..

3. APPENDICES.

- A. JBSA-Randolph Map**
- B. JBSA-Randolph Gate Hours**

APPENDIX A

JBSA-Randolph Map

APPENDIX B

JBSA-Randolph Gate Hours