

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT			1. CONTRACT ID CODE	PAGE OF PAGES
2. AMENDMENT/MODIFICATION NO. 0004	3. EFFECTIVE DATE 21-Feb-2003	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO.(If applicable)	
6. ISSUED BY DONNA BLACKSTONE NAVAL MEDICAL LOGISTICS COMMAND 1681 NELSON ST FT DETRICK MD 21702-9203	CODE N62645	7. ADMINISTERED BY (If other than item 6)		CODE
		See Item 6		
8. NAME AND ADDRESS OF CONTRACTOR (No., Street, County, State and Zip Code)			X	9A. AMENDMENT OF SOLICITATION NO. N62645-03-R-0001
			X	9B. DATED (SEE ITEM 11) 18-Dec-2002
				10A. MOD. OF CONTRACT/ORDER NO.
				10B. DATED (SEE ITEM 13)
CODE	FACILITY CODE			
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS				
<input checked="" type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offer <input type="checkbox"/> is extended, <input checked="" type="checkbox"/> is not extended.				
Offer must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.				
12. ACCOUNTING AND APPROPRIATION DATA (If required)				
13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.				
A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(B).				
C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
D. OTHER (Specify type of modification and authority)				
E. IMPORTANT: Contractor <input type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.				
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)				
See the continuation pages for questions/responses and amended sections.				
Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.				
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)	
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA		16C. DATE SIGNED
_____ (Signature of person authorized to sign)		BY _____ (Signature of Contracting Officer)		21-Feb-2003

SECTION SF 30 BLOCK 14 CONTINUATION PAGE

a. The purpose of this amendment is to provide the following information and make the following changes to the solicitation: (NOTE: all changes, with exception of Section B, are delineated by a vertical line in the right hand margin. Section B changes in the Contract Line Item Number (CLIN) are highlighted in yellow.)

1. Twelve questions were submitted. The questions and the corresponding responses are provided. Changes pursuant to the questions are identified as follows:

A. Section B, Contract Line Item Number (CLIN):

i. 0002AG - Meridian, TN is changed to Meridian, MS.

ii. 0004AB - Quantity is changed from 1 FTE to 2 FTE's, Hours are changed accordingly.

B. Section C, paragraph 4.4.2.4 - notation of 156 hours of personal leave is hereby changed to 208 hours of personal leave.

C. Section H, paragraph 6.2.1 - "Hepatitis 3" is changed to "Hepatitis B"

D. Section L, paragraph 3.1, last paragraph - last sentence "The offeror shall ensure that the three sets of diskettes are identical" has been removed in its entirety.

E. Attachment 015, Electronic File Format: Offeror's Management Plan - Section C - Pre-Credentialing is hereby changed to Credentials and Licensure Submissions Tracking.

F. Attachment 017, Contract Administration Plan, Section I - The Definition of "Contractor" has been added at sub-paragraph e.

G. Attachment 017, Contract Administration Plan, Section II, Responsibilities, sub-paragraph c, "NOTE:" - The last sentence is hereby corrected to read "the contractor shall" in lieu of "the contract shall."

H. Volume III, Electronic Business Proposal - Tab "Section B" that contains paragraphs 1 - 11 is hereby deleted and is marked as "RESERVED."

2. All notations of the period of performance are hereby changed from 1 July 2003 through 30 September 2003 to 1 October 2003 through 30 September 2004. This change applies to all references in:

A. Section B - CLINS 0001, 0002, 0003, 0004, and 0005

B. Section F, paragraph 1, Period of Performance

C. Section L, paragraph 4, Proposal Evaluation, sub-paragraph 4.4.

3. Section B - All quantities associated with the Minimum Quantity CLINS and Notional Task Orders have been adjusted to reflect the performance period of 1 October 2003 through 30 September 2004 based on a total of 2096 work hours per every 1 FTE.

4. Section C, paragraph 7, Credentialing, sub-paragraph 7.1.2 - the website notated is no longer accessible. Therefore, the website has been changed to:

<http://navymedicine.med.navy.mil/instructions/default.asp?iPageNum=4&sort=id&desc=1>

5. Section L, paragraph 3, Instructions for Preparation of Proposals, sub-paragraph 3.1 - Proposal submission due date has been changed to reflect Tuesday, March 4, 2003.

6. Attachments 001, 002, 003, 004, and 005 - All hours associated with the quantity of FTE's required under the Minimum Requirements are hereby changed to reflect the change in period of performance to 2096 work hours per every 1 FTE.

b. Questions submitted against Solicitation N62645-03-R-0001:

1. Are the following contracts still active? If so, may I have a copy of section B or the pricing data please? N62645-98-C-0103 for a dental hygienist at Corpus Christi; N62645-98-C-0208 for a dental assistant at Jacksonville Hospital; N62645-98-C-0210 for a dental hygienist at Pensacola; N62645-00-C-0063 for a dental hygienist at Jacksonville.

Response: Contracts N62645-98-C-0103, N62645-98-C-0210, and N62645-00-C-0063 have all expired and the positions are being provided under the current Multiple Award Task Order (MATO) contracts for the Gulf Coast Region. Contract N62645-98-C-0210 is a dental assistant procured under the Naval Hospital, Jacksonville, FL and is not part of this requirement. For informational purposes only, the contract is an individual set-aside with a current hourly rate of \$13.90.

2. a) I have noticed that the Offeror's Management Plan as described in Paragraph 3.9 of the Solicitation and the amendments differs slightly from "Attachment 015, Electronic File Format; Offeror's Management Plan" in that the solicitation and amendments refer to item c. as "Credentials and Licensure submissions tracking" and the latter electronic document calls c.: "Pre-Credentialing". Also, several questions under this heading such as 1., 2. & 3., etc. begin by stating "A description of" in the solicitation and amendments but say "describe" in the electronic file format. There are similar discrepancies in paragraph b.1. between "provision of" and "provide".

Response: The intent of paragraph 3.9 of section L is to define what the offeror is required to submit. The intent of Attachment 015 is to define how that information is to be submitted. The difference is in syntax only. Attachment 015, Electronic File Format; Offeror's Management Plan, Paragraph C is hereby changed to "Credentials and Licensure Submissions Tracking."

Should we modify the electronic attachment 015 to comply with the text in the solicitation or leave it as is in the electronic attachment, before inserting our answers to the questions.

Response: No. Offeror modification of the attachment is not necessary.

b) Second question: In Paragraph 3.1 of the Amendment 002, it is stated that "The offeror shall ensure that the three sets of diskettes are identical." My understanding is that we will be submitting two identical copies of three different diskettes (for a total of 6 diskettes). Saying that the three sets of diskettes are identical is somewhat confusing.

Response: The sentence referred to is hereby removed.

3. The following pertains to the Solicitation and Amendments.

a) This company has already submitted Volume I, Past Performance Proposal. Is the original submission acceptable, or does it need to be submitted a second time with Volumes II and III?

Response: It is not necessary to resubmit Volume I, Business Proposal if it has already been submitted.

b) Amendment 0002 Page 2, Attach 016 Note regarding the management plans that are to be incorporated as Attachment 016A, 016B, 016C; Please confirm that each company's management plan remains confidential and that Company A's contract will have Attachment A, Company B's contract will have Attachment B and so on. Is it

correct that the only contract copies with all attachments will be at NMLC and at the Naval Dental Center Headquarters? Are the management plans provided to the Branch Dental Clinics?

Response: i) Each successful offeror's contract shall contain that offeror's Management Plan and no others.
ii) Yes. The successful offeror, NMLC and, the Naval Dental Center Headquarters shall possess the complete contract document (including all attachments).
iii) Yes. The Technical Assistant assigned at the respective Clinics will also have a complete copy of the contract document (including all attachments).

c) Amendment 0002, Attachment 017:

Page 3, NOTE: "The contract shall...": should this be "contractor"?

Page 7, (18) "...the contractor receives copy of all regulations and/or directives...." Would you consider inserting "and contract employees" in the sentence? Often the employees receive the directives but the contract company does not. It would be helpful if there was a distinction made between the contract company and contract employees.

Response: i) Yes. The typographical error has been corrected.
ii) The definition of "contractor" has been incorporated into the Contract Administration Plan (CAP), Attachment 017, on page 1 of the document.

d) Also, I'd like to recommend that the contract company be notified immediately of any contract employee's chronic misuse of time or behavior issues, i.e. tardiness, making personal phone calls, incorrect recording of time, etc. There have been occasions where the Branch Dental Clinics did their own counseling, and the company didn't learn of the problem until the BDC wanted the individual removed. Since the employee's behavior reflects on the company's performance, copies of any counseling between naval personnel and contract employees should also be provided to the company.

Response: This is a Contract Administration issue and will be addressed during the Post-Award Conference.

4. Please verify the current contractors prices (Attachment 014) are for services effective 10/1/02. I have noticed some unusually low dental assistant pricing which do not seem to correlate with the current wage determination.

Response: All prices stated in Attachment 014 are accurate.

5. a) How long is the term of this contract?

Response: The resulting contracts shall have a 5-year ordering period.

b) Is the contract renewable, after initial contract date ends?

Response: Successful performance of the initial task order may result in the award of a Task Order via Logical Follow-On procedures (See Section H, paragraph 2.1 Subsequent Task Orders.)

c) Who currently holds this contract?

Response: There are currently three (3) contracts awarded for the NDC Gulf Coast requirements and five positions of the NDC Southeast requirements. The contractors are: DPS, Inc.; Saratoga Medical Center, Inc.; and The OMO Group, Inc. The remaining NDC Southeast requirements were procured under the Mid-Atlantic MATO. There are three (3) contracts awarded under the Mid-Atlantic MATO. The contractors are: Medtemps, Inc.; DPS, Inc.; and Saratoga Medical, Inc.

d) How long?

Response: All MATO contracts contain a 5-year ordering period.

6. a) On page 40 of the original solicitation, para. 6.2.1, item 3a. of the physical exam findings, don't you mean: "Received at least three doses of recombinant hepatitis B vaccine", not hepatitis 3?

Response: Typographical error has been corrected.

b) Since the deadline for Past Performance (Vol I) has been extended to February 13th, be we have already submitted Vol I, may we re-submit our two disks for Volume I along with our Vol II and Vol III submissions so you receive all 6 disks at the same time?

Response: It is not necessary to resubmit Volume I, Past Performance. However, re-submission of the Business Proposal (Volume I) is at the respective offeror's discretion.

7. Volume III, the Pricing Proposal. The file that we received via e-mail in Amendment 0002 does not seem to have a complete Section B. It does not duplicate the format of pp 5-16 of the original RFP. From what I can see, that part of the RFP, or an equivalent, should be in Section B.7. In fact, Section B.7. in our files does not have the Minimum Quantities table identifying (from left to right) the CLIN, the Description, the Quantity in hours, the Unit, the Unit Price, and the Extended Amount. It does not identify any information for CLINs 0001 through NTO 001 and 002 and their various subsets. Consequently, there is no way we can show unit prices and extended amounts for the various CLINs.

Response: Microsoft Excel is not meant for expansive word processing capabilities. All of the preliminary information (paragraphs 1 through 11) in the form of TAB "Section B", is hereby removed from the electronic version for Business Proposal submission. A revised electronic copy of the Business Proposal is part of the Amendment.

8. Our computer system is set up to run on Microsoft Windows 2000, a new version than the Microsoft 95 and 97 versions cited in section 3.6 of the RFP. Is our version acceptable, or is it causing the problems observed in the above question?

Response: See Amendment 0001, Section L, paragraph 3.6 and 3.9.

9. In comparing the FTE requirements and the existing contracts, it looks like NATTC is going from 1.5 RDHs to .5 RDHs. I know both positions are filled. Is this intentional. Key West is only requiring one DA but it appears that both Medtemps and OMO have one dental assistant each. Otherwise it looks like the new requirements and the existing requirements (in number of positions) are the same.

Response: The Dental Hygienist (RDH) requirement for NATTC is .5 FTE. The Dental Assistant (DA) requirement is 2 FTE's and has been changed within Section B and the Electronic Business Proposal.

10. In paragraph 4.4.2.3 of the statement of work, the leave accrual was changed from 6 hours to 8 hours per every 80 hours worked. However, paragraph 4.4.2.4 stated that ".....not more than 156 hours of personal leave will be provided per FTE of effort per twelve month Task Ord3er." The 156-hour limit originally allowed accurate leave accrual at 6 hours per 80 hours worked, however when the leave accrual was changed to 8 hours per 80-hour leave accrual, we calculated the annual leave accrual to be 208 hours. We request clarification on this matter.

Response: Section C, paragraph 4.4.2.4 is hereby changed to reflect 208 hours in lieu of 156.

11. CLIN 0002AG - Meridian, TN should this be Meridian, MS?

Response: Typographical error has been corrected.

12: CLIN 0001AC - BDC Panama City, FL - Could not find a wage determination for Bay County.

Response: The minimum requirement for this location is a Dental Hygienist. This position is not subject to a Wage Determination.

SUMMARY OF CHANGES

Changes in Section B

SECTION B - SUPPLIES OR SERVICES AND PRICES/COSTS

1. The Contractor shall furnish qualified healthcare workers (HCWs) in accordance with Section C (The Statement of Work), Section H (Personnel Qualifications), individual Task Orders for these services, and all other terms and conditions set forth herein. Government requirements for contracted healthcare personnel shall be filled in response to Task Orders issued by the Government against this contract.

2. This solicitation is intended to result in multiple indefinite-delivery / indefinite-quantity (IDIQ) contract awards, as identified under FAR 16.504. Task Orders will be priced on a firm fixed price basis.

3. The following activity is the sole authority to issue Task Orders:

 Naval Medical Logistics Command
 Code 02
 1681 Nelson Street
 Fort Detrick, MD 21702-9203

The Government reserves the right to add other ordering activities during the term of this contract. If other ordering activities are added, these actions will be contained in modifications issued by the Contracting Officer.

4. The Contracting Officer will place Task Orders using a signed DD Form 1155. Task Orders will be executed in writing by the Contracting Officer and transmitted either via mail, facsimile, or electronically via e-mail. If the order is transmitted via e-mail, the Contractor shall acknowledge receipt.
 - a. Performance of Healthcare Worker (HCW) services at any Department of Defense or Coast Guard military dental treatment facilities (DTFs), branch dental clinics (BDCs), or other dental activities specified within the states of Florida, Alabama, Georgia, Mississippi, Louisiana, Texas, Tennessee, South Carolina, and the Commonwealth of Puerto Rico who have been granted authority under 10 U.S.C. 1091, are considered within the scope of this contract.

 - b. The Government retains the right to additionally specify requirements in individual Task Orders as they relate to differences between specific positions, among specific military services (i.e. Army, Navy, Marine Corps, Air Force, etc) or, among specific service locations. Such requirements may include, but are not limited to, leave accrual rates, work hour adjustments, credentialing requirements, holiday service, general/administrative duties, continuing education and training. In these cases, the specific requirement will be referenced and addressed in the Task Order Proposal Request (TOPR).

5. Each Task Order will contain, at a minimum, the following information:

- a. The date of order
- b. The contract number and order number
- c. A description of services
Labor category and,
Specific duties and,
Position qualifications and,
Place of performance and,
Hours of operation and,
Quantity required.
- d. The unit price
- e. The period of performance
- f. Accounting and appropriation data
- g. The payment office address
- h. Any other pertinent data
- i. Invoicing and Acceptance instructions, and
- j. The name of the Contracting Officer's Representative (COR)

6. Each Task Order will specify the place of performance. Services for the minimum requirements (Contract Line Item Numbers (CLINs) 0001-0004) will be provided at the following locations:

a. Naval Dental Center Gulf Coast Pensacola, FL and subordinate Branch Dental Clinics and Branch Dental Annexes (CLIN 0001 and CLIN 0002, SLINs 0002AA through 0002AM).

b. Keesler Air Force Base, Biloxi, MS (CLIN 0002, SLIN 0002AN).

c. Naval Dental Center Southeast Jacksonville, FL subordinate Branch Dental Clinics and Branch Dental Annexes (CLINs 0003 and 0004). (NOTE: The Bureau of Medicine and Surgery (BUMED) has mandated that the Naval Dental Center Southeast reduce their Dental Assistant staffing by 7 FTE's during Fiscal Year 2004. When the reduction will take place during Fiscal Year 2004 and the exact locations of the positions to be reduced are unknown at this time.)

7. Minimum and Maximum Quantities. Contract Minimum and Maximum quantities are identified in Section 11. The Government intends to make multiple awards from this solicitation. The Contracting Officer will select and award at least one CLIN from CLINs 0001 through 0004 in Section 11 to each awardee. Initial Task Orders will be awarded concurrently at the time of contract award and will contain, in the aggregate, all services identified as the Government's minimum requirements, CLINs 0001 through 0004. The location of services exceeding the minimum quantities may be provided at any location listed in Section 6 plus any other DoD or United States Coast Guard facilities in the geographic region defined in Section 4.a.

HCW POSITIONS

Minimum Requirements:

Dental Assistants*
Dental Hygienists

* Attachment 009 contains the Service Contract Act Wage Determination for these minimum requirements.

Maximum Requirements (in alphabetical order):

Central Sterile Supply Technicians
Dental Assistants
Dental Hygienists
Dental Laboratory Technicians
Endodontists
General Dentists
Oral/Maxillofacial Surgeons
Orthodontists
Periodontists.
Prosthodontists

The procedures for the preparation of the initial Task Order proposal and the evaluation procedures to be employed for award of these initial Task Orders are contained in Section L of this solicitation. The Statements of Work for these initial Task Orders are Attachments 001 through 005. Instructions and procedures for subsequent Task Order preparation and award are contained in Section H of this contract.

8. The estimated ordering period is for 60 months beginning with the initial start of contract services, or until the time the Government has issued Task Orders totaling the maximum quantity.

9. The period of performance of any one Task Order shall be twelve consecutive calendar (12) months or less in duration.

11. The schedule of services the Government intends to acquire from contract awardees is provided below. CLINs may contain SLINs that provide the total minimum quantity of hours required for that CLIN. The unit price for each CLIN/SLIN is to be proposed in dollars per hour.

Offerors shall provide hourly and total prices for the minimum quantities (CLINs 0001 through 0004) and the Notational Task Orders NTO001 and NTO002 (Attachments 007 and 008) only. Notional Task Orders NTO001 and NTO002 (Attachments 007 and 008 under CLIN 0005) provide representative sample pricing for CLINs 0009 through 0019. The Notional Task Orders shall be evaluated in accordance with instructions specified in Section L. No awards will result from an offeror's proposal in response to these Notional Task Orders.

CLIN 0007 retains the Government's right to reimburse travel for HCWs.

CLIN 0008 retains the Government's right to make incentive awards directly to HCWs.

CLINs 0007 and 0008 may be used more than once throughout the duration of the contract and may apply to both the minimum and maximum quantities. Unit prices shall be stated in "dollars per hour" on each individual Task Order. NOTE: There are no known travel requirements at this time. Therefore, should the need for travel arise during the minimum service period, the CLIN will be negotiated and modified into the task order.

Offerors shall use the electronic Microsoft Excel spreadsheets and Microsoft Word documents for the submission of their proposals specified in Section L. The Government will not accept this information in any other format. (Offerors are directed to Section L, Instructions for Preparation of Proposals).

MINIMUM QUANTITIES FOR HEALTHCARE WORKER SERVICES

CLIN	Description	Quantity (Hours)	UNIT	UNIT PRICE	AMOUNT
0001	HCWs identified in CLIN 0001 shall provide DENTAL HYGIENIST services for the Naval Dental Center, Gulf Coast Pensacola, FL and subordinate Branch Dental Clinics and Branch Dental Annexes. The period of performance for each SLIN is 1 October 2003 through 30 September 2004. (Attachment 001)				
0001AA	Branch Dental Clinic, Naval Aviation Technical Training Center, Pensacola, FL (.5 FTE)	1,048	HOURS		\$ -
0001AB	Branch Dental Clinic, Naval Technical Training Center, Corry Station, Pensacola, FL (.5 FTE)	1,048	HOURS		\$ -
0001AC	Branch Dental Clinic, Panama City, FL (.5 FTE)	1,048	HOURS		\$ -

0001AD	Branch Dental Clinic, New Orleans, LA (2 FTE)	4,192	HOURS		\$ -
0001AE	Branch Dental Clinic, Naval Construction Battalion Center, Gulfport, MS (1 FTE)	2,096	HOURS		\$ -
0001AF	Branch Dental Clinic, Meridian, MS (1 FTE)	2,096	HOURS		\$ -
0001AG	Branch Dental Clinic, Pascagoula, MS (1 FTE)	2,096	HOURS		\$ -
0001AH	Branch Dental Clinic, Naval Air Station, Corpus Christi, TX (.5 FTE)	1,048	HOURS		\$ -
0001AJ	Branch Dental Clinic, Naval Air Station, Kingsville, TX (.5 FTE)	1,048	HOURS		\$ -
0001AK	Branch Dental Clinic, Naval Air Station, Fort Worth, TX (1.5 FTE)	3,144	HOURS		\$ -
0001AL	Branch Dental Clinic, Ingleside, TX (1 FTE)	2,096	HOURS		\$ -
CLIN	Description	Quantity (Hours)	UNIT	UNIT PRICE	AMOUNT
0002	HCWs identified in CLIN 0002, SLINs 0002AA through 0002AN shall provide DENTAL ASSISTANT services for the Naval Dental Center, Gulf Coast Pensacola, FL and subordinate Branch Dental Clinics. HCWs identified in CLIN 0002, SLIN 0002AN shall provide services for Keesler Air Force Base, Biloxi, MS. The period of performance for each SLIN is 1 October 2003 through 30 September 2004. (Attachment 002 for SLINs 0002AA through 0002AM and Attachment 003 for SLIN 0002AN)				
0002AA	Branch Dental Clinic, Naval Air Station, Pensacola, FL (5 FTE)	10,480	HOURS		\$ -
0002AB	Branch Dental Clinic, Naval Aviation Technical Training Center, Pensacola, FL (9 FTE)	18,864	HOURS		\$ -

0002AC	Branch Dental Clinic, Naval Technical Training Center, Corry Station, Pensacola, FL (2 FTE)	4,192	HOURS		\$ -
0002AD	Branch Dental Clinic, Naval Air Station, Whiting Field, FL (1 FTE)	2,096	HOURS		\$ -
0002AE	Branch Dental Clinic, New Orleans, LA (3 FTE)	6,288	HOURS		\$ -
0002AF	Branch Dental Clinic, Naval Construction Battalion Center, Gulfport, MS (1 FTE)	2,096	HOURS		\$ -
0002AG	Branch Dental Clinic, Meridian, MS (3 FTE)	6,288	HOURS		\$ -
0002AH	Branch Dental Clinic, Pascagoula, MS (1 FTE)	2,096	HOURS		\$ -
0002AJ	Branch Dental Clinic, Naval Support Activity, Millington, TN (3 FTE)	6,288	HOURS		\$ -
0002AK	Branch Dental Clinic, Naval Air Station, Corpus Christi, TX (3 FTE)	6,288	HOURS		\$ -
0002AL	Branch Dental Clinic, Naval Air Station, Kingsville, TX (1 FTE)	2,096	HOURS		\$ -
0002AM	Branch Dental Clinic, Naval Air Station, Fort Worth, TX (2 FTE)	4,192	HOURS		\$ -
0002AN	Keesler Air Force Base, Biloxi, MS (2 FTE)	4,192	HOURS		\$ -
CLIN	Description	Quantity (Hours)	UNIT	UNIT PRICE	AMOUNT
0003	HCWs identified in CLIN 0003 shall provide DENTAL HYGIENIST services for the Naval Dental Center Southeast, Jacksonville, FL, subordinate Branch Dental Clinics. The period of performance is 1 October 2003 through 30 September 2004. (Attachment 004; Attachment 006 contains the Incentive Plan for this labor category.)				

0003AA	Jacksonville FL area Branch Dental Clinics including Branch Dental Clinic, Naval Air Station, Jacksonville, FL (2 FTE); and Branch Dental Clinical, Naval Station, Mayport, FL (4 FTE); and Branch Dental Clinic, Naval Submarine Base, Kings Bay, GA (1 FTE).	14,672	HOURS		\$ -
0003AB	Branch Dental Clinic, Naval Air Station, Key West, FL (1 FTE)	2,096	HOURS		\$ -
0003AC	Naval Dental Center Southeast Branch Dental Clinic Atlanta, Naval Air Station, Marietta GA (1 FTE)	2,096	HOURS		\$ -
0003AD	Naval Dental Center Southeast Branch Dental Clinic Charleston, Goose Creek, SC (1 FTE)	2,096	HOURS		\$ -
CLIN	Description	Quantity (Hours)	UNIT	UNIT PRICE	AMOUNT
0004	HCWs identified in CLIN 0004 shall provide DENTAL ASSISTANT services for the Naval Dental Center Southeast, Jacksonville, FL, subordinate Branch Dental Clinics. The period of performance is 1 October 2003 through 30 September 2004. (Attachment 005; Attachment 006 contains the Incentive Plan for this labor category.) (NOTE: The Bureau of Medicine and Surgery (BUMED) has mandated that the Naval Dental Center Southeast reduce their Dental Assistant staffing by 7 FTE's during Fiscal Year 2004. When the reduction will take place during Fiscal Year 2004 and the exact locations of the positions to be reduced are unknown at this time.)				
0004AA	Jacksonville FL area Branch Dental Clinics including Branch Dental Clinic, Naval Air Station, Jacksonville, FL (7 FTE); and Branch Dental Clinical, Naval Station, Mayport, FL (14 FTE); and Branch Dental Clinic, Naval Submarine Base, Kings Bay, GA (6 FTE).	56,592	HOURS		\$ -
0004AB	Branch Dental Clinic, Naval Air Station, Key West, FL (1 FTE)	2,096	HOURS		\$ -

0004AC	Branch Dental Clinic, MCLB, Albany, GA (1 FTE)	2,096	HOURS		\$ -
0005	HCWs identified for Notional Task Order Requirements. The notional period is 1 October 2003 though 30 September, 2004. No awards will be result from an offeror's proposal in response to these Notional Task Orders.				
0005AA	NTO001 - Dental Laboratory Technician Services for the Naval Dental Center, Gulf Coast, FL (1 FTE)	2,096	HOURS		\$ -
0005AB	NTO002 - Endodontist Services for McDill AFB, Tampa, FL (.5 FTE)	1,048	HOURS		\$ -
0006	RESERVED				CLIN IS NOT TO BE PRICED

ADDITIONAL HCW REQUIREMENTS (Minimum and Maximum) NOT INITIALLY PRICED

<u>CLIN</u>	<u>DESCRIPTION</u>	<u>QTY (Hours)</u>	<u>UNIT</u>	<u>PRICE</u>	<u>TOTAL PRICE</u>
0007	Travel. As directed by the Government, HCWs may be required to provide services, undergo training or attend conferences when in the best interest of the Government and patient care and in accordance with Section H and Individual Task Orders.				
0007AA	Travel Requirements for Naval Dental Center Gulf Coast Pensacola FL subordinate Branch Dental Clinics, and Branch Dental Annexes				NOT INITIALLY PRICED
0007AB	Travel Requirements for Naval Dental Center Southeast Jacksonville, FL subordinate Branch Dental Clinics, and Branch Dental Annexes				NOT INITIALLY PRICED
0007AC	Travel Requirements for Keesler Air Force Base.				NOT INITIALLY PRICED

0008	Incentive Awards. The Government, reserves the right to make incentive awards directly to HCWs. These awards will be site-specific based upon the Government's best business practice plan to minimize turnover, maximize the mission of the command and/or reward exemplary individual work. Incentive plans for the minimum quantities are contained in the individual task orders for the positions within CLINs 0001 through 0004 (Attachment 006). Incentive plans for the maximum quantities (CLINs 0009 through 0019) will be contained in the subsequent individual Task Orders (Offerors are directed to Section H.)				
0008AA	Incentive Awards for Naval Dental Center Gulf Coast Pensacola, FL subordinate Branch Dental Clinics, and Branch Dental Annexes				NOT INITIALLY PRICED
0008AB	Incentive Awards for Naval Dental Center Southeast Jacksonville, FL subordinate Branch Dental Clinics, and Branch Dental Annexes				NOT INITIALLY PRICED
0008AC	Incentive Awards for Keesler Air Force Base, Biloxi, MS.				NOT INITIALLY PRICED

ADDITIONAL HCW SERVICES (Maximum Quantities) NOT INITIALLY PRICED

CLIN	Description	Quantity (Hours)	UNIT	UNIT PRICE	AMOUNT
0009	The contractor shall perform those CENTRAL STERILE SUPPLY TECHNICIAN services for those locations specified in Section B.4.a. in accordance with Section C, Section H, and Individual Task Orders	MAXIMUM HOURS 41,760			NOT INITIALLY PRICED
0010	The contractor shall perform those DENTAL ASSISTANT services for those locations specified in Section B.4.a. in accordance with Section C, Section H, and Individual Task Orders				

0010AA	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Air Station, Pensacola, FL	MAXIMUM HOURS 62,688			NOT INITIALLY PRICED
0010AB	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Aviation Technical Training Center, Pensacola, FL	MAXIMUM HOURS 94,032			NOT INITIALLY PRICED
0010AC	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Technical Training Center, Corry Station, Pensacola, FL	MAXIMUM HOURS 20,896			NOT INITIALLY PRICED
0010AD	Naval Dental Center Gulf Coast, Branch Dental Clinic Whiting Field, Milton, FL	MAXIMUM HOURS 10,448			NOT INITIALLY PRICED
0010AE	Naval Dental Center Gulf Coast, Branch Naval Coastal Systems Center, Panama City, FL	MAXIMUM HOURS 0			NOT INITIALLY PRICED
0010AF	Naval Dental Center Gulf Coast, Branch Naval Support Activity, NOLA, New Orleans, LA	MAXIMUM HOURS 31,344			NOT INITIALLY PRICED
0010AG	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Construction Battalion Center, Gulfport, MS	MAXIMUM HOURS 10,448			NOT INITIALLY PRICED
0010AH	Naval Dental Center Gulf Coast, Branch Dental Clinic, Meridian Naval Air Station, Meridian, MS	MAXIMUM HOURS 31,344			NOT INITIALLY PRICED
0010AJ	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Station, Pascagoula, MS	MAXIMUM HOURS 10,448			NOT INITIALLY PRICED
0010AK	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Air Station, Corpus Christi, TX	MAXIMUM HOURS 31,344			NOT INITIALLY PRICED
0010AL	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Air Station, Fort Worth, TX	MAXIMUM HOURS 20,896			NOT INITIALLY PRICED

0010AM	Naval Dental Center Gulf Coast, Branch Dental Clinic, Ingleside Naval Air Station, Ingleside, TX	MAXIMUM HOURS 0			NOT INITIALLY PRICED
0010AN	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Air Station, Kingsville, TX	MAXIMUM HOURS 10,448			NOT INITIALLY PRICED
0010AP	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Support Activity, Millington, TN	MAXIMUM HOURS 31,344			NOT INITIALLY PRICED
0010AQ	Keesler Air Force Base, Biloxi, MS	MAXIMUM HOURS 20,896			NOT INITIALLY PRICED
0010AR	Naval Dental Center Southeast Branch Dental Clinics, Including Naval Air Station, Jacksonville, FL; Naval Station Mayport, FL; and Naval Submarine Base, Kings Bay, GA.	MAXIMUM HOURS 282,096			NOT INITIALLY PRICED
0010AS	Naval Dental Center Southeast Branch Dental Clinic, Naval Air Station Key West, FL.	MAXIMUM HOURS 20,896			NOT INITIALLY PRICED
0010AT	Branch Dental Clinic, MCLB, Albany, GA	MAXIMUM HOURS 10,448			NOT INITIALLY PRICED
0010AU	Naval Dental Center Southeast Branch Dental Clinic Atlanta, Naval Air Station, Marietta GA	MAXIMUM HOURS 0			NOT INITIALLY PRICED
0010AV	Naval Dental Center Southeast Branch Dental Clinic Charleston, Goose Creek, SC	MAXIMUM HOURS 0			NOT INITIALLY PRICED
0010AW	DoD or Coast Guard Dental Treatment Facilities as specified in accordance with site specific statement of work.	MAXIMUM HOURS 162,072			NOT INITIALLY PRICED
0011	The contractor shall perform those DENTAL HYGIENIST services for those locations specified in Section B.4.a. in accordance with Section C, Section H, and Individual Task Orders				

0011AA	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Air Station, Pensacola, FL	MAXIMUM HOURS 0			NOT INITIALLY PRICED
0011AB	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Aviation Technical Training Center, Pensacola, FL	MAXIMUM HOURS 5,224			NOT INITIALLY PRICED
0011AC	Naval Dental Center Gulf Coast, Branch Dental Clinic, Corry Station, Pensacola, FL	MAXIMUM HOURS 5,224			NOT INITIALLY PRICED
0011AD	Naval Dental Center Gulf Coast, Branch Dental Clinic Whiting Field, Milton, FL	MAXIMUM HOURS 0			NOT INITIALLY PRICED
0011AE	Naval Dental Center Gulf Coast, Branch Naval Coastal Systems Center, Panama City, FL	MAXIMUM HOURS 5,224			NOT INITIALLY PRICED
0011AF	Naval Dental Center Gulf Coast, Branch Naval Support Activity, NOLA, New Orleans, LA	MAXIMUM HOURS 20,896			NOT INITIALLY PRICED
0011AG	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Construction Battalion Center, Gulfport, MS	MAXIMUM HOURS 10,448			NOT INITIALLY PRICED
0011AH	Naval Dental Center Gulf Coast, Branch Dental Clinic, Meridian Naval Air Station, Meridian, MS	MAXIMUM HOURS 10,448			NOT INITIALLY PRICED
0011AJ	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Station, Pascagoula, MS	MAXIMUM HOURS 10,448			NOT INITIALLY PRICED
0011AK	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Air Station, Corpus Christi, TX	MAXIMUM HOURS 5,224			NOT INITIALLY PRICED
0011AL	Branch Dental Clinic, Naval Air Station, Fort Worth, TX	MAXIMUM HOURS 10,448			NOT INITIALLY PRICED
0011AM	Naval Dental Center Gulf Coast, Branch Dental Clinic, Ingleside Naval Air Station, Ingleside, TX	MAXIMUM HOURS 10,448			NOT INITIALLY PRICED

0011AN	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Air Station, Kingsville, TX	MAXIMUM HOURS 5,224			NOT INITIALLY PRICED
0011AP	Naval Dental Center Gulf Coast, Branch Dental Clinic, Naval Support Activity, Millington, Millington, TN	MAXIMUM HOURS 0			NOT INITIALLY PRICED
0011AQ	Keesler Air Force Base, Biloxi, MS	MAXIMUM HOURS 0			NOT INITIALLY PRICED
0011AR	Naval Dental Center Southeast Branch Dental Clinics, Including Naval Air Station, Jacksonville, FL; Naval Station Mayport, FL; and Naval Submarine Base, Kings Bay, GA.	MAXIMUM HOURS 73,136			NOT INITIALLY PRICED
0011AS	Naval Dental Center Southeast Branch Dental Clinic, Naval Air Station Key West, FL.	MAXIMUM HOURS 10,448			NOT INITIALLY PRICED
0011AT	Naval Dental Center Southeast Branch Dental Clinic Atlanta, Naval Air Station, Marietta GA	MAXIMUM HOURS 10,448			NOT INITIALLY PRICED
0011AU	Naval Dental Center Southeast Branch Dental Clinic Charleston, Goose Creek, SC	MAXIMUM HOURS 10,448			NOT INITIALLY PRICED
0011AV	Branch Dental Clinic, MCLB, Albany, GA	MAXIMUM HOURS 0			NOT INITIALLY PRICED
0011AW	DoD or Coast Guard Dental Treatment Facilities as specified in accordance with site specific statement of work	MAXIMUM HOURS 205,952			NOT INITIALLY PRICED
0012	The contractor shall perform those DENTAL LABORATORY TECHNICIAN services for those locations specified in Section B.4.a. in accordance with Section C, Section H, and Individual Task Orders	MAXIMUM HOURS 41,760			NOT INITIALLY PRICED

0013	The contractor shall perform those ENDODONTIST services for those locations specified in Section B.4.a. in accordance with Section C, Section H, and Individual Task Orders	MAXIMUM HOURS 20,880			NOT INITIALLY PRICED
0014	The contractor shall perform those EXPANDED FUNCTION DENTAL ASSISTANT services for those locations specified in Section B.4.a. in accordance with Section C, Section H, and Individual Task Orders	MAXIMUM HOURS 208,800			NOT INITIALLY PRICED
0015	The contractor shall perform those GENERAL DENTIST services for those locations specified in Section B.4.a. in accordance with Section C, Section H, and Individual Task Orders	MAXIMUM HOURS 229,680			NOT INITIALLY PRICED
0016	The contractor shall perform those ORAL/MAXILLOFACIAL SURGEON services for those locations specified in Section B.4.a. in accordance with Section C, Section H, and Individual Task Orders	MAXIMUM HOURS 20,880			NOT INITIALLY PRICED
0017	The contractor shall perform those ORTHODONTIST services for those locations specified in Section B.4.a. in accordance with Section C, Section H, and Individual Task Orders	MAXIMUM HOURS 20,880			NOT INITIALLY PRICED
0018	The contractor shall perform those PERIODONTIST services for those locations specified in Section B.4.a. in accordance with Section C, Section H, and Individual Task Orders	MAXIMUM HOURS 20,880			NOT INITIALLY PRICED
0019	The contractor shall perform those PROSTHODONTIST services for those locations specified in Section B.4.a. in accordance with Section C, Section H, and Individual Task Orders	MAXIMUM HOURS 20,880			NOT INITIALLY PRICED

Changes in Section C

NOTE 1: The use of, “Commanding Officer/Commander” means the Commanding Officer or Commander of the military dental treatment facility or equivalent Government official, e.g. Contracting Officer’s Representative (COR), Technical Assistant (TA), Branch Director or, Department Head at any of the service locations as specified in Section B. This individual will be specified in each individual Task Order.

NOTE 2: The term, “Contractor” means the offeror identified in block 15A of the Standard Form 33 or block 7 of the Standard Form 26 and its HCWs who are providing services under Task Orders placed under the contract.

NOTE 3: The abbreviation, “DTF” (Dental Treatment Facility) refers to any military service (including USCG) treatment facility(s) in which dental services are provided within the scope of this contract.

STATEMENT OF WORK

1. GENERAL INFORMATION. This Statement of Work (SOW) applies to all positions encompassed within this contract. Position specific Statements of Work for the Government’s minimum quantities (Contract Line Item Numbers [CLINs] 0001 through 0004) are provided as Attachments 001 through 005. Staffing requirements specific to each position are contained within that applicable attachment. CLIN 0007 retains the Government’s right to reimburse the Contractor for required travel expenses for Healthcare Workers (HCWs) for CLINs 0001 through 0004 and 0009 through 0019. CLIN 0008 may also be included with the subsequently issued Task Order Proposal Requests (TOPRs) for CLINs 0009 through 0019.

1.1. The Contractor shall provide, in accordance with each Task Order, dental and healthcare services at the locations specified in Schedule B and each individual Task Order.

1.2. During the term of this contract and in accordance with the terms and conditions of this contract and each Task Order, the Contractor agrees to provide on behalf of the Government, services for the treatment of active duty military personnel and other eligible beneficiaries.

1.3. While on duty, HCWs shall not advise, recommend or suggest to individuals authorized to receive services at Government expense that such individuals should receive services from the HCW when they are not on duty, or from a partner or group associated in practice with the Contractor or HCW, except with the express written consent of the Commanding Officer/Commander. The Contractor shall not bill individuals entitled to those services rendered pursuant to this contract.

1.4. In each TOPR, the Government will disclose specific information concerning the type(s), duration and location(s) of the services to be provided. This notice may include the number of hours that constitutes the scheduled work day of an individual HCW, the times and days of the week that services will be scheduled, and the places where these services will be performed. In the event that a TOPR calls for more than 8 compensated hours per day, the parties agree that the Contractor is solely responsible for investigating and determining the applicability of any state and/or local wage or overtime compensation laws with regard to its performance. It is further agreed that the Contractor assumes any and all risk as to the accuracy of its judgment. Accordingly, since the Task Order price reflects the Contractor’s determination, the Contractor shall not be entitled to any equitable price adjustment should a state and/or local agency charged with enforcement of such wage and overtime laws rule that the Contractor’s determination was erroneous.

1.5. The Government retains the right to additionally specify requirements in individual Task Orders as they relate to differences between specific positions, among specific military services (i.e. Army, Navy, Marine Corps, Air Force, etc) or, among specific service locations. Such requirements may include, but are not limited to, leave accrual rates, work hour adjustments, credentialing requirements, holiday service, general/administrative duties, continuing education and training. In these cases, the specific requirement will be referenced and addressed in the TOPR.

1.6. As directed by the Government, HCWs may be required to travel to provide services, undergo training or attend conferences when in the best interest of the Government and patient care. These travel requirements will be funded using CLIN 0007.

1.7. The Government retains the right to make incentive awards directly to HCWs. Incentive Plans applicable to CLINs 0001 through 0004 are contained in Attachment 006. CLIN 0008 may also be included with the subsequently issued TOPRs for CLINs 0009 through 0019. These awards will be site or position specific based upon the Government's best business practice plan to minimize turnover, maximize the mission of the command and/or reward exemplary individual work. Incentive plans for CLINs 0009 through 0019 will be contained in subsequent individual Task Orders.

2. MEDICAL MALPRACTICE AND PERSONAL SERVICES.

2.1. The HCW(s) is (are) serving at the DTF under a personal services contract entered into under the authority of §1091 of Title 10, United States Code. Accordingly, §1089 of Title 10, United States Code shall apply to personal injury lawsuits filed against the HCW(s) based on negligent or wrongful acts or omissions incident to performance within the scope of this contract. The HCW(s) is not required to maintain medical malpractice liability insurance.

2.2. HCWs providing services under this contract shall be rendering personal services to the Government and shall be subject to day-to-day supervision and control by Government personnel. Supervision and control is the process by which the individual HCW receives technical guidance, direction, and approval with regard to a task(s) within the requirements of this contract.

3. DUTY HOURS.

3.1. The Government will identify specific duty hours in each individual Task Order. Unless otherwise specified (a) in a paragraph below, (b) in an Initial Task Order within Attachments 001 through 004, (c) in a Subsequent Task Order for CLINs 0009 through 0019, or (d) as detailed in the Section H paragraph entitled, "Contractor Managed Personal Leave", services required by an individual HCW shall not exceed 80 hours per invoice (14 consecutive day) period. Any changes in the schedule shall be coordinated between the Contractor and the Government. HCWs shall arrive for each scheduled shift in a well-rested condition.

3.2. Unless otherwise stated in the individual Task Order, the Contractor shall provide no more than two individuals for each full time equivalent (FTE) and only one individual for each part-time (FTE). Therefore, unless otherwise specified in a Task Order, each individual will work a minimum of 20 hours per 7 consecutive calendar days or 40 hours per invoice period.

3.3. The Government reserves the rights to either (a) reassign HCWs within a Dental Treatment Facility (DTF) to meet patient demand or (b) temporarily assigned HCWs to another location within a 50 mile commuting area of their assigned DTF. HCWs shall receive notification 2 weeks prior to reassignment to locations within 50-mile limit. The reassignment shall not exceed 30 calendar days. The Government will consider the use of CLIN 0007 to reimburse HCWs for reassignments within 50-mile limit on a case-by-case basis.

3.4. Services of the HCWs shall not be required on the day of observance of the following federally established holidays: New Year's Day, Martin Luther King's Birthday, President's Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, and Christmas Day. The Government will compensate the Contractor for these periods of authorized absences only if the HCW is (a) scheduled to provide service on that specific day and (b) only for the number of hours of service scheduled for that specific day. Accordingly, if the Government compensates the Contractor, the Contractor shall compensate the HCW for these periods of compensated absence. No compensation will be made for HCWs who are not scheduled to provide service on that specific day.

3.5. In the instance where the Government directs the HCW to remain on duty in excess of their scheduled workday due to an unforeseen emergency or to complete patient treatment where lack of continuity of care would otherwise

jeopardize patient health, the HCW shall remain on duty. The HCW will be given an equal amount of compensatory time to be scheduled upon mutual agreement of the HCW and the Commanding Officer/Commander.

3.6. The HCW shall not unilaterally adjust their individual work schedule(s) to accommodate late arrival. The Government reserves the right to either (a) place the HCW in a Leave Without Pay (LWOP) status when they arrive late for a scheduled shift and/or (b) not compensate the Contractor.

3.7. The Contractor may elect to offer overtime to certain HCWs to fill otherwise unfilled scheduled hours of service so long as all the following conditions apply:

3.7.1. In no case shall the amount of hours worked exceed 50 hours per consecutive 7-day period or 96 hours per consecutive 14 day period, and

3.7.2. In no case shall the HCW's continued employment be contingent upon their accepting this overtime assignment, and

3.7.3. The parties agree that the Contractor is solely responsible for complying with state and/or local wage and overtime compensations laws as described herein, and

3.7.4. The parties agree that the Contractor shall not look to the Government for additional reimbursement beyond the price already contained on the applicable CLIN/SLIN for that labor category.

4. ABSENCES, PLANNED AND UNPLANNED LEAVE, LEAVE WITHOUT PAY (LWOP), AND CONTINUING EDUCATION.

4.1. Administrative Leave. The Commanding Officer/Commander retains the authority to grant administrative leave to HCWs for (a) unusual or compelling circumstances, (b) base closures or late arrivals necessitated by weather emergencies, (c) command related training, (d) command activities at alternative work sites, or (e) where applicable, as part of an incentive program. The Commanding Officer/Commander will determine whether administrative leave is compensated leave.

4.2. Furlough. Except as otherwise provided in this paragraph or unless specifically authorized in a DoD Appropriations Act or a continuing resolution, the obligation of the Contractor to perform services under this contract, and the Government's obligation to pay for such services, shall be suspended during a Government furlough. In the event of a Government furlough, the Commanding Officer/Commander will determine which HCWs are considered "critical" and therefore must report to work. Only HCWs deemed "critical" by the Government shall be compensated for services rendered during a furlough. All other HCWs will be furloughed until the Government shutdown ends or the COR notifies them that they have become "critical" employees.

4.3. Medical Emergencies. A HCW with a bona-fide medical emergency occurring while on duty or with an on-the-job injury will be provided medical care until the condition is stabilized. The Contractor will reimburse the Government for all medical services provided unless the HCW is otherwise entitled to Government healthcare services.

4.4. Personal Leave. Unless otherwise specified in a Task Order:

4.4.1. The HCW shall follow the policy of the Commanding Officer/Commander regarding the request and use of both planned and unplanned leave. If the HCW is absent for three or more consecutive unplanned days, the Commanding Officer/Commander may require written documentation from a qualified health care provider that the HCW is free from communicable disease. The Government reserves the right to examine and/or re-examine any HCW who meets this criterion.

4.4.2. Leave Accrual. Unless otherwise specified in a Task Order:

4.4.2.1. FOR HEALTHCARE WORKERS AT THE NAVAL DENTAL CENTER GULF COAST, PENSACOLA FL AND SUBORDINATE BRANCH CLINICS ONLY. Eight hours of personal leave are accrued by each HCW at the end of every 80-hour period worked, equivalently apportioned for part-time employees and/or partial year Task Orders. Personal leave shall be used for both planned (vacation) and unplanned absences (sickness). Planned absences from assigned duties shall be requested with 15 working days advance notice, in writing, to the Commander/Commanding Officer. However, the Government retains the right to require more than 15 working days advance notice, consistent with local policies and procedures. The Contractor shall compensate the HCW for periods of authorized absence. Unless otherwise specified in a Task Order, all accrued leave shall be used within 90 days following the completion of a 12-month Task Order if a Logical Follow-on Task Order has been issued. If a Logical Follow-on Task Order is not issued, all unused leave shall be either used by the end of the Task Order period or it will be forfeited.

4.4.2.2. FOR HEALTHCARE WORKERS AT THE NAVAL DENTAL CENTER GULF COAST, PENSACOLA FL AND SUBORDINATE BRANCH CLINICS ONLY. In all cases, notwithstanding whether one or more than one HCW(s) provides services for the period of a Task Order, not more than 208 hours of personal leave will be provided per FTE of effort for a twelve month Task Order period, apportioned for Task Order periods of less than twelve months.

4.4.2.3. FOR HEALTHCARE WORKERS AT THE NAVAL DENTAL CENTER SOUTHEAST, JACKSONVILLE FL AND SUBORDINATE BRANCH CLINICS ONLY. Eight hours of personal leave are accrued by each HCW at the end of every 80-hour period worked, equivalently apportioned for part-time employees and/or partial year Task Orders. Personal leave shall be used for both planned (vacation) and unplanned absences (sickness). Planned absences from assigned duties shall be requested with 15 working days advance notice, in writing, to the Commander/Commanding Officer. However, the Government retains the right to require more than 15 working days advance notice, consistent with local policies and procedures. The Contractor shall compensate the HCW for periods of authorized absence. Unless otherwise specified in a Task Order, all accrued leave shall be used within 90 days following the completion of a 12 month Task Order if a Logical Follow-on Task Order has been issued. If a Logical Follow-on Task Order is not issued, all unused leave shall be either used by the end of the Task Order period or it will be forfeited. If personal leave is carried over beyond the completion date of the Task Order (i.e. to be used in the subsequent 90 days), the HCW shall provide the COR with a schedule for the use of that leave not later than the first workday of the Logical Follow-on Task Order. HCWs shall not presume that their leave schedule has been approved unless notified, in writing, by the COR. The Government will make every effort to accommodate all leave requests; however, the Commander/Commanding Officer reserves the right to unilaterally adjust these leave schedules to meet the demand for patient care.

4.4.2.4. FOR HEALTHCARE WORKERS AT THE NAVAL DENTAL CENTER SOUTHEAST, JACKSONVILLE FL AND SUBORDINATE BRANCH CLINICS ONLY. In all cases, notwithstanding whether one or more than one HCW(s) provides services for the period of a Task Order, not more than 208 hours of personal leave will be provided per FTE of effort for a twelve month Task Order period, apportioned for Task Order periods of less than twelve months.

4.4.2.5. FOR ALL OTHER ACTIVITIES NOT SPECIFICALLY REFERENCED ABOVE. Eight hours of personal leave are accrued by each HCW at the end of every 80-hour period worked, equivalently apportioned for part-time employees and/or partial year Task Orders. Personal leave shall be used for both planned (vacation) and unplanned absences (sickness). Planned absences from assigned duties shall be requested with 15 working days advance notice, in writing, to the Commander/Commanding Officer. However, the Government retains the right to require more than 15 working days advance notice, consistent with local policies and procedures. The Contractor shall compensate the HCW for periods of authorized absence. If a Logical Follow-on Task Order is not issued, all unused leave shall be either used by the end of the Task Order period or it will be forfeited.

4.4.2.5.1. FOR ALL OTHER ACTIVITIES NOT SPECIFICALLY REFERENCED ABOVE. In all other cases, unless otherwise specified in an individual Task Order(s), notwithstanding whether one or more than one HCW(s) provides services for the period of a Task Order, not more than 208 hours of total leave will be provided per FTE of effort for a twelve month Task Order period, apportioned for Task Order periods of less than twelve months.

4.4.3. If the Task Order is terminated for default, there will be no reimbursement for any unused accrued leave balance. In the event that the HCW gives notice of employment termination, all accrued leave must be used within that notice period, or forfeited. The Government will not extend the HCW's termination date to accommodate unused leave balances.

4.4.4. Continuing Education. The Commanding Officer/Commander may also grant authorization for planned absences to allow the HCW to attend continuing education courses. This is in addition to the planned and unplanned absences specified above. The Government may compensate the HCW for these periods of authorized absence if the continuing education courses are required to maintain licensure or certifications. This compensation will not exceed 40 hours per 12 month Task Order, equivalently apportioned for part-time employees and/or partial year Task Orders. The Commanding Officer/Commander may also advance leave for continuing education. The Government will not reimburse the HCW for the cost of any course tuition and/or other related education expense but may choose to reimburse certain reasonable travel expenses using CLIN 0007. The HCW shall provide proof of attendance and successful completion of continuing education to the Commanding Officer/Commander upon request.

4.4.4.1. Healthcare workers shall have 6 months of creditable service either under this contract or the immediate predecessor contract to be eligible for authorized planned absence(s) for continuing education. At the discretion of the Commanding Officer/Commander, this provision may be waived if the continuing education is (a) in the best interest of the Government, (b) enhances patient care, and (c) the Government can reasonably expect to receive a benefit from the continuing education (time and cost considered). If waived, the provisions in the preceding paragraph shall apply.

4.4.4.2. FOR HEALTHCARE WORKERS AT THE NAVAL DENTAL CENTER SOUTHEAST, JACKSONVILLE FL AND SUBORDINATE BRANCH CLINICS ONLY. The continuing education benefit will not exceed 5 scheduled workdays for dentists and 3 scheduled workdays for dental hygienists per 12 month Task Order, equivalently apportioned for part-time employees and/or partial year Task Orders. There is no continuing education benefit for dental assistants. The Commanding Officer/Commander may also advance leave for continuing education.

4.4.5. Reserved.

4.4.6. Reserved.

4.4.7. Leave Without Pay.

4.4.7.1. FOR HEALTHCARE WORKERS AT THE NAVAL DENTAL CENTER GULF COAST, PENSACOLA FL AND SUBORDINATE BRANCH CLINICS ONLY. Upon exhaustion of any leave balance the HCW shall enter a leave without pay (LWOP) status. Unless waived by the Contracting Officer, the Contractor shall provide a qualified replacement for any HCW who has been on LWOP status for a total of 24 hours or more during any Task Order period, equivalently apportioned for part-time employees and/or partial year Task Orders. At the discretion of the Commanding Officer/Commander, LWOP taken in conjunction with maternity leave may not be subject to this limitation.

4.4.7.2. FOR HEALTHCARE WORKERS AT THE NAVAL DENTAL CENTER SOUTHEAST, JACKSONVILLE FL AND SUBORDINATE BRANCH CLINICS ONLY. Upon exhaustion of any leave balance the HCW shall enter a leave without pay (LWOP) status. Unless waived by the Contracting Officer, the Contractor shall provide a qualified replacement for any HCW who has been on LWOP status for a total of 3 or more occurrences during any Task Order period, equivalently apportioned for part-time employees and/or partial year Task Orders. An "occurrence" is any LWOP incident exceeding 30 scheduled work minutes. At the discretion of the Commanding Officer/Commander, LWOP taken in conjunction with maternity leave may not be subject to this limitation.

4.4.7.3. FOR ALL OTHER ACTIVITIES NOT SPECIFICALLY REFERENCED ABOVE. Upon exhaustion of any leave balance the HCW shall enter a leave without pay (LWOP) status. Unless waived by the Contracting

Officer, the Contractor shall provide a qualified replacement for any HCW who has been on LWOP status for a total of 24 hours or more during any Task Order period, equivalently apportioned for part-time employees and/or partial year Task Orders. At the discretion of the Commanding Officer/Commander, LWOP taken in conjunction with maternity leave may not be subject to this limitation. The Government shall not compensate the Contractor for HCWs in a Leave Without Pay (LWOP) status.

4.4.8. Maternity Leave. Up to twelve weeks of maternity “leave without pay” may be granted to the HCW during the period of the Task Order if either of two conditions should occur: (1) the birth of a son or daughter of the HCW and the care of such son or daughter; or, (2) the placement of a son or daughter with the HCW for adoption or foster care. The Commanding Officer/Commander and Contractor will agree on the length of maternity leave. At the option of the Government and pursuant to paragraphs herein, any or all accrued leave (leave with pay) shall be first applied towards maternity leave before going into a leave without pay status.

4.4.9. Military Reserve Leave. Documented military leave for military reservists is permitted, not to exceed 15 calendar days per 12-month period worked. This leave may be taken intermittently, i.e., one day at a time. Military leave is compensated leave. The HCW shall follow the policy of the DTF with respect to advance notification for scheduled military duties. Military leave for part time employees shall be prorated.

4.4.10. Jury Duty.

4.4.10.1. Administrative leave may be granted for HCWs selected to serve on jury duty. Requests for jury duty leave shall be submitted to the Commanding Officer/Commander in the same manner as planned leave is requested as soon as jury duty is confirmed. The HCW is required to provide the Commanding Officer/Commander with as much written notice as possible prior to reporting for jury duty, and shall supply documentation regarding the necessity for and the length of absence for jury duty. A HCW whose position is deemed critical by the Commanding Officer/Commander may be issued a written request for the court to excuse or delay the HCW’s jury duty obligation.

4.4.10.2. The Government will reimburse the Contractor (as administrative leave) for the HCW’s documented, actual service as a juror up to 5 scheduled workdays per Task Order. In those instances where a contract HCW is in a jury duty status in excess of 5 scheduled workdays, the Commanding Officer/Commander may require a qualified replacement HCW. In all instances where a contract HCW is in a jury duty status in excess of 10 scheduled workdays, the Contractor shall provide a qualified replacement HCW. Upon notification that a qualified replacement HCW is required, the Government will no longer reimburse the Contractor as administrative leave.

4.4.11. Compensatory Time. Compensatory Time must be approved prior to commencement of services. If compensatory time is either approved by the Government or specifically permitted in individual task orders, compensatory time shall be used within the same invoice period that it is earned unless the Commanding Officer/Commander prospectively approves leave carry over. Compensatory time earned as part of an incentive program shall be used in accordance with that incentive program and may or may not be subject to this requirement.

4.4.11.1. In all cases, compensatory time earned in one Task Order period cannot be carried over to another Task Order period. Upon (a) termination of the employment of a HCW or, (b) a HCW changing their employer from one Contractor to another Contractor or, (c) the loss of employment as a result of the Government’s decision not to issue a logical follow-on Task Order, all unused compensatory time will be lost.

5. FAILURE AND/OR INABILITY TO PERFORM.

5.1. Should a HCW be unable to perform duties under any Task Order due to a medical or physical disability they shall be replaced within 48 calendar hours of notification by the Government. The Contracting Officer may suspend any individual’s performance under the Task Order until such medical or physical disability is resolved. If performance under the Task Order is so suspended, no reimbursement shall be made to the Contractor unless the requirements of the staffing schedule are otherwise met.

5.2. If the clinical privileges of a HCW have been summarily suspended, the Government reserves the right to suspend any or all services under a Task Order until clinical privileges are reinstated. No reimbursement will be made to the Contractor for the affected HCW so long as performance is suspended.

5.3. Any HCW(s) demonstrating impaired judgment will be removed from providing healthcare services. The Government reserves the right to remove any employee who, in the judgment of a licensed physician, is impaired by drugs or alcohol.

5.4. Any HCW(s) who has demonstrated alcohol or drug impairment may be allowed to return to work under the terms of this contract only with prior Government approval.

6. CONTRACT STATUS REVIEW (CSR) MEETINGS.

6.1. Each 30–90 days during the contract, the Government will require the Contractor to discuss issues germane to the contract. The Government expressly retains the right to require the Contractor to attend face-to-face meetings at the Government's facilities. At these meetings, the Government shall inform the Contractor of any contract or employee-related issues that require corrective action on the part of the Contractor. The Government shall not reimburse the Contractor for the expenses incurred relative to these meetings. At a minimum, these meetings will discuss:

6.1.1. New HCWs who have begun providing services since the last CSR. The Government continually evaluates each HCW's (a) personal interaction skills with patients and other staff, (b) their demonstrated fluency in the English language and, (c) their demonstrated familiarity with the equipment, supplies and materiel commonly used in the work site. The Government encourages the Contractor to institute probationary policies for new employees, and

6.1.2. Contract administration issues relative to the efficient operation of the clinical setting, and

6.1.3. Contractor generated opportunities or innovations aimed at improving services, and

6.1.4. Any other item to the mutual benefit of the Contractor and the Government.

6.2. The Contractor is advised that these meetings are strictly informational and do not change the terms and conditions of the contract unless the Contracting Officer issues a signed modification.

7. CREDENTIALING.

7.1. General Information.

7.1.1. The Commanding Officer/Commander is the sole authority for granting and revoking clinical privileges. HCWs shall not provide health care services until the Commanding Officer/Commander has granted professional staff membership and clinical privileges. The Commanding Officer/Commander will not grant clinical privileges until the Government determines that credentials information has been satisfactorily verified.

7.1.2. For positions at Navy facilities, the Government will not consider exceptions to the Navy credentials review and clinical privileging process as defined by BUMEDINST 6320.66C, subsequent revisions to that instruction, and DTF instructions. The Contractor's failure to nominate HCWs who meet the terms and conditions of this contract, A copy of BUMEDINST 6320.66C may be obtained at <http://navymedicine.med.navy.mil/instructions/default.asp?iPageNum=4&sort=id&desc=1> including the requirements of BUMEDINST 6320.66C, shall not excuse non-performance of contract requirements.

7.1.3. For positions at Army facilities, the Government will not consider exceptions to the Army credentials review and clinical privileging process as defined by Army Regulation 40-68 and DTF instructions. The Contractor's failure to nominate HCWs who meet the terms and conditions of this contract, including the requirements of Army

Regulation 40-68, shall not excuse non-performance of contract requirements. A copy of Army Regulation 40-68 may be at http://www.army.mil/usapa/epubs/pdf/r40_68.pdf

7.1.4. For positions at Air Force facilities, the Government will not consider exceptions to the Air Force credentials review and clinical privileging process as defined by Air Force Instruction 44-119 and DTF instructions. The Contractor's failure to nominate HCWs, who meet the terms and conditions of this contract, including the requirements of Air Force Instruction 44-119, shall not excuse non-performance of contract requirements. A copy of Air Force Instruction 44-119 may be obtained at <http://www.e-publishing.af.mil/pubfiles/af/44/afi44-119/afi44-119.pdf>.

7.1.5. The Government considers the following to be grounds for termination of the contract: HCWs within the DTF who are not currently privileged; HCWs who fail to maintain their privileges; or, HCWs who have privileges suspended or revoked. The Government will make no payment for services provided by such HCWs.

7.1.6. The Contractor shall promptly replace any HCW who fails to maintain staff appointment or clinical privileges.

7.1.7. HCWs shall provide proof of U.S. Employment Eligibility (Attachment 010). No alien shall be allowed to perform services under this contract in violation of the Immigration Laws of the United States.

7.1.8. HCWs shall provide a written Personal and Professional Information Sheet (PPIS) and a current resume or Curriculum Vitae as part of the credentialing package.

7.1.9. The HCW is responsible for complying with all applicable state licensing regulations. HCWs shall submit all state dental/medical licenses held as part of the credentialing package.

7.1.10. Any contract HCW under suspension due to an investigation at any facility or licensing agency shall not be permitted to provide service under this contract. The Contractor shall notify the COR within 24 hours of occurrence of suspension concerning any of its employees. These individuals may only provide services if the Commanding Officer/Commander has subsequently restored privileges.

7.1.11. The denial, suspension, limitation, or revocation of clinical privileges based upon practitioner impairment or misconduct will be reported to the appropriate licensing authorities of the state in which each license is held.

7.1.12. The Government will appoint a member of Government's Professional Affairs staff to assist the Contractor on all matters relating to credentialing and the application for clinical privileges. The Contractor shall appoint a member of its professional affairs or recruitment staff to coordinate the submission of credentialing information, assuring each file constitutes a complete and valid application for all HCWs.

7.1.13. The Government reserves the right to extend the credentials of a HCW who has been granted delineated clinical privileges on a predecessor contract without a new or additional credentialing action. This extension may only occur (a) within the same command and, (b) when there is no increased clinical competency requirement of the HCW and, (c) when there is no significant change in the scope of clinical practice of the HCW and, (d) when there is no gap in performance between the contracts and, (e) when the HCW has had acceptable performance evaluations.

7.1.14. Notwithstanding any actions taken or forborne by the Government's representative, the responsibility to provide fully qualified HCWs remains solely with the Contractor. Nothing herein shall limit the Commanding Officer/Commander's decision to deny clinical privileges to HCWs or to revoke clinical privileges already granted.

7.1.15. The Contractor shall maintain a complete employment file for each HCW during the life of this contract. This file shall contain, at a minimum, all the documentation submitted to the Government for each employee. This file and the documents therein shall be kept current and will be made available for Government inspection upon request.

7.1.16. The Contractor shall submit a recent National Practitioner Data Bank Self-Query to the Professional Affairs Department as part of each credentialing package. The Professional Affairs Department will define the term “recent” to the Contractor as that standard is defined within the applicable service instructions/directives and by the JCAHO.

7.2. Navy Requirements.

7.2.1. Individual Credentials Files (ICFs). Following award of a Task Order, the Contractor shall submit to the Professional Affairs Department, via the COR, a completed Individual Credentials File (ICF). The ICF, which will be maintained at the DTF, contains specific information regarding qualifying degrees and licenses, past professional experience and performance, education and training, health status, and competency as identified in BUMEDINST 6320.66C and subsequent revisions. Section 4 and Appendices B, F and R detail the ICF requirements. ICFs for HCWs who do not currently have an ICF on file at the facility shall be submitted at least 30 days prior to commencement of services unless otherwise specified in the individual Task Order. For those HCWs who currently have an ICF on file, an updated Personal and Professional Information Sheet (PPIS) for Privileged Providers, with notation that a complete up-to-date ICF is on file, shall be submitted no less than 15 days prior to commencement of services.

7.2.2. Individual Professional Files (IPFs). Following award of a Task Order, the Contractor shall submit to the Professional Affairs Department, via the COR, a completed Individual Professional File (IPF). The IPF, which will be maintained at the DTF, contains specific information regarding qualifying degrees and licenses, past professional experience and performance, education and training, health status, and competency as identified in BUMEDINST 6320.66C and subsequent revisions. Section 4 and Appendix S detail the IPF requirements. For those health care personnel who do not currently have an IPF on file at the facility, IPFs shall be submitted at least 30 days prior to commencement of services unless otherwise specified in the individual Task Order. For those personnel who currently have an IPF on file, an updated Personal and Professional Information Sheet (PPIS) for Nonprivileged Providers, with notation that a complete up-to-date IPF is on file, shall be submitted no less than 15 days prior to commencement of services.

7.3. Army Requirements.

7.3.1. Practitioner’s Credentials File (PCF). Following award of a Task Order for Army healthcare services, the Contractor shall submit to the Commander of the Dental Activity via the COR, a completed Practitioner’s Credentials File (PCF). The PCF, which will be maintained at the DTF, contains the specific information with regard to qualifying degrees and licenses, past professional experience and performance, education and training, health status, and competency as identified in Army Regulation 40-68, 4.11 and subsequent revisions. PCF’s for health care practitioners who do not currently have a PCF on file at the facility shall be submitted at least 30 days prior to commencement of services unless otherwise specified in the individual Task Order. For those health care providers who currently have a PCF on file, an updated Personal and Professional Information Sheet (PPIS) for Privileged Providers, with notation that a complete up to date PCF is on file, shall be submitted no less than 15 days prior to commencement of services.

7.3.2. Practitioner’s Activity File (PAF). Following award of a Task Order for Army healthcare services, the Contractor shall submit to the Commander of the Dental Activity, via the COR, a completed Practitioner’s Activity File (PAF). The PAF, which will be maintained at the DTF, contains specific information with regard to qualifying degrees and licenses, past professional experience and performance, education and training, health status, and competency as identified in Army Regulation 40-68, 4.12 and subsequent revisions. For those health care personnel who do not currently have a PAF on file at the facility, PAF’s shall be submitted at least 30 days prior to commencement of services unless otherwise specified in the individual Task Order. For those personnel who currently have a PAF on file, an updated Personal and Professional Information Sheet (PPIS) for Nonprivileged Providers, with notation that a complete up to date PAF is on file, shall be submitted no less than 15 days prior to commencement of services.

7.4. Air Force Requirements.

7.4.1. Practitioner's Credentials File (PCF). Following award of a Task Order for Air Force healthcare services, the Contractor shall submit to the Commander of the Dental Activity via the COR, a completed Practitioner's Credentials File (PCF). The PCF, which will be maintained at the DTF, contains the specific information with regard to qualifying degrees and licenses, past professional experience and performance, education and training, health status, and competency as identified in Air Force Instruction 44-119, 4D and subsequent revisions. PCF's for health care practitioners who do not currently have a PCF on file at the facility shall be submitted at least 30 days prior to commencement of services unless otherwise specified in the individual Task Order. For those health care providers who currently have a PCF on file, an updated Personal and Professional Information Sheet (PPIS) for Privileged Providers, with notation that a complete up to date PCF is on file, shall be submitted no less than 15 days prior to commencement of services.

7.4.2. Practitioner's Activity File (PAF). Following award of a Task Order for Air Force healthcare services, the Contractor shall submit to the Commander of the Dental Activity, via the COR, a completed Practitioner's Activity File (PAF). The PAF, which will be maintained at the DTF, contains specific information with regard to qualifying degrees and licenses, past professional experience and performance, education and training, health status, and competency as identified in Air Force Instruction 44-119 4E and subsequent revisions. For those health care personnel who do not currently have a PAF on file at the facility, PAF's shall be submitted at least 30 days prior to commencement of services unless otherwise specified in the individual Task Order. For those personnel who currently have a PAF on file, an updated Personal and Professional Information Sheet (PPIS) for Nonprivileged Providers, with notation that a complete up to date PAF is on file, shall be submitted no less than 15 days prior to commencement of services.

7.5. Qualifications Packages.

7.5.1. Navy Requirements.

7.5.1.1. The Contractor shall submit a qualifications package to the COR for each HCW who is not required to submit either an Individual Credentials File (ICF) or an Individual Professional File (IPF). Prior to providing services under a Task Order, the COR will verify that each HCW possesses the qualifications of the Task Order.

7.5.1.2. The Contractor shall submit all documentation necessary to demonstrate compliance with both the qualification requirements herein (Attachments 001 through 005 for the minimum quantities) and for any subsequent Task Order. The Contractor shall submit all documentation to the COR per the terms of the Task Order. The COR will retain the Qualifications Package.

7.5.2. Army Requirements.

7.5.2.1. The Contractor shall submit a qualifications package to the COR for each HCW who is not required to submit either a Practitioner's Credential File (PCF) or a Practitioner's Activity File (PAF). Prior to providing services under a Task Order, the COR will verify that each HCW possesses the qualifications of the Task Order.

7.5.2.2. The Contractor shall submit all documentation necessary to demonstrate compliance with both the qualification requirements herein (Attachments 001 through 005 for the minimum quantities) and for any subsequent Task Order. The Contractor shall submit all documentation to the COR per the terms of the Task Order. The COR will retain the Qualification Package.

7.5.3. Air Force Requirements.

7.5.3.1. The Contractor shall submit a qualifications package to the COR for each HCW covered by the Air Force credentials review and clinical privileging process as defined by Air Force Instruction 44-119 and DTF instructions. Prior to providing services under a Task Order, the COR will verify that each HCW possesses the qualifications of the Task Order.

7.5.3.2. The Contractor shall submit all documentation necessary to demonstrate compliance with both the qualification requirements herein (Attachments 001 through 005 for the minimum quantities) and for any subsequent

Task Order. The Contractor shall submit all documentation to the COR per the terms of the Task Order. The COR will retain the Qualification Package.

7.6. Interviews.

7.6.1. The Government reserves the right to conduct interviews for HCWs proposed. If interviews will be required, specific information will be contained in the TOPR. This requirement is not applicable to the Government's Minimum Requirements contained in CLINs 0001 through 0004.

8. GENERAL ADMINISTRATIVE/TRAINING DUTIES AND RESPONSIBILITIES. The HCW shall perform a full range of services on site using Government furnished facilities, equipment and supplies. Actual clinical activity will be a function of the overall demand for these services. All HCWs shall:

8.1. Participate in meetings to review and evaluate the care provided to patients, identify opportunities to improve the care delivered, and recommend corrective action when problems exist. Should a meeting occur outside of scheduled working hours, the HCW shall read and initial the minutes of the meeting.

8.2. Participate in and/or provide training to students and/or members of the clinical and administrative staff on subjects germane to their specialties.

8.3. Demonstrate an awareness and sensitivity to patient/family/significant others' rights and needs.

8.4. Demonstrate an awareness of the legal environment inherent in patient care and strive to provide the requisite quality of care to reduce the legal risk in each situation.

8.5. Demonstrate appropriate delegation of tasks and duties in the direction and coordination of health care team members, patient care, and Clinic activities and provide training and/or direction as applicable to supporting Government employees assigned to the HCW during performance of duties.

8.6. Maintain an awareness of responsibility and accountability for their own professional practice.

8.7. Participate in continuing education to meet their individual professional growth.

8.8. Attend annual renewal of the following training requirements provided by the Government: family advocacy, disaster training, infection control, sexual harassment, bloodborne pathogens and fire/safety.

8.9. Participate in the implementation of the DTF's Family Advocacy Program as directed. Participation shall include, but not be limited to, appropriate standards for examination, documentation, treatment and reporting.

8.10. Attend Composite Health Care System (CHCS) and Corporate Information System (CIS) training provided by the Government for a minimum of four (4) hours, up to a maximum of 24 hours.

8.11. Adhere to infection control guidelines and practice universal precautions.

8.12. Contribute to the safe and effective operation of equipment used in patient care within a safe working environment. This shall include safe practices of emergency procedures, proper handling of hazardous materials and maintaining physical security.

8.13. Undergo orientation appropriate to the position. Orientation may be waived for personnel who have previously provided service at the DTF. Orientations include initial training requirements (e.g. fire, safety, infection control, and family advocacy) and information systems orientation (including the Composite Health Care System (CHCS) and the Ambulatory Data System (ADS)). The Government reserves the right to adjust orientation schedules to meet mission and workload requirements. In addition, HCWs identified as CHCS Super-users shall undergo additional training. Requirements for these CHCS Super-users will be specified in individual TOPRs.

8.14. HCWs shall gain and maintain certification in BLS or equivalent as stated in Section H.6.1.4. The Government will provide re-certification to Contractor employees on an equal status as other Government employees if that training is available. However, in all cases, the ultimate responsibility for initial and re-certification remains with the Contractor.

9. GENERAL PROVISIONS APPLICABLE TO ALL HCWs.

9.1. HCWs shall comply with Executive Order 12731, October 17, 1990, (55 Fed. Reg. 42547), Principles of Ethical Conduct for Government Officers and Employees. HCWs shall also comply with Department of Defense (DoD) other Government regulations implementing this Executive Order.

9.2. HCWs shall become acquainted with and obey all station regulations, shall perform in a manner to preclude the waste of utilities, and shall not use Government telephones for personal business. All motor vehicles operated on these installations by HCWs shall be registered with the base security service according to applicable directives. Eating by HCWs is prohibited in patient care areas/Clinics and is restricted to designated areas. Smoking is prohibited in all Clinic facilities.

9.3. HCWs are NOT prohibited, by reason of employment under this contract, from conducting a private practice or other employment so long as there is no conflict with the performance of duties under this contract. However, such private practice or other such employment shall not be conducted during those hours that the HCW is required to provide services under this contract. HCWs shall make no use of Government facilities or property in connection with such other employment.

9.4. HCWs shall be neat, clean, well groomed, and in appropriate clothing when in patient care and public areas. All clothing shall be free of visible dirt and stains, and shall fit correctly. Fingernails shall be clean and free from dirt and hair shall be neatly trimmed and combed. HCW shall comply with Navy Standards for body piercing and wearing of jewelry. HCWs shall display an identification badge, which includes the HCW's full name and professional status (furnished by the Government) on the right breast of the outer clothing. Security badges provided by the Government shall be worn when on duty.

9.5. Military Service Secretaries have determined that the illegal possession or use of drugs and paraphernalia in a military setting contributes directly to military drug abuse and undermines Command efforts to eliminate drug abuse among military personnel. The policy of the Department of Defense is to deter and detect drug offenses on military installations. Measures to be taken to identify drug offenses on military installations, and to prevent introduction of illegal drugs and paraphernalia, include routine random inspection of vehicles while entering or leaving, with drug detection dogs when available, and random inspection of personal possessions on entry or exit. If there is probable cause to believe that a HCW has been engaged in use, possession, or trafficking of drugs, the HCW may be detained for a limited period of time until he/she can be removed from the installation or turned over to local law enforcement personnel having jurisdiction. When illegal drugs are discovered in the course of an inspection or search of a vehicle operated by a HCW, the HCW and vehicle may be detained for a reasonable period of time necessary to surrender the individual and vehicle to appropriate civil law enforcement personnel. Action may be taken to suspend, revoke, or deny clinical privileges as well as installation driving privileges. Implicit with the acceptance of this contract is the agreement by the HCW to comply with all Federal and State laws as well as regulations issued by the Commander of the military installation concerning illegal drugs and paraphernalia.

9.6. All financial, statistical, personnel, and technical data which are furnished, produced or otherwise available to the Contractor during the performance of this contract are considered confidential business information and shall not be used for purposes other than performance of work under this contract. Such data shall not be released by the Contractor without prior written consent of the COR. Any presentation of any statistical or analytical materials, or any reports based on information obtained from studies covered by this contract, will be subject to review and approval by the COR before publication or dissemination.

9.7. Services provided under this contract shall be performed in accordance with all State, County, Department of Defense, Navy, Army and Air Force (as applicable), dental treatment facility guidelines and reporting requirements.

Services provided under this contract shall be performed in accordance with DoD, military services, and DTF instructions, policies and procedures, and all applicable State and local laws.

9.8. Comply with the standards of the Joint Commission, applicable provisions of law and the rules and regulations of any and all governmental authorities pertaining to:

9.8.1. Licensure and/or regulation of healthcare personnel in treatment facilities, and

9.8.2. The regulations and standards of professional practice of the treatment facility, and

9.8.3. The bylaws of the treatment facility's professional staff.

END OF SECTION C

Changes in Section F

1. PERIOD OF PERFORMANCE

Performance under the initial Task Orders (CLINs 0001 through 0004) shall be 1 October 2003 through 30 September 2004. The period of performance for subsequent orders will be specified in each Task Order.

2. PLACE OF PERFORMANCE

The specific locations of services to be furnished will be identified in each Task Order. For the initial Task Orders, the place of performance will be as follows:

0001AA (Dental Hygienist) Branch Dental Clinic, Naval Aviation Technical Training Center, Pensacola, FL;
0001AB (Dental Hygienist) Branch Dental Clinic, Naval Technical Training Center, Corry Station, Pensacola, FL;
0001AC (Dental Hygienist) Branch Dental Clinic, Panama City, FL;
0001AD (Dental Hygienist) Branch Dental Clinic, New Orleans, LA;
0001AE (Dental Hygienist) Branch Dental Clinic, Naval Construction Battalion Center, Gulfport, MS;
0001AF (Dental Hygienist) Branch Dental Clinic, Meridian, MS;
0001AG (Dental Hygienist) Branch Dental Clinic, Pascagoula, MS;
0001AH (Dental Hygienist) Branch Dental Clinic, Naval Air Station, Corpus Christi, TX;
0001AJ (Dental Hygienist) Branch Dental Clinic, Naval Air Station, Kingsville, TX;
0001AK (Dental Hygienist) Branch Dental Clinic, Naval Air Station, Fort Worth, TX;
0001AL (Dental Hygienist) Branch Dental Clinic, Ingleside, TX;
0002AA (Dental Assistant) Branch Dental Clinic, Naval Air Station, Pensacola, FL;
0002AB (Dental Assistant) Branch Dental Clinic, Naval Aviation Technical Training Center, Pensacola, FL;
0002AC (Dental Assistant) Branch Dental Clinic, Naval Technical Training Center Corry Station, Pensacola, FL;
0002AD (Dental Assistant) Branch Dental Clinic, Naval Air Station, Whiting Field, FL;
0002AE (Dental Assistant) Branch Dental Clinic, New Orleans, LA;
0002AF (Dental Assistant) Branch Dental Clinic, Naval Construction Battalion Center, Gulfport, MS;
0002AG (Dental Assistant) Branch Dental Clinic, Meridian, MS;
0002AH (Dental Assistant) Branch Dental Clinic, Pascagoula, MS;
0002AJ (Dental Assistant) Branch Dental Clinic, Naval Support Activity, Millington, TN;
0002AK (Dental Assistant) Branch Dental Clinic, Naval Air Station, Corpus Christi, TX;
0002AL (Dental Assistant) Branch Dental Clinic, Naval Air Station, Kingsville, TX;
0002AM (Dental Assistant) Branch Dental Clinic, Naval Air Station, Fort Worth, TX;
0002AN (Dental Assistant) Keesler Air Force Base Biloxi, MS;
0003AA (Dental Hygienist) Naval Dental Center Southeast, Jacksonville FL area Branch Dental Clinics including Branch Dental Clinic, Naval Air Station, Jacksonville, FL; and Branch Dental Clinic, Naval Station, Mayport, FL; and Branch Dental Clinic, Naval Submarine Base, Kings Bay, GA;
0003AB (Dental Hygienist) Branch Dental Clinic, Naval Air Station, Key West, FL;
0003AC (Dental Hygienist) Branch Dental Clinic Atlanta, Naval Air Station, Marietta, GA;

0003AD (Dental Hygienist) Branch Dental Clinic Charleston, Goose Creek, SC;
0004AA (Dental Assistant) Naval Dental Center Southeast, Jacksonville FL area Branch Dental Clinics including
Branch Dental Clinic, Naval Air Station, Jacksonville, FL; and Branch Dental Clinic, Naval Station, Mayport, FL;
and Branch Dental Clinic, Naval Submarine Base, Kings Bay, GA;
0004AB (Dental Assistant) Branch Dental Clinic Naval Air Station, Key West, FL;
0004AC (Dental Assistant) Branch Dental Clinic MCLB, Albany, GA.

END OF SECTION F

Changes in Section H

1. TASK ORDER PROCEDURES. The Government intends to award at least 3 multiple indefinite delivery, indefinite quantity (ID/IQ) contracts resulting from the issuance of this solicitation. Services will be procured via the award of Task Orders issued against the basic contract. There are two procedures to be followed for the submission of offers for award of initial and subsequent Task Orders.

1.1. INITIAL TASK ORDERS. The Government intends to award initial Task Orders to each offeror selected for contract award. Priced Business proposals for initial Task Orders must be submitted with each offeror's contract proposal and must be responsive to the Government requirements detailed herein. Initial Task Orders will order the contract minimum quantity of services (CLINs 0001 through 0004) required from each contract awardee. The type of services to be procured, as well as position-specific statements of work for the initial Task Orders are provided as Attachments 001 through 005. Business Proposals for initial Task Orders must be submitted with the offeror's response to this solicitation.

1.1.1. PROVISION OF PERSONNEL TO SATISFY THE GOVERNMENT'S MINIMUM REQUIREMENTS. Awardees of initial Task Orders for the Government's minimum requirements (CLINs 0001 through 0004) will be required to propose specific personnel within 30 days following contract award (or as specified in the Task Order) to satisfy the minimum quantity of healthcare workers (HCWs). Awardees shall submit the contractually required evidence that each of the proposed HCWs meet the requirements specified in Section C, Section H, and Attachments 001 through 005. Failure to meet the 30-day requirement (or as specified in the Task Order) may result in termination of the Task Order. Additionally, failure to submit complete packages within 30 days following contract award (or as specified in the Task Order) may be considered as negative past performance information that may jeopardize the award of future Task Orders, and/or may result in termination of the contract.

1.2. SUBSEQUENT TASK ORDERS. The Government intends to order additional services, up to the stated contract maximum quantities in CLINs 0009 through 0019 throughout the term of this contract. Special procedures and regulations apply to the award of subsequently awarded Task Orders. These procedures are provided below.

1.2.1. FAIR OPPORTUNITY FOR CONSIDERATION. One or more Task Orders may be issued during the performance period of this contract. The Government will provide all Contractors a, "fair opportunity for consideration". "Fair opportunity" is not the same evaluation process used to make the initial award of the IDIQ contracts. In accordance with FAR 16.505(b), the Contracting Officer will give each Contractor a "fair opportunity" to be considered for each order in excess of \$2,500 unless one of the exceptions below applies.

1.2.1.1. EXCEPTIONS TO FAIR OPPORTUNITY FOR CONSIDERATION. Contractors will not be given a fair opportunity to be considered for Task Orders which are expected to exceed \$2,500 when the Contracting Officer determines one of the following conditions apply:

1.2.1.1.1. The agency need for services is of such urgency that providing such an opportunity would result in unacceptable delays and/or,

1.2.1.1.2. Only one awardee is capable of providing the services required at the level of quality required because the services ordered are unique or highly specialized and/or,

1.2.1.1.3. The order should be issued on a sole-source basis in the interest of economy and efficiency as a logical follow-on to a Task Order already issued under this contract, provided that all awardees were given fair opportunity to be considered for the original order. For the purposes of this contract, the Contracting Officer may negotiate a sole source logical follow-on Task Order with the current Contractor providing previously competed services. In the event an increase in the amount of previously competed services is required by the Government, the contracting officer may negotiate a sole source logical follow-on Task Order with the current Contractor provided the required additional services do not represent more than one full time equivalent position or 20% of the total competed labor hours for the affected labor category (categories), whichever is greater. A sole source logical follow-on must be for the same type of service previously competed at the same location(s). When deciding whether to negotiate a sole

source logical follow-on Task Order with the current Contractor, consideration will be given to the Contractor's past performance, continuity of HCW services, and price and/or,

1.2.1.1.4. It is necessary to place an order to satisfy a minimum quantity.

1.2.2. TASK ORDER PROPOSAL REQUESTS (TOPRs). Contractors will generally be given 30 days to prepare responses that shall always include pricing and, if specified, a technical proposal. The due date for responses to TOPRs will be set forth in each TOPR. If an awardee is unable to submit a proposal in response to a TOPR, they shall provide the Contracting Officer with a brief written statement as to why. This statement is due on the closing date for proposals under that TOPR. PLEASE NOTE: Failure to submit a response to a TOPR may be considered negative past performance information and may jeopardize the award of future Task Orders to that Contractor. The process for requesting responses to TOPRs, evaluating each Contractor's proposal, selecting an awardee for each Task Order, issuing the Task Order, and the commencement of services under each Task Order is described below.

1.2.2.1. PROPOSAL SUBMISSION IN RESPONSE TO TOPRs. All Contractors shall submit a price proposal that shall include a completed Supplemental Pricing Worksheet for each position. The price proposal shall be forwarded to the Contracting Officer, Naval Medical Logistics Command ONLY. Certified cost or pricing data is not required for individual TOPRs.

1.2.2.2. PAST PERFORMANCE REVIEWS. All TOPRs require a review of past performance. If specified in individual TOPRs, the Government reserves the right to perform a comprehensive review of the Contractor's record of past performance in a format specified within that TOPR under any other contracts with similar scope, magnitude and complexity. The Government will never restrict its past performance evaluation to information submitted by each Contractor but will always consider any other information in its possession from this contract or any other contracts; scope, magnitude and complexity considered. This past performance evaluation will include a review of performance problems, management problems, timeliness of services, realism and reasonableness of prices, HCW turnover (substitutions), shift fill rates, and the overall quality of HCWs provided. Additionally the Government will evaluate the Contractor's performance with respect to completeness and timeliness of credentials packages and their success fulfilling the requirements of the Task Order.

1.2.2.3. TECHNICAL QUALIFICATIONS OF HCWs. The TOPR may also require Contractors to submit information regarding the technical qualifications of the HCW(s) proposed under the TOPR. Specific technical requirements will be provided in each TOPR. Technical qualification submissions shall be forwarded as specified in the TOPR.

1.2.2.4. TOPR DESCRIPTION. The Contracting Officer will issue a written TOPR and forward it to all Contractors unless one of the exceptions to the Fair Opportunity for Consideration listed above applies. The TOPR will include, as a minimum, the following information:

- a. The due date for proposal submission, and
- b. A description of the services, and
- c. Ranking factors, and
- d. The place of performance, and
- e. The period of performance, and
- f. The number of personnel required, and
- g. Any additional instructions for proposal submission not contained in this section, and
- h. Any other information deemed appropriate by the Contracting Officer, such as the minimum qualifications for the HCW(s).

1.2.2.5. PLACING ORDERS. The Contracting Officer is not required to prepare formal evaluation plans, score offers, post notice in the Federal Business Opportunities (FEDBIZOPS) or hold discussions or negotiations with each Contractor. The Contracting Officer does not have to comply with the competition rules in Part 6 of the Federal Acquisition Regulation and does not have to conduct discussions before issuing a Task Order. However, there will always be an internal record based on the particular requirements of each Task Order detailing why a particular Contractor provided the best value to the Government.

1.2.2.5.1. **PROTESTS OF TASK ORDER AWARDS.** Issues arising from the placement of orders are not protestable to the General Accounting Office unless the protestor alleges that the order exceeded the value, scope, or period of the contract.

1.2.2.5.2. **CONTRACTING OFFICER'S BROAD DISCRETION.** Task Orders may be awarded to other than the lowest priced Contractor and, the Contracting Officer has broad discretion in determining which Contractor should receive a Task Order. Proposed price, timeliness, and past performance will always be considered and, if specified in the TOPR, the technical qualifications of the HCW. These four factors are equally important unless otherwise specified in the TOPR. Additional information regarding these factors includes:

1.2.2.5.2.1. **THE PROPOSED PRICE OF THE TASK ORDER.** The factors to be considered in evaluating proposed prices are defined in Section L. They are:

- a. **Completeness:** All price information required by the TOPR has been submitted and tracks from Section B of the contract, and
- b. **Reasonableness:** The degree to which the proposed prices compare to the price that a reasonable, prudent person would expect to incur for the same or a similar service, and
- c. **Realism:** The Contractor's CLIN/SLIN prices and supplemental pricing information will be examined to identify unusually low price estimates, understatements of costs, inconsistent pricing patterns, potential misunderstandings of the contract requirements, and the risk of personnel recruitment and retention problems during contract performance.

1.2.2.5.2.2. **THE TIMELINESS OF A CONTRACTOR'S SUBMISSION IN RESPONSE TO THE TOPR.** A Contractor's response to a TOPR may not be considered for award if it is submitted later than the date and time specified in the TOPR,

1.2.2.5.2.3. **PAST PERFORMANCE.** The Government will always review the Contractor's past performance under this contract. In addition, if specified in individual TOPRs, the Government reserves the right to perform a comprehensive review of the Contractor's record of past performance in a format specified within that TOPR under any other contracts with similar scope, magnitude and complexity. The Government will never restrict its past performance evaluation to information submitted by each Contractor but will always consider any other information in its possession from this contract or any other contracts; scope, magnitude and complexity considered. This past performance evaluation will include a review of performance problems, management problems, timeliness of services, realism and reasonableness of prices, HCW turnover (substitutions), shift fill rates, and the overall quality of HCWs provided. Additionally the Government will evaluate the Contractor's performance with respect to completeness and timeliness of credentials packages and their success fulfilling the requirements of the Task Order.

1.2.2.5.2.4. **THE TECHNICAL QUALIFICATIONS OF THE HCW(S) PROPOSED.** If specified in the TOPR, the Contractor shall submit technical qualifications for the HCW(s) proposed under the Task Order. Unless otherwise specified in the TOPR, the general quality ranking factors of HCWs are:

- a. Quality and quantity of education/training and experience as it relates to the duties in the Task Order, and
- b. Letter(s) of recommendation that address such items as clinical skills, professionalism or specific areas of expertise, and
- c. Additional certifications and licensures, as specified in the TOPR, and as related to the service being performed, and
- d. Continuing education as it relates to the maintenance of the professional skill, knowledge and ability required by the TOPR, and

e. Position specific enhancing factors including, but not limited to, previous experience in military medical/dental facilities or advanced degrees.

1.2.2.6. TASK ORDER AWARD.

1.2.2.6.1. ISSUING TASK ORDERS. Upon completion of the evaluation of each Contractor's price and technical (if required) proposals, the Contracting Officer will issue a Task Order to the Contractor whose proposal is most advantageous to the Government considering the evaluation factors specified in either within this section or within the TOPR.

1.2.2.6.2. CANCELING PROPOSED TASK ORDERS. In the event issues pertaining to a proposed Task Order cannot be resolved to the satisfaction of the Contracting Officer, the Contracting Officer reserves the right to cancel the proposed Task Order. In such event, each Contractor will be notified, in writing, of the Contracting Officer's decision. This decision shall be final and conclusive and shall not be subject to either the "Disputes" clause or the "Contract Disputes Act".

1.2.2.7. COMMENCEMENT OF PERFORMANCE UNDER A TASK ORDER. Upon award, a Task Order will be transmitted to the awardee on a DD Form 1155.

1.2.2.7.1. 30-DAY PERFORMANCE REQUIREMENT. Approved HCWs must begin performance not later than 30 days after the Contracting Officer's execution of the Task Order unless either otherwise stated in the Task Order or upon the mutual agreement of the Contractor and the Government.

1.2.2.7.2. FAILURE TO BEGIN PERFORMANCE WITH APPROVED HCWs. If a previously approved HCW cannot begin performance on the Task Order, the Contractor shall notify the Contracting Officer immediately. The Contractor may or may not be given the opportunity to propose a new HCW and, failure to begin performance with the approved HCW may result in termination of the Task Order and re-consideration of the other proposals received in response to the TOPR. The Government reserves the right to terminate the contract and/or Task Order for default if the awardee fails to begin performance as required by the Task Order.

2. OMBUDSMAN. The Ombudsman will (a) review complaints from Contractors regarding Task Order awards and (b) ensure that all Contractors are afforded a fair opportunity to be considered, consistent with the procedures in the contract. The Ombudsman for this contract is the Navy Competition Advocate General. Contractors are encouraged to settle their complaints through the Competition Advocate chain of command, seeking review by the Command Competition Advocate at the Naval Medical Logistics Command before taking their complaints to the Navy Competition Advocate General. The Naval Medical Logistics Command's Competition Advocate can be reached at (301) 619-2158 or at the following address:

Naval Medical Logistics Command
ATTN: Executive Officer
1681 Nelson Street
Fort Detrick, MD 21702-9203
Fax Number: (301) 619-7430

3. PRIOR WRITTEN PERMISSION REQUIRED FOR SUBCONTRACTS. None of the services required by this contract shall be subcontracted to or performed by persons other than the Contractor or the Contractor's employees without the prior written consent of the Contracting Officer.

4. RESTRICTION ON THE USE OF GOVERNMENT-AFFILIATED PERSONNEL. Without the written approval of the Contracting Officer, the Contractor shall not use, in the performance of this contract, any U.S. Government employees or persons currently providing services on other Department of Defense contracts.

5. SUBSTITUTION OF PERSONNEL. All substitutions and substitution requests shall be processed in accordance with this section.

5.1. **USE OF TECHNICALLY ACCEPTABLE PERSONNEL.** The Contractor agrees to provide service under each Task Order using only HCW(s) whose qualifications, education and experience have been deemed technically acceptable by the Government.

5.2. **SUBSTITUTIONS.**

5.2.1. The Contractor, without the express consent of the Contracting Officer, shall make no personnel substitutions. Substitutions made without the express consent of the Contracting Officer may be considered negative past performance information and may jeopardize the award of future Task Orders.

5.2.2. No personnel substitutions shall be permitted during the period beginning with Task Order award and continuing through the first 30 days of Task Order performance, unless a HCW's unexpected illness, injury, death or termination of employment necessitates them. Should one of these events occur, the Contractor shall promptly notify the Contracting Officer and provide the documentation required in the paragraph immediately below.

5.2.3. The Contractor shall submit all substitution requests in writing, providing a detailed explanation of the circumstances necessitating the proposed personnel replacement. The Contractor shall also demonstrate that the substitute HCW possesses the qualifications, education and experience that meet the minimum requirements in this contract and in the position specific Statement of Work contained in the Task Order and any other information required by the Contracting Officer. The Contracting Officer will evaluate all substitution requests and promptly notify the Contractor of the approval or disapproval thereof.

5.3. **GOVERNMENT'S RIGHT TO TERMINATE OR RE-COMPETE.** The Government retains the right to terminate and re-compete a new TOPR if any of the following apply:

5.3.1. The substitution is made without the express consent of the Contracting Officer, or

5.3.2. The substitution has the potential to degrade the quality and/or quantity of healthcare required from the Contractor, or

5.3.3. The substitution has degraded the quality and/or quantity of healthcare required from the Contractor.

6. **PERSONNEL QUALIFICATIONS.** The Contractor is required to provide personnel having certain minimum qualifications, education and experience. Unique (i.e. position specific) requirements are provided within the position specific Statements of Work. Additionally, the following general requirements apply to all individuals providing services under this contract:

6.1. **GENERAL REQUIREMENTS FOR ALL HCWs.**

6.1.1. **PROOF OF U.S. EMPLOYMENT ELIGIBILITY (Attachment 010).** No alien shall provide services under this contract in violation of the Immigration Laws of the United States.

6.1.2. **REPRESENT AN ACCEPTABLE MALPRACTICE RISK TO THE DEPARTMENT OF DEFENSE.** Health and dental care providers and practitioners shall submit a signed, detailed statement of prior or pending malpractice claims and an explanation of disposition of each claim.

6.1.3. **LANGUAGE SKILLS.** HCWs shall read, write, speak, and understand the English language with sufficient fluency to maintain effective communication skills with patients, staff and other members of the healthcare industry.

6.1.4. Maintain certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardio Pulmonary Resuscitation) for the Professional Rescuer; or, equivalent. In the event an otherwise qualified HCW does not possess this certification and the DTF elects to provide it, the Government reserves the right to deduct 4 hours of compensated service. This deduction shall apply to initial certification only; consideration will be based upon the specific HCW's CLIN/SLIN. The Government may provide re-certification.

6.2.2. PERSONAL HEALTH REQUIREMENTS. Prior to performance under this contract, HCWs who have patient contact:

6.2.2.1. Must show immunity to Measles, Mumps and Rubella (MMR) through Serological testing which shows sero-positivity to MMR or proof of vaccination. Persons born prior to 1957 must have received one dose of MMR vaccine; persons born in 1957 or later must have received two doses of MMR vaccine, and

6.2.2.2. Shall provide evidence of varicella immune status or a statement of history of chicken pox, and

6.2.2.3. Must provide a current Purified Protein Derivative (PPD) reading or an evaluation if they are a known PPD sero-converter. The Contractor is responsible for any expenses incurred for required testing and the PPD reading shall be performed annually.

6.2.3. IMMUNIZATION REQUIREMENTS. HCWs shall be immunized annually with influenza vaccine in accordance with the applicable MTF/DTF instruction currently in effect. Although the Government will provide this influenza vaccine, it may be obtained at another facility with the HCW bearing the total cost. If not immunized by the Government, the HCW shall show proof of vaccination. If the HCW chooses to be immunized by the Government, they shall sign a waiver in accordance with MTF rules and regulations. If the HCW declines the immunization, they must provide a waiver stating the reason for the declination. Declinations based on either the HCW's religious convictions or medical contraindications (as documented by a qualified healthcare provider) only shall be permitted.

6.2.4. PERSONAL HEALTH EXAMINATIONS. HCWs shall agree to undergo other personal health examinations and other such medical and dental examinations at any time during the term of this contract, as the Commanding Officer/Commander deems necessary for preventive medicine, quality assurance, or privileging purposes. The Government will provide these examinations. If the Contractor chooses, a private physician or dentist may provide these examinations at no expense to the Government. If a private physician or dentist provides these examinations, reports and findings shall be provided to the Commanding Officer/Commander upon request to the Contractor.

6.2.5. BLOODBORNE PATHOGEN ORIENTATION PROGRAM. HCWs shall participate in the Command's Bloodborne Pathogen Orientation Program. The HCW shall also participate in all required annual training and in periodic training for all procedures that have the potential for occupational exposure to bloodborne pathogens.

6.2.6. MANAGEMENT OF HIV POSITIVE HCWs. HIV positive HCWs will be managed in accordance with the current Centers for Disease Control (CDC) guidelines and Section 503 of the Rehabilitation Act (29 U.S.C. Section 793) and its implementing regulations (41 CFR Part 60-741).

6.2.7. PREVENTION OF THE TRANSMISSION OF THE HIV VIRUS. HCWs shall comply with the CDC's "Universal Precautions" for the prevention of the transmission of the HIV virus.

6.2.8. MANAGING THE CLINICAL RISK IN THE WORK ENVIRONMENT. The work environment inherently involves risks typically associated with the performance of clinical oral procedures. The HCW may be exposed to contagious disease, infections and flying dental debris requiring the wearing of protection such as sterile gloves, masks and eyeglasses.

7. CRIME CONTROL ACT OF 1990 REQUIREMENT.

7.1. CRIMINAL BACKGROUND CHECK REQUIREMENTS. Section 21 of the Crime Control Act of 1990, 42 U.S.C. 13041, as amended by Section 1094 of Public Law 1-02-190, requires every facility operated by the Federal Government (or operated under contract with the Federal Government) that hires (or contracts to hire) individuals involved in the provision of child care services to assure that all existing and newly-hired employees undergo a criminal background check. The term "child care services" is defined to include health and mental health care.

7.2. GOVERNMENT RESPONSIBLE FOR OF CRIMINAL BACKGROUND CHECKS. The Government will conduct criminal background checks on all HCW's providing child care services under this contract based on

fingerprints of HCWs obtained by the Contractor and via the Government's inquiries conducted through the Federal Bureau of Investigation (FBI) and State criminal history repositories. In doing so the Government shall follow the procedures set forth in DOD Instruction 1402.5.

7.3. **CONTRACTOR'S RESPONSIBILITY FOR REASONABLE AND NECESSARY ASSISTANCE.** Within 30 days after contract award, the Contractor and all HCWs shall provide all reasonable and necessary assistance to the Government, including compliance with the employment application requirements set forth in 42 U.S.C. 13041(d). Upon receipt of the results of a background check, the Contractor further agrees to undertake a personnel action in accordance with 42 U.S.C. 13041(c), when appropriate.

7.4. **EXEMPTIONS.** With written recommendation from the Commanding Officer/Commander, and the approval one level above the Contracting Officer, a HCW may be permitted to perform work under this contract prior to the completion of a background check, provided the HCW is within line-of-sight and continuous supervision of an individual with a successful background check.

7.5. **RIGHTS OF CONTRACTOR HCWs.** HCWs shall have the right to obtain a copy of any background check pertaining to themselves and to challenge the accuracy and completeness of the information contained in the report.

8. **LIABILITY INSURANCE.** Before commencing work under a contract, the Contractor shall certify to the Contracting Officer in writing that the required insurance has been obtained. The following insurance as referenced in FAR 28.307, is the minimum insurance required:

8.1. **General Liability - Bodily injury liability insurance coverage written on the comprehensive form of policy of at least: \$500,000 per occurrence.**

8.2. **Automobile liability insurance written on the comprehensive form of policy.** The policy shall provide for bodily injury and property damage liability covering the operation of all automobiles used in connection with performing the contract. Policies covering automobiles operated in the United States shall provide coverage of at least \$200,000 per person and \$500,000 per occurrence for bodily injury and \$20,000 per occurrence for property damage. The amount of liability coverage on other policies shall be commensurate with any legal requirements of the locality and sufficient to meet normal and customary claims.

8.3. **Worker's compensation and employer's liability.** Contractors are required to comply with applicable Federal and State Workers' compensation and occupational disease statutes. If occupational diseases are not compensable under those statutes, they shall be covered under the employer's liability section of the insurance policy, except when Contractor operations are so commingled with a Contractor's commercial operations that it would not be practical to require this coverage. Employer's liability coverage of at least \$100,000 shall be required, except in States with exclusive or monopolistic funds that do not permit workers, compensation to be written by private carriers.

9. CONTRACT INCENTIVES

9.1. CASH INCENTIVES

9.1.1. The Government reserves the right to make cash incentive awards to HCWs via the Contractor. These awards will be site or position specific and will be based on the Government's best business practice plan to minimize turnover, maximize the mission of the command and/or reward exemplary work. There are no cash incentive plans for the Government's minimum quantities in CLINs 0001 through 0004; however, cash Incentive Plans may be contained in Task Orders for the CLINs 0009 through 0019 as outlined in subsequent TOPRs.

9.1.2. Section B, CLIN 0008 has a, "Not to Exceed" or "NTE" fixed incentive fee amount. If subsequent TOPRs provide for an incentive award, Section B, CLIN 0008 will be adjusted accordingly. The NTE fixed incentive fee amount can only be changed with a written modification to the Task Order issued by the Contracting Officer.

9.1.3. The Government will obligate the total incentive fee amount at the beginning of the Task Order. The Contracting Officer will authorize the Contractor, in writing, to invoice for any incentive fee earned during the performance periods detailed in the Incentive Plan.

9.1.4. Evaluation procedures and criteria and scoring procedures shall be set forth in each Incentive Plan, as included with position specific statements of work or each subsequent TOPR.

9.1.5. If a cash incentive award is made, the Contractor shall pass the awards to the applicable HCW(s). The Contractor further agrees to only take deductions from the incentive awards to remain in compliance with the laws and regulations of the Internal Revenue Service, state, and local taxation authorities including the Contractor's contributions to these taxes and/or fees. However, in no case shall the amount paid to the HCW be reduced further.

9.2. NON-CASH INCENTIVES

9.2.1. The Government reserves the right to make non-cash incentive awards directly to HCWs. These awards will be site or position specific and will be based on the Government's best business practice plan to minimize turnover, maximize the mission of the command and/or reward exemplary work. As an example, non-cash incentive awards may include, but are not limited to, paid "time off" to healthcare workers, preferential parking privileges, additional training, etc. If time off is given, this time off is in addition to any leave granted and accrued by the HCW. Incentive plans are contained in Attachment 006 for the Government's minimum quantities in CLINs 0003 and 0004. Incentive Plans may also be contained in Task Orders for the CLINs 0009 through 0019 as outlined in subsequent TOPRs.

9.2.2. Evaluation procedures and criteria and scoring procedures will be set forth in each Incentive Plan, as included with position specific statements of work or each subsequent TOPR.

9.2.3. If an incentive award is made, the Government will pass the awards directly to the HCW(s). The Government will also inform the Contractor when non-cash incentive awards are granted because HCW performance is an important criteria in evaluating a Contractor's past performance, issuing logical follow-on task orders, and awarding subsequent task orders.

10. REIMBURSABLE TRAVEL EXPENSES.

10.1. As directed by the Government, HCWs may be required to travel to provide services, attend training or attend Government specified conferences when in the best interest of the Government and patient care. Travel, if required, will be detailed within the TOPR and the Contractor shall include in its TOPR response a proposed amount to cover its anticipated outlay of reasonable travel expenses, to include, as applicable, lodging, per diem, public transportation charges, mileage allowance, tolls and Contractor overhead. The Task Order issued by the Government using CLIN 0007 shall provide a negotiated Not-to-Exceed (NTE) amount that shall constitute a firm limitation on the Government's obligation to reimburse the Contractor for these expenses using the appropriate SLIN within CLIN 0007. The COR will determine the reasonableness of all costs incurred. When questions arise, the Government's Joint Travel Regulations (JTR) shall always be followed. The following shall also apply:

10.1.1. CLIN 0007 (and the appropriate SLIN) shall not be used for expenses related to training including, but not limited to reimbursement for courses taken. These expenses are the sole responsibility of the Contractor, and

10.1.2. The Government will not issue Government Travel Orders to the HCW, and

10.1.3. Government contract air carriers and the Government's contract airfares are not available to the HCW, and

10.1.4. The JTR shall serve as the basis for the upper cost limits for lodging, per diem, miscellaneous expenses and mileage reimbursement if a privately owned vehicle is authorized, and

10.1.5. The Government retains the right to direct the mode of travel including the availability and size of rental cars, and

10.1.6. The COR will specify the DTF's procedure to document that the travel was completed and that the expenses were actually incurred, and

10.1.7. All reimbursements will be retrospective, payable only upon presentation of a properly prepared invoice to the COR (as specified herein). In reviewing invoices under which the Contractor seeks reasonable reimbursement under CLIN 0007, the COR shall use the Government's Joint Travel Regulation (JTR) <http://policyworks.gov/org/main/mt/homepage/mtt/perdiem/travel.shtml> as a guide. Expenses higher than the amounts allowed under the JTR will be considered unreasonable in the absence of additional justification from the Contractor, and

10.1.8. The Government reserves the right to require additional documentation, including memoranda from the HCW performing the travel.

10.2. The requirements for reimbursable travel expenses do not apply to the Contract Status Review meetings required in Section C of this contract. If the Government invokes that requirement, the Contractor agrees to bear the total risk and cost for the travel, lodging, per diem, rental cars, etc. required to attend Contract Status Review meetings. The Government will not reimburse the Contractor for any related expenses.

11. CONTRACTOR MANAGED PERSONAL LEAVE.

11.1. The Government reserves the right to require the Contractor to manage the accrual and use of personal leave for their HCWs. This requirement does NOT apply to the minimum quantities contained in CLINs 0001 through 0004. The Contractor's attention is further directed to the requirements of Section C, paragraph 1.4 with respect to their scheduling HCWs for more than 8 compensated hours per day.

11.2. In all cases, services shall be provided in accordance with applicable Position Specific Statements of Work. The Contractor bears the sole responsibility and assumes any and all risk for meeting the requirements of all staffing requirements. It is further agreed that the Contractor assumes any and all risk as to the accuracy of its leave accrual and management procedures.

11.3. The Government will notify the Contractor if staffing requirements are not being/have not been met; however, the Government will neither track HCW leave use nor maintain leave balances for HCWs.

11.4. The Contractor may, at their discretion, contact Government points of contact to determine the number, type, and/or name of the HCWs present for duty. In all cases, the Government will respond to requests in a timely manner. However, the Government retains the right to respond at a time that does not interfere with normal patient care or clinic operations. Government points of contact will be provided following contract award.

11.5. The Contractor may offer overtime to certain HCWs to fill otherwise unfilled scheduled hours of service so long as all the following conditions apply:

11.5.1. In no case shall the amount of hours worked exceed 50 hours per consecutive 7-day period or 96 hours per consecutive 14-day period, and

11.5.2. In no case shall an individual HCW provide more than 10 consecutive hours of service, and

11.5.3. In no case shall the HCW's continued employment be contingent upon their accepting an overtime assignment, and

11.5.4. The parties agree that the Contractor is solely responsible for complying with state and/or local wage and overtime compensations laws as described herein, and

11.5.5. The parties agree that THE CONTRACTOR SHALL NOT LOOK TO THE GOVERNMENT for additional reimbursement beyond the price already contained on the applicable CLIN/SLIN for that labor category.

12. CONTRACTOR MANAGEMENT PLANS

12.1. Offeror's are advised that the Government will include their management plan submissions into contracts awarded as a result of this solicitation. The term "management plan" is defined herein and includes the offeror's initial submission, responses to questions answered during the solicitation period, any amendment language, and any/all supplemental/discussion submissions provided by the offeror at the direction of the Government. As part of the awarded contracts, these plans will then be binding on the ultimate Contractor(s). Plans are referenced in Section J and will be included as Attachment 016.

END OF SECTION H

Changes in Section L

1. SUBMISSION OF COST OR PRICING DATA

1.1. It is expected that this contract will be awarded based upon a determination that there is adequate price competition; therefore, the offeror is not required to submit additional cost or price data or certify cost or pricing data with its proposal.

1.2. If, after receipt of the proposals, the Contracting Officer determines that adequate price competition does not exist in accordance with FAR 15.403-3 and 15.403-4, the offeror shall provide other information requested to be submitted to determine fair and reasonableness of price or cost realism, or certified cost or pricing data as requested by the Contracting Officer.

2. NOTIONAL TASK ORDERS. The Notional Task Orders (CLIN 0005) provided in Attachments 007 and 008 represents a sample Task Order scenario which may, in some form, be ordered by the Government after contract award. No awards will result from an offeror's proposal in response to these Notional Task Orders.

3. INSTRUCTIONS FOR PREPARATION OF PROPOSALS

3.1. Introduction and Purpose. This section specifies the format and content that offerors shall use in response to this Request for Proposal (RFP). The intent is not to restrict the offerors in the manner in which they will perform their work but rather to require uniformity in the format of the responses for evaluation purposes. Offerors must submit a proposal that is both in the format prescribed herein and is comprehensive enough to provide the basis for a sound evaluation by the Government. Information provided should be precise, factual, and complete: avoiding unnecessary, irrelevant, unrelated, unsubstantiated, illogical, vague and/or expansive discussions. Clarity, completeness, and responsiveness are of the utmost importance. Proposals shall be in the form prescribed by, and shall contain a response to, each identified in this paragraph. Any proposal that does not offer as a minimum that which is requested in this solicitation may be determined to be substantially incomplete and not warrant any further consideration. A complete proposal, including both Technical and Business, shall be submitted by the closing date specified in Section A of the solicitation.

Proposals shall be submitted in three separate volumes:

Volume I - Past Performance Proposal (original & 1 copy)

Volume II - Management Plan (original & 1 copy)

Volume III - Business Proposal (original & 1 copy)

The closing date for Volumes I, II, and III shall be **Tuesday, March 4, 2003** at **2:00 PM** local time (eastern standard time).

Facsimile and E-mail submission are not permitted.

Upon receipt of the electronic files from the Contracting Officer, the offeror's proposal shall be submitted on 6 offeror provided 3.5" diskettes or CD-ROM(s) (all hereafter referred to as "diskettes"). The offeror is responsible for ensuring that submitted diskettes are neither physically damaged nor contain corrupted files such that they are not readable by the Government.

3.2. Diskettes 1 and 2 shall each contain the offeror's Past Performance information and shall contain the electronic file "[name of offeror] Past Performance.doc" (Attachment 012). The information on diskette 2 shall be identical to the information on diskette 1. PLEASE NOTE: Closing dates for submission of Past Performance information and Management/Business Proposals are specified in 3.1, above.

3.3. Diskettes 3 and 4 shall each contain the Management Plan and shall include the Government provided electronic file "[name of offeror] Management Plan.doc" (Attachment 015). The information on diskette 3 shall be identical to the information on diskette 4.

3.4. Diskettes 5 and 6 shall each contain the offeror's Business Proposal and shall include the Government provided electronic file "[name of offeror] Business Proposal.xls." Included within "[name of offeror] Business Proposal.xls" are Supplemental Pricing Worksheets for each separately priced position for CLINs 0001 through 0004 (the minimum requirements) and each separately priced position for NTO001 and NTO002 (CLIN 0005). An example of a Supplemental Pricing Worksheet is contained in Attachment 013. The offeror shall complete all the Supplemental Pricing Worksheets within "[name of offeror] Business Proposal.xls." The information on diskette 5 shall be identical to the information on diskette 6. The Government has included the most recent contract prices as Attachment 014. These prices represent the direct compensation to the HCW plus the Contractor's overhead, profit and other indirect costs such as, but not limited to, general and administrative expense. The direct compensation rate to the HCW is not available.

3.5. If an offeror is late submitting (a) any diskette or (b) any required file is missing from their diskette proposal, their entire proposal will be considered late.

3.6. Offerors are responsible for assuring that the diskettes forwarded in response to this solicitation are neither damaged nor unreadable. Diskettes 1 through 4 shall be formatted using either Microsoft Windows 95™ or Microsoft Windows 98™. All files shall be submitted using either Microsoft Word 97™, or Microsoft Word 2000™ (for the .doc files) and Microsoft Excel 97™, or Microsoft Excel 2000™ (for the .xls files). Documents and spreadsheets submitted in Microsoft Word 2002™ or Microsoft Excel 2002™ will not be accepted. Diskette 1 is identical to diskette 2; Diskette 3 is identical to diskette 4; Diskette 5 is identical to diskette 6. Offerors shall assure that all files are in a "read only" format and not subject to change. Files shall not be password protected.

3.7. Offerors shall accept the formatting, style, pitch/point, margins and other formatting imbedded in these electronic documents as provided. The Government will accept no changes.

3.8. Volume I: Past Performance (Original & 1 Copy) Diskettes 1 and 2 shall each contain the offeror's Past Performance information and shall contain the file "[name of offeror] Past Performance.doc" (Attachment 012). The information on diskette 2 shall mirror the information on diskette 1.

a. Volume I shall contain the table provided as Attachment 012 (Past Performance Chart) for submission of past performance information. The Contractor shall exactly recreate and complete Past Performance.doc as illustrated in Attachment 012. (NOTE: An electronic copy of Past Performance.doc shall be provided.) This Microsoft Word 97™ document shall include information from not more than five of their previous/current contracts not awarded either by the Naval Medical Logistics Command or the Fleet Industrial Supply Center, Norfolk Detachment, Philadelphia. These references shall be those that the offeror believes are their most current and are relevant to the labor categories identified in Section B. The Government will supplement this information with past performance analyses of contracts awarded by the Naval Medical Logistics Command. In selecting the most relevant contracts, the offeror may include contracts that demonstrate the prior experience of corporate officials or the experience of sub-Contractors/teaming partners. In order to be considered current, services must have been provided within the last five years. The file, "Past Performance.doc" shall be renamed, "[name of offeror] Past Performance.doc" when it is submitted.

b. If the offeror has no relevant past performance, they shall affirmatively state that they possess no relevant past performance within [name of offeror] Past Performance.doc.

c. The offeror shall complete Past Performance.doc to include the following:

1. The contract number(s) and,
2. The number of HCWs provided, and
3. The type of HCWs provided, e.g., 2 dentists, 15 dental hygienists, etc., and
4. The location of services provided including facility name, city and state and,
5. The start dates that services were/are being provided and
6. The completion dates that services were/are being provided, and
7. The name, organization, telephone number, and e-mail address of a verified point of contact at the federal, state, local Government or commercial entity for which the contract services were performed. The offeror is responsible for ensuring that all points of contact provided as references are current and appropriate, and that the phone numbers provided are valid and,
8. A brief description of services provided and an explanation of how that experience is directly related and/or similar or relevant to the scope, magnitude, and complexity of the requirement (as defined herein) and,
9. The number, type and severity of any quality, delivery or price problems, or any other anecdotal issues, in performing the contract, the corrective action taken and the effectiveness of the corrective action. Offerors shall also submit complete information of any discrepancy or non-compliance reports issued under these contracts and the corrective action mechanisms that were completed or started. At the discretion of the offeror and based upon the number of discrepancies, this information may be added as a supplemental file to diskettes 1 and 2 as a Microsoft Word 97™, Contractor prepared document titled, “[name of offeror] CDRs.doc”. This document shall be formatted using typical business style, pitch/point, margins, etc and is not limited in length. It shall, however, be a relevant and pointed discourse, avoiding unnecessary, irrelevant, unrelated, unsubstantiated, and illogical, vague and/or expansive discussions. A negative reply can be provided at the discretion of the offeror.

d. Offerors may submit a two-page discussion of noteworthy successes, accomplishments, awards and/or commendations achieved during the described experience in providing services. Offerors may also submit any other information the offeror considers relevant to its past performance. This information shall be included on diskettes 1 and 2 as a Microsoft Word 97™ Contractor prepared document titled, “[name of offeror] Accomplishments.doc”. This document shall be formatted using typical business style, pitch/point, margins, etc and is not limited in length. Information shall, however, be a relevant and pointed discourse, avoiding unnecessary, irrelevant, unrelated, unsubstantiated, and illogical, vague and/or expansive discussions. A negative reply can be provided at the discretion of the offeror.

e. Offerors may submit a discussion of their experience providing services within Incentive Plans that are either similar to or relevant to the Incentive Plans contained in Attachment 006. This information shall be added to diskettes 1 and 2 as a Microsoft Word 97™, Contractor prepared document titled, “[name of offeror] Incentive Experience.doc”. This document shall be formatted using typical business style, pitch/point, margins, etc and is not limited in length; however, the Government does not anticipate that these documents should exceed three single spaced pages. It shall, however, be a relevant and pointed discourse, avoiding unnecessary, irrelevant, unrelated, unsubstantiated, and illogical, vague and/or expansive discussions. A negative reply shall be provided by the offeror.

3.9. Volume II: Management Plan (Original & 1 Copy) Diskettes 3 and 4 shall each contain the offeror's Management Plan information and shall contain the file "[name of offeror] Management Plan.doc" (Attachment 015). The information on diskette 3 shall mirror the information on diskette 4. The offeror shall exactly recreate and complete the Management Plan.doc as illustrated in Attachment 015. (NOTE: An electronic copy of Management Plan.doc shall be provided.) This Microsoft Word 97™/2000™ file requires that offerors provide information concerning their Management Plan for the provision of services under these contracts. The offeror's proposal shall describe the management policies plan which will be utilized to ensure timely, effective, complete start-up and continuity of the services required by the solicitation. This shall include:

a.. **Recruitment**

1. A description of any unusual or extraordinary recruitment methods that may be required to fill scarce marketplace commodities for **CLINs 0001 through 0004**, and Notional Task Orders **NTO001 and NTO002**. If none exist, so state.
2. A description of any innovations or ideas to mitigate any risks identified to successful recruitment.

b. **Retention**

1. Provision of the typical fringe and other benefit packages paid to HCWs. If the offeror intends to hire sub-contractors also, so state.

1.a. Indicate the benefit provided to HCWs including:

401K. If "Yes", what amount or percentage or dollar amount do you contribute?

1.b. Health Insurance. If "Yes", what amount or percentage or dollar amount do you contribute?

1.c. Dental Insurance. If "Yes", what amount or percentage or dollar amount do you contribute?

1.d. Is a 125 Pre-tax medical spending account available?

1.e. Uniform Allowance. If "Yes", what amount or percentage do you contribute?

1.f. Continuing Education. If "Yes", (a) what amount or percentage do you contribute, and (b) describe your continuing education benefit in terms of types of courses and number of days/hours?

1.g. Do you allow personnel to decline all or some benefits in exchange for an increase in direct compensation?

1.h. Other Benefits: Identify any other benefits provided and the amount you contribute.

1.i. Do benefits for part time employees differ from those offered to full time employees? If "yes", please explain how those benefits differ.

2. On-site assistance to employees.

2.a. How often will regular/scheduled contact be made with each employee?

2.b. How will contact be made (site visit, telephone, email, etc?)

2.c. Will there be an on-site or local (within 100 miles) representative? If "yes", what will this individual's responsibilities be for issues specifically including planned leave use, unplanned leave notification, payroll issues?

2.d. Are these services available to each health care worker which facilitate contact (i.e., "1-800" number, 24 hour POC via answering machine, etc?)

3. A description of any innovations or ideas to mitigate any risks identified to successful retention.

c. Credentials and licensure submissions and tracking:

1. A description of how expiring licenses and certifications will be tracked to ensure that they are kept current and that the Government has the latest versions.

2. A description of the offeror's credentials compilation and verification process.

3. A description of any plans to pre-credential candidates before a need is identified.

4. A description of any plan that will keep candidates up to date on the status of the contract prior to contract award thus ensuring a smooth transition to contract start.

d. Sub-Contracting and Teaming. If a sub-contracting and/or teaming approach will be used, the offeror should provide the following information. If no sub-contracting and/or teaming approach will be used, the offeror should state as such.

1. A description of the offeror's sub-Contractor(s)/teaming partner(s) experience with multiple dental labor categories across wide geographic areas that are relevant to the requirements of CLINs 0001 through 0004, CLINs 0009 through 0019, and NTO001 and NTO002. Medical experience, although relevant, is less relevant than comparable dental experience. This narrative discussion shall contain sufficient specificity and detail to assess its relevance.

2. Provision of letters from the sub-Contractor(s) and/or teaming partner(s) that acknowledge the teaming arrangement and their participation if a contract is awarded. This acknowledgement may be a simple statement on letterhead paper, signed by an authorized representative who can be contacted and telephonically interviewed by the Government. Therefore, telephone numbers shall be provided which shall be accurate and legible.

3. Provision (at the offeror's choice, within the same letter) of information from the sub-Contractor(s) and/or teaming partner(s) indicating the duties or performance responsibilities of each organization in the specific areas of recruitment, initial and ongoing credentialing, and overall project management.

4. An explanation as to how these teaming arrangements will be used in the decision-making process within the contract. Which specific areas are delegated to the teaming partner and which are retained? How will the offeror hold the teaming partner accountable for non-performance or unacceptable performance?

3.10. Volume III: Business Proposals (original and one copy). Diskettes 5 and 6 shall each contain the offeror's Business Proposal. The information on diskette 5 shall mirror the information on diskette 6. Business proposals must contain the following:

a. A completed Standard Form 33. This form must be downloaded, printed, completed, signed and mailed/delivered by the offeror with diskettes 5 and 6 and,

b. An acknowledgment of any amendments issued by the Government prior to the receipt of proposals and,

c. A completed Section K containing the Representations, Certifications and Other Statements of Offerors contained in Section K of this solicitation. The offeror shall print, sign, and complete Section K and MAIL those signed certifications, the completed and signed SF-33 and diskettes 5 and 6 and,

d. The offeror shall complete their business proposal using the Government provided file Business Proposal.xls. Business Proposal.xls matches Section B of this solicitation exactly. The offeror shall complete the boxes in that file shaded in light blue. The spreadsheet will calculate the remaining totals including the total price for CLINs 0001 through 0004 and NTO001 and NTO002. The information that is provided in Business Proposal.xls for CLINs 0001 through 0004 will be used to determine price reasonableness during the evaluation of the offeror's proposal. Also, included on Business Proposal.xls is a Supplemental Pricing Worksheet for each separately priced position within CLINs 0001 through 0004 and NTO001 and NTO002. The file, "Business Proposal.xls" shall be renamed, "[name of offeror] Business Proposal.xls" when it is submitted. The information provided in the Supplemental Pricing Worksheets will be used to determine price realism during the evaluation of the offeror's proposal. A sample of the Supplemental Pricing Worksheets is shown in Attachment 013. Source Information for each Supplemental Pricing Worksheet shall be provided at the bottom of each Supplemental Pricing Worksheet following the notation "Source Information Notes", and

e. The final negotiated HCW compensation rates proposed on each Supplemental Pricing Worksheet (within "[name of offeror] Business Proposal.xls") are both the lowest acceptable compensation rates to the HCW and the average compensation rates to the HCW which will be used by the Contractor upon award of initial Task Orders. The Task Order awardee is not prohibited from paying a range of compensation rates to recruited HCWs in a particular labor category, but under no circumstances shall the compensation rate be lower than that included as the lowest rate shown on each Supplemental Pricing Worksheet. The Government has included the most recent contract prices as Attachment 014. These prices represent the direct compensation to the HCW plus the Contractor's overhead, profit and other indirect costs such as, but not limited to, General and Administrative expense. The direct compensation rate to the HCW is not available, and

f. For Notional Task Orders NTO001 and NTO002, the offeror shall complete the appropriate tab using the Government provided file Business Proposal.xls. The information provided on the Supplemental Pricing Worksheets will be used to determine price realism during the evaluation of the offeror's proposal.

4. PROPOSAL EVALUATION

4.1. Past Performance is significantly more important than the Management Plan. The combination of Technical Proposal factors (Past Performance and Management Plan) is significantly more important than the combined Business Proposal evaluation factors (Completeness, Reasonableness, and Realism).

4.2. The Government reserves the right to award without discussions. It should be noted that award may be made to other than the lowest priced offer. Offerors are therefore cautioned that each initial offer should contain the offeror's best terms.

4.3. The Government may set the competitive range following evaluation of technical and business proposals and conduct discussions with remaining offerors. Discussions may be in person, by telephone, or in writing at the discretion of the contracting officer.

4.4. The minimum quantity per contract awarded will be at least one CLIN (CLINs 0001 through 0004) for the period 01 October 2003 through 30 September 2004. The Government will determine which CLINs are awarded to each successful offeror (via Task Order) at the time of award of the basic contract. Task Orders for the minimum quantities will be issued concurrent with the award of each contract. Task Orders issued after the minimum quantities are satisfied will be priced individually at the time of Task Order proposal request (See Section H for Task Order procedures).

4.5 Technical Proposal Evaluation.

a. Past Performance. The Government will evaluate the "risk to the Government" associated with the offeror's past performance. The Government will give greater consideration to past performance (minimum, maximum and notional quantities) that is most relevant to the solicitation. Past performance not as relevant will warrant a greater technical risk assessment. The most relevant past performance will be those references that most closely match the solicitation

requirements in terms of Scope (i.e. the type of HCWs in settings similar to the requirements [clinical environment]) and, Magnitude (i.e. the numbers of HCWs provided by labor category) and, Complexity (i.e. the range and depth of labor categories, geographic similarity to the requirement [i.e. metropolitan versus rural]), single/multi-site, single/multi specialty, and experience with incentive plans). Medical experience, although relevant, is less relevant than comparable dental experience. The Government reserves the right to contact the points of contact identified in the offeror's proposal for the purpose of verifying the offeror's record of past performance. Also, the Government will not restrict its past performance evaluation to the information submitted by offerors but will consider any other information in its possession.

b. Management Plan. The Government will evaluate the "risk to the Government" associated with the offeror's Management Plan. The Government will not assume that the offeror possesses any capability unless it is specified in their proposal. The Government will evaluate the offeror's approach to Recruitment, Retention, Pre-Credentialing, and Sub-Contracting and Teaming as stated in section 3.9. The plan should discuss the offeror's approach to accomplishing the requirements in the Notional Task Orders. The offeror should describe any differences between their proposed approach for the minimum solicitation quantities and that for the Notional Task Orders. The offeror should discuss any risks associated with accomplishing the Notional Task Orders and plans for mitigating those risks.

4.6. Business Proposal Evaluation.

a. Adequate price competition is expected for this acquisition. The Business Proposal will be evaluated with consideration to the following factors:

(1) Completeness. All price information, certifications, and supporting documentation required by the Request for Proposal (RFP) has been submitted, and

(2) Reasonableness. The degree to which the proposed prices compare to the prices that a reasonable and prudent person would expect to incur for the same or similar services, and

(3) Realism. The offeror's CLIN/SLIN prices and information provided on the Supplemental Pricing Worksheets will be used in the evaluation of the offeror's proposal. The Contracting Officer will use the minimum compensation information to determine the price realism of the proposed compensation and the average compensation for best value determinations. The offeror's CLIN/SLIN prices and supplemental pricing worksheets will be examined to identify unusually low cost estimates, understatements of costs, inconsistent pricing patterns, potential misunderstandings of the solicitation requirements, and the related risk of personnel recruitment and retention problems during contract performance.

5. TECHNICAL QUESTIONS. Offerors must submit all technical questions concerning this solicitation in writing to the Contract Specialist listed below. The Naval Medical Logistics Command must receive the questions not later than 15 calendar days after the issue date (Block 5 of SF 33) of this solicitation. The Contract Specialist will answer questions that may affect offers in an amendment to the solicitation. The Contract Specialist will not disclose the source of the questions. Questions shall be referred to:

Naval Medical Logistics Command
ATTN: Code 022 (Mrs. Donna Blackstone)
1681 Nelson Street
Fort Detrick, MD 21702-9203
Telephone: (301) 619-2062
FAX (301) 619-6793
Email to: drblackstone@nmlc.med.navy.mil

6. LIMITATION OF PAYMENT FOR PERSONAL SERVICES. Under the provisions of 10 U.S.C. 1091 and DODI 6025.5, "Personal Services Contracting", implemented 6 January 1995, the total amount of compensation paid to an individual direct health care provider in any year cannot exceed the full time equivalent annual rate specified in 10 U.S.C. 1091.

7. PRE-PROPOSAL CONFERENCE. The Government will not conduct a pre-proposal conference for this acquisition.

8. SITE VISITS. The Government will not conduct a site visit for this acquisition.

9. REVIEW OF AGENCY PROTESTS

9.1. The contracting activity, Naval Medical Logistics Command, will process agency protests in accordance with the requirements set forth in FAR 33.101(d).

9.2. Pursuant to FAR 33.101(d)(4), agency protests may be filed directly with the appropriate reviewing authority; or a protester may appeal a decision rendered by a Contracting Officer to the appropriate reviewing authority.

9.3. The reviewing authority for Mrs. Donna Blackstone is Mrs. Terry Horst, Naval Medical Logistics Command, Code 02, 1681 Nelson Street, Fort Detrick, MD 21702-9203. Agency procurement protests should clearly identify the initial adjudicating official, i.e., the, "Contracting Officer" or the, "Reviewing Official".

9.4. Offerors should note this review of the Contracting Officer's decision will not extend GAO's timeliness requirements. Therefore, any subsequent protest to GAO must be filed within 10 days of knowledge of initial adverse agency action.

ATTACHMENT 001
POSITION SPECIFIC STATEMENT OF WORK
DENTAL HYGIENIST
NAVAL DENTALCENTER GULF COAST, PENSACOLA, FL
AND SUBORDINATE BRANCH CLINICS AS IDENTIFIED HEREIN

1. LABOR CATEGORY. The Contractor shall provide DENTAL HYGIENIST services as referenced in Section B, CLIN 0001 in the following locations and quantities:

1.1. SLIN 0001AA, Branch Dental Clinic, Naval Aviation Technical Training Center, Pensacola, FL 0.5 FTE (1048 hours), and

1.2. SLIN 0001AB, Branch Dental Clinic, Corry Station, Pensacola, FL 0.5 FTE (1048 hours), and

1.3. SLIN 0001AC, Branch Dental Clinic, Panama City, FL 0.5 FTE (1048 hours), and

1.4. SLIN 0001AD, Branch Dental Clinic, New Orleans, LA 2.0 FTE (4192 hours), and

1.5. SLIN 0001AE, Branch Dental Clinic, Naval Construction Battalion Center, Gulfport, MS 1.0 FTE (2096 hours), and

1.6. SLIN 0001AF, Branch Dental Clinic, Meridian, MS 1.0 FTE (2096 hours), and

1.7. SLIN 0001AG, Branch Dental Clinic Pascagoula, MS 1.0 FTE (2096 hours), and

1.8. SLIN 0001AH, Branch Dental Clinic Naval Air Station, Corpus Christi, TX 0.5 FTE (1048 hours), and

1.9. SLIN 0001AJ, NAS Kingsville, TX 0.5 FTE (1048 hours), and

1.10. SLIN 0001AK, Branch Dental Clinic, Naval Air Station, Fort Worth, TX 1.0 FTE (2096 hours), and

1.11. SLIN 0001AL, Branch Dental Clinic, Ingleside, TX 1.0 FTE (2096 hours).

2. DUTY HOURS. The Branch Clinic Director will provide specific schedules for daily starting and ending working hours at each clinic location at least 2 weeks in advance. In all cases though, HCWs shall provide services Monday through Friday, excluding Federal holidays, as stated in the basic contract, between the hours of 0600 and 1800. Full-time HCWs shall provide 40 hours of compensated service Monday through Friday. Part-time HCWs shall provide 20 hours of compensated service Monday through Friday.

3. ABSENCES AND LEAVE. HCWs shall accrue leave as stated in the basic contract.

4. CREDENTIALING REQUIREMENTS. The Contractor shall submit credentialing information to the Professional Affairs Coordinator, Naval Dental Center Gulf Coast, Pensacola, FL (via the COR) 30 days prior to performing services under this contract. HCWs shall also complete an Individual Professional File (IPF) as stated in the Section C of the basic contract.

5. GENERAL DUTIES AND RESPONSIBILITIES. The HCW shall:

5.1. Become familiar with and follow Navy standardized concepts of Phased Dentistry and Managed Dental Care.

5.2. Maintain continuing education throughout the term of the contract.

5.3. Direct supporting Government employees assigned to him or her during the performance of clinical procedures. Such direction and interaction will comply with Government and professional clinical standards and accepted protocols. The HCW will be subject to guidelines set forth in the Command's quality assurance and risk

management instructions. The HCW shall perform administrative duties that include maintaining statistical records of his or her clinical workload, participating in dental education programs, preparing documentation for boards, and participating in clinical staff quality assurance functions at the prerogative of the Commanding Officer.

6. SPECIFIC DUTIES/RESPONSIBILITIES OF DENTAL HYGIENISTS ARE AS FOLLOWS:

- 6.1. Routine workload is scheduled by the DTF. If determined by the Commanding Officer, HCW may participate in an enhanced work schedule program that allows a “power prophylaxis team” to provide multi-chair dentistry. This team may consist of Dentist/RDH in conjunction with an expanded functions assistant and may perform treatment on more than one patient per hour. The Primary workload is a result of appointments generated by patient activity through the Comprehensive General Dentistry Department or scheduled through the DTF. The HCW has sole clinical responsibility for diagnostic examinations and the development of comprehensive treatment plans, provision of mandated surveillance and preventive services and, the quality and timeliness of treatment records and reports required to document procedures performed and care provided. The HCW shall provide comprehensive dental care within the personnel, equipment, and supply capabilities of the DTF. Because patients frequently have overlapping, multiple problems and often require multidisciplinary, long-term treatment, the HCW shall refer patients to staff specialists for consultative opinions and continuation of care. The HCW shall also provide care to patients that other staff providers have referred for consultation and treatment.
- 6.2. Review and complete preliminary dental examinations for new periodontal and recall patients. Oversee and manage periodontal patient recall programs.
- 6.3. Review patient’s medical and dental history for evidence of past and present conditions such as medical illnesses and use of drugs that may complicate or modify dental hygiene treatment.
- 6.4. Examine teeth and surrounding tissues for evidence of caries and periodontal disease, and then record findings.
- 6.5. Inspect head and neck, examine mouth, throat and pharynx for evidence of disease such as oral cancer and/or soft tissue pathosis.
- 6.6. Expose, develop and interpret radiographs to identify tooth structure, periodontal support and other abnormalities such as periodontal bone loss, periapical pathosis, caries, defective restorations, improper tooth contours and contact relationships.
- 6.7. Refer suspected medical conditions, hard and soft tissue abnormalities, caries, periapical and periodontal pathosis and traumatic or suspicious lesions to the dental officer for evaluation.
- 6.8. Perform pit and fissure sealant applications.
- 6.9. Develop dental hygiene treatment plans for patients including assessment of the problem, type and extent of treatment required and sequence of appointments to complete treatments.
- 6.10. Obtain blood pressure on patients presenting for treatment.
- 6.11. Perform complete oral prophylaxis and non-surgical periodontal treatment on ambulatory patients using ultrasonic and hand instruments.
- 6.12. Perform subgingival scaling, root planing and curettage under local anesthesia administered by a dental officer and perform topical fluoride applications.
- 6.13. Treat acute necrotizing ulcerative gingivitis.

- 6.14. Polish teeth and apply disclosing solutions, fluorides, desensitizing agents and other topical medications to the teeth for the purpose of controlling caries and dentinal hypersensitivity.
- 6.15. Clean and polish removable dental appliances worn by patients.
- 6.16. Maintain patient records in accordance with JCAHO and DTF requirements.
- 6.17. Comply with applicable quality assurance standards for preventive dentistry.
- 6.18. Instruct patients, individually and in group seminars, in proper oral hygiene using a variety of aids such as models of teeth, slides, toothbrushes, floss, disclosing tablets, mirrors, interproximal brushes and rubber tips.
- 6.19. Plan and adapt oral home care techniques to the specific need of the individual patient.
- 6.20. Explain causes of caries and periodontal disease to patients and the importance of nutrition in maintaining dental and systemic health.
- 6.21. Monitor, supervise and assist in training dental technicians involved in direct patient care to perform scaling, prophylaxes, polishing procedures, fluoride applications, sealants, and oral home care instructions. This may include preparing and presenting scheduled lectures to staff.
- 6.22. Maintain a record of patient treatment and number of patients treated.
- 6.23. Record oral condition of teeth and supporting tissues, type of therapy provided and progress notes.
- 6.24. Clean and maintain instruments and ensure their sterility.
- 6.25. Treat acute necrotizing ulcerative gingivitis.
- 6.26. Assist in Oral Diagnosis Sick Call to include exposing and developing periapical, bitewing and panoramic radiographs.
- 6.27. Provide oral prophylaxis, preventive dentistry procedures and non-surgical periodontal therapy.
- 6.28. Clean and maintain work area, including light mopping, to meet the clinic's standards.
- 6.29. Be assigned other duties consistent with the normal duties of a dental hygienist as directed by the Commander/Commanding Officer to include, but not limited to, participating in command quality improvement and assurance meetings.
- 6.30. Administration of local anesthesia (infiltration and block anesthesia) is not a required qualification; however, if the appropriate background training and credentials exist, clinical privileges may be granted.
- 6.31. Clean and maintain common areas, including lunchrooms, break rooms, and patient waiting areas to meet the clinic's standards.

7. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR DENTAL HYGIENISTS.

- 7.1. Possess a degree or certificate in dental hygiene from a school of dental hygiene approved by the Council on Dental Education of the American Dental Association (ADA).
- 7.2. Hold a current, unrestricted license to practice dental hygiene in any one of the fifty States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands and maintenance of same.
- 7.3. Experience as a dental hygienist for at least 12 months within the preceding 24 months, OR have graduated from an ADA approved dental hygiene program within the preceding 12 months.

7.4. Either (a) successfully complete at least 12 classroom hours of continuing dental hygiene education within the preceding 18 months which maintain skills and knowledge in dental hygiene and preventive dentistry OR (b) have graduated from an ADA approved dental hygiene program within the preceding 12 months.

7.5. Letters of recommendation.

7.5.1. For incumbents, 1 letter of recommendation from their current workplace supervisor which at a minimum, states, (a) they meet the education and experience requirements of this contract and (b) their performance has been satisfactory. Although the recommending Government official is free to add any additional information they wish, without these two specific items, the Government will reject the letter. Additionally, the letter must provide the name, title, phone number, date of reference, address and signature of individual providing the letter.

7.5.2. For healthcare workers whom are not incumbents under Navy contracts, letters of recommendation from three practicing dentists attesting to the HCW's clinical skills. If a recent graduate per 7.3. above, the three letters of recommendation may be either from practicing dentists or from faculty members where the dental hygiene degree was received. Reference letters must have been written within the preceding three years and must include name, title, phone number, date of reference, address and signature of individual providing reference.

ATTACHMENT 002
POSITION SPECIFIC STATEMENT OF WORK
DENTAL ASSISTANT
NAVAL DENTALCENTER GULF COAST, PENSACOLA, FL
AND SUBORDINATE BRANCH CLINICS AS IDENTIFIED HEREIN

1. LABOR CATEGORY. The Contractor shall provide DENTAL ASSISTANT services as referenced in Section B, CLIN 0002 in the following locations and quantities:

1.1. SLIN 0002AA, Branch Dental Clinic, Naval Air Station, Pensacola, FL 5.0 FTE (10480 hours), and

1.2. SLIN 0002AB, Branch Dental Clinic, Naval Aviation Technical Training Center, Pensacola, FL 9.0 FTE (18864 hours), and

1.3. SLIN 0002AC, Branch Dental Clinic, Naval Technical Training Center Corry Station, Pensacola, FL 2.0 FTE (4192 hours), and

1.4. SLIN 0002AD, Branch Dental Clinic, Naval Air Station, Whiting Field, FL 1.0 FTE (2096 hours), and

1.5. SLIN 0002AE, Branch Dental Clinic, New Orleans, LA 3.0 FTE (6288 hours), and

1.6. SLIN 0002AF, Branch Dental Clinic, Naval Construction Battalion Center, Gulfport, MS 1.0 FTE (2096 hours), and

1.7. SLIN 0002AG, Branch Dental Clinic, Meridian, MS 3.0 FTE (6288 hours), and

1.8. SLIN 0002AH, Branch Dental Clinic Pascagoula, MS 1.0 FTE (2096 hours), and

1.9. SLIN 0002AJ, Branch Dental Clinic, Naval Support Activity, Millington, TN 3.0 FTE (6288 hours), and

1.10. SLIN 0002AK, Branch Dental Clinic Naval Air Station, Corpus Christi, TX 3.0 FTE (6288 hours), and

1.11. SLIN 0002AL, Branch Dental Clinic, Naval Air Station, Kingsville, TX 1.0 FTE (2096 hours), and

1.12. SLIN 0002AM, Branch Dental Clinic, Naval Air Station, Fort Worth, TX 2.0 FTE (4192 hours).

2. DUTY HOURS. The Branch Clinic Director will provide specific schedules for daily starting and ending working hours at each clinic location at least 2 weeks in advance. In all cases though, HCWs shall provide services Monday through Friday, excluding Federal holidays, as stated in the basic contract, between the hours of 0600 and 1800. Full-time HCWs shall provide 40 hours of compensated service Monday through Friday. Part-time HCWs shall provide 20 hours of compensated service Monday through Friday.

3. ABSENCES AND LEAVE. The HCWs shall accrue leave as stated in the basic contract.

4. GENERAL DUTIES AND RESPONSIBILITIES. The HCW shall:

4.1. Provide for the examination, treatment, and disposition of patients compatible with the DTF's operating capacity and equipment.

4.2. Coordinate with other health care departments and Clinic staff members to provide complete care including but not limited to, preventive dentistry procedures and non-surgical periodontal therapy, to active duty personnel and eligible beneficiary patients.

4.3. Provide training to staff for routine dental assistant activities and procedures so that the benefit of routine care can be accrued.

4.4. Be subject to guidelines set forth in the Command's quality assurance and risk management instructions. The HCW shall perform administrative duties that include maintaining statistical records of the HCW's clinical workload, participating in dental education programs, preparing documentation for boards, and participating in clinical staff quality assurance functions at the prerogative of the Commanding Officer.

4.5. Become familiar with and follow standardized Navy concepts of Phased Dentistry and Managed Dental Care.

4.6. Be responsible for a full range of dental assisting procedures in support of Dental Officer examinations and delivery of treatment under the multi-chair/expanded functions format within the personnel and equipment capabilities and limitations of the DTF. The HCW shall aid in the provision of mandated dental surveillance and preventive services and assist in ensuring the quality and timeliness of treatment records and reports required to document procedures performed and care provided. The HCW shall also refer patients who present with a complaint to staff dentists for evaluation and continuation of care and attend multidisciplinary treatment team meetings on behalf of the dental officers.

5. SPECIFIC DUTIES/RESPONSIBILITIES OF DENTAL ASSISTANTS. The HCW shall:

5.1. Perform a full range of dental assistant duties, within the scope of this statement of work, on site using Government furnished supplies, facilities and equipment within the assigned unit of the DTF. Workload occurs as a result of scheduled and unscheduled requirements for care. The HCW's actual clinical performance will be a function of the overall demand for dental assisting services. The HCW's productivity is expected to be comparable to that of other dental assistants assigned to the same facility and authorized the same scope of practice. The HCW shall either possess skills in placement of sealants or be willing to receive training of same which will be provided by dental treatment facility.

5.2. Maintain patient records in accordance with JCAHO and DTF requirements.

5.3. Select and arrange instruments and prepare set-ups for patient treatment.

5.4. Assist during patient examination and treatment.

5.5. Assist during administration of anesthesia.

5.6. Assist in placement and removal of sutures.

5.7. Prepare restorative and impression materials.

5.8. Dispose of contaminated waste in accordance with the standard procedures of the DTF.

5.9. Load and unload radiographic film cassettes.

5.10. Expose bitewing, periapical and occlusal film utilizing bisecting angle or paralleling radiographic techniques.

5.11. Perform radiographic darkroom procedures to include manual and automatic film processing.

5.12. Instruct on basic oral hygiene care.

5.13. Maintain operatory to meet the clinic's cleanliness and infection control standards.

5.14. Perform other duties consistent with the normal duties of a multi-chair/expanded functions dental assistant as directed by the Commanding Officer to include, but not limited to, working at the appointments desk, performing Central Sterile Supply functions, and participating in command quality improvement and assurance meetings, etc.

5.15. Under the supervision of a dentist, all HCWs may be permitted to participate in the Expanded Functions training program and certification in accordance with BUMEDINST 6600.13 and local directives at the Commanding Officer's discretion.

5.16. Clean and maintain common areas, including lunchrooms, break rooms, and patient waiting areas to meet the clinic's standards.

6. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR DENTAL ASSISTANTS ARE AS FOLLOWS:

6.1. Possess a Certificate or Associate Degree as a dental assistant/technician from a state accredited program and 12 months experience within the preceding 60 months OR certification from a military dental technician or dental assistant "A" school and 12 months experience within the preceding 60 months OR certification from a Red Cross Dental Assistant course and 12 months experience within the preceding 60 months OR certification from a Military Red Cross Dental Assistant course within the preceding 6 months OR 36 months experience within the preceding 60 months as a dental assistant in a private practice or a military Clinic OR membership in good standing with the American Association of Dental Assistants with required continuing education and 12 months experience within the preceding 60 months OR graduation from a state accredited program for dental assistants or dental technology within the preceding 12 months.

6.2. Letters of recommendation.

6.2.1. For incumbents, 1 letter of recommendation from their current workplace supervisor which at a minimum, states, (a) they meet the education and experience requirements of this contract and (b) their performance has been satisfactory. Although the recommending Government official is free to add any additional information they wish, without these two specific items, the Government will reject the letter. Additionally, the letter must provide the name, title, phone number, date of reference, address and signature of individual providing the letter.

6.2.2. For healthcare workers whom are not incumbents under Navy contracts, three letters of recommendation, at least two of which must be from either practicing dentists or faculty members where the HCW received his/her dental assistant training. The letters must attest to the HCW's clinical skills, patient rapport, etc. Recommendation letters must include name, title, phone number, date of reference, address and signature of individual providing the letter. The third letter may be from a previous employer. Reference letters must have been written within the preceding three years.

6.3. Certification or permit for use of dental X-ray equipment.

6.4. For Dental Assistants Seeking Qualification as Expanded Functions Dental Assistants. Although there is no requirement for this credential in CLINs 0002 and 0004, the Government reserves the right to seek this additional credential upon notification to the Contractor. For dental assistants seeking qualification as an Expanded Functions Dental Assistant, at least one of the following additional credentials is required:

6.4.1. Successful completion of the Expanded Functions training program and certification in accordance with BUMEDINST 6600.13 (<http://navymedicine.med.navy.mil/instructions/external/6600-13.pdf>) or equivalent DoD Expanded Functions training program and certification, or

6.4.2. Graduation from an Expanded Functions Dental Assisting program accredited by the Commission on Dental Accreditation of the American Dental Association within the last 5 years and at least 1,000 hours of work experience in the past two years performing expanded functions, or

6.4.3. Successful completion of Dental Assisting National Board Certification Examination and at least 1,000 hours of work experience in the past two years performing expanded functions, or

6.4.4. Successful completion of a state Expanded Functions Dental Assisting Certification Examination, and current certification to practice Expanded Functions Dental Assisting in any one of the fifty States, the District of

Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands; maintenance of same; and, at least 1,000 hours of work experience in the past two years performing expanded functions, or

6.4.5. Dental Assistants who have been trained in other programs to perform expanded functions having at least 1,000 hours of work experience in the past two years performing the functions listed in <http://navymedicine.med.navy.mil/instructions/external/6600-13.pdf> may qualify for this position by credential.

ATTACHMENT 003
POSITION SPECIFIC STATEMENT OF WORK
DENTAL ASSISTANT
KEESLER AIR FORCE BASE, BILOXI, MS

1. LABOR CATEGORY. The Contractor shall provide DENTAL ASSISTANT services as referenced in Section B, CLIN 0002AN for Keesler Air Force Base Biloxi, MS 2.0 FTE (4192 hours)

2. DUTY HOURS. The Branch Clinic Director will provide specific schedules for daily starting and ending working hours at least 2 weeks in advance. In all cases though, HCWs shall provide services Monday through Friday, excluding Federal holidays, as stated in the basic contract, between the hours of 0600 and 1800. Full-time HCWs shall provide 40 hours of compensated service Monday through Friday. Part-time HCWs shall provide 20 hours of compensated service Monday through Friday.

3. ABSENCES AND LEAVE. The HCWs shall accrue leave as stated in the basic contract.

4. GENERAL DUTIES AND RESPONSIBILITIES. The HCW shall:

4.1. Provide for the examination, treatment, and disposition of patients compatible with the DTF's operating capacity and equipment.

4.2. Coordinate with other health care departments and Clinic staff members to provide complete care including but not limited to, preventive dentistry procedures and non-surgical periodontal therapy, to active duty personnel and eligible beneficiary patients.

4.3. Provide training to staff for routine dental assistant activities and procedures so that the benefit of routine care can be accrued.

4.4. Be subject to guidelines set forth in the Command's quality assurance and risk management instructions. The HCW shall perform administrative duties that include maintaining statistical records of the HCW's clinical workload, participating in dental education programs, preparing documentation for boards, and participating in clinical staff quality assurance functions at the prerogative of the Commanding Officer/Commander.

4.5. Become familiar with and follow standardized concepts of Phased Dentistry and Managed Dental Care.

4.6. Be responsible for a full range of dental assisting procedures in support of Dental Officer examinations and delivery of treatment under the "four handed dentistry" format within the personnel and equipment capabilities and limitations of the DTF. The HCW shall aid in the provision of mandated dental surveillance and preventive services and assist in ensuring the quality and timeliness of treatment records and reports required to document procedures performed and care provided. The HCW shall also refer patients who present with a complaint to staff dentists for evaluation and continuation of care and attend multidisciplinary treatment team meetings on behalf of the dental officers.

5. SPECIFIC DUTIES/RESPONSIBILITIES OF DENTAL ASSISTANTS. The HCW shall:

5.1. Perform a full range of dental assistant duties, within the scope of this statement of work, on site using Government furnished supplies, facilities and equipment within the assigned unit of the DTF. Workload occurs as a result of scheduled and unscheduled requirements for care. The HCW's actual clinical performance will be a function of the overall demand for dental assisting services. The HCW's productivity is expected to be comparable to that of other dental assistants assigned to the same facility and authorized the same scope of practice.

5.2. Maintain patient records in accordance with JCAHO and DTF requirements.

5.3. Select and arrange instruments and prepare set-ups for patient treatment.

- 5.4. Assist during patient examination and treatment.
- 5.5. Assist during administration of anesthesia.
- 5.6. Assist in placement and removal of sutures.
- 5.7. Prepare restorative and impression materials.
- 5.8. Dispose of contaminated waste in accordance with the standard procedures of the DTF.
- 5.9. Load and unload radiographic film cassettes.
- 5.10. Expose bitewing, periapical and occlusal film utilizing bisecting angle or paralleling radiographic techniques.
- 5.11. Perform radiographic darkroom procedures to include manual and automatic film processing.
- 5.12. Instruct on basic oral hygiene care.
- 5.13. Maintain operatory to meet the clinic's cleanliness and infection control standards.
- 5.14. Perform other duties consistent with the normal duties of a multi-chair dental assistant as directed by the Commanding Officer to include, but not limited to, working at the appointments desk, performing Central Sterile Supply functions, and participating in command quality improvement and assurance meetings, etc.
- 5.15. Under the supervision of a dentist, all HCWs may be permitted to participate in the Expanded Functions training program and certification in accordance with Air Force Instructions and local directives at the Commanding Officer's/Commander's discretion.
- 5.16. Clean and maintain common areas, including lunchrooms, break rooms, and patient waiting areas to meet the clinic's standards.

6. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR DENTAL ASSISTANTS ARE AS FOLLOWS:

- 6.1. Possess a Certificate or Associate Degree as a dental assistant/technician from a state accredited program and 12 months experience within the preceding 60 months OR certification from a military dental technician or dental assistant "A" school and 12 months experience within the preceding 60 months OR certification from a Red Cross Dental Assistant course and 12 months experience within the preceding 60 months OR certification from a Military Red Cross Dental Assistant course within the preceding 6 months OR 36 months experience within the preceding 60 months as a dental assistant in a private practice or a military Clinic OR membership in good standing with the American Association of Dental Assistants with required continuing education and 12 months experience within the preceding 60 months OR graduation from a state accredited program for dental assistants or dental technology within the preceding 12 months.
- 6.2. Letters of recommendation.
 - 6.2.1. For incumbents, 1 letter of recommendation from their current workplace supervisor which at a minimum, states, (a) they meet the education and experience requirements of this contract and (b) their performance has been satisfactory. Although the recommending Government official is free to add any additional information they wish, without these two specific items, the Government will reject the letter. Additionally, the letter must provide the name, title, phone number, date of reference, address and signature of individual providing the letter.
 - 6.2.2. For healthcare workers whom are not incumbents under Navy contracts, three letters of recommendation, at least two of which must be from either practicing dentists or faculty members where the HCW received his/her dental assistant training. The letters must attest to the HCW's clinical skills, patient rapport, etc.

Recommendation letters must include name, title, phone number, date of reference, address and signature of individual providing the letter. The third letter may be from a previous employer. Reference letters must have been written within the preceding three years.

6.3. Certification or permit for use of dental X-ray equipment.

6.4. For Dental Assistants Seeking Qualification as Expanded Functions Dental Assistants. Although there is no requirement for this credential in CLINs 0002 and 0004, the Government reserves the right to seek this additional credential upon notification to the Contractor. For dental assistants seeking qualification as an Expanded Functions Dental Assistant, at least one of the following additional credentials is required:

6.4.1. Successful completion of the Expanded Functions training program and certification in accordance with BUMEDINST 6600.13 (<http://navymedicine.med.navy.mil/instructions/external/6600-13.pdf>) or equivalent DoD Expanded Functions training program and certification, or

6.4.2. Graduation from an Expanded Functions Dental Assisting program accredited by the Commission on Dental Accreditation of the American Dental Association within the last 5 years and at least 1,000 hours of work experience in the past two years performing expanded functions, or

6.4.3. Successful completion of Dental Assisting National Board Certification Examination and at least 1,000 hours of work experience in the past two years performing expanded functions, or

6.4.4. Successful completion of a state Expanded Functions Dental Assisting Certification Examination, and current certification to practice Expanded Functions Dental Assisting in any one of the fifty States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands; maintenance of same; and, at least 1,000 hours of work experience in the past two years performing expanded functions, or

6.4.5. Dental Assistants who have been trained in other programs to perform expanded functions having at least 1,000 hours of work experience in the past two years performing the functions listed in <http://navymedicine.med.navy.mil/instructions/external/6600-13.pdf> may qualify for this position by credential.

ATTACHMENT 004
POSITION SPECIFIC STATEMENT OF WORK
DENTAL HYGIENIST
NAVAL DENTALCENTER SOUTHEAST, JACKSONVILLE, FL
AND SUBORDINATE BRANCH CLINICS AS IDENTIFIED HEREIN

1. LABOR CATEGORY. The Contractor shall provide DENTAL HYGIENIST services as referenced in Section B, CLIN 0003 in the following locations and quantities:

1.1. SLIN 0003AA, Jacksonville FL area Branch Dental Clinics including Branch Dental Clinic, Naval Air Station, Jacksonville, FL 2.0 FTE (4192 hours); and Branch Dental Clinic, Naval Station, Mayport, FL 4.0 FTE (8384 hours); and Branch Dental Clinic, Naval Submarine Base, Kings Bay, GA 1.0 FTE (2096 hours), and

1.2. SLIN 0003AB Branch Dental Clinic, Naval Air Station, Key West, FL 1.0 FTE (2096 hours), and

1.3. SLIN 0003AC Branch Dental Clinic Atlanta, Naval Air Station, Marietta, GA 1.0 FTE (2096 hours).

1.4. SLIN 0003AD Branch Dental Clinic Charleston, 110 NNPTC Circle, Bldg 2417, Goose Creek, SC 1.0 FTE (2096 hours).

2. DUTY HOURS. The Branch Clinic Director will provide specific schedules for daily starting and ending working hours at each clinic location at least 2 weeks in advance. In all cases though, HCWs shall provide services Monday through Friday, excluding Federal holidays, as stated in the basic contract, between the hours of 0600 and 1800. Full-time HCWs shall provide 40 hours of compensated service Monday through Friday. Part-time HCWs shall provide 20 hours of compensated service Monday through Friday.

3. ABSENCES AND LEAVE. HCWs shall accrue leave as stated in the basic contract.

4. CREDENTIALING REQUIREMENTS. The Contractor shall submit credentialing information to the Professional Affairs Coordinator, Naval Dental Center Southeast, Jacksonville FL (via the COR) 30 days prior to performing services under this contract. HCWs shall also complete an Individual Professional File (IPF) as stated in the Section C of the basic contract.

5. GENERAL DUTIES AND RESPONSIBILITIES. The HCW shall:

5.1. Become familiar with and follow Navy standardized concepts of Phased Dentistry and Managed Dental Care.

5.2. Maintain continuing education throughout the term of the contract.

5.3. Direct supporting Government employees assigned to him or her during the performance of clinical procedures. Such direction and interaction will comply with Government and professional clinical standards and accepted protocols. The HCW will be subject to guidelines set forth in the Command's quality assurance and risk management instructions. The HCW shall perform administrative duties that include maintaining statistical records of his or her clinical workload, participating in dental education programs, preparing documentation for boards, and participating in clinical staff quality assurance functions at the prerogative of the Commanding Officer.

6. SPECIFIC DUTIES/RESPONSIBILITIES OF DENTAL HYGIENISTS ARE AS FOLLOWS:

6.1. Routine workload is scheduled by the DTF. Primary workload is a result of appointments generated by patient activity through the Comprehensive General Dentistry Department or scheduled through the DTF. The HCW has sole clinical responsibility for diagnostic examinations and the development of comprehensive treatment plans, provision of mandated surveillance and preventive services and, the quality and timeliness of treatment records and reports required to document procedures performed and care provided. The HCW shall provide comprehensive dental care within the personnel, equipment, and supply capabilities of the DTF. Because

patients frequently have overlapping, multiple problems and often require multidisciplinary, long-term treatment, the HCW shall refer patients to staff specialists for consultative opinions and continuation of care. The HCW shall also provide care to patients that other staff providers have referred for consultation and treatment.

6.2. Review and complete preliminary dental examinations for new periodontal and recall patients. Oversee and manage periodontal patient recall programs.

6.3. Review patient's medical and dental history for evidence of past and present conditions such as medical illnesses and use of drugs that may complicate or modify dental hygiene treatment.

6.4. Examine teeth and surrounding tissues for evidence of caries and periodontal disease, and then record findings.

6.5. Inspect head and neck, examine mouth, throat and pharynx for evidence of disease such as oral cancer and/or soft tissue pathosis.

6.6. Expose, develop and interpret radiographs to identify tooth structure, periodontal support and other abnormalities such as periodontal bone loss, periapical pathosis, caries, defective restorations, improper tooth contours and contact relationships.

6.7. Refer suspected medical conditions, hard and soft tissue abnormalities, caries, periapical and periodontal pathosis and traumatic or suspicious lesions to the dental officer for evaluation.

6.8. Perform pit and fissure sealant applications.

6.9. Develop dental hygiene treatment plans for patients including assessment of the problem, type and extent of treatment required and sequence of appointments to complete treatments.

6.10. Obtain blood pressure on patients presenting for treatment.

6.11. Perform complete oral prophylaxis and non-surgical periodontal treatment on ambulatory patients using ultrasonic and hand instruments.

6.12. Perform subgingival scaling, root planing and curettage under local anesthesia administered by a dental officer and perform topical fluoride applications.

6.13. Treat acute necrotizing ulcerative gingivitis.

6.14. Polish teeth and apply disclosing solutions, fluorides, desensitizing agents and other topical medications to the teeth for the purpose of controlling caries and dentinal hypersensitivity.

6.15. Clean and polish removable dental appliances worn by patients.

6.16. Maintain patient records in accordance with JCAHO and DTF requirements.

6.17. Comply with applicable quality assurance standards for preventive dentistry.

6.18. Instruct patients, individually and in group seminars, in proper oral hygiene using a variety of aids such as models of teeth, slides, toothbrushes, floss, disclosing tablets, mirrors, interproximal brushes and rubber tips.

6.19. Plan and adapt oral home care techniques to the specific need of the individual patient.

6.20. Explain causes of caries and periodontal disease to patients and the importance of nutrition in maintaining dental and systemic health.

- 6.21. Monitor, supervise and assist in training dental technicians involved in direct patient care to perform scaling, prophylaxes, polishing procedures, fluoride applications and oral home care instructions. This may include preparing and presenting scheduled lectures to staff.
- 6.22. Maintain a record of patient treatment and number of patients treated.
- 6.23. Record oral condition of teeth and supporting tissues, type of therapy provided and progress notes.
- 6.24. Clean and maintain instruments and ensure their sterility.
- 6.25. Treat acute necrotizing ulcerative gingivitis.
- 6.26. Assist in Oral Diagnosis Sick Call to include exposing and developing periapical, bitewing and panoramic radiographs.
- 6.27. Provide oral prophylaxis, preventive dentistry procedures and non-surgical periodontal therapy.
- 6.28. Clean and maintain work area, including light mopping, to meet the clinic's standards.
- 6.29. Be assigned other duties consistent with the normal duties of a dental hygienist as directed by the Commander/Commanding Officer to include, but not limited to, participating in command quality improvement and assurance meetings.
- 6.30. Administration of local anesthesia (infiltration and block anesthesia) is not a required qualification; however, if the appropriate background training and credentials exist, clinical privileges may be granted.
- 6.31. Clean and maintain common areas, including lunchrooms, break rooms, and patient waiting areas to meet the clinic's standards.

7. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR DENTAL HYGIENISTS.

- 7.1. Possess a degree or certificate in dental hygiene from a school of dental hygiene approved by the Council on Dental Education of the American Dental Association (ADA).
- 7.2. Hold a current, unrestricted license to practice dental hygiene in any one of the fifty States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands and maintenance of same.
- 7.3. Experience as a dental hygienist for at least 12 months within the preceding 24 months, OR have graduated from an ADA approved dental hygiene program within the preceding 12 months.
- 7.4. Either (a) successfully complete at least 12 classroom hours of continuing dental hygiene education within the preceding 18 months which maintain skills and knowledge in dental hygiene and preventive dentistry OR (b) have graduated from an ADA approved dental hygiene program within the preceding 12 months.
- 7.5. Letters of recommendation.
 - 7.5.1. For incumbents, 1 letter of recommendation from their current workplace supervisor which at a minimum, states, (a) they meet the education and experience requirements of this contract and (b) their performance has been satisfactory. Although the recommending Government official is free to add any additional information they wish, without these two specific items, the Government will reject the letter. Additionally, the letter must provide the name, title, phone number, date of reference, address and signature of individual providing the letter.
 - 7.5.2. For healthcare workers whom are not incumbents under Navy contracts, letters of recommendation from three practicing dentists attesting to the HCW's clinical skills. If a recent graduate per 7.3. above, the three letters of recommendation may be either from practicing dentists or from faculty members where the dental hygiene

degree was received. Reference letters must have been written within the preceding three years and must include name, title, phone number, date of reference, address and signature of individual providing reference.

ATTACHMENT 005
POSITION SPECIFIC STATEMENT OF WORK
DENTAL ASSISTANT
NAVAL DENTALCENTER SOUTHEAST, JACKSONVILLE, FL
AND SUBORDINATE BRANCH CLINICS AS IDENTIFIED HEREIN

1. LABOR CATEGORY. The Contractor shall provide DENTAL ASSISTANT services as referenced in Section B, CLIN 0004 in the following locations and quantities: (NOTE: The Bureau of Medicine and Surgery (BUMED) has mandated that the Naval Dental Center Southeast reduce their Dental Assistant staffing by 7 FTE's during Fiscal Year 2004. When the reduction will take place during Fiscal Year 2004 and the exact locations of the positions to be reduced are unknown at this time.)

1.1. SLIN 0004AA Jacksonville FL area Branch Dental Clinics including Branch Dental Clinic, Naval Air Station, Jacksonville, FL 7.0 FTE (14672 hours); and Branch Dental Clinic, Naval Station, Mayport, FL 14.0 FTE (29344 hours); and Branch Dental Clinic, Naval Submarine Base, Kings Bay, GA 6.0 FTE (12576 hours), and

1.2. 0004AB Branch Dental Clinic Naval Air Station, Key West, FL 1.0 FTE (2096 hours), and

1.3. 0004C Branch Dental Clinic MCLB, Albany, GA 1.0 FTE (2096 hours).

2. DUTY HOURS. The Branch Clinic Director will provide specific schedules for daily starting and ending working hours at each clinic location at least 2 weeks in advance. In all cases though, HCWs shall provide services Monday through Friday, excluding Federal holidays, as stated in the basic contract, between the hours of 0600 and 1800. Full-time HCWs shall provide 40 hours of compensated service Monday through Friday. Part-time HCWs shall provide 20 hours of compensated service Monday through Friday.

3. ABSENCES AND LEAVE. The HCWs shall accrue leave as stated in the basic contract.

4. GENERAL DUTIES AND RESPONSIBILITIES. The HCW shall:

4.1. Provide for the examination, treatment, and disposition of patients compatible with the DTF's operating capacity and equipment.

4.2. Coordinate with other health care departments and Clinic staff members to provide complete care including but not limited to, preventive dentistry procedures and non-surgical periodontal therapy, to active duty personnel and eligible beneficiary patients.

4.3. Provide training to staff for routine dental assistant activities and procedures so that the benefit of routine care can be accrued.

4.4. Be subject to guidelines set forth in the Command's quality assurance and risk management instructions. The HCW shall perform administrative duties that include maintaining statistical records of the HCW's clinical workload, participating in dental education programs, preparing documentation for boards, and participating in clinical staff quality assurance functions at the prerogative of the Commanding Officer.

4.5. Become familiar with and follow standardized Navy concepts of Phased Dentistry and Managed Dental Care.

4.6. Be responsible for a full range of dental assisting procedures in support of Dental Officer examinations and delivery of treatment under the "four handed dentistry" format within the personnel and equipment capabilities and limitations of the DTF. The HCW shall aid in the provision of mandated dental surveillance and preventive services and assist in ensuring the quality and timeliness of treatment records and reports required to document procedures performed and care provided. The HCW shall also refer patients who present with a complaint to staff dentists for evaluation and continuation of care and attend multidisciplinary treatment team meetings on behalf of the dental officers.

5. SPECIFIC DUTIES/RESPONSIBILITIES OF DENTAL ASSISTANTS. The HCW shall:

5.1. Perform a full range of dental assistant duties, within the scope of this statement of work, on site using Government furnished supplies, facilities and equipment within the assigned unit of the DTF. Workload occurs as a result of scheduled and unscheduled requirements for care. The HCW's actual clinical performance will be a function of the overall demand for dental assisting services. The HCW's productivity is expected to be comparable to that of other dental assistants assigned to the same facility and authorized the same scope of practice.

5.2. Maintain patient records in accordance with JCAHO and DTF requirements.

5.3. Select and arrange instruments and prepare set-ups for patient treatment.

5.4. Assist during patient examination and treatment.

5.5. Assist during administration of anesthesia.

5.6. Assist in placement and removal of sutures.

5.7. Prepare restorative and impression materials.

5.8. Dispose of contaminated waste in accordance with the standard procedures of the DTF.

5.9. Load and unload radiographic film cassettes.

5.10. Expose bitewing, periapical and occlusal film utilizing bisecting angle or paralleling radiographic techniques.

5.11. Perform radiographic darkroom procedures to include manual and automatic film processing.

5.12. Instruct on basic oral hygiene care.

5.13. Maintain operatory to meet the clinic's cleanliness and infection control standards.

5.14. Perform other duties consistent with the normal duties of a multi-chair dental assistant as directed by the Commanding Officer to include, but not limited to, working at the appointments desk, performing Central Sterile Supply functions, and participating in command quality improvement and assurance meetings, etc.

5.15. Under the supervision of a dentist, all HCWs may be permitted to participate in the Expanded Functions training program and certification in accordance with BUMEDINST 6600.13 and local directives at the Commanding Officer's discretion.

5.16. Clean and maintain common areas, including lunchrooms, break rooms, and patient waiting areas to meet the clinic's standards.

6. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR DENTAL ASSISTANTS ARE AS FOLLOWS:

6.1. Possess a Certificate or Associate Degree as a dental assistant/technician from a state accredited program and 12 months experience within the preceding 60 months OR certification from a military dental technician or dental assistant "A" school and 12 months experience within the preceding 60 months OR certification from a Red Cross Dental Assistant course and 12 months experience within the preceding 60 months OR certification from a Military Red Cross Dental Assistant course within the preceding 6 months OR 36 months experience within the preceding 60 months as a dental assistant in a private practice or a military Clinic OR membership in good standing with the American Association of Dental Assistants with required continuing education and 12 months experience within the preceding 60 months OR graduation from a state accredited program for dental assistants or dental technology within the preceding 12 months.

6.2. Letters of recommendation.

6.2.1. For incumbents, 1 letter of recommendation from their current workplace supervisor which at a minimum, states, (a) they meet the education and experience requirements of this contract and (b) their performance has been satisfactory. Although the recommending Government official is free to add any additional information they wish, without these two specific items, the Government will reject the letter. Additionally, the letter must provide the name, title, phone number, date of reference, address and signature of individual providing the letter.

6.2.2. For healthcare workers whom are not incumbents under Navy contracts, three letters of recommendation, at least two of which must be from either practicing dentists or faculty members where the HCW received his/her dental assistant training. The letters must attest to the HCW's clinical skills, patient rapport, etc. Recommendation letters must include name, title, phone number, date of reference, address and signature of individual providing the letter. The third letter may be from a previous employer. Reference letters must have been written within the preceding three years.

6.3. Certification or permit for use of dental X-ray equipment.

6.4. For Dental Assistants Seeking Qualification as Expanded Functions Dental Assistants. Although there is no requirement for this credential in CLINs 0002 and 0004, the Government reserves the right to seek this additional credential upon notification to the Contractor. For dental assistants seeking qualification as an Expanded Functions Dental Assistant, at least one of the following additional credentials is required:

6.4.1. Successful completion of the Expanded Functions training program and certification in accordance with BUMEDINST 6600.13 (<http://navymedicine.med.navy.mil/instructions/external/6600-13.pdf>) or equivalent DoD Expanded Functions training program and certification, or

6.4.2. Graduation from an Expanded Functions Dental Assisting program accredited by the Commission on Dental Accreditation of the American Dental Association within the last 5 years and at least 1,000 hours of work experience in the past two years performing expanded functions, or

6.4.3. Successful completion of Dental Assisting National Board Certification Examination and at least 1,000 hours of work experience in the past two years performing expanded functions, or

6.4.4. Successful completion of a state Expanded Functions Dental Assisting Certification Examination, and current certification to practice Expanded Functions Dental Assisting in any one of the fifty States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands; maintenance of same; and, at least 1,000 hours of work experience in the past two years performing expanded functions, or

6.4.5. Dental Assistants who have been trained in other programs to perform expanded functions having at least 1,000 hours of work experience in the past two years performing the functions listed in <http://navymedicine.med.navy.mil/instructions/external/6600-13.pdf> may qualify for this position by credential.

ATTACHMENT 015
ELECTRONIC FILE FORMAT: OFFEROR'S MANAGEMENT PLAN

A. Recruitment

1. Describe any unusual or extraordinary recruitment methods that may be required to fill scarce marketplace commodities for CLINs 0001 through 0004, and Notional Task Orders NTO001 and NTO002. If none exist, so state.
2. Describe any innovations or ideas to mitigate any risks identified to successful recruitment.

B. Retention

1. Provide the typical fringe and other benefit packages paid to HCWs. If the offeror intends to hire sub-contractors also, so state.
 - a. Indicate the benefit provided to HCWs including:
 - 401K. If "Yes", what amount or percentage or dollar amount do you contribute?
 - b. Health Insurance. If "Yes", what amount or percentage or dollar amount do you contribute?
 - c. Dental Insurance. If "Yes", what amount or percentage or dollar amount do you contribute?
 - d. Is a 125 Pre-tax medical spending account available?
 - e. Uniform Allowance. If "Yes", what amount or percentage do you contribute?
 - f. Continuing Education. If "Yes", (a) what amount or percentage do you contribute, and (b) describe your continuing education benefit in terms of types of courses and number of days/hours?
 - g. Do you allow personnel to decline all or some benefits in exchange for an increase in direct compensation?
 - h. Other Benefits: Identify any other benefits provided and the amount you contribute.
 - i. Do benefits for part time employees differ from those offered to full time employees? If "yes", please explain how those benefits differ.
 2. On-site assistance to employees.
 - a. How often will regular/scheduled contact be made with each employee?
 - b. How will contact be made (site visit, telephone, email, etc?)
 - c. Will there be an on-site or local (within 100 miles) representative? If "yes", what will this individual's responsibilities be for issues specifically including planned leave use, unplanned leave notification, payroll issues?
 - d. Are these services available to each health care worker which facilitate contact (i.e., "1-800" number, 24 hour POC via answering machine, etc?)
3. Describe any innovations or ideas to mitigate any risks identified to successful retention.

ATTACHMENT 015
ELECTRONIC FILE FORMAT; OFFEROR'S MANAGEMENT PLAN
(Continued)

C. Credentials and Licensure Submissions Tracking:

1. Describe how expiring licenses and certifications will be tracked to ensure that they are kept current and that the Government has the latest versions.
2. Describe the offeror's credentials compilation and verification process.
3. Describe any plan to pre-credential candidates before a need is identified.
4. Describe any plan that will keep candidates up to date on the status of the contract prior to contract award thus ensuring a smooth transition to contract start.

D. Sub-Contracting and Teaming. If a sub-contracting and/or teaming approach will be used, provide the following information. If no sub-contracting and/or teaming approach will be used, so state.

1. Describe the experience of the offeror's sub-Contractor(s)/teaming partner(s) with multiple dental labor categories across wide geographic areas that are relevant to the requirements of CLINs 0001 through 0004, CLINs 0009 through 0019, and NTO001 and NTO002. Medical experience, although relevant, is less relevant than comparable dental experience. This narrative discussion shall contain sufficient specificity and detail to assess its relevance.
2. Provide letters from the sub-Contractor(s) and/or teaming partner(s) that acknowledge the teaming arrangement and their participation if a contract is awarded. This acknowledgement may be a simple statement on letterhead paper, signed by an authorized representative who can be contacted and telephonically interviewed by the Government. Therefore, telephone numbers shall be provided which shall be accurate and legible.
3. Provide (at the offeror's choice, within the same letter) information from the sub-Contractor(s) and/or teaming partner(s) indicating the duties or performance responsibilities of each organization in the specific areas of recruitment, initial and ongoing credentialing, and overall project management.
4. Explain how these teaming arrangements will be used in the decision-making process within the contract. Which specific areas are delegated to the teaming partner and which are retained? How will the offeror hold the teaming partner accountable for non-performance or unacceptable performance?

