# HHS SUBCONTRACTING PLAN TEMPLATE

*A Subcontracting Plan is required if the estimated cost of the contract* ***may exceed $900,000 ($2,000,000 for construction)*** *Small businesses are excluded.*

***Informational purposes only****: The following outline meets the minimum requirements of section 8(d) of the Small Business Act, as amended, and implemented by the Federal Acquisition Regulations (FAR) Subpart 19.7. The U.S. Department of Health and Human Services (HHS), Office of Small and Disadvantaged Business Utilization (OSDBU) recommends that offerers use the following format as a guideline to submit proposed Individual Subcontracting Plans. It is not intended to replace any existing Corporate/Commercial Plan that is more extensive.*

*Questions should be forwarded to the Contracting Officer and/or Small Business Specialist/Subcontracting Program Manager.*

| | **PROJECT INFORMATION** | | |
|---|---|---|---|
| Solicitation/Contract No.: | | MOD No. (If applicable): | |
| Title of Acquisition: | | | |
| Contractor's Name: | | | |
| Period of Performance: | | Total Contract Amount (including options, and any modifications if this submission is due to a modification): | $ |
| Total Modification Amount: (if applicable) | $ | Base Period (if there are options): | $ |
| Option 1 (if applicable): | $ | Option 2 (if applicable): | $ |
| Option 3 (if applicable): | $ | Option 4 (if applicable): | $ |
| FAR 52.217-8 (if applicable): | $ | | |
| Contracting Officer/Specialist Name: | | Tel & Fax: | |
| OPDIV/Division/Branch (including location): | | Email: | |
| | | | |

**SUBCONTRACT PLAN REQUIREMENTS-** *Failure to include the essential information of FAR Subpart 19.7 may be cause for either a delay in acceptance or the rejection of a bid or offer when a subcontracting plan is required. "SUBCONTRACT," as used in this clause, means any agreement (other than one involving an employer-employee relationship) entered into by a Federal Government prime contractor or subcontractor requesting supplies or services required for performance of the contract or subcontract.*

**If assistance is needed to locate small business sources**, contact the Small Business Specialist (SBS) supporting the OPDIV/STAFFDIV. SBS contact information is located on the OSDBU website (https://osdbu.hhs.gov) or contact the HHS OSDBU Customer Care Center at sbmail@hhs.gov or (202) 690-7300..

HHS currently has the following subcontracting goals for Fiscal Year **2026**

| **Type of Concern** | **Goal (%)** |
|---|---|
| Small Business | 23.00% |
| Small Disadvantaged Business, including 8(a) Program Participants, Alaska Native Corporations (ANC) and Indian Tribes | 5.00% |
| Women Owned Small Business | 5.00% |
| Service Disabled Veteran Owned Small Business | 5.00% |
| HUBZone | 3.00% |

| | |
|---|---|
| **1. Type of Plan (check one):** | **Individual** ☐ ***Master (**Addendum**)** ☐ ***Commercial** ☐<br>*When Master is checked, Individual must also be checked and submission must include both.<br>*If Commercial is checked, please stop here and attach a copy of your commercial plan.<br><br>***For Informational Purposes:***<br><br>***Individual plan*** - all elements developed specifically for this contract and applicable for the full term of this contract.<br><br>***Master plan*** - goals developed for this contract, all other elements standardized and approved by a lead agency Federal Official; must be renewed every three years and contractor must provide copy of lead agency approval.<br><br>***Commercial products/service plan*** - goals are negotiated with the initial agency on a company-wide basis rather than for individual contracts; this plan applies to the entire production of commercial service or items or a portion thereof. The contractor sells commercial products and services customarily used for non-government purposes. The plan is effective during the offeror's fiscal year. This plan is negotiated annually. |

| **2. Subcontracting Goal Data: (FAR19.702(a)(1-3) & FAR 52.219-9(d)(1))**<br>Below indicate the dollar and percentage goals for Small Business (SB), Small Disadvantaged (SDB) including Alaska Native Corporations and Indian Tribes, Women-owned and Economically Disadvantaged Women-Owned (WOSB), Historically Underutilized Business Zone (HUBZone), Veteran Owned Small Business (VOSB), Service-Disabled Veteran-Owned (SDVOSB) Small Businesses and "Other than Small Business" (Other) as subcontractors. Indicate the base year and each option year, as specified in FAR 19.704. If any contract has more than four options, please attach additional sheets which illustrate dollar amounts and percentages.<br><br>**PLEASE NOTE: Zero dollars is not an acceptable goal for the SB, SDB, WOSB, HUBZone, VOSB or SDVOSB categories since this does not demonstrate a good faith effort throughout the period of performance of the contract.** | **% of Total Contract $** |
|---|---|
| For Individual Plans complete a(1): **(FAR 52.219-9(d)(2)(i))**<br><br>a(1). Total dollars planned to be subcontracted under this contract is:<br>$ _____ =2b+2h<br><br>If your contract includes options, please include the break down here:<br><br>Base Period: $ _____ Option Period 3: $ _____<br>Option Period 1: $ _____ Option Period 4: $ _____<br>Option Period 2: $ _____ | For Individual Plan<br><br>_____ %<br><br>If options are applicable:<br>Base: _____ %<br>OPT 1: _____ %<br>OPT 2: _____ %<br>OPT 3: _____ %<br>OPT 4: _____ % |
| b. Total dollars planned to be subcontracted to small business concerns (including ANC and Indian tribes)-[Percentage of 2a.]: **(FAR 52.219-9(d)(2)(ii))**<br><br>$ _____ and _____ %<br><br>If your contract includes options, please include the break down here:<br><br>Base: $ _____ and _____ %<br>OPT 1: $ _____ and _____ %<br>OPT 2: $ _____ and _____ %<br>OPT 3: $ _____ and _____ %<br>OPT 4: $ _____ | _____ %<br><br>If options are applicable:<br>Base: _____ %<br>OPT 1: _____ %<br>OPT 2: _____ %<br>OPT 3: _____ %<br>OPT 4: _____ % |

| | | |
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| and | % | |
| c. Total dollars planned to be subcontracted to veteran-owned small business concerns- [Percentage of 2.a.]: **(FAR 52.219-9(d)(2)(iii))**<br>$ and %<br>If your contract includes options, please include the break down here:<br>Base: $ and %<br>OPT 1: $ and %<br>OPT 2: $ and %<br>OPT 3: $ and %<br>OPT 4: $ and % | %<br>If options are applicable:<br>Base: %<br>OPT 1: %<br>OPT 2: %<br>OPT 3: %<br>OPT 4: % |
| d. Total dollars planned to be subcontracted to service-disabled veteran-owned small business - [Percentage of 2.a.]: **(FAR 52.219-9(d)(2)(iv))**<br>$ and %<br>If your contract includes options, please include the break down here:<br>Base: $ and %<br>OPT 1: $ and %<br>OPT 2: $ and %<br>OPT 3: $ and %<br>OPT 4: $ and % | %<br>If options are applicable:<br>Base: %<br>OPT 1: %<br>OPT 2: %<br>OPT 3: %<br>OPT 4: % |
| e. Total dollars planned to be subcontracted to HUBZone small business concerns - [Percentage of 2.a.]: **(FAR 52.219-9(d)(2)(v))**<br>$ and %<br>If your contract includes options, please include the break down here:<br>Base: $ and %<br>OPT 1: $ and %<br>OPT 2: $ and %<br>OPT 3: $ and %<br>OPT 4: $ and % | %<br>If options are applicable:<br>Base: %<br>OPT 1: %<br>OPT 2: %<br>OPT 3: %<br>OPT 4: % |
| f. Total dollars planned to be subcontracted to small disadvantaged business concerns (including ANCs and Indian tribes) - [Percentage of 2.a.]: **(FAR 52.219-9(d)(2)(vi))**<br>$ and %<br>If your contract includes options, please include the break down here:<br>Base: $ and %<br>OPT 1: $ and %<br>OPT 2: $ and %<br>OPT 3: $ and % | %<br>If options are applicable:<br>Base: %<br>OPT 1: %<br>OPT 2: %<br>OPT 3: % |

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| OPT 4: $ | and % | OPT 4: % |

g. Total dollars planned to be subcontracted to women-owned small business concerns- [Percentage of 2.a.]: **(FAR 52.219-9(d)(2)(vii))**

| | | |
|---|---|---|
| $ | and % | % |
| If your contract includes options, please include the break down here: | | If options are applicable: |
| Base: $ | and % | Base: % |
| OPT 1: $ | and % | OPT 1: % |
| OPT 2: $ | and % | OPT 2: % |
| OPT 3: $ | and % | OPT 3: % |
| OPT 4: $ | and % | OPT 4: % |

h. Total Subcontracting Dollars & Percentage with "Other" than Small Businesses (i.e., large companies, non profits, etc.) [Percentage of 2.a.]: **(HHS OSDBU)**

| | | |
|---|---|---|
| $ | and % | % |
| If your contract includes options, please include the break down here: | | If options are applicable: |
| Base: $ | and % | Base: % |
| OPT 1: $ | and % | OPT 1: % |
| OPT 2: $ | and % | OPT 2: % |
| OPT 3: $ | and % | OPT 3: % |
| OPT 4: $ | and % | OPT 4: % |

i. Subcontracting Opportunities (description of all principal products/services to be subcontracted to all types of concerns listed in 2.b.-2.f.) **(FAR 52.219-9(d)(3))**:

Provide a description of ALL the products and/or services to be subcontracted under this contract, and indicate the size and type of business supplying them (include all that apply):

| Products and/or Services | Other | Small Business | SDB | WOSB | Hubz | VOSB | SDVOSB |
|---|---|---|---|---|---|---|---|
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |

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|---|---|---|---|---|---|---|---|
| 6 | | | | | | | |

j. Please describe the methodology used to develop goals & identify potential sources (e.g. historical trends, information on technical and competitive bidding, formula for calculating goals, etc.) **(FAR 52.219-9(d)(4-5)):**

k. Indirect costs have ☐ have not ☐ been included in the dollar and percentage subcontracting goals above **(check one)**.

If indirect costs have been included in establishing subcontracting goals, please provide a description of the method used to determine the proportionate share of indirect costs to be incurred with all types of concerns listed in 2.b.-2.f. **(FAR 52.219-9(d)(6)):**

**SUBCONTRACTING PLAN REQUIREMENTS (con't)**

3. Please enter the following information for the individual who will administer your Subcontracting Program: **(FAR 52.219-9(d)(7))**

Name: Title:

Address:

Telephone: Email:

**Duties**: Does the individual named above have general overall responsibility for the company's subcontracting program, i.e., developing, preparing, and executing subcontracting plans and monitoring performance relative to the requirements of those subcontracting plans and perform the following duties? ☐ yes ☐ no

Additionally, please respond whether or not the individual who will administer you subcontracting program conducts the following:

1. Developing and promoting company-wide policy initiatives that demonstrate the company's support for awarding contracts and subcontracts to SB, SDB, WOSB, HUBZone, VOSB and SDVOSB concerns; and for assuring that these concerns are included on the source lists for solicitations for products and services they are capable of providing; ☐ yes ☐ no
2. Developing and maintaining bidder source lists of SB, SDB, WOSB, HUBZone, VOSB and SDVOSB concerns from all possible sources; ☐ yes ☐ no
3. Ensuring periodic rotation of potential subcontractors on bidder's lists; ☐ yes ☐ no
4. Assuring that SB, SDB, WOSB, HUBZone, VOSB and SDVOSB businesses are included on the bidders' list for every subcontract solicitation for products and services that they are capable of providing. ☐ yes ☐ no
5. Ensuring that Requests for Proposals (RFPs) are designed to permit the maximum practicable participation of SB, SDB, WOSB, HUBZone, VOSB and SDVOSB concerns. ☐ yes ☐ no
6. Reviewing subcontract solicitations to remove statements, clauses, etc., which might tend to restrict or prohibit small, 8(a), SDB, WOSB, HUBZone, VOSB and SDVOSB small business participation. ☐ yes ☐ no
7. Accessing various sources for the identification of SB, SDB, WOSB, HUBZone, VOSB and SDVOSB concerns to include the System for Award Management ( http://sam.gov ), local small business and minority associations, local chambers of commerce and Federal agencies' Small Business Offices; ☐ yes ☐ no
8. Establishing and maintaining contract and subcontract award records; ☐ yes ☐ no
9. Participating in Business Opportunity Workshops, Minority Business Enterprise Seminars, Trade Fairs, Procurement Conferences, etc; ☐ yes ☐ no
10. Ensuring that SB, SDB, WOSB, HUBZone, VOSB and SDVOSB concerns are made aware of subcontracting opportunities and assisting concerns in preparing responsive bids to the company; ☐ yes ☐ no
11. Conducting or arranging for the conduct of training for purchasing personnel regarding the intent and impact of Section 8(d) of the Small Business Act, as amended; ☐ yes ☐ no
12. Monitoring the company's subcontracting program performance and making any adjustments necessary to achieve the subcontract plan goals; ☐ yes ☐ no
13. Preparing and submitting timely, required subcontract reports; ☐ yes ☐ no
14. Conducting or arranging training for purchasing personnel regarding the intent and impact of 8(d) of the Small Business Act on purchasing procedures;and ☐ yes ☐ no
15. Coordinating the company's activities during the conduct of compliance reviews by Federal agencies. ☐ yes ☐ no

(If **NO** is checked for any of the duties above, please provide who in the company performs those duties, or indicate why the duties are not performed in your company on a separate sheet of paper and submit with the proposed subcontracting plan.)

Additional duties of the individual:

4. Please describe your efforts to ensure that Small Businesses (incl. SDB, WOSB, HUBZone, SDVOSB) have an equitable opportunity to compete for subcontracts: **(FAR 52.219-9(d)(8))**

These efforts include, but are not limited to, the following activities:

a. Outreach efforts to obtain sources: (1) Contact minority and small business trade associations; (2) contact business development organizations and local chambers of commerce; (3) attend SB, SDB, WOSB, HUBZone, VOSB and SDVOSB procurement conferences and trade fairs; (4) review sources from the System for Award Management ( http://www.sam.gov); (5) review sources from the Small Business Administration (SBA), Dynamic Small Business Search database (DSBS) http://dsbs.sba.gov/); and (6) Utilize newspaper and magazine ads to encourage new sources.

b. Internal efforts to guide and encourage purchasing personnel: (1) Conduct workshops, seminars and training programs; (2) Establish, maintain, and utilize SB, SDB, WOSB, HUBZone, VOSB and SDVOSB source lists, guides, and other data for soliciting subcontractors; and (3) Monitor activities to evaluate compliance with the subcontracting plan.

Efforts Described:

5. Flow Down Clause: **(FAR 52.219-9(d)(8))**

The contractor agrees to include the provisions under FAR 52.219-8, "Utilization of Small Business Concerns," in all acquisitions exceeding the simplified acquisition threshold that offers further subcontracting opportunities. All subcontractors, except small business concerns, that receive subcontracts in excess of $750,000 ($1,500,000 for construction) must adopt and comply with a plan similar to the plan required by FAR 52.219-9, "Small Business Subcontracting Plan." Note: In accordance with FAR 52.212-5(e) and 52.244-6(c)(2) the contractor is not required to include flow-down clause FAR 52.219.-9 if it is subcontracting commercial items.

6. Reporting and Cooperation: **(FAR 52.219-9(d)(10)); (FAR 19.704(a)(10))**

The contractor gives assurance of 1) cooperation in any studies or surveys that may be required; 2) submission of periodic reports which illustrate compliance with the subcontracting plan; 3) submission of its Individual Subcontracting Report (ISR) and Summary Subcontract Report (SSR); and 4) subcontractors submission of ISRs and SSRs. ISRs and SSRs shall be submitted via the Electronic Subcontracting Reporting System (eSRS) website https://esrs.symplicity.com/index?_tab=signin&cck=1; 5) include subcontracting data for orders against indefinite-delivery, indefinite-quantity contracts for use by multiple agencies. Please refer to FAR Part 19.7 or contact the Contracting Officer for regulatory reporting requirements and other obligations you are accepting as part of your signing of this document and acceptance of any subsequent contract award that may be granted. See additional requirements below.

7. Record keeping: **(FAR 52.219-9(d)(11))**

FAR 52.219-9(d)(11) requires a list of the types of records your company will maintain to demonstrate the procedures adopted to comply with the requirements and goals in the subcontracting plan.

Contractor acknowledges and agrees to record keeping obligation expressed at FAR 52.219-9(d)(11). yes ☐ no ☐

8. Assurances of Good Faith Effort, and the submission of explanations when failing to acquire as stated in Good Faith Effort: **(FAR 52.219-9(d)(12-13))**

Contractor hereby makes the following assurances:
(1) that contractor will make a good faith effort to acquire articles, equipment, supplies, services, or materials, or obtain the performance of construction work from the small business concerns that it used in preparing the bid or proposal, in the same or greater scope, amount, and quality used in preparing and submitting the bid or proposal yes ☐ no ☐; and
(2) that the Contractor will provide the Contracting Officer with a written explanation if the Contractor fails to acquire articles, equipment, supplies, services or materials or obtain the performance of construction work within 30 days of contract completion and as required under FAR 19.7. yes ☐ no ☐

9. Assurances that the Contractor will not prohibit a subcontractor from discussing with the Contracting Officer any material matter pertaining to payment to or utilization of a subcontractor: **(FAR 52.219-9(d)(14))**

Contractor hereby makes the assurance that the Contractor will not prohibit a subcontractor from discussing with the Contracting Officer any material matter pertaining to payment to or utilization of a subcontractor. yes ☐ no ☐

10. Assurances of Timely Payments to Subcontractors: **(FAR 52.219-9(d)(15))**

FAR 19.702 requires your company to establish and use procedures to ensure the timely payment of amounts due pursuant to the terms of your subcontracts with SB concerns, SDB, WOSB, HUBZone, VOSB and SDVOSB concerns.

Your company has established and use such procedures yes ☐ no ☐. Additionally, Contractor makes an assurance that Contractor will pay its small business subcontractors on time and in accordance with the terms and conditions of the underlying subcontract, and notify

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| the contracting officer when the prime contractor makes either a reduced or an untimely payment to a small business subcontractor yes ☐ no ☐. |
| **Signature Page** |
| 1. Contractor makes the following representation: I have reviewed FAR Part 19.704 and FAR Clause 52.219-9, and this Subcontracting Plan is in compliance. yes ☐ no ☐ |
| This Subcontracting Plan was submitted by:<br><br>Name: Title:<br>Signature:<br>Address:<br>Telephone: Email: |

6. Reporting and Cooperation: (FAR 52.219-9(d)(10)); (FAR 19.704(a)(10)):Provide its prime contract number, its unique entity identifier, and the e-mail address of the offeror's official responsible for acknowledging receipt of or rejecting the ISRs to all first-tier subcontractors and (vii) Require that each subcontractor with a subcontracting plan provide the prime contract number, its own unique entity identifier, and the e-mail address of the subcontractor's official responsible for acknowledging receipt of or rejecting the ISRs