PERFORMANCE WORK STATEMENT (PWS)

HUMAN PERFORMANCE OPTIMIZATION (HPO) SERVICES
435th AIR GROUND OPERATIONS WING (AGOW)

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1.0 DESCRIPTION OF SERVICES

1.1 Overview of Services

The purpose of this requirement is to provide Human Performance Optimization (HPO) services in support of the 435th Air Ground Operations Wing (AGOW). The Contractor shall provide qualified personnel to enhance physical performance, reduce injury risk, improve behavioral resilience, optimize cognitive performance, and strengthen mission effectiveness, operational readiness, and long-term durability of assigned personnel. This requirement consists of four distinct labor categories: Certified Strength and Conditioning Specialists (CSCS), Physical Therapists (PT), Resilience and Performance Coaches (RPC – holding a Licensed Clinical Social Worker [LCSW] credential), and an Operational Psychologist. Each labor category shall operate strictly within its defined scope of practice. Medical services shall be delivered in accordance with Medical Treatment Facility (MTF) standards while non-clinical services shall focus on performance optimization, coaching, consultation, and advisory support. The Contractor shall support a Government-led program and shall not function as an independent program authority. All services shall align with Wing leadership priorities and operational requirements.

1.2 Scope of Work

The Contractor shall provide integrated support across strength and conditioning, physical therapy, behavioral performance, resilience, and operational psychology domains. Services shall be delivered in a manner that ensures clear separation between clinical and non-clinical activities. Medical services shall be delivered through individual clinical encounters and documented within approved MTF systems. Non-clinical services shall not involve clinical documentation and shall not include Protected Health Information (PHI) unless otherwise authorized by applicable policy. The Contractor shall maintain operational flexibility to support multiple units, work schedules, mission requirements, and geographically separated units. Services may be delivered at multiple locations throughout the Wing area of responsibility as directed by mission requirements. The majority of contracted personnel shall perform their duties on-site at the 435 AGOW facility located on Ramstein Air Base, Germany. The sole exception is one (1) CSCS position, which shall be stationed remotely at Vilseck, Bavaria, Germany. Neither duty location requires specialized security access (such as Secret open-storage or classified facilities) for routine daily operations.

1.3 Personnel Requirements

The Contractor shall provide qualified personnel in the following labor categories:

- Three (3) Certified Strength and Conditioning Specialists (CSCS)
- Two (2) Physical Therapists (PT)
- One (1) Resilience and Performance Coach (RPC – LCSW)
- One (1) Operational Psychologist

The Contractor is responsible for recruiting, staffing, scheduling, supervision, performance management, and replacement of personnel necessary to perform all required services. The Government reserves the right to verify qualifications and require demonstration of competency.

1.4 Non-Personal Services

This requirement is a non-personal services contract. Contractor personnel remain employees of the Contractor and shall not be considered Government employees. The Contractor shall provide all management, supervision, scheduling, leave administration, performance oversight, and personnel replacement necessary to perform this requirement. The Government may provide technical direction through the Contracting Officer (CO) and Contracting Officer Representative (COR) but shall not supervise contractor personnel.

1.5 Contractor Program Manager

The Contractor shall designate a Program Manager (PM) who serves as the primary point of contact for the Government. The Program Manager shall maintain accountability for contractor personnel, coordinate staffing actions, manage leave schedules, oversee continuity of operations, coordinate corrective actions, and ensure compliance with contract requirements. The Program Manager shall respond to Government inquiries within one business day and shall maintain the authority necessary to resolve performance issues and staffing concerns.

1.6 Staffing Continuity

The Contractor shall maintain uninterrupted capability throughout the period of performance. The Contractor shall maintain procedures for planned leave coverage, emergency absences, personnel turnover, recruitment and replacement, and extended vacancies. Any vacancy or anticipated vacancy shall be reported to the COR within one business day together with a mitigation plan and estimated replacement timeline. The Contractor shall take all reasonable actions necessary to minimize mission impact resulting from personnel vacancies or absences.

2.0 SPECIFIC REQUIREMENTS

2.1 Human Performance Assessment

The Contractor shall conduct assessments within each provider's scope of practice. Clinical assessments conducted by Physical Therapists and the Operational Psychologist shall be documented within approved MTF systems and managed in accordance with HIPAA and applicable regulations. Non-clinical assessments conducted by CSCS personnel, the RPC, and the Operational Psychologist shall be used strictly for performance optimization purposes and shall not include PHI or Personally Identifiable Information (PII).

2.2 Strength and Conditioning Services (CSCS)

The Certified Strength and Conditioning Specialist shall provide comprehensive performance support focused on improving physical readiness, enhancing durability, reducing injury risk, and optimizing overall mission performance across the 435 AGOW. The CSCS shall integrate with units at the Group and Squadron level to assess operational demands and develop appropriate training strategies. This includes engagement across multiple duty locations, work centers, and shifts as mission requirements permit. The CSCS shall design and implement structured strength and conditioning programs addressing

functional strength, endurance, mobility, agility, injury prevention, recovery, and overall physical performance. Programs shall be scalable and adaptable to varying mission requirements and occupational demands. The CSCS may also develop written unit fitness strategies supporting leadership-directed physical readiness initiatives. The CSCS may provide individual coaching, exercise demonstrations, performance guidance, and program recommendations. The CSCS shall not diagnose, treat, or manage medical conditions. When injury concerns arise, the CSCS shall modify training activities as appropriate and refer personnel to Physical Therapy for evaluation. The CSCS shall provide education on training techniques, injury prevention, recovery strategies, and performance optimization through workshops, briefings, hands-on instruction, and educational sessions. The CSCS shall coordinate with Physical Therapy personnel to conduct monthly workshops focused on injury prevention, recovery, and performance enhancement. The CSCS shall provide aggregate, non-identifiable trend observations to leadership to support awareness of general physical readiness trends. Such reporting shall not include PHI or PII.

2.3 Behavioral Performance Support (RPC)

The Resilience and Performance Coach (RPC) shall provide non-clinical support focused on resilience, stress management, performance optimization, and overall well-being. This role is non-medical in nature and shall not involve diagnosis, psychotherapy, formal clinical treatment, or clinical documentation. Engagements shall be voluntary and initiated at the discretion of the individual. The RPC may discuss personal, professional, and operational stressors to support performance, resilience, and stability. The RPC shall not establish formal treatment relationships or maintain clinical records. When appropriate, the RPC may recommend official military support services or other available resources. The RPC shall elevate concerns to leadership or medical personnel only when there is a clear and imminent risk of harm to self or others, or when otherwise required by law, regulation, or policy. Outside of such circumstances, interactions shall remain confidential. The RPC shall provide monthly workshops addressing resilience, stress management, life balance, and other performance-related topics for service members and their families. The RPC shall provide aggregate, non-identifiable trend observations to leadership to support awareness of general resilience and stress-related trends. No PHI or PII shall be included in such reporting.

2.4 Physical Therapy Services (PT)

The Physical Therapist shall provide comprehensive one-on-one clinical care to personnel assigned to the 435 AGOW. Services shall include evaluation, treatment planning, rehabilitation, injury management, therapeutic exercise, manual therapy, neuromuscular re-education, functional training, and other evidence-based interventions consistent with accepted standards of practice. Personnel may access Physical Therapy services based on provider availability and MTF scheduling procedures. The Physical Therapist may provide education, screening, and consultation at unit locations when requested. Clinical procedures requiring controlled environments shall be performed within approved clinical settings. Dry needling is authorized and shall be performed only within clinical settings and in accordance with MTF privileging requirements. The Physical Therapist shall document all clinical encounters within approved MTF systems in accordance with HIPAA and applicable regulations. The Physical Therapist is authorized to evaluate, recommend, and implement modifications to duty limitations and medical profiles when authorized through 86 MDG credentialing and privileging processes, established clinical guidelines, and

applicable Air Force medical policies. All modifications shall be documented within approved MTF systems. The Physical Therapist shall coordinate with CSCS personnel to conduct monthly workshops focused on injury prevention, rehabilitation, recovery strategies, and physical readiness optimization. The Physical Therapist shall provide aggregate, non-identifiable trend observations to leadership regarding general physical readiness and injury trends. No PHI or PII shall be included in such reporting.

2.5 Operational Psychology Services

The purpose of Operational Psychology services is to enhance human performance, psychological resilience, organizational effectiveness, and mission accomplishment through the application of behavioral science principles. The Operational Psychologist shall provide direct support to Wing and Group leadership and serve as a contractor subject matter expert on psychological and cognitive performance. The Operational Psychologist shall provide services across a spectrum of capabilities ranging from non-clinical performance enhancement to limited clinical intervention. These services shall support three primary lines of effort: optimizing performance, mitigating risk to forces, and innovating best practices in psychological and cognitive performance. The Contractor shall maintain a target effort allocation of approximately ninety percent operational support and ten percent clinical intervention. Operational activities are defined as non-clinical engagements such as leadership consultation, team building, and training. Clinical activities involve formal psychological assessment, diagnosis, or treatment. Effort allocation shall be tracked by hours per activity type. The Operational Psychologist shall provide command consultation to Wing and Group commanders and key leaders regarding organizational dynamics, human factors, leadership effectiveness, team performance, unit trends, and resiliency concerns. The Operational Psychologist shall provide observations and recommendations but shall not exercise governmental authority or make decisions reserved to Government officials. The Operational Psychologist shall lead, design, and execute personnel assessment and selection programs for specialized, high-risk, and leadership positions. The Operational Psychologist may utilize validated psychometric tools and structured assessment methodologies to provide objective recommendations to selection authorities. The Operational Psychologist may provide recommendations to selection authorities but shall not make final personnel selection decisions. The Operational Psychologist shall design and deliver evidence-based training focused on psychological resilience, cognitive performance, stress management, leadership development, and human performance optimization. This may include executive coaching, psychological testing feedback, team development activities, climate assessments, and professional development programs. The Operational Psychologist shall provide direct support following critical incidents, high-stress missions, combat-related events, or other significant operational activities. Support may include psychological first aid, post-mission debriefings, consultation with leadership regarding crisis response strategies, personnel recovery support, reintegration activities, and consultation related to Survival, Evasion, Resistance, and Escape (SERE) programs. Clinical activities performed by the Operational Psychologist shall comply with DAFMAN 10-211 and all applicable medical policies. Clinical encounters requiring documentation shall be entered into approved medical systems.

2.6 Communication and Reporting

The Contractor Program Manager shall coordinate and provide bi-weekly informational communications to Wing personnel, consolidating inputs from across the HPO team (CSCS, PT, RPC, etc.). The Contractor shall conduct recurring workshops, educational sessions, and performance-related briefings in

accordance with the requirements contained within Section 2.0 of this Performance Work Statement. The Contractor shall submit a monthly report to the COR no later than the fifth business day of the following month. At a minimum, the report shall include participation metrics, utilization statistics, completed training events, workshop attendance, identified performance trends, staffing status, continuity-of-service issues, and recommendations for program improvement. All reports generated under this contract shall become the property of the U.S. Government. Reports generated by non-clinical personnel shall be limited to aggregate trend analysis and shall not include Protected Health Information (PHI) or Personally Identifiable Information (PII). Reports generated from clinical activities shall comply with HIPAA requirements, applicable medical privacy standards, and MTF policies. The Contractor shall notify the COR of any significant operational issues, staffing concerns, mission impacts, or performance deficiencies that could affect contract execution. Notification shall occur as soon as practical but no later than one business day after identification of the issue.

3.0 SERVICES SUMMARY (SS)

The Services Summary establishes measurable performance objectives and standards that will be used by the Government to evaluate Contractor performance.

Item	Performance Objective	PWS Ref	Performance Standard	Method of Surveillance
SS01	Initial Assessments	2.1	100% completed within 30 calendar days of referral or enrollment	COR Review
SS02	CSCS Program Delivery	2.2	95% completion of scheduled programming requirements	Direct Observation and COR Review
SS03	Physical Therapy Documentation	2.4	95% completed within 72 hours of encounter	Record Review
SS04	RPC Engagement Tracking	2.3	Participation tracked and reported monthly	COR Review
SS05	Command Responsiveness	All Sections	100% response within 24 hours for urgent requests	Leadership Feedback and COR Review
SS06	Credential, Privileging, and Clearance Maintenance	5.6, 5.7, 5.10	No lapses in required credentials, certifications, privileging, or security clearances	Verification and Security Review
SS07	Workshops and Communication	2.6	100% completion of required workshops and communications	COR Review
SS08	Personnel Assessment Turnaround	2.5	95% of recommendations delivered within 5 business days	COR Review and Commander Feedback
SS09	Training Delivery and Effectiveness	2.5	98% completion of scheduled training with average evaluation score of 4.0/5.0 or greater	Training Records and Surveys
SS10	Command Consultation Response	2.5	100% initial response within 24 hours for urgent consultation requests	COR Review
SS11	Critical Incident Support	2.5	100% initiation within 72 hours of request	Operational Logs and After Action Reviews
SS12	Clinical Documentation Compliance	2.4 / 2.5	95% of required documentation completed within 72 hours	Record Review

4.0 QUALITY ASSURANCE SURVEILLANCE PLAN (QASP)

4.1 Purpose

The Quality Assurance Surveillance Plan (QASP) defines the systematic approach the Government will use to monitor, evaluate, and document Contractor performance under this contract. The QASP is designed to ensure that all services are performed in accordance with the standards and performance objectives established within this Performance Work Statement. This QASP establishes measurable performance expectations, identifies surveillance methods, and provides a structured framework for ensuring accountability, consistency, compliance, and continuous improvement. The QASP is directly aligned with the Services Summary contained in Section 3.0 and serves as the primary mechanism for validating Contractor performance.

4.2 Roles and Responsibilities

The Contracting Officer‘s Representative (COR) shall serve as the Government’s primary representative for day-to-day contract oversight and performance monitoring. The COR shall evaluate performance against established contract requirements and coordinate with leadership personnel, medical oversight personnel, and other stakeholders as necessary. Wing, Group, and Squadron leadership may provide feedback regarding the effectiveness, responsiveness, professionalism, and operational relevance of Contractor-provided services. Such feedback may be incorporated into performance assessments and quality assurance reviews. Medical oversight personnel may be consulted regarding clinical documentation, credentialing, privileging, patient care standards, HIPAA compliance, and other clinical matters affecting contract performance. The Contractor Program Manager shall serve as the primary Contractor representative for all quality assurance matters and shall coordinate corrective actions, performance improvement efforts, staffing actions, and Government requests for information.

4.3 Surveillance Methods

The Government may utilize multiple surveillance methods to evaluate Contractor performance and ensure compliance with contract requirements. Routine Monitoring may be conducted through ongoing review of daily activities, training events, reports, staffing levels, responsiveness, and operational support activities. Random Sampling may be used to evaluate documentation accuracy, timeliness, reporting compliance, credential maintenance, and adherence to established procedures. Customer Feedback may be obtained from commanders, supervisors, training participants, and supported personnel to assess service quality, effectiveness, professionalism, and mission impact. Trend Analysis may be conducted using historical performance data, utilization metrics, participation statistics, injury trends, resiliency indicators, and other relevant information to identify recurring issues or opportunities for improvement. Direct Observation may be used to evaluate training sessions, workshops, consultations, assessments, coaching activities, and other services provided under this contract. Record Review may be conducted to verify compliance with documentation requirements, credentialing standards, security requirements, and reporting obligations. The Government reserves the right to increase surveillance activities when performance concerns are identified or mission requirements dictate additional oversight.

4.4 Performance Evaluation

Contractor performance shall be evaluated against the measurable standards established within Section 3.0 of this Performance Work Statement. Performance evaluations shall consider timeliness, accuracy, effectiveness, professionalism, compliance, responsiveness, and mission impact. The Government shall assess whether services are being provided in accordance with contract requirements and whether established performance standards are being consistently achieved. Failure to meet established performance standards may result in additional surveillance, corrective action requirements, or other remedies available under the contract.

4.5 Frequency of Surveillance

Surveillance activities shall be conducted on a recurring basis with frequency determined by mission requirements, performance history, and the criticality of the service being evaluated. High-priority activities, including personnel assessments, command consultations, critical incident support, and clinical services, may be monitored continuously or immediately following completion. Documentation compliance reviews shall normally occur monthly. Training effectiveness reviews may occur following individual training events or on a recurring quarterly basis. Overall program performance reviews shall normally occur quarterly unless increased surveillance is warranted. The COR retains authority to increase surveillance frequency whenever performance concerns arise.

4.6 Corrective Actions

If Contractor performance fails to meet established standards, the Government may initiate corrective actions appropriate to the severity and frequency of the deficiency. Corrective actions may include verbal notification, written deficiency notices, requests for corrective action plans, increased surveillance, performance improvement discussions, and other contractual remedies authorized by the contract. Corrective Action Plans (CAPs) shall identify the root cause of the deficiency, describe corrective measures to be implemented, establish timelines for completion, and identify actions designed to prevent recurrence. The Contractor shall respond promptly to identified deficiencies and take all reasonable actions necessary to restore compliance with contract requirements.

4.7 Continuous Improvement

The Government encourages proactive identification of opportunities to improve service delivery, increase efficiency, enhance mission effectiveness, and strengthen program outcomes. The Contractor shall actively evaluate program performance and may submit recommendations to the COR regarding operational improvements, training enhancements, process efficiencies, staffing initiatives, technology utilization, and other opportunities that support mission success. Continuous improvement efforts shall not alter contract requirements without approval from the Contracting Officer; however, the Government encourages innovative approaches that improve performance while maintaining compliance with contract requirements. The objective of the continuous improvement process is to ensure that Contractor performance not only meets established standards but continues to evolve in support of the 435 AGOW mission.

5.0 GENERAL INFORMATION

5.1 Hours of Operation

Services shall normally be performed Monday through Friday between the hours of 0730 and 1630, excluding U.S. federal holidays. Work schedules may be adjusted as necessary to support mission requirements, operational demands, training events, assessments, consultations, and geographically separated units. Schedule adjustments shall be coordinated through the COR and managed by the Contractor Program Manager. The Contractor shall ensure sufficient flexibility exists within staffing schedules to support mission requirements while maintaining continuity of service. Government-directed 'Family Days' are not official U.S. Federal Holidays and shall not be treated as such for this requirement. Authorized personal absences under this contract shall not exceed a cumulative total of 160 hours per contract year. To support operational flexibility, these absences may be scheduled and recorded in partial-day increments of no less than four (4) hours, subject to prior coordination and approval by the Contractor Program Manager and the COR.

5.2 Travel

Contractor personnel may be required to travel in support of geographically separated units, mission requirements, training events, consultations, workshops, assessments, and operational support activities. Travel may occur within Germany, throughout the European theater, or to locations within the Continental United States (CONUS) when approved by the Government and authorized by the contract. The Contractor may request attendance at professional conferences, certification courses, training opportunities, and continuing education events that support contract performance. Reimbursement of authorized travel expenses shall be governed by the terms and conditions of the contract. Temporary Duty (TDY) assignments, defined as temporary travel to one of the Wing's Geographically Separated Units (GSUs) for operational purposes, shall be executed utilizing the contractor personnel's Privately Owned Vehicle (POV). When contractor personnel utilize a POV for authorized travel directed by Wing leadership, the Contractor may seek reimbursement for travel costs (including fuel/mileage) in accordance with the terms of this contract and the Joint Travel Regulations (JTR). Contractor personnel should anticipate traveling approximately four (4) days per quarter.

5.3 Telework

Telework is not authorized except during contingency operations, force health protection measures, emergency situations, or when specifically authorized by the Government. Approval of telework shall not relieve the Contractor of any performance requirements contained within this contract.

5.4 Confidentiality

The Contractor shall protect all information acquired during performance of this contract and shall comply with all applicable privacy, confidentiality, information protection, and records management requirements. Contractor personnel shall not disclose information obtained through contract performance except as required for official purposes and authorized by applicable law, regulation, or policy.

5.5 Restrictions

Contractor personnel shall not bill service members or Government personnel for services provided under this contract. Contractor personnel shall not operate outside their professional scope of practice and shall not accept compensation, gifts, favors, or benefits that could create an actual or perceived conflict of interest with their official duties under this contract.

5.6 Credentialing and Privileging

Physical Therapists and the Operational Psychologist shall meet all applicable MTF credentialing and privileging requirements prior to performing clinical services. Clinical privileges shall be maintained throughout the period of performance. Any lapse, restriction, suspension, or revocation of credentials or privileges shall be immediately reported to the COR and Contracting Officer. The Physical Therapist shall maintain all credentialing, privileging, competency, and documentation requirements established by the 86th Medical Group for the duration of performance.

5.7 Background Investigations

All personnel performing under this contract shall successfully complete all required background investigations and installation access requirements prior to performing services. At a minimum, personnel shall meet applicable Department of Defense requirements for installation access and contractor personnel screening. The Contractor shall ensure all personnel maintain eligibility throughout the period of performance.

5.8 Medical Treatment Facility Compliance

Personnel performing clinical services shall comply with all Medical Treatment Facility policies, procedures, instructions, documentation requirements, infection control standards, patient safety requirements, and clinical practice standards. Contractor personnel shall cooperate with all credentialing, quality assurance, patient safety, risk management, and compliance reviews conducted by the supporting MTF.

5.9 Regulatory Compliance

The Contractor shall comply with all applicable Federal statutes, Department of Defense directives, Department of the Air Force instructions, host nation requirements, installation policies, security requirements, and professional practice standards. Nothing contained within this contract shall be interpreted as authorizing Contractor personnel to exercise inherently governmental functions.

5.10 Professional Certification and Qualification Requirements

Certified Strength and Conditioning Specialist (CSCS)

The Contractor shall ensure all CSCS personnel possess and maintain a current Certified Strength and Conditioning Specialist certification issued by the National Strength and Conditioning Association or an equivalent credential approved by the Government. Personnel shall also maintain current CPR and AED certification throughout the period of performance. All personnel must have a minimum of three years professional experience in their field.

Physical Therapist (PT)

The Contractor shall ensure all Physical Therapists possess a Doctor of Physical Therapy degree from an accredited institution and maintain a current, active, unrestricted license to practice physical therapy in a U.S. state, territory, or the District of Columbia. Physical Therapists shall successfully complete all MTF credentialing and privileging requirements prior to performing clinical services.

Resilience and Performance Coach (RPC)

The Contractor shall ensure the Resilience and Performance Coach possesses a Master of Social Work degree from an accredited institution and maintains a current, active, unrestricted Licensed Clinical Social Worker credential recognized within the United States.

Operational Psychologist

The Contractor shall ensure the Operational Psychologist possesses a doctoral degree (Ph.D. or Psy.D.) in Clinical Psychology or Counseling Psychology from an APA-accredited institution and has successfully completed an APA-accredited internship or residency. The Operational Psychologist shall maintain a current, active, unrestricted license to practice psychology independently within a U.S. state, territory, or the District of Columbia. The Operational Psychologist shall possess a minimum of four years of experience within a Department of Defense or other Federal behavioral health environment. Experience supporting operational units, deployed environments, personnel assessment and selection programs, or specialized military populations is highly desirable. The Operational Psychologist shall possess and maintain a current Top Secret/Sensitive Compartmented Information (TS/SCI) security clearance throughout the period of performance. The Operational Psychologist shall be capable of obtaining and maintaining proficiency in operational psychology activities including personnel assessment and selection, executive coaching, SERE psychology support, resistance training oversight, behavioral consultation, and other mission-essential operational psychology functions. The Government may facilitate access to training opportunities supporting these requirements.

5.11 Contractor Program Manager

The Contractor shall designate a Program Manager who serves as the primary point of contact for all contract administration matters. The Program Manager shall possess sufficient authority to resolve staffing issues, performance concerns, scheduling conflicts, continuity of operations matters, and reporting requirements. The Program Manager shall be available during normal business hours and shall respond to Government inquiries within one business day.

5.12 Staffing Continuity and Vacancy Management

The Contractor shall maintain written procedures addressing personnel absences, emergency leave, turnover, recruiting actions, succession planning, and extended vacancies. Any vacancy or anticipated vacancy shall be reported to the COR within one business day. The Contractor shall provide a mitigation plan identifying interim coverage measures, recruiting actions, and estimated replacement timelines. The Contractor shall make reasonable efforts to minimize service disruptions and maintain mission support throughout vacancy periods.

5.13 Status of Forces Agreement (SOFA) and Host Nation Employment

Contractor personnel who qualify for status under applicable international agreements, Status of Forces Agreement provisions, civilian component procedures, or other implementing guidance shall maintain eligibility throughout the period of performance. The Government does not guarantee approval of SOFA status, however any selected employees via the contract company will be submitted for SOFA status approval by the 435 AGOW. Eligibility determinations shall be made in accordance with applicable law, regulation, and host nation agreements. Personnel who do not qualify for such status shall comply with applicable host nation employment laws, labor regulations, taxation requirements, and employment standards. Any German-national employee performing under this contract shall possess documented English language proficiency at level 'S' or higher prior to beginning performance.

5.14 Professional Liability Coverage

The Contractor shall maintain professional liability insurance and malpractice coverage, as applicable, for all licensed professionals performing under this contract. Coverage shall remain in effect throughout the period of performance and shall be maintained at levels consistent with industry standards and applicable professional requirements. Evidence of coverage shall be provided to the Contracting Officer upon request.

5.15 Government Property and Information

All information, reports, assessments, data, analyses, recommendations, and other work products generated under this contract shall become the property of the U.S. Government. Contractor personnel shall safeguard Government property and information and shall return all Government-furnished materials upon completion of performance or upon request.

5.16 Definitions

Urgent Request: An urgent request is defined as any request from Wing/Group leadership that directly pertains to an imminent high-risk activity, critical incident, or involves a direct inquiry from the Wing Commander.

6.0 APPENDICES

6.1 Applicable Publications and References

The Contractor shall comply with the most current versions of all applicable directives, instructions, manuals, regulations, and guidance documents relevant to performance under this contract. References include, but are not limited to:

- AFI 44-102, Medical Care Management
- AFI 48-123, Medical Examinations and Standards
- DAFMAN 10-211, Duty Limiting Conditions
- DoDI 1402.5, Background Investigations and Personnel Screening
- HSPD-12, Policy for a Common Identification Standard for Federal Employees and Contractors
- Health Insurance Portability and Accountability Act (HIPAA)
- Applicable Medical Treatment Facility policies and procedures
- Applicable Department of Defense and Department of the Air Force guidance
- Applicable credentialing and privileging standards
- Applicable host nation laws and regulations

6.2 HIPAA Compliance

All clinical services performed under this contract shall comply with HIPAA requirements, Department of Defense privacy requirements, Medical Treatment Facility policies, and all applicable Federal laws governing the protection of medical information. Contractor personnel shall protect Protected Health Information and Personally Identifiable Information from unauthorized access, disclosure, modification, or release. Access to protected information shall be limited to personnel with an official need to know and appropriate authorization.

6.3 Security Requirements

Contractor personnel shall comply with all installation security requirements, information protection requirements, operational security requirements, and security clearance requirements applicable to their assigned duties. Personnel requiring access to classified information shall maintain the appropriate clearance level throughout performance. Loss, suspension, or revocation of required clearances shall be immediately reported to the Government.

6.4 Acronyms

AGOW	Air Ground Operations Wing
COR	Contracting Officer Representative
CO	Contracting Officer
CSCS	Certified Strength and Conditioning Specialist
DAFMAN	Department of the Air Force Manual
DOD	Department of Defense
HIPAA	Health Insurance Portability and Accountability Act

LCSW	Licensed Clinical Social Worker
MTF	Medical Treatment Facility
PM	Program Manager
PT	Physical Therapist
QASP	Quality Assurance Surveillance Plan
RPC	Resilience and Performance Coach
SERE	Survival, Evasion, Resistance, and Escape
SOFA	Status of Forces Agreement
TS/SCI	Top Secret / Sensitive Compartmented Information