



VA ELECTRONIC HEALTH RECORD MODERNIZATION (EHRM) SYSTEM

PERFORMANCE WORK STATEMENT (PWS) DEPARTMENT OF VETERANS AFFAIRS

**Virtual Care Development and Execution for Initial Operating Capability (IOC) and
Post-IOC Requirements**

**Date: October 30, 2019
TAC-20-57578**

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1.0 BACKGROUND

The mission of the Department of Veterans Affairs (VA) is to provide benefits and services to Veterans of the United States. In meeting these goals, VA strives to provide high quality, effective, and efficient Information Technology (IT) services to those responsible for providing care to the Veterans at the point-of-care as well as throughout all the points of the Veterans' health care in an effective, timely and compassionate manner. VA depends on Information Management/Information Technology (IM/IT) systems to meet mission goals.

On May 17, 2018, VA entered into a ten-year indefinite-delivery, indefinite-quantity (ID/IQ) sole-source contract with Cerner Government Services, Inc. (Cerner) to acquire the Electronic Health Record (EHR) system being deployed by the Department of Defense (DoD) and related services for deployment and transition across the VA enterprise in a manner that meets VA needs, and which will enable seamless healthcare to Veterans and qualified beneficiaries. Procurement of a single common system across VA and DoD shall achieve VA's goal of seamless care for Veterans by facilitating the transition of active duty military members to VA and improving their timely access to the highest quality of care.

Cerner's EHR solution shall provide VA with a single system that can store and retrieve administrative, clinical, laboratory, radiology, pharmacy and scheduling data, and can interact with other internal and external systems. Modernization of VA's EHR will support a Veteran-centric, team-based care model, with modern decision support tools; clinical information content services; identification, communication and standardization of care paths; and resource provisioning. This will improve interoperability, performance, and user experience for the majority of the health care delivery and ancillary teams responsible for directly or indirectly providing health care services; and in turn will improve quality, safety, and timeliness of health care services delivered to Veterans.

Cerner shall provide a comprehensive EHR solution and services as specifically defined in the EHRM Basic contract. This task order requires development and test of VA-specific virtual care functionality.

2.0 APPLICABLE DOCUMENTS

The documents in Paragraph 3.0 of the EHRM Basic Performance Work Statement (PWS) apply to the performance of this effort. In addition, the following document applies to this Task Order:

Attachment A Virtual Care Capability Descriptions

3.0 SCOPE OF WORK

The Contractor shall provide functionality to ensure that Initial Operating Capability (IOC), and post-IOC, deployment does not negatively impact existing VA virtual care capabilities. This includes development, testing, execution, and post-deployment support required to ensure no disruption of the user experience or loss of Virtual Care functionality resulting from IOC.

3.1 APPLICABILITY

This Task Order (TO) effort PWS is within the scope of paragraphs 5.2, "EHRM System" and 5.5, "VA Enterprise EHRM Baseline Preparation," of the EHRM Basic PWS.

3.2 ORDER TYPE

The effort shall be proposed on a Firm Fixed Price (FFP) basis.

4.0 PERFORMANCE DETAILS

4.1 PERFORMANCE PERIOD

The period of performance (PoP) shall be one 12-month base period and two optional tasks.

4.2 PLACE OF PERFORMANCE

Efforts under this TO shall be performed both in Contractor facilities, as well as VA facilities. Program meetings may also be held at VA Central Office, some of which may require in person attendance. Project management activities that occur at the enterprise level shall be performed at Contractor facilities.

4.3 TRAVEL OR SPECIAL REQUIREMENTS

The Government anticipates travel to perform the tasks associated with the effort, as well as to attend program-related meetings throughout the PoP. Include all estimated travel costs in your firm-fixed price line items. These costs will not be directly reimbursed by the Government.

The total estimated number of trips for this effort shall be proposed by the Contractor.

4.4 CONTRACT MANAGEMENT

All requirements of Section 9.0 of the EHRM Basic PWS apply to this effort. This TO shall be addressed in the Contractor's Monthly Progress Report as set forth in the EHRM Basic contract.

4.5 GOVERNMENT FURNISHED PROPERTY

The Government has multiple remote access solutions available to include Citrix Access Gateway (CAG), Site-to-Site Virtual Private Network (VPN), and RESCUE VPN.

The Government's issuance of Government Furnished Equipment (GFE) is limited to Contractor personnel requiring direct access to the network to: development environments; install, configure and run Technical Reference Model (TRM) approved software and tools (e.g., Oracle, Fortify, Eclipse, SoapUI, WebLogic, LoadRunner); upload/download/ manipulate code, run scripts, and apply patches; configure and change system settings; check logs, troubleshoot/debug, and test/QA.

When necessary, the Government will furnish desktops or laptops, for use by the Contractor to access VA networks, systems, or applications to meet the requirements of this PWS. The overarching goal is to determine the most cost-effective approach to providing needed access to the VA environment coupled with the need to ensure proper Change Management principles are followed. Contractor personnel shall adhere to all VA system access requirements for on-site and remote users in accordance with VA standards, local security regulations, policies and rules of behavior. GFE shall be approved by the Contracting Officer's Representative (COR) and Program Manager (PM) on a case-by-case basis prior to issuance.

Based upon the Government assessment of remote access solutions and requirements of this TO, the Government estimates that the following GFE will be required by this effort:

- 5 Developer Laptops

The Government will not provide IT accessories including but not limited to Mobile Wi-Fi hotspots/wireless access points, additional or specialized keyboards or mice, laptop bags, extra charging cables, extra Personal Identity Verification card readers, peripheral devices, or additional Random Access Memory (RAM). The Contractor is responsible for providing these types of IT accessories in support of this effort as necessary and any VA installation required for these IT accessories shall be coordinated with the COR.

4.6 SECURITY AND PRIVACY

All requirements in Section 7.0 of the EHRM Basic PWS apply to this effort.

It has been determined that protected health information may be disclosed or accessed and a signed Business Associate Agreement (BAA) shall be required. The Contractor shall adhere to the requirements of the BAA executed between OEHRM and Cerner Corporation; and shall comply with VA Directive 6066 and VHA Handbook 1605.05.

4.6.1 POSITION/TASK RISK DESIGNATION LEVEL(S)

The position sensitivity and the level of background investigation commensurate with the required level of access for all PWS tasks is Tier3/Non-Critical Sensitive in accordance with Section 8.7 of the EHRM Basic PWS.

The Tier3/ Non-Critical Sensitive Position Sensitivity and Background Investigation requirements identify, in effect, the Background Investigation requirements for Contractor individuals, based upon the tasks the particular Contractor individual will be working. The submitted Contractor Staff Roster must indicate the required Background Investigation Level for each Contractor individual based upon the tasks the Contractor individual will be working, in accordance with their submitted proposal.

5.0 SPECIFIC TASKS AND DELIVERABLES

The Contractor shall perform the following:

5.1 PROJECT MANAGEMENT

The Contractor shall provide a single Point of Contact for management of all project tasks, with individual subject matter experts assigned to each individual task. The Contractor shall include a Communications Plan in the Contractor Project Management Plan (CPMP) to cover overall and individual point of contact (POC) communications as well as issue escalation procedures.

5.1.1 CONTRACTOR PROJECT MANAGEMENT PLAN

The Contractor shall deliver a CPMP that lays out the Contractor's approach, timeline and tools to be used in execution of this TO effort. The CPMP should take the form of both a narrative and graphic format that displays the schedule, milestones, risks and resource support. The CPMP shall also include how the Contractor shall coordinate and execute planned, routine, and ad hoc data collection reporting requests to support the VA's Agile development process as identified within the PWS. The initial baseline CPMP shall be concurred upon and updated in accordance with Section B of the TO. The Contractor shall update and maintain the VA Program Manager (PM) approved CPMP throughout the PoP.

Deliverable:

- A. Contractor Project Management Plan

5.1.2 REPORTING REQUIREMENTS

The Contractor shall provide a Monthly Progress Report in accordance with Section 9.6.1.1 of the EHRM Basic PWS. For each major virtual care work element described in this TO, Cerner will provide/update applicable architectures/documentation as part of the Technical Documentation required by basic PWS paragraph 5.2. These updates

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may include requirements, architecture (updates to existing OV-1, SvcV-1, SV-1), development views, data models, data flow diagram, and decision package for EHRM governance approval. The report shall also include Authority To Operate (ATO) documentation developed/updated during the previous month. Additionally, the Monthly Status Report shall:

- a. For the base period, document progress, status and outcomes from PWS 5.2 as well as a summary of user reviews from the demonstration of the solution to the Virtual Care Council for 5.2.1 a) through c).
- b. For the optional tasks PWS 5.5 and PWS 5.6, if executed, document progress, status and outcomes from the associated optional task(s) as well as a summary of user reviews from the demonstration of the solution to the Virtual Care Council.

For all capabilities developed under this TO, the Technical Documentation shall include identification of system parameters which require monitoring and the thresholds for each parameter which should trigger a response to ensure virtual care system components operate efficiently and reliably.

Deliverable:

- A. Monthly Progress Report

5.1.3 TECHNICAL KICKOFF MEETING

The Contractor shall hold a technical kickoff meeting within 10 days after TO award. The Contractor shall present, for review and approval by the Government, the details of the intended approach, work plan, and project schedule for each effort. The Contractor shall specify dates, locations (can be virtual), agenda (shall be provided to all attendees at least five calendar days prior to the meeting), and meeting minutes (shall be provided to all attendees within three calendar days after the meeting). The Contractor shall invite the Contracting Officer (CO), Contract Specialist (CS), COR, and the VA PM.

5.1.4 IOC GO-LIVE COORDINATION

The Contractor shall coordinate scheduling and virtual care-related go-live activities with the EHRM IOC deployment team to ensure all stakeholders are informed of risks, timelines, and go-live tasks required. The Contractor shall provide monthly status updates to the deployment team focused on IOC virtual-care deployment go-live activities to ensure effective communication between the relevant TO teams.

5.2 VIRTUAL CARE IOC-DEVELOPMENT

The Contractor shall execute the Virtual Care activities required for IOC as described in the sub-sections below. Attachment A Virtual Care Capability Descriptions are included as reference information pertaining to Virtual Care capabilities required for IOC and

post-IOC. Further, the Contractor shall provide cybersecurity support required to complete the Risk Assessment associated with the Virtual Care solutions executed under this PWS. The VA will provide cybersecurity support to review and coordinate with the Approving Authority (AA)/Authorizing Official (AO) to obtain the approval to add and/or connect the solutions to the existing Authority to Operate (ATO).

5.2.1 TELEHEALTH

The Contractor shall design, develop, test and execute Telehealth functionality including items described in a) through c) below. Note, other VA-led efforts will provide the dependent VA Video System & VA mobile application functionality required for Contractor to implement PWS 5.2.1 requirements. The VA will provide the Contractor access to Vyopta, Pexip, Video Visit Service (VVS) and Veteran Data Integration and Federation Enterprise Platform (VDIF-EP) within the VA Amazon Web Services (AWS) Sandbox and provide access to the endpoints within the VA AWS Sandbox for development work.

For each set of capabilities described below, the Contractor shall provide a Virtual Care Design document including mockups for patients and care team workflows. Additional information for each capability can be found in Attachment B, "Virtual Care Capability Descriptions", Sections 1-3.

a. TELEHEALTH VIDEO VISITS:

1. The ability to schedule, change, cancel, and launch a video visit appointment within VA's EHRM solution, send the appointment status (scheduled, change, cancel) outbound, and receive appointment information from the VA including the appointment's associated Virtual Medical Room (VMR) URL. Store the VMR URL and display a link for Cerner Users and Veterans.
2. Monitoring of outbound video visit errors.
3. Implementation of rules to create orders to support mobile app workflow.

b. TELEHEALTH REMOTE PATIENT MONITORING (RPM):

1. Implement vendor connectivity for home telehealth patient enrollment, device data transmission, and discharge.

c. TELEHEALTH STORE AND FORWARD / ASYNCHRONOUS:

1. Configure Orders and Scheduling to support requests for telehealth asynchronous care
2. Provide a telereader queue to facilitate tracking of telehealth asynchronous request orders
3. Implement a modality worklist within the workflow to facilitate the integration of devices to capture images
4. Create rules to automate the completion of telehealth asynchronous requests and reporting.

5. Implement the ability to DICOM wrap images prior to image upload
6. Provide access to a diagnostic quality viewer to review images for telehealth asynchronous migrated under Data Migration Task Order.

Deliverable:

A. Virtual Care Design Documents

5.3 TESTING AND USER ACCEPTANCE

The Contractor shall:

1. Develop a Virtual Care Test Plan and approach tailored to the scope of this TO. The Virtual Care Test Plan shall be integrated into the overall Contractor Master Test Plan with input and concurrence from the VA EHRM Test Lead.
2. Develop Testing Artifacts such as test scenarios, test cases, test data, and test results to execute and report on data migration testing activities. The Contractor Test Report of Findings/Test Analysis Report shall serve as the key test artifact for the formal deliverable process. Other test artifacts such as test cases, test results, etc. shall be entered and maintained in tools as outlined in Contractor Master Test Plan and OEHRM Test Evaluation Master Plan as the work is being executed. The Contractor shall coordinate with VA Test & Evaluation team to define methodology to test the integrity of each development item.
3. Provide support for execution of VA Test & Evaluation acceptance, data integrity, and validation testing including defect/issue process, assistance in troubleshooting/triaging, jointly troubleshooting issues, and responding to findings from test activities.
4. Conduct system performance monitoring to ensure scalability, reliability and availability of the system.
5. Test and validate production environment with Virtual Care code deployed.
6. Provide Virtual Care updates to the Master Test Plan including:
 - a. Virtual Care Test Plan
 - b. Contractor Test Report of Findings/Test Analysis Report
 - c. Testing Artifacts (such as test scenarios, test cases, test data, and test results)

5.4 DEVELOPMENT AND DELIVERY OF TRAINING AND CHANGE MANAGEMENT

The Contractor use the training and change management methodology described in TO05 to develop training and change management materials for new content to support updated functionality developed under section 5.2 of this PWS.

Deliverable:

A. Virtual Care Training and Change Management Materials

5.5 ADDITIONAL VIRTUAL CARE SUPPORT FOR IOC (OPTIONAL TASK)

Virtual care requirements continue to evolve to meet VA priorities and may require completion of additional capabilities throughout the PoP of this Task Order. VA may exercise this optional task for additional virtual care support multiple times throughout the period of performance for a total amount not to exceed the NTE CLIN ceiling. For each new capability developed under this optional task, the Contractor shall provide a Virtual Care Design Document (IAW PWS 5.2) including mockups for patient and care team workflows.

Attachment A, "Virtual Care Capability Descriptions", Section 4 provides a subset of potential optional IOC requirements.

5.6 ADDITIONAL VIRTUAL CARE SERVICES FOR POST-IOC (OPTIONAL TASK)

Virtual care requirements will continue to evolve post-IOC to meet VA priorities and may require completion of additional capabilities throughout the PoP of this Task Order. VA may exercise this optional task for additional, post-IOC virtual care support multiple times throughout the period of performance for a total amount not to exceed the NTE CLIN ceiling.

For each set of capabilities developed under this optional task, the Contractor shall provide a Virtual Care Design Document (IAW PWS 5.2) including mockups for patient and care team workflows.

Attachment B, "Virtual Care Capability Descriptions", Section 5 provides a subset of potential optional post-IOC requirements.

6.0 GENERAL REQUIREMENTS

6.1 PERFORMANCE METRICS

The table below defines the Performance Standards and Acceptable Levels of Performance associated with this effort. The Government may also utilize the commercially available and VA-specific Key Performance Indicators (KPIs) and Service Level Agreements (SLAs) defined at the ID/IQ level to measure performance under this TO, as applicable.

Performance Objective	Performance Standard	Acceptable Levels of Performance
1. Technical / Quality of Product or Service	<ul style="list-style-type: none">Shows understanding of requirementsEfficient and effective in meeting requirementsMeets technical needs and mission requirements	Satisfactory or higher

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Performance Objective	Performance Standard	Acceptable Levels of Performance
	<ul style="list-style-type: none"> • Provides quality services/products • Meets performance thresholds/metrics defined in applicable Service Level Agreements 	
2. Project Milestones and Schedule	<ul style="list-style-type: none"> - Quick response capability - Products completed, reviewed, delivered in accordance with the established schedule - Notifies customer in advance of potential problems 	Satisfactory or higher
3. Staffing	<ul style="list-style-type: none"> • Currency of expertise and staffing levels appropriate • Personnel possess necessary knowledge, skills and abilities to perform tasks 	Satisfactory or higher
4. Invoicing	Invoices are current, accurate, and complete.	Satisfactory or higher
5. Management	Integration and coordination of all activities to execute effort	Satisfactory or higher

The COR will utilize a QASP throughout the life of the TO to ensure that the Contractor is performing the services required by this PWS in an acceptable level of performance. The Government reserves the right to alter or change the QASP at its own discretion. A Performance Based Service Assessment will be used by the COR in accordance with the QASP to assess Contractor performance.

6.2 SECTION 508 –INFORMATION AND COMMUNICATION TECHNOLOGY (ICT) STANDARDS

All requirements in Sections 8.10, including subparagraphs, of the EHRM Basic PWS apply to this effort. Deliverable requirements are further defined in the following subparagraphs. The Contractor shall comply with the technical standards at: <https://www.access-board.gov/guidelines-and-standards/communications-and-it/about-the-ict-refresh/final-rule/single-file-version>

6.2.1 REPRESENTATION OF CONFORMANCE

The Contractor shall provide a Section 508 Subject Matter Expert lead for VA EHRM 508 resources to work with. The Contractor shall adhere to the VA-approved Section 508 Test and Delivery Plan and Section 508 Accessibility Roadmap delivered under TO 0001. The Contractor shall update the Government Product Accessibility Template (GPAT) and/or Voluntary Product Accessibility Template (VPAT) delivered under TO 0001 to indicate the level of Section 508 conformance as updates are made to its products and/or services to ensure and sustain 508 compliance.

The Contractor shall work closely with VA Section 508 representatives to verify Section 508 conformance of its products and/or services.

6.2.2 ACCEPTANCE AND ACCEPTANCE TESTING

The Contractor shall provide Final Section 508 Compliance Test Results. The Section 508 Test Results shall include a GPAT/VPAT Conformance Statement validating conformance to Section 508 Refresh Success Criteria and Conformance Requirements for already-developed ICT deliverables.

The Final Section 508 Test Results shall be reviewed and approved by VA Section 508 representatives to validate conformance to Section 508 Refresh Success Criteria and Conformance Requirements for ICT deliverables.

For software development for VA interfaces/systems, the Contractor shall prepare and submit a Section 508 Conformance Validation Package with content as outlined in VA Process Asset Library, Software Development Product Build process map.

The Section 508 Conformance Validation Package shall be reviewed and approved by VA Section 508 representatives to validate conformance to Section 508 Refresh Success Criteria and Conformance Requirements for ICT deliverables.

Automated test tools, manual techniques, and checklists are used in the VA Section 508 compliance assessment.

Deliverable:

- Final Section 508 Compliance Test Results for ICT Deliverables
- Section 508 Compliance Validation Package for ICT Deliverables

6.3 DELIVERABLES

The Contractor shall provide deliverables for Government review and acceptance IAW with Section B.2 of the Task Order. The Contractor shall incorporate Government feedback provided via the OEHRM Deliverables review process into Task Order deliverables as applicable. Feedback shall be incorporated in either the resubmission or next required submission of the deliverable based upon the timeframe in which it is provided by the Government. For Government feedback requiring additional discussion

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and/or clarification, the Contractor shall coordinate language updates with VA to resolve and finalize revisions to the affected deliverable. The Contractor shall appropriately mark and date deliverables to maintain version control using the following format: TO Number – CLIN Number Formal Deliverable Title – Deliverable Due Date IAW Section B.2– Version X.X. The Contractor shall annotate major (initial submission) and minor (resubmission) deliverable releases using a numerical system (e.g. Initial submission: TO 0001 – 0001AA Contractor Project Management Plan - August 2018 – Version 1.0; Resubmission: TO 0001 – 0001AA Contractor Project Management Plan – August 2018 – Version 1.1). Resubmitted deliverables shall maintain the original due date defined in Section B.2 of the TO. The Contractor shall provide discrete deliverables in separate email submissions. Email submissions shall include the Contract/Task Order numbers and corresponding deliverable CLIN number. The Contractor shall track updates in both major and minor deliverable releases in an agreed upon format, such that the Government can identify and review language revisions for acceptance

CONTRACTOR EMPLOYEE
PERSONAL FINANCIAL INTEREST/PROTECTION OF SENSITIVE INFORMATION
AGREEMENT

This Agreement refers to Contract/Order _____ entered into between the Department of Veterans Affairs and _____ (Contractor).

As an employee of the aforementioned Contractor, I understand that in connection with my involvement in the support of the above-referenced Contract/Order, I may receive or have access to certain “sensitive information” relating to said Contract/Order, and/or may be called upon to perform services which could have a potential impact on the financial interests of other companies, businesses or corporate entities. I hereby agree that I will not discuss or otherwise disclose (except as may be legally or contractually required) any such “sensitive information” maintained by the Department of Veterans

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Affairs or by others on behalf of the Department of Veterans Affairs, to any person, including personnel in my own organization, not authorized to receive such information.

“Sensitive information” includes:

1. Information provided to the Contractor or the Government that would be competitively useful on current or future related procurements; or
 2. Is considered source selection information or bid and proposal information as defined in FAR 2.101, and FAR 3.104-4; or
 3. Contains (1) information about a Contractor’s pricing, rates, costs, schedule, or contract performance; or (2) the Government’s analysis of that information; or
 4. Program information relating to current or estimated budgets, schedules or other financial information relating to the program office; or
- (e) Is properly marked as source selection information or any similar markings.

Should “sensitive information” be provided to me under this Contract/Order, I agree not to discuss or disclose such information with/to any individual not authorized to receive such information. If there is any uncertainty as to whether the disclosed information comprises “sensitive information”, I will request my employer to request a determination in writing from the Department of Veterans Affairs Contracting Officer as to the need to protect this information from disclosure.

I will promptly notify my employer if, during my participation in the subject Contract/Order, I am assigned any duties that could affect the interests of a company, business or corporate entity in which either I, my spouse or minor children, or any member of my immediate family/household has a personal financial interest. “Financial interest” is defined as compensation for employment in the form of wages, salaries, commissions, professional fees, or fees for business referrals, or any financial investments in the business in the form of direct stocks or bond ownership, or partnership interest (excluding non-directed retirement or other mutual fund investments). In the event that, at a later date, I acquire actual knowledge of such an interest or my employer becomes involved in proposing for a solicitation resulting from the work under this Contract/Order, as either an offeror, an advisor to an offeror, or as a Subcontractor to an offeror, I will promptly notify my employer. I understand this may disqualify me from any further involvement with this Contract/Order, as agreed upon between the Department of Veterans Affairs and my company.

Among the possible consequences, I understand that violation of any of the above conditions/requirements may result in my immediate disqualification or termination from working on this Contract/Order pending legal and contractual review.

I further understand and agree that all Confidential, Proprietary and/or Sensitive Information shall be retained, disseminated, released, and destroyed in accordance with

POINTS OF CONTACT

VA PROGRAM MANAGER

The VA Program Manager for this effort is:

Name: _____
Organization: _____
Address: _____

Email: _____
Phone: _____ / _____
Fax: _____

CONTRACTING OFFICER'S REPRESENTATIVE (COR)

The COR for this effort is:

Name: _____
Organization: _____
Address: _____

Email: _____
Phone: _____ / _____
Fax: _____

BUDGET POINT OF CONTACT

The Budget Point of Contact for this effort is:

Name: _____
Organization: _____
Address: _____

Email: _____
Phone: _____ / _____
Fax: _____