Mary Davie
Assistant Commissioner
Integrated Technology Services
General Services Administration
Mr. Michael O’Bar

Component Acquisition Executive
Defense Health Agency
GSA Leadership and Introductions

- Ms. Mary Davie, Assistant Commissioner, Integrated Technology Services
- Ms. Jennifer Auble, Program Manager
- Mr. Warren Blankenship, Schedule 70
- Ms. Roya Konzman, Schedule 70
- Mr. Christopher Fornecker, GWACS
- Mr. Kenneth Evans, Assisted Acquisition Services
DHA Leadership and Introductions

- Mr. Michael O'Bar, Component Acquisition Executive
- Mr. Joseph Mirrow, Director, OPMC/CAE
- Mr. Albert Jacob, Director, COD-SA
- Mr. Mark Goodge, HITD CTO
- Mr. Mark Mantooth, DHA OGC
- Mr. David Colbert, Contracting Officer, COD-SA
- Ms. Cassandra Martin, DHA Small Business
- Mr. Richard Morvatz, Program Manager, OPMC/CAE
<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Speaker</th>
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<tbody>
<tr>
<td>0920 - 0940</td>
<td>DHA HIT Overview</td>
<td>Mr. Mark Goodge</td>
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<tr>
<td>1:20 – 1:40</td>
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<tr>
<td>9:40 – 10:15</td>
<td>DHA HIT Strategy</td>
<td>Mr. Joseph Mirrow</td>
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<td>1:40 – 2:15</td>
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<td>10:15 – 10:45</td>
<td>Schedule 70 HIT SIN</td>
<td>Mr. Warren Blankenship</td>
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<tr>
<td>2:15 – 2:45</td>
<td></td>
<td>Ms. Roya Konzman</td>
</tr>
<tr>
<td>10:45 – 11:15</td>
<td>GSA IT GWACs Overview</td>
<td>Mr. Christopher Fornecker</td>
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<td>2:45 – 3:15</td>
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<tr>
<td>11:15 – 11:40</td>
<td>GSA Assisted Acquisition Service</td>
<td>Mr. Kenneth Evans</td>
</tr>
<tr>
<td>3:15 – 3:40</td>
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</tbody>
</table>
Administrative Announcements

- Registration Sign-in Sheet – be sure to sign in
- Emergency Exits and Restrooms
- Please hold all questions during the presentations:
  - If time allows, questions will be entertained after each presentation.
  - Questions can be asked at the end of the industry day survey (link in summary slide)
- Please do not record or photograph during this event
- Please silence your electronic devices
- Both the government and industry partners will communicate with honesty, integrity, and mutual respect
- Slides, Q&A and video of the event will be available electronically soon after the event
  - Asking a question does not guarantee a response from the Government
Health Information Technology

Mr. Mark Goodge
MHS Chief Technology Officer

20 January 2016
HIT Vision and Mission

Vision
A premier system of health information technology, enabling integrated health care delivery for those who serve in the defense of our country, retirees, and their families

Mission
Implement, manage, and sustain an integrated and protected medical information enterprise in order to ensure the right information is accessible to the right customers at the right time and in the right way

“Medically Ready Force...Ready Medical Force”
HIT Goals and Approaches

Immediate Goals
- Provide Exemplary Customer (Services and Combatant Commanders) Support
- Support the Electronic Health Record (EHR) efforts
- Identify efficiencies in line with our Business Cases

Approaches
- Transform into a cohesive organization
- Eliminate duplication and redundancies
- Reduce variability by means of standardization
- Leverage existing IT best practices
- Allocate resources to support EHR efforts

“Medically Ready Force...Ready Medical Force”
HIT Operating Principles

- Focus on the customer
- Rely on each other to support the customer
- Operate as one cohesive organization
- Be accountable for execution and results
- Make data-driven decisions
- Foster communications

“Medically Ready Force...Ready Medical Force”
HIT Functional Alignment

Functions and intra-directorate services previously conducted across multiple divisions may be consolidated or led by a single division in consultation with other divisions.

**Information Delivery**
- Organizes and secures clinical and business data for clinical practice and internal collaboration
- Enables business intelligence across the Directorate

**Innov. and Tech Dev.**
- Works with customers to identify needed capabilities
- Coordinates with other divisions to hand off promising pilots for adoption and scaling

**Portfolio Management & Customer Relations**
- Provides POM / budget services to other divisions
- Holds divisions accountable to a business case for their operations and new investments

**Director, Deputy Director, CoS**
- Directs coordination of activities and resources to align with DHA mission

**Infrastructure & Operations**
- Deploys and supports hardware, network elements, and devices
- Ensures network availability and security

**Solution Delivery**
- Sustains clinical and business apps
- Provides systems integration and end user training services

**Cyber Security**
- Provides consultation and IV&V services to other divisions
- Holds other divisions accountable for accreditation and compliance plans at all stages of the IT lifecycle

“Medically Ready Force...Ready Medical Force”
“Medically Ready Force...Ready Medical Force”

HIT Directorate Organization Chart

Col Chip Terry
Acting Director

Col Eric Huweart
Chief of Staff

Innovation & Advanced Technology Development Division
Mr. Mark Goodge

- Strategy & Planning Branch
- Execution Branch

Portfolio Management & Customer Relations Division
Ms. Sharon Larson

- Enterprise Architecture Branch
- External Relations & Performance Management Branch
- Investment Management Branch
- Budget Execution Branch

Infrastructure & Operations Division
Dr. Barclay Butler
Dr. Pete Marks

- Business Operations Branch
- Network Security Operations Branch
- Engineering, Design and Deployment Branch
- Operations and Sustainment Branch

Information Delivery Division
Col AI Bonnema
Ms. Katharine Murray

- Data Services Branch
- Web Strategies & Collaboration Branch
- Health Information Exchange Branch
- Enterprise Intelligence Branch
- Registry Branch

Cyber Security Division
Mr. Frank Rowland
Lt Col Alan Hardman

- Policy Branch
- Certification and Accreditation Branch
- Operations Branch

Solution Delivery Division
LTC Richard Wilson
Dr. George Magee

- Program Support Branch
- User Integration Branch
- Process Integration Branch
- PM EHR Core
- PM Care & Benefits Branch
- PM Clinical Support Branch
- EHR Modernization Branch
HIT Focus Areas

Support the Electronic Health Record Modernization Efforts

- Optimizing MHS Health IT Infrastructure to Support Standardization and Electronic Health Record (EHR) Modernization

External Initiatives

- DoD Chief Information Officer (CIO) – Medical Infrastructure Evaluation
- DoD CIO/Deputy Chief Management Officer (DCMO) – Medical Process Evaluation
- DoD CIO/DCMO – Zero Based Budget Review
- DoD CIO/DCMO/Defense Information Systems Agency (DISA) – National Capital Region 4th Estate IT Review
- DCMO – 4th Estate Working Group – DCMO Funding Process

“Medically Ready Force...Ready Medical Force”
Health Information Technology

Shared Service Update
HIT Shared Service Concepts

- Consolidate management and management resources across the Services
- Consolidate and standardize IT infrastructure – Datacenter to Desktop
- Rationalize the MHS HIT application portfolio

“Medically Ready Force...Ready Medical Force”
HIT Top Successes (1/2)

- Reached Full Operating Capability (FOC) 1 Oct 2015
  - HIT Catalog of Services developed
  - HIT CONOPS approved
- Implementation of the Modernized DoD EHR in the Pacific Northwest (PNW) underway
- Medical Community of Interest (MED-COI) on track
- Migrated DoD Enterprise Email (DEE)
- Initiated reporting of IT measures for key HIT systems as part of the DHA Agency Mission Essential Task List (AMETL) and Measures of Effectiveness

“Medically Ready Force...Ready Medical Force”
HIT Top Successes (2/2)

- Progress in Achieving On Time Software Deployment
- Progress in Improving System Availability
- Progress in HIT Governance: Signature of Joint Portfolio Board Charter
- Improved Communications with the Services
  - Survey results show customer satisfaction scores improving
- Transitioned Legacy Learning Management System to One Stop eLearning System (JKO)
- Bi-weekly Deputy Director communication meetings established with Army, Navy, and Air Force

“Medically Ready Force...Ready Medical Force”
HIT Alignment to MHS Strategy Map

The map below identifies where HIT aligns to the MHS strategy objectives (identified in green).

ENDS
- PLS1 Medically Ready Force
- PLS2 Ready Medical Force
- PLS3 Healthy People
- PLS4 Improve Clinical Outcomes and Consistent Patient Experience
- PLS5 Improve Stewardship

WAYS
- IP1 Improve Global Health Engagement
- IP2 Improve Operational Medicine
- IP3 Enhance Emerging Medical Capabilities in a Joint Environment
- IP4 Enhance Strategic Partnerships
- IP5 Improve Healthy Behaviors
- IP6 Expand the Boundaries of Healthcare
- IP7 Improve Condition-Based Quality Care
- IP8 Improve Comprehensive Primary Care
- IP9 Improve Safety
- IP10 Optimize & Standardize Access & Other Care Support Processes
- IP11 Reform TRICARE
- IP12 Align Incentives to Achieve Outcomes

MEANS (Enablers)
- OC1 Recruit, Train, & Develop the Total Force to Meet Future Challenges
- OC2 Improve Information Infrastructure
- OC3 Optimize DHA as a Support Organization
- OC4 Improve Process-Based Management
- OC5 Align Facilities, Personnel, and Capabilities to Optimize Market Performance
- F1 Align Resources Against Strategic Priorities and Ensure Fiscal Accountability

Health Information Technology
High Level Initiatives

- Optimize the Financial Visibility of HIT Expenditures
- Build & Strengthen the IT Workforce
- Standardize Infrastructure
- Modernize Organization Structure for the HIT Directorate
- Support Enterprise Customers
### Strategy Map Alignment

<table>
<thead>
<tr>
<th>Strategic Initiative</th>
<th>ID</th>
<th>Supporting Initiative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Optimize the Financial Visibility of HIT Expenditures</td>
<td>H1</td>
<td>Gain full visibility into HIT spend plans and contracts for all MHS MTFs and functions and systems transferred to HIT</td>
</tr>
<tr>
<td>Strategic Objective: F1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Build and Strengthen the IT Workforce (OC1)</td>
<td>H2</td>
<td>Establish and implement robust military and civilian HIT Human Capital Management programs, including filling of military and civilian vacancies in a timely manner</td>
</tr>
<tr>
<td></td>
<td>H3</td>
<td>Identify, implement, and monitor technical, acquisition, and managerial training for HIT personnel</td>
</tr>
<tr>
<td>Standardize Infrastructure (OC2)</td>
<td>H4</td>
<td>Modernize Infrastructure</td>
</tr>
<tr>
<td></td>
<td>H5</td>
<td>Implement Cyber Security Strategy for Medical Equipment</td>
</tr>
<tr>
<td>Modernize Organization Structure for the HIT Directorate (OC3)</td>
<td>H6</td>
<td>Ensure health information technology aspects of new organizations becoming a part of DHA, and other DHA Directorates and Offices, are transitioned to HIT so they can be properly supported</td>
</tr>
<tr>
<td>Improve Support to Enterprise Customers (OC3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>H7</td>
<td>Strengthen HIT collaborative partnership with customers</td>
</tr>
<tr>
<td></td>
<td>H8</td>
<td>Deploy DHA HIT systems and upgrades in accordance with agreed-upon schedules</td>
</tr>
<tr>
<td></td>
<td>H9</td>
<td>Provide EHR Implementation Support</td>
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<tr>
<td></td>
<td>H10</td>
<td>Provide EHR Sustainment Support</td>
</tr>
<tr>
<td></td>
<td>H11</td>
<td>Enhance Business Intelligence Capability</td>
</tr>
<tr>
<td></td>
<td>H12</td>
<td>Health Information Technology Innovation</td>
</tr>
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</table>

“Medically Ready Force...Ready Medical Force”
DHA Industry Day
WELCOME

Mr. Joseph Mirrow, Director, OPMC, Component Acquisition Executive

20 January 2016
DHITS Description

- Develop and implement a consolidated sourcing strategy for DHA Health Information Technology Directorate (HITD) products and services in order to deliver quality and timely support in its MHS provider role.

- In order to support its mission, DHA HITD purchases the following categories of products and services:
  - Information Technology and Communications Services (D Services)
  - Professional, Administrative, and Management Services (R Services) supporting Health Information Technology (HIT) and
  - Automatic Data Processing Equipment, Software, Supplies and Support Equipment (Group 70 Products)
Assessment of Need

- Common strategy for acquisition of HIT Products and Services
- Unique DHA clauses for consistency of management (OCI, HIPAA, etc.)
- An online ordering system for consistency and standardization
- SB goals of 40% including reporting of subcontracting
- Mapping of tasks & labor categories to NAICS, OCC and PSC
- Vendors that understand MHS systems and have a high degree of technical skill and certification that can produce quality technical proposals
- Innovation to quickly integrate new technologies
- Hardware/Software maintenance
- Standardized Hardware Configurations

- Cannot let current programs fail (development/operations)
DODI 5000.74 Strategic Sourcing Framework

“Medically Ready Force...Ready Medical Force”
Market Research

- Market research indicated that the DHA HITS GEN I vehicles can be successfully performed by prime contractors using teaming arrangements.
- Many Competing GWACs. Companies with HIT divisions are also reachable through IT schedules as well.
- Current DoD IT vehicles (NETCENTS, CHESS, Seaport-E) cannot meet DHA’s requirements (scope, HIT).
- No single GWAC can meet all of DHA’s current requirements.
- Removing competitive barriers is a high priority for the MHS in order to promote opportunities for future competition.
- Listened to concerns from industry about competing GWACs.
Business Case Analysis (BCA)

- Published BCA to MAX.gov 2/20/2015
- Received responses from
  - NIH – National Institutes of Health Information Technology Acquisition and Assessment Center (NITAAC) (CIO-SP3)
  - GSA – Not HIT specific but interested
  - VA – T4 may be available after award
- June 2015 industry day cancelled as DHA considered each response and negotiated with federal agencies while weighing resources to build a DHITS contract ourselves
- Briefings to HITCC, DHA CIO, DHA CAE, DHA Director, DPAP and AT&L

“Medically Ready Force...Ready Medical Force”
GSA Solution

- Supports OFPP and OMB’s September 2011 Memo
  - Leverage buying power
  - Achieve efficiencies and cost savings by “considering the suitability of existing interagency contract vehicles”

- New HIT Special Item Number (SIN) leads Federal Agencies
  - Maps to DHA goals and the Federal Health IT Strategic Plan

- Contract Access Fee (CAF) improve GSA’s services (portal, manpower, training)

- True partnership: GSA sees DHA as one customer
  DHA sees GSA as one supplier

“Medically Ready Force...Ready Medical Force”
DHA Requirements Mapped to GSA Vehicles

“Medically Ready Force...Ready Medical Force”
New requirements must not conflict with the Defense Healthcare Management System Modernization contract

Medical Community of Interest (MedCOI) support

Rationalization will generate new requirements

Current acquisitions already in a competition will not be transitioned to GSA at this time.
### Brief Summary description

<table>
<thead>
<tr>
<th>Description</th>
<th>Value range</th>
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<tbody>
<tr>
<td>DMLSS Development/Sustainment</td>
<td>&gt;50M</td>
</tr>
<tr>
<td>Provides call center and network support for Tricare Regional, Medical Support and DHHQ Service Offices.</td>
<td>&gt;30M</td>
</tr>
<tr>
<td>A&amp;AS Support Services for the Tri-Service Workflow (TSWF) Division</td>
<td>&gt;30M</td>
</tr>
<tr>
<td>Provides support services for Director and Principal Deputy Director, operations and service divisions support, and cyber-infrastructure engineering support</td>
<td>&gt;30M</td>
</tr>
<tr>
<td>PEO DHMS Program Management Support. Program Management Support for DHMSM, DMIX and IPO</td>
<td>&gt;20M</td>
</tr>
<tr>
<td>Provides for maintenance of Coding and Compliance Editor (CCE) COTS software license (3M) maintenance support services.</td>
<td>&gt;20M</td>
</tr>
<tr>
<td>Maintenance and Sustainment of the Blood Transfusion COTs Product</td>
<td>&gt;10M</td>
</tr>
<tr>
<td>Provide sustainment and maintenance support services in support of the Health Artifact and Image Management Solution (HAIMS)</td>
<td>&gt;10M</td>
</tr>
<tr>
<td>Sustainment support for the JMAR Application</td>
<td>&gt;10M</td>
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</table>
### Brief Summary description

<table>
<thead>
<tr>
<th>Description</th>
<th>Value range</th>
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</thead>
<tbody>
<tr>
<td>Development and Sustainment for JMAR</td>
<td>&gt;10M</td>
</tr>
<tr>
<td>SPAWARSYSCEN Atlantic is responsible for providing technical and non-technical expertise in support of Department of Defense Enterprise Services (ES) and the Information Management/Information Technology (IM/IT) services.</td>
<td>&gt;10M</td>
</tr>
<tr>
<td>Technical Assistance in support of the MHS/TMA IA Program</td>
<td>&gt;10M</td>
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<tr>
<td>Performance of Independent Developmental Test and Evaluation (DT&amp;E) services to include establishing, managing and maintaining multiple DT&amp;E environments in remote and local facilities and accomplishing software testing and related tasks of DHIMS</td>
<td>&gt;10M</td>
</tr>
<tr>
<td>Tier III program level Help Desk support</td>
<td>&gt;10M</td>
</tr>
<tr>
<td>Designing, delivering, and evaluating training to a broad cross-section of stakeholders throughout the AFMS community, from HQ staff to clinical teams at the MTF level, and including ANG and AFR.</td>
<td>&gt;10M</td>
</tr>
<tr>
<td>Cache License Renewal. Development platform and SQL object database for CHCS and TC2.</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>The Contractor shall enable a collaborative environment to support design, development, software and technology products required and selected by AF/SG personnel.</td>
<td>&gt;5M</td>
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</table>
Procurement Directorate Status

- Documentation and incorporation of feedback from industry
- Aggressive use of “Request for Information”

- Initial Operating Capability Achieved 1 March 2014
- Four official Contracting Operations Divisions (COD) established

“Medically Ready Force...Ready Medical Force”
Federal Acquisition Service

Integrated Technology Service

IT Schedule 70 Business Programs
Office of Integrated Technology Services

January 2016

Roya Konzman
Senior IT Specialist
Roya.Konzman@gsa.gov
What is IT Schedule 70?

• Largest Federal acquisition vehicle for IT products and services

• Over $14 billion in annual sales
  • Over $700M in State & Local Government

• Over 4700 IT contractors
  • App. 85% of all contracts are held by small businesses

• Open solicitation - vendors can submit an offer any time

• Gateway to government procurement opportunities
What is a Special Item Number (SIN)?

- Logical groupings or categories of like products and services

- SIN Examples on Schedule 70
  - 132-8: Purchase of New Equipment
  - 132-32: Term Software License
  - 132-40: Cloud Computing Services
  - 132-51: Information Technology Services
  - 132-XX: Health Information Technology
Why is GSA Focusing on Health IT Market?

• Increased market for Health IT
  • Health IT spending in 2015 -- $31B
  • Projected annual growth of 7.4%

• Increased agency demand for Health IT products and services

• Supporting Federal Health IT Strategic Plan
  • Expand adoption of Health IT products and services
  • Advance interoperable health information solutions
  • Strengthen healthcare delivery systems
The Road to Creating Health IT SIN

- Request for Information (RFI)
  - June 2015 - 80% in favor of creating the Schedule 70 Health IT SIN
- Examples of feedback from industry
  - “This new SIN will enable government to select expertise from a smaller pool of specialists in the Health IT sector instead of selecting specialists from a larger pool that provides IT services but not necessarily in Health IT”
  - “Given the current healthcare climate and Health IT advances and changes, government will have an increasing need for industry experts who have strong Health-specific qualifications around both IT and non-IT”
The Road to Creating Health IT SIN

- RFI - Examples of feedback from industry
  - “Differentiation of Health IT services from other IT services. Many industry partners have IT qualifications, but may not have Health IT specific knowledge or expertise, which is essential in supporting Health IT initiatives/activities”
  - “Addition of a Health IT SIN will necessitate that industry partners are able to attest to Health IT specific knowledge in the appropriate areas”
  - “Health IT SIN will provide government value as it will raise the visibility of Health IT specialized services and will attract vendors who are leaders in this specific market”
The Road to Creating Health IT SIN

• RFI - Examples of feedback from industry
  • “Health IT SIN will provide a choice selection of vendors with the corporate experience, viable technology, and skilled staff best suited to implement solutions for the healthcare environment”
  • “Health IT SIN will be an important vehicle or medium for Federal agencies to request innovative solutions and thereby receive support and contributions from companies who are non-traditional system integrators focused on clinical and business related Health IT”
Benefits of a Health IT SIN

- Provides comprehensive solution for Health IT products and services
- Increases Health IT vendor visibility
- Ease of customer access to Health IT vendors
- Differentiates Health IT products and services from non-Health IT related products and services
- Allows for tracking of Health IT spend data
- Incorporates standards and best practices for Health IT
Health IT Request for Information (RFI)

- RFI released on January 19, 2016
  - FedBizOpps.gov

- Request Industry feedback on:
  - SIN Description
  - Vendor Capabilities
  - Vendor Evaluation Criteria
  - Terms and Conditions

- RFI responses requested by February 1, 2016
  - healthit-sin@gsa.gov
## The Path Forward

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
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<tbody>
<tr>
<td>Publish RFI on FBO</td>
<td>1/19/16</td>
</tr>
<tr>
<td>Industry feedback on RFI</td>
<td>2/1/16</td>
</tr>
<tr>
<td>Agency feedback on RFI</td>
<td>2/1/16</td>
</tr>
<tr>
<td>Publish draft solicitation to GSA IT Schedule 70 Interact webpage</td>
<td>4/22/16</td>
</tr>
<tr>
<td>Final solicitation update</td>
<td>5/30/16</td>
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Why Participate in Health IT SIN?

- Largest growing segment of the Federal government & civilian markets ($31B)

- Additional opportunities with Federal, state, and local government

- Increases vendor visibility for Health IT offerings

- Provides opportunities to build strong relationships within the Health IT marketplace
Onboarding

- **IT Schedule 70** will offer support to new and existing vendors throughout the onboarding process

- **New vendors:** submit an offer to IT Schedule 70
  - Read Solicitation posted on FBO
  - Complete offer process (http://eoffer.gsa.gov/)

- **Existing vendors:** modify your current contract
  - Submit request to add the Health IT SIN http://eoffer.gsa.gov/
  - Include justification documents
Need More Information?

FBO: https://www.fbo.gov/

Email: healthit-sin@gsa.gov

GSA IT Schedule 70 Interact: https://interact.gsa.gov/group/it-schedule-70

IT Schedule 70 Helpline
Phone: 877-446-4870

eOffer & eMod Helpdesk
http://eoffer.gsa.gov/
Phone: 866-472-9114
GSA Governmentwide Acquisition Contracts (GWACs)

January 2016

Chris Fornecker
Director, GWAC Programs
christopher.fornecker@gsa.gov
GWACs Defined

- Government-wide Acquisition Contracts are Task or Delivery Order Contracts specifically for Information Technology (IT) – a type of Indefinite Delivery, Indefinite Quantity (IDIQ) contract

- Authorized by Clinger Cohen Act 1996 to make it easier for CIOs to acquire goods and services

- Established by One Agency for Government-wide Use – consistent with category management and FITARA initiatives
GWAC General Scope

• GSA’s GWACs are designed to support complex, long-term, information technology (IT) programs
  E.Gs. data center migration, help desk, major software project.

• Can contain a mix of hardware, software, networking, and professional services needed to achieve an overarching IT outcome
  • Percentage of integral and/or ancillary products or services are not a consideration

• Consider overarching nature of the requirement – I.E. Service Outcome
GWAC Value Proposition

- Pre-negotiated contracts save time, money and resources.

- FAR 16.505 Streamline Acquisition

- Broad scope supports any information technology project that requires an overall IT solution

- Flexible
  - Fixed priced
  - Cost
  - Labor hour
  - Hybrid
**Value Proposition (Con’t)**

- Technology agnostic – no need to modify for new, innovative technology

- Can include hardware, software, professional services required to support overall solution

- Limited ability to protest orders under $10M

- Diverse pool of qualified vendors typically results in 3 or more offers per order.

- Savings >= 25% when two or more offers received
Concept of Operation

• GSA GWAC Center awards and manages master contracts

• Two paths to award:
  • Direct Order Direct Bill (DODB)
  • Assisted Acquisition Services (AAS)

• About 50% of current awards are DODB and 50% AAS
Direct Order Direct Bill

- Delegation of Procurement Authority
- Contracting officers use fair opportunity procedures to solicit and award orders
- Complete end-to-end acquisition control
- No “Mother May I”
- Optional Scope Review
Assisted Acquisition Services

• Separate Service Offer

• Separate Fee Structure

• AAS can provide the full range of acquisition life cycle services

• Force Multiplier
Current GSA GWAC Contracts Focused on IT Services and Solutions:

- **Alliant**
  - $50B Ceiling
  - $11.1B Obligations
  - April 2009-April 2019
  - Orders can execute to 2024
  - 57 Vendors

- **Alliant Small Business**
  - $15B Ceiling
  - $4.3B Obligations
  - Feb 2009-Feb 2019
  - Orders can execute to 2024
  - 50 Vendors

- **8(a)STARS II**
  - $10B Ceiling
  - $3.5B Obligations
  - August 2011-August 2021
  - Orders can execute to 2024
  - 580 Vendors

- **VETS (SDVOSB)**
  - $5B Ceiling
  - $1.8B Obligations
  - February 2007-February 2017
  - Orders can execute to 2020
  - 23 Vendors
Federal Acquisition Service

Alliant Usage Overview

<table>
<thead>
<tr>
<th></th>
<th>DOD</th>
<th>Navy</th>
<th>Army</th>
<th>Air Force</th>
<th>Civilian</th>
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<tr>
<td>Total Task Orders Awarded</td>
<td>80</td>
<td>74</td>
<td>95</td>
<td>122</td>
<td>155</td>
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<td>Total Estimated Value (B)</td>
<td>$3,216.73</td>
<td>$1,406.74</td>
<td>$3,312.49</td>
<td>$3,576.68</td>
<td>$12,354.44</td>
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</table>
- Total Estimated Value of Health Related Awards: $873 M
- Total Number of Task Orders: 31
Looking Forward

- **Sequel GWAC Contracts:** Alliant 2(A2), Alliant 2 Small Business(A2SB), and VETS 2
  - Highest technically rated with a fair and reasonable price
  - Streamlined evaluation methodology
  - Flexible teaming allowed at task order level
  - Open Season clause allows GSA to add more contractors
  - All contract types ( FP, Cost, T&M, & LH)
    - Cost type is new for VETS2
    - A2 and A2SB will also include requirements type contracts
  - Standardized IT Service Labor Categories
  - Sustaining Same Broad Scope
  - A2, A2SB RFP 2QFY2016; VETS2 RFP 3QFY2016
  - Awards A2, A2SB and VETS2 3QFY2017

- **8(a) STARS II Open Season (OS)**
  - OS Solicitation issued May 2015
  - OS Proposals due July 2015 – over 500 received
  - OS Awards 1Q2017
Not a current GSA GWAC Prime?

• Consider proposing on Alliant 2, Alliant 2 Small Business or VETS 2 as appropriate
  – see interact.gsa.gov
    • Alliant2/Alliant2 Small Business Community
    • VETS2 Community

• Subcontract to existing GWAC primes. Each GWAC provides lists of current primes on GSA.gov
  – Each GWAC provides a list of primes

• Monitor emerging requirements for which your company has unique capabilities/past performance
Tools & Support …

- Toll Free Customer Service
  - General Alliant Information
    - alliant@gsa.gov
    - (877) 534-2208
  - General Small Business GWAC Information
    - sbgwac@gsa.gov
    - (877) 327-8732
- Content Rich Web Site (www.gsa.gov/gwac)
- Comprehensive Ordering Guides
- Complementary SOW Reviews Upon Request
- SOWs Samples
- Acquisition Templates
- Contract Access Fee (CAF) Cap
- Defense Procurement Acquisition Policy (DPAP) Endorsed
- Delegation of Procurement Authority Training
Center for GWAC Program Resources

**Small Business GWAC Acquisition Division**  (877) 327-8732
Center E-mail: sbgwac@gsa.gov
Small Business GWAC Scope Reviews sowreview@gsa.gov
Center Website: www.gsa.gov/sbgwac

**Enterprise GWAC Acquisition Division**  (877) 534-2208
Center E-mail: alliant@gsa.gov
Alliant GWAC Scope Review: alliantsowreview@gsa.gov
Center Website: www.gsa.gov/egc
THANK YOU!
WELCOME!

Mr. Kenneth Evans, Director, Defense IT Sector, FEDSIM

January 2016
What is FEDSIM?

- **Federal Systems Integration and Management Center**
  - GSA organization within the Federal Acquisition Service (FAS) and Assisted Acquisition Services (AAS)
  - Specializes in large, complex projects
  - Operational Considerations in selecting Contract Types
  - 50% IT Services, 50% Professional Services
  - Annual Flow-through to contractors ~$2B in FY15
  - Fee-for-service IPT-based acquisition, project management, contracting, and legal support
  - Decisively-Engaged, Mission-Focused
Meeting Our Objective: The FEDSIM Team

- Over 148 Project Management, Financial Management, and Acquisition Professionals
  - 60% of Project Managers are certified Project Management Professionals (PMP)
  - 90% of Project Managers are FAC-P/PM Certified (~DAWIA)
  - 100% of Contracting Officers FAC-C Certified
  - 50%+ FEDSIM PMs employees have clearances
    - 87 Top Secret or Higher
Federal Acquisition Service

FEDSIM Facts

FY16 Flowthrough: $2.0B ↑
FY16 Orders Issued: 30 ↑
FTE: 148 ↑
Average Project: $200M+ ↑

Primary Vehicles: GSA Alliant & GSA

Primary Contract Type: Cost Plus Award Fee

Net Effective Rate (Fees): ~3.5% @ $100M

Protest Record 61-2
FEDSIM Tenets and Values

• Program Management Office with an Acquisition Competency
  – IPT-Based Approach to Meeting Mission
  – Mission-Enabling Business Model
  – Mission Focused, Performance-Based Task Orders

• Committed to Quality, Compliance & Transparency
  – Fully Compliant with all Federal Regs
  – 3 Critical Pre-Award Gate Reviews
  – Embrace Industry Partners, and Have a Narrow Definition of Procurement Sensitive

• Outcome Oriented
  – Timeliness – 6-7 Month Procurement Acquisition Lead Time (PALT)
  – Post-Award Engagement – Dedicated POC Post-Award for Delivery and Administration
FEDSIM Cost Range

- Civilian Awarded Proposals Within Range = 90%
  - Only one awarded offer outside range. Unique requirement, compelling justification, all offers outside of range

- DoD Awarded Proposals Within Range = 100%

- Inference: FEDSIM task order competitions that include a range generally present a quality IGCE with a realistic level of effort for labor, consistent with FEDSIM’s Best Value philosophy.

- Occasionally, an award appears to be made outside of the range. This is due to fee negotiation after receipt of proposals.
Federal Acquisition Service

Oral Presentations & Video
Meeting Our Objective: Schedule

A Notional Schedule*

<table>
<thead>
<tr>
<th>Months 1-2</th>
<th>Month 3</th>
<th>Month 4</th>
<th>Month 5</th>
<th>Months 6-7</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Discovery • Market Research • Acquisition Planning</td>
<td>• Requirements Definition • Industry Day and/or Due Diligence</td>
<td>• Solicitation Package Release • Response</td>
<td>• Oral Presentations • Evaluation/Negotiation</td>
<td>• Award • Debriefs</td>
</tr>
</tbody>
</table>

*Schedules will vary with each acquisition

- Effective preliminary actions critical to overall acquisition success and timeliness

We understand that time impacts both financial AND human resources
Meeting Our Objective: Pre-Award Process

<table>
<thead>
<tr>
<th>Client Involvement</th>
<th>FEDSIM Acquisition Process</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide Initial Funding</td>
<td>Complete IA &amp; Obtain Initial Funding</td>
</tr>
<tr>
<td>Refine Client Requirements</td>
<td>Develop Acquisition Schedule</td>
</tr>
<tr>
<td>Review &amp; Approve Solicitation</td>
<td>Develop Acquisition Plan and IGCE</td>
</tr>
<tr>
<td>Provide Technical/Programmatic Answers</td>
<td>Develop Solicitation Package</td>
</tr>
<tr>
<td>Evaluate Proposals</td>
<td>Due Diligence/Industry Day</td>
</tr>
<tr>
<td></td>
<td>Issue Solicitation</td>
</tr>
<tr>
<td></td>
<td>Questions &amp; Answers</td>
</tr>
<tr>
<td></td>
<td>Conduct Evaluation Board Training</td>
</tr>
<tr>
<td></td>
<td>Receive Proposals</td>
</tr>
<tr>
<td></td>
<td>Evaluate Written &amp; Oral Proposals</td>
</tr>
<tr>
<td></td>
<td>Conduct Negotiations</td>
</tr>
<tr>
<td></td>
<td>Award Contract</td>
</tr>
<tr>
<td></td>
<td>Conduct Debriefings</td>
</tr>
<tr>
<td></td>
<td>Resolve any Protests</td>
</tr>
</tbody>
</table>

A proven, repeatable process, incorporating joint development, thorough planning, rigorous implementation, and QA
Meeting Our Objective: Post-Award Process

Client Involvement

- Attend Kickoff Meeting
- Provide Technical Direction
- Provide Award Fee Input
- Participate As Needed
- Provide Funds/Guidance As Needed

FEDSIM Project Management Process

- Conduct Project Kickoff Meeting
- Monitor Performance
- Review Deliverables
- Submit Reports to Client
- Conduct Award Fee Boards
- Resolve Issues/Conflicts
- Review Invoices & Pay Industry Partner
- Perform Funds & Financial Management
- Award Modifications
- Provide Project Oversight
- Closeout Contract
- Legal & CRP Review As Needed
- Obtain Audit Assistance As Needed

A proven, repeatable process, incorporating joint development, thorough planning, rigorous implementation, and QA
Questions

Ken Evans
Defense Sector Director
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703 589 2675 Mobile

Corey Nickens
Group Manager – DoD / Navy
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703 605 5771 Office
703 399 5572 Mobile
Summary

- Industry day survey
  https://www.surveymonkey.com/r/dhagsahit

- PLEASE EXIT PROMPTLY. We have limited time to prepare for our next session.
### Brief Summary description

<table>
<thead>
<tr>
<th>Description</th>
<th>Value range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enterprise Help Desk for the Health Information Technology Directorate</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>Program management services in support of the Defense Health Information Management System (DHIMS) in the areas of the Defense Blood Standard System (DBSS) and Enterprise Blood Management System (EBMS).</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>Provides Tier III maintenance support for DOEHRS-HC and DOEHRS-HC Data Repository</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>Lab Interface Subject Matter Experts</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>License renewal. Comprehensive Drug Knowledge Base and pharmaceutical Clinical Information.</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>Support to provide information linking for medical and dental care in support of time-sensitive decision critical to the success of theater operations.</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>AFMS EA with the strategic linkage and controls necessary to deliver IT solutions, and assist AF/SG6, though continually strengthening and promulgating its EA governance and capabilities to ensure widespread awareness and compliance throughout the AFMS.</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>Brief Summary description</td>
<td>Value range</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>-------------</td>
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<tr>
<td>AFMS EA with the strategic linkage and controls necessary to deliver IT solutions, and assist AF/SG6, though continually strengthening and promulgating its EA governance and capabilities to ensure widespread awareness and compliance throughout the AFMS.</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>DMLSS Documentation and Training</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>License Renewal. Provides identity and access management.</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>Health IT engineering support in the areas of system engineering, systems administration, enterprise network, network security, infrastructure engineering, infrastructure modernization, IT systems, systems deployment and integration, as well as information assurance and system support services for Navy Medicine, the DHA, Healthcare Management System Modernization Program.</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>Program management support services concerning the acquisition-related finance and documentation efforts required by the Defense Acquisition Systems’ policies and procedures to the Defense Health Information Management System (DHIMS) Program Management Office (PMO).</td>
<td>&gt;5M</td>
</tr>
</tbody>
</table>
## Brief Summary description

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<tr>
<td>Bidirectional Health Information Exchange Maintenance and Sustainment Support. Maintenance and Sustainment Support to PMO DMIX.</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>CSO Support Task Order is to provide Information Assurance and Accreditation support for the DHA Information Security Division and the Military Health System (MHS) community of interest.</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>Provide SCCM/IA support for joint active directory/allotted to support JAD.</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>Support Information Assurance (IA) Policy initiatives and execute policy programs for the DHA Cyber Security Policy Branch.</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>Budget Formulation, Budget Execution, Cost Estimating and Manager's Internal Control Support.</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>DHSS production applications support. Specifically, production operation of applications that are primarily user-facing.</td>
<td>&gt;5M</td>
</tr>
<tr>
<td>Design, development and sustainment of the Medical Situational Awareness in Theater/Theater Medical Data Store (MSAT/TMDS) and for the services, materials, and software needed to develop and enhance the two systems.</td>
<td>&gt;5M</td>
</tr>
</tbody>
</table>
### Brief Summary description

<table>
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<tbody>
<tr>
<td>&gt;5M</td>
<td>Systems enhancements and maintenance services to improve clinical workflow and service treatment records (STRs) for the Department of Defense (DoD) users of the currently deployed Health Artifacts and Images Management Solution (HAIMS) sites.</td>
</tr>
<tr>
<td>&gt;1M</td>
<td>Sustain the legacy software baselines and provide integration services to address the integration of the DHMSM EHR with the remaining legacy operational medicine components.</td>
</tr>
<tr>
<td>&gt;1M</td>
<td>Blood Establishment Computer Software (BECs)</td>
</tr>
<tr>
<td>&gt;1M</td>
<td>DHSS IBM software maintenance contract</td>
</tr>
<tr>
<td>&gt;1M</td>
<td>To develop, document and implement mobile health applications</td>
</tr>
<tr>
<td>&gt;1M</td>
<td>Provides project management and technical service support to I&amp;O for the Information Technology Service Management (ITSM) life cycle management of the MHS effort to implement a Medical Community of Interest (MED-COI)</td>
</tr>
<tr>
<td>&gt;1M</td>
<td>All cybersecurity support for Solutions Design Documents (SDD) applications and products across all SDD projects and activities</td>
</tr>
</tbody>
</table>
## Brief Summary Description

<table>
<thead>
<tr>
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<th>Value Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maintenance and sustainment of the AFMOWAP pool of 7 applications (AIMWTS, PEPP, RSMS, RAMMIS, EFIT, MedFACTS, and WebRegister)</td>
<td>&gt;1M</td>
</tr>
<tr>
<td>IT Strategic Enterprise Architecture and Planning Support</td>
<td>&gt;1M</td>
</tr>
<tr>
<td>Provides a broad range of technical healthcare informatics support to the Military Health System (MHS)</td>
<td>&gt;1M</td>
</tr>
<tr>
<td>MAPs Travel Trainers</td>
<td>&gt;1M</td>
</tr>
<tr>
<td>Through centralized management and operation of the Network Protection Suite (NPS) and the MEDCOM Wide Area Network (WAN) the MEDi architecture establishes a single enterprise transport and perimeter security enclave</td>
<td>&gt;1M</td>
</tr>
<tr>
<td>Maintenance of the database and web servers located at 101 sites, CONUS and OCONUS.</td>
<td>&gt;1M</td>
</tr>
<tr>
<td>Broad spectrum systems engineering, information assurance, and system management expertise to execute and meet requirements of Navy Medicine Enterprise.</td>
<td>&gt;1M</td>
</tr>
</tbody>
</table>
**HITD Opportunity Forecast – FY 16 Renewal**

<table>
<thead>
<tr>
<th>Brief Summary description</th>
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</tr>
</thead>
<tbody>
<tr>
<td>License Renewal. Support for the Laboratory Instrument Manager. Theater has 5 sites and DII is the only thing that connects to the lab instruments to receive lab results within the hospital without manually entering the results.</td>
<td>&gt;1M</td>
</tr>
<tr>
<td>Security engineering, risk assessment and management, audit and analysis, certification and accreditation, and verification and validation services on an as needed basis for the USAMITC Information Assurance Office.</td>
<td>&gt;1M</td>
</tr>
<tr>
<td>License Renewal. Used on CHCS Legacy System Servers - Mumps - Operating System</td>
<td>&gt;1M</td>
</tr>
<tr>
<td>Management Support for the Workload Management System for Nursing-internet (WMSNi)</td>
<td>&gt;1M</td>
</tr>
<tr>
<td>Classified and Unclassified VTC Bridge Management at the DHHQ and Unclassified VTC Management at other TMA locations</td>
<td>&gt;1M</td>
</tr>
<tr>
<td>HW/SW Maintenance of McAfee products</td>
<td>&gt;1M</td>
</tr>
<tr>
<td>Configuration of the Portfolio Management Analysis Tool.</td>
<td>&gt;1M</td>
</tr>
</tbody>
</table>