



Department of Defense Healthcare Management System Modernization (DHMSM) Program

Exhibit A: IDIQ Contract Data Requirements List (CDRLs)

DHMSM Program Management Office
DoD Healthcare Management Systems (DHMS) Program Executive Office

Contract Number: N00039-15-D-0044

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| DISTRIBUTION LIMITATION |
| Distribution Statement A: Approved for public release; distribution is unlimited. |

| Data Item Number (Block 1) | Title (Block 2) | Contract Reference (Block 5) |
|-------------------------------|---|---|
| A001 | Program Management Plan (PMP) | PWS Paragraph: 5.1.d |
| A002 | Meeting Agendas | PWS Paragraphs: 5.1.3.a.i, 5.1.3.1.b, 5.1.5.2.d, 5.2.2.i, 5.6.1.b, 5.6.3.l.ii, 5.7.1.b, 5.7.4.b.vi |
| A003 | Presentation Materials | PWS Paragraphs: 5.1.3.a.i, 5.1.3.1.c, 5.1.3.1.d, 5.1.5.2.d, 5.1.7.d, 5.2.3.h, 5.3.b, 5.5.2.f, 5.6.1.b, 5.6.3.l.ii, 5.7.1.b, 5.7.1.f.i |
| A004 | Meeting Minutes | PWS Paragraphs: 5.1.3.a.i, 5.1.3.1.e, 5.1.5.2.d, 5.6.1.b, 5.6.3.l.ii |
| A005 | Integrated Program Management Report (IPMR) | PWS Paragraphs: 5.1.3.1.f.i, 5.1.5.a.iii, 5.1.5.2.e, 5.1.8.a, 5.2.2.h, 5.2.5.c, 5.7.2.f, 5.7.4.g.i, 5.8.3.b |
| A006 | Implementation Plan | PWS Paragraphs: 5.1.3.1.f.ii, 5.2.7.2, 5.3.a, 5.4.b, 5.4.2.a, 5.5.3.b, 5.6.3.d, 5.6.4.b, 5.6.5.a, 5.6.5.b, 5.7.b, 5.7.1.a, 5.7.1.d, 5.7.1.d.ii, 5.7.1.d.iii.a, 5.7.2.a, 5.7.2.f, 5.7.2.g, 5.7.4.a, 5.7.4.b.iv, 5.7.4.f, 5.7.4.g, 5.8.d, 5.8.5.2.a.i |
| A007 | Test Plan | PWS Paragraphs: 5.1.3.1.f.iii, 5.2.6.4.b, 5.2.6.4.b.iii.a, 5.2.6.4.b.v, 5.2.9.c, 5.6.a, 5.6.b, 5.6.c, 5.6.e, 5.6.e.iv, 5.6.2.h, 5.6.3.b, 5.6.3.g, 5.6.3.m, 5.6.4, 5.6.5.a, 5.7.4.b.viii, 5.8.5.3.c |

| Data Item Number (Block 1) | Title (Block 2) | Contract Reference (Block 5) |
|-------------------------------|--|---|
| A008 | Monthly Progress Report | PWS Paragraphs: 5.1.5.a.i, 5.1.6.1.f, 5.1.7.d, 5.1.8.b, 5.1.10.1, 5.2.2.g, 5.2.2.i, 5.2.3.h, 5.2.9.e, 5.2.9.f, 5.3.c, 5.7.1.d.iv, 5.7.2.e, 5.7.3.b, 5.7.4.d, 5.7.4.e.iii, 5.8.d, 5.8.5.1.h, 5.8.5.3.b |
| A009 | Competitive Subcontracts Report (CSR) | PWS Paragraph: 5.1.5.a.ii |
| A010 | Functional Cost Hour Report | PWS Paragraph: 5.1.5.1.d |
| A011 | Cost Data Summary Report (CDSR) | PWS Paragraph: 5.1.5.1.d |
| A012 | Software Resource Data Report (SRDR) | PWS Paragraph: 5.1.5.1.d |
| A013 | Contracts Funds Status Report (CFSR) | PWS Paragraph: 5.1.5.2.b |
| A014 | Quality Control Plan | PWS Paragraph: 5.1.6.1.a |
| A015 | Contractor Risk Management Plan (CRMP) | PWS Paragraph: 5.1.7.b |
| A016 | Risk Assessment Report | PWS Paragraph: 5.1.7.c |
| A017 | Integrated Master Plan (IMP) | PWS Paragraph: 5.1.8.a, 5.1.8.a.i |
| A018 | Asset Audit Report | PWS Paragraphs: 5.1.9.d.ii, 5.2.3.f, 5.6.2.f |
| A019 | Phase-Out Transition Plan | PWS Paragraph: 5.1.11.a |
| A020 | System Subsystem Specifications (SSS) | PWS Paragraphs: 5.2.1.b, 5.2.4.c.ii, 5.2.4.d.i, 5.2.4.d.iv, 5.2.4.e.ii, 5.2.4.f, 5.2.5.a.vii, 5.2.5.e, 5.2.5.g, 5.2.5.m.ii, 5.2.5.m.vi, 5.2.6.a, 5.2.6.1.a, 5.2.6.3.d, 5.2.6.4.b.ii, 5.2.6.4.b.iii, 5.2.6.4.b.iv, 5.5.1.a.iii, 5.5.1.b.ii, 5.5.3.c, 5.7.5.a.i |
| A021 | System Subsystem Design Description (SSDD) | PWS Paragraphs: 5.2.1.b, 5.2.3.d, 5.2.3.e, 5.2.4.d.ii, |

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|-------------------------------|---|---|
| | | 5.2.4.d.iii, 5.2.4.e.i, 5.2.4.e.ii, 5.2.4.f.ii, 5.2.5.a, 5.2.5.d.ix, 5.2.5.e, 5.2.5.f, 5.2.5.g, 5.2.5.i, 5.2.5.j, 5.2.5.k, 5.2.5.m.x, 5.2.6.1.a, 5.2.6.1.b, 5.2.6.3.b, 5.2.6.4.a, 5.2.6.4.b.iii, 5.5.1.b.iv, 5.5.2.2.c, 5.5.3.c, 5.7.5.a.ii |
| A022 | Technology Refresh Plan (TRP) | PWS Paragraphs: 5.2.1.b, 5.2.1.d, 5.2.2.h.ii, 5.2.3.b, 5.2.4.e.i, 5.2.5.d.x, 5.5.1.b.vi, 5.8.4.a |
| A023 | Computer Software Products | PWS Paragraphs: 5.2.2.b, 5.2.6.3.e, 5.7.5.a.iii, 5.8.1.1.a |
| A024 | Training Materials | PWS Paragraphs: 5.2.2.d, 5.4.c, 5.4.f, 5.4.2.a, 5.6.4.e.iv, 5.7.1.f.iv, 5.7.2.e, 5.7.3.b, 5.7.4.e.v, 5.7.5.a.iv, 5.8.5.2.c |
| A025 | Incident Management Plan | PWS Paragraphs: 5.2.2.h.i, 5.5.7.2.a, 5.5.7.2.b |
| A026 | Business Process Workflow Diagrams and Role Definitions | PWS Paragraphs: 5.2.4.b, 5.3.1.c, 5.4.f, 5.5.1.b.i, 5.7.4.b.i, 5.7.4.b.iii, 5.8.5.2.i |
| A027 | Contractor Data Management Plan (CDMP) | PWS Paragraphs: 5.2.4.d.ii, 5.2.6.4.b.iv, 5.2.7.2.d, 5.5.1.b.v, 5.5.6.a, 5.5.6.b.iv, 5.5.6.c, 5.7.4.b.v |

| Data Item Number (Block 1) | Title (Block 2) | Contract Reference (Block 5) |
|-------------------------------|---|--|
| A028 | Contractor Requirements Traceability Matrix (CRTM) | PWS Paragraphs: 5.2.4.d.iv, 5.2.4.f, 5.2.5.a.vii, 5.2.5.e, 5.2.5.g, 5.5.1.b.iii, 5.5.3.c, 5.5.3.d, 5.5.3.f.i, 5.6.3.g, 5.8.1.1.b |
| A029 | Interface Control Document (ICD) | PWS Paragraphs: 5.2.5.b, 5.2.5.d.viii, 5.2.6.1.a, 5.2.6.1.b, 5.7.5.a.v |
| A030 | EHR Technical Baseline Documents | PWS Paragraphs: 5.2.5.d, 5.2.5.m.xiv, 5.6.3.l.iii |
| A031 | Database Design Description (DBDD) | PWS Paragraphs: 5.2.5.d.vii, 5.7.5.a.vi |
| A032 | Software Development Plan (SDP) | PWS Paragraphs: 5.2.5.f.iv, 5.2.6.4.b, 5.5.1.b.viii, 5.5.2.c, 5.8.1.1.a |
| A033 | Security Authorization Package | PWS Paragraphs: 5.2.5.m.vii, 5.5.1.b.vii, 5.5.7.1.a, 5.5.7.5.a.i, 5.5.7.5.a.ii, 5.5.7.7.b, 5.7.5.a.vii |
| A034 | Systems Engineering Management Plan (SEMP) | PWS Paragraphs: 5.2.6.a, 5.6.2.b, 5.2.6.4.b, 5.2.6.4.b.v, 5.2.9.a, 5.5.1.a.i, 5.5.2.b, 5.5.2.d, 5.5.2.e, 5.5.3.a, 5.8.d, 5.8.1.1.a |
| A035 | Contractor Configuration Management Implementation Plan (CCMIP) | PWS Paragraphs: 5.6.2.b, 5.5.1.a.ii, 5.5.3.b, 5.5.4.a, 5.5.4.b, 5.5.5.a, 5.8.5.3.h.v |
| A036 | EHR System Installation Guide | PWS Paragraphs: 5.2.2.c.i, 5.2.7.2.a, 5.7.5.a.viii |
| A037 | Disaster Recovery Plan (DRP) | PWS Paragraphs: 5.2.8.b, 5.2.8.g, 5.2.8.h |

| Data Item Number (Block 1) | Title (Block 2) | Contract Reference (Block 5) |
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| A038 | Technical Report | PWS Paragraphs: 5.2.9.b.iii, 5.4.d, 5.5.2.1.g, 5.5.7.2.c, 5.5.7.3.a, 5.5.7.4.c, 5.5.7.6.c, 5.5.7.7.d, 5.5.7.7.f.ii, 5.8.5.3.g |
| A039 | DoD 8570.01 Compliance Report | PWS Paragraph: 5.5.7.d |
| A040 | Test Report | PWS Paragraphs: 5.6.c, 5.6.e, 5.6.3.b, 5.6.3.j, 5.6.3.k, 5.8.5.3.h.iv |
| A041 | Site Visit Report | PWS Paragraphs: 5.2.4.a.v, 5.2.4.a.vi, 5.7.1.f.iii, 5.7.1.g |
| A042 | Role Assignment Identification Document | PWS Paragraphs: 5.3.1.d, 5.8.5.2.j |
| A043 | EHR System Gold Disk | PWS Paragraphs: 5.7.5.a, 5.8.5.3.h.ii |
| A044 | Engineering Change Request (ECR) | PWS Paragraph: 5.5.4.1.a, 5.8.3.a.i |
| A045 | Version Description Document (VDD) | PWS Paragraphs: 5.5.1.b.ix, 5.7.5.a.ix |
| A046 | Cybersecurity Vulnerability Management Plan | PWS Paragraph: 5.5.7.3.b |
| A047 | Contractor Business Data Report (CBDR) | PWS Paragraph: 5.1.5.1.d |
| A048 | System Safety Plan (SSP) | PWS Paragraphs: 5.5.1.b.x, 5.5.8.b |
| A049 | Contract Work Breakdown Structure (CWBS) and CWBS Dictionary | PWS Paragraphs: 5.1.5.a.iii, 5.1.8.a |

| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | |
|--|---|-------------------------------|--|--|--|---|----------------|
| Public reporting burden for this collection of information is estimated to average 110 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either of these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E. | | | | | | | |
| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> ___ | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A001 | 2. TITLE OF DATA ITEM Program Management Plan (PMP) | | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-MGMT-80004A | | | 5. CONTRACT REFERENCE PWS Paragraph: 5.1.d | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ANPLY | 12. DATE OF FIRST SUBMISSION 30 DAC | | 14. DISTRIBUTION | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | |
| | | | | DRAFT | | FINAL Reg Repro | |
| 16. REMARKS: Block 4: The following tailoring of DI-MGMT-80004A applies: 1. Expand paragraph 3.5 to include methodologies for the following: a. Subcontract Management b. Performance Management c. Risk Management Block 8: The Government shall have fifteen (15) days after receiving the completed PMP for review and comment. Block 13: Revise and resubmit the updated Completed PMP to the Government for approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the PMP is approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | See BLK 16 | | |
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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | |
| 1. DATA ITEM NO A002 | | 2. TITLE OF DATA ITEM Meeting Agendas | | | 3. SUBTITLE | | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-ADMIN-81249A | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | | a. ADDRESSEE See BLK 16 | b. COPIES | |
| | | | | | DRAFT | | FINAL Reg Repro | |
| 16. REMARKS: Block 5: PWS Paragraphs: 5.1.3.a.i, 5.1.3.1.b, 5.1.5.2.d, 5.2.2.i, 5.6.1.b, 5.6.3.l.ii, 5.7.1.b, 5.7.4.b.vi Block 8: The Government shall have two (2) days after receiving the Meeting Agenda for review and comment. Blocks 12: Submit the Meeting Agenda at least ten (10) days prior to each meeting. Block 13: Revise and resubmit the updated Meeting Agenda for Government approval within two (2) days of receiving comments. Subsequent submissions are as required until the Meeting Agenda is approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A003 | | 2. TITLE OF DATA ITEM Presentation Materials | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-ADMN-81873 | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | |
| | | | | | DRAFT | Reg | FINAL Repro |
| 16. REMARKS: Block 5: PWS Paragraphs: 5.1.3.a.i, 5.1.3.1.c, 5.1.3.1.d, 5.1.5.2.d, 5.1.7.d, 5.2.3.h, 5.3.b, 5.5.2.f, 5.6.1.b, 5.6.3.l.ii, 5.7.1.b, 5.7.1.f.i Block 8: The Government shall have two (2) days after receiving the Presentation Materials for review and comment Blocks 12: Submit the Presentation Materials at least six (6) days prior to each meeting. Block 13: Revise and resubmit the updated Presentation Materials for Government approval within two (2) days of receiving comments. Subsequent submissions are as required until the Presentation Materials are approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | See BLK 16 | | |
| | | | | | 15. TOTAL | | |
| G. PREPARED BY DHMSM PMO | | | H. DATE | | I. APPROVED BY | | J. DATE |

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| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | | | | | | |
| 1. DATA ITEM NO A004 | | 2. TITLE OF DATA ITEM Meeting Minutes | | | 3. SUBTITLE | | | | | | | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-ADMN-81250A | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | | | | | | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | | | | | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | | | | | | |
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| 16. REMARKS: Block 4: The following tailoring of DI-ADMN-81250A applies: 1. Expand paragraph 10.2.e to include the following information pertaining to action items: a. Summary of the action b. Who assigned the action item c. Who is responsible for completing the action item d. Date for completion of the action item e. Date the action item is completed Block 5: PWS paragraphs: 5.1.3.a.i, 5.1.3.1.e, 5.1.5.2.d, 5.6.1.b, 5.6.3.l.ii Block 8: The Government shall have two (2) days after receiving the Meeting Minutes for review and comment. Blocks 12: Submit the Meeting Minutes within two (2) days after each meeting. Block 13: Revise and resubmit the updated Meeting Minutes to the Government for approval within two (2) days of receiving comments. Subsequent submissions are as required until the Meeting Minutes are approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | | See BLK 16 | | | | | | | |
| | | | | | | 15. TOTAL | | | | | | | |

| G. PREPARED BY | H. DATE | I. APPROVED BY | J. DATE |
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| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A005 | | 2. TITLE OF DATA ITEM Integrated Program Management Report (IPMR) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) See BLK 16 | | | 5. CONTRACT REFERENCE See BLK 16 | | 6. REQUIRING OFFICE DHMSM PMO | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY MTHLY | 12. DATE OF FIRST SUBMISSION 60 DAC | | 14. DISTRIBUTION | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | |
| 16. REMARKS: Block 4: 1. DI-MGMT-81861 2. DI-MGMT-81334D 3. MIL-STD-881C Block 5: PWS Paragraphs: 5.1.3.1.f.i, 5.1.5.a.iii, 5.1.5.2.e, 5.1.8.a, 5.2.2.h, 5.2.5.c, 5.7.2.f, 5.7.4.g.i, 5.8.3.b Block 8: The Government shall have fifteen (15) days after receiving for review and comment of the IPMR. Block 13: Revise and resubmit the updated IPMR to the Government for approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the IPMR is approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | See BLK 16 | | |
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| <ul style="list-style-type: none"> e. Identify critical path 4. End user Training Schedule <ul style="list-style-type: none"> a. Show required tasks in chronological order, with the beginning and end dates of each task b. Use Gantt chart format c. Include bi-directional dependencies between projects and milestones d. Identify critical path 5. An overview of the EHR System security requirements that must be followed during pre-deployment, deployment, and post-deployment (sustainment) 6. Implementation Support <ul style="list-style-type: none"> a. A description and Bill of Materials (BOM) for all hardware, software, facilities, and materials required for deployment, training, change management and sustainment, including: <ul style="list-style-type: none"> i. Specific models, versions, release numbers, configuration settings, and equipment owner ii. Information about manufacturer support, licensing, usage and ownership rights, and maintenance agreement details b. A description of committed or proposed personnel requirements <ul style="list-style-type: none"> i. Describe the number of personnel, length of time needed, types of skills, and skill levels for the personnel required c. A description of necessary personnel training required to prepare personnel for deploying and sustaining the EHR System. Describe the type and amount of training required for the following areas: <ul style="list-style-type: none"> i. Software/software installation ii. System support iii. System maintenance and modification 7. User Role Assignment <ul style="list-style-type: none"> a. List each individual by name assigned to each role 8. Deployment Checklist | | | | |
| <p>Block 5: PWS Paragraphs: 5.1.3.1.f.ii, 5.2.7.2, 5.3.a, 5.4.b, 5.4.2.a, 5.5.3.b, 5.6.3.d, 5.6.4.b, 5.6.5.a, 5.6.5.b, 5.7.b, 5.7.1.a, 5.7.1.d, 5.7.1.d.ii, 5.7.1.d.iii.a, 5.7.2.a, 5.7.2.f, 5.7.2.g, 5.7.4.a, 5.7.4.b.iv, 5.7.4.f, 5.7.4.g, 5.8.d, 5.8.5.2.a.i</p> | | | | |
| <p>Block 10: The Government shall have fifteen (15) days after receiving the Implementation Plan to review and comment.</p> | | | | |
| <p>Block 13: Revise and resubmit the updated Implementation Plan for Government approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the Implementation Plan is approved.</p> | | | | |
| <p>Block 14: Electronically delivered-reproducible Microsoft Office format</p> | | | | |

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| (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | |
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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | |
| Public reporting burden for this collection of information is estimated to average 110 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either of these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E. | | | | | | | |
| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A007 | | 2. TITLE OF DATA ITEM Test Plan | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-NDTI-80566A | | | 5. CONTRACT REFERENCE See BLK 16 | | 6. REQUIRING OFFICE DHMSM PMO | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | | 12. DATE OF FIRST SUBMISSION 30 DAC | | 14. DISTRIBUTION | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | a. ADDRESSEE | DRAFT | b. COPIES | |
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| 16. REMARKS: | | | | | | | |
| Block 4: The following tailoring applies to DI-NDTI-80566A for the Contractor Master Test Plan (CMTP): | | | | | | | |
| 1. Add paragraph 4.1.2 Test Approach to include: | | | | | | | |
| a. A description of the philosophy employed in establishing the test program | | | | | | | |
| b. A method and rationale for the allocation of testing | | | | | | | |
| c. Commercial best practices utilized | | | | | | | |
| d. A mapping of individual tests to the Government Requirements Traceability Matrix | | | | | | | |
| e. A description of how all necessary hardware, software, and professional services required for installation, configuration, and interfaces of the EHR System in the Government Approved Laboratories (GALs) will be identified | | | | | | | |
| 2. Add paragraph 4.3.1 Test Philosophy to include: | | | | | | | |
| a. Previous testing or certifications that can be utilized to reduce Government testing | | | | | | | |
| b. A copy of the previous testing or certifications provided as an appendix | | | | | | | |
| 3. Paragraph 4.9 applies to all contractually required tests and subtests | | | | | | | |
| 4. Replace Paragraph 4.9.2 "Applicable specification (s)" with "Test Identification." This section shall include: | | | | | | | |
| a. A list of each required individual test plan, test scripts, test procedures and test reports and indicate which tests are a part of each plan or report | | | | | | | |
| b. A brief description of each test and sub-test that addresses the objectives and sub-objective | | | | | | | |
| c. A clear identification of the system or subsystem under test | | | | | | | |

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| <p>5. Paragraph 4.9.6: Add a roadmap for how testing will be conducted and identify key elements, significant dependencies, and summaries</p> <p>6. Paragraph 4.9.7: Provide a list of the hardware, software, and professional services required for installation, configuration, and interfaces of the EHR System in the GALs</p> <p>7. Paragraph 4.9.8: This section shall include a list of all test support equipment that will be provided to the Government at the completion of each task order for the following:</p> <ul style="list-style-type: none"> a. A Regression Testing Overview and Methodology – provide an overview and methodology for accomplishing regression testing. Explain how the regression testing will stay current as the program changes over the life of the contract. b. A Test Data Description <ul style="list-style-type: none"> i. Include a description of the types of test data needed to demonstrate the functional and technical capabilities of their product ii. Include all “test data sets” used to validate the capability and performance of the EHR System c. An Automated Test Tools Overview <ul style="list-style-type: none"> i. Include a list of the types of automated test tools required to facilitate efficient and economical conduct of all testing ii. Include all “test data sets” used to validate the capability and performance of the EHR System <p>8. Replace Paragraph “4.9.13 Government Test Facilities” with “4.9.13 Test Support Items.” This section shall document all technical and logistical support required to implement each test in sufficient detail to permit a determination of whether the Government has the capability. For each test phase, include:</p> <ul style="list-style-type: none"> a. Test logistics <ul style="list-style-type: none"> i. Identify logistics requirements, including supply maintenance and transportation. Also include access requirements, technical support contacts, training materials b. Explain how the contractor will support and facilitate the use of Government independent agents addressing any necessary training the agents must have before being provided access to the application c. Facilities <ul style="list-style-type: none"> i. Include a detailed description of facilities required to support the test effort (e.g., simulations, environmental tests) d. Application Support <ul style="list-style-type: none"> i. Include requirements for data processing equipment, network requirements, Government provided applications, Government and contractor provided test data sets, emulators, security, clearances, access requirements | | | | | |
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| <ul style="list-style-type: none"> ii. Include estimates of total number of processing hours required | | | | |
| <ul style="list-style-type: none"> iii. Include any special computer programs for test conduct (e.g. simulation), data reduction, or test analysis | | | | |
| <p>9. Add new section "4.9.14 System Safety Testing"</p> <ul style="list-style-type: none"> a. Describe the testing (previous or post contract award) that will satisfy the requirements of PWS 5.5.8 System Safety | | | | |
| <p>The following tailoring applies to DI-NDTI-80566A for the Test Plan:</p> | | | | |
| <ul style="list-style-type: none"> 1. Expand Test Plan to include: <ul style="list-style-type: none"> a. Test procedures b. Test scripts (Automated and Manual) c. Test cases d. Network monitoring configuration files e. Instructions f. Logs (to include log formats) g. Contractor utilized tools used for: <ul style="list-style-type: none"> i. Data aggregation ii. Correlation iii. Report creation | | | | |
| <p>Block 5: PWS Paragraphs: 5.1.3.1.f.iii, 5.2.6.4.b, 5.2.6.4.b.iii.a, 5.2.6.4.b.v, 5.2.9.c, 5.6.a, 5.6.b, 5.6.c, 5.6.e, 5.6.e.iv, 5.6.2.h, 5.6.3.b, 5.6.3.g, 5.6.3.m, 5.6.4, 5.6.5.a, 5.7.4.b.viii, 5.8.5.3.c</p> | | | | |
| <p>Block 8:</p> <ul style="list-style-type: none"> 1. The Government shall have fourteen (14) days after receiving the CMTP for review and comment. 2. The Government shall have seven (7) days after receiving all other Test Plans for review and comment. | | | | |
| <p>Block 10 and 12:</p> <ul style="list-style-type: none"> 1. Submit CMTP thirty (30) DAC. 2. Submit Test Plans fourteen (14) days prior to each test event. | | | | |
| <p>Block 13: Revise and resubmit the updated CMTP and all other Test Plans for Government approval within five (5) days after receiving comments. Subsequent submissions are as required until each Test Plan is approved.</p> | | | | |
| <p>Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO).</p> | | | | |
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| G. PREPARED BY DHMSM PMO | | H. DATE | I. APPROVED BY | | J. DATE | | |
| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | | |
| Public reporting burden for this collection of information is estimated to average 110 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either of these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E. | | | | | | | |
| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <input checked="" type="checkbox"/> ___ | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | |
| 1. DATA ITEM NO A008 | 2. TITLE OF DATA ITEM Monthly Progress Report | | | 3. SUBTITLE | | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-MGMT-80368A | | 5. CONTRACT REFERENCE See BLK 16 | | 6. REQUIRING OFFICE DHMSM PMO | | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY MTHLY | 12. DATE OF FIRST SUBMISSION 30 DAC | | 14. DISTRIBUTION | | |
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| 16. REMARKS: | | | | | | | |
| Block 4: The following tailoring of DI-MGMT-80368A applies: | | | | | | | |
| 1. Paragraphs 3.2.2, 3.2.3, and 3.2.5 do not apply. | | | | | | | |
| 2. Section 3 applies to all contract and task order activity, e.g., | | | | | | | |
| a. Risk Summary | | | | | | | |
| i. Status of existing risks | | | | | | | |
| ii. New risks identified during the reporting period, the potential impact of each risk, and the plan (including schedule) to mitigate each risk | | | | | | | |
| b. Status of Role Assignments | | | | | | | |
| i. Provide description and percentage of tasks completed | | | | | | | |
| ii. Provide description of tasks to be completed | | | | | | | |
| c. Status of Engineering Change Requests (ECR) | | | | | | | |
| d. Schedule Status | | | | | | | |
| i. Planned patches, updates, and upgrades | | | | | | | |
| ii. Report existing or potential problem areas | | | | | | | |
| iii. Provide corrective action recommendations | | | | | | | |
| e. Software Status | | | | | | | |
| i. Report updates on software license allocation and number of licenses in use | | | | | | | |
| 3. System Performance Statistics, as defined in the Government Requirements Traceability Matrix, including at a minimum: | | | | | | | |
| a. System downtime | | | | | | | |
| b. Software and hardware Mean Time To Repair (MTTR) | | | | | | | |
| c. System MTTR | | | | | | | |
| d. System-wide and critical system operational availabilities | | | | | | | |
| e. Mean Down Time | | | | | | | |

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| f. Mean Time Between Critical Failures (MTBCFs) | | | | |
| g. Mean Time Between Failures (MTBFs) | | | | |
| 4. Problem Report | | | | |
| a. Total number of trouble tickets | | | | |
| b. Problem source and site distribution | | | | |
| c. Defect rates, type, and age by module | | | | |
| d. Defect resolution rate by module | | | | |
| e. Defect reactivation rates | | | | |
| 5. Change Management | | | | |
| a. Recommended improvements | | | | |
| b. Status of change management activities | | | | |
| 6. Role provisioning status to include the total number and percentage of users who have completed training | | | | |
| Appendices | | | | |
| A. Site Implementation Status (for each Wave) | | | | |
| 1. List of users certified as trainers (e.g., clinical champions, super users) | | | | |
| 2. Competency test report | | | | |
| 3. Check List updates | | | | |
| 4. User provisioning | | | | |
| a. List users with access to the EHR System by name and type of access | | | | |
| b. List of users requiring training | | | | |
| 5. Summary of the end user evaluation report | | | | |
| B. Metrics | | | | |
| 1. Summary of Performance Metrics for the past six (6) months. | | | | |
| a. Measurement, for the reporting period and the previous five (5) reporting periods, of each Service Level Agreements (SLA) used to monitor contract performance. | | | | |
| b. Approach and steps taken to address measurements that did not meet SLA thresholds. | | | | |
| 2. Reliability and availability trend analysis (spreadsheet format) | | | | |
| a. Include a summary of assigned systems and services against established thresholds | | | | |
| b. Include supporting data | | | | |
| C. Maintenance Status | | | | |
| 1. Provide detailed information of maintenance performed during the current reporting period | | | | |
| a. Maintenance location information (e.g., building address, floor, and room number) | | | | |
| b. Item description, part number, and serial number | | | | |
| c. Type of maintenance performed (e.g. scheduled, unscheduled, corrective, or preventive) and the reason for unscheduled maintenance | | | | |
| i. Number of defects per month | | | | |
| ii. Types of defects experienced per month | | | | |

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| <p>iii. Severity level of defects and the number of defects per severity level</p> <p>2. Provide graphical display of maintenance performed during the current and all previous reporting periods</p> <p>3. Provide graphical display of failure trends for the ten (10) most frequently repaired items</p> <p>D. Personnel Security Report</p> <p>1. Percentage of personnel meeting security requirements (e.g., access to Government facility/installation, access to information technology systems, mandatory security training)</p> <p>Block 5: PWS Paragraphs: 5.1.5.a.i, 5.1.6.1.f, 5.1.7.d, 5.1.8.b, 5.1.10.1, 5.2.2.g, 5.2.2.i, 5.2.3.h, 5.2.9.e, 5.2.9.f, 5.3.c, 5.7.1.d.iv, 5.7.2.e, 5.7.3.b, 5.7.4.d, 5.7.4.e.iii, 5.8.d, 5.8.5.1.h, 5.8.5.3.b</p> <p>Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO).</p> | | | | |
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| Blocks 10 and 13: Subsequent submissions are due no later than fifteen (15) days after the end of the prior quarter. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | |
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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | |
| Public reporting burden for this collection of information is estimated to average 110 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either of these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E. | | | | | | | |
| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A010 | 2. TITLE OF DATA ITEM Functional Cost Hour Report | | | | 3. SUBTITLE Contractor Cost Data (CCD) Report | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-FNCL-81566A | | | 5. CONTRACT REFERENCE PWS Paragraph: 5.1.5.1.d | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ NO | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY See BLK 16 | | 12. DATE OF FIRST SUBMISSION 60 DAC | | 14. DISTRIBUTION | |
| 8. APP CODE | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | |
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| 16. REMARKS: Blocks 10 and 13: Second and third submissions of the Functional Cost Hour Report are due semi-annually, at 240 DAC and 420 DAC respectively. Subsequent submissions are due annually. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO) and to the Defense Cost and Resource Center (DCARC) website at http://dcarc.cape.osd.mil . Electronic submission to the DCARC requires the contractor to register for a user account via the DCARC website and obtain an External Certification Authority (ECA) certificate from a third party vendor. Submissions must be in a DCARC approved Extensible Markup Language (XML). PDF format is not acceptable. | | | | | See BLK 16 | | |
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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | |
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| Public reporting burden for this collection of information is estimated to average 110 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either of these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E. | | | | | | | |
| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A011 | | 2. TITLE OF DATA ITEM Cost Data Summary Report (CDSR) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-FNCL-81565B | | | 5. CONTRACT REFERENCE PWS Paragraph: 5.1.5.1.d | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ NO | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY See BLK 16 | | 12. DATE OF FIRST SUBMISSION 60 DAC | | 14. DISTRIBUTION | |
| 8. APP CODE | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE See BLK 16 | b. COPIES | |
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| 16. REMARKS: Blocks 10 and 13: Second and third submissions of the CDSR are due semi-annually, at 240 DAC and 420 DAC respectively. Subsequent submissions are due annually. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO) and to the Defense Cost and Resource Center (DCARC) website at http://dcarc.cape.osd.mil . Electronic submission to the DCARC requires the contractor to register for a user account via the DCARC website and obtain an External Certification Authority (ECA) certificate from a third party vendor. Submissions must be in a DCARC approved Extensible Markup Language (XML). PDF format is not acceptable. | | | | | | | |
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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | | | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | | | | |
| 1. DATA ITEM NO A012 | | 2. TITLE OF DATA ITEM Software Resource Data Report (SRDR) | | | 3. SUBTITLE | | | | | | |
| 4. AUTHORITY (Data Acquisition Document No.) See BLK 16 | | | 5. CONTRACT REFERENCE PWS Paragraph: 5.1.5.1.d | | 6. REQUIRING OFFICE DHMSM PMO | | | | | | |
| 7. DD250 REQ NO | 9. DIST. STATEMENT REQUIRED | 10. FREQUENCY See BLK 16 | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | | | | |
| 8. APP CODE | D | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | | | | | |
| 16. REMARKS Block 4: 1. DID-MGMT-81739 Applies to the SRDR Initial Developer Report and Dictionary 2. DI-MGMT-81740 Applies to the SRDR Final Developer Report and Data Dictionary Block 12: Submit the SRDR Initial Developer Report and Data Dictionary at sixty (60) DAC. Blocks 10 and 13: Submissions for the first two (2) SRDR Final Developer Reports and Data Dictionaries are due semi-annually, at 240 DAC and 420 DAC respectively. Subsequent submissions are due annually. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO) and to the Defense Cost and Resource Center (DCARC) website at http://dcarc.cape.osd.mil . Electronic submission to the DCARC requires the contractor to register for a user account via the DCARC website and obtain an External Certification Authority (ECA) certificate from a third party vendor. Submissions must be in a DCARC approved Extensible Markup Language (XML). PDF format is not acceptable. | | | | | See BLK 16 | DRAFT | FINAL | | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A013 | | 2. TITLE OF DATA ITEM Contractor Funds Status Report (CFSR) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-MGMT-81468 | | | 5. CONTRACT REFERENCE PWS Paragraph: 5.1.5.2.b | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ NO | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY QRTLY | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | |
| 8. APP CODE | | 11. AS OF DATE See BLK 16 | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | |
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| 16. REMARKS: Block 11: As of the end of the contractor's accounting period nearest to the end of each fiscal year quarter. Block 12: Submit the CFSR fifteen (15) days after the as of date. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | See BLK 16 | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A017 | | 2. TITLE OF DATA ITEM Integrated Master Plan (IMP) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) See BLK 16 | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | 12. DATE OF FIRST SUBMISSION 60 DAC | 14. DISTRIBUTION | | | |
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| 6. REMARKS: | | | | See BLK 16 | | | |
| Block 4: DoD Integrated Master Plan and Integrated Master Schedule Preparation and Use Guide, Version 0.9, October 21, 2005. | | | | | | | |
| The Integrated Master Plan shall include: | | | | | | | |
| 1. A narrative explaining the overall management of the EHR Program | | | | | | | |
| 2. A hierarchy of program events | | | | | | | |
| a. Supporting accomplishments – Identifies desired result prior to or at completion of the event that indicates a level of progress | | | | | | | |
| i. Supporting criteria – Provides definitive evidence that a specific accomplishment has been completed | | | | | | | |
| Block 5: PWS Paragraphs: 5.1.8.a, 5.1.8.a.i | | | | | | | |
| Block 8: The Government shall have fifteen (15) days after receiving the IMP for review and comment. | | | | | | | |
| Block 13: Revise and resubmit the updated IMP to the Government for approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the IMP is approved. | | | | | | | |
| Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | | | |

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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u> X </u> | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | |
| 1. DATA ITEM NO A018 | | 2. TITLE OF DATA ITEM Asset Audit Report | | | 3. SUBTITLE | | | |
| 4. AUTHORITY (Data Acquisition Document No.) N/A | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | |
| 8. APP CODE | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION ASREQ | | a. ADDRESSEE | DRAFT | b. COPIES FINAL Reg Repro | |
| 16. REMARKS: The Asset Audit Report shall include, at a minimum: 1. Hardware data elements: a. Accountable Unit Identification Code (UIC) (if available) b. Asset Class c. Asset Status d. Asset Type e. Building f. Floor g. Machine Name h. Manufacturer i. Model j. Asset Tag k. Parent Asset Tag l. Parent Serial Number m. Site Code n. Rack o. Room p. Row q. Serial Number r. Slot 2. Software data elements: a. License Key b. License Name c. License Serial Number d. Number of Actual License Distributions e. Number of License Entitlements f. Manufacturer g. Manufacturing Part Number h. Software Application Name | | | | | See BLK 16 | | | |
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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A020 | | 2. TITLE OF DATA ITEM System Subsystem Specification (SSS) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-IPSC-81431A | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY See BLK 16 | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | |
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| 16. REMARKS: Contractor format is acceptable. Block 5: PWS Paragraphs: 5.2.1.b, 5.2.4.c.ii, 5.2.4.d.i, 5.2.4.d.iv, 5.2.4.e.ii, 5.2.4.f, 5.2.5.a.vii, 5.2.5.e, 5.2.5.g, 5.2.5.m.ii, 5.2.5.m.vi, 5.2.6.a, 5.2.6.1.a, 5.2.6.3.d, 5.2.6.4.b.ii, 5.2.6.4.b.iii, 5.2.6.4.b.iv, 5.5.1.a.iii, 5.5.1.b.ii, 5.5.3.c, 5.7.5.a.i Block 8: The Government shall have fifteen (15) days after receiving the SSS for review and comment. Block 10: Submit updated SSS as follows: 1. Submit fifteen (15) days prior to Initial Design Review/ Final Requirements Review (IDR/FRR). 2. Submit fifteen (15) days prior to Final Design Review/Test Readiness Review (FDR/TRR). 3. Fifteen (15) days prior to the beginning of System Verification Review/Operational Test Readiness Review (SVR/OTRR) 4. For baseline changes, submit updated SSS thirty (30) days after each approved Major, Minor, Maintenance, and Patch baseline change is implemented. 5. Submit all other updated SSS thirty (30) days after requiring event (specified in the referenced PWS paragraphs in Block 5 of this CDRL) is identified. Block 12: Submit Draft SSS thirty (30) DAC. Block 13: Revise and resubmit the updated SSS for Government approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the SSS is approved. | | | | | See BLK 16 | | |

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| Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | | |
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| <p>event (specified in the referenced PWS paragraphs in Block 5 of this CDRL) is identified.</p> <p>Block 13: Revise and resubmit the updated SSDD for Government approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the SSDD is approved.</p> <p>Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO).</p> | | | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u> X </u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A022 | | 2. TITLE OF DATA ITEM Technology Refresh Plan (TRP) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) N/A | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY SEMIA | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | a. ADDRESSEE | DRAFT | b. COPIES FINAL Reg Repro | |
| 16. REMARKS: The TRP shall be a five (5) year plan aligned to contract years broken out by month. Block 4: The TRP shall include: 1. Long-term and short-term technology refresh and modernization strategy, to include: a. Two (2) – three (3) year software release plan for upgrades and for development of new capabilities b. Replacement of obsolete (e.g., loss of Original Equipment Manufacturer support) and non-compliant (e.g., changes in Government security requirements) SW throughout the deployment life cycle. c. Planning for current and future demands for services and computing resources as well as future plans for workload growth. d. Approach to minimize obsolescence, promote adoption of new emerging technologies and to maintain compliancy and currency with applicable national standards through life cycle management and component modernization e. Replacement of high failure items (including systemic replacement). f. Replacement of HW with demonstrated reliability issues. g. Replacement of HW and non-IT assets that have reached End-of-Life (EOL) or End-of-Support (EOS). h. Replacement of or upgrades to systems and services with insufficient capacity or processing power to deliver required services. | | | | See BLK 16 | | | |

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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | |
| 1. DATA ITEM NO A023 | | 2. TITLE OF DATA ITEM Computer Software Products | | | 3. SUBTITLE | | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-ISPC-81488 | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | |
| 8. APP CODE | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | | |
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| 16. REMARKS: Block 4: The Computer Software Products shall be in electronic format compatible with the contractor's build and installation procedures. The following tailoring to DI-ISPC-81488 applies: 1. Add new paragraph "10.3.4 Build instruction" a. Description of version, code management environment, workspace and codeline structure b. Listing of tools used to link, compile or interpret code to build executables c. Scripts and configuration files required to support development and build executables d. Description and instructions to configure tools and scripts to build executables and install them into an operational environment 2. Add new paragraph "10.3.5 Dependencies to tools kits and software libraries" a. List of libraries and toolkit dependencies b. Library and toolkit c. Executable, source or object code required to integrate external libraries, APIs, databases, middleware and other computing infrastructure. 3. Modify paragraph 10.4.1 to "For each program, package, interface library or module" 4. Modify paragraph 10.4.1 to "For each routine, method, class, object" 5. Modify paragraph 10.4.3 to "Developed for and installed on Government specified computer and operating systems" Block 5: PWS Paragraphs: 5.2.2.b, 5.2.6.3.e, 5.7.5.a.iii, 5.8.1.1.a | | | | | See BLK 16 | | | |

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| <p>Block 10: Submit Computer Software Products as follows:</p> <ol style="list-style-type: none"> 1. Submit Computer Software Products (for each site) fifteen (15) days after deployment completion for each Wave. 2. Submit updated Computer Software Products thirty (30) days after each approved Major, Minor, Maintenance, and Patch baseline change is implemented. <p>Block 12: Submit Computer Software Products thirty (30) days prior to the Final Design Review/Test Readiness Review (FDR/TRR).</p> <p>Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO).</p> | | | | |
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| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | | | | |
| 1. DATA ITEM NO A024 | 2. TITLE OF DATA ITEM Training Materials | | | | 3. SUBTITLE | | | | | | |
| 4. AUTHORITY (Data Acquisition Document No.) N/A | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | | | | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | | | | | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | | 13. DATE OF SUBSEQUENT SUBMISSION N/A | | | | | | | |
| 16. REMARKS: All Training Materials shall be role based and aligned to Business Process Workflows in support of Segments 1 and 2, to include roles of care (1, 2, 3, and En Route). Block 4: The Training Materials shall include: 1. Course Syllabus – Provides an overview of the course content and learning expectations 2. End User Guide – Provides detailed steps for performing all of the DHMSM EHR System functions for all skill levels a. Workflow Diagrams – Provides graphical representation of roles, interactions and workflows associated with a clinical or business process 3. Certification Materials for trainer certification (TMIP-J and Services trainers) 4. Troubleshooting Guide – Provides processes to evaluate and resolve common problems 5. Computer-Based Training (CBT) Media – Provides training session through a didactic or interactive online session 6. Job Aids/Quick Reference Guides – Provides specific instruction for error resolution, interface monitoring, tips and tricks and step-by-step instruction to handle scenarios and situations. Examples of job aids may include: a. Frequently Asked Questions and Answers b. Glossary of Terms and Definitions c. Logon and Navigation 7. Competency Tests a. End User - Measures the end users' knowledge, skills and abilities b. Trainer Certification – Measures the Services' Trainer's | | | | | 14. DISTRIBUTION | a. ADDRESSEE DRAFT Reg Repro FINAL | | | | | |
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| knowledge, skills and abilities | | | | |
| 8. User Experience Satisfaction Survey – Provides end users’ feedback on the effectiveness of training process, the EHR System, and other training products. | | | | |
| 9. System Administrator Guides | | | | |
| a. Provides step-by-step instruction for System Administrators | | | | |
| b. Addresses cybersecurity technical, operational, and managerial control compliancy | | | | |
| 10. System Testing Guides | | | | |
| c. Provides step-by-step instruction for Government testing personnel | | | | |
| d. Addresses the tool, processes, and procedures to configure and integrate the EHR System | | | | |
| 11. Instructor Guide – Provides information for an instructor on how to train individuals on the DHMSM EHR System | | | | |
| 12. Defense Healthcare Agency Global Service Center (DHAGSC) Knowledge Base Materials – Provides DHAGSC instruction and guidance for DHAGSC staff | | | | |
| 13. Updated Knowledge Base Articles and DHAGSC-related Training Materials – Provides updated materials and additional Knowledge Base Articles that correspond to major releases and updates to the EHR System | | | | |
| 14. EHR Demonstration clip – Provides demonstration media to be uploaded in the LMS | | | | |
| Block 5: PWS Paragraphs: 5.2.2.d, 5.4.c, 5.4.f, 5.4.2.a, 5.6.4.e.iv, 5.7.1.f.iv, 5.7.2.e, 5.7.3.b, 5.7.4.e.v, 5.7.5.a.iv, 5.8.5.2.c | | | | |
| Block 8: The Government shall have fifteen (15) days after receiving the Training Materials for review and comment. | | | | |
| Block 10: Submit updated Training Materials thirty (30) days after each approved Major, Minor, Maintenance, and Patch baseline change is implemented. | | | | |
| Block 12: Submit Training Materials ninety (90) days prior to Developmental Test and Evaluation (DT&E) | | | | |
| Block 13: Revise and resubmit the updated Training Materials to the Government for approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the Training Materials are approved. | | | | |
| Block 14: Electronically delivered, reproducible, editable, and standards-based format to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). All CBT media shall be SCORM conformant. | | | | |

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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved OMB No. 0704-0188</i> | | | | | | |
| Public reporting burden for this collection of information is estimated to average 110 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either of these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E. | | | | | | | | | | | |
| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <input checked="" type="checkbox"/> | | | | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | | | | |
| 1. DATA ITEM NO A026 | | 2. TITLE OF DATA ITEM Business Process Workflow Diagrams and Role Definitions | | | 3. SUBTITLE | | | | | | |
| 4. AUTHORITY (Data Acquisition Document No.) DoD AF V2.0 | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | | | | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | | 12. DATE See BLK 16 | | 14. DISTRIBUTION | | | | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | | 13. DATE OF SUBSEQUENT SUBMISSION N/A | | a. ADDRESSEE | b. COPIES | | | | |
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| 16. REMARKS: Block 4: Business Process Workflow Diagrams include: 1. Updated Operational View OV-6C documentation that reflects the "To-Be" state. 2. Role definitions for the "To-Be" state. 3. Deltas between the EHR System workflows and the current organizational processes identified in the DoD Architectural Framework (DoDAF) Operational Views (OVs). Block 5: PWS Paragraphs: 5.2.4.b, 5.3.1.c, 5.4.f, 5.5.1.b.i, 5.7.4.b.i, 5.7.4.b.iii, 5.8.5.2.i Block 8: The Government shall have fifteen (15) days after receiving the Updated Business Process Workflow Diagrams and Role Definitions for review and comment. Block 12: Submit Business Process Workflow Diagrams and Role Definitions thirty (30) days prior to Final Design Review/Test Readiness Review (FDR/TRR). Block 13: Revise and resubmit the updated Business Process Workflow Diagrams and Role Definitions for Government approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the Business Process Workflow Diagrams and Role Definitions are approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD | | | | | | See BLK 16 | | | | | |
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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | |
| Public reporting burden for this collection of information is estimated to average 110 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either of these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E. | | | | | | | |
| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u> X </u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A027 | | 2. TITLE OF DATA ITEM Contractor Data Management Plan (CDMP) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) N/A | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | |
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| 16. REMARKS: Contractor format is acceptable. Block 4: The CDMP shall include: <ol style="list-style-type: none"> 1. An organizational chart and supportive narrative describing the Contractor Data Management structure the contractor establishes to manage DHMSM Data Management requirements 2. The direct lines of control, responsibilities, functional relationships, and authority between the contractor's Data Management Office and the contractor's other organizational elements 3. A description of all interfaces between the contractor and the Government necessary to accomplish Data Management tasks 4. The approach, methodologies, and processes for managing data and information from creation to final disposition or destruction throughout contract execution to include, but not limited to: <ol style="list-style-type: none"> a. Data access controls b. Search capabilities available to the Government and contractor c. Procedures e.g.: <ol style="list-style-type: none"> i. Backup and data restoration ii. Data cataloging iii. Data accessing, sharing, and re-use iv. Storage and data archiving v. Data quality (which include Business Entity Rules, Business Attribute Rules, Data Dependency Rules, | | | | | See BLK 16 | | |

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| <p>and Data Validity Rules)</p> <ul style="list-style-type: none"> vi. Reporting and Analysis (tools, languages and protocols used to extract data from a data store and process it for reporting) d. Technologies and tools to be used to support and automate the Data Management processes including required interfaces e. Cybersecurity information f. Monitoring effectiveness of Data Management process for Continual Service Improvement, including metrics measuring <p>5. Description of the quality assurance and quality control measures that will be taken during sample collection, analysis and processing</p> <p>6. Description of data and data formats to include (for data migration)</p> <ul style="list-style-type: none"> a. Quantity/Volume of data to be converted b. Source systems of the data (repository or multiple systems) c. Data sources (tools and teams producing data) d. File formats and the naming conventions. <ul style="list-style-type: none"> i. Identify standards to be used for data and metadata format (e.g., HL7, Comma delimited flat files, X12, NCPDP, proprietary interfaces) e. Quality of the data (patient duplicates, known mapping issues, use of dummy data (SSN – 999-99-9999)) f. Data coding (free text or discrete (SNOMED, ICD-9, Allergies, etc.)) g. Patient/clinical information for decision making h. Constraints/goals for programming and testing data migration <p>7. Description of the data migration approach for the EHR System to include but not limited to:</p> <ul style="list-style-type: none"> a. Master Data Management b. Data Cleansing Services c. Data Interface Management <ul style="list-style-type: none"> i. Medical device ii. Legacy Interfaces d. Collection and Load Strategy e. Data Archive and Intermediate Storage f. Synchronization Approach (data synchronization and reconciliation within the EHR System) g. Quality Control (edits, reports, and documentation will be developed as necessary to ensure the maximum accuracy in data conversion and migration) | | | | |
| <p>Block 5: PWS Paragraphs: 5.2.4.d.ii, 5.2.6.4.b.iv, 5.2.7.2.d, 5.5.1.b.v, 5.5.6.a, 5.5.6.b.iv, 5.5.6.c, 5.7.4.b.v</p> | | | | |
| <p>Block 8: The Government shall have fifteen (15) days after receiving</p> | | | | |

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| <p>the CDMP to review and comment.</p> <p>Block 12: Submit draft CDMP sixty (60) DAC.</p> <p>Block 13: Revise and resubmit the updated CDMP for Government approval within fifteen (15) days of receiving comments. Subsequent submissions are as required until the CDMP is approved.</p> <p>Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO).</p> | | | | | |
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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u> X </u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A028 | | 2. TITLE OF DATA ITEM Contactor Requirements Traceability Matrix (CRTM) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) N/A | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY See BLK 16 | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | a. ADDRESSEE | DRAFT | b. COPIES FINAL Reg Repro | |
| 16. REMARKS: Contractor format compatible with Government requirements management system. Block 4: The CRTM shall include: <ol style="list-style-type: none"> 1. Traceability of requirements from the Government Requirements Traceability Matrix to the contractor delivered functionality as specified in the SSS, SSDD, and other source documents (e.g., ICD) 2. For each requirement: <ol style="list-style-type: none"> a. A unique and un-modifiable identifier for the requirement. b. The architectural element (Configuration Item or interface) to which the requirement belongs. c. The document and paragraph number of the requirement. d. The derivation or reference to the design record that documents the derivation, for the requirement from its parent (for those instances where the requirement has a parent within the database). e. Other attributes as identified by the design process. 3. The parent-child and child-parent links that provide the rational and unambiguous traceability for all requirements. 4. The parent-child and child-parent traceability through multiple levels of the design hierarchy to assess the impact of potential specification changes. Block 5: PWS Paragraphs: 5.2.4.d.iv, 5.2.4.f, 5.2.5.a.vii, 5.2.5.e, 5.2.5.g, 5.5.1.b.iii, 5.5.3.c, 5.5.3.d, 5.5.3.f.i, 5.6.3.g, 5.8.1.1.b | | | | See BLK 16 | | | |

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| <p>Block 8: The Government shall have fifteen (15) days after receiving each CRTM for review and comment.</p> <p>Block 12: Submit Initial CRTM fifteen (15) days prior to the Initial Design Review/ Final Requirements Review (IDR/FRR).</p> <p>Block 10: Submit updated CRTM as follows:</p> <ol style="list-style-type: none"> 1. Final Design Review/Test Readiness Review (FDR/TRR) - Submit updated CRTM fifteen (15) days prior to the FDR/TRR 2. Developmental Test and Development (DT&E) - Submit updated CRTM fifteen (15) days prior to the start of DT&E 3. Operational Test and Evaluation - Submit final CRTM fifteen (15) days prior to the start of OT&E 4. Baseline Changes – Submit updated CRTM thirty (30) days after each approved Major, Minor, Maintenance, and Patch baseline changes are implemented. <p>Block 13: Revise and resubmit each updated CRTM for Government approval seven (7) days after receiving comments. Subsequent submissions are as required until the CRTM is approved.</p> <p>Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO).</p> | | | | |
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| <p>access security will be implemented and how data transmission security will be implemented for the interface being defined. Include a description of the transmission medium to be used and whether it is a public or a secure line. Include a brief description of how data will be protected during transmission and how data integrity will be guaranteed.</p> <p>2. Add new paragraph 3.2.f “Detailed Interface Definition” and include the following:</p> <ul style="list-style-type: none"> a. Application Program Interface overview – functional overview of API hierarchy, classes, routines, methods and general definitions and guidance on use of the interface. b. Methods, routines, calls - the complete definition, characteristics, and attributes of the command. c. Interface Processing Time Requirements – frequency, performance or response time requirements defining how quickly incoming traffic or data requests must be processed by the interfacing system to meet the requirements of the interface. d. Message Format (or Record Layout) and Required Protocols - the explicit definitions of and the conditions under which each message is to be sent including the content and format of every message, file, or other data element assembly (objects, records, arrays, reports, etc.) e. Communication Methods - all aspects of the presentation, session, network, and data layers of the communication stack to which both systems participating in the interface must conform. Document the specifications for hand-shaking protocols between the two systems. f. Security Requirements - the security features that are required to be implemented within the message or file structure or in the communications processes. Specify the security of the communication methods used (Include safety/security/privacy considerations, such as encryption, user authentication, compartmentalization, and auditing). g. Interface Controls - the sequence numbering, legality checks, error control, and recovery procedures that will be used to manage the interface. Address the format(s) for error reports exchanged between the systems and their disposition <p>3. Add new paragraph 3.2.g: “Compatible Medical Devices” Provide list of medical devices compatible with the EHR System that includes the following:</p> <ul style="list-style-type: none"> a. Machine Name b. Manufacturer c. Model <p>Block 5: PWS Paragraphs: 5.2.5.b, 5.2.5.d.viii, 5.2.6.1.a, 5.2.6.1.b, 5.7.5.a.v</p> | | | | |
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| <p>Block 8: The Government shall have fifteen (15) days after receiving each ICD for review and comment.</p> <p>Block 12: Initial ICD: Submit Initial ICD fifteen (15) days prior to Final Design Review/Test Readiness Review (FDR/TRR).</p> <p>Block 10: Submit updated ICDs as follows:</p> <ol style="list-style-type: none"> 1. Developmental Test and Evaluation (DT&E) - Submit updated ICD fifteen (15) days prior to the beginning of DT&E 2. Operational Test and Evaluation (OT&E) - Submit updated ICD fifteen (15) days prior to the beginning of OT&E 3. Baseline Changes – Submit updated ICD thirty (30) days after each approved Major, Minor, Maintenance, and Patch baseline changes are implemented. <p>Block 13: Revise and resubmit the updated ICD for Government approval seven (7) days after receiving comments. Subsequent submissions are as required until the ICD is approved.</p> <p>Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO).</p> | | | | | | | |
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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | | | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u> X </u> | | | | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM)) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | | | | |
| 1. DATA ITEM NO A030 | | 2. TITLE OF DATA ITEM EHR Technical Baseline Documents | | | 3. SUBTITLE | | | | | | |
| 4. AUTHORITY (Data Acquisition Document No.) See BLK 16 | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | | | | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | | | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | | | | | |
| 16. REMARKS: Block 4: 1. DI-CMAN-81121 2. DI-IPSC-81434A 3. DI-IPSC-81431A The DoDAF views annotated within parentheses indicate the Integrated Architecture Products that also need to be updated in support of the baseline elements. The Allocated Baseline shall include: 1. System Interface descriptions (SV-1) 2. System Resource Flow specifications (SV-2, SV-6) 3. System Functionality and Data flow Description (SV-4) 4. Service to system mappings (SvcV-3) 5. Operational Activity to System Function Mapping (SV-5a) 6. System Event Trace Matrix (SV-10c) The Product Baseline shall include: 1. Network architecture diagrams (both logical and physical). 2. Hardware description for all devices on the network and all devices used to support the network. 3. Software version(s). 4. System configuration data (Configuration Item Attachment) 5. All systems and the currently scheduled contractor end of support dates in order to maintain Off-the-Shelf (OTS) capabilities. 6. Network diagrams showing the placement of all network intrusion sensors (SV-1, SV-2, SV-4) 7. Interface control diagrams to show interface specifications, | | | | | See BLK 16 | DRAFT | FINAL | | | | |
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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | |
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| Public reporting burden for this collection of information is estimated to average 110 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either of these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E. | | | | | | | |
| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A031 | | 2. TITLE OF DATA ITEM Database Design Description (DBDD) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-IPSC-81437A | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | |
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| 16. REMARKS: Block 5: PWS Paragraphs: 5.2.5.d.vii, 5.7.5.a.vi Block 8: The Government shall have fifteen (15) days after receiving each DBDD for review and comment. Blocks 12: Submit draft DBDD fifteen (15) days prior to the Initial Design Review. Block 10: Submit updated DBDDs as follows: 1. Final Design Review/Test Readiness Review (FDR/TRR) - Submit updated DBDD fifteen (15) days prior to the FDR/TRR. 2. Baseline Changes – Submit updated DBDD thirty (30) days after each approved Major, Minor, Maintenance, and Patch baseline changes are implemented. Block 13: Revise and resubmit each updated DBDD for Government approval seven (7) days after receiving comments. Subsequent submissions are as required until the DBDD is approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | See BLK 16 | | |
| | | | | | 15. TOTAL | | |
| G. PREPARED BY DHMSM PMO | | | H. DATE | | I. APPROVED BY | | J. DATE |

| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved OMB No. 0704-0188</i> | | |
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| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A032 | | 2. TITLE OF DATA ITEM Software Development Plan (SDP) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-IPSC-81427 | | | 5. CONTRACT REFERENCE See BLK 16 | | 6. REQUIRING OFFICE DHMSM PMO | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ONE/R | | 12. DATE OF FIRST SUBMISSION 30 DAC | | 14. DISTRIBUTION | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE See BLK 16 | b. COPIES | |
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| 16. REMARKS: Block 5: PWS Paragraphs: 5.2.5.f.iv, 5.2.6.4.b, 5.5.1.b.viii, 5.5.2.c, 5.8.1.1.a Block 8: The Government shall have fifteen (15) days after receiving the SDP for review and comment. Block 10: Revise and resubmit updated SDP to the Government for approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the SDP is approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | 15. TOTAL | | |
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| G. PREPARED BY DHMSM PMO | | | H. DATE | I. APPROVED BY | | | |

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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A033 | | 2. TITLE OF DATA ITEM Security Authorization Package | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) See BLK 16 | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ DD | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE See BLK 16 | b. COPIES | |
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| 16. REMARKS: Block 4: 1. DoD Instruction 8510.01 The Security Authorization Package shall include: 1. System Assessment Report a. Security vulnerabilities as identified during the security vulnerability assessments (to include both automated and manual) i. Plan of Action and Milestones (POA&M) - includes tasks that need to be accomplished to remediate identified vulnerabilities and minimal data items (see CDRL A038 Technical Report Attachment 1) b. Security review of technical, management and the operational controls c. System assessment of functional validation testing. 2. System Security Plan a. Documentation of the controls as either inherited or shared with the hosting facility or service provider b. Description of actual and planned IA control set implementation c. System architecture description to include diagrams, supporting text and tables i. System accreditation boundary diagram ii. Interconnection/interface descriptions iii. Ports, protocols and services matrix iv. Software baseline v. Hardware baseline or hardware requirements (Physical and Virtual) d. Continuous monitoring plan (inherited or system) | | | | | | | |

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| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A034 | | 2. TITLE OF DATA ITEM System Engineering Management Plan (SEMP) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-MGMT-81024 | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ONE/R | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | |
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| 16. REMARKS: Contractor format is acceptable. Block 5: PWS Paragraphs: 5.2.6.a, 5.6.2.b, 5.2.6.4.b, 5.2.6.4.b.v, 5.2.9.a, 5.5.1.a.i, 5.5.2.b, 5.5.2.d, 5.5.2.e, 5.5.3.a, 5.8.d, 5.8.1.1.a Block 8: The Government shall have fifteen (15) days after receiving the SEMP to review and comment. Block 12: Submit Draft SEMP thirty (30) DAC. Block 13: Revise and resubmit the updated SEMP for Government approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the SEMP is approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | 15. TOTAL | | |
| G. PREPARED BY DHMSM PMO | | | H. DA | I. APPROVED BY | | J. DATE | |

| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A035 | | 2. TITLE OF DATA ITEM Contractor Configuration Management Implementation Plan (CCMIP) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) See BLK 16 | | | 5. CONTRACT REFERENCE See BLK 16 | | 6. REQUIRING OFFICE DHMSM PMO | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ONE/R | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | |
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| 16. REMARKS: | | | | | See BLK 16 | | |
| Block 4: | | | | | | | |
| 1. MIL-HDBK-61A (SE), Military Handbook: Configuration Management Guidance, 7 February 2001, Appendix A, Activity Guide: Table A-3. | | | | | | | |
| 2. DI-CMAN-80858B | | | | | | | |
| The CCMIP shall include the processes to accomplish the following CM functions and tasks: | | | | | | | |
| 1. Configuration identification | | | | | | | |
| 2. Configuration control | | | | | | | |
| 3. Configuration status accounting | | | | | | | |
| 4. Configuration audits | | | | | | | |
| Block 5: PWS Paragraphs: 5.6.2.b, 5.5.1.a.ii, 5.5.3.b, 5.5.4.a, 5.5.4.b, 5.5.5.a, 5.8.5.3.h.v | | | | | | | |
| Block 8: The Government shall have fifteen (15) days after receipt of the CCMIP for review and comment. | | | | | | | |
| Block 12: Submit draft CCMIP thirty (30) DAC. | | | | | | | |
| Block 13: Revise and resubmit the updated CCMIP for Government approval fifteen (15) days of receiving comments. Subsequent submissions are as required until the CCMIP is approved. | | | | | | | |
| Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program | | | | | | | |

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| Management Office (DHMSM PMO). | | | | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> ___ | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A036 | | 2. TITLE OF DATA ITEM EHR System Installation Guide | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-ISPC-81428A | | | 5. CONTRACT REFERENCE See BLK 16 | | 6. REQUIRING OFFICE DHMSM PMO | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | | 12. DATE OF FIRST SUBMISSION 60 DAC | | 14. DISTRIBUTION | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | |
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| 16. REMARKS: Block 5: PWS Paragraphs: 5.2.2.c.i, 5.2.7.2.a, 5.7.5.a.viii Block 8: The Government shall have fifteen (15) days after receipt of the EHR Installation Guide for review and comment. Block 10: Submit updated EHR System Installation Guide as follows: 1. Baseline Changes – Submit updated EHR System Installation Guide thirty (30) days after approved Major, Minor, Maintenance, and Patch baseline changes are implemented. 2. Submit all other updated EHR System Installation Guides thirty (30) days after requiring event is identified. Block 13: Revise and resubmit the updated EHR System Installation Guide for Government approval fifteen (15) days of receiving comments. Subsequent submissions are as required until the EHR System Installation Guide is approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | See BLK 16 | | |
| | | | | | 15. TOTAL | | |
| G. PREPARED BY DHMSM PMO | | | H. DATE | | I. APPROVED BY | | J. DATE |

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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u> X </u> | | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | | |
| 1. DATA ITEM NO A037 | | 2. TITLE OF DATA ITEM Disaster Recovery Plan (DRP) | | | 3. SUBTITLE | | | | |
| 4. AUTHORITY (Data Acquisition Document No.) N/A | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ANNLY | | 12. DATE OF FIRST SUBMISSION 90 DAC | | 14. DISTRIBUTION | | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | | | |
| 16. REMARKS: Contractor format is acceptable. The Disaster Recovery Plan shall include: 1. Results of assessments performed to support IT Service Continuity Plans, priority for recovery, and recovery time lines to support IT Service Continuity. 2. Identification of strengths to be maintained and built upon. 3. Identification of potential areas for further improvement. 4. Recommendations for follow-up actions. 5. Schedule for annual paper walkthroughs and live tests. 6. Detailed description of recovery strategies. 7. Detailed recovery plan. 8. Verification criteria and procedures to assess the effectiveness of recovery. Block 5: PWS Paragraphs: 5.2.8.b, 5.2.8.g, 5.2.8.h Block 8: The Government shall have fifteen (15) days after receiving the Disaster Recovery Plan for review and comment. Block 13: Revise and resubmit the updated Disaster Recovery Plan for Government approval within fifteen (15) days of receiving comments. Subsequent submissions are as required until the Disaster Recovery Plan is approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program | | | | | See BLK 16 | DRAFT | FINAL | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | |
| 1. DATA ITEM NO A038 | | 2. TITLE OF DATA ITEM Technical Report | | | 3. SUBTITLE | | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-MISC-80508B | | | 5. CONTRACT REFERENCE See BLK 16 | | 6. REQUIRING OFFICE DHMSM PMO | | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | | |
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| 16. REMARKS: | | | | | See BLK 16 | | | |
| Block 4: The following tailoring of DI-MISC-80508B applies: | | | | | | | | |
| 1. Paragraph 3.c.3 shall be expanded to include: | | | | | | | | |
| a. Recommendations for improvement, problem resolution, correcting weaknesses or deficiencies, and alternatives where applicable | | | | | | | | |
| b. A Plan of Actions and Milestones (POA&M) to address "a" above to include: | | | | | | | | |
| i. Tasks to be accomplished with recommendation for completion | | | | | | | | |
| ii. Resources to accomplish tasks | | | | | | | | |
| iii. Milestones in completing tasks | | | | | | | | |
| c. IT Security POA&M shall be submitted in Microsoft Excel and follow the format provided in Attachment 1 of this CDRL | | | | | | | | |
| d. Provide cybersecurity raw scan data as part of all Cybersecurity Vulnerability Assessment (CVA) Technical Reports. | | | | | | | | |
| Block 5: PWS Paragraphs: 5.2.9.b.iii, 5.4.d, 5.5.2.1.g, 5.5.7.2.c, 5.5.7.3.a, 5.5.7.4.c, 5.5.7.6.c, 5.5.7.7.d, 5.5.7.7.f.ii, 5.8.5.3.g | | | | | | | | |
| Block 8: The Government shall have fifteen (15) days after receiving each Technical Report for review and comment. | | | | | | | | |
| Block 10: Submit Cybersecurity Technical Reports monthly. | | | | | | | | |
| Block 12: Submit all Technical Reports fifteen (15) days after completion of the scans. | | | | | | | | |

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| <p>Block 13: Revise and resubmit the updated Technical Reports for Government approval fifteen (15) days after receiving comments.</p> <p>Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO).</p> | | | | | |
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CDRL A038 – Technical Report Attachment 1

IT Security Plan of Action and Milestone (POA&M)

Date Initiated: 25-May-2012 *Enter the date that the DAA's signature is obtained*

IS Type: AIS Application *Enter the IS Type*

OMB Project ID: Not Applicable

Date Last Updated: 25-May-2012 *TAD automatically populates this field with the last date the POA&M was updated*

PoC Name: John Smith *Enter PO/Contractor's POC Name*

Enter the OMB Project ID if applicable

Component Name: Defense Health Agency (DHA) *Enter the Agency Name*

PoC Phone: 703.835.9000 *Enter PO/Contractor POC's Telephone Number*

System/Project Name: Training System *Enter the name of the IS/application*

PoC E-Mail: John.Smith.ctr@tma.osd.mil *Enter PO/Contractor POC's E-mail*

Security Costs: Not Applicable

DoD IT Registration No.: Not Applicable *Enter the DITPR # if applicable*

Enter security costs if applicable

| Weakness | Severity Category | IA Control & Impact Code | POC | Resources Required | Scheduled Completion Date | Milestones with Completion Dates | Milestones Changes | Source Identifying Weakness | Status | Comments |
|---|---|--|---|--|---|--|---|---|--|--|
| Open POA&M Items | | | | | | | | | | |
| Automatically populated by TAD based on the V-key/Tool check # | Code assigned to a system IA security weakness. (i.e., CAT I, CAT II, or CAT III) | Impact code indicates the consequence of the non-compliance IA control. Expressed as High / Medium / Low | Identify the position or role responsible for resolving the weakness. | Estimate the funding or manpower resources required to resolve the security weakness. Enter "N/A" for a CAT III weakness accepted by the DAA | Date scheduled for resolving the weakness. The initial date must not be changed. Insert the actual completion date in the "Status" column. Field required | A milestone identifies specific requirements to correct the identified weakness. Milestones and completion dates are not to be altered. Enter "N/A" for a CAT III weakness accepted by the DAA. All milestones completion dates should be no more than one month apart maximum. Field required | Includes changes to the completion dates and a reason for the change. Enter "N/A" for CAT III weaknesses accepted by the DAA. | Identify the source of the security weakness. (e.g., Program Review) Field required | Enter "Ongoing," "Completed," "Pending DAA Risk Acceptance," or "Risk Accepted by DAA." Enter "Completed" if the weakness has been resolved. Enter the completion date for items marked "Completed" or "Risk Accepted by DAA." Enter "N/A" for IA Controls deemed not applicable. Field required | For IA Controls that are "Inherited" enter the originating IS. For "N/A" IA Controls, provide a reason why the IA Control is not applicable. Enter mitigation strategies using the following guidance: - Be clear, direct, and to the point - Address mitigations related directly to the weakness - Describe how the risk of exploiting the weakness is reduced - Document a brief justification - Only include Defense-in-Depth (DiD) Strategies that are directly applicable to the weakness (i.e., When writing a mitigation strategy for a lack of database partitioning, there is no need to mention eight foot parameter fences or roaming guards.) - Well known acronym spell-out is not required (i.e., DoD, IP, STIG, MHS, C&A, DIACAP, TMA) Tool Name, Tool Check Number, and Original Severity Code will automatically be populated by TAD |
| 3 System halts once an event log has reached its maximum size. 616923 | CAT III | ECRR-1 Medium | testing | N/A | N/A | N/A | Extension Date - N/A Details: N/A | N/A | Risk Accepted by DAA 18-April-2012 | Windows XP Security Checklist - V0001091 Original Severity Code: CAT III |
| Others Any finding that does not have a POA&M status identified in TAD will be listed in the "Others" section. (e.g., "Site Will Fix" or "False Positive") | | | | | | | | | | |
| 4 ACLs for event logs do not conform to minimum requirements. 616922 | CAT II | ECTP-1 Medium | testing | N/A | N/A | N/A | Extension Date - N/A Details: N/A | N/A | Not Entered | Windows XP Security Checklist- V0001077 Original Severity Code: CAT II |

POA&M Legend

Risk Accepted by DAA (status column) - No milestones are associated with the weakness, the DAA accepts the risk.

Ongoing (status column) - There are milestones associated with the weakness that the DAA expects to be completed in accordance with a completion date.

Completed (status column) - The POA&M POC considers the milestones associated with the weakness are completed.

Open POA&M Items - Contains all POA&M items that have NOT been validated as completed by the CS Team.

Closed POA&M Items - Contains all POA&M items that have been validated by the CS Team as completed (The POA&M POC can update the status to 'Completed' but the weakness will NOT be in the Closed POA&M Items section until the CS Team validates it as complete).

Green Highlighted row represents findings that have an Original Severity Code (Tool) of "CAT III" and therefore, does NOT require a Mitigation Strategy.

ADD APPROPRIATE CLASSIFICATION MARKING

| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | | | |
|---|------------------------------------|---|--|--|--------------------------------------|---|------------------|------------------------------|
| Public reporting burden for this collection of information is estimated to average 110 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either of these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E. | | | | | | | | |
| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | |
| 1. DATA ITEM NO A039 | | 2. TITLE OF DATA ITEM DoD 8570.01 Compliance Report | | | 3. SUBTITLE | | | |
| 4. AUTHORITY (Data Acquisition Document No.) DoD Instruction 8570.01-M | | | 5. CONTRACT REFERENCE PWS Paragraph: 5.5.7.d | | | 6. REQUIRING OFFICE DHMSM PMO | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED | 10. FREQUENCY MTHLY | 12. DATE OF FIRST SUBMISSION 15 DAC | | | 14. DISTRIBUTION | | |
| 8. APP CODE A | D | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | | a. ADDRESSEE See BLK 16 | b. COPIES | |
| | | | | | | | DRAFT | FINAL Reg Repro |
| <p>Block 4: The DoD 8570.01 Compliance Report shall include:</p> <ol style="list-style-type: none"> 1. Contractor name, functional responsibility for each DHMSM contractor personnel supporting and charging to the project 2. Contractor personnel category role defined (e.g., technical or management) 3. Contractor level (e.g., computing environment, network environment, or enclave) 4. Information assurance (IA)/cybersecurity training, certification, certification maintenance, and continuing education or sustainment training required for the DHMSM contractor information assurance/cybersecurity functional responsibilities 5. A matrix that documents and tracks certification status of DHMSM contractor IA personnel, updated as certifications change or expire and personnel are added or removed 6. A matrix that documents and tracks IA training for all DHMSM contractor personnel <p>Block 8: The Government shall have fifteen (15) days after receiving the DoD 8570.01 Compliance Report for review and comment.</p> <p>Block 13: Revise and resubmit the updated DoD 8570.01 Compliance Report to the Government for approval seven (7) days after receiving comments.</p> <p>Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO).</p> | | | | | | | | |
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| G. PREPARED BY DHMSM PMO | H. DATE | I. APPROVED BY | | J. DATE | |

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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u> X </u> | | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | | |
| 1. DATA ITEM NO A040 | | 2. TITLE OF DATA ITEM Test Report | | | 3. SUBTITLE | | | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-NDTI-80809B | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | | |
| 8. APP CODE | | 11. AS OF DATE N/A | | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | | |
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| 16. REMARKS: | | | | | | | | | |
| Block 4: The following tailoring of DI-NDITI-8089B applies: | | | | | | | | | |
| 1. Paragraph 1.2.4.d include: | | | | | | | | | |
| a. Identification of the corresponding Test Plan for each Test Report | | | | | | | | | |
| b. A mapping of requirements to test completed, results, and conclusions for each test | | | | | | | | | |
| 2. For Contractor Integration Test (CIT) ONLY: Expand Test Report to include: | | | | | | | | | |
| a. Test completed for specific system criteria | | | | | | | | | |
| b. Test results, findings, and conclusions | | | | | | | | | |
| c. Test limitations, gaps, and impacts | | | | | | | | | |
| d. Identified risks and mitigations | | | | | | | | | |
| e. Readiness to proceed with Government Developmental Test and Evaluation (DT&E) | | | | | | | | | |
| Block 5: PWS Paragraphs: 5.6.c, 5.6.e, 5.6.3.b, 5.6.3.j, 5.6.3.k, 5.8.5.3.h.iv | | | | | | | | | |
| Blocks 12: Submit each Test Report seven (7) days after the completion of each test event. | | | | | | | | | |
| Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | | | | | |
| | | | | | | 15. TOTAL | | | |
| G. PREPARED BY DHMSM PMO | | | H. DATE | | I. APPROVED BY | | J. DATE | | |

| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | C. CATEGORY: TDP ___ TM ___ OTHER <input checked="" type="checkbox"/> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A041 | 2. TITLE OF DATA ITEM Site Visit Report | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) N/A | | 5. CONTRACT REFERENCE See BLK 16 | | 6. REQUIRING OFFICE DHMSM PMO | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | 12. DATE OF FIRST SUBMISSION See BLK 16 | 14. DISTRIBUTION | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | a. ADDRESSEE | b. COPIES | |
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| 16. REMARKS: Block 4: For each Wave, the Site Visit Report shall include: 1. Overview a. Identify sites visited b. Describe methodology followed in execution of site visit c. Provide list of site POCs 2. Installation Requirements (for each site) a. Describe the "As-Is" application, network and infrastructure architecture, and performance tuning considerations as it applies to deploying the EHR System and meeting the EHR System requirements as defined in the Government Requirements Traceability Matrix. b. Describe site specific training infrastructure (e.g., training rooms, projectors, workstation, etc.) and site training team (e.g., trainers, clinical champions, super users) c. Provide annotated facility drawings to include items required to deploy, test and maintain the EHR System (e.g., HVAC, electrical system and power panels, fire detection and suppression systems, Uninterruptible Power Supplies, etc.) i. Annotate items that are physically located at the site and need to be reserved/dedicated for the EHR System ii. Annotate items that are needed at the site but are not present | | | | See BLK 16 | | |
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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u> X </u> | | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | | |
| 1. DATA ITEM NO A042 | | 2. TITLE OF DATA ITEM Role Assignment Identification Document | | | 3. SUBTITLE "As-Is" to "To-Be" State Mapping | | | | |
| 4. AUTHORITY (Data Acquisition Document No.) N/A | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | | | |
| 7. DD250 REQ XX | | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | | 12. DATE OF FIRST SUBMISSION 60 DAC | | 14. DISTRIBUTION | | |
| 8. APP CODE A | | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | | |
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| 16. REMARKS: Contractor format is acceptable. Block 4: The Role Assignment Identification Document shall include: 1. The "As-Is" to "To-Be" state mapping. a. Provide a "Description of Skill Types" with corresponding "Occupation Descriptions" b. Provide the "Total FTE" per "Occupation Description" Block 5: PWS Paragraphs: 5.3.1.d, 5.8.5.2.j Block 8: The Government shall have fifteen (15) days after receiving the Role Assignment Identification Document for review and comment. Block 13: Revise and resubmit the updated Role Assignment Identification Documentation for Government approval within fifteen (15) days of receiving comments. Subsequent submissions are as required until the Role Assignment Identification Document is approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | | See BLK 16 | | | |
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| G. PREPARED BY DHMSM PMO | | | H. DATE | | I. APPROVED BY | | J. DATE | | |

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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u> X </u> | | | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | | | |
| 1. DATA ITEM NO A043 | | 2. TITLE OF DATA ITEM EHR System Gold Disk | | | 3. SUBTITLE | | | | | |
| 4. AUTHORITY (Data Acquisition Document No.) N/A | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | | | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | | | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | | | | |
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| 16. REMARKS: Block 4: <ol style="list-style-type: none"> 1. The EHR System Gold Disk product is the final tested product following OT&E Phase 2 Testing of Segment 2. 2. The EHR System Gold Disk shall be delivered via physical media (e.g., CD or DVD) and be configurable to support the Roles 1, 2, 3, and En-Route Care. 3. The EHR System Gold Disk shall include: <ol style="list-style-type: none"> a. Installation tools necessary to install the configurations for the various Roles of Care by an end user b. All data (e.g., end user guides, troubleshooting guides, user's manuals, installation guides, training materials, and release notes) and computer software necessary to install, operate, and maintain the EHR System Block 5: PWS Paragraphs: 5.7.5.a, 5.8.5.3.h.ii Block 8: The Government shall have fifteen (15) days after receiving the EHR System Gold Disk for review and comment. Block 10: Submit updated EHR System Gold Disk thirty (30) days after each approved Major, Minor, Maintenance, and Patch baseline change is implemented. Block 12: Submit the EHR System Gold Disk thirty (30) days after successful completion of OT&E Phase 2 testing for Segment 2. Block 13: Revise and resubmit the updated EHR System Gold Disk to the Government for approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the EHR | | | | | See BLK 16 | | | | | |

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| System Gold Disk is approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | |
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| | | 15. TOTAL | | | |
| G. PREPARED BY DHMSM PMO | H. DATE | I. APPROVED BY | | J. DATE | |

| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved OMB No. 0704-0188</i> | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A044 | | 2. TITLE OF DATA ITEM Engineering Change Request (ECR) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) See BLK 16 | | | 5. CONTRACT REFERENCE See BLK 16 | | 6. REQUIRING OFFICE DHMSM PMO | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | |
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| 16. REMARKS: Block 4: DI-CMAN-80639C MIL-HDBK-61A Block 5: PWS Paragraph: 5.5.4.1.a, 5.8.3.a.i Block 8: The Government shall have twenty (20) days after receiving an ECR for review and comment. If the Government determines that an ECR is not in its interests, it will so notify the contractor. Blocks 10 and 12: Submit ECR twenty (20) days after the need for an engineering change is identified. Block 13: Revise and resubmit the updated ECR for Government approval, if the Government determines such ECR is in its interest, within ten (10) days after receiving comments. Subsequent submissions are as required until the ECR is approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless another method is required by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | See BLK 16 | | |
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| G. PREPARED BY DHMSM PMO | | | H. DATE | I. APPROVED BY | | J. DATE | |

| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved OMB No. 0704-0188</i> | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | |
| 1. DATA ITEM NO A045 | | 2. TITLE OF DATA ITEM Version Description Document (VDD) | | | 3. SUBTITLE | | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-IPSC-81442A | | | 5. CONTRACT REFERENCE See BLK 16 | | 6. REQUIRING OFFICE DHMSM PMO | | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | | |
| | | | | DRAFT | | FINAL Reg Repro | | |
| 16. REMARKS: Contractor format is accepted. Block 5: PWS Paragraphs: 5.5.1.b.ix, 5.7.5.a.ix Block 8: The Government shall have fifteen (15) days after receiving the VDD for review and comment. Block 12: Submit draft VDD sixty (60) DAC. Block 13: Revise and resubmit the updated VDD to the Government for approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the VDD is approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | See BLK 16 | | | |
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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | | | | | |
|--|------------------------------------|---|--|--|--|---|-------|--|--|-----|-------|
| Public reporting burden for this collection of information is estimated to average 110 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either of these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E. | | | | | | | | | | | |
| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | | | | |
| 1. DATA ITEM NO A046 | | 2. TITLE OF DATA ITEM Cybersecurity Vulnerability Management Plan | | | 3. SUBTITLE | | | | | | |
| 4. AUTHORITY (Data Acquisition Document No.) N/A | | | 5. CONTRACT REFERENCE PWS Paragraph: 5.5.7.3.b | | | 6. REQUIRING OFFICE DHMSM PMO | | | | | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED | 10. FREQUENCY ASREQ | | 12. DATE OF FIRST SUBMISSION 30 DAC | | 14. DISTRIBUTION | | | | | |
| 8. APP CODE A | D | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION N/A | | a. ADDRESSEE | b. COPIES | | | | | |
| 16. REMARKS: Contractor format is acceptable. Block 4: The Cybersecurity Vulnerability Management Plan shall include: 1. A narrative description of the contractor's processes, approach, plans, and methodology to apply to all Information Assurance Vulnerabilities (IAVs) published by the DoD and United States Cyber Command (USCC) (Available from the following sites: http://iase.disa.mil/ and https://patches.csd.disa.mil/) 2. The Cybersecurity Vulnerability assessment process (applicability, threats, risks) 3. The Cybersecurity Vulnerability tracking process 4. The Cybersecurity Vulnerability reporting process 5. A detailed plan for Cybersecurity Vulnerability implementation 6. The management of systems that are not compliant with published cybersecurity vulnerabilities Block 8: The Government shall have fifteen (15) days after receiving the Cybersecurity Vulnerability Management Plan for review and comment. Block 13: Revise and resubmit the updated Cybersecurity Vulnerability Management Plan for Government approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the Cybersecurity Vulnerability Management Plan is approved. | | | | | See BLK 16 | DRAFT | FINAL | | | | |
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| Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | |
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| G. PREPARED BY DHMSM PMO | H. DATE | I. APPROVED BY | | J. DATE | |

| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | | | |
| 1. DATA ITEM NO A047 | | 2. TITLE OF DATA ITEM Contractor Business Data Report (CBDR) | | | 3. SUBTITLE | | | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-FNCL-81765A | | | 5. CONTRACT REFERENCE PWS Paragraph: 5.1.5.1.d | | | 6. REQUIRING OFFICE DHMSM PMO | | | |
| 7. DD250 REQ NO | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ANNLY | | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | | |
| 8. APP CODE | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | a. ADDRESSEE | DRAFT | b. COPIES | | | |
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| 16. REMARKS Blocks 10, 12, and 13: Submit annually within sixty (60) days subsequent to the end of the contractor's fiscal year for the life of the contract. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO) and to the Defense Cost and Resource Center (DCARC) website at http://dcarc.cape.osd.mill . Electronic submission to the DCARC requires the contractor to register for a user account via the DCARC website and obtain an External Certification Authority (ECA) certificate from a third party vendor. Submissions must be in a DCARC approved Extensible Markup Language (XML). PDF format is not acceptable. | | | | | | See BLK 16 | | | |
| | | | | | | 15. TOTAL | | | |
| G. PREPARED BY DHMSM PMO | | | H. DATE | | I. APPROVED BY | | | J. DATE | |

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| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A048 | | 2. TITLE OF DATA ITEM System Safety Plan (SSP) | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-SAFT-81626 | | | 5. CONTRACT REFERENCE See BLK 16 | | | 6. REQUIRING OFFICE DHMSM PMO | |
| 7. DD250 REQ XX | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ONE/R | 12. DATE OF FIRST SUBMISSION See BLK 16 | | 14. DISTRIBUTION | | |
| 8. APP CODE A | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | | a. ADDRESSEE | b. COPIES | |
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| 16. REMARKS: Contractor format is acceptable. Block 5: PWS Paragraphs: 5.5.1.b.x, 5.5.8.b Block 8: The Government shall have fifteen (15) days after receiving the SSP to review and comment. Block 12: Submit Draft SSP thirty (30) DAC. Block 13: Revise and resubmit the updated SSP for Government approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the SSP is approved. Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO). | | | | | | | |
| | | | | | | 15. TOTAL | |
| G. PREPARED BY DHMSM PMO | | | H. DATE | | I. APPROVED BY | | J. DATE |

| CONTRACT DATA REQUIREMENTS LIST (1 Data Item) | | | | | <i>Form Approved</i> <i>OMB No. 0704-0188</i> | | |
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| A. CONTRACT LINE ITEM NO. TBD | | B. EXHIBIT A | | C. CATEGORY: TDP ___ TM ___ OTHER <u>X</u> | | | |
| D. SYSTEM/ITEM DoD Healthcare Management System Modernization (DHMSM) | | | E. CONTRACT/PR NO. N00039-15-D-0044 | | F. CONTRACTOR LEIDOS, INC. | | |
| 1. DATA ITEM NO A049 | | 2. TITLE OF DATA ITEM Contract Work Breakdown Structure (CWBS) and CWBS Dictionary | | | 3. SUBTITLE | | |
| 4. AUTHORITY (Data Acquisition Document No.) DI-MGMT-8133D | | | 5. CONTRACT REFERENCE See BLK 16 | | 6. REQUIRING OFFICE DHMSM PMO | | |
| 7. DD250 REQ NO | 9. DIST. STATEMENT REQUIRED D | 10. FREQUENCY ASREQ | 12. DATE OF FIRST SUBMISSION 60 DAC | 14. DISTRIBUTION | | | |
| 8. APP CODE | | 11. AS OF DATE N/A | 13. DATE OF SUBSEQUENT SUBMISSION See BLK 16 | a. ADDRESSEE | b. COPIES | | |
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| 16. REMARKS | | | | 15. TOTAL | | | |
| <p>Block 5: PWS Paragraphs: 5.1.5.a.iii, 5.1.8.a</p> <p>Block 8: The Government shall have fifteen (15) days after receiving the CWBS and CWBS Dictionary for review and comment.</p> <p>Block 13: Revise and resubmit the updated CWBS and CWBS Dictionary for Government approval fifteen (15) days after receiving comments. Subsequent submissions are as required until the CWBS and CWBS Dictionary is approved.</p> <p>Block 14: Electronically delivered-reproducible Microsoft Office format (unless otherwise approved by the Government) to the DoD Healthcare Management System Modernization Program Management Office (DHMSM PMO) and to the Defense Cost and Resource Center (DCARC) website at http://dcarc.cape.osd.mil. Electronic submission to the DCARC requires the contractor to register for a user account via the DCARC website and obtain an External Certification Authority (ECA) certificate from a third party vendor. Submissions must be in a DCARC approved Extensible Markup Language (XML). PDF format is not acceptable.</p> | | | | <p>See BLK 16</p> | | | |
| G. PREPARED BY DHMSM PMO | | | H. DATE | I. APPROVED BY | | J. DATE | |