



USAID
FROM THE AMERICAN PEOPLE

Closing Date: **January 13th 2010**
Closing Time: 12:00 PM (Noon) Eastern Standard Time

SUBJECT: RFTOP USAID/M/OAA/GH/OHA/10-0001 IQC TASK ORDER REQUEST
FOR OFFERS UNDER HEALTH POLICY INITIATIVE IQC

Dear IQC Contractors,

USAID is requesting offers for a three year Cost Reimbursement Plus Fixed Fee, Level of Effort (CPFF LOE) Task Order under the referenced IQC.

Please review REQUEST FOR TASK ORDER PROPOSAL (RFTOP) and INSTRUCTIONS TO OFFERORS for a list of submission requirements and instructions. Please submit the required information to: Michael Ashkouri no later than 12:00 PM (Noon) EST **January 13th 2010**. USAID will not accept requests for closing date extensions.

Mail/hand-carry proposals to: Michael Ashkouri, Esq.
United States Agency for International Development
Office of Acquisition and Assistance, RRB, 7.09-032
1300 Pennsylvania Avenue, NW
Washington, D.C 20523-7803

Electronic submission to: Michael Ashkouri, Esq.
mashkouri@usaid.gov

Offerors are permitted to submit **questions no later than 12:00 PM (Noon) EST December 16th 2009**. All questions and USAID responses will be shared with all IQC contractors shortly thereafter. USAID reserves the right to summarize redundant and/or similar questions. Feel free to contact Michael Ashkouri, mashkouri@usaid.gov, (202) 712-1818, if you have any questions.

This RFTOP and letter do not obligate USAID to execute a Task Order, nor does it commit USAID to pay any cost incurred in the preparation and submission of the foregoing.

Sincerely,

/s/

Michael Ashkouri, Esq.
Contracting Officer
M/OAA/GH/OHA

**HEALTH POLICY INITIATIVE INDEFINITE QUANTITY CONTRACT
REQUEST FOR TASK ORDER PROPOSAL (RFTOP)**

1	RFTOP Number	USAID/M/OAA/GH/OHA/10-0001
2	Date RFTOP Issued	December 9th 2009
3	Issuing Office	USAID/Washington OAA/GH/OHA
4	Contracting Officer	Michael Ashkouri (202) 712-1818 mashkouri@usaid.gov
5	A. Proposals to be Submitted to: B. Instructions are included in the RFTOP.	Michael Ashkouri (202) 712-1818 mashkouri@usaid.gov Michael Ashkouri USAID/M/OAA/GH/OHA 1300 Pennsylvania Ave, RRB 7.09-032 Washington, D.C. 20523
6	Questions	Questions may be submitted to Michael Ashkouri via email only no later than 12:00 PM (Noon) EST December 16th 2009 . Should USAID/M/OAA/GH/OHA choose to respond, all questions and all responses will be shared with all IQC holders.
7	Proposals Due	No later than 12:00 PM (Noon) EST January 13th 2010

DATA FOR DECISION MAKING FOR HIV/AIDS PROGRAMS

Request For Task Order Proposals

I. PURPOSE

The United States Agency for International Development/Washington through the Global Health Bureau, Office of HIV/AIDS (GH/OHA) is issuing a Request for Task Order Proposal (RFTOP) under the Health Policy Initiative Indefinite Quantity Contract **Data for Decision-Making for HIV/AIDS Programs**. Subject to the availability of funds, USAID/Washington intends to award a Task Order anticipating an 80% field support/20% core breakdown over a three year period (o/a February, 2010 – February, 2013). The Task Order will require the contractor to carry out activities globally with USAID Mission approval in countries within the scope of work mandate. USAID/Washington reserves the right to fund any or none of the proposals submitted. USAID/Washington will oversee the implementation and performance monitoring of anticipated Task Order (TO).

Through this award, GH/OHA aims to support the United States government President's Emergency Plan for AIDS Relief (PEPFAR) program objective to increase use of improved, effective and sustainable responses to reduce HIV transmission and to mitigate the impact of the HIV/AIDS pandemic through provision of timely and accurate data for evidence-based decision-making.

Under the U.S. Foreign Assistance's framework of Investing in People, this TO will work to reduce the transmission and impact of HIV/AIDS through support for prevention, care and treatment programs¹. Specifically, this TO will work to strengthen host country strategic information capacity and USG information systems and their development and use of tools and models to collect, analyze and disseminate a variety of information related to the program element (specifically Program Area 1.1.14). This may include but not be limited to data for decision-making including costing studies for HIV/AIDS programs, model development for new information needs and regional training to develop economic analysis expertise and capacity.

It is anticipated that this TO will be a three (3) year cost reimbursement plus fixed fee level of effort contract, pending availability of funds. Once awarded, the TO will be managed out of the Strategic, Planning, Evaluation & Reporting (SPER) Division of OHA. Missions will access the technical services through the TO via field support processes and will be subject to guidance from the Office of Acquisition and Assistance (OAA).

II. BACKGROUND

The purpose of this TO is to help USAID exercise global leadership and/or provide field level programming in data use and decision-making for USAID Missions and international policy makers. The successful offeror will provide support worldwide to USAID (USAID/Washington and USAID/Missions) in its efforts to improve the enabling environment for data for decision-

¹ U.S. Foreign Assistance Framework: Investing in People: Health, Program Area 1.1 HIV/AIDS

making for better health, especially in the area of HIV/AIDS and as needed in family planning/reproductive health (FP) and maternal health (MH).

In 2008, Congress reauthorized the Global Leadership Act or “PEPFAR” which commits \$48 billion over 5 years to help developing nations treat 3 million persons with antiretroviral drugs, prevent 12 million new infections, and care for 12 million infected and affected persons including orphans and other vulnerable children. Through PEPFAR, the US Government has given particular emphasis to strengthening health systems for developing nations. Specifically, the Global Leadership Act calls for the USG to “carry out activities to strengthen HIV/AIDS, tuberculosis, and malaria health policies and health systems” and “to support the development of a sound policy environment in partner countries to increase the ability of such countries to maximize utilization of health care resources from donor countries; to increase national investments in health and education and maximize the effectiveness of such investments; to improve national HIV/AIDS, tuberculosis, and malaria strategies; to deliver evidence-based services in an effective and efficient manner; and to reduce barriers that prevent recipients of services from achieving maximum benefit from such services.” Additionally, the importance of improving public financial management is stressed under the new legislation, specifically, the Act calls for helping “partner countries to develop independent, sustainable HIV/AIDS programs.”

Through the PEPFAR initiative, the USG has made considerable progress. As of September 30, 2008, over 240,000 infants were born HIV-free to HIV positive mothers, some 2.1 million people have been supported on life-saving anti-retroviral (ARV) therapies and an estimated 3.28 million adult years of life have been saved through this treatment. Of note also is that over 10 million people affected by HIV/AIDS worldwide have been provided care and support through this initiative.

With this success comes a significant mortgage for the USG for continuing with the treatment and care needed to sustain people living with HIV (PLWH) in this disease state, which is moving from an acute to a chronic condition. The UNAIDS estimates that in 2007, 33.2 million people worldwide were living with HIV and there were 2.5 million new infections or on average 6,800 new infections occur each day. Notably, this is down from 8,500 infections a day in 2003. Still yet as of 2007, 2.1 million people were dying of AIDS each year, a number that overwhelms already over-burdened and fragile health systems. The HIV/AIDS epidemic significantly affects young people and those in their prime working ages and is destroying the economic and social fabric of many countries and reversing decades of development efforts.

With an eye towards sustainability, it is imperative to plan and program with efficiencies and cost-effective strategies. Current resources, both human and financial, are inadequate to deal with these issues. Policymakers are under pressure to stretch their budgets, already strained in many countries, to cover the full spectrum of needs of PLHIV ranging from ARV treatment for AIDS patients, to enhancing infrastructure at health facilities, to caring for growing numbers of AIDS orphans. Even with the significant growth in donor funding over the last decade, UNAIDS estimates that \$25 billion will be required for low and middle income countries to reach universal access to HIV prevention, treatment and care and support by 2010. Twice the amount that is currently available for the epidemic. Even with this significant rise in funding

from the donor community, the human resources and health systems to deliver commodities and services are often insufficient. Prioritization of cost-effective interventions for HIV services and programs is a source of information in great demand for decision-makers.

The USG is committed to ensuring country ownership, supporting sustainability and strengthening country coordination of donor resources. Through Partnership Frameworks, the USG and partner governments are developing five year strategies and implementation plans to combat HIV/AIDS in the country through technical assistance and support for service delivery, policy reform, and coordinated financial commitments. At the end of the five year time-frame, the expectation is that, in addition to results in the prevention, care and treatment of HIV/AIDS, country governments will be better positioned to assume primary responsibility for the national responses to HIV/AIDS in terms of management, strategic direction, performance monitoring, decision-making, coordination, and, where possible, financial support and service delivery.

Broader trends, such as health sector reform and decentralization, affect the ability of governments to deliver needed health services. As countries reform their health systems to become more responsive to the needs of their citizens, they have to develop capacity at lower levels to finance and provide services. Increasingly, governments and donors are recognizing that they may not be able to provide HIV services to everyone but must look to the NGO and commercial sectors to serve those who can pay for services, while making greater efforts to reach the poor and underserved with subsidized services. Making these decisions requires access to and interpretation of reliable and available data.

III. STATEMENT OF WORK

USAID/Global Health/Office of HIV/AIDS is soliciting for efficient and effective approaches to determine costs of health services and programs for USAID Missions, USG headquarters agencies and multi-lateral collaborations in an effort to provide data for decision-making processes. The successful offeror will present an innovative, results-based approach to achieving the Task Order's objectives. Offerors are encouraged to be specific in discussing their proposed approach to achieve concrete results against the stated objectives and how they will ensure that their efforts are efficient and outcome-based. While many of the objectives and tasks outlined below will require working through national government offices, offerors should articulate how their proposed approach will also work with local, regional and national structures to achieve measurable results at all three levels of policy. Offerors should discuss comprehensive and creative approaches to address the full spectrum of modeling and costing HIV services, commodities and service delivery within national health systems. Additionally, the offerors should articulate the needs for modeling software updates and regional training to build the cadre of professionals in developing countries while building in-country capacity for this expertise. Offerors should include efforts to collaborate and coordinate with ongoing host governments, the USG and multilateral partners' to maximize impact and minimize duplication. Finally, offerors should articulate a plan for knowledge management and dissemination of best practices and lessons learned.

An example of the above is that to date, there has been a great amount of success in development and application of data for decision-making under PEPFAR. The application of internationally

recognized models on costing have been applied in numerous countries, particularly in sub-Saharan Africa, and the information derived has allowed for better informed policy and program planning at the national, regional and district levels of health. One example is the internationally developed and applied Decision Maker's Policy and Program Planning Tool developed through the Health Policy Initiative IQC in response to a UNAIDS request. This tool has been applied in sub-Saharan African countries to inform policy makers on the costs and impact of male circumcision as part of their prevention strategy decision making. The tool has been so successful that currently there are five countries in line to utilize the tool and develop national male circumcision policies or strategies with the assistance of HPI and UNAIDS experts. In this example, USAID met the demand for information initiated by current research on low cost, effective prevention methodologies, and filled an information gap for host governments to quickly integrate this modality into their current public health programming.

GOALS, OBJECTIVES & TASKS

GOAL

The goal of this RFTOP is to equip and assist policy leaders and stakeholders with timely and accurate data for evidence-based decision-making for HIV/AIDS programs and services.

Objective One

Provide national, regional and local leaders and stakeholders with reliable costing data to be used to develop policy and provide for programmatic decision-making for health service delivery and system priorities. It is anticipated that Objective One will be approximately 30% of the total estimated cost of the task order.

Given that good data provides the basis for effective policy and advocacy work, the contractor will help policy stakeholders by providing costing and impact data in easily-understood ways; adapt, develop, and apply user-friendly costing and impact tools for data analysis to support policy and program planning dialogue; and build the capacity of in-country partners by providing costing and impact data for evidence-based decision-making to support their role in national-level policy and program planning dialogues. The contractor will also develop and apply user-friendly costing tools for policy analysis and dialogue with stakeholders from multiple sectors.

The successful offeror will work closely with groups of leaders to equip them with reliable cost and impact data and sound advice to assist them in their role as advocates for policy change and catalysts for successful policy implementation. The successful offeror will detail an approach to increase political commitment and improved decision-making through expanded use of local evidence regarding program costs. The successful offeror will detail their approach to achieving these results. The response should detail how the offeror will engage and consult with key policy stakeholders and how it will coordinate with existing efforts in host countries. Emphasis should be on local, regional and national organizations that produce national impact.

Tasks under Objective One include the following:

- Identify and reach key stakeholders to participate in policy processes at national and local levels, equipping them with costing data to develop policies that improve equitable and affordable access to high-quality services;
- Plan and facilitate key stakeholder meetings per USAID Mission requests;
- Promote informed dialogue and ensure that decision-makers and stakeholders are equipped with accurate cost data and information about critical issues, enabling them to use those data to develop policy and strategies for program implementation;
- Modify, revise and update cost models for costing of key HIV/AIDS and other health interventions, and develop new models as necessary;
- Support capacity building to improve decision-makers understanding and use of cost data related to health interventions, and present the results of cost information to decision-makers;
- Assist stakeholders and decision-makers to communicate and disseminate the results of the work on resource allocation decision-making;
- Describe an approach that builds the capacity of existing groups, focusing on promoting their ability to act as advocates and catalysts for change at the national level; and
- Train regional and local consultants to utilize costing tools and conduct costing exercises.

Deliverables under Objective One include the following:

- Generate summary reports for all country specific costing exercises and meetings conducted;
- Document methodologies and processes for stake-holder meetings in reports specific to the activity;
- Post new and existing costing tools, reports and methodologies on project website; and
- Disseminate any newly developed tools to USAID/W and USAID Missions overseas.

Objective Two

Provide direct technical assistance to USAID Missions, other US Government supported programs, and multilateral organizations to evaluate and assess resource allocation for public health programming and cost-effective policy priorities. It is anticipated that Objective Two will be approximately 45% of the total estimated cost of the task order.

The successful offeror will describe how it will engage USAID missions and other bilateral and multilateral organizations in costing, modeling and providing transparent cost and impact information for use in resource allocation decisions.

Tasks under Objective Two include the following:

- Present findings of key resource gaps in national HIV/AIDS strategies and opportunities for intervention to ensure balanced national programs to USAID Missions;

- Work in conjunction with USG policy makers to cost specific health interventions/innovations and demonstrate the impact of using those resources. Where applicable, work to cost packages of service provision areas within the following areas:
 - National strategic plans
 - Resource Needs Estimations
 - Partnership Framework Implementation Plans
 - Host country Global Fund plans
 - Adoption of WHO guidelines
 - Pediatric and adult HIV care and treatment, (including pre-ART program services, PMTCT, early infant diagnosis, infant feeding and nutrition support and counseling, and counseling and testing)
 - HIV prevention interventions (including male circumcision, pre-exposure prophylaxis (PrEP), combination prevention, behavior change communication activities addressing sexual risk behaviors such as mass media campaigns and linked community-level outreach activities, social mobilization activities, and prevention counseling)
 - Human resources for health (including task-shifting and projected needs)
 - Community-based interventions (including home-based care interventions and innovations and orphan and vulnerable children mitigation)
 - Alternative resource allocation approaches
- Assist USG and in-country stakeholders with planning for sustainable programming, including increased use of the private sector to meet service delivery needs;
- Describe a plan for collaborating with multilateral and multi-sectoral institutions to incorporate assessments of cost implications of proposed international guideline changes for provision of services to PLWHIV;
- Train USAID Mission staff to utilize costing tools and conduct costing exercises; and
- Assist national and local coordinating bodies, through provision of cost and impact data for decision-making, to develop and implement sound policies, laws, regulations, plans, programs, budgets and monitoring systems in support of priority health interventions at national and local levels.

Deliverables under Objective Two include the following:

- Provide summary reports and/or power point presentations of any collected data and data analyses to USAID Mission and other stakeholders per Mission requests;
- Present findings of any data analyses or costing work to USAID Mission staff and other key stakeholders per Mission requests;
- Provide a detailed plan for working with multi-lateral organizations and multi-sectoral institutions to incorporate cost implications of proposed international guideline changes and report updates semi-annually to USAID/Washington; and
- Training curricula for USAID/USG staff.

Objective Three

Conduct training to bolster in-country expertise among policy national, regional and local leaders and stakeholders to utilize, analyze, interpret and present timely and accurate costing data for evidence-based decision-making and advocacy within their respective regions. It is anticipated that Objective Three will be approximately 15% of the total estimated cost of the task order.

The successful offeror will describe how it will conduct trainings with national, regional and local leaders and stakeholders to equip them with adequate skills to cost programs and utilize the information to inform public health decisions.

Tasks under Objective Three include the following:

- Build capacity of academicians, public health officials consultants and in-country organizations to carry out cost modeling for health services within developing countries;
- Strengthen and mobilize experts at the national level to assist host countries in planning for and prioritizing needed health services within existing country budgets;
- Plan, coordinate and carry out regional trainings with key individuals in host countries to share knowledge and skills to undertake costing activities and resource allocation decision-making; and
- Develop virtual training tools to 1) share updates on models and tools and 2) to share updates on costing of key health interventions for colleagues in developing countries.

Deliverables under Objective Three include the following:

- Describe plan to work with academic institutions and regional training organizations as part of first year workplan;
- Document methodology for regional training and report out to USAID/Washington semi-annually on progress and lessons learned on regional costing training; and
- Publish training tools on project website, USAID websites, relevant USAID partner websites and disseminate training tools to USAID Missions.

Objective Four

Publish, disseminate and present relevant information to 1) inform and equip USAID and other USG field staff and host-government policy makers with cost data for decision-making and information and analysis for program planning and 2) document processes for replicating this work. It is anticipated that Objective Four will be approximately 10% of the total estimated cost of the task order.

The successful offeror will describe how it will publish, disseminate and present relevant information on costing to relevant audiences. The offeror will also describe and document the methodology for replicating the work carried out under the contract.

Tasks under Objective Four include the following:

- Create or adapt project website to promote global knowledge sharing and to house all work from task order in a logical, searchable, user-friendly system;
- Synthesize, compile and disseminate a knowledge base of effective program approaches and models to cost health programs and provide specific information to facilitate decision-making;
- Promote increased utilization of good and promising HIV practices among program planners and implementers for costing HIV programs;
- Document methodology of new model development;
- Present methodologies, lessons learned and relevant findings at international meetings, specifically the annual PEPFAR Implementers Meeting;
- Document the use of cost data for program decision-making and emergent lessons learned; and
- Document alternative approaches to cost analysis and cost estimation. Discuss the trade-offs between them and how such decisions were addressed in particular countries' experience.

Deliverables under Objective Four include the following:

- Functioning, up-to-date, searchable, user-friendly project website to house all work and all deliverables from task order;
- Publish report on alternative approaches to cost analysis and cost estimation; and
- Publish methodological report on any new model development.

IV. TASK ORDER CONTEXT

Integration

To the greatest degree possible offerors should work to integrate various approaches and models of HIV program delivery into their proposal for costing and modeling and not limit the proposal to costing only discrete interventions. Some examples of this are integration of PMTCT/pediatrics, HIV/MCH, HIV/FP, HIV/TB and OVC/food program services integration; outreach service delivery through different avenues of contact, such as peer educators, partner involvement, community outreach workers and case managers; integration of male circumcision services with sexual behavior change communication activities; integration of behavioral prevention interventions into other program areas, e.g., PMTCT, counseling and testing, care and treatment.

Sustainability and capacity-building approaches

Strengthening capacity of indigenous institutions involved in HIV/AIDS program implementation and evaluation is a key component to achieving scale-up and results, and to ensuring long-term sustainability of USAID-assisted programs. In the approaches outlined above, offerors should highlight opportunities for partnering with local organizations in developing countries and building the capacity of those organizations to carry out work described

in Objective Two. Successful offerors will demonstrate specific plans for these partnerships, including sub-contracts and/or grants under contract with local organizations. Priority should be given to partnerships that have the potential to make national impact.

Staffing, Management & Implementation Plan

Key Personnel

The key personnel identified below are considered essential to the accomplishment of this task order. Key personnel positions will be full-time positions. The two positions listed below are designated as key personnel. Offerors may propose other key personnel positions if they choose. For each additional "key" personnel proposed, offerors should provide a proposed short job description. Describe how the proposed staff meet required qualifications and provide a clear description of how the Task Order's goal, objectives and tasks will be met under the direction of these key personnel. Job descriptions may be included in the annex and do not count toward the technical proposal page limit.

Task Order Project Director

The offerors are required to appoint a Project Director. The Project Director should have demonstrated capabilities in high-level strategic visioning and leadership, and effective interaction with senior-level policy-makers in the US government and international settings. The Project Director must also demonstrate exceptional written and oral communications skills in English and be able to effectively present the work of this task order. Prior experience working with PEPFAR and the US Government is required. A Master's degree is required and PhD is preferred in a relevant discipline (e.g. economics, public health, public policy, health management/administration, business or other relevant field). Ten to fifteen years of relevant experience is required.

Deputy Director for Program Operations Manager

The offerors are required to appoint a Program Operations Manager. The Operations Manager should have demonstrated capabilities in project management. A background in health economics is preferred. The Operations Manager must demonstrate exceptional written and oral communications skills in English. Prior experience working with PEPFAR and the US Government is required. A PhD is preferred and Master's degree is required in relevant discipline (e.g. economics, international health, public health, public policy, health management/administration, business or other relevant field). Seven to ten years of relevant experience is required.

Non-Key Personnel

The offerors shall submit a staffing structure with other full-time or regular part-time project positions sufficient to accomplish the Task Order Goal, Tasks and Deliverables indicated above.

Management Plan

The offerors should propose a management structure to address the breadth, depth, and technical areas required to successfully undertake this Task Order. The offerors should describe how the tasks will be organized and managed to minimize non-productive costs to the government such as multiple overheads and how the contractor will utilize the complementary capabilities of any proposed sub-contractors most effectively and efficiently. Offerors should describe how lines of authority will be managed within their own organization and between the offerors and any sub-contractors. The management plan should demonstrate the offerors' understanding of efficient management practices, including approaches to cost containment, avoidance of duplication of effort, and use of technology.

The plan should also demonstrate how the offerors will use developing country partners and in-country technical resources to build capacity and reduce costs. This plan should describe lines of communication and reporting, and how the Project Director will liaise with the USAID COTR, USAID Missions, and in-country staff. The plan should also provide a clear description of the proposed management approach of how the task order will be managed, including the approach to addressing potential problems and, if the offerors plan to collaborate with multilateral or other organizations, government agencies or indigenous organizations. Offerors are encouraged to include an organizational chart in the Personnel Annex to the technical proposal.

Implementation Plan

The successful offeror will be responsible for a body of work, including the development of tools and techniques for new areas of costing and modeling work and will also carry out a broad range of in-country activities, including experimental costing and modeling activities. Given this complexity and given the need for various aspects of costing work to be closely integrated in each country if such work is to be successful, it is imperative that the work be carried out in an integrated and cohesive way.

The complexity of the contract mandates frequent and intensive contact between the successful offeror and USAID. The successful offeror shall keep the USAID management team apprised of the status of technical services provided by the task order and shall be prepared to travel frequently to USAID/Washington to review the annual work plan, to review country strategies and work-plans, to review planned core activities, and to debrief USAID on specific country activities.

The USAID management team will assist the successful offeror by providing liaison with regional bureaus, the health system teams in the Global Health Bureau, and USAID Missions. All aspects of travel and contract implementation must be reviewed and approved in advance by the USAID management team. In addition, the USAID management team will review and approve consultants assigned to each activity.

Performance Monitoring

As part of its core responsibilities to the Global Health Bureau, the offeror will:

- Develop an M&E plan to be approved by the Contracting Officer Technical Representative (COTR);
- Include 2-5 indicators from the standardized list of indicators developed under the HPI IQC Performance Monitoring Plan;
- Develop and maintain a system to compile monitoring information that captures the overall impact and outcomes of the task order; and
- Report against selected PEPFAR Next Generation Indicators as applicable:
 - H6.4.N Existence of national costed HIV implementation plan
 - H3.2.N Total health expenditures per capita (PEPFAR Recommended indicator)

The COTR and Technical Advisors (TA), in conjunction with the Contracting Officer (CO), will monitor and evaluate the contractor's overall performance in meeting the end-of-task order goal, objectives and deliverables in accordance with performance standards and indicators. The contractor will propose, and USAID will establish, indicators for assessing performance of activities accomplished using core and field support funds as well as country-specific activities.

USAID will conduct annual performance reviews after submission of annual reports. An external midterm evaluation of the task order may take place at the midterm of the task order if deemed necessary by the GH/OHA. A final performance review of this task order will be scheduled during the final task order year. A final report synthesizing the work, deliverables and results of the project over the entire task order duration will be due from the contractor 60 days after the task order is completed.

Period of Performance

The period of performance for this task order is three (3) years from the date of the award, subject to the contractor's performance and availability of funds. Core task order activity funds are contingent upon the availability of funding through the USAID Bureau of Global Health/Office of HIV/AIDS and field support funds from USAID/Missions.

Funding

For the three-year period of performance, approximately 20 percent of task order activities will be funded by central (USAID/Washington) funds and 80 percent will be funded by Mission (USAID/Missions) funds, subject to availability of funds.

Geographic Code

The authorized geographic code for procurement of goods and services under this award is 935.

Branding

The Contractor is required to follow USAID guidelines on USAID branding, provided by the task order COTR. These guidelines are outlined in the USAID “Graphic Standards Manual” which are available on the USAID website at: www.usaid.gov/branding and revised and expanded ADS chapter 320 on Branding and Marking issues.

Schedule

Within two weeks of the award of this order:

- The individuals designated as the Project Director and Project Operations Manager shall be hired and available to commence work at time of award.

Within one month of the award:

- A project office shall be established in the Washington D.C. area or environs.

Within 10 weeks of the award:

- The contractor shall submit a detailed draft work plan and budget for a one (1) year period, and a performance monitoring plan (PMP) including standardized indicators to USAID for COTR approval.

The contractor shall also provide:

- A quarterly financial report
- A semi-annual report
- An annual report that includes the results obtained against the PMP (consolidated from all reporting Task Orders)
- An annual work-plan

REPORTING REQUIREMENTS

Workplan and Performance Monitoring Plan: Within ten weeks of award, the contractor shall submit three copies of a first year work plan and budget to implement activities from date of award to September 30, 2010. Subsequent work plans will be submitted for each annual cycle, which currently runs from October 1 through September 30. The initial work plan will include a proposed Performance Monitoring Plan for the entire period of performance. Two to five indicators from the HPI IQC PMP will be selected by the Task Order recipient and the COTR for central reporting. The TO work plan and the PMP will be subject to the approval in writing by the COTR.

Progress Reports: The contractor shall submit one semi-annual performance report and one annual performance report yearly to the COTR and the Technical Advisers. These reports will indicate progress achieved towards benchmarks and end-of-task order targets, highlight tangible results, identify any problems encountered in implementation and propose remedial actions as appropriate. The semiannual report will be submitted within 45 calendar days of the six-month period ending on March 31 (no semiannual report will be required the first year of the project due to the start up date of o/a February 2010). The annual report will be submitted within 45

days of the 12-month period ending on September 30. An annual performance review meeting will be scheduled with the COTR, TAs, and other appropriate USAID staff.

Financial Reports: The contractor shall submit a quarterly financial report that will include a summary of task order finances and a pipeline analysis of funds obligated, funds expended, expenses accrued and funds remaining by budget categories. This financial report will break out funds by fund category, core and field support (by country) and by year of obligation.

Demobilization Plan: Six months prior to the completion date of the task order, the successful offeror shall submit a Demobilization Plan to the COTR. The Demobilization Plan will include, at a minimum, an illustrative Property Disposition Plan; a plan for the phase-out of in-country operations; a delivery schedule for all reports or other deliverables required under the task order; and a timetable for completing all required actions in the Demobilization Plan, including the submission date of the final Property Disposition Plan to the Contracting Officer. A final project report will be due 30 days after project closeout.

Ad hoc Reports: Other reports may be requested as needed by USAID.

End of Task Order Deliverables

1. Copies of all reports on activities conducted under this task order shall be submitted to the COTR; sensitive data will be marked as such and only shared with the TO management team internal to USAID/GH/OHA.
2. Semi-annual and annual task order reports shall be submitted to the COTR.
3. Project contribution to PEPFAR Indicators referenced above are reported every six months.
4. Copies of presentations conducted under this task order are required by the COTR
5. Complete documentation of all new tool development is required by the COTR along with five hard and electronic copies of the tool and/or instrument.
6. All reports, tools and models will be kept current and posted monthly to the knowledge management outlet for this task order.

V. INSTRUCTIONS TO OFFERORS

1. Technical Proposal

Technical proposal must be specific, complete and presented concisely. The technical proposal must demonstrate the offeror's capabilities, expertise, and commitment with respect to achieving the goal and objectives of the task order. The proposals must take into account the technical selection criteria and evaluation procedures described below. The technical portion of the proposal must not exceed 30 pages, excluding attachments. Proposals must be on pages of 8-1/2

inch by 11-inch paper, single-spaced, 12-point or larger type in a single column, with one-inch margins on all sides, with tabs to distinguish each section. An outline format using lists and/or matrices, whenever possible, is recommended. Offerors must include resumes of proposed key personnel (four pages maximum per resume) and other proposed staff (three pages maximum per resume, with no more than 4 examples of potential consultants and staff per proposed position/area of expertise) in an annex. Cover pages, dividers, table of contents, and attachments (i.e., key personnel resumes, and letters of commitment) do not count against the 25-page limitation.

The offerors should submit **one original and three hard copies** of the technical proposal. Please submit an electronic copy of the technical proposal in Microsoft Word 2003 format on CD and via email. Offerors should index sections in a Table of Contents. USAID must receive both the electronic copies (CD & email) and the hard copies by the submission deadline for the proposal to be eligible for consideration. Electronic copies (CD & email) must be an exact copy of the original hard copy. Hard copies, CDs and email submission of both the technical and cost proposals must be submitted to the location indicated in the cover letter accompanying this RFTOP and by the date and time specified.

To facilitate efficient review of proposals, offerors must organize the technical proposal in the format specified below.

Technical Proposal Format

Cover Page – Title, names of organization(s) submitting proposal, contact person, telephone and fax numbers, address and email. This page is not included in the 25 page maximum.

Executive Summary (not to exceed 5 pages) – Briefly describe the proposed activities, goals, purpose, technical strategies and methodologies, and anticipated results. Briefly describe the technical and managerial resources of your organization. Describe how the overall program will be managed and how the program will meet the overall goal and objectives of the task order.

Narrative (not to exceed 25 pages) - The narrative section of the proposal should address the task order goals and objectives and reflect the tasks outlined in Section V and contain the following elements:

2. Cost Proposal

The Cost Proposal must be completely separate from the offeror's technical proposal. There is no page limitation on the Cost Proposal. Offerors shall submit a cost proposal for a three (3) year task order operating period (o/a February 2010). Offerors shall submit their cost proposal in Microsoft Excel format with **full access to all formulas**.

The cost proposal should at a **minimum include** the following cost breakdown: Salaries, Fringe Benefits (if separate from Indirect Costs), Consultants (if applicable), Travel, Transportation and Per Diem, Equipment and Supplies, Subcontracts, Other Direct Costs, and Indirect Costs (Overhead, G&A, Material Overhead, Fee and any other Indirect Costs).

In addition, provide a **Level of Effort (LOE) table** reflecting annual LOE and LOE for the three year period of performance. The LOE table should also reflect the 80% field support / 20% core breakdown. See Cost Proposal Format section for further instructions. USAID sets the standard of one LOE is equivalent to one Full Time Equivalent (FTE). One FTE is equivalent to 260 working days/year. Offerors must propose costs that are realistic and reasonable for the work in accordance with their respective technical proposals.

In addition, provide a cost proposal based on the list and number of activities below. This is an anticipated list and number and actual types and number of activities will be determined by USAID during the period of performance based on USAID and USG requirements and availability of funds.

Anticipated Field Support Activities

Activity	Number
Resource Needs Estimation	15
National Strategic Plan Costing	20
Pediatric & Adult Treatment Costing & Impact	20
Combination Prevention Costing & Impact	15
Male Circumcision (MC) Costing & Impact	15
Pre-Exposure Prophylaxis (PrEP) Cost Estimation	10
Prevention of Mother to Child Transmission (PMTCT) Costing & Impact	20
Orphans & Vulnerable Children (OVC) Program Costing & Impact	20
Home & Community Based Care (HCBC) Program Costing & Impact	15
Human Resources for Health (HRH) Costing & Impact	10
Global Fund (GF) Application Cost Estimation	10
Regional Training (anticipated to be sub-Saharan Africa)	10
Country Training (anticipated to be sub-Saharan Africa)	6

Anticipated Core Activities

Activity	Duration or Number
Tools Development & Improvement	3 yr period of performance
Donor Coordination & Collaboration	3 yr period of performance
Knowledge Management Activities	3 yr period of performance
Regional Training	5 trainings/3 yr period of performance
Resource Needs Estimation	Supplement field support activities
National Plan Costing & Impact	Supplement field support activities
Male Circumcision & Impact	Supplement field support activities
PrEP Prophylaxis Cost Estimation	Supplement field support activities

The Cost Proposals should have a cover page with the title of the program, name of the organization(s) submitting the Proposal, contact person, telephone numbers, address, e-mail,

organizational DUNS number, and organizational EIN number. Cost proposal must be accompanied by detailed and comprehensive budget narrative in a word format with no page limitation. The budget narrative should be sufficiently detailed to minimize follow up clarification questions and should expand on each budget line item.

Cost Proposal Format

Offerors should submit two (2) hard copies, and an electronic copy on CD as well as via email in Microsoft Word 2003 of the narrative and budget notes, and in Microsoft Excel 2003 for the cost proposal. Adobe Acrobat files for cost proposals will not be accepted.

To support the proposed costs, please provide detailed and comprehensive budget narrative for all costs that explains how the costs were derived as a word document. The following provides guidance on what is needed:

- a. Salary and Wages: Direct salaries and wages should be proposed in accordance with the offeror's personnel policies and may not exceed USAID's contractor salary threshold. Completed bio-data sheet is required for all Key Personnel;
- b. Fringe Benefits: If the offeror has a fringe benefit rate that has been approved by an agency of the U.S. Government, such rate should be used and evidence of its approval should be provided;
- c. Travel and Transportation: The proposal should indicate the number of trips, domestic and international, and the estimated costs. Specify the origin and destination for each proposed trip, duration of travel, and number of individuals traveling. Per diems should be based on the offeror's normal travel policies and in compliance with USG rates;
- d. Field office costs: Costs associated with running a field office excluding personnel, Indirect Costs and Fringe Benefits.
- e. Equipment: Estimated types of equipment (i.e., model number, cost per unit, quantity);
- f. Supplies: Office supplies and other related supply items related to this activity;
- g. Contractual: Any goods and services being procured through a contract mechanism;
- h. Other Direct Costs: This includes communications, report preparation costs, passports, visas, medical exams and inoculations, insurance (other than insurance included in the applicant's fringe benefits), equipment, office rent abroad, etc. The narrative should provide a breakdown and support for all other direct costs;
- i. Indirect Costs: The offeror should support the proposed indirect cost rate with a letter from a cognizant U.S. Government audit agency, a Negotiated Indirect Cost Agreement (NICRA), or with sufficient information for USAID to determine the reasonableness of

the rates. (For example, a breakdown of labor bases and overhead pools, the method of determining the rate, etc.);

j. Fixed fee: Proposed fee, if any, not to exceed the ceiling set forth in the IQC.

Separately offerors should submit:

a. Detailed level of effort (LOE) and labor cost estimates must be submitted in accordance with the SOW split by year. Please provide a separate line item for each proposed individual and identify by name, labor category, daily rate and level of effort. Offerors should use the USAID biographical data form (AID 1420-17) for key personnel and other professional/technical non-key personnel to support proposed rate. Below is a sample table for reference.

FTE Core/Person Years		
US-based	FTE Per Year	FTE Total (3 yrs)
Technical/Management	X	X*3
Support/Consulting	Y	Y*3
Total	X+Y	(X+Y)*3
FTE Field/Person Years		
Field-based/US-based	FTE Per Year	FTE Total (3 yrs)
Technical Experts/Management (Expatriates)	X	X*3
Technical Local Experts/Management (Local Nationals)	Y	Y*3
Support/Consulting (Local Nationals)	Z	Z*3
Total	X+Y+Z	(X+Y+Z)*3
TOTAL CORE & FIELD SUPPORT		???

c) A current resume and USAID bio data form, in sufficient detail to support the proposed Functional Labor Category, for all U.S. and professional non-U.S. personnel;

d) A certification of salary for all proposed CCN Direct Labor;

e) A certification that no USAID employee has recommended the use of an individual subcontractor under the proposed Task Order who was not initially located and identified by your organization.

3. Unnecessarily Elaborate Proposals

Unnecessarily elaborate brochures or other presentations beyond those sufficient to present a complete and effective proposal in response to this RFTOP may be construed as an indication of the contractor's lack of cost consciousness. Elaborate artwork, expensive paper and bindings, and expensive visual and other presentation aids are neither necessary nor wanted.

4. Task Order Award

The Government may, without discussions or negotiations, award a task order resulting from this RFTOP to the responsible contractor(s) whose proposal conforms to this RFTOP and offers the best value to the U.S. Government. Therefore, the initial proposals should contain the contractor's best terms from a cost and technical standpoint. However, the U.S. Government may reject any or all proposals, accept other than the lowest cost proposal, and waive informalities and minor irregularities in proposals received, should it be in the best interest of the U.S. Government.

Although technical evaluation factors are significantly more important than cost factors, the closer the technical evaluations of the various proposals are to one another, the more important cost considerations may become. The Contracting Officer may determine what a highly ranked proposal based on the technical evaluation factors would mean in terms of performance and what it would cost the Government to take advantage of it in determining the best overall value to the Government.

5. Authority to Obligate the Government

The Task Order Contracting Officer (TOCO) is the only individual who may legally commit the US Government to the expenditure of public funds. The successful offeror may not charge task order proposal costs to the subsequent task order. Costs incurred prior to receipt of a contract signed by the TOCO may not be charged to the task order unless a specific, written authorization from the TOCO exists.

VI. EVALUATION CRITERIA

These technical evaluation criteria have been tailored to the requirements of this RFTOP to allow USAID to choose the highest quality proposal. These criteria serve as the standard against which the Technical Evaluation Committee (TEC) shall evaluate all acceptable proposals. USAID will award to the Offeror whose proposals best meet(s) the Scope of Work description and Performance Standards and represent(s) the best value to the U.S. Government.

The proposals will be evaluated for the following three criteria in descending order of importance/weight: A) Technical Approach and Evaluation Plan; B) Personnel and Management Approach; and C) Past performance. Sub-criteria will have equal weight within each criterion.

Proposed costs shall be evaluated for reasonableness and consistency with the technical proposal. This analysis is intended to determine the degree to which the costs included in the cost proposal are fair and reasonable; and reasonableness of proposed labor rates and fee. Technical evaluation factors when combined are more important than cost factors in determining the award. Cost may be the determining factor where proposals are essentially of equal technical merit. The overall standard for judging cost will be whether the proposal presents the best value for the cost. The cost proposal will be judged on: a) whether it is realistic and consistent with the technical proposal; b) overall cost control; and c) amount of proposed fee.

The Government may award a task order without discussions with offerors in accordance with FAR 52.215-1, to the responsible applicant whose proposal conforms to this RFTOP and offers the best value to the Government. However, the Government reserves the right to conduct discussions if later determined by the Contracting Officer as necessary. Therefore, each initial proposal should contain the Offeror's best terms from a cost or price and technical standpoint.

Adjectival Ratings

Technical proposals will be evaluated based on adjectival ratings.

OUTSTANDING: The technical proposal exceeds the fullest expectations of the Government. The offeror has convincingly demonstrated that the evaluation requirements have been analyzed, evaluated, and should result in an outstanding, effective, efficient, and economical performance under the contract. A comprehensive and thorough proposal of exceptional merit. No deficiencies or significant weaknesses have been found.

When applied to criteria and/or the proposal as a whole, an outstanding rating indicates that there are no deficiencies or significant weaknesses exist within any sub-criteria that represent a performance risk within the criteria and/or the proposal as a whole.

VERY GOOD: A technical proposal demonstrating overall competence. Meets all RFP minimum requirements and exceeds requirements in some areas but not all. No deficiencies or significant weaknesses have been found. Strengths outbalance any weaknesses that exist. No more than a few minor weaknesses have been identified that are easily correctable and do not represent a performance risk.

When applied to criteria and/or the proposal as a whole, a very good rating indicates that there are no deficiencies or that no significant weaknesses exist within any sub-criteria that represent a performance risk within the criteria and/or the proposal as a whole. No more than a few minor weaknesses have been identified within the criteria and/ or proposal and these are easily correctable and do not represent a performance risk.

GOOD: The technical proposal is reasonably sound and meets the RFP minimum requirements. The proposal may contain weaknesses and/or significant weaknesses that are correctable but no deficiencies. If any weaknesses and/or significant weaknesses are noted, they should not seriously affect the offeror's performance.

When applied to criteria and/or the proposal as a whole, a good rating indicates that there are no deficiencies within the criteria and/or proposal that will represent a performance risk. Any significant or minor weaknesses that have been identified within the criteria and/ or proposal are correctable. They should not seriously affect the offeror's performance.

MARGINAL: The technical proposal demonstrates a shallow understanding of the requirements and approach and marginally meets the minimal requirements for acceptable performance. The proposal contains weaknesses and/or significant weaknesses and may contain deficiencies. If deficiencies exist, they may be correctable with a significant revision of the

proposal. The offeror may complete the assigned tasks; however, there is a moderate risk that the offeror will not be successful.

When applied to criteria and/or the proposal as a whole, a marginal rating indicates that there are deficiencies and/or significant weaknesses within the criteria and/or proposal that represent a moderate performance risk. Only a significant revision of the proposal would correct these areas of concern.

UNACCEPTABLE: The technical proposal fails to meet a minimum requirement or contains a major deficiency or major deficiencies. The proposal is incomplete, vague, incompatible, incomprehensible, or so incorrect as to be unacceptable. The evaluator feels that the deficiency or deficiencies is/are uncorrectable without a major revision of the proposal. The deficiencies, weaknesses and/or significant weaknesses represent a high risk and would seriously affect the offeror's performance.

Source Selection

(a) The overall evaluation methodology set forth above will be used by the contracting officer as a guide in determining which proposal(s) offer the best value to the U.S. Government. In accordance with FAR 52.215-1, award will be made by the contracting officer to the responsible offeror(s) whose proposal(s) represents the best value to the U.S. Government after evaluation in accordance with all factors and sub-factors in this solicitation.

(b) This procurement utilizes the tradeoff process set forth in FAR 15.101-1. If the Contracting Officer determines that competing technical proposals are essentially equal, cost/price factors may become the determining factor in source selection. Conversely, if the contracting officer determines that competing cost/price proposals are essentially equal, technical factors may become the determining factor in source selection. Further, the contracting officer may award to a higher priced offeror if a determination is made that the higher technical evaluation of that offeror merits the additional cost/price.

A. Technical Approach and Evaluation Plan

The extent of the applicant's understanding of and feasibility/ability to successfully perform the activities as described in the Statement of Work, including:

- Extent to which the proposed approach is clear, logical and well-conceived in comprehensively addressing how the offeror will achieve the objectives and deliverables in the timeframe outlined in the Statement of Work and how the offeror will collaborate with existing efforts and promote integration, sustainability and capacity building

B. Personnel and Management Approach

The extent of the offeror's understanding of and feasibility/ability to successfully propose a personnel and management approach as described in the Program Management and Staffing section, including:

- Extent to which the proposed staff meet required qualifications and provide a clear description of how the Task Order's objectives and tasks will be met, including demonstrated technical experience and expert qualifications (e.g., technical expertise in modeling and costing of HIV/AIDS,) in all the programmatic areas outlined in the Statement of Work
- Extent to which the proposed management approach provides a clear description of how the task order will be managed, including the approach to addressing potential problems and, if the offeror plans to collaborate with other organizations, government agencies or indigenous organizations, the extent to which the services to be provided by each agency or organization are described

C. Past performance

Extent to which the offeror articulates and documents experience and past performance with similar work as requested by the RFTOP, including demonstrated experience and publications in programmatic areas outlined in the Statement of Work and experience managing and reporting on US government acquisition and/or assistance mechanisms.