



USAID
FROM THE AMERICAN PEOPLE

SOLICITATION NUMBER: 72068723R00002
ISSUANCE DATE: April 6, 2023
CLOSING DATE: May 7, 2023

**SUBJECT: Solicitation for U.S. Personal Service Contractor (USPSC) and Third Country National Personal Service Contractor (TCN PSC)
Position: Senior Digital Health Advisor, GS-14 (Re-advertisement)**

Dear Prospective Offerors:

The United States Government, represented by the U.S. Agency for International Development (USAID), is seeking offers from qualified persons to provide personal services in Madagascar under contract as described in this solicitation.

Offers must be in accordance with the Attachment of this solicitation. Incomplete or unsigned offers will not be considered. Offerors should retain copies of all offer materials for their records.

USAID will evaluate all offerors based on the stated evaluation criteria. USAID encourages all individuals, including those from disadvantaged and under-represented groups, to respond to the solicitation.

This solicitation in no way obligates USAID to award a PSC contract, nor does it commit USAID to pay any cost incurred in the preparation and submission of the offer.

Any questions must be directed in writing to the Point of Contact specified in the Attachment.

Sincerely,

Debbie Jackson
Contracting Officer

ATTACHMENT

Solicitation for US/TCN Personal Services Contract
Senior Digital Health Advisor, GS-14 (Re-advertisement)

I. GENERAL INFORMATION

1. SOLICITATION NUMBER 72068723R00002

2. ISSUANCE DATE 04/06/2023

3. CLOSING DATE 05/07/2023

4. POINT OF CONTACT: Dany Randrianatoavina
antananarivoUSAIDHR@usaid.gov
Phone: + (261) 33 44 320 00.

5. POSITION TITLE Senior Digital Health Advisor

6. MARKET VALUE:

From \$99,908 to \$129,878 per annum equivalent to GS-14. Final compensation will be negotiated within the listed market value. Selected USPSC is not entitled Locality Pay.

7. PLACE OF PERFORMANCE:

USAID/Madagascar - U.S. Embassy, Lot 207 A, Point Liberty, Andranoro Antehiroka - Antananarivo 105 Madagascar, with possible travel as stated in the Statement of Duties.

Overseas USPSCs and TCNPSCs not subject to the local compensation plan may be authorized to telework or remote work only from a location within the country of performance, in accordance with Mission policy. Telework or remote work from outside the country of performance may only be authorized in certain situations in accordance with the terms and conditions of the contract.

8. PERIOD OF PERFORMANCE:

The base period will be two years, estimated start date in September 2023. Based on Agency need, the Contracting Officer (CO) may exercise additional three option periods of one year increment, for the dates estimated as follows:

Base Period	o/a September 2023 to o/a September 2025
Option Period 1	o/a September 2025 to o/a September 2026
Option period 2	o/a September 2026 to o/a September 2027
Option period 3	o/a September 2027 to o/a September 2028

Multiple option periods can be exercised at the same time per CO discretion.

9. ELIGIBLE OFFERORS:

Eligible offerors are U.S. nationals and third country nationals, defined as below:

U.S. national (**USN**) means an individual who is a U.S. citizen or a non-U.S. citizen lawfully admitted for permanent residence in the United States.

Third country national (**TCN**) means an individual who is neither a Malagasy citizen nor a USN but is a citizen or lawful permanent resident (or equivalent immigration status) of any country other than the countries which are prohibited sources.

USAID encourages all individuals, including those from disadvantaged and under-represented groups, to respond to the solicitation.

10. SECURITY LEVEL REQUIRED:

Facility & Computer Access

11. STATEMENT OF DUTIES:

A. BACKGROUND

The U.S. Agency for International Development (USAID)/Madagascar's Health, Population and Nutrition (HPN) Office implements programs in family planning/reproductive health (FP/RH); maternal and child health (MCH); nutrition; water, sanitation and hygiene (WASH); infectious diseases; and malaria prevention and control. HPN partners also coordinate with the Title II food security programs to increase the overall effectiveness and reach of USAID's assistance. Madagascar is a priority country for Ending Preventable Child and Maternal Deaths (EPCMD), a President's Malaria Initiative (PMI) focus country, and a USAID High Priority WASH Country.

The HPN Office manages a budget that has increased by 35% over the last four years to \$72 million annually. HPN oversees twenty-three cooperative agreements, grants, and contracts. The approved staffing pattern includes three US Foreign Service Officers, three Personal Service Contract (PSC) positions, one direct hire US CDC staff person, and 13 Foreign Service National (FSN) staff.

The 2009 *coup d'état* plunged the country into crisis, stalling development initiatives and further deteriorating an already fragile health system. With financial and political restrictions placed on the Government of Madagascar (GOM) by the United States during this period, USAID/ Madagascar shifted to a humanitarian support strategy and invested nearly \$250 million in innovative community health services and systems: scaling-up access to diagnosis and treatment for simple pneumonia, diarrhea, and malaria as well as oral and injectable contraceptives. USAID/Madagascar equipped and trained an extended cadre of more than 17,000 community health volunteers (CHV) in 13 of 22 regions covering about 1,200 mostly rural communes to expand basic, life-saving services. This system continues to provide health services to over 16 million people (81% of whom are rural), which represents 61% of the total population of Madagascar.

Following successful elections in December 2013, multi- and bilateral organizations normalized relations; the US Government (USG) lifted restrictions in May 2014. The GOM initiated the development of a health

sector development strategy, the *Plan de Développement du Secteur Santé* (PDSS) in January 2014. The plan outlines a five-year (2015-2019) strategy to improve health services and outcomes. This strategic document was reviewed and updated in 2020 taking into consideration the importance of digitization, although there is a lack of regulatory frameworks relative to digital health. In 2015, the GOM validated the Universal Health Coverage Strategy. This strategy aims to provide quality health services to every Malagasy citizen and to develop a financial protection mechanism. USAID supported the initiative; however, due to the lack of a clear vision and commitment from the new administration, the implementation of this strategy did not show progress, and is limited to very fragmented activities. In 2016, Madagascar developed its first national digital health strategy which envisions contributing to the universal health care objective.

While Madagascar has made improvements in some health statistics, notably a marked increase in contraceptive prevalence rate, other indicators have stagnated or declined. Most notably, the country continues to suffer from significant infectious disease outbreaks, and the emergency response to these outbreaks draws resources away from building a functional national health system.

The Ministry of Posts, Telecommunications and Digital Development is the information and communication technologies policymaker. Though one of the poorest countries in the world, Madagascar has one of the fastest broadband internet speeds in Africa. Despite what seems a technological advantage, only 13% of the population has access to electricity and only 2.1% of the population has access to the internet. Household penetration of mobile broadband is also relatively low, at just over a third of homes in 2016, with a significant difference between urban (73%) and rural areas (29%).

Since the lifting of the restrictions in May 2014, the Mission's efforts are now increasingly focused on using USG resources to strengthen GOM health systems, especially in the areas of supply chain management for medicines, health commodities, and supplies; use of data for decision-making; increasing domestic resource mobilization and health financing. USAID is a chief supplier of health commodities, providing more than half of all family planning commodities in the country as well as rapid diagnostic kits (RDks) and Artemisinin-based combined Therapy (ACTs) for malaria diagnosis and treatment, and insecticide-treated bed nets for malaria prevention. In total, supply chain management will comprise approximately 35% of the portfolio, and the appropriate functioning of the health supply chain determines the success of all USAID programming and the ability of the GOM to adequately provide health services to its population.

USAID's *Digital Strategy 2020-2024* outlines the Agency's vision "to advance progress in communities in our partner countries to build sustainable systems through efficient, effective, and responsible digital initiatives that enhance security and economic prosperity, consistent with the American values of respect for individual rights, freedom of expression, and the promotion of democratic norms and practices." The *Digital Strategy* aims for Missions to designate a Digital Development Advisor to guide the digital vision for USAID.

The USAID Bureau for Global Health developed *Vision for Action in Digital Health* to align with the *Digital Strategy* and provides clear direction for the health sector to: 1) Assess and advance national and regional capacity for digital health, in particular that of leadership and governance, 2) Support the development

of, and align investments to, national and, where appropriate, regional digital-health strategies, 3) Support the development of, and align investments to, a national digital-health architecture, and 4) Adapt, re-use, and, where needed, provide support to global goods.

USAID/Madagascar, therefore, requires the services of a Senior Digital Health Advisor with a strong focus on health systems strengthening and policy to be hired through a Personal Services Contract. The Senior Digital Health Advisor is intended to be a senior broad-based position who will provide oversight and leadership of digital health investments within the HPN program, with a particular emphasis on one of USAID's key investments, supply chain management, and provide expert guidance on cross-sectoral digitization opportunities in alignment with the Agency's *Digital Strategy*. The Senior Digital Health Advisor will be based in Antananarivo and is expected to spend approximately 25% of his/her time traveling throughout the country to monitor program activities.

B. GENERAL RESPONSIBILITIES

The Senior Digital Health Advisor serves as an expert advisor and technical authority on complex and precedent-setting programmatic and policy issues in digital health systems. S/he is a key member of the HPN Office, a member of the Health Systems Strengthening Team, and reports directly to the Health Systems Strengthening Advisor. S/he is a senior professional and expert in his/her field who will focus on supporting digital health services programming to improve health systems. S/he provides evidence-based technical advice to the Mission, helps to develop strategic approaches to health systems across the portfolio, and assists in the design and management of activities and projects. The incumbent is a subject matter expert in health information systems and has experience in at least one of the following areas: digital health, health informatics, market access, or logistics management information systems.

The incumbent will provide strategic and technical input to the Ministry of Health, implementing partners, and USAID Contracting/Agreement Officer's Representatives (COR/AOR) within the HPN Office and, as required, with other USAID/Madagascar technical offices. He/she will play a key role in supporting the implementation of the Agency's digitization and digital health strategies and advance the next generation of strategic digital-health investments in the Madagascar context. The incumbent represents the Mission on digital health systems issues to government officials, other donors, partners and potential partners, a role which requires strong diplomatic and negotiation skills. S/he will represent these issues to USAID senior management and with offices throughout the Mission for cross-sectoral impact. The incumbent will be designated as a COR, AOR, or Activity Manager for activities related to digital health and health information systems, including logistics management information systems. S/he will also advise the COR/AORs for service delivery concerning digital health and commodity security components within their activities.

C. SPECIFIC DUTIES AND RESPONSIBILITIES

The Senior Digital Health Advisor will undertake the following duties:

Technical Leadership

1. Provide leadership, strategic advice, and programmatic direction on the design and implementation of complex digital health interventions involving one or more of the following: system integration, multiple vendor management, national scale systems, open-source solutions, and implementation of national health information systems (HIS).
2. Serve as technical advisor on programmatic and policy issues for digital health systems within the context of health systems strengthening, in particular as related to health service delivery (facility- and community-based), human resources for health, supply chain, with attention to digital financing, leadership, governance, and institutionalization; coordination across public, private, and faith-based sectors; and engagement of communities and clients.
3. Integrate digital technologies to increase visibility into supply chains down to the end user, strengthen demand-planning; optimize operations among partners; and promote the appropriate use of medicines and other health products by providers, pharmacists/dispensers, and consumers.
4. Develop technical cooperation strategies and provide guidance on integrating components of digital health interventions to achieve harmonized digital systems within Madagascar's health system and ensure the integration of critical actors and sectors outside of the health sector.
5. Strengthen the development of national capacities for the design, implementation, monitoring and reporting of quality and accuracy of data and information sources, including vital and health statistics.
6. Support the integration and application of state-of-the-art digital health systems theories, methods, and practices into the design of HPN activities, scopes of work, research and learning activities, monitoring and evaluation activities, training materials, technical guidelines, implementing tools.
7. Lead the implementation of a health information systems strategy to achieve specific health objectives.
8. Serve as the Mission Digital Development Advisor and allocate 25% of his/her time to collaborating across office work streams and initiatives and support cross-sectoral investments in the digital ecosystem. Support the linkage of sector-specific data systems funded by USAID with host country systems. Work with Mission private sector POCs to seek opportunities to coordinate USAID investments with the private sector. Work with Mission staff to build digital responses into sector-level programming or develop cross-cutting efforts country-wide. Increase the capacity of USAID/Madagascar staff to establish digital best practices that are integrated into Mission strategies, programming, monitoring, and evaluation.
9. Support the Mission's applications to the Digital Ecosystem Fund and other digitally related financing available through priority USAID initiatives and work with the interagency on digital issues at post.
10. Update the Mission's Digital Ecosystem Country Assessment every two years in collaboration with USAID's Center for Digital Development (CDD).
11. Stay abreast of digital health strategies, reports, analyses, publications, research, latest technologies, innovations and developments in Madagascar, the Africa region and globally, and consider their adaptability and applicability to the context of Madagascar's health sector. Determine any additional analyses, assessments, or reviews required to support digitization, data use, and governance policies and practices.

Project Design and Management

1. Oversee bilateral and USAID central contracts, grants and cooperative agreements in the areas under his/her direction. This includes serving on technical selection committees for acquisition and assistance awards, and coaching COR/AORs in the management of activities with digital health components as needed.
2. Serve directly as a COR/AOR or Activity Manager as required. This includes reviewing and approving work plans and budgets, administratively approving payment vouchers, and other performing ongoing project oversight and management actions.
3. Lead or participate in the preparation of new procurements, such as the preparation of scopes of work, program descriptions, illustrative budgets, waivers, and exceptions to competition as required.
4. Oversee all monitoring, evaluation and reporting for activities under his/her areas.
5. Support Agency reporting requirements for digitization, including preparing briefers, talking points, reports, project plans, budgets, trip reports, and other materials as needed.

Stakeholder Engagement

1. Support USAID/Madagascar engagement with external stakeholders to ensure consistency and coordination of digital health systems and bridge connections to ensure a strong systems approach in USAID/Madagascar's digital platforms. Stakeholder groups include the USAID technical offices within the Bureau for Global Health and other bureaus as needed; USAID implementing partners; multilateral and bilateral donor organizations; foundations; the private sector; and other U.S. Government agencies.
2. Work with development and humanitarian partners to prioritize and scale innovations and existing interventions that align with USAID priorities in digital health, including to enable market access and digital health approaches and bridging the digital gender divide.
3. Engage with host country policy officials, the donor community, and other stakeholders to advise on the digital health agenda, activities, standards, processes, and tools.
4. The incumbent may be delegated by the HPN Office Director or other senior Mission staff to fulfill other assignments or duties related to achieving the Mission's health objectives and goals. For example, this may include:
 - o Serving as focal person for select office and Mission new initiatives
 - o Representing the Director or other senior Mission staff at forums and meetings
 - o Supporting and participating in Mission processes, e.g., Country Development Cooperation Strategy Project teams.

D. SUPERVISORY RELATIONSHIP

The Senior Digital Health Advisor will be supervised on a day-to-day basis by the Health Systems Strengthening Advisor, who will provide general broad direction and guidelines.

E. SUPERVISORY CONTROLS

Desired results will be outlined in broad terms. Possible alternative methods and procedures may be discussed, but the choice of those to be used will often be left to the discretion of the incumbent. Problems of unusual difficulty or those not commonly associated with the professional specialization or activity will be discussed throughout the term of assignment. The incumbent will work independently and keep his/her supervisor informed of progress in the achievement of objectives and advised of potentially controversial matters. Work will be reviewed in terms of effectiveness in advancing USAID/Madagascar's health, population and nutrition Strategic Plan and program as enunciated in the annual results reports and resource request submissions, as well as with regard to soundness and effectiveness of decisions and actions, and conformance with policies and regulations.

12. PHYSICAL DEMANDS:

The work requested does not involve undue physical demands.

II. MINIMUM QUALIFICATIONS REQUIRED FOR THIS POSITION

Education

Master's degree in public health, information technology, business administration, computer science or related field.

Prior Relevant Work Experience

- At least 7 years of progressively responsible professional experience in systems development lifecycle and other software implementation methodologies in low resource settings, working with current information technology tools, standards, methodologies, and policies that can be applied to advance health information systems, experience in IT and/or software implementation in a developing country or other resource-poor settings, experience working in the public and/or private health sector, experience with current mobile technologies that can be leveraged to further public health objectives, experience working with GIS tools and analytical approaches, and professional experience in health informatics or digital health in low- and middle-income country contexts.
- Overseas experience managing integrated, and complex digital health programs, including LMIS, in developing countries.

Skills and Abilities

Strong interpersonal skills with the ability to build relationships with people of varied professional, educational, and cultural backgrounds.

Language Proficiency

English language at level IV or equivalent (full professional proficiency)

French language at level III or equivalent (professional working proficiency)

III. EVALUATION AND SELECTION FACTORS

The Government may award a contract without discussions with offerors in accordance with FAR 52.215-1. The CO reserves the right at any point in the evaluation process to establish a competitive range of offerors with whom negotiations will be conducted pursuant to FAR 15.306(c). In accordance with FAR 52.215-1, if the CO determines that the number of offers that would otherwise be in the competitive range exceeds the number at which an efficient competition can be conducted, the CO may limit the number of offerors in the competitive range to the greatest number that will permit an efficient competition among the most highly rated offers. The FAR provisions referenced above are available at <https://www.acquisition.gov/browse/index/far>.

USAID policy specifies that U.S. citizens or resident aliens (USNs) are preferred over third country nationals (TCNs). Therefore, USN and TCN offers will not be evaluated together. USAID will evaluate USN offers first and if the CO determines that there are no qualified USNs, only then will USAID evaluate TCN offers.

After the closing date, eligible offerors, as defined in this solicitation, who meet the minimum qualifications will be further evaluated, through their offer package, based on the factors listed below. Offerors are strongly encouraged to address each of the factors listed below on a separate sheet (appendix) describing specifically and accurately the experience, training, and/or education that are relevant to each factor. An evaluation committee may conduct interviews of the most highly ranked candidates before making a recommendation to the CO. The successful candidates will be selected based on a review of their qualifications; interview (if conducted); and the results of reference checks. The evaluation committee may check references that have not been specifically identified by applicants and may do so before or after a candidate is interviewed. The Contracting Officer reserves the right to select a candidate that fully meets the minimum technical qualifications but may not fully meet the French language requirement. We will only contact the highest ranked candidates who will be shortlisted by the evaluation committee and invited to interviews.

Factor 1 - Professional Experience – 40 Points

- (i) Experience in international public health, preferably based in a developing country context
- (ii) Experience designing and implementing health information systems, digital health systems and tools, and other related digitized health activities
- (iii) Direct experience with open-source software systems such as District Health Information Systems 2 (DHIS2), Logistics Management Information Systems (LMIS), Human Resource Information Systems (HRIS) and other linked HIS software packages
- (iv) Experience in development of digitization strategies for health
- (v) Experience directly managing health programs, including both programmatic and financial management
- (vi) Experience in monitoring and evaluating health programs
- (vii) Experience reviewing, evaluating and influencing complex policies and regulations

- (viii) Experience in negotiation and representation with high-level stakeholders in the health sector

Factor 2 - Technical Expertise – 40 Points

- (i) In-depth knowledge of the purpose and mechanics of the full spectrum of health information systems, including case management, service delivery, surveillance, logistics and human resource systems
- (ii) Excellent analytical skills, including an ability to comprehend quantitative and analytical reports from development and peer-reviewed literature and to objectively evaluate programs

Factor 3 - Interpersonal and Communication Skills – 20 Points

- (i) Ability to provide rapid, concise, accurate reporting, both verbally and in writing
- (ii) Ability to work effectively as a senior technical leader in a multicultural environment
- (iii) Ability to establish and maintain professional and effective contacts with host government officials, other donors, implementing partners, private sector CEOs, Washington headquarters staff, and Mission staff
- (iv) Ability to negotiate diplomatically and influence people from a variety of cultures and backgrounds.
- (v) Ability to communicate in both written and spoken French and English. The incumbent must be able to draft and read complex technical documents in English as well as conduct technical discussions in both languages

Total possible points = 100

IV. SUBMITTING AN OFFER

DOCUMENTS REQUIRED

1. AID 309-2, Offeror Information For Personal Services Contract Form

Eligible offerors are required to complete and submit a hand-signed form AID 309-2, "Offeror Information For Personal Services Contracts", available at the USAID website, <https://www.usaid.gov/forms>. Offerors are required to sign and scan the certification at the end of the form.

2. Resume/Curriculum Vitae

Your resume should contain explicit information to make a valid determination of your eligibility in **Section I, item 9**, and that you fully meet the minimum qualifications requirements, listed in **Section II**. This information should be clearly identified in your resume. Failure to provide explicit

information to determine your eligibility and qualifications for the position will result in loss of full consideration.

3. Appendix

This is a written statement which will specifically address the selection factors listed in **Section III**. Include other pertinent information related to the selection factors required for the position, such as job-related training courses (title and year), job-related skills, job-related certificates and licenses (current only), job-related honors, awards, and special accomplishments, for example, publications, memberships in professional or honor societies, leadership, activities, public speaking and performance awards (give dates but do not send documents unless requested).

4. Reference Persons

Offerors are required to provide five (5) reference persons who are not family members or relatives, with working telephones and email contacts. The references must be able to provide substantive information about offerors past performance and abilities. Reference checks will be made only for offerors considered as finalists. If an offeror does not wish for the current employer to be contacted as a reference check, this should be stated in the offeror's AID 309-2 form and/or resume. The interviewing committee will delay such reference check pending communication with the offeror.

SUBMISSION OF OFFER

1. Offers must be submitted to the e-mail address: antananarivoUSAIDHR@usaid.gov
 - Subject line of your email should read: "**SDHA [your name]**"
 - E-mail attachments should be in Adobe Acrobat Reader format (.pdf) and/or Word format (.doc or .docx). Any other format will be rejected.
2. Offers must be received by the closing date and time specified in **Section I, item 3**.
3. **Ensuring Adequate COVID-19 Safety Protocols for Federal Contractors** – Please be advised that upon contract award, the contractor will be required to show proof that the contractor is fully vaccinated against COVID-19 on or before the first date of onboarding, or submit an approved reasonable accommodation to the CO. If the contractor does not meet this requirement the contract may be terminated. USPSCs/TCNPSCs performing overseas must follow the Mission policies and/or directives from the U.S. Department of State regarding COVID-19 requirements.

V. LIST OF REQUIRED FORMS PRIOR TO AWARD

The CO will provide instructions about how to complete and submit the following forms after an offeror is selected for the contract award. Other additional forms may be required to be completed.

For Medical clearance (for offeror and eligible dependents):

- DS-1843 Medical History and Examination - for individuals age 12 and older
- DS-1622 Medical History and Examination - for children age 11 and younger

- DS-3057 Medical Clearance Update (MCU)
Found at <https://www.state.gov/forms-medical-clearances/> (USN and TCN)

For Security clearance:

- OVQ (Overseas Vetting Questionnaire) (TCN)
- SF-85, Questionnaire for Non-Sensitive Positions (USN and TCN)
- OF-306, Declaration of Federal Employment (USN)
- SF-86, Questionnaire for National Security Positions (USN)
- SF-87, Fingerprint Card (USN)
- AID 500-4, Fair Credit Reporting Act of 1970, as Amended (USN)
- AID 6-85, Foreign Activity Data (USN)

For Contracting purpose:

- OF-126, Residence and Dependency Report (USN and TCN)
- SF-144, Statement of Prior Service – Worksheet (USN and TCN)
- COVID-19 Vaccination Attestation Form (USN and TCN)

VI. BENEFITS AND ALLOWANCES

- **USPSC:**

As a matter of policy, and as appropriate, a USPSC is normally authorized the following benefits and allowances.

1. BENEFITS:

- (a) Employer's FICA Contribution
- (b) Contribution toward Health & Life Insurance
- (c) Pay Comparability Adjustment
- (d) Annual Increase (pending a satisfactory performance evaluation)
- (e) Annual and Sick Leave
- (f) Eligibility for Worker's Compensation
- (g) Relocation Expense Benefit

2. ALLOWANCES (when applicable):

Section numbers refer to rules from the Department of State Standardized Regulations (Government Civilians Foreign Areas), available at

https://aoprals.state.gov/content.asp?content_id=282&menu_id=101

- (a) Temporary Quarter Subsistence Allowance (Section 120)
- (b) Living Quarters Allowance (Section 130)
- (c) Cost-of-Living Allowance (Chapter 210)
- (d) Post Allowance (Section 220)
- (e) Separate Maintenance Allowance (Section 260)
- (f) Education Allowance (Section 270)
- (g) Education Travel (Section 280)

- (h) Post Differential (Chapter 500)
- (i) Payments during Evacuation/Authorized Departure (Section 600).

- **TCNPSC:**

In accordance with the applicable and approved Alternate Compensation Plan, a TCNPSC may be authorized the following benefits and allowances, at the discretion of the CO.

1. **BENEFITS:**

- (a) Contribution toward Health & Life Insurance
- (b) Pay Comparability Adjustment
- (c) Annual Increase (pending a satisfactory performance evaluation)
- (d) Annual and Sick Leave

2. **ALLOWANCES (when applicable):**

Section numbers refer to rules from the Department of State Standardized Regulations (Government Civilians Foreign Areas), available at

https://aoprals.state.gov/content.asp?content_id=282&menu_id=101

(reference to the U.S. will be replaced with the TCNPSC's home country of record as applicable.)

- (a) Temporary Quarter Subsistence Allowance (Section 120)
- (b) Living Quarters Allowance (Section 130)
- (c) Cost-of-Living Allowance (Chapter 210)
- (d) Post Allowance (Section 220)
- (e) Separate Maintenance Allowance (Section 260)
- (f) Education Allowance (Section 270)
- (g) Education Travel (Section 280)
- (h) Post Differential (Chapter 500)
- (i) Payments during Evacuation/Authorized Departure (Section 600).

VII. TAXES

USPSCs are required to pay Federal income taxes, FICA, Medicare and applicable State Income taxes. TCNPSCs are required to pay either Malagasy income taxes, or his/her income taxes of his/her country of origin.

VIII. USAID REGULATIONS, POLICIES AND CONTRACT CLAUSES PERTAINING TO PSCs

USAID regulations and policies governing PSC awards are available at these sources:

1. **USAID Acquisition Regulation (AIDAR):** available at <https://www.usaid.gov/ads/policy/300/aidar>

For USPSC: AIDAR Appendix D, “Direct USAID Contracts With a U.S. Citizen or a U.S. Resident Alien for Personal Services Abroad,” including contract clause “General Provisions”.

For TCNPSC: AIDAR Appendix J, “Direct USAID Contracts With a Cooperating Country National and with a Third Country National for Personal Services Abroad,” including contract clause “General Provisions”.

2. Executive Order 14042, Ensuring Adequate COVID Safety Protocols for Federal Contractors

52.223-99 ENSURING ADEQUATE COVID-19 SAFETY PROTOCOLS FOR FEDERAL CONTRACTORS (OCT 2021)-Alternate 70 (OCT 2021) (M/OAA-DEV-FAR-22-01c)

(a) Definition. As used in this clause - United States or its outlying areas means—

- (1) The fifty States;
- (2) The District of Columbia;
- (3) The commonwealths of Puerto Rico and the Northern Mariana Islands;
- (4) The territories of American Samoa, Guam, and the United States Virgin Islands; and
- (5) The minor outlying islands of Baker Island, Howland Island, Jarvis Island, Johnston Atoll, Kingman Reef, Midway Islands, Navassa Island, Palmyra Atoll, and Wake Atoll.

(b) Authority. This clause implements Executive Order 14042, Ensuring Adequate COVID Safety Protocols for Federal Contractors, dated September 9, 2021 (published in the Federal Register on September 14, 2021, 86 FR 50985).

(c) Personal Services Contracts with individuals. As a matter of policy, the contractor must comply with the USAID’s guidance applicable to direct-hire federal employees.

(End of clause)

3. Contract Cover Page form AID 309-1 available at <https://www.usaid.gov/forms>

Pricing by line item is to be determined upon contract award as described below:

ITEM NO (A)	SUPPLIES/SERVICES (DESCRIPTION) (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	Base Period -Compensation, Fringe Benefits and Other Direct Costs (ODCs) - Award Type: Cost - Product Service Code: R497 - Accounting Info: GH-C-POP	1	LOT	\$ _TBD_	\$_TBD at Award after negotiations with Contractor

1001	Option Period 1 -Compensation, Fringe Benefits and Other Direct Costs (ODCs) - Award Type: Cost - Product Service Code: R497 - Accounting Info: GH-C-POP	1	LOT	\$ _TBD_	\$_TBD at Award after negotiations with Contractor
2001	Option Period 2 -Compensation, Fringe Benefits and Other Direct Costs (ODCs) - Award Type: Cost - Product Service Code: R497 - Accounting Info: GH-C-POP	1	LOT	\$ _TBD_	\$_TBD at Award after negotiations with Contractor
3001	Option Period 3 -Compensation, Fringe Benefits and Other Direct Costs (ODCs) - Award Type: Cost - Product Service Code: R497 - Accounting Info: GH-C-POP	1	LOT	\$ _TBD_	\$_TBD at Award after negotiations with Contractor

4. Acquisition and Assistance Policy Directives/Contract Information Bulletins (AAPDs/CIBs) for Personal Services Contracts with Individuals available at <http://www.usaid.gov/work-usaid/aapds-cibs>.

- AAPD22-02 Telework and Remote Work Policy for U.S. Personal Services Contracts with Individuals
- AAPD 21-05 Revised and Expanded Fringe Benefits for U.S. Personal Services Contractors
- AAPD 21-04 (Revision 4) Executive Order 14042 on Ensuring Adequate COVID-19 Safety Protocols for Federal Awards
- AAPD 21-01 Applicability of FAR 4.21 to USAID personal services contracts with individuals under the AIDAR Appendices D and J
- AAPD 20-08 Leave and Holidays for CCNPSCs and TCNPSCs, including country leave for qualifying posts for eligible TCNPSCs
- AAPD 18-02 (Revision 2) Revisions to Medevac Policies for USPSCs and TCNPSCs
- AAPD10-01: Changes in USG Reimbursement Amounts For Health Insurance And Physical Examination Costs
- AAPD 06-10: PSC Medical Expense Payment
- AAPD 06-08: Using the Optional Schedule to Incrementally Fund Contracts

5. Ethical Conduct. By the acceptance of a USAID personal services contract as an individual, the contractor will be acknowledging receipt of the “Standards of Ethical Conduct for Employees of the Executive Branch,” available from the U.S. Office of Government Ethics, in accordance with General Provision 2 and 5 CFR 2635.

See https://www.oge.gov/web/oge.nsf/resources_standards-of-conduct

6. PSC Ombudsman. The PSC Ombudsman serves as a resource for any Personal Services Contractor who has entered into a contract with the United States Agency for International Development and is available to provide clarity on their specific contract with the agency. Please visit our page for additional information: <https://www.usaid.gov/work-usaid/personal-service-contracts-ombudsman>

The PSC Ombudsman may be contacted via: PSCOmbudsman@usaid.gov

END OF SOLICITATION