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# Acquisition & Assistance Policy Directive (AAPD)

From the Director, Office of Acquisition & Assistance Issued: December 18, 2019

## AAPD 18-02 REVISED

### Revisions to Medevac Policies for USPSCs and TCNPSCs

Subject Category: Personal Services Contracts  
Type: POLICY

AAPDs provide information of significance to all agency personnel and partners involved in the Acquisition and Assistance process. Information includes (but is not limited to): advance notification of changes in acquisition or assistance regulations; reminders; procedures; and general information. Also, AAPDs may be used to implement new requirements on short-notice, pending formal amendment of acquisition or assistance regulations.

AAPDs are EFFECTIVE AS OF THE ISSUED DATE unless otherwise noted in the guidance below; the directives remain in effect until this office issues a notice of cancellation.

This AAPD:  Is New  Replaces/  Amends AAPD 18-02

<p>Applicable to:</p> <p><input checked="" type="checkbox"/> Existing awards; <input checked="" type="checkbox"/> Modification required</p> <p><input type="checkbox"/> No later than</p> <p><input checked="" type="checkbox"/> As noted in guidance below*</p> <p><input checked="" type="checkbox"/> All applicable solicitations and new awards issued after the effective date of this AAPD.</p> <p><input type="checkbox"/> Other</p>	<p>Precedes change to:</p> <p><input type="checkbox"/> FAR Part(s)</p> <p><input checked="" type="checkbox"/> AIDAR Part(s) <b>Appendices D and J</b></p> <p><input type="checkbox"/> USAID Automated Directives System (ADS) Chapter</p> <p><input type="checkbox"/> Other Code of Federal Regulations</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> No change to regulations</p>
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New Provision/Clause Provided Herein: If checked, scheduled update to GLAAS: **December 20, 2019**

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/s/  
Mark A. Walther

## **I. PURPOSE:**

The purpose of this revised AAPD is to update the Medevac clause for U.S. personal services contractors (USPSCs) performing abroad, and USPSCs who are on official travel status abroad on temporary duty or training. This AAPD also substantively updates the Medevac clause for Third-Country National Personal Services Contractors (TCNPSCs). These changes are effective **December 18, 2019, until December 18, 2021**, pending rulemaking.

## **II. REQUIRED ACTION:**

1. Contracting Officers (COs), including warranted EXOs, must incorporate the revised **AIDAR Appendix D, General Provision contract clause (GP) 25, “Medical Evacuation (Medevac) Services”** or the **Appendix J, GP 21, “Medical Evacuation (Medevac) Services”**, in Attachment 1, as applicable, in all new solicitations and awards for USPSCs or TCNPSCs effective as of the issuance date of this AAPD.
2. COs must also modify existing awards to USPSCs and TCNPSCs to replace the previous clause with the revised AIDAR Appendix D, GP 25 or Appendix J, GP 21, as applicable. COs, at their discretion, may replace the GP immediately or when executing the next modification.

## **III. BACKGROUND:**

As publicized in the prior AAPD 18-02 and approved under class deviation number M-OAA-DEV-AIDAR-18-3c, USAID authorized contractors to be provided Medevac services directly through the Department of State, Bureau of Medical Services (MED). The new class deviation number M-OAA-DEV-AIDAR-20-3c, which underlies this AAPD 18-02 REVISED, further revises AIDAR Appendix D to extend the provision of Medevac services also to U.S.-based USPSCs and Resident-Hire USPSCs while on official travel status abroad on temporary duty or training.

The new deviation also revises AIDAR Appendix J to reinstate and refine the current AIDAR Appendix J clause in the code of federal regulations (CFR) that requires TCNPSCs to obtain their own private Medevac insurance. Based on consultations with MED after issuance of AAPD 18-02, M/OAA was informed that complications with obtaining visas for TCNPSCs make it impossible in some cases for MED to directly provide Medevac services to TCNPSCs. The revised AIDAR Appendix J clause is necessary to ensure that TCNPSCs can be provided Medevac services that are logistically feasible to both State MED and non-MED Medevac countries. The revised clause also requires all TCNPSCs to obtain international health insurance coverage to ensure that medical care costs will be covered in countries outside the contractor’s primary place of performance. Finally, the revised clause provides that USAID will fully reimburse the cost of private Medevac coverage obtained by such contractors for the duration of the contract period of performance.

The new class deviation number M-OAA-DEV-AIDAR-20-3c was approved on December 18, 2019 for a period of two years, **expiring on December 18, 2021**, or earlier if revised in the AIDAR through the formal rule-making process.

**IV. GUIDANCE:**

The revised AIDAR Appendix D, GP 25, and the revised and updated Appendix J, GP 21, authorized by class deviation number M-OAA-DEV-AIDAR-20-3c are included in **Attachment 1** to this AAPD 18-02 REVISED.

The CO must include the applicable GP in all new solicitations and awards; and current awards must be modified to include the applicable revised GP, either immediately or no later than when the next modification is executed.

**V. POINT OF CONTACT:**

USAID COs may direct questions regarding this AAPD to the PSC Policy Mailbox at [psepollicymailbox@usaid.gov](mailto:psepollicymailbox@usaid.gov).

**ATTACHMENT 1**

**Class Deviation M-OAA-DEV-AIDAR-20-3c**

Title 48 of the Code of Federal Regulations (CFR) Chapter 7  
USAID Acquisition Regulation (AIDAR)

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**APPENDIX D--DIRECT USAID CONTRACTS WITH A U.S. CITIZEN OR A U.S. RESIDENT ALIEN FOR PERSONAL SERVICES ABROAD**

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12. General Provisions for a Contract With a U.S. Citizen or a U.S. Resident Alien for Personal Services Abroad

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**25. Medical Evacuation (Medevac) Services**

[Insert the following clause in all USPSC contracts.]

**Medical Evacuation (Medevac) Services (DEC 2019)**

A contractor who is required to relocate abroad and accompanying eligible family members; or a contractor on official travel status abroad on temporary duty or training, will be provided Medevac services through the Department of State, Bureau of Medical Services, similar to that provided to U.S. Government employees in 16 FAM 300 Medical Travel. Medevac costs that will be covered by USAID include travel and per diem, but do not include medical care costs.

To be eligible for Medevac services covered by the Department of State Medevac program, the contractor and accompanying eligible family members must obtain and maintain international health insurance coverage in accordance with the clause of the contract entitled, "Insurance."

[END CLAUSE]

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**APPENDIX J--DIRECT USAID CONTRACTS WITH A COOPERATING COUNTRY NATIONAL AND WITH A THIRD- COUNTRY NATIONAL FOR PERSONAL SERVICES ABROAD**

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12. General Provisions for a Contract With a Cooperating Country National or With a Third-Country National for Personal Services

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**21. Medical Evacuation (Medevac) Services**

[Insert the following clause in all TCNPSC contracts.]

**Medical Evacuation (Medevac) Services (DEC 2019)**

(a) The contractor, and accompanying eligible family members based on the status defined in **16 FAM 122.2**, must obtain and maintain comprehensive Medevac insurance throughout the contract period of performance abroad. The contractor must ensure that the Medevac insurance policy includes coverage for Medevac to Department of State's Bureau of Medical Services (MED) Medevac center(s) designated for the post in order for MED to assist with coordination.

The contractor and accompanying eligible family members must obtain and maintain international health insurance coverage in accordance with the clause of the contract entitled, "Insurance."

USAID will reimburse the contractor for the total cost of Medevac insurance. The contractor must provide proof of Medevac insurance to the contracting officer in order to receive reimbursement.

(b) For the contractor or eligible family members with Health Unit access, MED may coordinate Medevac services with the contractor's private Medevac insurance provider. In such cases, the individual must be able to obtain the required visa for the country where the nearest MED Medevac center is located. If the contractor or eligible family member is not able to obtain the required visa for the country where the nearest MED Medevac center is located, MED will attempt to find an acceptable alternate Medevac site. If MED cannot find an alternate site, depending on the specific medical need, the individual may be medically evacuated to the home country of record, or may be required to remain at the current location for continuing treatment.

If the contractor or eligible family member is medically evacuated, MED may assist in coordinating medical care, and will determine if the individual is cleared to return to the Mission. If MED determines it is not able to coordinate the medical care, either at an alternate Medevac site or the home country of record, the contractor will be responsible for contacting MED Medical Clearances to obtain clearance for return to post. The contractor must provide MED the required medical documentation of diagnosis, a treatment plan and statement by the treating providers clearing the contractor or eligible family member to return to post, for MED to make a clearance decision.

(c) If the contractor has exhausted all earned leave and cannot return to post in a reasonable period of time, as determined by the contractor's supervisor, the contracting officer may terminate the contract.

(d) *Exceptions.* (1) A contractor and eligible family members with a health insurance policy that includes sufficient Medevac coverage as approved by the contracting officer are not required to obtain separate Medevac insurance.

(2) The Mission Director at the place or performance may make a written determination to waive the requirement for Medevac insurance. The determination must be based on findings that the quality of local medical services or other circumstances obviate the need for such insurance for the contractor and eligible family members located at post.

[END CLAUSE]