# CONTRACT DATA REQUIREMENTS LIST

*(1 Data Item)*

*Form Approved*
*OMB No. 0704-0188*

The public reporting burden for this collection of information is estimated to average 110 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Executive Services and Communications Directorate (0704-0188). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. **Please do not return your form to the above organization. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E.**

| A. CONTRACT LINE ITEM NO. | B. EXHIBIT | C. CATEGORY: TDP _____ TM _____ OTHER _____ |
|---|---|---|
| | | |

| D. SYSTEM/ITEM | E. CONTRACT/PR NO. | F. CONTRACTOR |
|---|---|---|
| | HT9402-10-C-0002 | |

| 1. DATA ITEM NO. | 2. TITLE OF DATA ITEM | 3. SUBTITLE | 17. PRICE GROUP |
|---|---|---|---|
| N/A | P100 Disease Management Program Plan | | NSP |

| 4. AUTHORITY *(Data Acquisition Document No.)* | 5. CONTRACT REFERENCE | 6. REQUIRING OFFICE | 18. ESTIMATED TOTAL PRICE |
|---|---|---|---|
| N/A | RFP C.6.MM.4. | TMA-OCMO/TRO-Prog Ops | 0.00 |

| 7. DD 250 REQ | 9. DIST STATEMENT REQUIRED | 10. FREQUENCY | 12. DATE OF FIRST SUBMISSION |
|---|---|---|---|
| NO | B | ANNLY | See Block 16 |

| 8. APP CODE | 11. AS OF DATE | 13. DATE OF SUBSEQUENT SUBMISSION |
|---|---|---|
| N/A | N/A | See Block 16 |

**16. REMARKS**

Block 12 - No later than the start of health care delivery
Block 13 - No later than the start of each option period

The contractor shall submit a DM Program Plan. The contractor shall include a plan for accounting and reporting on the cost and performance of all DM programs, plus provide the specific guidelines and protocols to be utilized.

**14. DISTRIBUTION**

| a. ADDRESSEE | b. COPIES Draft | Final Reg | Final Repro |
|---|---|---|---|
| Submit through the | | | |
| TMA E-commerce | | | |
| Extranet | | | |
| 15. TOTAL → | 0 | 0 | 0 |

| G. PREPARED BY | H. DATE | I. APPROVED BY | J. DATE |
|---|---|---|---|
| Carol L. McCourt | | Laura L. Sells | |



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