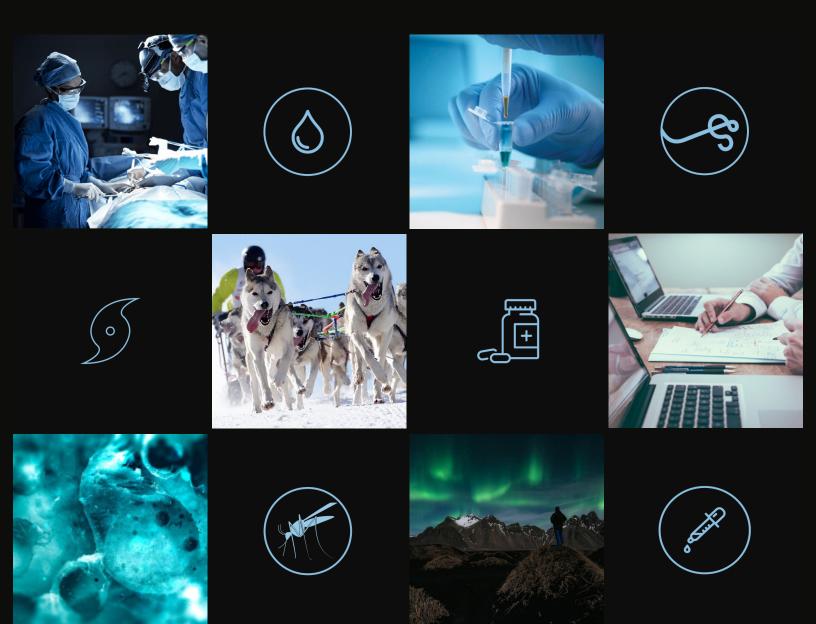


CAPABILITIES 2024

DISCOVERING · TRANSLATING · CHANGING



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Eagle Health Analytics, LLC (EHA) is a certified 8(a) Alaska Native Corporation (ANC) that contracts with federal agencies and military partners through both the direct award and competitive procurement processes. Over the last decade, we have demonstrated a commitment to public health. We offer extensive past performance on an international scale including work dedicated to disease eradication, vaccine access, and deployments to challenging international worksites. Our strongest core competencies combine expertise in Infectious Diseases and Public Health Emergencies with extensive Public Health Communication experience and proof-of-concept research. We provide the skilled personnel and resources necessary to bring effective contracting strategies to federal agencies. EHA is committed to providing the best clinical, laboratory, and administrative support services thereby increasing efficiency, streamlining workflow processes, and ensuring the success of the mission.

ABOUT US

EHA understands, lives and shares a unique culture. It is through this path that we naturally attract the best talent, and inspire and empower employees to own, innovate and drive business results. EHA is a wholly-owned subsidiary of the Bristol Bay Native Corporation (BBNC), an Alaskan Native Corporation with operations in government services, construction, industrial services, and tourism. To learn more about Bristol Bay Native Corporation visit bbnc.net.

CONTRACTING INFORMATION Primary NAICS: 541715 EHA DUNS: 081341367 EHA CAGE code: 85TV8

U.S. Small Business Administration Business Opportunity Specialist Mr. Fernando Cervantes SBA District Office 801 West Riverside Ave, Suite 444 Spokane, WA 98121 Email: <u>fernando.cervantes@sba.gov</u>

LEADERSHIP



JAMES M. WATT, PHD

Dr. Jim Watt is the VP of Life Sciences for Eagle Health Analytics and the Chief Scientist for the Eagle Medical Group. He has over 20 years of experience in life science research with a focus on infectious diseases and genomics. He is a co-inventor on multiple vaccine and delivery technologies targeted to providing low cost vaccines to resource limited communities. His experience as a NIH postdoctoral scholar in academia, a research scientist in private industry and a subject matter expert (SME) supporting federal public health programs allows him to provide valuable scientific and technical expertise to his clients. As the principal scientific advisor to EHA's professional staff, he has responsibility for assuring all scientific and technological core competencies maintain the highest standards for excellence, responsible conduct, and integrity.



CHERYL MILLER, MS

Cheryl Miller is the Director of Program Management for CDC Operations for Eagle Health Analytics. Cheryl brings over 19 years management experience. She provides eight years of IDIQ contract program management for professional support to the CDC with the continuity of seven years servicing the Division of Global Migration and Quarantine (DGMQ). Since 2008, she has seamlessly transitioned contracts obtaining historically low turnover rates, smooth contract transitions, and performance continuity. Her success managing more than 300 CDC contractors is attributed to her strong background in Human Resources, adaptability to evolving branch missions, excellent interpersonal skills, and her general desire to support the overall CDC mission.



MARK GREENBERG, JD, MBA

Mark Greenberg is the Senior Director of Eagle Health Analytics and serves in support of Corporate Development and Relationship Management. Mr. Greenberg graduated from the University of Florida with a Bachelor of Science in Finance. He received his Juris Doctor in Law and his Masters of Business Administration with a concentration in Corporate Finance from Stetson University in 2011. He is a member of the Florida Young Lawyers Division as well as a member in good standing of the Florida Bar Association.



EVEN SKJERVOLD, MS, MBA

Even Skjervold is the Senior Program Manager for Biomedical Engineering for Eagle Health Analytics. He received his Masters Degree in Bioengineering and MBA in Entrepreneurship and Innovation from Clemson University in 2014. Prior to joining EHA, he launched the biotech venture SouthYeast Labs with one of his former Clemson instructors. Even combines the domain expertise and logical, sequential flow of engineering with business acumen to serve as a "big picture engineer" specializing in scale-up solutions. Even has helped manage multiple contracts providing scientific support to the CDC.



DUSTIN ANDERSON

Dustin Anderson is a Director for Eagle Health Analytics, primarily supporting clients in the National Capital Region (NCR). Dustin has 24 years of proven performance with an emphasis on healthcare IT development, telemedicine implementation, integrative medicine support, business analysis, project management and process improvement. Dustin's experience spans multiple industries and comes with relevant knowledge of program management approaches, the software development lifecycle (SDLC), service-oriented architecture, process improvement methodologies and requirements management best practices. Dustin is a skilled analyst who excels at building productive relationships with EHA clients and staff.



MARIE ERICSSON

Marie Ericsson is Operations Manager for Eagle Health Analytics. She is formerly Senior Program Manager of Scientific and Biomedical Research, primarily supporting federal public health programs and DoD and HHS research projects. Marie has 16 years of experience facilitating and supporting a variety of scientific research for the AF, Army, FDA, CDC and academia. Marie previously specialized in overseeing DoD and federal research projects from inception to completion - including navigating funding and regulatory processes and approvals, managing daily operations and staff management, to research presentation and manuscript publication. She now manages corporate operations for EHA.

SAMANTHA HUNE, BS, PMP, MB(ASCP)

Samantha Hune is a Program Manager for EHA, supporting clients in CONUS and OCONUS regions. She graduated from Texas A&M University with a BS in Biomedical Science, received her Molecular Biology Technologist certification from ASCP in 2014, and her PMP certification from PMI in 2023. Samantha has 4 years of experience in Contract Management, and 8 years in executing Scientific Research. She oversees the AF Drug Testing Laboratory at JBSA-Lackland in TX, Surge Laboratory Support Services at Camp Zama in Japan, and Emergency Room Physician Services at Bassett Army Community Hospital in AK. Samantha has extensive experience in resource and time management; her interpersonal acumen, customer responsiveness, and ingenuity for problem-solving has allowed her to excel at overseeing DoD and DHA contracts.



BARRY COPELAND, BBA IN MANAGEMENT

Barry Copeland is a Program Manager and Business Development Manager for EHA. Barry supports clients in multiple regions, with a primary focus on supporting projects and programs at the Centers for Disease Control and Prevention. Barry graduated from the University of West Georgia with a Degree in Business Management; he received his degree from West Georgia in 1983. Barry offers 34 years of Federal Government experience in Government Contracting, as well as Management and Operations. Barry has extensive experience in contract management & operation (cradle to grave), budgeting, and program management & operations.

Infectious Diseases

PUBLIC HEALTH SUPPORT

Eagle Health Analytics (EHA) exceeds expectations through our support of the nation's top public health infectious disease programs. We provide professional and technical expertise to the CDC, FDA, and DoD, and we are focused on helping our country and international partners prepare and respond to emerging infectious disease outbreaks. EHA works with our partners to advocate for the judicial and responsible use of antibiotics. Time and again, EHA is sought out to lead the response to infectious disease outbreaks including new tasks and deployments for the SARS-CoV-2 pandemic, ongoing work with Zika, responses to the Ebola outbreaks in West Africa, and myriad other projects and contracts dedicated to reducing morbidity and mortality while reducing costs and streamlining the logistics required to rapidly diagnose and treat patients. Our past and present work reduces the disease burden and the cost to local and government public health entities.



NATIONAL CENTER FOR IMMUNIZATION AND RESPIRATORY DISEASES (NCIRD)

EHA provides professional, technical, scientific, epidemiological and public health support to NCIRD/DVD/RVB via an IDIQ contract vehicle. This work involves the prevention and control of respiratory viruses including coronaviruses, Respiratory Syncytial Viruses (RSV), HMPV, parainfluenza viruses, rhinoviruses, and adenoviruses. Our work with the Respiratory Syncytial Viruses Team supports the CDC's mission, goals and objectives by providing data scientists with extensive epidemiological and data quality experience (e.g., SAS, R, SUDAAN); scientific/medical communication professionals with proficiency in large-scale joint ventures; technical/program support staff, including in the Office of the Branch Chief. EHA seeks out personnel with experience in data retrieval and analysis from the New Vaccine Surveillance Network (NVSN) and National Respiratory and Enteric Virus Surveillance System (NREVSS).

DIVISION OF GLOBAL HIV & TUBERCULOSIS (DGHT)

EHA provides scientific and professional services in support of the CDC's Division of Global HIV & Tuberculosis (DGHT) and has recently been awarded a new five-year IDIQ contract, through a competitive procurement process. This IDIQ aims to continue our efforts of preventing the spread of HIV globally. The CDC's DGHT is a key U.S. Government implementer of the President's Emergency Plan for AIDS Relief (PEPFAR).

DIVISION OF HEALTHCARE QUALITY PROMOTION (DHQP)

EHA supports the DHQP in the investigation and response to emerging infections and adverse events in healthcare facilities. This work includes reduction in healthcare-associated infections, development of evidence-based guidelines, and the dissemination of accurate healthcare data through the National Healthcare Safety Network (NHSN).

GLOBAL DISEASE DETECTION LABORATORY TEAM (GDDLT)

EHA provides senior leadership to the Global Disease Detection Laboratory Team (GDDLT) within the CDC's Division of Global Health Protection (DGHP). To this end, EHA Senior Scientists collaborate with the Ministries of Health (MoH); staff from GDD (including centers and other countries requesting assistance), DGHP, CGH and other Center Institute Offices (CIO); and external partners to assess partner country laboratory system capacity and needs. EHA also assists in the development and implementation of country-specific laboratory system enhancements. Our support provides technical assistance to GDD leadership and gives policy-related oversight to GDD's cooperation with host countries. As a technical resource, EHA trains specialists and mentors in a broad range of clinical and public health laboratory disciplines with particular emphasis on laboratory systems, microbiology bench training, laboratory establishment, and strategic planning for Global Health Security.

DIVISION OF BACTERIAL DISEASES (DBD)

EHA works full-time in Burkina Faso and leads support for the U.S. Global Health Security Agenda's (GHSA) new RESPIRE project which focuses on strengthening surveillance and laboratory capacity to detect and respond to clusters of severe acute respiratory infections (SARI) in hospitals and communities. RESPIRE is designed to show measurable health impact within a short period of support.

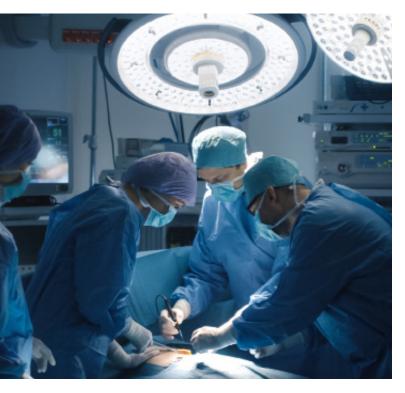
DIVISION OF GLOBAL MIGRATION & QUARANTINE (DGMQ)

Currently, the United States requires health screening for all long term permanent resident (LPR) visa applicants and all refugees, no matter the country of origin. The DGMQ partnered with EHA in its challenge to meet the five-year "Combating Antibiotic-Resistant Bacteria" (CARB) goal for doubling the number of migrants that are screened for Tuberculosis (TB).

Military Medical Research & Healthcare

RESEARCH AND CLINICAL CARE

EHA provides essential medical care and helps develop the most innovative medical technologies that transcend all domains of Military Medicine. As a Life Sciences company, we have developed extensive core capabilities that allows us to reach our customers' crucial needs both in research and operations. EHA fully utilizes the resources available through these ongoing projects, and we recognize the importance of applying lessons learned through military medicine to all areas of public health. Our medical professionals, scientists and laboratory staff have established well-respected relationships with many military medical research sites and hospitals; the innovations and trusted support developed through these partnerships will improve the treatment of all military personnel, and improve public health measures and healthcare for the country as a whole.



EMERGENCY DEPARTMENT & MILTARY PHARMACY SUPPORTSUPPORT

EHA currently supports contracts for core medical personnel at Army hospitals in Washington and Alaska. We are experienced in recruiting medical professional personnel for DoD, DHA and HHS initiatives, as well as hiring and retaining expert staff in remote areas. Our ED Physicians at Bassett Army Community Hospital, at Fort Wainwright, AK provide acute, episodic and emergency patient care on a full-time basis to a diverse beneficiary population. At Joint Base Lewis-McChord, Madigan Army Medical Center (MAMC), EHA provides full staffing for the Inpatient and Outpatient Pharmacies, as well as staff for the MAMC ED with Emergency Room Physicians and Certified Nursing Assistants.

OPERATION WARP SPEED

EHA is a Prime Contract holder for the U.S. Army's Program to Provide Convalescent Plasma as Emergency Treatment For COVID-19. The services required are in support of the Armed Services Blood Program's (ASBP) mission to collect, process, test and provide quality COVID-19 convalescent plasma and other blood products from volunteer donors and to coordinate the distribution of blood products to Military Treatment Facilities worldwide in order to provide life-saving therapeutics to patients infected with SARS-CoV-2.

This contract was funded through the White House's Operation Warp Speed (OWS). Launched in May 2020, OWS is a groundbreaking partnership between multiple Federal agencies, the scientific community, and the private sector which develops and delivers safe and effective countermeasures to COVID-19. Following the Food and Drug Administration's (FDA) emergency approval of the use of convalescent serum as a treatment for patients infected with SARS-CoV-2, EHA immediately devoted all available resources to the support of this critical mission.

USAF 59TH MEDICAL WING SCIENCE & TECHNOLOGY

EHA provides Professional/Technical support for the 59th's mission at Lackland AFB, San Antonio, TX; this mission involves conducting clinical studies and translational research to enhance performance, protect the force, advance medical care and capabilities across the global health system and train future medical leaders. It is through these efforts that EHA aids in growing medical leaders, driving innovations in patient care and readiness.

Active Programs that EHA supports include:

- Trauma & Clinical Care Research Program
- Clinical Investigations & Research Support
- Diagnostics & Therapeutics Program
- Center for Advanced Molecular Detection
- Nursing Research
- Air Force Post Graduate Dental School & Clinic
- Dental Research

DEFENSE HEALTH AGENCY (DHA)

EHA provides senior-level expertise to support the Defense Health Agency (DHA). EHA helps the DHA lead the Military Health System integrated system of readiness and health to:

- Implement shared services with common measurement of outcomes (e.g., telemedicine, integrative medicine);
- Enable rapid adoption of proven practices, helping reduce unwanted variation and improving the coordination of care across time and treatment venues (e.g., military medical treatment facilities);
- Exercise management responsibility for joint shared services and the TRICARE Health Plan; and
- Act as the market manager for the National Capital Region (NCR) enhanced Multi-Service Market, which includes Walter Reed National Military Medical Center (WRNMMC) and Fort Belvoir Community Hospital (FBCH).

COVID-19 LABORATORY SURGE SUPPORT

EHA supports the mission of the Public Health Laboratory Enterprise (PHLE) to provide quality sample analysis results in a timely manner to protect military personnel and civilians. In order to address the increased laboratory testing capacity required to mitigate the COVID-19 pandemic, EHA was selected to provide expert Senior Clinical Laboratory Consultants, Senior Scientists, and Laboratory Technicians to serve both Camp Zama in Japan and Camp Humphreys in South Korea. This Manpower Services Contract is mission critical to support the current testing for COVID-19 and other emerging microbiological concerns in the Pacific; at present, current staffing levels at Public Health Lab Pacific in Camps Zama and Humphreys are inadequate to sustain the projected and impending workload surge for the COVID-19 samples. EHA quickly drew upon our catalog of Public Health Laboratory professionals to meet the requirements and ensure efficient, accurate laboratory support and to provide complex clinical laboratory consulting in challenging environments.

CLINICAL RESEARCH LABORATORY AT KEESLER AFB

Through support from an Air Force modernization contract, EHA scientists began to search for cutting edge diagnostic tests to guickly identify a comprehensive panel of respiratory pathogens in an instrument that can be used by technicians with limited medical training. This technology integrates sample preparation, amplification, detection, and analysis into one simple system that requires two minutes of hands-on time and has a total run time of one hour; the process was claimed by Idaho Technologies in the prototype device known as the FilmArray® Instrument. The potential applications of the FilmArray® extend beyond the scope of military medicine and will likely make significant differences in public health support in the future.

COMPREHENSIVE PUBLIC HEALTH PROMOTION

EHA supports the Army's Public Health Center's (APHC) Technical Directorate's mission to promote health and prevent disease, injury, and disability of soldiers and military retirees, their families, and the Department of the Army civilian employees. In addition, EHA assists the APHC to assure effective execution of full spectrum veterinary service for Army and Department of Defense Veterinary missions. EHA provides APHC with mission required subject matter experts to supplement and enhance the existing workforce with training and operational support in the following areas:

- Health Promotion
- Clinical Public Health and Epidemiology
- Animal Health and Food Protection
- Workplace Hazard Assessment and Control
- Environmental Health
- Laboratory Sciences
- Toxicology and Public Health Information

APHC is world-class provider of public health services across DA and DoD. The APHC's institutional and operational missions encompasses measures to protect, promote, improve, or conserve the mental and physical well-being of soldiers, DA civilians, family, military working dogs and other animals.

G-3/5/7 AND THE INTEGRATED DISABILITY EVALUATION SYSTEM ARMY MEDICAL COMMAND

EHA currently provides strategic, operational, and tactical analysis, planning, programming, and implementation of solutions support to the US Army's Medical Command G-3/5/7 and the Integrated Disability Evaluation System (IDES) Service Line (SL). This contract also supports the Medical Evaluation Board Tracking Office (MEBTO) and G-37, Medical Readiness Division and the execution of the Medically Not Ready Line of Effort (LOE). The MEDCOM IDES SL is responsible for a coordinated, synchronized and integrated comprehensive program to support the Army Force Generation (ARFORGEN), the medical readiness of the Army with specific focus on medical board process timing, timeliness, capability and capacity expansion, policy development, training, etc., in consultation and coordination with the U.S. Army G-1, Disability Evaluation System (DES) program and the Veterans Administration.

CLINICAL SUPPORT FOR STI/HIV BEHAVIORAL INTERVENTIONS

EHA supports the US Military HIV Research Program (MHRP), Walter Reed Army Institute of Research (WRAIR) by providing clinical support for a randomized controlled trial designed to assess acceptability and efficacy of an adapted STI/HIV behavioral intervention program in a population of US Army personnel and their medical beneficiaries. MHRP implements the President's Emergency Plan for AIDS Relief (PEPFAR) prevention and treatment initiatives, building strong and trusting relationships within the communities where research is conducted.

ARMY MEDICAL RESEARCH

EHA provides professional/technical support to a wide array of military research programs including the Institute of Surgical Research, U.S. Army Medical Research Institute of Chemical Defense, U.S. Army Public Health Center, DoD/ VA Extremity Trauma and Amputation Center of Excellence, and DoD Hearing Center of Excellence.

CASUALTY CARE FOR WOUNDED WARRIORS

The Institute of Surgical Research's (USAISR) mission is to provide combat casualty care medical solutions and products for wounded warriors, from self-aid through definitive care across the full spectrum of military operations. EHA supports three unique missions for the USAIR:

- To provide requirement driven innovations in combat casualty care advance medical care for injured services members
- As the only Burn Center in the DoD that provides state of the art burn, trauma, and critical care to injured war fighters and DoD beneficiaries around the world
- Through the Joint Trauma System, provide a performance improvement system dedicated to ensuring that medical care is organized according to the needs of the patient.

MEDICAL EVALUATION TESTING

EHA's support provides Aeromedical Certification Examinations for NASA-ARC personnel, including NASA contractors, who need the certification in order to perform work duties in support of a NASA flight mission; we performed critical aeromedical evaluations for NASA to identify any health condition that may cause sudden or subtle incapacitation interfering with the individual's ability to perform assigned duties or compromise the health and safety of self or others for contractor staff in support of NASA. Our personnel submitted "Qualified Non-Crewmember (QNC)" certifications based on the results. EHA employs a Medical Director and Laboratory Technicians to fulfill Federal Occupational Health (FOH) needs at the 05A at NASA.

OUR MILITARY PARTNERS



Public Health Emergency Response

GLOBAL OUTREACH

EHA provides support for Public Health Emergency Response both domestically and internationally through personnel deployments and remote access. EHA works with the CDC's Center for Global Health (CGH) via a five-year IDIQ contract vehicle which covers training, digital/print/broadcast communications, and research. Our specialists offer comprehensive public health emergency communication, epidemiology, data science, and diagnostic services for infectious diseases and other public health threats to all countries including West Africa, Puerto Rico, and most recently on a global scale in response to SARS-CoV-2. EHA experts are actively working with the CDC's Emergency Operations Center (EOC) and the Joint Information Center (JIC) to reduce the impact of coronavirus disease 19 (COVID-19).





CORONAVIRUS DISEASE 19 (COVID-19)

On December 31, 2019, a novel coronavirus was identified in Wuhan City, Hubei Province, China; this virus is named SARS-CoV-2 and causes coronavirus disease 19 (COVID-19). The World Health Organization (WHO) declared the outbreak a public health emergency of international concern (PHEIC) on January 30, 2020, and the Centers for Disease Control of Prevention (CDC) classified the outbreak as a public health emergency (PHE) on January 31, 2020.

EHA supports the global effort to address and contain SARS-CoV-2 and reduce the morbidity and mortality of COVID-19. Media consultants staff the Joint Information Center (JIC) and consult on JIC strategy and content. EHA's numerous medical communication specialists work directly with the CDC's Emergency Operations Center (EOC) to provide updates via digital/print/broadcast media. EHA's scientists lead novel assay development to expedite the accurate diagnosis of COVID-19. Our epidemiologists and data scientists support CDC's mission on site and through deployments, as needed. EHA recruited subject matter experts to provide a cohesive response to SARS-CoV-2 and assist the global public health community with the mitigation of the disease.

PREGNANCY & BIRTH DEFECTS TASK FORCE (PBD): ZIKA

The CDC activated the Zika Emergency Operations Center (Zika EOC) on January 24, 2016. EHA was selected by CDC leadership to internationally deploy public health professionals for the Zika response in Colombia, Puerto Rico, and Brazil; EHA also supports the Pregnancy and Birth Defects Task Force (PBD).

EHA met and surpassed mission requirements by organizing highly specialized teams to implement public health objectives at the source of the outbreak. Our support for Zika EOC and PBD Task Force include technical support, surveillance, epidemiology, data management, laboratory/ diagnostic, communications, bio-statistical expertise, and clinical care.

HURRICANE MARIA (2017) IN PUERTO RICO

Hurricane Maria made landfall in Puerto Rico on September 20, 2017, as a Category 4 storm. Maria damaged the island's infrastructure; severely limited access to potable water, electric power, transportation, and communications; and impacted public health on the island including the disruption of disease surveillance and diagnostic testing normally provided by the Puerto Rico Department of Health (PRDH).

EHA partnered with the CDC and other federal, state, and nongovernmental colleagues to rapidly deploy to Puerto Rico following the storm. EHA digital media specialists developed and refined communication materials and updated CDC web pages to rapidly update stakeholders and the public during outbreak investigations; in particular, EHA professionals were integral to the support of Water, Sanitation and Hygiene (WaSH) objectives and the development of the Hurricane Preparedness Toolkit.

EHA maintains a presence in Puerto Rico and continues to provide expertise in the areas of epidemiology, diagnostic testing, and digital/ print/broadcast media in the pursuit of improved Emergency Preparedness for future hurricanes and all related public health concerns in the region.

TRACKING AND CONTAINING PANDEMICS

The CDC's Division of Global Migration and Quarantine (DGMQ) works to prevent infectious diseases and other diseases of public health significance from entering and disseminating in the United States.

EHA provides a large staff of public health professionals focused on developing and maintaining infectious disease surveillance systems for immigrant, refugee, and migrant populations; outbreak investigations; leadership and technical assistance; health information dissemination to state and local public health partners through the Electronic Disease Notification system; and oversight of the Migrant Serum Bank.

SPOTLIGHT: GLOBAL VACCINATION INITIATIVES

INTERNATIONAL OUTREACH

EHA provides support for Vaccine Preventable Disease initiatives both domestically and internationally through personnel deployments and remote access. EHA works with the CDC's Center for Global Health (CGH) via a five-year IDIQ contract vehicle which covers training, digital/print/broadcast communications, and research. Our specialists in the Global Immunization Division (GID) offer comprehensive public health emergency communication, epidemiology, data science, and diagnostic services for infectious diseases and other public health threats to all countries including West Africa, Haiti, Puerto Rico and most recently on a global scale in response to SARS-CoV-2. Several of our sister companies have recently been granted approval by the Department of Labor to work on Life Science projects in Afghanistan. We actively recruit and retain personnel who provide on-the-ground support on international deployments, and we utilize a Foreign Travel Working Group to streamline global efforts while mitigating risks to our staff.



OUR SUPPORT TO THE GLOBAL IMMUNIZATION DIVISION (GID)

MEASLES IMMUNIZATION CAMPAIGN

EHA deployed a team of highly-seasoned public health specialists from Atlanta to the Democratic Republic of the Congo (DRC) to provide incountry assistance. We provided Subject Matter Experts in support of an immunization campaign to mitigate the spread of measles in the DRC. Over 800,000 children were targeted for immunization following an epidemic which resulted in the deaths of approximately 3,500. The venture, a partnership with the World Health Organization (WHO), the Centers for Disease Control and Prevention (CDC) and the DRC's Expanded Programme on Immunization (EPI) addressed lack of access to routine childhood vaccination programs.

STRATEGIC MESSAGING & GLOBAL HEALTH COORDINATION

EHA provided Senior Scientific Consultation and client strategy services to the Center for Global Health (CGH) to help the Agency effectively communicate with external audiences, develop communication messages and materials, and assist in establishing internal CDC global coordination forums to operationalize its strategic communications goals. Key projects included the CDC's Global Immunization Division (GID) 2016-2020 Strategic Framework, the support of polio eradication, and support for international MMR vaccine initiatives. EHA staff developed high-impact slide presentations for CGH leadership when they were addressing the Rotary Foundation, WHO, and other key stakeholders.

POLIO ELIMINATION INITIATIVE DATABASE FACILITATION

EHA supported the CDC as directed in global health initiatives including polio immunization activity in endemic areas. Our work complimented the special 2009 Programme of Work, which examined the major barriers to interrupting wild poliovirus transmission in endemic areas, implemented a fast track of clinical trials for new vaccines, and developed new approaches to reach children previously missed by vaccine efforts. EHA supported the new Global Polio Eradication Initiative Strategic Plan's major objectives to interrupt wild polio transmission in Africa and Asia, to enhance global surveillance and outbreak response, and to strengthen immunization systems. We also offered global support of polio elimination by partnering with the WHO and local stakeholders to tailor polio elimination campaign strategies and monitoring processes to each area.

ECONOMIC POLICY IN GLOBAL IMMUNIZATION

EHA's personnel, led by Anna Hidle, provided technical assistance to countries on establishing a pathway for sustainable immunization financing (SIF) and provided additional technical assistance to countries and GID partners on the use of costing tools to generate information for evidence based decision making and policy for immunization. This venture directly impacted the development of immunization programs including the dissemination of new and underutilized vaccines to cover larger populations, further reducing disease burdens. Our SMEs analyzed the disease burden, costs of disease control, and incremental costs associated with any new policy proposal. EHA personnel then effectively communicated the resulting data in order to inform the decision-making process. Public Health Economists assisted with evidence-based policy decisions and demonstrated value for money.

AFRICAN VACCINE COMMUNICATION SUPPORT

EHA supported communication and policy strategies and products that led to the elimination/eradication of vaccine-preventable diseases on the African continent. We developed and implemented policy and communication initiatives messages on the Oral Polio Vaccine (OPV) /Inactivated Polio Vaccine (IPV) switch on the continent, provided support to end polio disease outbreaks, and coordinated messaging on the legacy of polio eradication. We created materials focused of the elimination of measles and rubella, as well as routine immunization.

OUR SUPPORT TO THE INTERNATIONAL LABORATORY BRANCH (ILB)

CENTER FOR GLOBAL HEALTH (CGH), INTERNATIONAL LABORATORY BRANCH (ILB)

Our EHA Laboratory Scientists evaluate novel point-of-care testing in CDC laboratories. Once baseline numbers are established in the CDC labs, our EHA employees deploy to very remote areas of many different African countries in order to evaluate the success of the Pima™ CD4 instrument in the field. EHA also assesses the usability of the Pima™ CD4 instrument after training local care providers on proper use. The same scientists deployed to a remote location in Tanzania to train local health care providers on its use and to evaluate the utility in a "real world" resource-limited environment. These field tests provide much more than a patient's CD4 counts. A wide array of internal controls provide valuable information to the developers of the Pima™ instrument so they can optimize the instrument in the field.

DIVISION OF GLOBAL HIV & TUBERCULOSIS (DGHT)

EHA has been deploying personnel to support the ILB's mission for a decade beginning in 2010 with our first CDC contract. We have now been to every PEPFAR country in Africa as well as Haiti. The CDC's DGHT is a key U.S. Government implementer of the PEPFAR. It provides direct peer-to-peer technical, financial, and program service delivery assistance to Ministries of Health (MoH) to:

- Build sustainable public health information, laboratory, and management systems and local workforce capacity;
- Expand quality care and treatment service delivery, and transition these services to local host government ownership;
- Implement effective and evidence-based HIV/AIDS prevention programs that build synergies between prevention, and care and treatment programs;
- Conduct, translate, and operationalize research on impact and cost effectiveness.

TRACKING AND CONTAINING PANDEMICS

EHA has provided public health emergency response support to the international public health community on a continuous basis starting in 2010. Since that time, we have worked in every PEPFAR country, Haiti, and countless other sites in support of the CDC. Our work has garnered several COVID-19 emergency response awards and involved extensive public health communication support, laboratory diagnostic and surge capacity support, novel diagnostic testing development (CDC and USAF), and increased capacity for virtual health services.

The CDC's Division of Global Migration and Quarantine (DGMQ) works to prevent infectious diseases and other diseases of public health significance from entering and disseminating in the United States. EHA provides a large staff of public health professionals focused on developing and maintaining infectious disease surveillance systems for immigrant, refugee, and migrant populations; outbreak investigations; leadership and technical assistance; health information dissemination to state and local public health partners through the Electronic Disease Notification system; and oversight of the Migrant Serum Bank.

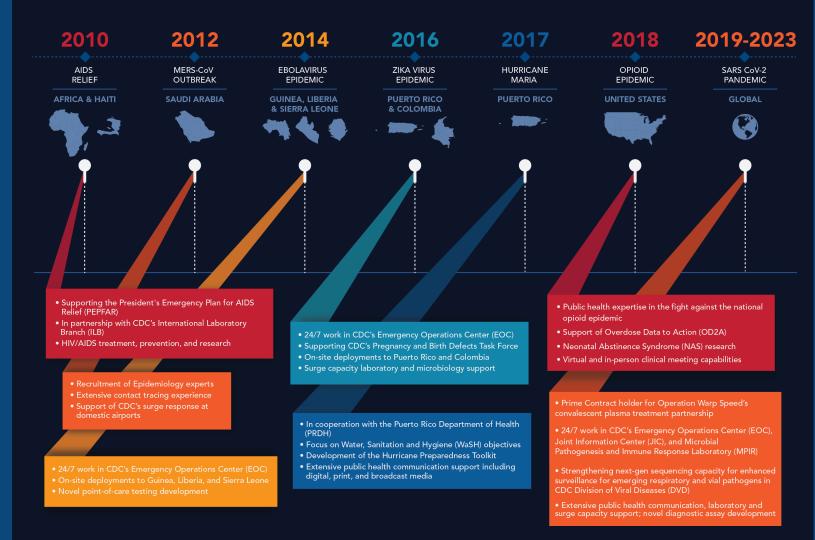
OTHER DIVISION SUPPORT

BURKINA RESPIRE

EHA supports the National Center for Immunization and Respiratory Diseases (NCIRD), Division of Bacterial Diseases (DBD) on the Burkina RESPIRE project. We work full-time in Burkina Faso and leads support for the U.S. Global Health Security Agenda's (GHSA) new RESPIRE project which focuses on strengthening surveillance and laboratory capacity to detect and respond to clusters of severe acute respiratory infections (SARI) in hospitals and communities. Our personnel deployed to Burkina Faso for full RESPIRE is designed to show measurable health impact within a short period of support.

PUBLIC HEALTH EMERGENCY RESPONSE

PANDEMIC & DISASTER RESPONSE TIMELINE



EHA has provided support to international public health emergencies since 2010. Our first deployment as a single implementor for PEPFAR resulted in EHA's presence in every PEPFAR country; this service continues today. As a direct result of our efforts to support to mission against HIV/AIDS, millions of lives have been saved across the globe.

Our personnel worked closely in the CDC's Emergency Operations Center (EOC) and in the Division of Global Migration and Quarantine (DGMQ) to address the emergence of MERS-CoV. Our scientists and epidemiologists deployed to many airport/travel screening locations, met oneon-one with individuals with laboratory-confirmed cases of MERS, and performed contact tracing. EHA was selected by CDC leadership to internationally deploy public health professionals for the Zika response in Colombia, Puerto Rico, and Brazil. Our support for Zika EOC and Pregnancy and Birth Defects Task Force (PBD) includes technical support, surveillance, epidemiology, data management, laboratory/ diagnostic, communications, bio-statistical expertise, and clinical care.

We support the global effort to address SARS-CoV-2 and reduce the morbidity and mortality of COVID-19. Media consultants staff the JIC and consult on strategy and content. Our data scientists support the mission on site and through deployments. EHA actively assists the global public health community with pandemic response.

Surveillance & Epidemiology

DIGITAL DISEASE DETECTION

The ability to rapidly recognize and respond to both global and local health threats is a critical public health priority. The digital world provides an unprecedented opportunity to develop novel tools that provide solutions capable of mitigating public health emergencies. Digital Disease Detection has been made possible by the growing influence of internet technology, which has significantly changed the landscape of public health surveillance and epidemic intelligence gathering. EHA's contribution to the field of Digital Disease Detection helps identify both global and local health threats.

MICROBIAL PATHOGENESIS & IMMUNE RESPONSE

EHA personnel supporting the Microbial Pathogenesis and Immune Response Laboratory (MPIR) are performing and developing assays for a variety of pathogens, including Neisseria and SARS-CoV, in a CLIA-certified laboratory. The MPIR laboratory was established in 2001, and supports the Anthrax Vaccine Research Program (AVRP). In the MPIR, EHA staffs 8 Microbiologists who provide development and assessment of diagnostics to confirm infection, evaluation of vaccines to prevent diseases, characterization of immune correlates of protection and surveillance for circulating strains of bacterial diseases. Our EHA Quality Manager and Data Manager provide statistical support, and development of publishable figures for the whole MPIR.



FOOD SAFETY MODERNIZATION ACT

EHA is honored to be selected as a prime contractor providing subject matter expertise to the Food and Drug Administration (FDA) leadership for both novel technology development and policy support during FDA's implementation of the Food Safety Modernization Act (FSMA). This initiative was announced on April 30, 2019, by acting FDA Commissioner, Dr. Ned Sharpless, and Deputy Commissioner for Food Policy and Response, Frank Yiannas. EHA provides technical guidance for the development of a Strategic Blueprint that outlines FDA's plans to leverage technology and other tools to create a more digital, traceable, and safer food system. This work builds on past advances in FDA's implementation of the FSMA and expands the use of current technologies including blockchain, sensor technology, the Internet of Things, and artificial intelligence.

BIOMOSAIC

The BioMosaic Project was launched in 2011 and is a collaborative effort between the CDC's Division of Global Migration and Quarantine, Harvard University, and the University of Toronto. The BioMosaic tool consolidates complex data from multiple sources into a unified visual format. This format greatly enhances CDC Public Health Officials' ability to view census data, migration patterns, and health statuses simultaneously to help identify countries where international travel may influence the spread of emerging diseases. EHA scientists developed BioMosaic to perform as both web-based and mobile-based tool to investigate scientific, social, and public health issues. BioMosaic uses computer-supported, visually-enabled analysis of the geospatial data related to mobile populations, and it performs risk assessment and data management. The emergencies that EHA has addressed using the BioMosaic includes tracking and containing Middle Eastern Respiratory Diseases Syndrome (MERS-CoV), the Ebola outbreak, and the spread of Zika virus in North and South America.

MOBILE APPLICATION DEVELOPMENT: CHIKUNGUNYA & DENGUE FEVER

EHA supported Digital Disease Detection requirements for the CDC's Division of Global Migration & Quarantine (DGMQ) through the launch of the Kindenga mobile app. Kindenga was developed through a collaborative effort between EHA scientists in the CDC's DGMQ and the University of Arizona. This app provides an early warning of outbreaks of mosquito-borne diseases in the region of the U.S.-Mexico border; the interface utilizes weekly user surveys to screen for the symptoms of the Dengue, Chikungunya, and Zika. Positive user responses are pushed anonymously in real-time to HealthMap, the leading on-line resource for disease outbreak monitoring. This critical area of EHA's support aligns directly with the dimension of DGMQ's public health mission that addresses preparedness and response as core approaches to reduce the probability that communicable diseases are introduced, transmitted, or spread.

INVENTION OF EDN & WORKING WITH EMEDICAL USA

Key EHA personnel involved in the creation of the BioMosaic developed an electronic medical record (EMR) system that specifically addresses the need to digitize paper/hard copy medical records provided by immigrants, refugees, and displaced persons upon entry to the United States. The Electronic Disease Notification system (EDN) is utilized by public health professionals from the Division of Global Migration and Quarantine (DGMQ) and their partner organizations; EDN allows any document to be scanned or faxed to centralized data entry personal for manual upload into the EMR system. EDN is complementary to the national immigrant EMR system called eMedical USA. This cooperative effort improves access to medical history, improves the quality of medical exams, reduces the risk of missed pre-existing diseases (e.g., tuberculosis), and reduces the national public health burden. EDN is currently nearing the release of it's 2.0 iteration.

DEVELOPMENT OF Z-POINT & SET-POINT

During the Zika Emergency Response, the Zika Pregnancy of Interest Navigation Tool (Z-POINT) was created to streamline analytics and simplify the complex clinical review process. Because of the proven success of Z-POINT, a new version has been created (SET-POINT) which is currently used for COVID-19 emergency response analytical efforts.

Advanced Diagnostics

AN INDUSTRY LEADER

Using breakthrough methods for whole genome comparisons, we identify novel targets that can be used to diagnose diseases syndromes. From basic discovery to field testing point-of-care diagnostic instruments, EHA is a leader in advanced diagnostics and new modalities of disease identification. Our established expertise and partnerships in this area allowed us to immediately respond to the emergence of SARS-CoV-2 and contribute to the research leading to faster and more accurate diagnostic tests.



NOVEL DIAGNOSTIC & SEQUENCING MODALITIES

EHA leads the industry in the development of novel diagnostic and sequencing modalities. In response to the spread of SARS-CoV-2, EHA recruited subject matter experts specializing in coronaviruses; our experts are actively reviewing various coronavirus testing methodologies and refining the diagnostic process in order to develop a kit with improved false positive and false negative rates. EHA has already established bioinformatics personnel working on emerging disease surveillance studies and outbreak investigations in multiple divisions at CDC. Our experts support ongoing MERS-CoV diagnosis and investigation, including genome characterization. In addition, EHA scientists are studying the underlying cause of Acute Flaccid Myelitis (AFM); this work includes molecular virology detection/typing/characterization, the evaluation of current diagnostic platforms, and analysis of disease burden to identify potential causes of AFM.

ADVANCED MOLECULAR DETECTION (AMD)

CDC's AMD program introduces rapid technological innovation to join trusted methods with exciting new horizons in disease detection. By increasing critical next generation sequencing and bioinformatics capacities, the CDC and state health departments will gain ground in the battle to control infectious diseases including the fight against novel infections and global pandemic responses.

EHA supports the Office of Infectious Diseases through a contract for bioinformatics and advanced molecular detection. Our employees assisted dozens of federal Principal Investigators with dozens of key projects. EHA scientific contributions directly impact the response to pandemics including SARS-CoV-2.

CENTER FOR GLOBAL HEALTH (CGH), INTERNATIONAL LABORATORY BRANCH (ILB)

Our EHA Laboratory Scientists evaluate novel point-of-care testing in CDC laboratories. Once baseline numbers are established in the CDC labs, our EHA employees deploy to very remote areas of many different African countries in order to evaluate the success of the Pima™ CD4 instrument in the field. EHA also assesses the usability of the Pima CD4 instrument after training local care providers on proper use.

The same scientists deployed to a remote location in Tanzania to train local health care providers on its use and to evaluate the utility in a "real world" resource-limited environment. These field tests provide much more than a patient's CD4 counts. A wide array of internal controls provide valuable information to the developers of the Pima[™] instrument so they can optimize the instrument in the field.

PREVALENCE OF GENETIC RISK FACTORS FOR TYPE 2 DIABETES WITHIN THE MILITARY HEALTHCARE BENEFICIARY POPULATION

Through a U.S. Air Force Contract in support of the Chief Scientist Office at Lackland AFB, EHA scientists provided critical subject matter expertise to the overall design of a panel consisting of seventeen different SNPs associated with an increased prevalence of T2D. These SNPs were selected for inclusion based solely on published preliminary data from whole genomic comparison studies and lacked any functional assays. Active-duty service members were tested using an IRB-approved protocol. The results of this diagnostic test drive a "Personalized Medicine" approach for the early detection of T2D. This project demonstrates the promise of using SNPs to determine risk level as a predictive tool to identify individuals that may benefit from lifestyle modification and preventative intervention such as the Diabetes Prevention Program.

Public Health Communication

CUSTOMIZABLE, CLIENT-FOCUSED SOLUTIONS

EHA employs an exceptionally talented team of scientific, medical, and technical writers and editors. Our team includes a diverse group of professionals with knowledge ranging from clinical medicine to social media strategies. EHA writers and editors directly support the Centers for Disease Control and Prevention's (CDC) mission to protect our nation from health, safety and security threats. EHA offers unparalleled editorial project and program management services. Combined with our adept writing and editing staff, editorial managers streamline workflows, increase adaptability, ensure consistency across multiple sub-projects, and incorporate diverse stakeholder needs. Our established, extensive pool of writer-editors and communication professionals responded immediately to the SARS-CoV-2 pandemic in the United States and continue to work with national, state, and local health agencies to quickly and accurately communicate information to the public.



EMERGENCY HEALTH COMMUNICATIONS

EHA provides expertise in medical and health communications. In the National Center for Immunization and Respiratory Diseases (NCIRD), EHA supports the response to COVID-19 through the placement of numerous communication specialists and medical educators in the Emergency Operations Center (EOC). Previously, EHA supported the Division of Public Affairs' (DPA) Zika response through health communications, media (e.g., broadcast, print, and digital), and other agency communication channels. Our past and present work within the EOC includes surge support and emergency response on a 24/7 basis, as required. Our medical and health communication support is strengthened through EHA's employment of highly educated writers and editors, many of whom hold advanced degrees.

Professional and highly experienced writereditors, social media experts, and broadcast media personnel are available on a 24/7 basis to meet the needs of the CDC and the nation. Our work in the area is well-known due to success in past public health crises including the Zika response and both Ebola outbreaks in West Africa. Our personnel adapt quickly to new data and are capable of handling high pressures in any public health emergency.

SCIENTIFIC AND BIOSAFETY PUBLICATIONS

EHA offers a wide-ranging portfolio of scientific and biosafety publications. One such document is Biosafety in Microbiological and Biomedical Laboratories (BMBL) 6th Edition – a joint publication sponsored by the Centers for Disease Control and Prevention (CDC) and the National Institutes of Health (NIH). BMBL provides internationally recognized guidance on biosafety practices for containment laboratories. EHA's work on scientific and biosafety publications exemplifies the array of resources that we offer to our clients. Our seamless unification of editorial management, technical writing, concise communication, and problem-solving makes EHA the best option for any guidance or regulatory publication.

POLICY & COMMUNICATION SUPPORT

EHA offers proficiency in policy and communications support. Our work in the Office of Public Health Preparedness and Response (OPHPR), Office of Policy Planning and Evaluation (OPPE) demonstrates aptitude for collaborative communication, synthesis of complex policyrelated content, and production of high-quality documents including support of the Annual Preparedness Report. EHA's policy work extends across all contracts. Our team of physicians, writers, and editors regularly seeks out additional training to ensure that all deliverables are compliant. EHA staff are familiar with Section 508 of the Rehabilitation Act of 1973 (29 U.S.C. 794d) as it applies to current media and software.

UP-TO-DATE, ACCURATE, AND RELEVANT PRODUCTS

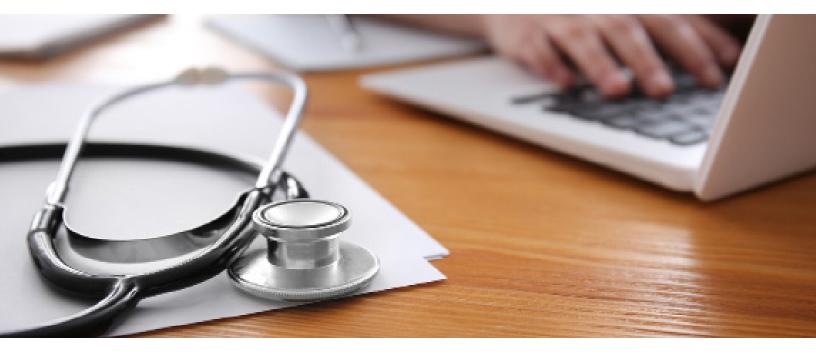
EHA scientific and technical writers are versed in a range of communication modalities, compliant with all federal publication requirement including Section 508, and cross-trained in a variety of disciplines ranging from chemical biosafety to clinical medicine to novel strategies for social media management. EHA seeks out communication staff with unique experiences and coursework so that the client can receive a wide range of resources through a single task order or contract.

Recent significant projects include the nationally distributed, collaborative texts including Biosafety in Microbiological and Biomedical Laboratories (BMBL) 6th Edition, the CDC's internal Biosafety manual and associated forms, the CDC's internal Chemical Safety Manual and associated forms, the CDC's internal Radiation Safety Manual, and the CDC's Bloodborne Pathogens Exposure Control Plan. EHA has also been tasked with performing comparative analysis of multinational public health documents, and all of our staff use a robust, centralized project communication pathway that complies with federal recordkeeping requirements.

Virtual Health

SOLUTIONS FOR A DIGITAL WORLD

EHA seeks out new and developing digital health technologies to ensure our clients have access to the best options for all scenarios. We partner with pioneers in health IT, virtual health, and virtual reality. EHA works to meet the Center for Disease Control and Prevention's (CDC) telehealth and clinical medicine surveillance and COVID-19 surge support needs with services performed both virtually and on-site. Our collaborators and expert personnel work together to create groundbreaking and cutting edge resources to meet the rapidly changing needs of our clients.



CDC TELEHEALTH & CLINICAL SUPPORT

EHA provides highly qualified physicians (MD/ DO), nurse practitioners (NP), physician's assistants (PA), registered nurses (RN), and clinical administrative personnel to the CDC's Occupational Health Clinic (OHC). The primary services provided include telehealth assessments and monitoring of agency staff enrolled in the CDC's Text Illness Monitoring application (TIM) and conducting medical clearance and surveillance exams. Our clinicians provide 24/7 tele-assessment and monitoring of deployed and agency-based staff involved in the CDC Response to COVID-19 who are enrolled in the TIM application (approximately 1400 staff).

EHA also provides appropriate clinical and administrative support. Our RNs specialize in occupational medicine and assist with examinations and medical clearances, perform nursing interventions for similar exposure groups (SEGs), reviews individual health risk assessments for enrollment in SEGs, review destination-specific international travel guidance and vaccine recommendations, and perform diagnostic testing, as required. Our administrative assistants perform front desk services, manage spreadsheets, schedule staff, manage intake paperwork, and coordinate/triage COVID-19 medical clearance requests based on established CDC criteria.

TELEMEDICINE & VIRTUAL HEALTH

Realities throughout the current healthcare system continue to highlight the need for and benefits of telemedicine. EHA can implement a complete telemedicine and virtual solution for your Intensive Care Unit, Clinic, Radiology Unit and/or Emergency Department. Our subject matter experts will manage the project and support you through Site Assessment, Interface Development & Testing, Installation, On-site Cutover Support, Credentialing & Privileging, Training and ultimately, Sustainment. Sustainment includes license and warranty renewals, scheduled and unscheduled maintenance, system upgrades and updates. Once the solution is in place, your organization will realize the cost savings associated with telemedicine while your patients enjoy increased access to the quality care you already provide.

EHA managed an effort that developed and applied new telemedicine technologies into the Nellis Air Force Base's Intensive Care Unit (ICU), enhancing the ability to remotely and rapidly detect, identify and mitigate individual patient adverse trends. The project implemented technology that continuously and remotely monitors 12 ICU beds at Nellis' ICU by a remote team of intensivists from the Veteran Administration's Veterans' Integrated Service Network (VISN) 23 Tele-ICU monitoring center in Minneapolis, MN. The project provided program management support, requirements analysis, implementation support, functional integration, training, metrics development and analysis, business process re-engineering and sustainment activities post go-live. The data captured against defined performance metrics proved the realization of increased access to care for Nellis' patients coupled with improved patient safety.

DIABETES SELF-MANAGEMENT EDUCATION VIA TELEMEDICINE

EHA clinical research coordinators, epidemiologists, and telemedicine broadcast technicians support a proof-of-concept study testing the dissemination of American Diabetes Association (ADA) compliant Diabetes Self-Management Education (DSME) via an innovative telemedicine model in the San Antonio area through a partnership with the Diabetes Center of Excellence (DCOE) at Randolph AFB. The DSME program includes a series of courses that provide comprehensive diabetes education; the DCOE telemedicine model provides training to disease managers at Randolph AFB; develops policies and documentation tools to ensure consistent reporting of data; and evaluates cost effectiveness and patient outcomes. Through the duration of the study, a comprehensive data collection protocol is in place. EHA will continue to work on descriptive analysis to compare demographic and other variables among in-person and telemedicine participants; paired t-tests and analysis of variance (ANOVA) will be used to determine differences at baseline, completion of classes, and at six months among and between sites to explore variation in patient outcomes. Initiation of DSME telemedicine classes will occur on a rolling basis across multiple sites over the multi-year project period.

Clinical Research

SAFE, EFFECTIVE PARTNERSHIPS

EHA clinical investigation collaborators include the military, federal agencies, private industry leaders, and international sites. We specialize in proof-of-concept, recognize the importance of meeting all compliance standards, and consistently exceed expectations. Our clinical investigation collaborators include the military, federal agencies, private industry leaders, and international sites. The wide array of resources in our portfolio allows us to support a variety of research projects including multi-site assessments and longitudinal studies.



HEALTHCARE DATA ANALYTICS

EHA managed an effort supporting the Air Force Medical Service's (AFMS) Analytics division at Lackland AFB in San Antonio, TX. The project team conducted studies, analysis, planning, program support, advising, and implemented necessary corrective actions in support of the following medical activities: resource management, health plan management, group practice management, and health systems design and delivery. The team provided technical expertise in support of data collection and processing, data aggregation and modeling, and data presentation in the form of dashboards, routine, and ad hoc reports. This included demonstrated experience and the ability to apply varied organizational and management improvement techniques. A wide degree of creativity was utilized by the project team in performing analytics duties supporting DoD/ Secretary of the Air Force taskers, Military Health System (MHS), Major Commands (MAJCOMs), Air Force Surgeon General's Office, Air Force Medical Operations Agency (AFMOA), Air Force Medical Support Agency (AFMSA), Military Treatment Facility (MTF) Commanders, and other headquarter directorates with data-driven research and analytical products.

LONGITUDINAL STUDY: BIRTH DEFECTS & CONGENITAL ZIKA INFECTION

EHA works with the CDC, National Associate of County and City Health Officials, Public Health Informatics Institute, and the U.S. Embassy in Bogota, Colombia to conduct longitudinal research investigating the effects and outcomes of congenital Zika virus infection in endemic areas. Population data is drawn from cases of laboratory-confirmed Zika infection and suspected cases identified through clinical assessment of the infant; data is controlled against respective birth cohorts. This requirement collects and processes data from state, city and local health departments domestically, in US territories and freely associated states. Expected outcomes include improved understanding of the impacts of Zika virus infection, the prevalence of adverse outcomes from infection and sufficient data to provide Zika virus infection surveillance from local birth defects data.

INTEGRATIVE MEDICINE & CLINICAL INVESTIGATION PROGRAM SUPPORT

EHA has a sophisticated integrated medical team ready to provide Integrative Medicine (IM) and Clinical Investigation Program (CIP) support. Members of this team have provided research & development analysis to clients on multiple cutting-edge IM modalities. EHA has supported IM technology demonstrations resulting in faster convalescence, increased access to care and positive clinical outcomes. We also provided support to Clinical Investigation Programs (CIP) in support of Graduate Medical Education research and to limit the use of opioids to treat chronic pain. EHA's CIP researchers constantly pursue the advancement of military healthcare, utilizing cutting-edge strategies and methods. CIP support includes protocol development, regulatory and policy adherence, institutional review board (IRB) guidance, study subject recruitment and data collection/report generation. Key research interests supported by EHA include the development and testing of alternative treatments for pain and utilizing nutraceuticals to treat and mitigate disease and other conditions.

MULTI-SITE CLINICAL ASSESSMENT OF CHRONIC FATIGUE SYNDROME (CFS)

Myaglic Encephalitis (ME) / Chronic Fatigue Syndrome (CFS) is a debilitating condition of unknown etiology and pathogenesis that can affect persons of all ages, genders, and races. EHA works with the CDC, Open Medicine Institute, NIH, and the Mayo Clinic to recruit clinical study participants and gather data for adult and pediatric populations affected by CFS. This multi-site assessment is ongoing and specifically evaluates participants for biologic linkages while ruling out other chronic conditions.

IRON DEFICIENCY EVALUATION IN FEMALE WARRIORS

EHA works with the Air Force Medical Service Enterprise and the USAF 59th Science & Technology Wing to develop guidelines for iron deficiency screening and treatment protocols in female soldiers reporting to and participating in Basic Military Training (BMT).

Contract Management & Administration

COHESIVE PROJECT MANAGEMENT

EHA contracts with federal agencies through both the direct award and competitive procurement process. One of our strongest core competencies is Contract Management & Administration. We have provided the expertise necessary to bring effective contracting strategies to federal agencies starting with early stage presolicitation procedures ending at final contract closeout procedures. EHA is committed to providing the best possible acquisition support services, thereby allowing agencies to become more effective and efficient in procuring the types of supplies and services to best carry out the goals and missions of the agency.



PRE-SOLICITATION / AWARD SERVICES

EHA supports the Office of Acquisition Services at the Centers for Disease Control and Prevention through a wide variety pre-solicitation and preaward support services.

EHA Contract Specialists are trained to be fully compliant with all FAR procedures relating to preaward activities. Working closely with designated Contracting Officers, EHA specialists perform strategic market research to determine the best possible procurement method for the required supplies or services. While adhering to regulations set forth in FAR Parts 8,10,12, and 13, EHA specialists have proven track records in utilizing FedBizOpps, FedBid, GSA E-Buy, and NASASEWP for posting solicitations and other requirements to best service the federal agency and its contracting officers. This critical area of EHA's support aligns directly with CDC's Office of Acquisition Services public health mission that allows obligated dollars in public health funds to more quickly and effectively reach intended populations to maximize the public health outcomes.

CLOSEOUT SERVICES

EHA currently provides full Closeout Support Services to the Office of Acquisition Services at the Centers for Disease Control and Prevention. EHA employees specialize in all facets of closeout procedures spanning from the closeout of SAP supply orders to multi year cost-reimbursable IDIQs. EHA specialists are adept at working closely with Contracting Officers in performing indirect cost rate reconciliations while complying with FAR parts 4 and 42. EHA has built upon our success in closeout operations by developing new SOPs to more effectively obtain required documentation and signatures from Project Officers and Key Contractor Personnel. This critical support function has allowed agencies to eliminate backlogs and more closely comply with FAR section 4.804, thus reducing agency costs and maximizing mission goals.

POST-AWARD / CONTRACT LIFECYCLE MANAGEMENT

EHA provides senior capabilities in contract management and modification to the Office of Acquisition Services within the Centers for Disease Control and Prevention's Office of Financial Resources. EHA Contract Specialists are dedicated to monitoring and managing Contract requirements to provide the optimal benefit to the Agency and its Contracting Officers. In adherence and compliance with FAR parts 3, 42, 43, and 52, EHA specialists perform a full variety of contract modifications, option exercises, key personnel changes, funding obligations, and changes within scope. EHA provides all these critical functions of contract management using an approach that best blends authority given by the FAR as well as a Contracting Officer's discretion. The outcome of this approach is measured by the increase in overall compliance, the reduction of risk, the increase in accuracy and precision of contract matters, and the increase in the number of total actions processed each year by the agency to fulfill its mission in acquisition and procurement services.



Quality Management Process

Program Support & Contract Transition Plan

MANAGEMENT PLAN

EHA and its highly experienced senior management team provide program management direction and authority for all required deliverables, leading and empowering our employees to provide timely, high-quality, cost-effective, efficient, innovative, and comprehensive professional, scientific, and administrative consulting services. EHA leverages industry best practices and professional standards to dramatically contribute to a Federal Agency's mission and program goals. Our collective experience in support of HHS and DOD ensures a clear understanding of the needs of leadership and stakeholders, as well as strong, preexisting customer relationships. Our Management Team employs understanding, experience, and proven management practices to overcome any contractual challenges and ensure accurate, timely deliverables.



CONTRACT TRANSITIONING / TRANSITION PLAN

Upon receipt of new awards previously held by incumbent contractors, EHA recognizes the unique challenges facing the customer agency and the incumbent employees. EHA rises to these challenges with calculated measures to attract and onboard the highest strategic percentage of incumbent personnel, frequently capturing over 90% of the transitioning employees. EHA invests extra time guiding an employee through our user-friendly onboarding process during the employee's first week to ensure a seamless transition for the employee and the federal agency. Our multi-tiered transition plan has allowed us to regularly transition large incumbent groups within short turnaround times to provide the highest value to federal agencies.

PLAN-DO-CHECK-ACT (PDCA)

EHA applies the industry-leading Plan-Do-Check-Act (PDCA) Cycle performance management system to support our customers in achieving measurable improvements in efficiency, effectiveness, performance, accountability, and outcomes on a continuous basis. PDCA is a cycle in which measured results are regularly fed back into decision making to continually improve future performance.

STEP 1: PLAN

Developing a plan and defining the method of and frequency of measurement

STEP 2: DO

Generating solutions and applying Impact Analysis and small-scale Pilot Programs

STEP 3: CHECK

Measuring effectiveness and gathering data to refine the solution

STEP 4: ACT

Implementing the customer-approved solution and the continuation of the PDCA cycle for future improvements

RECRUITMENT, RETENTION, AND RAPIDLY REPLACING KEY PERSONNEL

EHA takes great pride in our high retention and our extensive recruiting capabilities. Our fulltime recruiting staff, credentials personnel, and contract management work together to facilitate vetting of potential new hires. If vacancies occur due to attrition or other reasons, EHA recruiters are positioned to quickly identify qualified candidates. Key public universities, professional organizations, targeted web boards, employee and customer referrals, and targeted recruiting professionals are all resources used by EHA to provide qualified candidates to fulfill the service requirements. Our staffing approach ensures the customer has the professional staffing services to support any program's mission.

Personnel Replacement Process





Unique Qualifications to Support Work in Challenging Environments

EHA offers diverse qualifications that demonstrate our standing as a small business that consistently navigates any obstacle to meet mission requirements. We have a well-established history deploying to remote and/ or challenging environments. Our past performance ensures that personnel deployments are efficient and safe.



CERTIFIED 8(A) ALASKA NATIVE CORPORATION (ANC)

LOCAL PRESENCE

LABORATORY AND TESTING FACILITIES

FEDERAL WIDE ASSURANCE (FWA)

CAPABLE OF SUB-CONTRACTING TO FOREIGN ORGANIZATIONS

SECURITY CLEARANCE

SPECIAL "INTERNATIONAL" EMPLOYEE HEALTH INSURANCE

ISO 9001:2015 CERTIFICATION QUALITY MANAGEMENT SYSTEMS Our status allows EHA to accept direct awards (sole-source contracts) up to \$25 million (Civilian) and \$100M (DoD and DoS) without a J&A. Awards to an 8(a) ANC cannot be protested. The 8(a) business development program helps resource-limited small disadvantaged businesses transition into companies able to compete with larger businesses for "full and open" competitive contracts.

EHA believes that having on-site program management is the most effective way to ensure proper adherence to contract requirements and to maintain customer and employee satisfaction.

In addition to providing the Scientist and Subject Matter Expertise to support laboratory based programs EHA has access to commercial laboratory space and the equipment available to support a wide array of diagnostic tests. When a customer needs to expand past their current laboratory capacity EHA provides that support.

EHA maintains FWA for the protection of human subjects (EHA DHHS FWA number: FWA00014512). The majority of EHA employees are involved in carrying out research and support protocols that involve human subjects. Therefore, EHA and its employees possess the certifications needed to participate in research activities that support protocols approved by the Institutional Review Board (IRB).

To facilitate mission requirements during an international response, it is frequently a necessity to leverage the expertise of a foreign company or other organization that has the ability to operate "onsite" internationally. EHA is able to directly sub-contract to foreign organizations which allows us to quickly navigate the foreign environment and meet our customers' programmatic goals.

EHA retains the highest level of security clearance in order to support any requirements that may involve sensitive material.

The safety and well-being of our employees is the single most important consideration to EHA during each mission; we developed a Foreign Travel Working Group (FTWG) with extensive experience in global public health expert deployments. Our FTWG is a highly seasoned team that ensures that we provide the most up-to-date travel information to our employees. EHA has invested in the best employee healthcare insurance that can be provided. Our insurance will "air-vac" our employees out of a country if they are working in remote sites with resource-limited settings.

ISO 9001:2015 sets out the requirements of a quality management system. EHA has implemented these standards to achieve improved efficiency and effectiveness of company operations to strengthen our commitment to safety, reliability and quality.

ADVANTAGES



Foreign Travel Working Group (FTWG)

The purpose of developing FTWG is to remove any challenges an employee may encounter during their travels so that they can focus entirely on their important projects and successfully meet the mission. This program addresses the logistics of travel, onsite safety, employee health, and supports emergency extraction. EHA will utilize the full spectrum of resources offered through our FTWG to ensure that every deployment in support of polio eradication occurs efficiently and safely. **ON-SITE EXPERTS**

EMPLOYEE SAFETY

MISSION MANAGEMENT

REAL-TIME RESPONSES

VIRTUAL ALTERNATIVES

puts boots on the ground at the source. EHA is proud and honored to support global public health missions including the Zika, Ebola, and MERS-CoV surge responses at the site of the outbreaks.

To stop a Public Health Emergency, Eagle Health Analytics

The safety and well-being of our employees is the single most important consideration during each mission; we developed the FTWG with extensive experience in global public health expert deployments. This highly seasoned team ensures that we provide the most up-to-date travel information to our employees. We invested in the best employee healthcare insurance that can be provided and will "air-vac" staff out of remote sites or resource-limited settings.

EHA uses up-to-the-minute data to maintain the safety and success of our employees. Our FTWG is constantly plugged in to the global community and provides contemporaneous adjustments to mission plans. EHA is committed to leading the deployment of global public health professionals in service to the CDC's mission.

Our FTWG monitors real-time travel advisories and relies heavily on those offered by the U.S. Department of State travel's website. EHA does not take any time off when employee safety is a concern, and we react to changes in status immediately to protect the welfare of our personnel.

EHA recognizes the importance of providing virtual and telework alternatives for employees as a supplement to the FTWG. Our employee support includes financial and technical support to ensure that deployed employees are able to fully comply with the requirements of their position in cases of mandatory evacuation from the travel site or mandatory quarantine at the travel site. We provide continuity of care in all aspects of travel, and we prepare for all scenarios.



ANNA <u>HIDLE, MPH</u>

Anna Hidle is a Public Health Economist for the CDC Foundation and serves as the key subject matter expert and advisor for our Foreign Travel Working Group (FTWG). She previously supported the CDC's Global Immunization Division (GID). Anna has extensive experience in economics, immunization economics, economic methodology, economic data collection and analysis, and teaching importance of economics for public health professionals. She also has ample past performance working in the United States, Zambia, Zimbabwe, Senegal, Kenya, and Tanzania. Anna's past work accomplishments include conducting a typhoid conjugate vaccination program cost analysis for vaccine policy decision-making in Zimbabwe (including protocol development, data collection, and data analysis); training 50 data collectors to collect financial and economic data for a household level survey using Open Data Kit; and developing cost data collection tools in Open Data Kit to be used for data collection in Zimbabwe and Senegal.

FTWG

Our Partners

MILITARY PARTNERS



FEDERAL & INDUSTRY PARTNERS



WWW.EHEALTHANALYTICS.COM

Current Contract Vehicles

INDEFINITE DELIVERY INDEFINITE QUANTITY (IDIQ)

- EHA has multiple IDIQ contract vehicles available to task

U.S. ARMY MEDICAL RESEARCH ACQUISITION ACTIVITY (USAMRAA)

- Institute of Surgical Research (USAISR)
- Medical Research Institute of Chemical Defense (USAMRICD)
- Public Health Center (APHC)
- DoD / VA Extremity Trauma and Amputation Center of Excellence (DoD/VA EACE)

CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)

- International Communication Services provided through a five-year IDIQ available to all Divisions within the CDC's Center for Global Health.
- CDC-wide staffing provided through a five-year IDIQ available to all CDC Offices and National Centers to provide replacements for any lost resource services
- Domestic Professional/Technical, Administrative and Medical Support Services (DPAMSS) provided through a five-year IDIQ available all Divisions within the CDC's Center for Global Health
- Professional support services provided in the Division of Global Migrations & Quarantine (DGMQ) through a five-year IDIQ
- Wide array of functions provided to the Office of Acquisition Services (OAS) through a five-year IDIQ



DISCOVERING · TRANSLATING · CHANGING

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