



Terms of Reference (ToR) for Employees' Medical Insurance Coverage

1. Background about GOAL

GOAL works with the most vulnerable communities to help them respond to and overcome humanitarian crises, and to assist those facing poverty and exclusion achieve greater resilience and well-being. GOAL envisions a world beyond humanitarian crises where poverty no longer exists, where vulnerable communities exposed to shocks and stresses are resilient, where barriers to well-being are removed and where everyone has equal rights and opportunities.

GOAL is a not-for-profit organization that has been working in Ethiopia for 40 years, towards ensuring the poorest and most vulnerable in the country and those affected by humanitarian crises have access to basic services such as adequate shelter, food and livelihoods, water and sanitation, nutrition, healthcare, and protection. GOAL implements a range of integrated multi-sectoral development, resilience, recovery, and humanitarian response programmes by being sensitive to cross-cutting issues including gender equity, social inclusion, accountability, child protection, and HIV/AIDS. Currently, we work with pastoralists, agropastoral, pastoral dropouts, rural smallholder farmers, rural/urban youth, and street children to respond to humanitarian crises and build resilience in Ethiopia, working closely with local communities, local government, donors and other key actors. Furthermore, GOAL's Humanitarian Response is centered on nutrition, WASH, livelihoods, multipurpose cash, NFIs and protection interventions, while the recovery and development focus are on livelihoods, economic opportunities, health, and nutrition systems strengthening, markets systems development and WASH with solid emphasis on integrated programming and community-based approach. Currently, GOAL Ethiopia operates programmes in 9 out of the 11 administrative regions of the country, employing over 600 staff, predominantly consisting of programme personnel and maintains 40 offices with annual operating budget of over 30 million euros.

2. Objectives

Offering health insurance benefits to employees is a multifaceted strategy that serves several critical functions within an organization.

- 2.1. It promotes health and well-being among the workforce by ensuring access to necessary medical care, which is essential for maintaining productivity.
- 2.2. It provides financial protection by covering medical expenses, thereby reducing the financial burden on employees and their families.



2.3. Comprehensive health coverage is an attractive benefit that can lure new talent and retain current employees, contributing to a stable and committed workforce.

2.4. Providing health benefits can significantly enhance job satisfaction, as it demonstrates the employer's investment in the employees' health and well-being.

Collectively, these aspects contribute to a supportive work environment, fostering a positive organizational culture and enhancing overall performance. Cognizant to the above, Goal Ethiopia intends to appoint a service provider of Health insurance services for a three years' service Framework Agreement with a possibility of extension that can provide the service efficiently and maintain confidentiality to the maximum possible complying with the Goal Ethiopia standards and compliance checks.

3. Scope of the work

The health insurance service provider should cover a significant portion of medical expenses, including hospital stays, Surgical procedures, doctor visits, and Prescribed medications, reducing the out-of-pocket costs for employees and their dependents.

3.1. **Employees:** Typically, all full-time employees are covered under the health insurance plan.

3.2. Dependents:

3.2.1. **Spouses:** Legally married spouses of employees are usually eligible for coverage.

3.2.2. **Children:** Dependent children, which may include biological, adopted, and stepchildren

3.2.3. **Mother and Fathers; Single** employees biological Mother and Fathers are usually eligible for coverage.

- The below table details the benefits that GOAL would prefer for the annual Premium cover. Bidders need to complete the table for their limits (minimum, medium and maximum packages) and whether they cover that service – please put comments where necessary. If only one standard package can be offered only fill in one column.

A	IN –PATIENT COVER	Limits Minimum Package (Birr)	Limits Medium Package (Birr)	Limits Maximum Package (Birr)	Bidders Comments if any
1	Overall Annual Limit Per Person				
2	Hospital accommodation & Nursing Expenses (Bed Limit per night)				
3	Physician's, Surgeon's, Consultant's & Anaesthetists' fees				
4	Cost of X-rays, Radiologic examination, investigations and laboratory tests				
5	Cost of prescribed medicines and dressings, surgical appliances				
6	Scans (ECG, CT- Scan, MRI and PET, Endoscopy and other scans)				



7	Inpatient Physiotherapy				
8	Operation Theatre charges				
9	Radiotherapy and Chemotherapy				
10	ICU, IDU hospitalization				
11	Congenital Conditions				
12	Inpatient gynaecological surgery excluding fertility treatment				
13	Internal & external prosthesis and appliances excluding dental prosthesis or appliances				
14	Psychiatry and psychotherapy				
15	Oncology/Cancer treatment				
16	Lodger fees for adults accompanying a child below 8 years.				
17	Day care surgery				
18	Reconstructive surgery following an accident excluding cosmetic surgery				
19	Pre-existing and chronic conditions including cancer and HIV/AIDS				
20	Emergency road ambulance				
21	Hearing aids were necessitated by an accident or an insured illness or disease				
22	Treatment of fibroids and cysts				
23	Inpatient dental & Optical treatment				

B	OUT- PATIENT COVER	Limits Minimum Package	Limits Medium Package	Limits Maximum Package	Bidders Comments
1	Overall Annual Limit Per Person				
2	Physician, Surgeon, Consultant & Anaesthetist fees				
3	Cost of prescribed medicines, surgical appliances, dressings				
4	Prescribed Laboratory Tests and approved X-rays, & other Diagnostic Tests and Procedures				
5	Scans (ECGs, CT scans , MRI and PET Scans)				
6	Radiotherapy and Chemotherapy				
7	Outpatient Surgery				



8	Outpatient Physiotherapy				
9	Congenital conditions				
10	Gynaecological and obstetrics treatment				
11	Psychiatry & psychotherapy				
12	Outpatient oncology/cancer treatment				
13	Cost of hiring crutches or wheelchair				
14	Oncology including cancer tests (Pap smear and prostate)				
15	Hearing aids where necessitated by an accident or an insured illness or disease				
16	Ante-natal and post-natal care and up to 2 ultrasound scans.				
17	Treatment of fibroids and cysts				
18	Other				

C	DENTURE COVER	Limits Minimum Package	Limits Medium Package	Limits Maximum Package	Bidders Comments
1	Overall Annual limit Per Person				
2	Filling				
3	X-rays				
4	Simple or surgical extractions				
5	Anaesthetists fees				
6	Root canal				
7	Scaling				
D	OPTICAL COVER	Limits Minimum Package	Limits Medium Package	Limits Maximum Package	Bidders Comments
1	Overall Annual limit Per Person				
2	Eye lenses & glasses				
3	Eye testing				
4	Treatment of eye and eye related illnesses				
E	MATERNITY COVER	Limits Minimum Package	Limits Medium Package	Limits Maximum Package	Bidders Comments
1	Normal or Caesarean section delivery, maternity complications, anti-D for RH -ve women, premature				



	infant care including cost of the incubator				
If there are other services/procedures that you would like to offer within the package, please list below in section F					
F	ANY OTHER SERVICES NOT INCLUDED ABOVE	Limits Minimum Package	Limits Medium Package	Limits Maximum Package	Bidders Comments
1	Premium for staff during civil unrest				
2					

4. Bare minimum Key Deliverables

The health insurance service provider should cover the below medical i services.

4.1. Inpatient Service:

- Coverage for hospital stays, including room and board, nursing care, surgeries, and other inpatient treatments.
- Emergency Services: Coverage for emergency room visits and urgent care services.

4.2. Outpatient Services:

4.3. Doctor Visits: Coverage for visits to primary care physicians and specialists (including pediatrics and adults) dermatological consultation

- Diagnostic Tests: Coverage for lab tests, X-rays, MRIs, and other diagnostic procedures.
- Outpatient Surgery: Coverage for surgeries that do not require an overnight hospital stay.

4.4. Prescription Drugs:

- Medications: Coverage for prescription medications, including both generic and brand-name drugs.
- Pharmacy Benefits: Access to a network of pharmacies where employees can fill their prescriptions.

4.5. Maternity and Newborn Care:

- Prenatal and Postnatal Care: Coverage for maternity care, including prenatal visits, labor and delivery, and postnatal care.
- Newborn Care: Coverage for medical care for newborns.

4.6. Vision and Dental Care:

- Vision Services: Coverage for eye exams, glasses, and contact lenses.
- Dental Services: Dental treatments including extraction and board, coverage for dental check-ups, cleanings, fillings, and other dental procedures.

4.7. Rehabilitation Services: -

- Physical Therapy: Coverage for physical therapy sessions to recover from injuries or surgeries.
- Occupational Therapy: Coverage for occupational therapy to help employees regain skills needed for daily living and work.

4.8. Mental Health Services: -



- Counseling and Therapy: Coverage for mental health counseling, therapy sessions, and psychiatric care.

4.9. General Checkup

5. Basic Essential and Administrative Requirements

- Valid and renewed business license for the sector which shows that it can carry on the insurance business at any place within the country,
- Proof of membership of an insurance regulatory body/board if any
- Tax registration certificate (VAT),
- TIN Certificate
- Sample of the Company Medical Insurance Policy
- Geographical coverage of medical service providers across the country
- Provide other documents or information which shall be communicated to our Organization as per the appropriate laws of the country and customary practices in the insurance business

6. Technical Proposal requirements

The service provider is expected to have:

- Year of Experience of previous similar in provision of Employees Medical Insurance
- References/Testimony letters from INGO, NGO's, Governmental, Agencies, PLC and so on - in provision of Employees Medical Insurance
- Delivery Time (The maximum time required to settle claims after the presentation of all relevant documents from the insurer)
- Geographical Coverage of the insurance service
- Type of covers Insurance company Limit Package family/year (Minimum, Medium and Maximum)

7. Financial Proposal Requirements: The "Financial Proposal" must include

- Price based on a 12-month premium cost for current GOAL Employees
- The premium cost MUST include for all five categories
 1. In-patient,
 2. Out -Patient,
 3. Optical/Eye glass,
 4. Dental Cover,
 5. Pregnancy and Maternity
- If the insurer provided partial premium from the above, will not be considered in financial analysis
- Insurance company Limit Package family/year



- Any additional benefit packages being offered by the company

no	Type of Cover	Item Description	Insurance company Package Limit family/year	Qty (total number of staffs)	Premium per person (including all taxes) in ETB	Total Premium per person (including all taxes) in ETB
Option 1	Minimum Package Cover	In-patient Cover		645		
		Out -Patient Cover				
		Dental Cover				
		Optical/Eye glass Cover				
		Maternity and pregnancy Cover		390		
Option 2	Medium Package Cover	In-patient Cover		645		
		Out -Patient Cover				
		Dental Cover				
		Optical/Eye glass Cover				
		Maternity and pregnancy Cover		390		
Option 3	Maximum Package Cover	In-patient Cover		645		
		Out -Patient Cover				
		Dental Cover				
		Optical/Eye glass Cover				
		Maternity and pregnancy Cover		390		

Note: Ensure that the premium is per person (member) and family package, where premiums are not affected by the number of dependants so.

1. **It will be Member +Spouse+ 4 or More children's**
2. **It will be Member + mother and Father for single staff members**

8. Evaluation criteria: Combination of the technical (65%) and financial proposal (35%)

8.1. Technical Evaluation criteria breakdowns (65%)

No	Qualitative award criteria and detail breakdown scoring	Weighting (Maximum Point)
1	<p>Year of Experience of previous similar in provision of Employees Medical Insurance</p> <p>1.1. 10 and above years of previous similar experience for employees' Medical Insurance (15%)</p> <p>1.2. 7-9 years of previous similar experience for employee's Medical Insurance (10%)</p> <p>1.3. 3-6 previous similar experience for employee's Medical Insurance 5%)</p> <p>1.4. Below 3 descriptions of previous similar experience for employee's Medical Insurance (0%)</p> <p>Note: Please provide your experience evidence documents in the 'technical Proposal' ensure to submit legal documents, organization company profile showing date of establishment/Issue date, office facilities, past performance record on similar services, paid up capital and other relevant credentials.</p>	15%
2.	<p>References/Testimony letters from INGO, NGO's, Governmental, Agencies, PLC and so on - in provision of Employees only Medical Insurance</p> <p>2.1. 7 & above References/Testimony letters in Medical Insurance (15%) (at least two of the testimony must be INGO)</p> <p>2.2. 6 References/Testimony letters in Medical Insurance (12%) (at least one of the testimonies must be INGO)</p> <p>2.3. 5 References/Testimony letters in Medical Insurance (9%)</p> <p>2.4. 4 References/Testimony letters in Medical Insurance (6%)</p> <p>2.5. 3 References/Testimony letters in Medical Insurance (3%)</p> <p>2.6. Two and below evidence References/Testimony letters in Medical Insurance (0%)</p> <p>Note: Please provide your evidence documents by attaching the testimony in the "technical Proposal"</p>	15%
3.	<ul style="list-style-type: none"> • Delivery time (The maximum time required to settle claims after the presentation of all relevant documents to the insurer). • The Insurer must collect the relevant documents from GOAL office and settle the claim. • Brokers/agents may be involved for consultation of this procurement process or for any facilitation of claim settlement. 	15%
	<p>3.1. Less than one week (15%)</p> <p>3.2. From one to two weeks (10%)</p> <p>3.3. From two to three weeks (5%)</p> <p>3.4. Above three weeks (0%)</p>	

	Note: Please provide your evidence documents by attaching in the “technical Proposal”	
4.	Ease of access to credit services from hospitals or clinics. This is depending on the Geographical Coverage	
	4.1. Addis Ababa at least 10 credit service providers (1%)	
	4.2. Oromia Region has at least 5 credit service providers (1%)	
	4.3. Amhara Region at least 5 credit service providers (1%)	
	4.4. Afar Region at least 3 credit service providers (1%)	
	4.5. Tigray Region at least 5 credit service providers (1%)	
	4.6. Somali Region at least 3 credit service providers (1%)	
	4.7. East West Harerge has at least 3 credit service providers (1%)	
	4.8. Benishangul Gumuz at least 3 credit service providers (1%)	
	4.9. Gambella at least 3 credit service providers (1%)	
	4.10. SNNP at least 3 Southern Nations, Nationalities and Peoples) (1%)	
	Note: <ul style="list-style-type: none"> • Please provide Any proof of evidence such as agreement/contract with credit service providers (hospitals or Clinics) with respective of branch offices availability, by attaching in the “technical proposal document” • If evidence is not provided the weighted score will be zero. 	10%
5.	Type of covers Insurance company Limit Package family/year (Minimum, Medium and Maximum)	10
	5.1. The Higher Minimum limit, or The Higher Medium limit or The Higher Maximum Limit package provided by the insurer (10%) 5.2. Weighted average based on the higher limit for the type of cover limits Note: Please complete the Annex table for limits packages (minimum, medium and maximum packages)	
Total number of points		65%

8.2. Financial Criteria (35%)

- Marks for cost will be awarded on the inverse proportion principle (shown below):
 - $\text{Score} = \text{points available} \times (\text{lowest price offered} / \text{bidder offer price})$
- The award of the contract should be made to the individual company whose offer has been evaluated and determined per the above criteria's.



9. Application Procedures

- Interested Insurers can obtain tender dossiers with instructions, accessing full tender documentation on our website <https://www.goalglobal.org/tenders>
- Any queries about the ITT should be addressed in writing to GOAL via email at clarifications@goal.ie Or can obtain clarification by coming to GOAL Ethiopia Head Office (Addis Ababa) starting from the first day of this invitation between 8:00AM - 4:30 PM office hours from Monday to Friday
- Bid submission instructions are in the tender documents and all bids must comply with the submission requirements.

10. Proposed Timeline

Line	Item	Date, Time and Time Zone
1	ITT published	29-December-2024
2	Closing date for clarifications	21-January-2025, 4:30PM East African Time
3	Closing date and time for receipt of tenders	27-January-2025, 11:00AM East African Time
4	Tender opening date and time	28-January-2025, 2:00PM East African Time
5	Tender Opening Location	GOAL Ethiopia, Addis Ababa, Head Office