**Terms of Reference for Tender:**

**Provision of Health Insurance for GOAL Staff in Sierra Leone**

**1. Introduction**:

* **Brief Overview of the Project/Task:** GOAL is seeking to establish a framework agreement for the provision of comprehensive health insurance services for its staff and their families in Sierra Leone. The agreement will cover an estimated of 151 individuals (goal staff) comprising of 151 goal staff and 1 spouse and 4 dependants each etc.

 The proposed framework agreement will be for an initial Number of month (12) months period which may be extended at GOAL's discretion to Number of year (03) additional (36) month periods, depending on supplier performance, GOAL funding and requirements. Service quality and pricing will be reviewed annual to ensure they remain satisfactory and aligned with current market standards.

* **Background Context:** GOAL is an international humanitarian organization dedicated to alleviating the suffering of the most vulnerable communities. Ensuring the health and well-being of our staff is paramount to our mission. This tender aims to secure a reliable health insurance provider to offer extensive coverage for our employees and their families.

**2. Purpose and Objectives**:

* **Main Aim of the Project/Task:** The primary aim is to provide comprehensive health insurance coverage for GOAL staff and their families in Sierra Leone, ensuring access to quality healthcare services.

**Specific Objectives:**

* To secure a health insurance provider that offers extensive coverage for various medical needs.
* To ensure timely and efficient reimbursement of medical claims.
* To provide additional benefits that support the overall well-being of staff and their families.

**3. Scope of Work**:

* **Detailed Description of the Work to be Carried Out:** The selected health insurance provider will be responsible for delivering the following services

**General Coverage:**

* Inpatient and outpatient services, including medications, X-rays, and laboratory tests.
* Coverage for medical consultations, chest X-rays, CBC tests, and other physician-prescribed requirements.
* Necessary antibiotics and vitamins prescribed by the physician.
* In-hospital treatment coverage if hospitalization is required for symptom management, as evaluated by a specialist physician.
* Full cost coverage if services cannot be provided through the medical network.
* Chronic medications included within the annual cases limit.
* Coverage for more than one medication upon the doctor’s request.
* Emergency cases in ER without a form, with conditions for non-urgent cases.
* Coverage for car accident injuries in the absence of third-party liability.
* Non-cosmetic skin disease coverage.
* Osteoporosis cases (tests and treatment) excluding medications subject to 10% of annual premium
* Hormones (tests and treatments) and glands treatment not related to fertility.
* Hepatitis A, B & C treatment.
* Coverage for all chronic diseases, tests, medication, and complications.
* Reimbursement of claimed invoices within 07 (seven) working days maximum.

**Maternity and Newborn Care:**

* Coverage for pregnancy tests (negative and positive).
* All vitamins related to maternity.
* Calcium and iron supplements for registered and non-registered maternity cases.
* Anticoagulants for pregnant women if medically necessary.
* Epidural needle coverage.
* Vitamins, tranquilizers, and food supplements subject to 100% and 100% according to the doctor’s prescription.
* Normal and caesarean deliveries.
* Newborn baby coverage from day one (baby must be added to insurance within one month of birth).
* Newborn babies’ coverage from day one, including congenital and hereditary diseases and disorders.
* Male circumcision for newborns from the maternity ceiling.
* Prematurity coverage.
* Dislocated hips (examination and supplies) for newborns.
* Neonates’ incubator coverage.
* Children’s vaccines according to the Ministry of Health National Program.
* Pregnancies without a waiting period for members before.
* Jaundice cases including phototherapy.

**Specific Medical Conditions and Treatments:**

* Mammogram tests.
* Physiotherapy (04 visits per member) within a year.
* Tonsils, adenoids, surgery, deviated septum, and sinusitis.
* Haemorrhoids, fissure, fistula, and hernia.
* Digestive system ulcer and endoscopy.
* Back pain, back surgery, knee pain, and surgery.
* Diabetes mellitus, blood tests, medication, and complications.
* Cardiovascular disease hypertension, tests, medication, and complications.

**Optical and Dental Coverage:**

* Optical coverage: 10% of the annual premium
* Optical coverage: 20% of the annual premium
* Dental coverage: 10% of the annual premium
* Dental coverage: 20% of the annual premium

**Administrative and Additional Benefits:**

* Grant 05 forms per year per covered members.
* Annual cases not less than 10% of the annual premium per year per member.
* Grant 05 extra out-of-hospital forms for maternity visits only.
* Ability to add family members to the health insurance (spouse, and up to maximum number of 04 children).
* Coverage all age groups of GOAL staff and their dependents.