



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

Background about GOAL

GOAL is an international humanitarian and development organization working with vulnerable communities affected by poverty, conflict, displacement, and climate shocks. GOAL Ethiopia has operated for over forty years and currently implements programmes across multiple regions of the country, including remote and hardship locations. Providing comprehensive medical insurance for staff and their dependents is a core duty of care obligation.

1. Objectives

The objective of these Terms of Reference is to obtain a comprehensive medical insurance service provider for a period of three (3) years Framework Agreement with a possible of extension subject to performance. The insurance scheme shall ensure clear and comprehensive coverage, eliminate claim rejections arising from ambiguous exclusions, protect GOAL Ethiopia from financial risk transfer, ensure effective utilization management, and mandate collaboration with an independently appointed insurance broker.

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

It promotes health and well-being among the workforce by ensuring access to necessary medical care, which is essential for maintaining productivity.

It provides financial protection by covering medical expenses, thereby reducing the financial burden on employees and their families.

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

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

2. Scope of the requirements

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.

The medical insurance service shall cover the following eligible beneficiaries:

- All full-time GOAL Ethiopia employees.
- Legally married spouses.



- Dependent children (biological, adopted and stepchildren).
- Natural mother and father of single employees.

a) Scope of Medical Coverage

Medical insurance coverage should be provided on a family-based annual basis. All benefit categories listed below are mandatory and must be included in the quoted premium. Partial or modular benefit packages will not be accepted. (option of shorter premium is added value e.g. 3/6/9 months options or package refund options of team members leave the organization before the premium end date).

- In-patient care
- Out-patient care
- Dental care
- Optical / eye care
- Pregnancy and maternity (Inclusive of surgical and readmission for any birth related complications with the mother and the newborn).

Note: The above packages will consist of drug/medication required for treatment and procedures.

b) Detailed Benefit Requirements

In-Patient Cover	
No	Benefit
1	Overall Annual Limit Per family
2	Hospital accommodation & Nursing Expenses (Bed Limit per night)
3	Physician's, Surgeon's, Consultant's & Anaesthetists' fees
4	Prescribed medicines and surgical appliances
5	Diagnostic and imaging services (including X-ray ECG, CT- Scan, MRI and PET, Endoscopy and any other scans required)
6	Inpatient Physiotherapy
7	Operation Theatre charges
8	ICU, HDU hospitalization
9	Congenital Conditions including Down Syndrome, ADHD, Autism
10	Inpatient gynaecological surgery
11	Internal & external prosthesis and appliances excluding dental prosthesis or appliances
12	Psychiatry and psychotherapy
13	Oncology/Cancer treatment
14	Lodger fees for adults accompanying a child below 8 years.
15	Day care surgery excluding cosmetic surgery
16	Reconstructive surgery following an accident excluding cosmetic surgery



17	Pre-existing and chronic conditions including HIV/AIDS
18	Emergency road ambulance
19	Hearing aids due to accident or illness
20	Treatment of fibroids and cysts
21	Inpatient dental & Optical treatment
22	Medical evacuation (road & air, domestic), Emergency stabilization prior to referral, Palliative inpatient care & pain management, Post-hospital continuation of care.

Out-Patient Cover

No	Benefit
1	Overall Annual Limit Per Family
2	Physician, Consultant fees
3	prescribed medicines, and dressings
4	Laboratory Tests and X-rays
5	Scans (ECGs, CT scans , MRI and PET Scans)
7	Outpatient Surgery
8	Outpatient Physiotherapy
9	Congenital conditions
10	Gynaecological and obstetrics treatment
11	Psychiatry & psychotherapy
12	Outpatient oncology services including consultation, chemotherapy, radiotherapy, and cancer-related diagnostic test
13	Urological cases treatment and surgery
14	Crutches or wheelchair hire
16	Hearing aids due to accident or illness
17	Ante-natal and post-natal care (including ultrasound).
18	Treatment of fibroids and cysts
19	Dermatological treatment (medically prescribed)
20	Prescribed vitamins and minerals
21	Preventive & Wellness Care, Annual preventive medical check-ups, NCD screening (HTN, diabetes, lipids), Specialist consultations without hospitalization, Chronic disease treatment and follow up

Dental Cover

No	Benefit
1	Overall Annual limit Per Family



2	Dental fillings (basic restorative treatment using quality materials), as medically indicated for teeth lost due to decay of its parts by infection, fracture, or accidental injury, with priority given to restoring the tooth in its original position
3	Orthodontic treatment and prosthodontic services included which shall be limited strictly to cases of accidental trauma resulting in significant structural damage to teeth or supporting oral tissues
3	Dental X-rays
4	Simple or surgical extractions
5	Anaesthetist's fees
6	Root canal treatment
7	Dental cleaning (scaling & polishing)
8	Preventive dental check-ups
9	Treatment of dental infections/abscesses
10	Dental care following accidents

Optical Cover

No	Benefit
1	Overall Annual limit Per Family
2	Eye lenses & glasses
3	Eye testing
4	Treatment of eye illnesses
5	Non-cosmetic eye surgery (cataract, glaucoma)
6	Chronic eye disease management
7	Paediatric vision correction follow-up

Pregnancy and Maternity Cover

No	Benefit
1	Normal or Caesarean section delivery
2	Pregnancy related complication
3	Anti D for RH negative mothers
4	Premature infant care including incubator
5	Family planning
6	Breast health diagnostics and treatment
	Medically prescribed and supportive vitamins and mineral supplements essential for maternal and fetal health during pregnancy and postnatal period
7	Menstrual and menopause-related care



In cases where delivery is by Caesarean Section (C-section), and the applicable pregnancy and maternity benefit limit is exhausted, any remaining medically necessary costs related to the delivery and associated hospitalization shall be covered under the Inpatient benefit limit, subject to the overall annual family coverage

3. Non-Excludable Conditions

However, any standard exclusions contained in the insurance company's policy wording, the following conditions shall be fully covered under this agreement:

- Infertility diagnostics and treatment (excluding IVF unless otherwise agreed),
- Pregnancy-related complications,
- Congenital and genetic conditions including Down Syndrome, ADHD, Autism.
- Chronic dermatological conditions when medically diagnosed.
- Medically prescribed vitamins and minerals linked to a diagnosed condition.
- Rejection of claims based on standard exclusions shall constitute a material breach of contract.

4. Utilization Management

- The insurer shall monitor utilization with alerts at 50%, 75%, and 80%. Case management shall apply for high-utilization cases.
- **For each coverage category of 80% utilization**, credit services may be suspended while reimbursement continues. Denial medical care due to utilization is prohibited. (Emergency and life-saving services must never be denied, even if credit services are paused)
- The insurer shall ensure that access to approved healthcare providers under the credit (cashless) arrangement is not unreasonably restricted due to administrative, operational, or system limitations of the insurer.

5. Financial Risk Protection

- Under no circumstances shall the insurance company request, invoice, or recover any additional payments from GOAL Ethiopia arising from over utilization, catastrophic illness, or actuarial shortfall. All financial risk shall be borne by the insurer within the agreed premium and benefit limits

6. Insurance Broker Engagement

- The insurance company shall cooperate fully with an insurance broker appointed by GOAL Ethiopia for claims oversight, utilization monitoring, and dispute resolution. Such cooperation shall not result in any additional cost to GOAL Ethiopia. Please refer to the ITT solicitation document Appendix 3 - **Financial OFFER**
 - **3.1. Financial proposal with Broker Engagement**
 - **3.1. Financial proposal without Broker Engagement**



7. 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
- 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.

8. Technical Proposal requirements

The service provider is expected to have:

- Year of Experience of previous similar in provision of Employees Medical Insurance (list of companies)
- Recommendation/Testimony letters from INGO- in provision of Employees Medical Insurance which have been client for more than 3 years
- 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 (Addis Ababa, Amhara, Afar, Gambella, Benishangul, Tigray, Oromia, Borena, E/WH, SNNPR, Somali) a **list of accredited clinics and services** (Full list of accessible government and private health service providers you have a contract with or experience working with)
- Type of covers Insurance company Limit Package family/year (Minimum, Medium and Maximum)

As part of their submission, bidders must clearly describe their process and procedures for managing staff movements during the policy period. This shall include:

- Enrollment of newly hired staff, including effective coverage of start dates, premium charging methodology (prorated or otherwise), documentation requirements, and processing timelines.
- Removal of staff due to resignation, termination, or contract end, including treatment of unused premium and applicable refund or credit mechanisms.

9. 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
 - ✓ In-Patient,
 - ✓ Out -Patient,



- ✓ Optical/Eye glass,
- ✓ Dental Cover,
- ✓ Pregnancy and Maternity

NOTE: If the insurer provided partial premium from the above, will not be considered in financial analysis

Insurance company Limit Package family/year

Evaluation criteria:

Combination of the technical (65%) and financial proposal (35%)

10. Proposed Timeline

Line	Item	Date
1	ITT published	May 20, 2026
2	Closing date for clarifications	June 5, 2026, at 4:30 PM GMT East African Time
3	Closing date and time for receipt of Tenders	June 10, 2026, at 4:30 PM GMT East African Time
4	Tender Opening Date and time	June 12, 2026, at 09:00 AM GMT East African Time
	Tender Opening Location	GOAL Ethiopia-Country Office, Addis Ababa