***ANNEX II + III:* TECHNICAL SPECIFICATIONS + TECHNICAL OFFER**

**Contract title: Invite for provision of medicla insuranc coverage policy** **p 1 /…**

**Publication reference:** 11/CUAMM/ETH/2025

**Columns 1-2 should be completed by the contracting authority Columns 3-4 should be completed by the bidder**

**Column 5 is reserved for the evaluation committee**

Annex III - the contractor's technical offer

The bidders are requested to complete the template on the next pages:

* Column 2 is completed by the contracting authority shows the required specifications (not to be modified by the bidder),
* Column 3 is to be filled in by the bidder and must detail what is offered (for example the words ‘compliant’ or ‘yes’ are not sufficient)
* Column 4 allows the bidder to make comments on its proposed supply and to make eventual references to the documentation

The eventual documentation supplied should clearly indicate (highlight, mark) the models offered and the options included, if any, so that the evaluators can see the exact configuration. Offers that do not permit to identify precisely the models and the specifications may be rejected by the evaluation committee.

The offer must be clear enough to allow the evaluators to make an easy comparison between the requested specifications and the offered specifications.

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| --- | --- | --- | --- | --- |
| **1.**  **Item number** | **2.**  **Specifications required** | **3.**  **Specifications offered**  **TO BE FILLED BY THE SUPPLIER** | **4.**  **Notes, remarks, ref. to documentation** | **5.**  **Evaluation committee’s notes** |
| **1** | * General Medical Cover (Inpatient/Outpatient):   Option I. ETB 100,000/family (Spouse and children) and for single per Parent  Option II. ETB 120,000/family (Spouse and children) and for single per Parent  Option III. ETB 130,000/family (Spouse and children) and for single per Parent   * Additional Covers   - **Eyeglasses:**  Option I. ETB 5,000/employee  Option II. ETB 7,000/employee  Option III. ETB 10,000/employee  - **Denture:**   Option I. ETB 10,000/employee  Option II. ETB 15,000/employee  Option III. ETB 20,000/employee    - **Pregnancy /Maternity:**  Option I. ETB 20,000/female employee or female spouses  Option II. ETB 25,000/female employee or female spouses  Option III. ETB 30,000/female employee or female spouses  - **General checkup:**  Option I. ETB 10,000/employee  Option II. ETB 15,000/employee  Option III. ETB 20,000/employee  - **Psycho-therapy:**  Option I. ETB 10,000/employee  Option II. ETB 15,000/employee  Option III. ETB 20,000/employee  Note :- Indicate your premium for each option separately |  |  |  |
|  | **Medical Insurance Policy should satisfy the following**:  Note: The following is applicable under General Medical Coverage   * Outpatient and inpatient consultation, diagnostic tests, and treatment with a specialist if consented by an individual; * Any Laboratory tests not limited to, X-rays, Ultra-sound, CT, and MRI, Oncology tests, and other diagnostic procedures, including testing for HIV/AIDS and other laboratory tests if required and consented by an individual. * Maternity care including pre-natal and post-natal care, routine support and advice, tests, consultation and treatment during childbirth, and management of pregnancy-related complications including defects or abnormalities and premature births; * Denture: - covers filling, bracing, and dental replacement as per the doctor’s order (other costs of gum treatment, Root Canal Treatment, procedures,…etc. are to be covered by Basic Medical Cover). * Eyeglasses: frame and lens up to the limit(other fees consultations/ procedures as required by optometrists, ophthalmologists or optician card,…etc to be covered by the basic cover) including Plano eyeglasses with identified diagnosis * General check-up including an annual general check-up and related tests. * Chronic and pre-existing illnesses should be covered. * C-section delivery regardless of the frequency * Vaccination and circumcision for newborn babies is covered. * Medication of **RH** factor should be covered. * Pre-cancer test check-up for breast and Reproductive organs * Physiotherapy treatment ordered by any physician is covered * No excess is required. * Newly born babies shall be automatically included in the policy. * No limitation is required for card, board, and lodging. * Abroad treatment (by the decision of the board of the highest medical hospitals in the country) * Illness due to Covid-19 shall be covered. * Any mental or emotional disorders (nervous breakdown), depression, and similar disorders. * Policy shall cover immediately after a premium is paid(no waiting period) * Expenses for obtaining of hearing aid, wheelchair, crutches, and bone/muscle supporting devices are covered; if it occurs due to illness or accidental injury(within the basic coverage limit) * The acceptable time to entertain medical claims from the date of treatment will be five months for Field Office staff and 3 months for Addis Ababa. |  |  |  |