

T/FWC/32MULTI/AMN/HEALTH INSURANCE /JUBA/06/01/2022/001

Form PRO-05 Version 1.3

NATIONAL CALL FOR TENDER Instructions to bidders Part 2

ACTED South Sudan

Date:

06/01/2022

Tender N°:

T/FWC/32MULTI/AMN/HEALTH_INSURANCE /JUBA/06/01/2022/001

ACTED is requesting through this tender a company to provide detailed financial and technical written proposals for the following service:

PRODUCT SPECIFICATIONS:

Health Insurance for South Sudanese staff members 1. Description:

2. Product class / category:

Services

3. Work Period:

One Year Framework Agreement

Item #	Description	Product category	Quantity	Measuring Unit	Location
1	Health Insurance for ACTED staff and dependents (Staff member + up to 6 dependents)	Services	1	Staff member	South Sudan, Uganda, Kenya, Sudan,Ethiopia and Egypt

Bidders should read tender documentation carefully, understand the tender requirements and complete the documents by filling all relevant sections. When submitting proposals for this tender, bidder will be considered committed until validity of the offer expires.

RESPONSIBILITIES OF THE CONTRACTOR:

1. Contract Duration:

1 Year FWA

2. Validity of the offer:

Six (6) months (minimum)

The answers to this tender should include the following elements:

- 1. The Technical Offer (Envelope/File 1 out of 2), clearly marked
- "T/FWC/32MULTI/AMN/HEALTH_INSURANCE /JUBA/06/01/2022/001- Technical Offer Do not open before 28-01-2022 14:00PM" (South Sudanese Local time)
 - 1.1 Signed and stamped instructions to bidders
 - 1.2 Signed and stamped technical project proposal
 - 1.3 Signed and stamped TOR
 - 1.4 Signed and stamped bidder's questionnaire

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- 1.5 Signed and stamped bidder's ethical declaration
- 1.6 Signed and stamped General Conditions for Purchase
- 1.7 Signed and stamped bidder's check list
- 1.8 A copy of the legal representative ID and company registration document
- 1.9 Legal documents proving that the bidder is officially registered as a medical company
- 2. The Financial Offer (Envelope/File 2 out of 2), clearly marked "*T/FWC/32MULTI/AMN/HEALTH_INSURANCE /JUBA/06/01/2022/001* Financial Offer Do not open before 06-01-2022 14:00 PM"
 - 2.1 Signed and stamped financial offer including the price per unit.
 - 2.2 Signed and stamped instructions to bidders.
 - 2.3 A copy of the legal representative ID and company registration document
 - 2.4 Bank account details

GENERAL CONDITIONS:

- 1. The closing date of this tender is fixed on <u>06/01/2021</u> at 16:00PM (South Sudanese local time) both for e-mail applications and in-hand delivery.
- 2. The offers must be submitted to ACTED's office in Juba at the following address; ACTED Office Hai Cinema Plot 64, block AXII Juba, South Sudan or by e-mail to south-sudan.tender@acted.org cc tender@acted.org. Suppliers sending their offer by E-mail only will be requested to submit original offers at a later stage if their offer is pre-selected.
- 3. Bidders are requested to fill in, sign, stamp and return all pages of instructions to bidders, financial and technical offer forms, bidder's questionnaire, ethical declaration and bidder's checklist according to ACTED format below.
- 4. The tender opening session will take place on 28/01/2022 at 14:00PM (South Sudanese local time) in ACTED Juba Office. Suppliers can request to attend the opening session on Skype. Suppliers must inform ACTED at least 24 hours' prior the opening session and must provide both their email and their skype username. This date may be subject to change.
- 5. The offer to the call for tender will not result in the award of a contract
- 6. Unsealed envelope and late offers will not be considered.
- 7. To ensure that funds are used exclusively for humanitarian purposes and in accordance with donors' compliance requirements, all contract offers are subject to the condition that contractors do not appear on anti-terrorism lists, in line with ACTED's anti-terrorism policy. To this end, ACTED reserves the right to carry out anti-terrorism checks on contractor, its board members, staff, volunteers, consultants, financial service providers and sub-contractor.

NOTE: ACTED adopts a zero tolerance approach towards corruption and is committed to respecting the highest standards in terms of efficiency, responsibility and transparency in its activities. In particular, ACTED has adopted a participatory approach to promote and ensure transparency within the organization and has set up a Transparency focal point (Transparency Team supervised by the Director of Audit and Transparency) via a specific e-mail address. As such, if you witness or suspect any unlawful, improper or unethical act or business practices (such as soliciting, accepting or attempting to provide or accept any kickback) during the tendering process, please contact the following phone number [add number] and/or send an e-mail to transparency@acted.org.



T/FWC/32MULTI/AMN/HEALTH_INSURANCE /JUBA/06/01/2022/001

SPECIFIC CONDITIONS:

Bidders have to be officially registered as a medical insurance service provider in South Sudan and neighbouring countries. A valid license certificate from the authority will need to be provided.

In addition to the financial offer, bidders must submit a detailed technical offer for the extra services they provide. Both are mandatory.

EVALUATION CRITERIA:

Technical proposal – 50 points of the overall score	
Services provided (including cover limits)	15
Additional benefits	5
General cover terms	5
General exclusion list	5
Regional and national health service providers	5
Reimbursement terms	5
Past and current experience	10
Financial proposal – 50 points of the overall score	
Financial	50
TOTAL	100

Bidders must provide all the above mentioned information.

Company name:	
Name of the authorized representative:	
Position:	
Date:	
Signature & Stamp	



Financial Offer

Envelope 2 out of 2
Or
File 2 out of 2



E-mail Address:

b.

PART A - FINANCIAL OFFER ACTED South Sudan

		PAKIA-FI	NANCIAL OF	FER ACTED Sou	th Sudan		
Date:	(d	ate should be indicated by the	e supplier)				
Tender N°: T/FWC/32MULTI/AMN/HEALTH_INSURANCE /JUBA/06/01/2022/001							
		To be	Filled by Bidder	(COMPULSORY)			
•	ant Note: Financial offer MUST be submitted i All scores will be calculated proporti experienced staff / best quality sam of Bidding Company:	ionally (the maximum number of	f scores will be awarde	ed to a bidder providing t	•	ngest proposal / most	
1.	Company Name:	()				
2.	Company Authorized Representativ	e Name: ()				
3.	Company Registration No:	()				
		No/Country/ N	linistry				
4.	Company Specialization:	()				
5.	Mailing Address:	()				
		Country/Governorate. /	City/St name/Shop-Of	fice No			
	a. Contact Numbers:	(Land Line:		/ Mobile No:	<u>)</u>		



T/FWA/32MULTI/MEDICAL INSURANCE/JUB/LOG/06-01-2022/001

I undersigned,	the bidder, agree to provide ACTED, non-profit NGC), with items answering the following specificati	ons, according to the general conditions
and responsibilities that I engage myself to follow	<i>1</i> .		

PLEASE FILL IN THE FOLLOWING TABLE CORRESPONDING TO MEDICAL SERVICES IN SOUTH SUDAN ONLY

Item #	Description	Suppliers Specification	Measuring Unit	Unit price (USD) per month inclusive of all taxes and charges	Number of months	Total price per year for South Sudan only	Suppliers Comments
1	Health Insurance for ACTED staff member only		National staff		1		
2	Health Insurance for ACTED staff member + 1 dependent		National staff		1		
3	Health Insurance for ACTED staff member + 2 dependents		National staff		1		
4	Health Insurance for ACTED staff member + 3 dependents		National staff		1		
5	Health Insurance for ACTED staff member + 4 dependents		National staff		1		
6	Health Insurance for ACTED staff member + 5 dependents		National staff		1		

PLEASE FILL IN THE FOLLOWING TABLE CORRESPONDING TO MEDICAL SERVICES IN UGANDA, KENYA, SUDAN, ETHIOPIA AND EGYPT.



T/FWA/32MULTI/MEDICAL INSURANCE/JUB/LOG/06-01-2022/001

Item#	Description	Suppliers Specification	Measuring Unit	Unit price (USD) per month inclusive of all taxes and charges	Number of months	Total price per year for Uganda, Kenya, Sudan and Ethiopia only	Suppliers Comments
1	Health Insurance for ACTED staff member only		National staff		1		
2	Health Insurance for ACTED staff member + 1 dependent		National staff		1		
3	Health Insurance for ACTED staff member + 2 dependents		National staff		1		
4	Health Insurance for ACTED staff member + 3 dependents		National staff		1		
5	Health Insurance for ACTED staff member + 4 dependents		National staff		1		
6	Health Insurance for ACTED staff member + 5 dependents		National staff		1		
7	Health Insurance for ACTED staff member + 6 dependents		National staff		1		

By dependents ACTED means spouse when married, children and parents.

For new born: Subject to be added from the birth date (The insurance shall cover the cost of treatment for newborns straight from when they are born).





BIDDER'S CO	OMMENTS/REMARKS:	
1.		
2.		
3.		
4.		
5.		
BIDDER'S TE	ERMS AND CONDITIONS:	
1.	Valid of the offer:	(recommended: 6 months or more)
2.	Terms of payment:	(within 30 days after completion of Services
Name of Bio	dder's Authorized Representative	:
Authorized s	signature and stamp:	
Date:		





PART B - BIDDER'S CHECK LIST ACTED South Sudan

<u>Date</u> (date should be indicated by the supplier)					
Tender N°: T/FWC/32MULTI/AMN/HEALTH_INSURANCE /JUBA/06/01	/2022/001				
BEFORE SENDING YOUR BIDDING DOCUMENTS, PLEASE CHECK THAT EACH OF THE FOLL	OWING ITEM	IS COMPLETE AN	D RESPECTS	THE FOLLOWING	CRITERIA:
	To be fille	d in by Bidder	For ACTE	ED use only (to be fil	led in by Purchase Committee)
Description		Included		esent	Comments
Firm	Yes	No	Yes	No	
Finar	ncial Offer			T	
1. Financial offer is signed and stamped by the supplier. (compulsory)					
2. Instructions to Bidders is signed and stamped by the supplier. (compulsory)					
3. The prices in the Offer Form are in USD and inclusive of all taxes and fees. (compulsory)					
4. The Bidding documents are filled in English. (compulsory)					
5. Bank account details are provided. (compulsory)					
6. Copy of the legal representative ID and registration certificate (for organisations only) (recommended)					
Name & Position of Bidder's authorized representative	_				
Authorized signature	_				