



ICAP Based at Columbia University’s Mailman School of Public Health, the Centers for International Programs (CIP) through its Program ICAP is a global leader in system strengthening and is one of the world’s largest program implementers and technical support providers for HIV prevention, care, and treatment, maternal and child health, and related health programs

In partnership with the Government of South Sudan, the Ministry of Health, and local NGOs, ICAP seeks to facilitate the further expansion of HIV services in South Sudan, including the greatly expanded provision of antiretroviral treatment (ART). Centers for International Programs, INC is registered as an International NGO by the Ministry of Justice Reg #1844

Mandatory documentation and information: 1. Certificate of registration of business (in Country where company was registered) 2. Revenue Authority Tax Registration Certificate (Indicating TIN) 3. Tax Clearance Certificate (Must be Valid). 4. Certificate of registration with South Sudanese Chamber of Commerce (for South Sudan registered companies) 5. Valid Operation and/or Trading License (whichever is applicable) 6. Articles and Memorandum of Association. 7. Audited Accounts for at least the last three years indicating the annual turnover (in case of a Joint Venture or Partnership, Audited Accounts of one of the principal partners will suffice) 8. Official Business physical, postal, telephone and email addresses 9. Twelve Months Certified Bank Statement. 10. Reference and recommendations from at least 3 present and 2 past clients with whom your firm has done business for the category being bided for

For Any requests for clarifications should be made in writing only and addressed to the Procurement Office at the following address: Email: swm2135@cumc.columbia.edu/mka2155@cumc.columbia.edu

The closing date for submitting a complete pre-qualification application is **8th August 2022, at 4:00PM**

CATEGORIES FOR SERVICES

| S/No. | categories | Details |
|-------|-------------------|--|
| 1. | Insurance Service | <ul style="list-style-type: none"> ✓ Medical ✓ Group Life ✓ Group Personal accidents ✓ Office contents ✓ Motor vehicle ✓ Motorcycles |
| 2. | Internet Service | See details below |



1. Below are the internet bandwidth requirements and the supported locations.

| S.No. | Location | Type of Internet Connection | | Bandwidth Requirement (Primary/Main internet link Bandwidth) | Bandwidth Requirement (Backup link) |
|-------|----------------------------|-----------------------------|----------|--|---|
| 1. | ICAP Juba Main Office | Fiber/WiMAX | | 10Mbps Upload /10Mbps Download (1:1) | 20Mbps/3Mbps Minimum bandwidth (VSAT on the ground) |
| | | | | 15Mbps Upload /15 Mbps Download (1:1) | |
| | | | | 20Mbps Upload /20 Mbps Download (1:1) | |
| | | | | 25Mbps Upload /25 Mbps Download (1:1) | |
| | | | | 30Mbps Upload /30 Mbps Download (1:1) | |
| | | | | 30Mbps Upload /30 Mbps Download (1:1) | |
| 2. | ICAP Field Sites (Ka-Band) | VSAT | Option-1 | 3Mbps Upload /5Mbps Download (Best Efforts) | |
| | | | 2 | 3Mbps Upload /10Mbps Download (Best Efforts) | |
| | | | 3 | 3Mbps Upload /20Mbps Download (Best Efforts) | |
| 3. | ICAP Field Sites (KU-Band) | VSAT | Option-1 | 1 Mbps Upload /1 Mbps Download (1:1) | |
| | | | 2 | 1.5 Mbps Upload /1.5 Mbps Download (1:1) | |
| | | | 3 | 2 Mbps Upload /2 Mbps Download (1:1) | |
| | | | 4 | 2.5 Mbps Upload /2.5 Mbps Download (1:1) | |
| | | | 5 | 3 Mbps Upload /3 Mbps Download (1:1) | |



| Location | Internet Platform | Supported Facilities |
|----------------------------|-------------------|--|
| ICAP Juba Sites | WiMAX/ Fiber | <ol style="list-style-type: none"> 1. Juba Teaching Hospital 2. Al-Sabah Hospital 3. Kator PHCC 4. Munuki PHCC 5. Juba Military Hospital 6. Malakia PHCC 7. Nyakuron PHCC 8. Gurei PHCC 9. Lutheran PHCC 10. Don-Bosco PHCC 11. Buluk PHCC 12. New site PHCC |
| ICAP Field Sites (KU-Band) | VSAT KU band | <ol style="list-style-type: none"> 13. Naandi Hospital 14. Ezo Hospital 15. Tambura Hospital 16. Source Yubu Hospital 17. Nzara Hospital 18. Yambio PHCC 19. Yambio Hospital 20. Maridi Hospital 21. Lui Hospital 22. Mundri PHCC 23. Bangasu PHCC 24. SakurePHCC 25. Gangura PHCC 26. Yangiri PHCC 27. Yambio PHCC 28. Nagero PHCC 29. St Theresa Isohe 30. Abara PHCC - magwi 31. Mary Immaculate Mapuordit Hospital 32. Rumbek Hospital 33. Wau Teaching Hospital 34. Yirol Hospital 35. Aluak-luak PHCC 36. Pachong PHCC 37. Diocese of Rumbek PHCC 38. Pajok PHCC - magwi 39. Lobone PHCC - magwi 40. Don Bosco PHCC Juba 41. Kirr Mayardit W Hospital- Rumbek |
| ICAP Field Sites (Ka-Band) | VSAT Ka band | <ol style="list-style-type: none"> 42. Kapoeta Hospital 43. Torit Hospital 44. Yei Hospital 45. Kajo-Keji Hospital 46. Wau Military Hospital |



| | | |
|--|--|--|
| | | 47. Magwi PHCC 48. St Bakita PHCC - YEI 49. Morobo PHCC - Yei 50. OBBO PHCC - Mawgi 51. OWING KIBUL PHCC - Magwi 52. Nyong PHCC -Torit 53. Nimule Hospital 54. Mvolo PHCC |
|--|--|--|

Additional conditions for internet service provision:

1. ISP must ensure >99% uptime with full backup service for WiMAX/fibre internet.
2. Real time bandwidth monitoring facility.
3. Must provide onsite support within 2 hours of complaint submission (during the office hours).
4. Must provide telephony & Email support
5. Must provide bandwidth management, shaping, website/content blocking at no extra cost.
6. ISP shall be responsible for their own equipment maintenance or replacement in case of any damage during the contract period.



2. GROUP MEDICAL INSURANCE SCHEME – TERMS OF REFERENCE

Additional Conditions for Medical Insurance service provision:

| | |
|-----------------------------|--|
| Scheme Name: | ICAP SOUTH SUDAN |
| Insured: | ICAP South Sudan staff and respective legitimate dependents |
| Address: | Kololo – Hai Juba Nabari, Juba – South Sudan |
| Period of insurance: | 12 months from October 1, 2022 |
| Currency: | USD |
| Premium: | USD |
| Scope of cover: | Comprehensive Inpatient and Outpatient |
| Family Size: | M + 5 (On another note, do provide a separate rate card for family sizes up to M + 10) |
| Entry Age: | 37 Weeks (Full Term Baby) |
| Age Limit: | 70 Years for Principal Members 21 Years for Dependents (Up to 25 Years with proof of schooling) |

Benefits Schedule

| Cover Details | Required Minimum Cover | Bidder Coverage |
|--|------------------------|-----------------|
| IN PATIENT | | |
| Room Entitlement | | |
| Newly diagnosed chronic conditions | | |
| Pre-existing, chronic conditions | | |
| Congenital, genetic conditions and neonatal care | | |
| Oncology/Cancer treatment: Full cover on 1 st diagnosis, but subsequently as a sublimit | | |
| Acute renal dialysis: Full cover on 1 st diagnosis, but subsequently as a sublimit | | |



| | | |
|--|--|--|
| Organ transplant excluding donor expenses | | |
| HIV/AIDS | | |
| Maternity - normal delivery | | |
| Maternity - 1st Emergency Cs | | |
| Last expenses - stand alone | | |
| | | |
| Non- accidental in-patient dental | | |
| Non- accidental in patient optical | | |
| Post Hospitalization medication | | |
| Air evacuation within East Africa (Amref or Other Medvac) | | |
| Ambulance services/Road evacuation | | |
| Lodger fees | | |
| Prescribed drugs and materials | | |
| Surgical fees including anesthesia & theatre drugs | | |
| Day care surgery | | |
| Venereal diseases & STIs | | |
| Prescribe physiotherapy | | |
| Inpatient illness cover | | |
| In patient accident cover | | |
| External prosthesis, surgical & medical appliances | | |
| Psychiatry & psychotherapy | | |
| Radiology (e.g., US, X-ray, CT, MRI, PET scans) | | |
| Referrals outside South Sudan (to Kenya, Uganda, India, Egypt, Sudan & Ethiopia) | | |
| Internal Referrals (From Field locations/states to Juba) | | |
| Specialist fees | | |
| Inpatient consultation fees | | |



| | | |
|---|--|--|
| ICU, IDU/HDU Hospitalization | | |
| COVID 19: Hospitalization, lab and treatment cost | | |
| | | |
| OUTPATIENT | | |
| Chronic, recurring & preexisting conditions | | |
| Outpatient Oncology/Cancer treatment | | |
| HIV/AIDS management and related conditions | | |
| Outpatient dental (Standalone) | | |
| Outpatient optical (Standalone) | | |
| Routine Antenatal | | |
| Postnatal care | | |
| Routine immunization for Infants and baby friendly vaccines | | |
| Routine general checkups for staffs only | | |
| Outpatient consultation fees | | |
| Venereal Diseases & STIs | | |
| Specialist fees on referral | | |
| Prescribed physiotherapy | | |
| Prescribed diagnostic tests | | |
| Prescribed drugs & materials | | |
| Accident cover | | |
| Congenital conditions | | |
| Psychiatry & psychotherapy | | |
| Radiology (CT, MRI, X-ray, US, PET scans) | | |
| COVID 19: Lab and treatment cost | | |



Optical cover

This cover caters for the cost of eyeglasses, eye testing and contact lenses and frames tied to every contractual year.

Dental Cover

This caters for treatment of teeth and includes X-ray, cleaning, scaling, polishing, ordinary extraction, consultations, gum disease, filling, root canals, prescriptions, braces, crowning & bridging.

Maternity Cover

Specific maternity cover shell is available for cover option. This benefit will cater for all pregnancy and confinement related hospitalizations. The cover extends to the staff/spouse only and not daughters/sons

Buffer fund

A buffer fund of USD should be provided for within the scheme to cater for members that may exhaust their limits before expiry of the scheme year. This shall be applicable to both outpatient and inpatient cases including capped sub limits.

Prorate Premium

ICAP South Sudan has some staffs on short term contract often subject to renewal. Therefore, premiums for staffs on short term contracts should be computed on prorate basis. All bidders are required to clearly indicate this in their proposals.

Important Requirements

- Valid Statutory documents and certificates (Incorporation Certificate, Tax Clearance certificates, Tax Identification Certificate, Operations License, IRA Certificate, Chamber of Commerce Certificate)
- Agree to Prorate charge for staff with less than 12 months' contract

