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# BACKGROUND INFORMATION

## Partner country

Georgia

## Contracting authority

The European Union Monitoring Mission Georgia (EUMM Georgia)

## Country background

The EUMM Georgia is a civilian Common Security and Defence Policy (CSDP) Mission deployed to Georgia by the Council of the EU further to the EU-brokered “six-point” cease-fire agreement of 12 August 2008 between the Russian Federation and Georgia. As such, the EUMM’s main Mandate is to independently monitor the implementation of this agreement and to help normalise the relationships between the two countries with a view to a durable political solution for the region.

Concretely, and without an exhaustive description, over 200 EUMM monitors have been patrolling day and night, particularly in the areas adjacent to the South Ossetian and Abkhazian Administrative Boundary Lines. The EUMM’s efforts have been primarily directed at observing the situation on the ground, reporting on incidents, and, generally, through its presence in the relevant areas, contributing to improving the security situation.

The EUMM has its main office in Tbilisi and operates countrywide, within the Tbilisi-Administered Territory, through three Field Offices (Mtskheta, Gori and Zugdidi) and a variable number of Forward Bases established as and when necessary. The EUMM is supported in its efforts by an approved strength up to 129 local staff members.

Any further information on the EUMM’s mandate will be provided on demand to the Service Provider as appropriate and within the limitations imposed by the existing policy on classified information.

## Current situation in the sector

There is requirement for the EUMM Mission to provide its local staff employees with an appropriate health insurance package. The provision of the medical insurance to local staff comprising accident, sickness, etc. derives from the European Council Decision extending the Mandate of the Mission. Given that the local social and labour legislation along with a growing public awareness on the importance of private health insurance providers entrusts the provision of healthcare by the employers to private providers, the EUMM Georgia turned to the vibrant healthcare insurance market in Georgia to insure its local staff.

## Related programmes and other donor activities

Not applicable

# OBJECTIVES & EXPECTED OUTPUTS

## Overall objective

The overall objective (Impact) to which this action contributes is: To provide health insurance for EUMM Local Staff Members deployed in HQ Tbilisi and the Field Offices: Mtskheta, Gori and Zugdidi.

## 2.2 Specific objective(s)

The specific objective of this contract is as follows: To insure Local Employees; actual budget of the Mission provides for **117** local employees with 12 months employment regime and **6 temporary employees** for an approximate period of 6 months each (from 15 December 2024 until 14 December 2026, with a possible 24-month extension). The future number of the staff is not certain, as the EUMM Georgia’s staffing is subject to a political decision, and in the future Mission Mandate organisational numbers might change during the contract period.

## Expected outputs to be achieved by the contractor

The expected outputs of this contract are as follows: the provision of the most complete and timely service of health insurance for the EUMM Local staff (i.e., reimbursement of the medical costs eligible within a 4 weeks period) within the constraints and in accordance with the conditions set out in this document.

# ASSUMPTIONS & RISKS

## Assumptions underlying the project

This contract is submitted to the availability of the budget allocated to these insurance services. Locations of coverage within Georgia may vary during the set period.

The contract price shall be adapted to reflect the variations in the number of EUMM Mission’s Local Staff.

## Risks

Usual risks in a potential conflict area.

# SCOPE OF THE WORK

## General

### Project description

The health insurance services required under this project concerns the total number of Local Staff of the EUMM Mission in Georgia (hereinafter “insured person(s)”). The actual budget of the Mission provides **for 117 local employees and 6 temporary employees for the period of 6 months each.** The future number of the staff is not certain, as the EUMM Georgia’s staffing is subject to a political decision, and in the future Mission Mandate organisational numbers might change during the contract period.

Of the current personnel:

1. 61 % are females
2. 39 % are males

The current age structure is as follows:

Females:

* from 31-40 years of age, 29% out of the female local staff;
* from 41-50 years of age, 49% of the female local staff;
* 51 years and over, 22% of female staff.

Males:

* from 31-40 years of age, 20% out of the male local staff;
* from 41-50 years of age, 30 % out of the male local staff;
* 51 years and over, 50 % out of the male local staff.

The contract shall be adapted to the variations in the number of insured persons during its period of execution.

For each insured person, comprehensive insurance coverage must comprise as the conditions specified hereafter:

* Accidental Death;
* Disability coverage, in case of illness, including an occupational disease, or accident;
* Health insurance, which includes different kinds of diagnostic investigations and treatment services, such as in-patient and out-patient treatment, due to illness (due to communicable or non-communicable disease) or accident, maternity as well as for preventive purposes (including occupational health and immunisation);
* Income protection, in case of economic disability (loss of earnings), resulting from an accident or illness;
* Additional medical services.

### Geographical area to be covered

For the above-mentioned coverage:

* Territorial cover:

1. the medical care coverage shall include the whole territory of Georgia. Exceptionally, in case of extreme medical emergency or accident, which occurs while staying outside this territory, emergency care in the country of occurrence will be covered.
2. the benefits in case of death or permanent disability, resulting from an accident shall be valid world-wide (24 hrs.).

* Insured staff members will be given the possibility to include their dependents in the insurance scheme at their own cost. For this purpose, dependents will be the spouse and children up to 18 years of age, or up to 25 if they do not have a regular income.
* Coverage must cover expenses of any kind of injuries and accidental death occurred during war and SRCC activities (such as revolutions, hostilities, strike, riots, civil commotions, disorders, demonstrations, explosions, gatherings with potential risk).

### Target groups

EUMM Local staff and their dependants.

## Specific work

The tenderer has to offer detailed information about each policy line. This information should include purpose and policy coverage, definitions, benefits, obligations to be fulfilled by the insured, exclusions (if any), causes of suspension of the cover (if any), premium deductions, and other particularities.

Note: For your offers, please use attached table - Annex A to the ToR

|  |  |
| --- | --- |
| **Category of Services** | **Requested Coverage** |
| **1. Geographical coverage** | **1.1.** The whole territory ofGeorgia |
| **1.2.** In any other country, where a medical emergency or accident occurs. |
| **1.3.** World-wide (24 hrs) for death or permanent disability. |
| **2. Dependents coverage and continuation** | **2.1.** Inclusion of dependents in the insurance scheme at the cost of the insured person (staff member). |
| **2.2.** The staff member who quits his/her function with EUMM should have the option to extend the Insurance Coverage for one fixed period of up to six months at his/her own expense. The request for continuation would be submitted by the staff member directly to the Insurance Company, and the premium will be paid by the staff member concerned. |
| **3. Injuries occurred during war and SRCC activities** | **3.1.** Coverage must cover expenses of any kind of injuries occurred during war and SRCC activities (i.e. revolutions, strike, riots, civil commotions, disorders, demonstrations, explosions, gatherings with potential risk, etc.). |
| **4. Accidental Death** | **4.1.** Life insurance including indemnification for death due to an accident of not less than 50,000.00 GEL. |
| **5. Disability coverage, in case of illness or accident.** | **5.1.** Permanent disability (i.e. the disability placing the insured person in a partial or total inability to perform any and every day gainful occupation for which s/he is reasonably fitted by training, education and experience). It should include both total and partial disability and the subsequent coverage for at least the following areas:  The cover does not expire in the event of contract expiration of the insured if the accident occurred while the contract is in force. |
|  | **5.1.1.** Incurable mental alienation; |
|  | **5.1.2.** Total organic paralysis; |
|  | **5.1.3.** Paralysis of nerves; |
|  | **5.1.4.** Total blindness; |
|  | **5.1.5.** Amputation or the permanent loss of the use of: - both arms or both hands  - both legs or both feet  - one arm or hand and one leg or foot |
|  | **5.1.6.** Total loss of the sight of one eye with ablation; |
|  | **5.1.7.** Total loss of one eye without ablation; |
|  | **5.1.8.** Loss of whole thickness of substance of the skull; |
|  | **5.1.9.** Incurable total deafness of both ears; |
|  | **5.1.10.** Incurable total deafness in one ear; |
|  | **5.1.11.** Total and partial ablation of the lower jaw; |
|  | **5.1.12.** Loss of top and bottom teeth and their sockets (impossibility of fitting dental prosthesis); |
|  | **5.1.13.** In the case of possible prosthesis with established functional improvement: - Loss of arm or hand  - Total paralysis of an upper limb  - Total paralysis of the circumflex nerve - Total paralysis of the median nerve  - Total paralysis of the cubital nerve at the elbow - Total paralysis of the nerve of the hand  - Total paralysis of the radial nerve above the triceps |
|  | **5.1.14.** Complete anchylosis of the scapulohumeral articulation: - with immobilisation of the shoulder-blade  - with mobility of the shoulder-blade |
|  | **5.1.15.** Non-consolidated fracture of the arm; |
|  | **5.1.16.** Total loss of movement of the elbow:  - in an unfavourable position   - in a favourable position |
|  | **5.1.17.** Non-consolidated fracture of the fore-arm: - both bones - a single bone |
|  | **5.1.18.** Total loss of movement of the wrist:  - in an unfavourable position   - in a favourable position |
|  | **5.1.19.** Total and partial amputation of a thumb; |
|  | **5.1.20.** Total and partial anchylosis of a thumb; |
|  | **5.1.21.** Amputation of index-finger: - total  - two phalanxes - one phalanx |
|  | **5.1.22.** Amputation of second finger; |
|  | **5.1.23.** Amputation of third finger; |
|  | **5.1.24.** Amputation of fourth finger; |
|  | **5.1.25.** Total paralysis of a lower limb; |
|  | **5.1.26.** Complete paralysis of the internal popliteal sciatic nerve; |
|  | **5.1.27.** Complete paralysis of the external popliteal sciatic nerve; |
|  | **5.1.28.** Complete paralysis of both popliteal sciatic nerves; |
|  | **5.1.29.** Shortening of a lower limb; |
|  | **5.1.30.** Complete anchylosis of the hip; |
|  | **5.1.31.** Upper and lower amputation of the thigh; |
|  | **5.1.32.** Non-consolidated fracture of the thigh or both bones of the leg; |
|  | **5.1.33.** Complete anchylosis of the knee; |
|  | **5.1.34.** Chronic hydrarthrosis according to the degree of muscular atrophy; |
|  | **5.1.35.** Non-consolidated fracture of the knee-cap with wide separation of the fragments and considerable difficulty in extension of the leg from the thigh; |
|  | **5.1.36.** Amputation of a leg; |
|  | **5.1.37.** Tibio-tarsian anchyloses; |
|  | **5.1.38.** Total and partial amputation of a foot; |
|  | **5.1.39.** Amputation of all toes; |
|  | **5.1.40.** Amputation of big toe; |
|  | **5.1.41.** Amputation of a toe other than big toe; |
|  | **5.1.42.** Anchylosis of the big toe; |
|  | **5.1.43.** Other unlisted events should be also compensated; |
|  | **5.1.44.** Loss of use of a limb should be considered like the loss of the limb itself; |
|  | **5.1.45.** Multiple listed events deriving from the same accident should be compensated. |
| **6. Health insurance, which includes different kinds of medical treatment (such as treatment in and out of hospital) caused by illness, accident, maternity or necessary preventive care.** | **6.1.** Minimum cover of 85% of the expenses of the medical treatment prescribed by doctors qualified to treat patients. |
|  | **6.2.** Cover of 100% of the total costs of hospital services (including doctor's fees), such as: |
|  | **6.2.1** Bed and board: for a two-bed room AND for a private room when the hospitalization in a private room is required due to the nature and gravity of the illness and such care is requested by the attending physician**.** |
|  | **6.2.2** General nursing service; |
|  | **6.2.3** Use of operating rooms and equipment; |
|  | **6.2.4** Use of recovery rooms and equipment; |
|  | **6.2.5** Laboratory examinations; Laboratory exams at home in case of prescription from the doctor. |
|  | **6.2.6** X-ray examinations; |
|  | **6.2.7** Radiotherapy, chemotherapy and haemodialysis; |
|  | **6.2.8** Emergency room treatment; |
|  | **6.2.9** Intensive care; |
|  | **6.2.10** Out-patient surgery; planned surgery including bariatric when medical indications are clearly present. |
|  | **6.2.11** Out-patient treatment and day-care in connection with hospitalisation; |
|  | **6.2.12** Transport by ambulance to and from the hospital; |
|  | **6.2.13** Drugs and medicine for use in the hospital; |
|  | **6.2.14** Medical certificate (including form # 100 and sick leave statement from insurance) upon demand of insured person; |
|  | **6.3.** Minimum coverage of 85% of the total costs (regardless of if it is provider or  non-provider medical facility) of out-patient treatment including doctor’s consultations, doctor’s home visits in case of acute illness, prescribed drugs by treated doctor including birth control pills, homeopathic medicines, dressings, laboratory tests, including Covid-19 tests (when symptomatic), X-rays and ultrasound examination,  Minimum coverage of 80% of not prescribed drugs (i.e. OTC drugs) up to 250 GEL a year. |
|  | **6.4.** Minimum coverage of 80% of the total costs (regardless of if it is provider or non-provider medical facility) of maternity care, including prenatal care, delivery and post-natal care are reimbursable as costs of out - patient treatment and costs of hospitalisation. |
|  | **6.5.** Dental treatment: Minimum 85% coverage of dental treatment (regardless of if it is provider or non-provider medical facility), including fees of a dental practitioner carrying out treatment in dental surgery, examinations, tooth cleaning, individual preventive treatment, filling, root treatment, tooth extraction, crowns, X-rays, local anaesthesia. Up to the limit 2500 gel in providers and 2000 gel in non-providers medical facility.  Prostheses (including bridges, implants, dentures) minimum 50% coverage. |
|  | **6.6.** Special examinations and treatments with at least 80% coverage of the total cost of: |
|  | **6.6.1.** Psychiatric treatment including psychoanalysis should be reimbursable, if the patient is treated by a psychiatrist. |
|  | **6.6.2.** Radiological treatment. |
|  | **6.6.3.** Home nursing by qualified nurses immediately following treatment as an  in-patient or day-patient on specialist recommendation. |
|  | **6.6.4.** Hearing aids. |
|  | **6.6.5.** Coverage of optical expenses, including fees for the examination and lenses/spectacles.  100% coverage of lenses/spectacles once in a year up to the limit 500 Gel.  Minimum 50% coverage of refractive eye surgery (LASIK) in certified severe defects of the visus (minus 7 dioptres or more). |
|  | **6.7.** Preventive care. |
|  | **6.7.1.** Dental check-up: Minimum coverage of 80% of the total cost of one routine dental check-up per insured person should be reimbursed. |
|  | **6.7.2.** Routine Gynaecological check-up: Minimum coverage of 80% of the total cost of one routine gynaecological check-up for female and corresponding check-up for male insured person should be reimbursed. |
|  | **6.7.3.** Minimum 80% coverage of the total costs arising from physical examinations and the application of medical tests for the early recognition of disease (including those related to occupational risks exposure) should be reimbursed. |
|  | **6.7.4.** Minimum of 80 % coverage of the total costs of Preventive Vaccinations recommended by qualified doctor. Post exposure vaccination recommended by qualified doctor coverage 100%, (Rabies, D/T). |
|  | **6.8.** Transport costs: The cost for professional ambulance service used to transport the Insured Person between the place where he/she is injured by an accident or stricken by a disease and the first hospital where treatment is given should be reimbursed. The transportation costs for eventual transfer from the initial hospital to another (preferable) hospital should be covered. |
| **7.Income protection** | **7.1.** Income protection should include: A monthly allowance to be paid to the insured person in case of an accident or illness leading to an economic disability (loss of earnings). The maximum amount of the said allowance should not be less than 1,080.00 GEL per month for a period not inferior to 2 years. This provision shall be effective whenever the degree of incapacity caused by accident or illness is higher than 25% and the amount awarded shall be proportional to the degree of disability, as determined by the EUMM Mission’s medical services and accepted by the insurers. |
| **8. Additional services** | **8.1.** Additional medical services: It includes service at rehabilitation centres including medical massage, physical-therapy treatment swimming pool, physical exercises in gym or institute recommended as recovery by family doctor/specialist doctor with coverage not less than 40% of the total cost. |
| **8.2.** Travelling insurance abroad, minimum of GEL 125,000.00 coverage with the maximum of 10 weeks multi-trip period: It includes in-patient services, emergency medical transportation, urgent dental treatment, repatriation, following illness/accident, or at under the request of the visited country`s authority, urgent out-patient services, one accompanied person transportation cost from Georgia to visited country (during insured person’s hospitalization), flight delay and loss of luggage. |
| **8.3.** Public liability covers: Travelling abroad, minimum of 133,000.00 GEL against the financial consequences of public liability s/he could incur under the legislation in force or from the jurisprudence, regarding bodily injuries and material damages to some third party during the trips provided for by the cover. |
| **9. Period of execution** | **9.1.** The starting date is 15 December 2024 and the period of execution of the contract will be until 14 December 2026. Please refer to Article 19 of the Special Conditions for the actual commencement date, period of execution and a suspension clause. |

Note: An offer to each point is mandatory and subject to evaluation based on the evaluation grid.

## Project management

### Responsible body

EUMM Georgia Human Resources Section.

### Management structure

The EUMM Head of Human Resources under the supervision of the EUMM Chief of Staff will be responsible for the overall management of the contract. Invoices will be processed by the EUMM Finance Section, which will be responsible for the payment after checking and endorsement by the EUMM Head of Human Resources and an Authorizing Officer.

### Facilities to be provided by the contracting authority and/or other parties

Not provided.

# LOGISTICS AND TIMING

## Location

Georgia

## Start date & period of implementation

The intended start date is 15 December 2024 and the period of implementation of the contract will be 24 months from this date. Please see Articles 19.1 and 19.2 of the special conditions for the actual start date and period of implementation.

This contract may be renewed by a further 24-month period (that is from 15 December 2026 until 14 December 2028) through new contract signed by all parties, preceded by a negotiated procedure. Such a renewal – is subject to: (i) the extension of the EUMM mandate; (ii) a satisfactory Service Provider’s performance as determined by the Contracting Authority.

# REQUIREMENTS

## Personnel

A contact person shall be assigned on a permanent basis so that a continuous and reliable working relationship can be developed and maintained in the interest of both parties. S/he must be fluent in English.

### Key experts

Not applicable.

### Non-key experts

Not applicable.

### Support staff & backstopping

The contractor will provide support facilities to their employees (back-stopping) during the implementation of the contract.

Backstopping and support staff costs must be included in the fee rates.

## Office accommodation

Not applicable

## Facilities to be provided by the contractor

The contractor must ensure that their employees are adequately supported and equipped. In particular it must ensure that there is sufficient administrative, secretarial and interpreting provision to enable the employees to concentrate on their primary responsibilities. It must also transfer funds as necessary to support their work under the contract and to ensure that its employees are paid regularly and in a timely fashion.

## Equipment

**No** equipment is to be purchased on behalf of the contracting authority / partner country as part of this service contract or transferred to the contracting authority / partner country at the end of this contract. Any equipment related to this contract that is to be acquired by the partner country must be purchased by means of a separate supply tender procedure.

## Incidental expenditure

No incidental expenditure is foreseen for this contract.

## Lump sums

No lump sums are foreseen in this contract.

## Expenditure verification

No expenditure verification is foreseen for this contract.

# REPORTS

## Reporting requirements

Please see Article 26 of the general conditions.

|  |  |  |
| --- | --- | --- |
| **Name of report** | **Content** | **Time of submission** |
| Health Insurance “bonus/malus” report | Bonus/malus overview as required. | as per Project Manager’s request |
| Progress report | Short description of implementation referred to the above. The progress reports must be written in English. The Project Manager is responsible for approving the progress reports. | Twice per year |
| Draft final report | The draft final report should include a description of the problems encountered and recommendations. | No later than 1 month before the end of the implementation period. |
| Final report | The final report should include a description of the problems encountered and recommendations; a final invoice and the financial report accompanied by the expenditure verification report. | Within 1 month of receiving comments on the draft final report from the project manager identified in the contract. |

## Submission & approval of reports

Two copies of the reports referred to above must be submitted to the project manager identified in the contract. The reports must be written in English. The project manager is responsible for approving the reports.

# MONITORING AND EVALUATION

## Definition of indicators

Will be done through follow up meetings at the beginning and a second one after 6 months of contract implementation.

Incidences, statistics and response times will be monitored and evaluated.

## Special requirements

It is mandatory that the offers, which are going to be submitted in the tender, should follow the structure of the present Terms of Reference. In case of additional documents (e.g. tables, charts etc.), the Annex A will prevail.

\* \* \*