

## **Terms of Reference**

For the specific task of:

### **Medical Insurance Coverage - 2023/2024 -**

#### Terms of Reference

DOT Lebanon is an organization launched in Lebanon since 2010 with headquarters in Ottawa, Canada, working towards enabling people to access and apply information and communication technologies (ICT) to create education, economic and entrepreneurial opportunities. We empower young people, entrepreneurs, schools, and SMEs with the business, digital and life skills to start businesses, find jobs and generate income.

**Digital Opportunity Trust Lebanon** is seeking the services of a Medical Insurance Company to cover our staff with In-House & Out-Patients Benefits/Coverage. The selected insurance company is expected to be a reputable, reliable, and experienced insurance company with a track record of providing employee insurance coverage.

The coverage should start from the 1st of October 2023 and will be renewed on yearly basis.

The chosen company should be able to offer a medical insurance policy based on the following table:

**Table of Benefits**

IN-PATIENT BENEFITS	CLASS B
Maximum/Year/Insured:	CLASS B US\$ 200.000 Per insured Per Year
Employees & Dependent's age	Employees up to 64 years inclusive Newborn babies as of birth Legal Dependent's: children up to 25 years when still full time registered students
Geographical Scope	Worldwide as per Lebanon Preferred Network Tariff's
Emergency Due to accidents and Sickness	Worldwide at 100% as per Lebanon Preferred Network Tariff's
Medical Network	Full Network in Lebanon
Insurability	Applicants: New & Existing / NO Underwriting to be applied
Daily Room & Board Limit	Inside Lebanon, Inside Network 100%
Intensive Care Unit	Outside Network or cash claims, Outside Lebanon, as per Lebanon Preferred Network Tariff's
Pre-Existing Cases	To be covered up to the policy limit
Guaranteed Renewability	<b>Per decree no. 186/ICC</b>
MATERNITY COVERAGE	<ul style="list-style-type: none"> <li>➤ Normal Delivery, Caesarean Section, Legal Miscarriage &amp; Legal Abortion</li> <li>➤ Complication due to pregnancy</li> <li>➤ Epidural</li> <li>➤ Amniocenteses</li> <li>➤ Triple Test</li> <li>➤ Toxoplasmosis &amp; Rubella</li> <li>➤ ONE Morphological Ultrasound per pregnancy</li> </ul>

Newborn Babies Benefits	<ol style="list-style-type: none"> <li>1. Free of charge insurance coverage as of birth</li> <li>2. Nursery, Incubator &amp; ICN</li> <li>3. Phototherapy (neonatal jaundice)</li> <li>4. ONE pediatric consultation</li> <li>5. Male circumcision</li> </ol> <p>Congenital cases to be covered:</p> <ul style="list-style-type: none"> <li>➤ For Newborn Babies</li> <li>➤ For Adult &amp; Children</li> </ul>
<p>Maternity Waiting Period</p> <ul style="list-style-type: none"> <li>• Normal Delivery</li> <li>• Cesarean</li> <li>• Legal Abortion</li> </ul>	<p>Not Applicable</p> <p>For existing pregnancy cases: Inside Lebanon Inside Network 100% up the below showing Limits.</p> <p>US\$ 5,000 US\$ 6,000 US\$ 2,500</p> <p>Outside Network or cash claims, Outside Lebanon Applicable same as above</p>
Waiting Period	As of inception date / No waiting period applies
<p>OUT-PATIENT BENEFITS</p> <p>Mandatory to all Insured, where applicable</p>	CLASS B
Out-Patient Limit	US\$ 15,000 Per insured Per Year
Network	Full Network in Lebanon / Hospitals Labs. & Laboratories
<p>Ambulatory services X-Rays, Laboratory Tests, PET SCAN, VCT64 multi-channel, etc.</p>	<p>Inside Lebanon Inside Network 85% Outside Network or cash claims reimbursement: 80% R&amp;C* as per Lebanon Preferred Network Tariff's up to the Out-Patient Limit Outside Lebanon 80% as per Lebanon Preferred Network Tariff's up to the Out-Patient Limit</p>
<p>Physiotherapy, Laser Therapy &amp; Kinesitherapy (Max. 20 Sessions /Disability)</p>	Inside Lebanon 100% up to \$30 per session

Supplemental Benefits	
One Day Treatment	To be covered
Chemotherapy/Radiotherapy	To be covered

Renal Dialysis	To be covered
Allergy: Treatment and tests	To be covered
Infertility: disease of the reproductive system defined by the failure to achieve a clinical pregnancy	To be covered: married and unmarried insured between age 20 and 45 years old under in-patient and out-patient  To be excluded: Invitro and similar artificial insemination procedures.
Psychotic Care: Treatment of mental disorders carried out by a psychiatrist.	To be covered: emergency and cold cases, under in-patient and out-patient To be covered: In-Hospital and Out-Patient treatment of psychotic disorders (e.g., schizophrenia) up to limit of 30 days per Insured per year.  To be excluded: <ul style="list-style-type: none"> <li>• Amphetamine, hypnotic and sedative products</li> <li>• Rest cures</li> <li>• Sanatorium</li> <li>• Custodial care</li> <li>• Period of quarantine</li> </ul>
Obesity: The abnormal or excessive fat accumulation that presents a risk to the health. A crude population measure of obesity is the body mass index (BMI), a person's weight (in kilograms) divided by the square of his or her height (in meters).	To be covered under in-patient and out-patient  In-patient surgeries cover gastric bypass, sleeve gastrectomy, adjustable gastric band, and biliopancreatic diversion with duodenal switch.  Insured with morbid obesity that has persisted for at least 5 years, with morbid obesity defined through either: <ul style="list-style-type: none"> <li>• A body mass index (BMI greater than 40); or,</li> <li>• A body mass index (BMI) between 35 (inclusive) and 40 together combined with any of the following severe co-morbidities that are likely to reduce life expectancy :</li> <li>• Coronary heart disease</li> <li>• Obesity related cardiomyopathy</li> <li>• Type 2 diabetes mellitus</li> <li>• Hypertension</li> <li>• Obstructive sleep apnea</li> <li>• Obesity related pulmonary hypertension</li> <li>• Clinically significant asthma</li> <li>• Moderate to severe gastric esophageal reflux disease</li> <li>• Disabling degenerative joint disease of the lower extremities</li> </ul>

Companion Room: Accommodation for a Child under the age of 12 years	To be covered
Nose Related Surgeries	To be covered
Emergency Dental Treatment of Accidental damage to natural teeth	Includes Dental services for the treatment of accidental injuries to sound natural teeth through violent external means
Emergency Optical Treatment of Accidental damage to Eye	Includes Optical services for the treatment of accidental injuries through violent external means
Rental of Wheelchair	To be covered
Clinical Surgeries	To be covered
Osteoporosis	To be covered
Prosthesis Including Stents & Valves	To be covered
Cataract Including the Cost of Lens	To be covered
Organ Transplantation: To include cost of surgical procedures in performing an organ transplant of either a kidney, Liver, Heart, Lung, in respect of the insured person as recipient	To be covered
Artificial Limbs & Eyes	To be covered
Prostate	To be covered
Bone Marrow Transplant	To be covered
Sleep Disorder: If caused by sleep apnea (temporarily stopping of breathing during sleep)	To be covered
Polysomnography	To be covered
Terrorism Acts	To be covered
Passive War Risk: Accidental Bodily Injury of Insured due to war or warlike operations	To be covered up to the policy limit
Pandemic and Epidemic Diseases	To be covered
Road Accidents	To be covered
Local Ambulance transportation services	To be covered
Hemodialysis	To be covered

Hazardous Sports as nonprofessional member	To be covered
Home Nursing	To be covered
Sexually Transmitted Diseases	To be covered
Durable medical appliances	To be covered
Congenital Anomalies and Birth Defect	To be covered
Prior disabilities	To be covered up to policy limit
Breast Reconstruction	To be covered if following mastectomy due to breast cancer
Repatriation, Morgue & Burial Expense	To be covered up to \$2.500

The applying entity should submit a **detailed** and **financial proposal** including:

- Minimum of 7 years of relevant experience
- Provide a list of hospitals or laboratories that will not be covered for employees
- List of medical exclusions

**SUBMISSION PROCEDURE: Sealed Envelopes**

1. The offer shall remain firm for 30 days from the closing date
2. Submitted in English language **in a sealed envelope**, to the following address:  
**Jal El Dib Lebanon, Mar Abda Street, Bldg Chukri Jebara, 7th Floor** with the subject line:  
**“Tenderer Name” Medical Insurance Coverage-2023/2024 - addressed to Procurement Unit**
3. Received to the above mentioned address before the Friday 22nd of September 2023 by 4:00 pm.

Thank you for providing us with the below mentioned documents:

- Commercial Circular
- Commercial Certificate
- Financial Registration Certificate
- Tax registration number & certificate
- Identification Card of the persons mentioned in the circular
- Three client references from the past 2 years related to similar projects (names, email, phone).  
 These references should be available for a reference check by DOT Lebanon.

- Portfolio
- Payment Terms (Cash, cheque, transfer)
- Offer Validity
- Bank Information
  - Bank Name:
  - Branch:
  - Account Holder Name:
  - IBAN:
  - Swift Code:

All documents should be clearly labeled so it is clear to understand what each file relates to.

An authorized representative of the service provider must sign, stamp, and date the bid, and other relative documents accompanying it.

**For queries please contact the procurement unit at [procurementlb@dotrust.org](mailto:procurementlb@dotrust.org)**