

**GLOBAL MEDICAL COVERAGE
HEALTH INSURANCE FOR
LOCALLY EMPLOYED STAFF**

US EMBASSY LOME

**SOLICITATION AT
BETA.SAM.GOV**

**PROPOSALS DUE ON
13 OCTOBER 2020 AT
1600 GMT**

GETTING STARTED

DISCLAIMER

The purpose of the brief is to summarize key points. However, it's not a replacement for compliance with the terms of the solicitations. In the event of a discrepancy between the brief and the solicitation and the amendments the solicitation shall rule.

Introductions

- Christina Stegura, CO
- Christa Dohnani, Procurement Supervisor
- Virginie Ahocou, COR

PROPOSAL SUBMISSION INSTRUCTIONS

- Direct any questions to the contracting officer at LomeProcurement@state.gov
- Submit proposals by email to LomeProcurement@state.gov or by mail to American Embassy Lome 4332 Blvd Eyadema, BP 852 Lome, Togo
- Proposals due by **13 October 2020 at 16:00 GMT**/local time
- Off the shelf products are encouraged, but a product brochure on its own does not constitute a valid proposal
- Please make sure your proposals are COMPLETE

SAM REGISTRATION

- Offerors must be registered in the System for Award Management (SAM)
- Beta.SAM.gov
- Guidelines for SAM registration: https://www.fsd.gov/fsd-gov/learning-center-system.do?sysparm_system=SAM

REQUIRED ELEMENTS FOR COMPLETE PROPOSALS

- Cover form SF-33
- Section B
 - Currency (must be filled in)
 - Pricing Schedule (must be filled in)
 - Retention Amounts (must be filled in)
- Section C, Comprehensive presentation of proposed insurance coverage required in clear, understandable language addressing all the listed categories of benefits (spreadsheet recommended)
- Section K, Representations and Certifications (boxes checked and blanks filled)
- Section L, All information from all 4 parts must be included

COVER FORM SF-33

- Box 15A Business Name and Address
- Box 15B Phone number
- Box 16 Name and Title of Authorized Signer
- Box 17 Signature
- Box 18 Offer Date

15A. NAME AND ADDRESS OF OFFEROR	CODE <input type="text"/>	FACILITY <input type="text"/>	16. NAME AND TITLE OF PERSON AUTHORIZED TO SIGN OFFER (Type or print)	
15B. TELEPHONE NO. (Include area code)	15C. CHECK IF REMITTANCE ADDRESS [<input type="checkbox"/>] IS DIFFERENT FROM ABOVE - ENTER SUCH ADDRESS		17. SIGNATURE	18. OFFER DATE

SECTION B, PRICING SCHEDULE

- B.2.2 – Must fill in currency of offer
- Exclude VAT – The US Embassy has a VAT exemption
- Provide monthly rates for each category of premium
 - Employee only: 1 covered individual
 - Employee plus one: 2 covered individuals
 - Employee plus family: 3 or more covered individuals
- Fill in pricing table for Base Year and Four Option Years
- Multiply estimated number of premiums by monthly rate for monthly total and multiply by 12 for annual total

SECTION B, PRICING SCHEDULE

B.2.3. Base Year of Contract

Category	Monthly Rates Per Premium		
	Estimated Number of Premiums*	Rate per Premium	Extended Monthly Total
a. Self (Employee)	15		
b. Self Plus One (Employee's Spouse)	15		
c. Family: (3 or more individual)	115		
d. Subtotal			
Total Price for Base Year (d x 12)**			

*estimated number of premiums does not include any Riders (B.1.1)

**does not include any premiums for Riders.

Rider Category***	Monthly Rate per Premium
ORE Staff	
Peace Corps Employees	

***not included in the Total Price for Base Year Calculation

RIDERS NOT INCLUDED IN PRICING SCHEDULE

- Official residence (ORE) staff and Peace Corps Employees are included at the same rates as a rider and billed directly to Chief of Mission and Deputy Chief of Mission (ORE) and Peace Corps (Peace Corps)
- The USG is not responsible nor liable for any riders

SECTION B, GRAND TOTAL

- Provide the total for base year plus all option years

B.2.7. Grand Total of Base plus All Option Years

• Base Year Total	
• First Option Year Total	
• Second Option Year Total	
• Third Option Year Total	
• Fourth Option Year Total	
Grand Total of Base plus All Option Years	

SECTION B, RETENTION AMOUNTS

- Retention Amount includes all costs minus actual amount intended to be paid to medical providers or claimants
- Retention Amount includes overhead, administration, profit, etc.
- Provide Retention Amount for each category of Monthly Premium for Base Year and ALL Option Years
- The Retention Amount is required for any Economic Price Adjustments for the duration of the contract

SECTION B, RETENTION AMOUNTS

Period of Performance	Employee	Employee's Spouse	Employee's Dependent Child
Base Period			
First Option Year			
Second Option Year			
Third Option Year			
Fourth Option Year			

SECTION C, DESCRIPTION / SPECIFICATION / WORK STATEMENT

- Section C details the MINIMUM acceptable benefits
- Proposed coverage levels must MEET OR EXCEED these minimum benefit levels
- Off-the-shelf products are encouraged as long as they MEET OR EXCEED the minimum coverage levels in every category
- Off-the-shelf products may need to be tailored in some areas to meet or exceed the minimum acceptable benefits and address every category
- Offerors must provide a coverage level for EVERY category listed

SECTION C, MINIMUM COVERAGE LEVELS

- Where the minimum coverage level is 100%, only 100% coverage is acceptable
- Where the minimum coverage level is 80%, any level of coverage at or above 80% is acceptable
- Where a minimum sub-limit is included (e.g., hearing aids, optical care, dental care, etc.), proposals must meet or exceed the stated minimum sub-limit

SECTION C, ANNUAL MAXIMUM LIMIT

- The Annual Maximum Limit is **11,875,000 FCFA** per covered individual per contract year
- Proposals must meet or exceed the Annual Maximum Limit

SECTION C, BROCHURE REQUIREMENT

- The winning Contractor must provide a brochure describing the benefits in both French and English within 30 days of award
- The Contractor will be responsible for providing brochures for all employees and upon request

SECTION E, INSPECTION AND ACCEPTANCE

- Solicitation/Contract includes many clauses from the Federal Acquisition Regulations (FAR)
- Some clauses included by reference only, others in full text throughout the contract
- Full FAR clauses can be found at <http://www.acquisition.gov/far/>

SECTION E, INSPECTION AND ACCEPTANCE

- Quality Assurance and Surveillance Plan (QASP)
 - No more than one (1) customer complaints per month
- The Contracting Officer's Representative (COR) will receive and review complaints for validity, document them and communicate them to the Contractor appropriately
- Please review procedures for receiving and addressing complaints

SECTION F, DELIVERIES OR PERFORMANCE

- Covers period of performance and options: base year plus four one-year options to renew
- Reports and deliverables should be sent to the Human Resources Officer (HRO) who is the COR for this contract

SECTION G, CONTRACT ADMINISTRATION DATA

- Outlines the role and duties of the Contracting Officer's Representative (COR)
- The COR maintains the list of the covered employees and dependents
- Payment in currency identified in B.2.2
- Invoices should be sent to:
 - DBO, Attn: FMO, US Embassy Lome, Togo, 4332 Blvd Eyadema – Cite OUA, B.P. 852 Lome, Togo
- Invoices may be submitted quarterly at the beginning of the quarter
- Invoices for ORE and Peace Corps must be submitted to their respective parties
- Overpayments may be settled as a credit or refund at the discretion of the CO
- VAT should not be included in invoices as the US Embassy has a tax exemption

SECTION H, SPECIAL CONTRACT REQUIREMENTS

- Covers Security, Standards of Conduct, Ordering Procedures
- The Embassy will issue task orders identifying all employees and dependents to be covered
- The COR may make subsequent additions or deletions from this list
- Premiums should be pro-rated for changes based on dates of employment
- Riders (for ORE staff and Peace Corps) are not included in the task orders—they are reported by the employer or by the COR, but clearly identified as separate from Embassy employees and dependents

SECTION H, SPECIAL CONTRACT REQUIREMENTS

- Contractor Responsibility in Claims and Reimbursements
 - Maintain administrative records
 - Provide Claim forms to the COR
 - Settle reimbursement claims within two weeks
- Employees return claim forms to the COR, to be collected by the Contractor
- Online claims submission process welcome, but Contractor must accept paper claims as well
- Payment method of check or EFT as selected by claimant
- Payment shall be accompanied by details of the amount reimbursed with an explanation of any deductions

SECTION H, SPECIAL CONTRACT REQUIREMENTS

- Contractor should provide a detailed Employee Claims Report to the COR every month
- Contractor should have all necessary permits, licenses, and registrations for the services covered by this contract and pay any necessary fees and taxes due to the host government, at no cost to the U.S. Government

SECTION I, CONTRACT CLAUSES

- Numerous FAR clauses included by reference or in full
- Instructions provided in contract to find full text of FAR clauses at <http://www.acquisition.gov/far/>
- Minimum order from the Embassy guaranteed at 75 premiums
- Maximum order: Contractor is not obligated to fulfill any single item in excess of 150 premiums or combination in excess of 1000 premiums

SECTION J, EXHIBITS/ATTACHMENTS

- Employee Demographics/Statistics
 - List of employees, employee's spouses and dependent children by gender and age ranges
 - List of Official Residence Employees (ORE) and Peace Corps Rider employees, employee's spouses and dependent children

SECTION K, REPRESENTATIONS AND CERTIFICATIONS

- **Please read carefully: Several parts require information to be provided and boxes checked**
- K.1.b.2.i Insert full name and title of person responsible for determining the prices in the proposal
- K.4.d Taxpayer Identification Number only required for U.S. citizens/companies
- K.6.2 System for Award Management (SAM)
 - Contractors must be registered with SAM to receive a contract
 - Contractors may complete certifications in SAM through <https://www.sam.gov>
- K.7.A,B,C,D and E each have boxes to check:
 - (E) The Offeror has has not , within a three-year period preceding this offer, had one or more contracts terminated for default by any Federal agency.
- K.8.b Check appropriate line (1) or (2)

SECTION K, REPRESENTATIONS AND CERTIFICATIONS

- K.9 Authorized Contract Administrator: provide name, address and phone
- K.11 Prohibition on Contracting with Domestic Inverted Corporations
 - Check boxes appropriately to declare (K.11.c.1) if a domestic inverted corporation or not, and (K.11.c.2) if a subsidiary of a DIC or not
- K.12 Representation Regarding Certain Telecommunications and Video Surveillance Services or Equipment
 - “Covered telecommunications equipment or services” includes all Huawei and Huawei subsidiaries’ products and services, including ZTE, Hikvision, Dahua, Hytera products
 - Check appropriate box in K.12.2.d.1 for will or will not provide any of the covered equipment or services in performance of this contract
 - Check appropriate box in K.12.2.d2 for does or does not use any of the covered equipment or services as a substantial or essential component of any system, or as critical technology as part of any system

SECTION K, REPRESENTATIONS AND CERTIFICATIONS

- K.13 Tax on Certain Foreign Procurements
 - *Foreign person* means any person/company other than a United States person/company
 - K.13.d.1 Check box to identify as a foreign person or not
 - K.13.d.2 Check box if submitting IRS Form W-14 and claiming an exemption (information available at www.irs.gov/w14) or not
 - There is a 2% tax imposed on services from foreign companies in countries that do not have a tax treaty with the United States or are not part of the World Trade Agreement (Togo is not part of the WTO)
 - The tax is used to fund the World Trade Health Program
 - The tax may not be included in the contract price

SECTION L, INSTRUCTIONS, CONDITIONS AND NOTICES

- Proposals include three separate volumes
 - 1. Completed SF-33 Form (Section A of the solicitation/contract) and completed Section K, Representations and Certifications
 - 2. Price proposal and completed Section B including Base Year and All Option Year pricing, riders, and retention amounts
 - 3. Technical Proposal including all technical factors and subfactors, addressing Section C Benefits and Section L, parts 1-4

SECTION L, INSTRUCTIONS, CONDITIONS AND NOTICES

- Part 1, Health Insurance Services
 - Must meet minimum requirements in section C for each benefit listed
 - Multiple proposals are acceptable
 - Recommendation: Submit a table that lists the Section C benefit definitions in one column and list the proposed coverage in the adjoining column
- Part 2, Understanding the Requirement
 - Demonstrate understanding through explaining how contract will be administered and requirements met
- Part 3, Experience and Past Performance
 - Past experience over the last 3 years must be included with identifying contact information and total value for similar services
- Part 4, Licensing Information
 - Proof of ability to work in Togo

SECTION M, EVALUATION

- Proposals must follow all instructions in the Cover Letter and Section L, Instructions, Conditions and Notices
- Proposals will be evaluated in two phases
 1. Technical Evaluation
 2. Price Evaluation
- M.5 Details the technical evaluation process to determine technical acceptability
- Price evaluation includes base year plus all option years (excluding Riders)
- The Embassy will also make a responsibility evaluation, using responses to L.4.3 Part 3 Experience and Past Performance, L.4.3 Part 4 Licensing, and L.9 Financial Statement

QUESTIONS AND WRAP UP

- Q&A and meeting minutes will be posted on beta.SAM.gov
- Direct any questions to the contracting officer at LomeProcurement@state.gov
- Submit proposals by email to LomeProcurement@state.gov or by mail to American Embassy Lome 4332 Blvd Eyadema, BP 852 Lome, Togo
- Proposals due by **13 October 2020 at 16:00 GMT**/local time
- Off the shelf products are encouraged, but a product brochure on its own does not constitute a valid proposal
- Please make sure your proposals are COMPLETE