**QUALITY CONTROL PLAN**

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| **PR/MAR #: KMP 0970** | **Tender #: UG01/ KMP 0970 / SHARED /21** |
| **PR/MAR Description:** Provision of Health Insurance benefits for team members and their dependents in Uganda. | |

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| Quality Control Team include:  Human Resource Coordinator.  Human Resource Director.  Country Director.  Finance Director. |

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| Essential Specifications and Testing Requirements. The Quality Control (QC) Plan below details the procedures that will be used to assess the suitability and acceptability of the Insurance Cover services to be offered by prospective bidders. The QC will help determine whether the bidder that is selected is responsive to the tender and is qualified to perform the contract satisfactorily. The QC plan will seek set standards that will ensure that controls are in place from the point of submission of bids, and evaluation, pre-contracting phase and during the course of delivery of services after the award of the contract.  Below is the specification of standards that will be put in place as part of the QC:   1. Submission of Tenders: During the submission of tenders, the following standards shall be ensured:    * All Tenders must be submitted electronically and shall be sent to [tenders@mercycorps.org](mailto:tenders@mercycorps.org) . The proposals submitted must clearly be labelled technical proposal and financial proposal.    * All Tenders must be received not later than the stipulated deadline indicated in the Invitation to Tender. A log for receipt of tenders will be maintained and late tenders will not be considered. 2. Tender Evaluations: This will be based on the examination of the documentary evidence of the bidders’ qualifications submitted by the tenderer to evaluate the firm’s experience, capacity, capability and available resources to deliver quality of services. It will be based upon on the following:    1. Reference letters from current and past clients for similar services rendered;    2. Client Reference from current clients;    3. Claims Administration evidenced by reference letters from service providers that bidders engage with;    4. Presentations required of the shortlisted bidders to gain deeper understanding of their bids and seek clarity. 3. Pre-contracting: Reference checks of the final/selected bidder to ascertain the authenticity of information provided and ensure quality delivery of services. An affirmative determination will be a prerequisite for award of the contract to the tenderer, while a negative determination will result in rejection of the bidder’s tender, in which event the selection team will proceed to the next lowest evaluated tender to make a similar determination of that bidder’s capabilities to perform satisfactorily. 4. Award Criteria: The Tender Selection Committee shall award the contract to the successful bidder whose tender has been determined to be substantially responsive and provided further that the tenderer is determined to be qualified to perform the contract satisfactorily. To qualify for the contract award, the bidder shall have the following: 5. Necessary qualifications, capability experience, services and facilities to provide the services being procured. 6. Legal capacity to enter into a contract for procurement. 7. Shall not be insolvent, in receivership, bankrupt or in the process of being wound up and is not the subject of legal proceedings relating to the foregoing. 8. Shall not be debarred from participating in public procurement. 9. Service Agreement: This will have developed based on agreed upon timelines to govern the delivery of services in order to manage expectations.      1. Dedicated team to manage the scheme: This will be presented based on a mix of the service provider’s technical structure to support management and running of the scheme 2. Quarterly Review Meetings and Reports: These will be required to give an indication of the performance and management of the scheme. 3. Member monthly utilization reports: these will be used to provide members with checks and balances that billing to respective accounts has been done appropriately as well as an avenue to give feedback for any anomalies. 4. Member education: this provides members with information about the details of the scheme and an opportunity to clarify their expectations on the level of service that they should expect to receive. 5. Supplier scorecard: this will be used to rate performance and quality of service of the vendor/service provider before the renewal of the scheme. 6. The medical coverage should include the following: 7. Out-patient consultations, diagnostic tests, and treatment with a specialist if consented by an individual including but not limited to paediatrician, gynaecologist, dermatologist, physiotherapist, urologist, neurologist and psychiatrist. 8. Access to a private ward, single room, in the hospital most appropriate for the case, including medical, surgical, diagnostic and therapeutic services appropriate to the accident/illness; 9. Treatment of short-term (acute) medical conditions, including in-patient tests, and surgery; 10. Accident and Emergency admission, treatment and care; 11. Laboratory tests, x-rays, ultrasound, CT and MRI scans, oncology tests and other diagnostic procedures, including testing for HIV/AIDS if required and consented by the individual; 12. Maternity care including pre-n atal and postnatal care, routine support and advice, tests, consultations and treatment during childbirth, and management of pregnancy related complications including congenital defects or abnormalities and premature births; 13. Conduct health assessments and clearance for staff, when required to (N.B, No member or dependant will be required to undertake an HIV test before entering employment time); 14. Critical illnesses eg HIV/AIDS, cancer - provide treatment of opportunistic infections, Antiretroviral therapy and the appropriate monitoring where necessary for any HIV positive member and his/her named dependants; provide counselling for members and immediate family, especially in the case of a confirmed terminal illness, suspected or known HIV infection; provide treatment including chemotherapy and care for cancer; 15. Be able to counsel and provide emergency post exposure prophylaxis in the case of known or suspected exposure to HIV infection or cancer. 16. Provide reasonable Psychiatric services including counselling services, drugs and treatment for members and immediate family in case one develops a psychiatric condition; 17. Non cosmetic dermatology consultations and treatment; 18. Provide rehabilitation and counselling services for any member who suffers permanent loss of one or more limbs or eyes or suffers from total or partial disablement; provide specialist equipment e.g. mobility, hearing aids etc if deemed necessary; 19. Provide optical services including eye testing, surgery and lenses as prescribed a qualified ophthalmologist to an agreed financial limit; 20. Offer a wide range of options of medical and para-medical practitioners, clinics and hospitals to members on the scheme; 21. Provide dental services including cleaning, filling, extraction, root canals treatment and replacement of teeth lost through sickness or accident to an agreed financial limit. 22. Cover for the funeral and burial expenses in the event of the death of a member (not limited to staff but also to dependants) 23. Cover for travel insurance; 24. Rescue and evacuation to the most appropriate medical facility within Uganda 25. The service provider should be able to provide services throughout the whole country with emphasis in the following regions; Central region, Karamoja region, Acholi region and West Nile Region. Please note the district most visited by the staff for medical treatment:  * Kampala * Kitgum * Kaabong * Kotido * Gulu * Amudat * Moroto * Abim * Moyo * Arua * Yumbe * Lira * Karita * Karenga * Mbarara * Bushenyi  1. The covers should also be able to reach another East African Country other than Uganda in the event of any occasional travel by staff. 2. The insurance broker should be able to negotiate with the medical service providers on behalf of Mercy corps.  |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Parameter** | **Target Value** | **Margin of Error** (Absolute or Relative)[[1]](#footnote-0) | **Testing Method**  (Lab Test, Visual, Certificate...) | **Performed / Reviewed by:** | | Provide Medical Coverage to all employees and defendants | 823 | Absolute | Review of proposed medical policies | HR Team | | Provide medical coverage as listed above | 1 | Absolute | Review of proposed medical policy | HR team | | Provide Medical services throughout the whole country | .1 | Absolute | Review of listed locations, hospitals and clinics in the proposed policies | HR team | | The medical cover should be able to reach another East African Country | 1 | Absolute | Review of listed locations, hospitals and clinics in the proposed policies | HR Team | | The insurance broker should be able to negotiate with the medical service provider | 1 | Relative | Review of insurance broker proposals | HR Team | |

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| Contract Testing Requirements.  1. Service Agreement: This will have developed based on agreed upon timelines to govern the delivery of services in order to manage expectations. 2. Dedicated team to manage the scheme: This will be presented based on a mix of the service provider’s technical structure to support management and running of the scheme. 3. Quarterly Review Meetings and Reports: These will be required to give an indication of the performance and management of the scheme. 4. Member monthly utilization reports: these will be used to provide members with checks and balances that billing to respective accounts has been done appropriately as well as an avenue to give feedback for any anomalies. 5. Member education: this provides members with information about the details of the scheme and an opportunity to clarify their expectations on the level of service that they should expect to receive |

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| Non-Conformance Review Meetings and commitment from the vendor on corrective action to be taken and timelines to be documented.  ***Termination of Contract. (Severe).*** Nonconformance of the selected service provider to the stated requirements will lead to termination of the contract in line with the contractual clauses indicated. |

1. *A relative margin of error will be indicated as a percent (example: +-5%); an absolute margin of error will be indicated as a value (example: +- 5cm)* [↑](#footnote-ref-0)