Elizabeth Glaser
Pediatric AIDS Foundation
Fighting for an AIDS-free generation

REQUEST FOR PROPOSALS (RFP- 09/003/YDE/20026)

PROVISION OF MEDICAL INSURANCE AND BENEFITS

in support of

ELIZABETH GLASER PEDIATRIC AIDS FOUNDATION (EGPAF)

Location - Yaounde | Street 1.878| Bastos, Near the Residence of Nigerian Ambassador Opposite Post Office - Bastos Yaoundé, opposite Campost Bastos, ***P.O Box 35620 Bastos, Yaoundé***

Completed proposals must be submitted in a sealed envelope and deposited in the EGPAF tender box at the EGPAF Regional Offices address indicated below. Alternatively, proposals may be submitted electronically to cameroontenders@pedaids.org no later than Monday, September 23, 2026, at 5:00 PM, Cameroon Time

Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), a non-profit organization, is the world leader in the fight to eliminate pediatric AIDS. Our mission is to prevent pediatric HIV infection and to eliminate pediatric AIDS through research, advocacy, and prevention and treatment programs. EGPAF operates in more than 19 countries in the world, including Cameroon. For more information, kindly visit http://www.pedaids.org.

I- PURPOSE/SCOPE OF SERVICES

The purpose of this RFP is to obtain proposals to enter into a contract to provide medical insurance for EGPAF employees in Cameroon.

The scope of services must include as a minimum:

Employees: 236 Spouses: 102 Children: 401

Total: 739 Peoples (Please note that this figure is subject to revision)

II- BIDDER ELIGIBILITY

Through this Request for Proposals (RFP), EGPAF invites all qualified and licensed insurance company or insurance brokers specializing in the following areas to submit their proposals :

N°	Lot Number
1	Lot 1: Medical Insurance
2	Lot 2: Funeral Insurance
3	Lot 3: Life Insurance

Bidders are invited to submit separate proposals for Lot 1, Lot 2, and Lot 3.

Lot 1: MEDICAL INSURANCE

Jurisdiction of coverage is Cameroon only and must include 2 various options for appraisal:

- 100% full coverage public and Para public medical institution
- 90% coverage for private infrastructure

Areas of service requested

- Medical Consultation and miscellaneous
- Outpatient pharmaceutical costs

- Medical hospitalization
- Surgical hospitalizations
- Ophthalmology
- Laboratory examination and radiology

✓ **Staff deployment and location**

EGPAF Cameroon is based in 4 main regions: Littoral – Centre – East and South; the insurance broker or insurance company is expected to be able to provide the insurance coverage in the 4 specified regions WITH NO DISRUPTION OF SERVICE.

II-1- ADDITIONAL REQUIREMENTS

✓ **Transparency of coverage and tariffs**

The bidder should provide, prior to contract signature, a detailed and published tariff/coverage grid specifying the exact reimbursement rate applicable per facility and per type of care (e.g., glasses, medication, second medical opinion). Survey respondents reported discovering coverage rules only at the point of service use, and cases of inconsistency between the announced rate (100%) and the rate actually applied in some public health facilities (90%). The bidder must describe the dispute-resolution mechanism available to staff when a discrepancy is identified.

✓ **Reimbursement processing SLA**

Reimbursement processing and turnaround time was the most criticized area in the 2026 survey. The bidder must commit to a maximum processing delay (from submission to payment) and describe the tracking mechanism made available to insured staff to monitor the status of a reimbursement claim. This commitment will be assessed under evaluation criterion B.4.

✓ **Reliability of digital cards and care vouchers**

The bidder must guarantee stable, real-time validation of insurance cards and pre-authorization vouchers across all 4 covered regions (Littoral, Centre, East, South), including in the event of network connectivity issues, with no disruption to service delivery.

✓ **Customer service and complaints handling**

The bidder must provide a dedicated customer service contact and a documented complaints-escalation path, with a committed response time, to address the service-quality concerns.

✓ **Insurance card issuance policy**

The bidder must clarify whether the insurance card is issued once for the duration of the contract or reissued (and re-charged) periodically and detail any associated cost.

Lot 2: Funeral Insurance

Reimbursement of funeral expenses incurred on the occasion of the death of an insured.

Insured: 1,500,000

Beneficiary: 1,000,000

Lot 3: Life Insurance

Guarantee: Death and absolute and definitive invalidity, all causes.

Capital insured per staff: 12 months of salary.

Salary estimated at XAF 200,000,000 (Two hundred million) per month.

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II-2 CONTRACTOR DELIVERABLES

Insurance company or insurance broker will provide the services described to the Foundation's Cameroon Office staff for a period of 12 months, with a mandatory coverage date of October 1st, 2026. The Foundation reserves the right to renew the awarded contract annually for up to 02 option years by agreement of both parties as specified by any written contract agreement.

✓ Key Contract Terms

The Foundation will provide a 12-months service contract to the winning bidder with the option to exercise additional 1 year option periods by agreement of both parties for up to two (2) years. The service contract will be a fixed price per unit award, the "unit" being the premium per person.

If the services provided to the Foundation are deemed unacceptable or fail to meet any of the conditions or specifications described in the submitted proposal, the Foundation will have the opportunity to cancel the service contract with 30 days' notice without penalty.

✓ Additional Information

The Foundation will accept the proposal from the qualified insurance Broker or insurance company that is the Best Value to the Foundation. This RFP is not an offer to enter into agreement with any party, but rather a request to receive proposals from organizations interested in providing the services outlined in this RFP. Such quotations shall be considered and treated by the Foundation as offers to enter into an agreement. The Foundation reserves the right to reject all quotations, in whole or in part, enter into negotiations with any party, and/or award multiple contracts. Any exceptions to the requirements or terms of the RFP must be noted in the quotation. The Foundation reserves the right to consider any exceptions to the RFP to be non-responsive.

The Foundation shall not be obligated for the payment of any sums whatsoever to any recipient of this RFP until and unless a written contract between the parties is executed.

Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) is committed to conducting its procurement processes in a fair, transparent, and non-discriminatory manner. All qualified and eligible bidders shall be given equal opportunity to participate in this solicitation and shall be considered objectively and in accordance with the requirements and evaluation criteria set forth in this Request for Proposals (RFP).

EGPAF shall not discriminate against any qualified bidder on the basis of race, color, religion, sex, or national origin. All procurement decisions shall be made in accordance with applicable laws and regulations, the terms and conditions of this RFP, and any applicable donor requirements.

III- SUBMISSION REQUIREMENTS & EVALUATION CRITERIA

III- 1- SUBMISSION OF ANALYSIS AND BIDS

Completed proposals must be delivered at the following address latest on September 23th, 2026, at 5:00 Pm Cameroon time:

✓ Project Timeline

Activity Schedule	Activity Date / Submission Deadline	Responsible Party	Remarks
Invitation to Tender Issued	September 11th 2026	EGPAF	
Deadline for Submission of Clarification Questions to EGPAF	no later than 18th September 2026	Bidder	The deadlines must be strictly adhered to

EGPAF responds to all clarification questions	no later than 19th September 2026	EGPAF	The deadlines must be strictly adhered to
Supplier Proposal Submission Deadline	no later than Wednesday, September 23th 2026, at 5:00 PM, Cameroon time	Bidder	The deadlines must be strictly adhered to

✓ **Physical proposal submission addresses**

Bidders shall submit their proposals against an acknowledgment recorded on the tender logboock at any of the EGPAF offices at the following addresses:

DOUALA
EGPAF Douala Office, located in the Bali neighborhood, next to the UNICEF Office, 207 Bonamandoné Street
Contact: Leandre Toukam
Mobile: 690 59 98 26

YAOUNDE
EGPAF Yaoundé Office, located in the Bastos neighborhood, opposite Compost, next to the Residence of Nigeria.
Contact: Catherine Tchoungang
Mobile: 690 69 95 90

EBOLOWA
EGPAF Ebolowa Office, located in Angale, behind the Ebolowa II Sub-Prefecture.
Contact: Paul MENDIMI
Mobile: 699 93 35 48

BERTOUA
EGPAF Bertoua Office, located on the first floor of the building housing Galien Pharmacy, opposite the Bertoua Gendarmerie Legion.
Contact: Ngoran Sevidze
Mobile: 688 35 47 97

Guidelines for Binding Proposals

- The Bidder is expected to carefully examine all instructions, forms, terms, and specifications contained in the bidding documents prepared for the selection of qualified insurance broker or insurance company. Failure to provide all information required under the bidding documents, or to submit a bid that is not substantially responsive to the requirements of the bidding documents in all respects, shall be at the Bidder's own risk and may result in the rejection of the bid.
- A Bidder requiring any clarification of the Bidding Documents shall submit a written request to the Procurement Team via **CameroonProcurement@pedaids.org**. The Procurement Team will respond in writing to requests for clarification, provided that such requests are received before the deadline for submission of bids.
- Bids may also be submitted electronically, exclusively via **cameroontenders@pedaids.org**.

III-2- Documents Comprising the Bid and Evaluation Criteria

A selection committee will evaluate all proposals received from insurance company or insurance broker and will evaluate the **best value** as per the criteria below:

Each lot will be evaluated separately

Stage 1: Assessment of Administrative Compliance

Administrative compliance — PASS/FAIL

The administrative documents required are identical for all lots.

Any deviation from this format may result in the bid being deemed non-compliant and rejected. **The proposed journals must comply with the required specifications and must be designed and printed in accordance with EGPAF's requirements.**

Applications will be assessed against the administrative and eligibility requirements. Applications that do not meet these requirements will not be considered for further evaluation.

No.	Administrative criterion/document	Administrative compliance Requirement	PASS/FAIL
1	**Certificate of incorporation / RCCM**	Proof of Registration in the Commercial and Companies Register for Insurance Activities **(Eliminatory criterion)**	
2	**Taxpayer registration**	Taxpayer identification or tax registration document	
3	**Tax clearance / Attestation de Non-Redevance**	Valid Compliance Tax Certificate of less than three months **(Eliminatory criterion)**	
4	**Insurance Broker or Insurance company accreditation**	Insurance broker or Insurance company accreditation issued by the Ministry of Finance **(Eliminatory criterion)**	
5	**Banking information**	Commercial Bank account certificate	

Stage 2: Assessment of Technical Proposal

The Service Provider's technical proposal will be evaluated based on the proposed service specifications, relevant experience, and demonstrated capacity to fulfill the required scope of work.

Applicants must achieve a minimum score of **80 out of 100 points** to proceed to the next stage of the evaluation process. The evaluation will be conducted by an **Evaluation Committee**.

Lot 1: Medical Insurance

N°	A. Technical Evaluation	Score
B.1	Presentation of the structure, field of activity, year of creation, customer history, and legal status and share capital. (5 pts per element if all present, else 1 pt/element)	**05**
B.2	Description of the benefits offered, detailed per Lot, in accordance with the technical specifications of this RFP, including the tariff/coverage transparency requirements. if the bidder provides a complete and detailed description of the benefits offered, fully aligned with the RFP technical specifications. The proposal clearly specifies the scope of coverage, reimbursement rates, applicable conditions, exclusions and limitations, where applicable = **40 points)**; if the bidder provides a description of the benefits that generally meets the RFP requirements but contains some gaps or insufficient detail. Coverage is described, but some benefits, conditions, reimbursement rates, facilities or types of care are not sufficiently detailed = **25 points);** if the bidder does not provide sufficient information to demonstrate compliance with the required benefits and coverage. The proposal does not adequately address the benefits and/or is materially inconsistent with the technical specifications. No clear commitment is provided to establish a detailed and published tariff/coverage grid with exact reimbursement rates by facility and type of care **= 0 point)**	**40**
B.3	Medical Coverage: justification of medical coverage in Cameroon (Littoral, Centre, South, West), with list of health facilities and pharmacies with point of contact name. The bidder must demonstrate medical coverage in all four required regions: Littoral, Centre, South and West. The bidder must provide a list of health facilities and pharmacies available in each region, including the name of a point of contact. If the bidder demonstrates adequate and well-documented medical coverage in the four required regions, supported by comprehensive facility and pharmacy lists and named points of contact. = **35 points** If the bidder demonstrates medical coverage but with significant gaps in geographical coverage, network information, pharmacies, contact persons or supporting evidence. = **20 points** If the bidder does not sufficiently demonstrate the required medical coverage in Cameroon or fails to provide the required supporting information. = **0 point**	**35**
B.4	Medical Care: submission/processing times for hospitalization, care vouchers, and reimbursement of expenses. Reimbursement turnaround (Section V.2) is now explicitly assessed here. (<24h: 10 pts, 24-48h: 5 pts, >48h: 0 pts)	**10**
B.5	Past performance: at least 3 comparable contracts with proof of service (certificates, references). At least within the last four (4) years, from January 2022 to December 2025, NGO/Embassy references preferred. (if 3 elements = 10 pts, if 2 elements = 05 pts, if <2 = 0 pts)	**10**

	Total	100
	The minimum required score for the financial bid evaluation is 80 out of 100 points	

Lot 2: Funeral Insurance

N°	A. Technical Evaluation	Score
B.1	General Scope and quality of the coverage offered (Coverage of funeral expenses; Expenses related to the organization of funeral services; Other complementary benefits offered). The bidder must provide coverage for the core funeral-related benefits specified in the RFP. If the bidder provides comprehensive coverage that meets or exceeds the requirements, with clear benefits, limits and conditions = **30 points;** If the bidder provides the required coverage but with identifiable limitations, exclusions, gaps or insufficiently detailed benefits = **20 points** If the bidder fails to provide adequate coverage or does not sufficiently demonstrate compliance with the requirements = **0 point**	**30**
B.2	Detailed Description of the Coverage/Benefits Offered and Quality of Service. If the bidder provides a comprehensive description of the required coverage and benefits and demonstrates a reliable, accessible and clearly defined quality of service = **20 points;** If the bidder generally meets the requirements but has identifiable gaps, limitations or insufficient details concerning the coverage or quality of service = **10 points** If the bidder fails to adequately describe the required coverage/benefits or does not demonstrate an acceptable level of service = **0 point**	**20**
B.3	Eligibility Conditions, and Exclusions: Enrollment Conditions ,Age Limits for Enrollment and Coverage, Excluded Diseases or Medical Conditions Clarity and Relevance of Exclusions, etc If the bidder provides complete, clear and consistent eligibility and enrollment conditions in accordance with the RFP requirements. The proposal clearly specifies who is eligible for coverage, enrollment requirements and applicable procedures. Age limits for enrollment and continued coverage are explicitly stated and fully comply with the RFP requirements. Any excluded diseases, medical conditions, treatments or circumstances are clearly identified, specific, justified and relevant to the proposed coverage = **20 Points** If the bidder addresses the main eligibility and enrollment requirements but provides some incomplete, unclear or insufficiently detailed information. Age limits are stated but certain conditions or exceptions are unclear or not fully aligned with the RFP requirements. Some excluded diseases, medical conditions or treatments are identified, but the list or applicable conditions are insufficiently detailed, overly broad or require clarification **= 10 points**	**20**

	If the bidder does not adequately address the eligibility or enrollment requirements. Age limits are missing, materially inconsistent with the RFP, or impose conditions that do not meet the requirements. Excluded diseases, medical conditions or treatments are not clearly identified, or the exclusions are excessively broad, unjustified or materially inconsistent with the RFP = **0 point**	
B.4	Bidder's Relevant Experience: Three (3) contracts and certificates of satisfactory performance demonstrating experience in providing insurance coverage for similar risks during the period from January 2022 to December 2025. **(Five (5) points shall be awarded for each compliant document provided.)**	**15**
B.5	Death Notification and Claim Processing Procedures, including notification deadlines, required documentation, persons authorized to trigger the coverage, procedures for the direct payment or reimbursement of funeral expenses, and the insurer's response and intervention timeframes. If the bidder provides a complete, clear and operational procedure for death notification and claim processing **= 15 points** If the bidder provides a procedure covering the main requirements, but one or more elements are incomplete, insufficiently detailed or unclear **= 10 points** If the bidder does not provide an adequate death notification and claim processing procedure, or the proposed procedure is materially inconsistent with the RFP requirements = **0 point**	**15**
	Total	**100**
	The minimum required score for the financial bid evaluation is 80 out of 100 points	

Lot 3: Life Insurance

N°	A. Technical Evaluation	Score
B.1	Scope and Quality of Coverage Offered: (Death from All Causes Accidental Death, Permanent Disability, Level of Sum Insured / Guaranteed Capital, Exclusions and Limitations of Coverage) If the bidder offers comprehensive coverage fully aligned with the RFP requirements, including death from all causes, accidental death and permanent disability. The sum insured/guaranteed capital is clearly stated for each applicable benefit and fully meets or exceeds the level required by the RFP = **30 points** If the bidder offers the main required benefits, but one or more aspects of the coverage are incomplete or insufficiently detailed **= 20 points** If the bidder fails to provide one or more of the required core benefits, or the proposed coverage is materially inconsistent with the RFP. The sum insured/guaranteed capital is missing, materially below the required level, or cannot be clearly determined **= 0 point**	**30**

B.2	Subscription Conditions and Procedures: Eligibility Requirements for Insured Persons, Age Limits for Enrollment and Termination of Coverage, Enrollment Procedures and Timeframes If the bidder provides complete, clear and operational subscription conditions and procedures fully compliant with the RFP. Eligibility requirements for all categories of insured persons are clearly defined. Minimum/maximum age limits for enrollment and termination of coverage are explicitly stated and comply with the RFP = **20 points** If the bidder generally addresses the subscription requirements but one or more elements are incomplete, unclear or insufficiently detailed. Eligibility conditions are provided but some categories or conditions require clarification = **10 points** If the bidder does not adequately address the subscription requirements, or the proposed conditions are materially inconsistent with the RFP. Eligibility requirements are missing or impose unacceptable restrictions = **0 point**	**20**
B.3	Claims Management and Settlement Procedures: Claims Processing Timeframes, Simplicity of Required Supporting Documents, Insurer's Commitments Regarding the Payment Timeframes for Benefits If the bidder provides a clear, complete and operational claims management procedure fully compliant with the RFP. The proposal specifies defined and measurable claims processing timeframes, from submission/receipt of a claim through assessment, approval and settlement. The required supporting documents are clearly identified, to process the claim. The insurer provides a clear and explicit commitment regarding the timeframe for payment of approved benefits, with measurable deadlines and responsibilities **= 30 points** If the bidder provides a claims management procedure covering the main requirements, but one or more elements are insufficiently detailed or require clarification. Processing timeframes are stated but may not cover all stages of the claims process or may lack precise deadlines. Supporting documents are listed but may be excessive, unclear or insufficiently streamlined. The insurer indicates a payment timeframe, but the commitment is not sufficiently specific, measurable or comprehensive = **20 Points** If the bidder does not provide an adequate claims management and settlement procedure, or the proposed procedure is materially inconsistent with the RFP. Claims processing timeframes are missing, undefined or excessively long. The required supporting documentation is unclear, unnecessarily burdensome or not adequately specified. The bidder does not provide a clear and credible commitment regarding the timeframe for payment of approved benefits, creating significant uncertainty regarding claim settlement = **0 point**	**30**
B.4	Bidder's Relevant Experience: Three (3) contracts and certificates of satisfactory performance demonstrating experience in providing insurance coverage for similar risks during the period from January 2022 to December 2025.	**15**

	(Five (5) points shall be awarded for each compliant document provided)	
B.5	Compliance of the Offer Presentation with the Prescribed order If the bidder presents the offer fully in accordance with the prescribed order and structure specified in the RFP. All required sections, documents and annexes are presented in the requested sequence, clearly identified and properly organized. The proposal allows the evaluation committee to easily locate and verify each required element. No significant deviation from the prescribed presentation format is identified = **05 points** If the bidder does not follow the prescribed order or structure of the RFP = **0 point**	**05**
	Total	**100**
	The minimum required score for the financial bid evaluation is 80 out of 100 points	

Tenderers who obtain a technical score of less than **80 out of 100 points** will not be considered for further evaluation.

Tenderers who achieve the highest technical scores may be invited to present their proposed benefits to the Evaluation Committee. EGPAF reserves the right to determine the number of Tenderers to be invited, based on its requirements.

The technical evaluation is weighted at **80% of the overall final score**.

Stage 3: Financial Evaluation

C.1 Fixed Price/Costs: financial offer coverage/limitation of coverage, deductibles, and costs for all parties (taxes exclusive) — for each lot individually and total fixed price for all activities. Weight: 20%.

The company submitting the **lowest responsive financial offer** will receive a financial score of **100**

C.2 The company with the lowest and reasonable offer will be designated 'Best value'.

FINANCIAL SCORE = (lowest bid / Challenger amount) × 100.

C.3 FINAL SCORE (Best Value) = (Technical score × 80%) + (Financial score × 20%). The bidder with the highest score is awarded the contract for each lot.

Failure to submit a separate bid for each lot may result in the rejection of the bid. Any other failure to comply with the Submission Requirements will render the bid non-responsive and may result in the Tenderer being disqualified from further evaluation and final selection.

IV- COMPOSITION OF THE TENDER DOCUMENT

The folders containing the submissions will contain an anonymous outer envelope bearing the sentence: "REQUEST FOR PROPOSALS (**RFP- 09/003/YDE/20026**) - PROVISION OF MEDICAL INSURANCE, TO BE OPENED ONLY DURING THE COMMITTEE".

NB: Insurers are free to bid on all policies or some only. Assessments will be independent by policy type.

Compliance of the Bid Submission with the Prescribed Format, Order, and Presentation Requirements

Envelope for Each Lot: Each inner envelope shall contain three (03) separate sealed envelopes, as follows:

- Envelope A: Administrative documents
- Envelope B: Technical proposal
- Envelope C: Financial Proposal

1- ELIMINATORY CRITERIA

- Incomplete submission

Any approach involving contacting another employee of EGPAF in connection with this invitation to tender will be considered as corrupt pressure.

2- OPENING OF TENDERS

Considering the deadline, the opening of tenders and the counting will be carried out internally by an evaluation committee and the results will be notified to the tenderers selected by the Foundation. All bids will be opened during the committee session, and evaluation will be made in alphabetical order according to the name of the tenderer.

ETHICAL BEHAVIOUR

As a core value to help achieve our mission, the Foundation embraces a culture of honesty, integrity, and ethical business practices and expects its business partners to do the same. Specifically, our procurement processes are fair and open and allow all insurance brokers/consultants equal opportunity to win our business. We will not tolerate fraud or corruption, including forging program outputs, kickbacks, bribes, undisclosed familial or close personal relationships between insurance brokers and Foundation employees, or other unethical practices. If you experience or suspect unethical behaviour by a Foundation employee, please contact our Fraud Investigations team at fraud@pedaids.org or the Foundation's Ethics Hotline at www.reportlineweb.com/PedAids/. Any insurance company or broker/consultant who attempts to engage, or engages, in corrupt practices with the Foundation will have their proposal disqualified and will not be solicited for future work.

Clovis N'dramam

11/09/2026

ELIZABETH GLASER PEDIATRIC AIDS FOUNDATION P.O. BOX 37620 YAOUNDE EBOLOWA OFFICE