



KCB Bank Kenya Ltd

Request for Proposal for Provision of International Medical Insurance Cover for KCB Executives.

Date of Issue : Tuesday, 21 April 2026

Submission Deadline : Wednesday, 29th April 2026

**GROUP SUPPLY CHAIN MANAGEMENT, KCB GROUP
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TERMS OF REFERENCE

REQUEST FOR PROPOSAL FOR PROVISION OF INTERNATIONAL MEDICAL INSURANCE COVER FOR KCB EXECUTIVES.

1. Background

KCB Group intends to engage a reputable insurance underwriter to provide international medical insurance cover for our executives and eligible dependents. The objective is to ensure access to high-quality, efficient, and globally accessible healthcare services while promoting cost efficiency, wellness, and strong claims management.

2. Objectives

To secure a qualified insurance provider capable of delivering comprehensive international medical insurance solutions structured into three distinct packages (Basic, Standard, Premium), supported by strong service delivery, analytics, and global healthcare access

3. Scope of Services

The selected underwriter shall provide:

- International medical insurance coverage (employees and dependents)
- Inpatient and outpatient treatment
- Emergency medical evacuation and repatriation
- Chronic and pre-existing condition management (clearly defined terms)
- Maternity, dental, optical, and wellness benefits
- Mental health and preventive care services
- Access to global provider networks
- 24/7 customer support and claims assistance
- Digital health tools including telemedicine and mobile applications

4. Package Requirements (Mandatory)

Underwriters must submit **three (3) clearly differentiated options**:

- **Basic Plan:** Essential coverage with cost-efficient benefits and defined limits
- **Standard Plan:** Enhanced mid-tier coverage with expanded benefits and network access
- **Premium Plan:** Comprehensive global coverage with high benefit limits, minimal exclusions, and premium wellness and specialty services

Each package must clearly define:

- Benefit structure and limits
- Geographic coverage
- Co-payments, deductibles, (if any) and exclusions
- Provider access levels
- Claims processes and timelines

5. Data, Reporting & Digital Capability Requirements

Providers must demonstrate strong **data analytics and reporting capability**, including:

- Monthly dashboards with actionable insights on utilization and claims

- Quarterly performance reports with trends, recommendations, and cost drivers
- Real-time or near real-time analytics access (where available)
- Data visualization tools for HR and management decision-making

6. Service Delivery Requirements

Providers must ensure:

- 24/7 multilingual call center support
- Multi-channel access (phone, email, mobile, web portals)
- Clearly defined Service Level Agreements (SLAs)
- Fast claims processing timelines and transparent procedures
- Digital platforms for member self-service and claims tracking

7. Provider Evaluation Criteria

Proposals will be evaluated based on:

- Comprehensiveness and flexibility of benefits
- Cost competitiveness
- Experience & References
- local and international healthcare provider network strength
- Claims efficiency
- Value-added services
- Data Analytics & Reporting
- Customer Service Model & accessibility
- Value-Added Services

8. Pricing Requirements

Providers must submit:

- Detailed premium pricing per member and dependents
- Breakdown per package (Basic, Standard, Premium)
- All taxes, fees, and administrative charges included
- Clear assumptions (age bands, geography, group size)
- Optional multi-year pricing structure (where available)

9. Implementation & Service Transition

- Proposed onboarding and implementation timeline
- Member enrollment process
- Transition support for existing cover (if applicable)

10. Reporting Requirements

Providers shall provide:

- Monthly claims and utilization reports
- Quarterly performance and trend analysis
- Annual cost containment and wellness recommendations

11. Submission Requirements

All proposals must include:

- Detailed description of all three packages
- Benefit schedules and policy wording
- Pricing structure and assumptions

- Digital capabilities and reporting samples
- Service delivery model
- Account management structure

12. Evaluation Methodology

Proposals will be evaluated based on:

- Technical quality (Comprehensiveness and flexibility of benefits, provider network strength – local & international, claims management)
- Cost competitiveness
- Experience & References
- Data Analytics & Reporting
- Customer Service Model & accessibility
- Value-Added Services

12. Deadline for Submission of Proposals

The proposal should be submitted through the KCB Sourcing portal on or before the closing date on **Wednesday, 29th April 2026 by 3:00pm EAT.**