

**TITLE: CIB 99-7 Contractual Coverage for Medical Evacuation (MEDEVAC) Services**

April 16, 1999

MEMORANDUM FOR ALL CONTRACTING OFFICERS AND NEGOTIATORS

TO: DISTRIBUTION LIST FAC

FROM: M/OP/OD, Rodney W. Johnson

SUBJECT: CONTRACTUAL COVERAGE FOR MEDICAL EVACUATION  
(MEDEVAC) SERVICES

**CONTRACT INFORMATION BULLETIN 99 - 7**

This CIB supercedes and cancels CIB 98-9 (Correction) and 98-8 as of April 16, 1999.

In April 1998, USAID competitively awarded a five year requirements contract to Medex Assistance Corporation (MEDEX) to provide medical evacuation (medevac) services to USAID contractors at favorable rates. The basic terms and conditions of the contract are unchanged from the previous contract. The fixed rates for the next four years, from April 16, 1999 through April 15, 2003 are provided below. The terms of the contract require that MEDEX provide medevac coverage to all U.S. citizen, U.S. resident alien, and Third Country National contractor and subcontractor employees (hereinafter called "eligible contractor employees") and personal services contractors and their dependents overseas. Cooperating Country Nationals are not eligible. Coverage does not apply to host country contracts, cooperative agreements, or grants.

**EXEMPTIONS FROM COVERAGE**

The following eligible contractor employees and personal services contractors are exempted from coverage:

1. Eligible contractor employees and personal services contractors and their dependents with a health insurance program that includes sufficient medevac coverage as approved by the Contracting Officer.
2. Eligible contractor employees and personal services contractors and their dependents located at Missions where the Mission Director makes a written determination to waive the requirement for such coverage based on findings that the quality of local medical services or other circumstances obviate the need for such coverage.

**OBTAINING MEDEVAC COVERAGE**

Applications for coverage should be made directly to MEDEX. Applications may be requested by writing to MEDEX Assistance Corporation, P.O. Box 5375, Timonium, MD 21094-5375; by calling: (800) 537-2029 (toll-free in U.S.) or (410) 453-6300; by telefaxing: (410) 453-6301; or by emailing: operations@medexassist.com. Applications may be taken by telephone or facsimile and coverage can be effective the same day. Applicants should request coverage in accordance with USAID Contract No. HNE-Q-00-98-00106-00

with MEDEX. MEDEX will require the employee's name, name of dependents, dates of travel, and destination (for short term coverage), and the applicable USAID contract number under which the employee is working.

Upon receipt of the completed enrollment form with the appropriate premium, the contractor will be provided a certificate of coverage and an identification card. The I.D. card contains the MEDEX assistance access numbers worldwide and all instructions necessary to gain immediate assistance in the event of an emergency. Emergency calls should be placed to the nearest MEDEX Center listed on the I.D. card or collect to Timonium, MD, (410) 453-6330 [emergency fax no: (410) 453-6331], or Brighton, England, [44] 1273-223000 [emergency fax no: [44] 1273-327848].

#### **DESCRIPTION OF MEDEVAC COVERAGE**

Upon application request, MEDEX will provide a brochure outlining covered program features as well as expenses not covered by the program. After enrollment, contractors will be provided a certificate of coverage which provides program terms and conditions.

MEDEX will not be responsible for the cost of services or expenses arising from:

- (1) A member's willful self-inflicted injury, the abuse of drugs, or AIDS (if known to exist prior to departure).
- (2) A member's taking part in military or police service operations.
- (3) The commission of, or attempting to commit an unlawful act.
- (4) An act of war, invasion, civil war, or insurrection.
- (5) Medical expenses of any kind or nature whatsoever. In addition, MEDEX will not evacuate a Covered Individual to a facility unless the Covered Individual has agreed to pay the medical expenses of the destination facility.
- (6) Non-emergency expenses for routine or minor medical problems, tests and exams where there is no clear or significant risk of death or imminent serious injury or harm to a Covered Individual.
- (7) A condition which would allow for treatment at a future date convenient to the Covered Individual and which does not require emergency medical evacuation.
- (8) Services rendered without the intervention of MEDEX.
- (9) Local transportation expenses, including ground ambulance fees, for the Covered Individual's initial transportation to local facilities.
- (10) Incidental expenses, including but not limited to, accommodations and meals incurred in connection with an emergency evacuation.

Basically, MEDEX will arrange and pay for emergency medical evacuation to the nearest facility capable of providing appropriate and competent care for covered individuals involved in an accident or suffering a sudden illness where adequate medical facilities are not available. MEDEX

provides 24-hour, seven days a week, emergency telephone coverage via toll free or collect telephone numbers which can be called from anywhere in the world. Upon receipt of an incoming request for assistance, the MEDEX coordinator will take full charge and provide complete unabridged assistance until the medical emergency is fully addressed. The MEDEX coordinator contacts the appropriate MEDEX contract physician and provides coordination between the MEDEX contract physician and the attending physician. Upon agreement between the MEDEX contract physician and the attending physician as to the necessity and conduct of the evacuation, MEDEX uses an extensive database in selecting the receiving medical facilities and evacuation procedure. MEDEX operations include the direct payment of costs incurred in evacuations without financial responsibility on the part of the patient or their family.

**COST OF COVERAGE**

For the period April 16, 1999 through April 15, 2000, the rates are as follows:

Day	1-10	Annual Additional Premium	Monthly	Days
Individual		\$ 93.60	\$ 20.55	\$ 9.65
\$ .92				
Family		\$204.00	N/A	
N/A	N/A			

For the period April 16, 2000 through April 15, 2001, the rates are as follows:

Day	1-10	Annual Additional Premium	Monthly	Days
Individual		\$ 97.35	\$ 21.40	\$10.0
\$ .96				
Family		\$212.00	N/A	
N/A	N/A			

For the period April 16, 2001 through April 15, 2002, the rates are as follows:

Day	1-10	Annual Additional Premium	Monthly	Days
Individual		\$101.25	\$ 22.25	\$10.40
\$1.00				
Family		\$221.00	N/A	
N/A	N/A			

For the period April 16, 2002 through April 15, 2003, the rates are as follows:

Day	1-10	Annual Additional Premium	Monthly	Days
Individual \$1.05		\$105.30	\$ 23.00	\$10.85
Family		\$232.00	N/A	
N/A	N/A			

**Notes:**

1. An individual on multiple short-term assignments may purchase annual insurance for multiple trips in a year.
2. The annual family premium is fixed regardless of the number of dependents.

**CONTRACT CLAUSES**

As prescribed in AIDAR 728.307-70, place Clause 752.228-70 Medical Evacuation (MEDEVAC) Services (MAR 1993) in all USAID direct contracts requiring performance overseas by eligible contractor employees (as appropriate).

The clause entitled Medical Evacuation (MEDEVAC) Services (July 1993) contained in the General Provisions in AIDAR Appendices D and J is required in contracts with U.S. citizens, U.S. resident aliens, and Third Country Nationals for personal services abroad (as appropriate).