

## REQUEST FOR PROPOSAL

### FOR THE ESTABLISHMENT OF A CONTRACT FOR THE SERVICES OF:

Organisation of 2026 EIT Health Summit

Document Identifier:	2026_EITH_CCA_RFP_EventSummit2026
Procedure type:	Open procedure
Contract type:	Service Contract
Contracting entity:	EIT Health e.V. Mies-van-der-Rohe-Str. 1C, 80807 Munich, Germany District Court of Munich, Registration Number: VR 206069 VAT Identification Number: DE308993820
Deadline for submission:	06 August 2026 23:59 CEST UTC/GMT+2
Estimated total value (excl. VAT)	EUR 300,000.00
Estimated duration:	05 months
Important notice:	This Request for Proposals is issued in accordance with the provisions of EU Directive 2014/24/EU. Participation in this procedure does not confer any rights or guarantees of award. Submission of a proposal implies full acceptance of the rules and conditions set out in this document and its annexes.

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## I. GENERAL INFORMATION

### 1. Contracting Entity: EIT Health e.V.

EIT Health e.V. (“EIT Health”) is one of the Knowledge and Innovation Communities (KICs) established by the European Institute of Innovation and Technology (EIT), a body of the European Union (EU). EIT Health operates as an institutionalised partnership under Horizon Europe (HE), contributing to Pillar III - Innovative Europe, with a focus on addressing health-related societal challenges.

EIT Health’s mission is to promote healthier lives and sustainable healthcare systems by fostering innovation, education, and entrepreneurship across Europe. Through its activities, EIT Health supports the development, scaling, and deployment of innovative solutions that respond to major health and healthcare challenges.

EIT Health brings together a broad ecosystem of partners from academia, research organisations, industry, healthcare providers, and other relevant stakeholders. In addition, EIT Health collaborates with start-ups, SMEs, and entrepreneurs to accelerate innovation and translate ideas into tangible impact for patients, citizens, and health systems.

EIT Health is a non-profit association under German law, headquartered in Munich, Germany, and operates across Europe through a pan-European network. EIT Health is governed according to principles of transparency, sound financial management, efficiency, and accountability, in line with applicable EU and HE requirements.

Further information is available at <https://eithealth.eu/>.

### 2. Background and Strategic Context

- (1) The EIT Health Summit is one of EIT Health’s flagship events and serves as a high-level platform for dialogue, collaboration, and visibility across the European health innovation ecosystem. The Summit brings together representatives from industry, academia, healthcare providers, public institutions, start-ups, investors, policy makers, and other relevant stakeholders to discuss emerging trends, strategic priorities, and opportunities for cooperation in healthcare innovation.
- (2) The upcoming EIT Health Summit, planned to take place in Madrid, Spain, is a key strategic opportunity to showcase the impact of EIT Health activities, strengthen engagement with members and stakeholders, foster new collaborations, and contribute to ongoing discussions on the future of healthcare innovation in Europe. The event is expected to support the dissemination of achievements, facilitate networking and knowledge exchange, and reinforce EIT Health’s role as a leading actor within the European innovation landscape.
- (3) The Summit supports EIT Health’s broader mission of driving innovation for healthier lives, promoting cross-sector collaboration, and accelerating the

translation of knowledge and innovation into societal and economic impact across Europe.

### 3. Objectives of the Service Contract

- (1) The objective of this service contract is to secure professional event management services for the planning, coordination, and delivery of the EIT Health Summit in Madrid, Spain.
- (2) The selected contractor (“Contractor”) will support EIT Health (“Contracting Entity”) in the execution of a high-profile international event that brings together members of the EIT Health network, representatives of European institutions, healthcare stakeholders, innovators, investors, policymakers, and other relevant participants from across the health innovation ecosystem.
- (3) The Contractor will work closely with EIT Health teams to coordinate event planning, manage logistics and operations, support stakeholder and participant experience, and contribute to the overall quality of the event.
- (4) The successful performance under the contract will result in the delivery of the EIT Health Summit in accordance with agreed timelines, quality standards, and budgetary requirements, providing participants with a professional, engaging, and impactful event.

### 4. Legal Basis

- (1) This procurement is conducted as an open procedure in accordance with the principles of Directive 2014/24/EU of the European Parliament and of the Council and the applicable provisions of the German *Vergabeverordnung* (VgV), as well as EIT Health’s internal procurement rules.
- (2) The estimated value of the contract exceeds the applicable EU threshold for service contracts and, accordingly, the contract notice is published in the Official Journal of the European Union (OJEU) through Tenders Electronic Daily (TED) and on the *Deutsches Vergabeportal* (DTVP).
- (3) The procurement procedure is based on the principles of transparency, equal treatment, non-discrimination, proportionality, and competition.
- (4) The contract may be financed, in whole or in part, through activities supported by EU funding and shall therefore be subject to the applicable financial and contractual requirements governing the use of such funds.

### 5. Type of Contract

- (1) This procurement concerns a service contract for the provision of comprehensive event management services for the planning, preparation, delivery, and post-event evaluation of the EIT Health Summit to be held in Madrid, Spain.

## 6. Duration and Estimated Total Value

- (1) The contract resulting from this procedure is expected to cover a fixed period of up to five (05) months, starting from the date of signature by both parties. The latest possible end date is 31 December 2026.
- (2) Any modification to the contract period, including extensions or delays, must be explicitly justified, formally approved by EIT Health, and compliant with Directive 2014/24/EU and EIT Health's internal procurement policy.
- (3) Automatic renewals are not permitted. Upon expiry of the contract, if services are still required, EIT Health will initiate a new procurement procedure in accordance with applicable rules. The contractor is welcome to participate in such future procedures on equal terms with other candidates.
- (4) The estimated total value of this contract is EUR 300,000.00 (three hundred thousand Euros), excluding VAT. This estimate includes all fees, reimbursable expenses, and other costs related to the delivery of the services.
- (5) This value is indicative and does not represent a contractual commitment by EIT Health to spend the entire amount.
- (6) This procurement is co-funded under HE, and the contract must be completed in line with the project's Grant Agreement (GA) timeframe, rules, and budgetary constraints.

## 7. Language of the Procedure

- (1) All documents submitted in response to this RFP, including the *Technical Offer*, *Financial Offer*, and all supporting and administrative documentation, must be submitted in English. This requirement applies to the entirety of the proposal, including annexes, templates, and supplementary material.
- (2) All communication with EIT Health during the procurement procedure, including clarification requests and notifications, shall be conducted exclusively in English.
- (3) The resulting contract will also be concluded and executed in English.
- (4) Failure to comply with the language requirements may result in the rejection of the proposal.
- (5) Where documents such as official certificates or evidence (e.g. company registration) are only available in another language, an informal English translation may be accepted, provided that EIT Health reserves the right to request an official or certified translation at any time during the evaluation process.

## 8. Confidentiality and Data Protection

- (1) All information submitted in response to this RFP including commercial, technical, and financial data, will be treated as confidential and used solely for

the purpose of evaluating the proposals, and awarding and administering the contract.

- (2) EIT Health will handle all personal data in accordance with Regulation (EU) 2016/679 (GDPR), articles 6.1.(b)(c)(f).
- (3) The types of data processed may include but are not limited to names and contact details of individuals representing the tenderer; curriculum vitae; qualifications, and work history; financial and legal declarations; evidence of technical capacity; and in some cases, special category data (e.g. health-related or biometric data) where relevant to the proposed service or project area.
- (4) Tenderers are responsible for ensuring that all personal data submitted has been collected and disclosed lawfully, and that all individuals whose data is included are informed and aware of its processing for this purpose.
- (5) In cases of joint tenders or subcontracting, the lead tenderer is responsible for ensuring that all consortium members and subcontractors are equally compliant with applicable data protection laws and confidentiality obligations.
- (6) All proposal documents will be securely stored and retained only for as long as necessary to fulfil the purposes described, or as required by applicable EU audit and recordkeeping rules (e.g. HE, EIT). Where necessary, data may be shared with such bodies for verification and compliance purposes.
- (7) Tenderers may exercise their data protection rights (e.g. access, rectification, objection, restriction) by contacting EIT Health's Data Protection Officer at [DataPrivacy@eithealth.eu](mailto:DataPrivacy@eithealth.eu). For more information, refer to our Data Protection Policy at <https://eithealth.eu/privacy-policy>.
- (8) By submitting a proposal, the tenderer confirms its acceptance of the terms outlined in this section.

## 9. Ethical Standards

- (1) EIT Health is committed to conducting all procurement procedures in accordance with the principles of integrity, transparency, equal treatment, proportionality, non-discrimination, and sound financial management.
- (2) Tenderers are expected to conduct their business in accordance with applicable laws, professional standards, and recognised principles of ethical conduct. This includes compliance with obligations relating to anti-corruption, anti-fraud, anti-money laundering, labour law, taxation, social security contributions, and professional ethics.
- (3) Tenderers shall act in good faith throughout the procurement procedure and during the performance of the resulting contract. Tenderers are expected to provide accurate information, cooperate with reasonable requests for clarification, and promptly disclose any circumstances that could affect their eligibility or ability to perform the contract.

- (4) As EIT Health activities are funded in whole or in part through EU programmes, tenderers are expected to uphold the principles of integrity, ethics, and responsible conduct reflected in applicable EU funding frameworks, including HE where relevant.
- (5) EIT Health reserves the right to take appropriate measures where a tenderer's conduct is inconsistent with the principles set out in this section, including the application of exclusion measures in accordance with Section IV.2.

## II. SCOPE OF THE CONTRACT

### 1. Description of Services

#### a. Scope and objectives

- (1) The selected contractor will act as EIT Health's event management partner and will work in close collaboration with EIT Health staff, external suppliers, sponsors, speakers, venue representatives, and other relevant stakeholders throughout the event lifecycle.
- (2) The services will be delivered through a combination of remote collaboration and in-person activities, including preparation meetings, venue visits, coordination with suppliers and stakeholders, and on-site support during the event. Close and continuous coordination with EIT Health will be required throughout the duration of the contract to ensure alignment with organisational objectives, branding, stakeholder expectations, and event requirements.

#### b. Deliverables and Milestones

- (1) All deliverables shall be developed in close collaboration with EIT Health and submitted in a format agreed with EIT Health during contract implementation.

Nr	Service area	Tasks	Deliverables
1	Event Project Management	<ul style="list-style-type: none"> <li>▪ Develop, maintain, and execute the overall event project plan including timeline, milestones and roles and responsibilities of the team.</li> <li>▪ Lead and manage the event planning process in close collaboration with the EIT Health team.</li> <li>▪ Participate in regular planning meetings and provide status reports and recommendations.</li> <li>▪ Identify and mitigate risks affecting the successful delivery of the event.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Event project plan (including timeline, milestones and roles and responsibilities)</li> <li>▪ Event report including lessons learned</li> </ul>
2	Programme Development Support	<ul style="list-style-type: none"> <li>▪ Support the development of the event agenda and programme structure.</li> <li>▪ Participate in programme design workshops and planning sessions.</li> <li>▪ Provide innovative formats and engagement methodologies for plenary and breakout sessions.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Final event agenda</li> <li>▪ Event plan including attendee journey.</li> <li>▪ Programme Run-of-Show Document</li> </ul>



		<ul style="list-style-type: none"> <li>Ensure alignment between programme design, attendee experience, and event objectives.</li> </ul>	
3	Sponsorship and Partnership Support	<ul style="list-style-type: none"> <li>Develop a sponsorship strategy and sponsorship packages.</li> <li>Identify and approach potential sponsors and members.</li> <li>Organise meetings with prospective sponsors and support negotiations.</li> <li>Manage sponsor relations and ensure fulfilment of sponsorship benefits and visibility commitments.</li> </ul>	<ul style="list-style-type: none"> <li>Sponsorship Target List</li> </ul>
4	Venue management and Supplier Procurement	<ul style="list-style-type: none"> <li>Site visit before the event to do a venue check and ensure all event requirements are met and are feasible in the venue available. Venue is provided by an EITH member.</li> <li>Source, negotiate, contract, and manage all required suppliers, including but not limited to: Catering, Audio-visual services, Event production suppliers, Printers and signage providers, Photography and videography services, Exhibition and branding suppliers, Furniture and equipment providers</li> <li>Monitor supplier performance and ensure contractual compliance.</li> </ul>	<ul style="list-style-type: none"> <li>Supplier List</li> </ul>
5	Event Branding and Creative Services	<ul style="list-style-type: none"> <li>Develop the visual identity and creative concept of the event.</li> <li>Design and produce event branding materials, including: <ul style="list-style-type: none"> <li>Event website assets</li> <li>Digital communications materials</li> <li>Signage and wayfinding</li> <li>Stage branding</li> <li>Presentation templates</li> <li>Printed materials (where applicable)</li> </ul> </li> <li>Ensure consistent implementation of the event brand across all participant touchpoints.</li> </ul>	<ul style="list-style-type: none"> <li>Event Signage Package</li> <li>Stage Design Visuals</li> <li>Print-Ready Artwork Files</li> </ul>
6	Event Website and Digital Platform Management	<ul style="list-style-type: none"> <li>Design, build, maintain, and manage the event website.</li> <li>Configure and manage the event platform (EIT Health owns vFairs license).</li> <li>Ensure a seamless and user-friendly attendee journey throughout the registration and event experience.</li> <li>Manage platform content updates and integrations.</li> </ul>	<ul style="list-style-type: none"> <li>Event website set-up</li> </ul>
7	Speaker Management	<ul style="list-style-type: none"> <li>Coordinate speaker communications and logistics.</li> </ul>	<ul style="list-style-type: none"> <li>Speaker Database</li> <li>Speaker Travel and Accommodation Management Report</li> </ul>

		<ul style="list-style-type: none"> <li>▪ Arrange travel and accommodation for invited speakers (approximately 10 speakers).</li> <li>▪ Manage speaker briefings and preparation materials.</li> <li>▪ Coordinate presentation collection and speaker readiness.</li> </ul>	
8	Registration and Attendee Management	<ul style="list-style-type: none"> <li>▪ Design and manage the attendee registration process.</li> <li>▪ Handle participant enquiries and customer support.</li> <li>▪ Manage onsite registration and check-in procedures.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Attendance Report</li> </ul>
9	Attendee Communication	<ul style="list-style-type: none"> <li>▪ Design, implement, and monitor the attendee communication plan.</li> <li>▪ Coordinate pre-event, during-event, and post-event communications to attendees</li> </ul>	<ul style="list-style-type: none"> <li>▪ Attendee Communication Plan</li> <li>▪ Mobile/Event Platform Notifications Plan</li> </ul>
10	Event Production and On-Site Delivery	<ul style="list-style-type: none"> <li>▪ Design and manage all technical and production aspects of the event.</li> <li>▪ Coordinate stage design, lighting, sound, video production, and live event execution.</li> <li>▪ Provide on-site event management staff and operational support.</li> <li>▪ Manage event rehearsals, speaker logistics, and production schedules.</li> <li>▪ Ensure smooth delivery of all event activities.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Stage and Room Layout Plans</li> </ul>
11	Budget and Financial Management	<ul style="list-style-type: none"> <li>▪ Develop and maintain the event budget.</li> <li>▪ Monitor expenditures and commitments.</li> <li>▪ Process and pay supplier invoices.</li> <li>▪ Provide regular budget updates.</li> <li>▪ Deliver final budget reconciliation after the event.</li> <li>▪ Ensure compliance with agreed budget parameters.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Monthly Financial Reports</li> <li>▪ Final Budget Reconciliation Report</li> </ul>
12	Post-Event Evaluation and Reporting	<ul style="list-style-type: none"> <li>▪ Design feedback actions.</li> <li>▪ Measure and report on agreed event KPIs.</li> <li>▪ Analyse participant feedback and engagement data.</li> <li>▪ Conduct a post-event debrief with EIT Health including recommendations for future editions.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Survey Results Report</li> <li>▪ Post-Event Debrief Presentation including recommendations and Improvement Plan for Future Editions</li> </ul>

(2) For contract management and acceptance purposes, the services shall be delivered through the following indicative milestones:

- (a) **Milestone 1:** Approval of the event project plan, initial budget, programme concept, sponsorship approach, and branding concept. Expected completion no later than 20 August 2026.

- (b) **Milestone 2:** Completion of event readiness activities, including venue preparation, supplier contracting, website and platform deployment, registration launch, speaker coordination, and production planning. Expected completion by 30 September 2026.
- (c) **Milestone 3:** Successful on-site delivery of the EIT Health Summit. Expected completion by 25 November 2026.
- (d) **Milestone 4:** Submission and approval of all post-event reports, financial reconciliation, evaluation outputs, and final recommendations. Expected completion by 15 December 2026.

### c. Estimated Workload and Volume

- (1) The information provided in this section is intended to assist tenderers in understanding the anticipated scale of the services and preparing their proposals. The figures provided are indicative estimates only and do not constitute a commitment or guarantee by EIT Health regarding actual volumes, participant numbers, or service requirements.
- (2) The EIT Health Summit is expected to be an international event. At the time of publication of this document, EIT Health anticipates the following parameters:
  - (a) One in-person event to be held on 24-25 November in Madrid, Spain.
  - (b) Approximately 400 participants.
  - (c) Approximately 10 invited speakers.
  - (d) Participation of EIT Health members, healthcare stakeholders, innovators, investors, policymakers, sponsors, and representatives of European institutions.
  - (e) One event website using EIT Health existing license subscription (vFairs).
  - (f) Management of attendee registration and communications throughout the event lifecycle.
  - (g) Coordination of sponsorship and partnership activities before and during the event.
  - (h) Management of multiple third-party suppliers, including production, audiovisual, catering, branding, photography/videography, and other event-related service providers.
  - (i) Preparation and delivery of all event branding, communication, production, operational, and reporting outputs described in this Request for Proposals (RFP).

### d. Place(s) of Performance

- (1) The services shall be delivered through a combination of remote and on-site activities.

- (2) The EIT Health Summit will take place on 24-25 November 2026 in Madrid, Spain. The Contractor shall provide all necessary on-site support for the planning, preparation, delivery, and post-event activities associated with the Summit.
- (3) Preparatory and coordination activities may be performed remotely. The Contractor shall ensure regular coordination with EIT Health and attendance at venue visits, planning meetings, rehearsals, and other event-related activities as required.
- (4) Any digital platforms, registration systems, or websites used in the performance of the services shall comply with applicable GDPR requirements.

#### **e. Language of Service Delivery**

- (1) The primary language for all services delivered under this contract shall be English. This applies to all written deliverables (e.g. reports, presentations, documentation), all oral and written communication with EIT Health teams and stakeholders, as well as all coordination meetings, briefings, and correspondence, unless explicitly stated otherwise in this RFP or agreed in writing during contract negotiation.
- (2) Tenderers must ensure that all proposed personnel are capable of working fluently and professionally in English, both in spoken and written form. All deliverables must meet the expected standard of clarity, accuracy, and precision required for EU-level communication and reporting.
- (3) Where the service involves communication with local or non-English-speaking audiences (e.g. event participants, national stakeholders, patient groups), EIT Health may request that specific materials (e.g. event content, handouts, outreach copy) be provided or adapted in local languages. Any such requirements will be specified in the deliverables section or agreed during contract finalisation. Associated translation or localisation costs must be included in the *Financial Offer*.
- (4) If multilingual support is needed, such as interpretation, bilingual moderation, voiceover, or subtitling, this will be specified in the RFP or requested by EIT Health during service delivery. The contractor must demonstrate the ability to provide or manage such services using qualified professionals.
- (5) Unless explicitly agreed otherwise, all contractual documents and final deliverables must be submitted in English. EIT Health may request quality control samples for multilingual deliverables to ensure fitness for purpose.

## **2. Performance Requirements**

### **a. Quality Standards and Key Performance Indicators**

- (1) The contractor is expected to deliver all services under this contract with the highest standards of quality, professionalism, and reliability, in line with EIT Health's role supporting health innovation across Europe.

- (2) The following general quality standards apply to all deliverables and interactions under this contract:
  - (a) Adherence to all agreed deadlines, formats, and specifications outlined in the contract.
  - (b) Clear, accurate, and audience-appropriate content for all written and oral outputs.
  - (c) Consistency in terminology, structure, and formatting across deliverables.
  - (d) Professional, respectful, and responsive communication with EIT Health staff and stakeholders.
  - (e) Proactive issue identification and transparent communication in the case of delays, risks, or deviations from the agreed plan.
- (3) EIT Health may monitor contractor performance using the following indicative Key Performance Indicators (KPIs):
  - (a) Timeliness: Percentage of deliverables submitted on or before the deadline.
  - (b) Responsiveness: Average time to respond to EIT Health queries or feedback.
  - (c) Quality of deliverables: Proportion of deliverables accepted without major revisions.
  - (d) Compliance: Adherence to contractual obligations, including data protection, formatting, and reporting requirements.
  - (e) Client satisfaction: Internal assessment by EIT Health staff following completion.
- (4) These KPIs may be used to monitor and assess contract performance, alongside periodic check-ins or reviews, feedback forms, and review of deliverables. EIT Health may define additional assignment-specific KPIs as part of the contract finalisation process.
- (5) In the event of persistent underperformance or material failure to meet expected quality standards, EIT Health reserves the right to issue a formal warning, apply contractual remedies (including payment withholding or reductions), or terminate the contract in accordance with the applicable terms and conditions.

## **b. Staffing, Capacity, and Responsiveness**

- (1) Tenderers must demonstrate that they possess the organisational and human resource capacity necessary to deliver the services described in this RFP to a consistently high standard. This includes the ability to provide qualified personnel with the required expertise, maintain continuity throughout the assignment, and adapt as needed to EIT Health's coordination and delivery requirements.

- (2) At a minimum, the contractor must ensure availability of staff during periods of concentrated activity or tight deadlines; timely mobilisation of personnel following contract signature (typically within 03 working days, unless otherwise agreed); continuity of key personnel throughout the project; and prompt replacement of any staff who become unavailable, with equally qualified professionals, subject to EIT Health's approval.
- (3) As part of their proposal, tenderers must include a core team overview, with named individuals assigned to key roles (e.g. project lead, technical expert, delivery specialist); a brief description of each role's responsibilities and estimated level of engagement; confirmation of each team member's language proficiency (minimum: professional working proficiency in English); and indication of whether team members are internal, freelance, or subcontracted.
- (4) The contractor is expected to be reachable during standard EU working hours (e.g. 09:00-18:00 CET) and to respond to EIT Health communications and feedback within 03 working days, unless otherwise agreed. Clear, reliable communication is considered part of the service quality standard.
- (5) Failure to maintain sufficient staffing levels, responsiveness, or continuity may result in reduced performance scores, impact payment approval, or, in the event of serious non-compliance, trigger escalation procedures as per the contract terms.

### **c. Continuity of Services**

- (1) The contractor must ensure the continuous and reliable delivery of services throughout the full duration of this contract. This obligation applies regardless of any internal changes to personnel, subcontracting arrangements, or other organisational developments during implementation.
- (2) The contractor is expected to maintain a stable and fully functional project team, with the appropriate skills, familiarity with the assignment, and availability to meet all deadlines and coordination needs agreed under the contract.
- (3) In the event that any team member named in the contractor's proposal becomes unavailable after contract award, the contractor must notify EIT Health without delay, explaining the reason for the unavailability; propose a replacement within five working days; and ensure that the replacement has equal or superior qualifications and experience to the originally proposed staff member. EIT Health reserves the right to review the CV and suitability of the proposed replacement and to approve or reject the substitution accordingly.
- (4) For roles designated as key personnel in the contractor's proposal, prior written approval is required before any substitution can occur. The contractor is encouraged to propose deputy or alternate profiles for key roles at the outset, to facilitate rapid mobilisation if needed.
- (5) The contractor must implement an appropriate knowledge handover process for all team transitions to safeguard continuity of work and ensure minimal

disruption. This includes maintaining up-to-date internal documentation, a shared project memory, and reasonable measures to prevent excessive reliance on any one individual.

- (6) Where relevant, EIT Health may request a continuity assurance plan as part of the project kick-off, especially for contracts exceeding three months or involving multiple phases or stakeholders.
- (7) Failure to maintain service continuity, including inadequate substitutions, poor transition planning, or repeated staff turnover, may be considered poor performance under the terms of the contract. This may result in payment retention, contractual remedies, or, in severe cases, contract termination.

#### **d. Environmental, Social and Accessibility Requirements**

- (1) All services delivered under this contract must reflect the principles of environmental sustainability, social responsibility, and universal accessibility, in alignment with EIT Health's strategic values and the EU's policy commitments.
- (2) When physical events, materials, or installations are involved, EIT Health encourages the use of sustainable and recyclable materials; catering with local, seasonal, or plant-based options; and venues and hotels with green certifications or clear environmental practices.
- (3) EIT Health encourages contractors to commit to diversity, equity, and inclusion (DEI), include gender-balanced and diverse project teams where feasible; respect ethical labour standards; and have zero tolerance for discrimination, harassment, or exploitative practices, including in subcontracting chains.
- (4) EIT Health encourages subcontracting to social enterprises or inclusive SMEs when possible and values clear commitments to inclusive recruitment and leadership.
- (5) All services, whether digital, hybrid, or in-person, shall comply with relevant EU accessibility standards, including accessible document formats (e.g. tagged PDFs, readable text); usability by persons with disabilities (WCAG 2.1 standards for digital); physically accessible venues and support (e.g. ramps, adapted seating); and on-demand provision of multilingual access, live captioning, sign-language interpretation, or alternative interfaces for surveys, events, or apps.

#### **e. Reporting Obligations**

- (1) The contractor is required to provide clear, timely, and accurate reporting on the services delivered under this contract. These reporting obligations ensure transparency, auditability, and alignment with EIT Health's internal controls and the requirements of EU public funding frameworks, including HE.



- (2) Unless otherwise specified in the deliverables table, the following reports are expected as part of this contract:
  - (a) Final Report (mandatory): To be submitted upon completion of the assignment, the final report must summarise the services delivered, objectives achieved, outputs produced, and any challenges encountered. It must include evidence of completion (e.g. screenshots, signed deliverables, photos, tools, attendance sheets, or work products such as websites, designs, videos, or publications). The report may also include a brief self-assessment of lessons learned and proposed improvements.
  - (b) Finance Report: If the assignment spans multiple phases or exceeds 04 months, finance reports may be required at milestones or on a monthly/quarterly basis.
- (3) Format and Submission: All reports must be submitted in English, in editable formats (e.g. Word, Excel, PowerPoint), unless otherwise agreed.
- (4) EIT Health reserves the right to request additional reports where proportionate and justified (e.g. for project audits, evaluations, or presentations to external funders). Contractors are expected to cooperate with such requests in good faith.
- (5) Failure to submit required reports on time, or submission of incomplete, low-quality, or unverifiable reports, may delay or suspend payment, and may constitute a breach of contract subject to formal remedies.

#### **f. Meetings**

- (1) To ensure effective communication, alignment, and accountability throughout the execution of this contract, the contractor is expected to participate in the following meetings, unless otherwise agreed:
  - (a) Kick-off Meeting (mandatory): A kick-off meeting shall be held within 5 to 10 working days of the contract signature, unless otherwise agreed by the parties. The purpose is to align on the contract's objectives, deliverables, timeline, roles and responsibilities, KPIs, and reporting obligations. The meeting will typically be conducted remotely via video conference unless an in-person meeting is specifically required. EIT Health's project lead, the contractor's project manager, and relevant team members should attend. The contractor is responsible for preparing a brief summary email or meeting minutes to confirm alignment and record key decisions.
  - (b) Progress Meetings (mandatory): The frequency and format will be agreed at the start of the contract, typically biweekly or at defined milestones. These meetings serve to review status, address challenges, track performance, and anticipate upcoming deliverables. They are generally held remotely. Following each progress meeting, the contractor shall provide a brief progress summary or shared action list capturing key points and next steps.



- (c) Final Review Meeting (mandatory): A final review meeting is mandatory and will be held within 10 working days of service completion. Its purpose is to validate final deliverables, collect feedback from both parties, and discuss any outstanding issues, lessons learned, or follow-up needs. The meeting may also serve to complete the formal performance evaluation and deliverable acceptance process. It will normally be held remotely, unless otherwise agreed. EIT Health may request a brief summary of outcomes or reflections from the contractor.
- (2) EIT Health reserves the right to request additional ad-hoc meetings during the contract period to address urgent issues, adapt service delivery, or resolve escalations. Contractors are expected to respond to such requests flexibly and with reasonable notice.
- (3) Unjustified failure to attend key meetings may be considered a breach of contract obligations. Contractors are encouraged to maintain a shared action tracker or meeting log to ensure continuity across the contract lifecycle.

### **III. STRUCTURE OF THE CONTRACT**

#### **1. Legal Form of the Contract**

- (1) This procurement will result in the signature of a legally binding service contract between EIT Health and the selected contractor. The contract will define all applicable rights, obligations, deliverables, timelines, and pricing for the services to be performed under this assignment.
- (2) The contract is non-exclusive, and its signature does not imply any obligation on EIT Health to engage the contractor for any additional or future work beyond the scope of this procurement.
- (3) A draft version of the Service Contract (including general terms and conditions) is provided as Annex 7 to this RFP. This draft constitutes an integral part of the RFP and will serve as the contractual basis upon award.
- (4) By submitting a proposal, tenderers are deemed to have reviewed, understood, and accepted the legal terms and obligations outlined in the draft Service Contract. Tenderers are expected to factor in all legal and financial conditions when preparing their offer.
- (5) Should a tenderer wish to raise justified objections to specific clauses in the draft contract, they must reference the relevant clause(s); propose alternative wording; and include this within the submitted proposal. Any legal objections or contract modifications submitted after the proposal deadline will not be considered. EIT Health reserves the right to reject any proposal that includes substantial or non-negotiable deviations from the draft contract.
- (6) The final signed Service Contract will be governed by German law and subject to the jurisdiction specified in the contract.

## 2. Validity Period

- (1) The service contract resulting from this procurement shall be valid for a period of up to five (05) months (or until the full completion and acceptance of the services, if earlier), starting from the date of signature by the last contracting party. The contract shall enter into force on the date of the final signature, and no services may commence before that date.
- (2) The total contract duration includes all phases of service delivery, validation, reporting, and invoicing. Any extensions to the initially agreed timeline (e.g. delivery delays or mutually agreed adjustments) must be justified, agreed in writing by both parties, and formalised through a contract amendment.
- (3) This service contract is not subject to automatic renewal. Any additional or follow-up services, if required, will be the subject of a separate procurement procedure, in line with applicable thresholds and the EIT Health procurement policy. EIT Health may choose to re-tender the services under a new call to which all eligible economic operators, including the incumbent, may apply.
- (4) Any extension of duration beyond the original term is subject to compliance with Directive 2014/24/EU and applicable procurement thresholds and may only occur if clearly justified (e.g. force majeure, justified contract modification) and agreed in writing.

## 3. Non-Exclusivity and No Guarantee of Volume

- (1) This service contract is concluded on a non-exclusive basis. EIT Health reserves the right to procure similar or related services from other suppliers through separate procurement procedures, where such action is justified by operational needs, funding conditions, specific expertise requirements, or urgency.
- (2) The signature of this contract does not confer any exclusive rights to the contractor to deliver services to EIT Health now or in the future. The contractor acknowledges that this agreement relates solely to the scope and duration defined in this RFP and does not imply continuity or preferential treatment in future procurements.
- (3) The estimated value stated in this RFP is non-binding and provided for transparency and planning purposes only. EIT Health makes no guarantee of actual financial volume, workload, or usage under this contract beyond what is formally agreed upon in the signed terms.
- (4) No compensation or claim shall be made by the contractor on the basis of lower-than-anticipated usage of the contract; non-renewal or non-extension; the award of similar assignments to other providers; or procurement of related services through alternative channels.

#### 4. Invoicing and General Payment Terms

- (1) All payments under this contract shall be made by EIT Health upon receipt of a compliant invoice, provided the services have been delivered in accordance with the terms of the contract and have been formally accepted in writing by the responsible EIT Health project lead.

##### a. Invoicing Procedure

- (1) Contractors may submit invoices only after formal acceptance of the deliverables by EIT Health. Invoices must be sent to the designated business address or via the electronic invoicing system specified by EIT Health and must include all legally required details. This includes:
  - (a) The full legal name, address, banking details, and VAT identification number of the contractor (or the lead entity in case of a joint tender);
  - (b) The SSC number; the VAT ID of EIT Health (DE308993820)
  - (c) The Purchase Order (PO) number, if applicable;
  - (d) The invoice date and a unique invoice number
  - (e) The date of service completion or delivery
  - (f) A detailed breakdown of the services provided;
  - (g) The net taxable amount, any discounts or rebates;
  - (h) The VAT rate, the VAT amount, and reference to any applicable VAT exemption or reverse charge mechanism. The place of taxation for VAT purposes and the total amount due (both net and gross) must also be clearly stated.
- (2) The contractor is solely responsible for ensuring the invoice complies with all relevant VAT and invoicing legislation applicable in its own jurisdiction and in Germany, where relevant. For cross-border services, invoices must adhere to EU VAT regulations, including correct use of the reverse charge mechanism or other applicable provisions.
- (3) Invoices that do not comply with the above requirements will be rejected and must be corrected and resubmitted. Where specified in the Special Conditions (Annex 7), invoices must also be submitted in electronic format in line with Directive 2014/55/EU on electronic invoicing. In such cases, the invoice must be sent to [invoices@eithealth.eu](mailto:invoices@eithealth.eu) with the designated EIT Health Point of Contact in copy, provided in a structured electronic format (e.g. XRechnung or PEPPOL BIS), or submitted via the electronic platform or channel indicated in the Special Conditions (Annex 7).
- (4) Invoices submitted in PDF format or to any other email addresses will not be accepted unless explicitly authorised in writing by EIT Health.

- (5) Unless otherwise stated in the contract, EIT Health will process payment within 30 calendar days of the date of invoice approval (not submission). Payments are subject to compliance with EU audit rules and will be made by bank transfer in EUR. EIT Health accepts no liability for banking fees or currency conversion charges incurred by the contractor.

#### **b. Deliverable-Based Payment**

- (1) In most cases, payment will be tied to the submission and approval of deliverables as defined in the contract, or the achievement of specific milestones. The contract may define alternative structures, such as phased payments for long-term assignments, one-off payments upon final completion, or retention clauses, where a final balance is paid only after full validation.
- (2) No payment shall be made in advance unless explicitly stated and justified in the contract, without prior acceptance of the associated deliverables by EIT Health, or for services or costs not foreseen in the contract without written amendment.
- (3) Where expenses (e.g. travel, accommodation, videography, catering) are reimbursable, they must be pre-approved in writing, be itemised in the invoice with receipts attached, and comply with EIT Health's policies (e.g. external travel reimbursement), available upon request.

#### **c. Additional Terms**

- (1) Interest on late payments shall only be payable in accordance with applicable German law and EU financial regulations.
- (2) EIT Health reserves the right to offset any amounts due from the contractor against outstanding obligations.

### **5. Confidentiality, Intellectual Property Rights, and Data Protection**

#### **a. Confidentiality**

- (1) The contractor shall treat as strictly confidential all information, documentation, and data received from EIT Health or generated in the performance of this contract. This includes, but is not limited to, strategic or unpublished materials, internal methodologies, technical specifications, project results, and any personal or financial data related to EIT Health staff, members, or participants.
- (2) Such information may not be disclosed, reproduced, or used for purposes other than contract performance, unless explicitly authorised in writing by EIT Health. This obligation shall remain in force for a period of five (5) years after the contract's expiry or termination, unless a longer retention is required by law or justified by the nature of the data.

## **b. Intellectual Property Rights**

- (1) Unless otherwise agreed in writing, all results, deliverables, and outputs produced by the contractor under this contract shall become the exclusive property of EIT Health from the moment of creation or delivery. This includes documents, data, designs, reports, software, recordings, and other tangible or intangible outputs.
- (2) The contractor hereby assigns to EIT Health all economic rights related to such outputs, including rights of reproduction, distribution, translation, adaptation, and public use. Any reuse or publication by the contractor shall require prior written consent from EIT Health.
- (3) Where pre-existing materials (“Background IP”) are used in the performance of the contract, they shall remain the property of their rightful owner. However, the contractor shall grant EIT Health a non-exclusive, royalty-free, irrevocable licence to use such materials for internal, reporting, or EU dissemination purposes.
- (4) If subcontractors or third parties contribute to any part of the deliverables, the contractor shall ensure that EIT Health receives all necessary rights and licences for continued and unrestricted use of those components, in line with the terms above.

## **c. Data Protection**

- (1) The contractor shall fully comply with Regulation (EU) 2016/679 (GDPR) and any applicable data protection laws in the collection, processing, transfer, and storage of personal data under this contract.
- (2) The contractor shall implement appropriate technical and organisational measures to ensure data security, access control, and confidentiality; ensure that all processing activities are lawful, limited to what is necessary, and carried out under a valid legal basis; promptly notify EIT Health of any suspected or confirmed personal data breach; and ensure that any subcontractors or external data processors involved in processing personal data are contractually bound by equivalent obligations and safeguards.
- (3) If the contractor is considered a data processor on behalf of EIT Health, a separate Data Processing Agreement (DPA) may be required before processing begins.
- (4) Upon contract completion or termination, the contractor must return or securely delete all personal data, unless otherwise required by law, and provide written confirmation of data erasure, anonymisation, or secure archival.
- (5) EIT Health reserves the right to audit contractor compliance with the confidentiality, IPR, and data protection terms at any time during the contract’s validity.

- (6) Any breach of these obligations may constitute grounds for immediate termination and may be reported to relevant oversight or enforcement bodies, including the European Commission, European Court of Auditors, or OLAF, where appropriate.
- (7) EIT Health retains the right to reuse deliverables, subject to licensing conditions, for EU-funded dissemination, internal use, or future programme implementation.

## **6. Termination Conditions**

### **a. Termination by EIT Health**

- (1) EIT Health reserves the right to terminate this contract, in whole or in part, with immediate effect by written notice to the contractor, in the event of substantial or repeated breach of contractual obligations; failure to perform, deliver, or correct defects within agreed timelines; fraud, corruption, professional misconduct, or misrepresentation; breach of confidentiality, data protection, or intellectual property obligations; loss of legal, financial, or technical eligibility, including bankruptcy, insolvency, or debarment; conduct by the contractor that could seriously damage EIT Health's reputation, funding status, or legal compliance; change in EIT Health's funding conditions (e.g. reduction or cancellation of EU grants); or a force majeure event (as defined below) lasting longer than 30 calendar days.
- (2) Where appropriate, EIT Health may allow a remediation period of 10 working days, during which the contractor may propose corrective measures. EIT Health reserves the right to assess and reject insufficient or unsatisfactory remediation proposals.

### **b. Termination by the Contractor**

- (1) The contractor may request termination of the contract in the event of material breach by EIT Health (e.g. non-payment without justified reason); occurrence of a force majeure event rendering contract performance impossible; or other substantial grounds, subject to written justification and prior approval by EIT Health.
- (2) All termination requests must be submitted in writing and are subject to review and acceptance by EIT Health.

### **c. Effects of Termination**

- (1) Upon termination, the contractor shall cease all activities related to the contract immediately; return or transfer all deliverables, data, materials, and confidential information (complete or in-progress), in a usable and accessible format; and be eligible to invoice only for services duly performed and formally accepted by EIT Health prior to the termination date.
- (2) No further compensation, damages, or claims for loss of profit will be accepted for the unexecuted portion of the contract unless explicitly agreed in writing.

**d. Force Majeure**

- (1) Neither party shall be held liable for failure to perform obligations under this contract due to force majeure, defined as events beyond reasonable control, including but not limited to natural disasters, war, civil unrest, pandemics, or government-imposed restrictions.
- (2) The affected party must inform the other in writing within 5 working days of becoming aware of such an event. If the force majeure condition persists beyond 30 calendar days, either party may terminate the contract by written notice.

**7. Audit Rights and Record Retention****(1) Audit Rights:**

- (a) As a recipient of public funding, EIT Health and its contractors are subject to strict audit, verification, and control obligations under the applicable EU regulatory frameworks (e.g. HE, Financial Regulation, and EIT Grant Agreements).
- (b) Accordingly, the contractor shall fully cooperate with any audit or verification activities related to the services performed under this contract. This includes audits conducted by EIT Health, The European Institute of Innovation and Technology (EIT), The European Court of Auditors (ECA), The European Anti-Fraud Office (OLAF), or any authorised EU body, programme evaluator, or designated third-party auditor.
- (c) Audits may take the form of desk reviews, interviews, remote access inspections, or on-site visits, and may cover both the contractor and any subcontractors or consultants involved in the contract.
- (d) The contractor must grant access to all technical, financial, legal, and administrative records related to the contract, including timesheets, invoices, receipts, contracts; project documentation and deliverables; and internal records and communication relevant to the scope and performance of the services.
- (e) Failure to cooperate may result in cost rejection, recovery of funds, disqualification from future tenders, or escalation to competent authorities.

**(2) Record Retention:**

- (a) The contractor shall retain all documents, data, and correspondence relevant to the implementation of this contract for a period of at least five (5) years from the date of final payment, or longer if required by applicable EU or national law.
- (b) These records must be securely stored, traceable, and easily retrievable upon request; maintained in English or accompanied by English translations or summaries where appropriate; and available for inspection



within ten (10) working days of a written request from EIT Health or an authorised audit body.

- (c) The failure to retain or provide documentation may result in the ineligibility of reported costs, clawback of payments, or other administrative sanctions.
- (3) These audit and recordkeeping obligations shall remain in effect even after the expiry or termination of the contract.

## IV. PARTICIPATION AND ELIGIBILITY

### 1. Who May Participate

- (1) Participation in this procurement procedure is open to all natural and legal persons who meet the conditions outlined below and are not subject to exclusion grounds.
- (2) Eligible participants include legal entities and individuals established in an EU Member State; legal entities and individuals established in EEA countries or countries with which the EU has a mutual market access agreement; and other third countries only if their participation is explicitly permitted under the rules of the funding programme or by decision of EIT Health.
  - (a) Participation from entities based in non-EU/non-EEA countries must be justified and approved in advance and shall be subject to applicable EU and national rules on market access.
  - (b) All entities must be legally registered and authorised to conduct the services described in the RFP in accordance with the laws of their country of establishment.
- (3) Tenderers may submit offers as single entities, or as part of a consortium or joint venture, provided that one member is appointed as the lead entity and takes full responsibility for the offer and contract execution; the roles and contributions of each member are clearly described in the proposal; and the consortium is either legally established or can commit to sign a joint agreement upon award.
  - (a) Consortia must submit a single integrated proposal on behalf of all members, and a declaration of Joint Tender (see Annex 0) signed by all consortium members.
  - (b) Each member of the consortium shall be jointly and severally liable for the performance of the contract.
- (4) Subcontracting is permitted provided that all subcontracted activities must be clearly indicated in the proposal; that subcontractors meet the same eligibility, exclusion, and legal capacity conditions as main tenderers; and that EIT Health retains the right to request proof of subcontractor qualifications and to approve



or reject subcontractors at any stage. The main contractor remains fully responsible for the performance of any subcontracted services.

- (5) All tenderers, including consortium members and subcontractors, must be duly incorporated or registered as legal entities (or individuals authorised to operate commercially); hold the legal capacity to perform the contract under the applicable national law; and submit documentary proof of legal status as part of the proposal. Failure to comply with these requirements may result in disqualification.
- (6) Tenderers from countries under EU sanctions or restrictive measures are not eligible to participate. EIT Health reserves the right to verify compliance with applicable trade and export control laws.

## 2. Subcontracting Rules

- (1) Subcontracting is permitted under this contract, provided it complies with the rules outlined below. These provisions aim to ensure transparency, accountability, and the consistent quality of all services delivered.
- (2) The following shall not be considered subcontracting:
  - (a) Use of workers posted to the contractors by another company owned by the same group and established in a Member State (“intra-group posting” as defined by Article 1, 3, of Directive 96/71/EC concerning the posting of workers in the framework of the provision of services).
  - (b) Use of workers hired out to the contractors by a temporary employment or placement agency established in a Member State (“hiring out of workers” as defined by Article 1, 3, (c) of Directive 96/71/EC concerning the posting of workers in the framework of the provision of services).
  - (c) Use of workers temporarily transferred to the contractors from a company established outside the territory of a Member State and that belongs to the same group (“intra-corporate transfer” as defined by Article 3, (b) of Directive 2014/66/EU on the conditions of entry and residence of third-country nationals in the framework of an intra-corporate transfer).
  - (d) Use of staff without employment contract (“self-employed persons working for the contractors”), without the tasks of the self-employed persons being well-defined parts of the contract.
  - (e) Use of suppliers and/or transporters by the contractors, to perform the contract at the place of performance, unless the economic activities of the suppliers and/or the transporting services are within the subject of this RFP.
  - (f) Performance of part of the contract by members of an EEIG (European Economic Interest Grouping), when the EEIG is itself a contractor or a group member.

- (3) Tenderers must clearly indicate in their proposal which parts of the services are intended to be subcontracted; the identity, role, and qualifications of each subcontractor (where known); and the estimated value or percentage of work to be performed by subcontractors.
- (4) All subcontracted services must be declared at the time of submission. Substitution or addition of subcontractors after the award of the contract is only allowed with prior written approval from EIT Health.
- (5) The main contractor remains solely responsible for the overall delivery of the services; fully liable for the actions, omissions, and performance of its subcontractors; and responsible for ensuring that all subcontracted services comply with the terms of the contract.
- (6) EIT Health will not have a direct contractual relationship with any subcontractor, and subcontractors may not claim payment or rights directly from EIT Health.
- (7) All subcontractors must meet the same eligibility and exclusion criteria as the main contractor; comply with all relevant provisions of the contract, including those on confidentiality, data protection and GDPR, environmental and social obligations, and recordkeeping and audit. Upon request, the main contractor must provide supporting documentation to verify subcontractor compliance.
- (8) EIT Health reserves the right to reject any proposed subcontractor that does not meet the required standards, and to request the replacement of a subcontractor at any time if justified by performance, conflict of interest, legal non-compliance, or reputational risk. The contractor shall propose an equivalent or better-qualified substitute within 5 working days of EIT Health's request.
- (9) Subcontracting of the entire scope of services may be prohibited unless specifically justified and authorised. EIT Health may reject proposals that are deemed to represent excessive pass-through risk or where the main contractor has insufficient in-house capacity to manage the contract. The total subcontracted value may not exceed 20% of the contract, unless otherwise justified. All subcontracting agreements must be made available to EIT Health on request for verification.

### **3. Conflict of Interest**

- (1) The provisions of this section apply to tenderers, consortium members, subcontractors, proposed personnel, and any third parties whose capacity is relied upon for the performance of the contract.
- (2) Tenderers must be free from any conflict of interest that could compromise, or reasonably be perceived as compromising, the impartiality, independence, or objectivity of either the procurement procedure or the performance of the contract.
- (3) A conflict of interest may arise, including but not limited to, where a tenderer:

- (a) Has a direct or indirect financial, personal, professional, or organisational interest in the outcome of this procurement procedure;
  - (b) Has family, employment, business, or other relationships with persons involved in the preparation, evaluation, award, management, or oversight of this procurement procedure;
  - (c) Has participated in the preparation of this RFP or related procurement documentation in a manner that could provide an unfair competitive advantage;
  - (d) Possesses confidential or privileged information not available to other tenderers that could influence the outcome of the procedure;
  - (e) Is subject to any other circumstance that may impair, or appear to impair, independent and objective performance.
- (4) Tenderers must maintain professional independence and implement appropriate measures to identify, manage, and mitigate conflicts arising from existing or prospective client relationships. Tenderers shall disclose any known circumstances that could give rise to a conflict between the interests of EIT Health and those of another client.
- (5) Tenderers shall submit a declaration confirming that they are free from conflicts of interest or, where a potential conflict exists, providing full details together with proposed mitigation measures.
- (6) EIT Health shall assess any disclosed conflict of interest and may:
- (a) Accept the proposed mitigation measures;
  - (b) Require additional mitigation measures or replacement of affected personnel;
  - (c) Reject the proposed mitigation measures; or
  - (d) Exclude the tenderer from the procurement procedure where the conflict cannot be adequately mitigated.
- (7) Tenderers shall inform EIT Health without undue delay of any actual, potential, or perceived conflict of interest arising during the procurement procedure or during the execution of the contract.

#### **4. Exclusion Grounds**

- (1) In line with the principles of Directive 2014/24/EU, the EU Financial Regulation, and applicable national procurement rules, EIT Health shall exclude, or may exclude, tenderers from participation in this procurement procedure where one or more of the following grounds apply. These requirements apply equally to consortium members, subcontractors, and any entities whose capacity is relied upon to satisfy the selection criteria.

- (2) A tenderer shall be excluded where it, or any person having powers of representation, decision-making, or control within the organisation, has been the subject of a final judgment for:
  - (a) Participation in a criminal organisation;
  - (b) Corruption;
  - (c) Fraud affecting the financial interests of the EU;
  - (d) Terrorist offences or offences linked to terrorist activities;
  - (e) Money laundering or terrorist financing;
  - (f) Child labour or trafficking in human beings.
- (3) EIT Health may exclude a tenderer where there is evidence that the tenderer:
  - (a) Is bankrupt, insolvent, being wound up, or subject to similar proceedings;
  - (b) Has committed grave professional misconduct;
  - (c) Has shown significant or persistent deficiencies in the performance of previous contracts;
  - (d) Has entered into agreements with other economic operators aimed at distorting competition;
  - (e) Has attempted to improperly influence the procurement procedure;
  - (f) Has provided false, misleading, or incomplete information;
  - (g) Has failed to provide information or supporting documentation required by EIT Health;
  - (h) Is subject to a conflict of interest that cannot be effectively remedied through appropriate mitigation measures.
- (4) Tenderers shall submit a signed declaration (Annex 2) confirming that none of the exclusion grounds described above apply.
- (5) EIT Health reserves the right, at any stage of the procurement procedure or during the execution of the contract, to request supporting evidence, seek clarifications, consult official registers or databases (including EDES where applicable), and verify the information provided by the tenderer.
- (6) Any tenderer found to be subject to an exclusion ground, or to have provided false, misleading, or incomplete information, may be excluded from the procurement procedure.
- (7) Where an exclusion ground is identified after the award of the contract, EIT Health reserves the right to terminate the contract, recover any amounts unduly paid, and pursue any other remedies available under the contract or applicable law.

## 5. Selection Criteria

- (1) Tenderers must demonstrate that they possess the legal, financial, technical, and professional capacity necessary to perform the services covered by this contract. These requirements apply to individual tenderers, consortia, and, where applicable, subcontractors or third parties whose capacity is relied upon for the performance of the contract.

### a. Legal and Regulatory Capacity

- (1) Tenderers must be legally established and authorised to provide the services covered by this contract in accordance with the laws and professional regulations applicable in their jurisdiction of establishment.
- (2) Tenderers providing regulated legal services must ensure that the personnel proposed for the performance of the services are duly authorised to practise law in the relevant jurisdiction(s).
- (3) Tenderers must ensure that the person signing the tender, and the resulting contract, is duly authorised to represent the entity.
- (4) In the case of a consortium, a lead member shall be designated and authorised to represent the consortium in all communications and contractual matters relating to this procurement procedure and the resulting contract.
- (5) Where a tenderer relies on the capacity of consortium members, subcontractors, or other third parties, such entities must satisfy the relevant legal and regulatory requirements applicable to the services they will perform.

### b. Economic and Financial Capacity

- (1) Tenderers must demonstrate sufficient economic and financial capacity to perform the services covered by the contract.
- (2) The tenderer shall have achieved an average annual turnover of at least EUR 100,000.00 during the two most recently completed financial years. The turnover should relate, wholly or partly, to activities relevant to the services covered by this procurement procedure.
- (3) Tenderers must maintain professional indemnity insurance with a minimum coverage of EUR 1,000,000.00 per claim or equivalent.
- (4) Where a tenderer relies on the financial capacity of another entity, including a consortium member or subcontractor, it must demonstrate that the necessary resources will be available throughout the duration of the contract.
- (5) In the case of a consortium, the required turnover may be met collectively by the consortium members.

### **c. Technical and Professional Capacity**

- (1) Tenderers must demonstrate that they possess the technical expertise, professional qualifications, and organisational capacity necessary to perform the services covered by this contract.

#### **Relevant Experience**

- (2) Tenderers must demonstrate successful delivery of at least two (2) comparable projects during the past three (3) years.
- (3) The assignments must collectively demonstrate experience relevant to the services described in Section II.1 of this RFP.
- (4) Experience and capacity of consortium members, subcontractors, or other third parties may be considered only where their role in the performance of the contract is clearly described and contractually committed.

#### **Key Personnel**

- (5) Tenderers must propose a core team capable of delivering the services covered by this contract.
- (6) The proposed team shall include, at a minimum:
  - (a) Senior Project Manager;
  - (b) Event Coordinator;
  - (c) Technical Production Manager;
  - (d) Sponsorship Manager.
- (7) Key personnel must:
  - (a) Have relevant academic and professional qualifications;
  - (b) Demonstrate a minimum of five (5) years of relevant professional experience;
  - (c) Demonstrate expertise relevant to their proposed role;
  - (d) Be able to provide services in English at a professional working proficiency level equivalent to CEFR C1 or higher. Additional language capabilities, particularly German, French, Spanish, or other languages relevant to EIT Health operations, will be considered an advantage.

#### **Organisational Capacity**

- (8) Tenderers must demonstrate their ability to mobilise qualified personnel within short timeframes and manage multiple assignments simultaneously.

- (9) Tenderers must maintain appropriate organisational arrangements to ensure continuity of service, including replacement arrangements for key personnel and adequate resource planning.

#### **d. Verification of Selection Criteria**

- (1) Tenderers shall provide sufficient information and supporting documentation to enable EIT Health to verify compliance with the selection criteria set out in this section.
- (2) The documentation required to demonstrate compliance with the selection criteria is specified in Section VI and the relevant annexes to this RFP.
- (3) Documents not originally issued in English shall be accompanied by an informal English translation.
- (4) EIT Health reserves the right, at any stage of the procurement procedure and during the execution of the contract, to request clarifications, supporting evidence, updated documentation, or additional information necessary to verify compliance with the selection criteria.
- (5) Where, for valid reasons, a tenderer is unable to provide a specific document requested by EIT Health, alternative evidence demonstrating equivalent capacity may be accepted at EIT Health's discretion.

## **V. AWARD CRITERIA AND DECISION MAKING**

### **1. Evaluation Methodology**

- (1) The contract shall be awarded on the basis of the Most Economically Advantageous Tender (MEAT), considering both quality and price.
- (2) Proposals shall be evaluated using the following weighting:

Component	Maximum Score
Technical Evaluation (50%)	50
Financial Evaluation (50%)	50
Total score	100

- (3) Only proposals achieving at least 30 points out of 50 (60%) in the technical evaluation shall proceed to financial evaluation.
- (4) The evaluation shall be carried out by an evaluation committee appointed by EIT Health and documented in accordance with EIT Health procurement procedures.
- (5) EIT Health reserves the right to verify any information provided by tenderers and to request clarifications.



## 2. Award Criteria

### a. Technical Evaluation

(1) The *Technical Offer* shall be evaluated against the following criteria:

Nr.	Criterion	Maximum Points
1	Understanding of the assignment	20
2	Proposed methodology and work plan	25
3	Relevant experience and track record	25
4	Team composition and expertise	15
5	Timeline and deliverables	15
	Total technical score	Sum of points awarded * 50%

(2) Detailed scoring guidance is provided in the Technical Evaluation Matrix below:

#### Criterion 1: Understanding of the assignment:

Evaluation of: <i>Section 1 of the Technical Offer.</i>	Maximum Points (20)
Insightful, contextualised understanding linked to EIT Health's digital environment and mission; identifies key success factors.	15-20
Reasonable understanding with some specifics but lacks nuance.	8-14
Generic or superficial understanding; lacks alignment with assignment objectives.	0-7

#### Criterion 2: Proposed methodology and work plan

Evaluation of: <i>Section 2 of the Technical Offer.</i>	Maximum Points (25)
Methodology is comprehensive, practical, and tailored to the EIT Health Summit. The proposal demonstrates a clear project management approach, effective stakeholder engagement, robust operational planning, risk mitigation measures, and innovative solutions to enhance participant experience and event impact. Roles, timelines, deliverables, and communication processes are clearly defined.	20-25
Methodology is generally sound and feasible, with an acceptable work plan and project management approach. However, some aspects lack detail, innovation, stakeholder engagement strategies, or alignment with the specific objectives and complexity of the EIT Health Summit.	11-19
Methodology is unclear, generic, incomplete, or lacks a coherent work plan. Limited evidence of understanding of EIT Health's requirements, stakeholder environment, or operational challenges associated with delivering a large-scale international summit.	0-10

#### Criterion 3: Relevant experience and track record

Evaluation of: <i>Section 3 of the Technical Offer.</i>	Maximum Points (25)
Two relevant event projects demonstrating successful delivery of events with 400+ attendees, comparable in complexity, audience profile, and scope to EIT Health requirements.	20-25



Two case studies provided, demonstrating acceptable experience with medium-to-large events, although less comparable in scale, complexity, international dimension, or stakeholder management requirements.	11-19
Limited, incomplete, or unclear evidence of relevant experience. Projects are not comparable in size or scope, fewer than two case studies are provided, or insufficient information is submitted.	0-10

#### Criterion 4: Team composition and expertise

Evaluation of: <i>Section 4 of the Technical Offer.</i>	Maximum Points (15)
Senior team with directly relevant experience; CVs show domain expertise.	10-15
Qualified team, minor gaps in experience or clarity.	6-10
CVs incomplete, unclear roles or mismatched expertise.	0-5

#### Criterion 5: Timeline and deliverables

Evaluation of: <i>Section 5 of the Technical Offer.</i>	Maximum Points (15)
Timeline is realistic, well-structured, includes check-in points and risk buffers.	10-15
Generally workable timeline, lacks detail or adaptation.	6-10
Unclear, unrealistic, or rigid delivery plan	0-5

### b. Financial Evaluation

- (1) The *Financial Offer* shall be evaluated based on the total calculated price submitted in Annex 6.
- (2) The financial score shall be calculated using the following formula:

$$\text{Financial Score} = (\text{Lowest offered price} / \text{Price of proposal}) * 100) * 50\%$$

- (3) The tenderer submitting the lowest evaluated offer price shall receive the maximum financial score of 50 points.

### 3. Final Ranking

- (1) Each member of the evaluation committee shall perform an independent assessment of the proposals against the published award criteria and scoring matrix.
- (2) Following completion of the individual assessments, the evaluation committee shall hold a consensus meeting to discuss the results and agree on a final score for each proposal and each evaluation criterion.
- (3) The final technical score shall be the consensus score adopted by the evaluation committee and recorded in the evaluation report. The final score shall not necessarily correspond to the arithmetic average of the individual scores awarded by the evaluators.

- (4) The evaluation committee shall seek unanimous agreement wherever reasonably possible.
- (5) Where unanimous agreement cannot be reached, the committee may adopt the final score by majority decision, provided that:
  - (a) The reasons for the final score are fully documented;
  - (b) Any material divergence of views is recorded in the evaluation report; and
  - (c) The final score remains fully consistent with the published evaluation criteria and scoring matrix.
- (6) Following completion of the technical evaluation, the financial scores shall be calculated.
- (7) The final score of each proposal shall be calculated as follows. The maximum possible score is one hundred (100) points:

$$\text{Final score} = \text{Technical score} + \text{Financial score}$$

- (8) Proposals shall be ranked from highest to lowest according to their final score.
- (9) The contract shall be awarded to the highest-ranked tenderer, provided that the tenderer:
  - (a) Satisfies all eligibility and selection requirements;
  - (b) Is not subject to any exclusion ground;
  - (c) Achieves the minimum technical threshold; and
  - (d) Remains compliant with all requirements of this RFP.
- (10) In the event of a tie in the final score, preference shall be given to the proposal obtaining the higher technical score.
- (11) Where a tie remains after application of paragraph (10), preference shall be given to the proposal obtaining the highest score in the following order of priority: Criterion 2, 3, 1, 4, and 5.
- (12) Where a tie still remains, EIT Health may apply another objective and non-discriminatory method consistent with the principles of transparency, proportionality, and equal treatment, provided that the method and reasons for its application are documented in the evaluation report.

#### **4. Clarification and Rectification Procedures**

- (1) To ensure a fair and transparent evaluation, EIT Health may, where necessary and in accordance with the principles of equal treatment and transparency, request clarifications or the rectification of formal omissions in submitted proposals.

- (2) Clarifications may be requested where parts of a proposal are ambiguous, unclear, contradictory, or where additional explanation is reasonably required to assess the proposal.
- (3) Tenderers may be asked to:
  - (a) Confirm the interpretation of specific information;
  - (b) Explain aspects of their methodology or pricing logic;
  - (c) Provide supporting information already referenced in their proposal; or
  - (d) Submit missing administrative documentation.
- (4) Rectification may be requested in relation to:
  - (a) missing signatures;
  - (b) missing declarations;
  - (c) proof of registration;
  - (d) incorrect annex references;
  - (e) formatting inconsistencies; or
  - (f) other minor omissions that do not affect the substance of the proposal.
- (5) Clarifications and rectifications shall not:
  - (a) Introduce new substantive information;
  - (b) Modify the technical solution offered;
  - (c) Alter the proposed team, methodology, or pricing;
  - (d) Improve the proposal beyond what was submitted by the deadline; or
  - (e) Result in unequal treatment or provide a competitive advantage.
- (6) Any attempt to revise or materially improve a proposal through the clarification process may result in exclusion from the procedure.
- (7) EIT Health shall specify the deadline for responding to clarification requests. Failure to respond within the prescribed timeframe may result in rejection of the proposal.
- (8) All clarification requests and responses shall be conducted in writing, time-stamped, retained as part of the procurement file, and made available for audit purposes.
- (9) Comparable situations shall be treated consistently and in accordance with the principles of equal treatment and transparency.
- (10) EIT Health will not engage in post-deadline negotiations regarding the substance of proposals.

## 5. Award of the Contract

- (1) Upon completion of the evaluation process, the contract shall be awarded to the highest-ranked tenderer meeting all requirements of this RFP.
- (2) The evaluation committee shall submit its evaluation report and recommendation for award in accordance with EIT Health internal procedures.
- (3) The final award decision shall be taken by the competent EIT Health authority.
- (4) All participating tenderers shall be notified in writing of the outcome of the procedure.
- (5) Upon written request, unsuccessful tenderers may receive a summary of the reasons for the decision and their score in each evaluation area.
- (6) The successful tenderer shall be invited to sign the contract following expiry of any applicable standstill period.
- (7) The contract shall enter into force only upon signature by both parties.
- (8) If the selected tenderer fails to sign the contract within the prescribed period, EIT Health may invite the next-ranked tenderer to enter into the contract, provided that its proposal remains valid and compliant.
- (9) EIT Health reserves the right to:
  - (a) Not award the contract;
  - (b) Cancel or discontinue the procurement procedure at any time prior to signature of the contract;
  - (c) Postpone the award decision, when justified by internal, legal, operational, or funding considerations;
  - (d) Verify the accuracy of information submitted by tenderers prior to contract signature.
- (10) Any decision not to proceed with the award shall be duly justified and communicated to all participating tenderers.
- (11) No compensation or reimbursement of costs shall be payable to tenderers in the event of cancellation or discontinuation of the procedure.

## 6. Notification and Publication of Results

- (1) Following the award decision, EIT Health shall notify all participating tenderers in writing of the outcome of the procurement procedure.
- (2) The notification may include, as applicable:
  - (a) Whether the tender was successful or unsuccessful;
  - (b) The final technical and financial scores obtained;

- (c) The final ranking of the proposal;
  - (d) The identity of the successful tenderer; and
  - (e) The information regarding the applicable standstill period and the possibility to request additional information concerning the evaluation outcome.
- (3) Upon written request, unsuccessful tenderers may receive a summary of the reasons for the decision, including the characteristics and relative advantages of the successful tender, to the extent permitted by applicable law and without disclosing confidential information or commercially sensitive information belonging to other tenderers.
- (4) EIT Health shall publish the award results on OJEU and TED, and the publication shall include the name of the awarded contractor, a short description of the scope, the total contract value, and the duration of the contract.
- (5) EIT Health reserves the right to withhold information where disclosure would:
- (a) Impede law enforcement;
  - (b) Otherwise, be contrary to the public interest;
  - (c) Prejudice the legitimate commercial interests of an economic operator; or
  - (d) Adversely affect fair competition between economic operators.
- (6) All notifications, evaluation records, clarifications, correspondence, and procurement documents shall be retained in accordance with EIT Health's document retention policies and may be made available for internal or external audit and control purposes in accordance with applicable legal and contractual requirements.

## **7. Remedies and Right of Appeal**

- (1) Tenderers have the right to request review or lodge a complaint if they believe that the procedure has not been conducted in accordance with Directive 2014/24/EU, the applicable national transposition laws (e.g. VgV and GWB in Germany), and the principles of equal treatment, non-discrimination, proportionality, and transparency.
- (2) Tenderers who believe they have been disadvantaged by a procedural error or legal breach may request clarification, a formal review of the evaluation process, or a legal recourse via the competent review body. Such requests should be submitted in writing to EIT Health ([appeals@eithealth.eu](mailto:appeals@eithealth.eu)) as soon as possible following notification of results, and no later than any statutory deadlines under national law.
- (3) EIT Health shall observe a standstill period following notification of award. This period allows tenderers to raise objections before the contract is signed. After the contract is signed, appeals may still be possible under the applicable

laws, but remedies may be limited. Requests may be addressed to General Administration of the Free State of Bavaria  
(<https://www.regierung.oberbayern.bayern.de/>)

## VI. INSTRUCTIONS FOR BIDDERS

### 1. Submission Process

#### a. Submission Method

- (1) All proposals must be submitted electronically and exclusively via the DTVP (<https://dtvp.de>), which serves as the official procurement platform for this procedure.
- (2) To participate, tenderers must register on DTVP as a supplier (free of charge), download the tender documents, upload all required documents directly within the system, using the designated fields.
- (3) Submission via email, physical delivery, or cloud-based links (e.g. Dropbox, Google Drive, WeTransfer) is strictly prohibited and will result in disqualification.
- (4) The use of external file hosting platforms violates EU procurement rules on confidentiality, traceability, and equal treatment, and will not be accepted under any circumstances.

#### b. Deadline for Submission

- (1) The full proposal must be submitted by no later than **06 August 2026 23:59 CEST UTC/GMT+2**. The DTVP portal will automatically close the submission function at the exact deadline. Late submissions, even if caused by internet or upload errors, will not be accepted unless the fault is attributable to the DTVP or EIT Health.
- (2) Tenderers are strongly advised to begin the upload process well in advance of the deadline to avoid disqualification due to last-minute technical issues.

#### c. Timetable

Questions accepted until	27 July 2026
Proposals accepted until	06 August 2026 23:59 CEST UTC/GMT+2
Proposals opened on	07 August 2026
Proposals evaluated until	17 August 2026
Notice of (non-)award sent on	18 August 2026
Standstill period until	28 August 2026
Signing of the contract from	29 August 2026

## 2. Format and Structure of the Proposal

### a. General Format Requirements

- (1) All documents must be submitted in PDF format unless otherwise indicated. Files must be fully searchable (i.e. no scanned images for text-heavy documents, unless required for signed forms).
- (2) All content must be in English. Bidders may use electronic signatures in accordance with the eIDAS Regulation (EU No 910/2014), if applicable.
- (3) Virus-infected files, corrupted documents, or unsupported formats will result in disqualification of the affected documents or sections.

### b. Use of Templates

- (1) All required templates (e.g. *Financial Offer*, declarations) are provided as annexes to this RFP. These must be used without modification, except where fields are intended to be filled in.

## 3. Clarification Process

### a. Submitting Questions

- (1) All requests for clarification must be submitted exclusively via the DTVP platform, using the “communication” or “Q&A” function linked to the procedure. Questions sent by email, telephone, or other channels will not be answered. Questions must clearly indicate the relevant section and paragraph of the RFP. EIT Health will not provide informal or individual consultations regarding the interpretation of the tender documents.
- (2) Deadline for submitting questions: 10 calendar days before proposal submission deadline. No clarifications will be accepted after this deadline to ensure equal treatment.

### b. Publication of Answers

- (1) Responses to all eligible and timely questions will be published anonymously via the DTVP platform and shall be accessible to all registered participants of the procedure.
- (2) The responses shall be considered as binding clarifications that form part of the procurement documentation. Answers may clarify, refine, or elaborate on the existing RFP text, but shall not alter its substance.

### c. Disclaimer

- (1) EIT Health reserves the right not to respond to questions that are unclear, repetitive, or irrelevant to the procedure, to issue consolidated or amended answers in the form of a formal corrigendum if necessary, and to extend the submission deadline if clarifications substantially impact proposal preparation.

- (2) All decisions to amend or clarify the procedure will be communicated via DTVP only.
- (3) Bidders are encouraged to review all published Q&A responses before finalising their offer. EIT Health will not assume responsibility for misunderstandings arising from questions not submitted according to the procedure.

#### 4. Language Requirements

- (1) All proposals and related documentation must be submitted in English. This includes the *Technical Offer*, the *Financial Offer*, and all supporting administrative documents, including declarations.
- (2) Supporting documents originally issued in another language (e.g. company registration, insurance certificates, diplomas) may be accepted without translation, provided that they are clearly identifiable and a brief summary in English is provided where necessary for understanding and evaluation.
- (3) EIT Health reserves the right to request a certified or sworn translation of any document during evaluation or prior to contract signature, if needed for clarity or legal compliance.

#### 5. Content of the Proposal

- (1) For the purposes of this procurement procedure, the proposal shall consist of:
  - (a) The *Technical Offer* referred to in this section VI.5.a;
  - (b) The *Financial Offer* referred to in this section VI.5.b; and
  - (c) The administrative and legal documentation referred to in this section VI.5.c.

##### a. Technical Offer

- (1) The *Technical Offer* shall be submitted as a single searchable PDF document in English.
- (2) No mandatory template is provided. However, tenderers shall follow the structure presented in the table below and ensure that the information provided directly addresses the award criteria and scoring matrix set out in Section V.2. of this RFP.
- (3) No pricing information shall be included in the *Technical Offer*. Inclusion of pricing information may result in exclusion from the evaluation process.

Section 1 (Max 02 pages)	<p>Understanding of the assignment:</p> <p>Describe your understanding of EIT Health, its mission and operating environment, including the broader HE and European innovation ecosystem context, and explain how the proposed approach addresses the objectives of this assignment. The response should demonstrate an understanding of EIT Health's organisational needs, stakeholder</p>
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	landscape, and the role of the EIT Health Summit in supporting collaboration, visibility, and impact across the European health innovation communities.
Section 2 (Max 03 pages)	<p>Proposed methodology and work plan:</p> <p>Describe your proposed methodology and work plan for the planning, preparation, delivery, and post-event evaluation of the EIT Health Summit. Your response should show a clear understanding of the objectives and complexity of the assignment and present a realistic, structured, and innovative approach covering all phases of the event lifecycle.</p>
Section 3 (Max 05 pages)	<p>Relevant experience and track record:</p> <p>Describe your most relevant experience in delivering events comparable in scale, complexity, and stakeholder profile to the EIT Health Summit. Highlight those projects that best show your capability to deliver a comparable event, i.e. 400+ participants.</p> <p><u>The information provided under this criterion should complement, and not merely duplicate, the information contained in Annex 4 (<i>Declaration of Technical Capacity</i>).</u></p>
Section 4 (Max 03 pages)	<p>Team composition and expertise:</p> <p>Describe your proposed team and explain why the proposed personnel are suitable for the performance of the contract. Describe how the proposed team has the appropriate combination of skills, experience, and seniority required to successfully plan, coordinate, and deliver the EIT Health Summit. Explain the overall team structure, reporting lines, allocation of responsibilities, and how the proposed team members will work together.</p> <p><u>The information provided under this criterion should complement, and not merely duplicate, the information contained in Annex 5 (<i>Declaration of Professional Capacity</i>).</u></p>
Section 5 (Max 03 pages)	<p>Timeline and deliverables:</p> <p>Present an indicative implementation schedule and explain your approach to planning, milestone management, and delivery of the services. Describe a realistic, coherent, and feasible work plan, from project initiation through on-site delivery and post-event evaluation. Explain how you will manage dependencies, critical activities, approvals, and interactions with EIT Health and external stakeholders, and how you will ensure timely delivery of all contractual outputs.</p>

## b. Financial Offer

- (1) The financial offer shall be submitted separately from the *Technical Offer* and shall consist of the completed pricing table provided in Annex 6.
- (2) The financial offer shall be expressed in EUR and exclusive of VAT unless otherwise specified.
- (3) Tenderers shall submit a complete and transparent financial proposal covering all services required for the planning, preparation, delivery, and post-event evaluation of the EIT Health Summit.
- (4) Unless expressly stated otherwise in Annex 6, the prices submitted shall include all costs necessary for the performance of the services, including but not limited to:
  - (a) Personnel costs;

- (b) Project management and administrative costs;
  - (c) Overhead and office expenses;
  - (d) Communication and coordination costs;
  - (e) Software, licences, and tools necessary for the performance of the services;  
and
  - (f) Any other costs reasonably incurred in the ordinary performance of the contract.
- (5) Where applicable, certain third-party costs directly related to the delivery of the event may be reimbursed separately, provided that such costs:
- (a) Are expressly foreseen in Annex 6 or otherwise approved in writing by EIT Health in advance;
  - (b) Are necessary for the performance of the contract;
  - (c) Are supported by appropriate documentary evidence; and
  - (d) Are invoiced at actual cost without any administrative surcharge, handling fee, or profit margin.
- (6) Such reimbursable costs may include, where applicable and subject to prior written approval by EIT Health:
- (a) Travel and accommodation expenses required for the performance of the services;
  - (b) Venue-related expenses not directly contracted by EIT Health;
  - (c) Third-party supplier costs, including production, audiovisual, photography, videography, printing, branding, or catering services;
  - (d) Costs related to the event platform, registration systems, or other digital services; and
  - (e) Other reasonable third-party expenses directly attributable to the delivery of the Summit.
- (7) Tenderers shall not modify the structure of Annex 6 unless expressly authorised by EIT Health. Conditional pricing, alternative pricing structures, or deviations from the pricing template may result in the rejection of the proposal.
- (8) The prices submitted by the successful tenderer shall form the financial basis of the service contract and shall remain fixed for the duration of the contract unless otherwise expressly provided for in the contract.

### **c. Administrative and Legal Documentation**

- (1) All documents forming part of the proposal shall be complete, accurate, fully readable, and submitted in accordance with the requirements of this RFP.

- (2) Unless otherwise specified, all declarations and forms requiring signature shall be signed by an authorised representative of the tenderer.
- (3) The following documents shall be submitted as part of the Proposal:
  - (a) **Annex 0:** Proposal Submission Checklist and Declaration
  - (b) **Annex 1:** Identification Form
  - (c) **Annex 1a:** Power of Attorney
  - (d) **Annex 1b:** Letter of Commitment
  - (e) **Annex 2:** Declaration on Absence of Grounds for Exclusion
  - (f) **Annex 2a:** Declaration on EU Russia Sanctions
  - (g) **Annex 3:** Declaration on Economic and Financial Capacity
  - (h) **Annex 4:** Declaration on Technical Capacity
  - (i) **Annex 5:** Declaration on Professional Capacity
- (4) Where a tender is submitted by a consortium or where the tenderer relies on subcontractors or third parties, the documentation required under this section shall also be submitted for such entities to the extent required by this RFP.
- (5) Failure to submit mandatory documentation may result in the rejection of the proposal, unless the missing information may be clarified or rectified in accordance with Section V of this RFP.
- (6) EIT Health reserves the right, at any stage of the procurement procedure or prior to signature of the contract, to:
  - (a) Request originals, certified copies, translations, or updated versions of any document;
  - (b) Request additional supporting evidence necessary to verify information contained in the proposal;
  - (c) Verify the authenticity and accuracy of any declaration or document submitted by the tenderer.
  - (d) The *Technical Offer*, financial offer, and all administrative and legal documentation submitted by the successful tenderer shall form an integral part of the contractual documentation and shall be incorporated by reference into the resulting contract, to the extent applicable.