



**COMSATS University Islamabad (CUI), Lahore Campus**  
**Defence Road, Off Raiwind Road, Lahore**

**Tender No. CUI, LC-TN-13-18-1082**  
**Case # 2400**

**Expression of Interest:            Health Insurance Policy**

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**Signature & Stamp of bidder**

## Single Stage Two Envelop Procedure

### **Part: A GENERAL TERMS AND CONDITIONS**

1. *All pages of bidding documents are mandatory to be signed / stamped, meaning thereby bidder agrees to our terms & conditions mentioned herein, failing which the bid may be rejected.*
2. *Any addition, deletion or modification of any clause of the procurement terms & conditions/BoQs of COMSATS University Islamabad (CUI), Lahore Campus by any vendor will not be acceptable and may lead to rejection of the bid.*
3. *Only registered Suppliers, who are on Active Taxpayers List (ATL) of FBR, are eligible to participate in tender.*
4. The contract will be executed and handed over in satisfactory conditions up to the entire satisfaction of CUI, Lahore Campus.
5. Documents along with Pay Order / Demand Draft amounting to **Rs. 1000/-** as a tender documents fee (Non-Refundable) shall be submitted in favor of COMSATS University Islamabad, Lahore Campus to the address given below. No bid will be accepted without tender documents' fee.
6. Your bid proposal should be inclusive of all applicable taxes.
7. After opening of bids, CUI, Lahore Campus will examine the bids for completeness as per tender document.
8. The bid should be submitted in a sealed envelope up to **June 22, 2018** on or before **1100hrs** and will be opened on the same date **at 1130hrs** in the presence of available bidders.
9. CUI, Lahore Campus, will follow the PPRA rule of **single stage two envelope procedure**;
  - i. The bid shall comprise a single package containing **two separate envelopes**. Each envelope shall contain separately the **financial proposal** and the **technical proposal**;
  - ii. The envelopes shall be marked as **“FINANCIAL PROPOSAL”** and **“TECHNICAL PROPOSAL”** in bold and legible letters to avoid confusion;
  - iii. Initially, only the envelope marked **“TECHNICAL PROPOSAL”** shall be opened;
  - iv. The envelope marked as **“FINANCIAL PROPOSAL”** shall be retained in the custody of the procuring agency without being opened;
  - v. The procuring agency shall evaluate the technical proposal in a manner prescribed in advance, without reference to the price and reject any proposal which does not conform to the specified requirements;

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- vi. During the technical evaluation **no amendments** in the technical proposal shall be permitted;
  - vii. The financial proposals of bids shall be opened publicly at a time, date and venue announced and communicated to the bidders in advance;
  - viii. After the evaluation and approval of the technical proposal the procuring agency, shall at a time within the bid validity period, publicly open the financial proposals of the technically accepted bids only. The financial proposal of bids found technically nonresponsive shall be returned un-opened to the respective bidders;
  - ix. and
  - x. The bid found to be the lowest evaluated bid shall be accepted.
10. The envelope should be marked as under;
- Secretary, Purchase Committee**  
**COMSATS University Islamabad, Lahore Campus**  
Defence Road, Off Raiwind Road, Lahore.  
Tel: 042-111-001-007, Ext: 875
11. The envelope shall also bear the word “**CONFIDENTIAL**” and following identification quotation of “**Health Insurance Policy**”.
  12. Deduction of Income Tax and any other tax will be deducted at source according to Government prevailing rules.
  13. It is the sole responsibility of the Company to comply with the applicable laws, be national or international.
  14. **The bidder is required to furnish in form of Bank deposit/ CDR / Pay order equivalent to 2% of the total Bid price as Earnest Money crossed in favor of “COMSATS University Islamabad, Lahore Campus”. Any bid not accompanied by Earnest Money shall be rejected without any right of appeal.**
  15. COMSATS University Islamabad, Lahore Campus reserves the rights to accept or reject the bid if;
    - i. Received without earnest money
    - ii. Received later than the date and time fixed for tender submission
    - iii. The tender is unsigned/ unstamped
    - iv. The offer is ambiguous
    - v. The offer is conditional
    - vi. The offer is from a firm, which is black listed by any Govt. Office.
    - vii. The offer is received by telephone/telex/fax/telegram.
    - viii. Any unsigned / ambiguous erasing, cutting / overwriting etc. is made.
    - ix. Termination of Contract on Unsatisfactory grounds.

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**Part: B: SPECIAL TERMS AND CONDITIONS OF THE INSURANCE POLICY**

1. All the lives insured under the policy shall be given full indoor-patient (IPD) medical coverage (including pre-existing, congenital, special investigation, eye treatment and day care cases) of any physical or mental disease/disorder. All kind emergency treatments whatsoever shall be covered as per IPD limits.
2. Exclusions: OPD, HIV-AIDS treatment, cosmetic surgeries and procedures, dental, optic implants or indoor dental treatment (however, in case of accident the dental treatment will be covered). Other exclusions are tests and treatment for infertility and contraceptive measures, suicidal attempts, drug and alcohol/ narcotics use/abuse and criminal or subversive involvement and resulting injuries/ ailments to self and/ or family.
3. In case of injuries to the covered lives insured by the Insurance Company due to Military or Air Force, Police or security forces operations or due to terrorism, shall be covered as per assigned limits.
4. The Insurance Company shall not refuse any admission request from panel hospitals, where the attending specialist doctor or doctor on duty, has in writing intimated that the concerned patient needs to be admitted for treatment.
5. Admissions for control of blood pressure and diabetes are also allowed and covered.
6. All kind of treatments for removal of kidney/ gallbladder stones etc. (including lithotripsy) shall also be covered. Specialized tests like MRI, CT-Scan, Endoscopy, Thallium Scan, ETT, ECHO and Angiography shall also be covered. For this purpose admission condition shall not apply.
7. Treatment and vaccination for Hepatitis B, C, treatment of cancer and all kinds of heart surgeries shall be covered. For Hepatitis B & C, all the tests (initial for diagnosis purpose against which the treatment initiated and final test after the treatment) shall also be covered.
8. In case of dread disease, all the dependents including Parents (Maximum Age Limit 85 years) shall also be given coverage up to the dread disease limit. (Please see General Conditions for Dread Disease at Part C on page # 7).
9. Cases shall not be refused due to non-availability of PMDC No. Furthermore, cases shall also not be refused by giving the reason that “General Practitioner is not authorized to do the treatment.”
10. The Insurance Company shall ensure that all kind of approvals to panel hospitals in respect of insurance coverage shall be given in as demanded by hospital and well in time, so the admitted patients and their dependents should not suffer due to non-availability of full approval or delayed approvals.
11. All the available limits as per coverage plan shall be printed on Insurance cards for information and record of the employees.

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12. The Insurance Company shall ensure that all kind of objections shall be intimated to concerned focal person only once. Once the objection has been replied in the form of documentary evidence or information, it shall be settled without any further objection and delay. In such cases, maximum response time for Insurance Company is 30 days.
13. Maximum time for settlement of reimbursement claims shall be 30 days. In case of any unjustified delay on the part of Insurance Company, it will be adjustable against performance guarantee.
14. All kind of IPD/dread disease coverage & reimbursements shall not be made conditional for settlement of endorsement premium dues.
15. All kind of premium dues shall be settled on bi-annual basis. 10% of the premium payments shall be withheld as performance guarantee.
16. Insurance coverage to neonatal babies shall be provided as per assigned IPD Limits of the concerned employee. New born babies shall be treated as insured dependent of the concerned employee.
17. In case of deficiencies of the documents, the Insurance Company shall only withheld the claimed amount relating to the deficiency, the rest of the claim shall be settled. Withheld amount shall be settled after the provision of the required documents.
18. In case of non-issuance of insurance card to an existing employee, dependent or Parent(s), due to non-provision of employee data required for issuance of health insurance card, the reimbursement shall be made to the concerned employee after the issuance of fresh health insurance card. In this respect intimation shall be forwarded by the concerned focal person regarding the status of employee, dependents and parents. However, the name of the person and/or dependents must be available in the updated list forwarded for renewal or in the previous list of the expired policy. Otherwise. The company has the right to refuse all claims incurred before coverage.  
  
In this regards, all the concerned CUI employees has the sole responsibility to get their dependent members insured with Insurance Company through concerned Campus focal person.
19. The agreed per person premium will be payable in full irrespective of the time of coverage during the policy. Accordingly all kind of claims (IPD, dread & maternity) shall be settled in full as per assigned limits.
20. The Insurance Company shall not refuse any kind of claim, even if the card is issued a day before the claim.
21. The Insurance Company shall be responsible to provide list of pending reimbursement claims to the concerned focal persons of the respective Campus on monthly basis. Meetings shall be held on quarterly basis between Insurance Company nominated representative and focal person of the respective campus to settle the disputed issues.
22. Any time interval restriction shall not be made in case of same ailment but this will not be allowed for limit enhancement purpose only (The treating specialist doctor statement/certificate subject to accepted medical practice, shall be the criteria for decision).

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23. The Insurance Company shall not ask for the reason of availing non panel hospital facilities. Elective non-panel utilization without prior approval is allowed. No deductions shall be made in this regards.
24. The Insurance Company shall ensure that claim verifications shall be done within 15 days after the claim submission. No further delay will be acceptable.
25. Any type of excess payments if requested in writing by the CUI, respective campus shall only be settled. However, the reimbursement shall be made by the CUI, respective campus after proper submission of bills and relevant record. In case of excess payment made by the Insurance Company without consent of CUI, respective campus, the university shall not be responsible for the excess payment.
26. No person other than the focal person of the respective campus will deal and communicate with the Insurance Company for all matters. CUI, Lahore campus will circulate and inform all employees accordingly.
27. Insurance Company shall issue a separate insurance policy for every Campus. Any issue or problem with any campus shall not affect the insurance coverage of other Campus.
28. The period of insurance contract shall commence from 1<sup>st</sup> July current year and valid for One year and it will be extendable for further two years (on yearly basis) subject to satisfactory services on same Terms & Conditions.
29. All type of deductions from IPD/dread disease & reimbursement claims on account of percentage of surgeon fee or any other fee etc. shall not be made. (Except for blacklisted hospitals, the list of which will be shared at inception and from time to time).
30. Income Tax will be deducted at source as per rules.
31. The IPD health insurance cards shall be provided by the Insurance Company by 15 working days of issuance of acceptance letter provided final updated list of employees and dependents are received from each campus and principal seat. However, in case of non issuance of card at the time of inception of policy the Insurance Company shall facilitate the insured employees.
32. All the Health Insurance Cards (In case of new employees or additions/revision cases would be provided within 7 days from the date of submission of information and letter.
33. In case of fake/ fraudulent and inflated claim, a formal letter or email would be required from the Insurance Company along with relevant facts/ proof. Re-verification and reversal of statements at any later stage will not be acceptable once initial verification has been completed and conveyed to client. The company will also have the right to reject the inflated amount of the claim only and to charge actual verification charges or 20% of the amount fraudulently claimed, from the individual as a penalty. However actual incurred claim shall be liable to be paid by the Insurance Company.
34. Campus wise claim report (for hospitalization & reimbursements) would be required by the Insurance Company on monthly basis, on request or available on web portal.

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35. All kind of matters not covered above or dispute if any regarding approval for admissions and settlement of claims will be settled mutually and amicably between COMSATS Campus nominated officials and Insurance Company nominated officials.
36. In case of emergency, a non-insured employee shall not be refused after verification by CUI for addition in the list.
37. Pre-admission medical tests and discharge medicines (for upto 30 days) shall be allowed, as prescribed by the doctor/hospital.
38. Donor blood screening charges & Blood transfusion charges shall also be included.
39. CUI has the right to reject all the tenders at any time.

**Part: C      GENERAL CONDITIONS FOR DREAD DISEASE BENEFIT**

“Dread Disease” expense means all medically necessary treatment (including initial diagnosis tests and investigations) and services provided by or on the order of a specialist physician to the insured person, on acquiring a dread disease.

The following conditions are applicable to this clause.

The prescribed limit of this cover is valid for one policy year, each expense to be debited to the respective account. Once the insured contracts a dread disease as defined here in, payment under this clause shall continue until the dread disease benefit limit is exhausted. The dread disease benefit limit shall apply only to expenses arising from anyone or a combination of dread diseases that the insured may acquire during the period whilst the insured person is covered under this clause. For hepatitis B and C treatments, the expenses (including pre & post diagnosis test) of recognized treatments only are covered, For example, interferon injections and Sovaldi tablets etc. Unconventional and unrecognized treatments by Hakeem’s and homeopaths for Hepatitis are not covered.

The company shall pay for expenses of hospitalization and post hospitalization of an insured person, in connection with treatment of a dread disease named and defined as under.

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|--|
| <ol style="list-style-type: none"><li>i. ACUTE MI / C.A.B.G, (Bypass surgeries for Coronary Artery Disease or Arteriosclerosis including cost of pacemaker)</li><li>ii. STROKE / C.V.A</li><li>iii. MALIGNANCY / CANCER. (NON CANCEROUS TUMORS ARE ASLO INCCLUDED.)</li><li>iv. CHRONIC RENAL FAILURE REQUIRING DIALYSIS.</li><li>v. MAJOR ORGAN TRANSPLANT. Cost of organ and donor expense not covered.</li><li>vi. MAJOR BURNS, OVER 20% BODY SURFACE AREA.</li><li>vii. MULTIPLE SCLEROSIS.</li><li>viii. IMPLANTS INCLUDING KNEE &amp; HIP REPLACEMENT (Hardware implants/Instrument machine also covered).</li><li>ix. HEPATITIS B &amp; C TREATMENT.</li><li>x. TUBERCULOSIS</li><li>xi. OPEN HEART SURGERIES</li></ol> |
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**Part: D Technical Evaluation Criteria**

The firms to be determined substantially responsive to the tender and having offered lowest evaluated bid, will be considered for award of contract if not contrary to the tender terms & conditions.

Sr. #	Technical Evaluation		
	Description	Scoring	Marks
i.	Date of Incorporation	10 years + = 10 05-10 years = 5 Less than 5 years = 0	10
ii.	PACRA Rating	AA+, AA, AA <sup>-</sup> = 9 A+, A, A <sup>-</sup> = 5	9
iii.	No of health Insurance Clients (as per format at Annexure A)	More than 100 = 15 100 = 10 90 = 9 80 = 8 Min. Marks = 5	15
iv.	Availability of web portal for health insurance clients	Yes = 10 No = 0	10
v.	24 hours customer support	If helpline/call center 10 otherwise 0	10
vi.	No. of lives covered in previous year	More than 18000 = 10 15000 to 18000 = 9 12000 to 15000 = 8 10000 to 12000 = 7 8000 to 10000 = 6 5000 to 8000 = 5 Less than 5000 = 3	10
vii.	No. of Panel Hospitals throughout Pakistan including Lahore, Sahiwal & Vehari (Attach detailed list)	2 points for having panel hospital at each Campus Cities (Lahore, Sahiwal, Vehari)	6
viii.	Amount of IPD Claims received previous year		
ix.	Amount of IPD Claims Paid previous year	More than Rs. 200 Million = 5 Rs. 100 -200 Million = 3 Less than Rs. 100 Million = 2	5
x.	Amount of Reimbursement Claims received previous year		
xi.	Amount of Reimbursement Claims Paid previous year	More than Rs. 200 Million = 5 Rs. 100 -200 Million = 3 Less than Rs. 100 Million = 2	5
xii.	Over all repute of the Company a. Past experience with CUI/CIIT		20

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	b. Number of repeated contracts with clients c. Client satisfaction index or equivalent parameter		
<b>Total Marks</b>			<b>100</b>

**Note: Please attach all verifiable documents in support of above parameters/criteria.**

- a) Minimum Score Required for Technical Qualification = 50
- b) Technical score < 50 shall not be considered for the award of contract.
- c) Weightage of Technical Score = 70
- d) Weightage of Financial Score = 30
- e) Overall repute shall be checked, or cross verified from major clients and panel hospitals

(Annexure "A")

**List of Nos. of Health Insurance Clients**

Sr. #	Clients / Organization Served	Concerned Officer(s) of Client / Organization	Contact / Cell No.	Email

\*Use extra sheet in the same format if required.

Signature  
(Authorized Representative)
-


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Stamp
-


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**Signature & Stamp of bidder**

**Tender Acceptance Form**

**(THIS FORM IS TO BE PROVIDED WITH THE TECHNICAL BID)**

**The above mentioned terms & conditions have been carefully read and are hereby unconditionally accepted.**

Sr. #	Factors	Description
1	Name of the Organization / Contractor	
2	Date of Establishment	
3	Corporate Status	
4	Owner / Proprietor / MD / CE Name	
5	CNIC No.	
6	Mailing Street Address	
7	Contact No(s).	
8	Cell No(s).	
9	Helpline No(s).	
10	Fax No(s).	
11	Email Address	
12	NTN No.	
13	GST No.	

**Signature**  
(Authorized Representative)
-

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**Stamp**
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**Signature & Stamp of bidder**

**Part: E      Hospitalization Benefit Plan**

1. The insurance policy is required for 03 campuses of COMSATS University Islamabad located in Lahore, Sahiwal and Vehari only. The employees of these campuses of CUI have been distributed in 04 different categories.
2. The detail of employees and dependents in 04 categories is as following. The number of lives is subject to increase or decrease.
3. Sealed proposals are invited as per CUI Advertisement appeared on the PPRA Web Site for Health Insurance of the employees of CUI.
4. The hospitalization benefit plan of CUI is as under:

Sr. #	Coverage	Category (Rupees)			
		A	B	C	D
1	Hospitalization limit per insured per ailment.	135,000	105,000	90,000	75,000
2	Maternity Limit (Normal or Caesarian)	80,000	65,000	50,000	40,000
3	Dread Disease Limit per insured per annum.	600,000	500,000	400,000	300,000
4	Room Limit	8,500	7,000	5,500	4,000

**Data of Employees Entitled for Health Insurance 2018-19, CUI-Lahore**

Sr. No.	Scale	Category	COMSATS Lahore					Grand Total
			No. of Employees	Number of Dependents				
				Spouse	Children	Parents	Total	
1	OG - IV OG - III	A	35	31	82	34	147	182
2	OG - II OG - I RA	B	453	346	559	651	1,556	2,009
<b>Sub Total</b>			<b>488</b>	<b>377</b>	<b>641</b>	<b>685</b>	<b>1,703</b>	<b>2,191</b>
3	SG - IV SG - III	C	91	63	94	124	281	372
4	SG - II SG - I	D	341	267	720	397	1,384	1,725
<b>Sub Total</b>			<b>432</b>	<b>330</b>	<b>814</b>	<b>521</b>	<b>1,665</b>	<b>2,097</b>
<b>Grand Total</b>			<b>920</b>	<b>707</b>	<b>1,455</b>	<b>1,206</b>	<b>3,368</b>	<b>4,288</b>

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**Data of Employees Entitled for Health Insurance 2018-2019, CUI-Sahiwal**

Sr. No.	Scale	Category	COMSATS SAHIWAL					Total
			No. of Employees	Number of Dependents			Total	
				Parents	Spouse	Children		
1	OG - IV OG - III	A	5	1	5	10	16	21
2	OG - II OG - I	B	134	190	101	136	427	561
<b>Sub Total</b>			<b>139</b>	<b>191</b>	<b>106</b>	<b>146</b>	<b>443</b>	<b>582</b>
3	SG - IV SG - III	C	46	59	39	79	177	223
4	SG - II SG - I	D	113	111	95	236	442	555
<b>Sub Total</b>			<b>159</b>	<b>170</b>	<b>134</b>	<b>315</b>	<b>619</b>	<b>778</b>
<b>Grand Total</b>			<b>298</b>	<b>361</b>	<b>240</b>	<b>461</b>	<b>1,062</b>	<b>1,360</b>

**Data of Employees Entitled for Health Insurance 2018-2019, CUI-Vehari Campus**

Sr. No.	Scale	Category	COMSATS Vehari					Total
			No. of Employees	Number of Dependents			Total	
				Parents	Spouse	Children		
1	OG - IV OG - III	A	5	3	5	12	20	25
2	OG - II OG - I	B	161	259	110	182	551	712
<b>Sub Total</b>			<b>166</b>	<b>262</b>	<b>115</b>	<b>194</b>	<b>571</b>	<b>737</b>
3	SG - IV SG - III	C	33	55	25	39	119	152
4	SG - II SG - I	D	123	138	110	297	545	668
<b>Sub Total</b>			<b>156</b>	<b>193</b>	<b>135</b>	<b>336</b>	<b>664</b>	<b>820</b>
<b>Grand Total</b>			<b>322</b>	<b>455</b>	<b>250</b>	<b>530</b>	<b>1,235</b>	<b>1,557</b>

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**Data of Employees Entitled for Health Insurance 2018-19 for CUI-Lahore, Sahiwal & Vehari**

Sr. No.	Scale	Category	Detail					Grand Total
			No. of Employees	Number of Dependents			Grand Total	
				Spouse	Children	Parents		
1	OG - IV OG - III	A	45	41	104	38	183	228
2	OG - II OG - I RA	B	748	557	877	1,100	2,534	3,282
<b>Sub Total</b>			<b>793</b>	<b>598</b>	<b>981</b>	<b>1,138</b>	<b>2,717</b>	<b>3,510</b>
3	SG - IV SG - III	C	170	127	212	238	577	747
4	SG - II SG - I	D	577	472	1,253	646	2,371	2,948
<b>Sub Total</b>			<b>747</b>	<b>599</b>	<b>1,465</b>	<b>884</b>	<b>2,948</b>	<b>3,695</b>
<b>Grand Total</b>			<b>1,540</b>	<b>1,197</b>	<b>2,446</b>	<b>2,022</b>	<b>5,665</b>	<b>7,205</b>

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**Part: F**                      **FINANCIAL PROPOSAL**

Insurance premium to be demanded by the Health Insurance Company:

Rate per Category

(Only single amount may be mentioned for insurance premium to be quoted)

Coverage	Category (Rupees)			
	A	B	C	D
Insurance Premium Per life IPD Per Category				

**Total Premium Calculation:**

**Gross Premium:**      Rs. \_\_\_\_\_

**Admin Charges**      Rs. \_\_\_\_\_

**ASC Charges**      Rs. \_\_\_\_\_

**USC Charges**      Rs. \_\_\_\_\_

**Stamp Duty**      Rs. \_\_\_\_\_

**Any Other**      Rs. \_\_\_\_\_

**Total Premium**      Rs. \_\_\_\_\_

**Authorized Person Name:** \_\_\_\_\_ **Signatures:** \_\_\_\_\_

**Company Stamp:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Special Terms and conditions:**

1. Please quote the rates on our BoQs, otherwise your bid / items may be rejected.
2. Kindly attach the **Tender fee with Technical Bid** and **Bid money / CDR with Financial Bid.**
3. Please submit the technical and financial bid (s) on our prescribed BoQs and clearly mention, otherwise your bid (s) may be rejected and also attach the terms and conditions (signed, stamped) with both bids.
4. **Multiple rates of an Premium may also lead to the rejection of bid / item.**

**Signature & Stamp of bidder**