



PIDE
PAKISTAN INSTITUTE
OF DEVELOPMENT
ECONOMICS

PAKISTAN INSTITUTE OF DEVELOPMENT ECONOMICS

Quaid-i-Azam University Campus, Islamabad, Pakistan

Phone:051-9248089, 9248051

TENDER NOTICE NO. GS/09/2026

TENDER DOCUMENT

FOR

GROUP HEALTH INSURANCE/TAKAFUL





TENDER NOTICE NO. GS.09/2026

The Pakistan Institute of Development Economics (PIDE) invites sealed bids from eligible, experienced, and reputable firms registered with income tax, sales tax department, in accordance with **Rule 16(A) of the Public Procurement Rules, 2004**, for the following category:

➤ **GROUP HEALTH INSURANCE/TAKAFUL (SINGLE-STAGE TWO-ENVELOPE)**

Interested eligible bidders are required to register on EPADS 2.0 (<https://epads.gov.pk/>) and submit their bids electronically. Bidding documents, detailed specifications, and terms & conditions are also available on the websites of PIDE (<https://pide.org.pk>), PPRA (www.ppra.gov.pk), and EPADS 2.0. No manual bids/hard copies shall be accepted. The procuring agency reserves the right to accept or reject any or all bids/proposals in accordance with Rule 33 of the Public Procurement Rules, 2004

Closing date of submission is **May 18, 2026** by 11:00 hours. The bids shall be opened **half hour after the closing time.** The Institute reserves the right to accept or reject any or all the bids as per PPRA rules.

(Dr. Nasir Iqbal)

Registrar, PIDE

Telephone # 051-9248051, 051-9248089



GENERAL PRO-FORMA FOR TENDER SUBMISSION (to be filled by Bidder/firm)	
Bid/ proposal submitted for	
Firm/ Company Name	
Address: (Head office)	
Address: Office(s) in Islamabad/ Rawalpindi	
Contact Number	
Email address	
Owner(s) Name	
NTN/GST Number	
Work Experience in relevant field/ Category (in Years)	
Previous reputation/work completion certificates / evidence submitted	Yes / No
Earnest Money/Bid Security Submitted	Yes / No (Rs. _____) %age _____ (If required)
Submission of undertaking that, firm has not been blacklisted by any Organization/establishment etc.	Yes / No
Last date for tender submission May 18, 2026	Submitted on: _____/_____/2026



GROUP HEALTH TAKAFUL/INSURANCE 2026

1. Introduction:

The Pakistan Institute of Development Economics (PIDE) is a degree awarding specialized Institution in teaching and research in Economics and related social sciences working under the administrative control of Ministry of Planning Development and Special Initiatives, Government of Pakistan.

Proposals through E-PAD 2.0 (financial and technical, Single Stage two Envelops) are invited from the SECP approved/registered reputed Takaful/ insurance companies having established office(s) at Islamabad/Rawalpindi and Registered with Sales Tax Department, having National Tax Number (NTN) for providing Group Health Takaful/Insurance services to the employees of the Institute and their families. The Takaful/Insurance Companies having minimum 5 years; experience in rendering similar services.

2. Purpose of Tender:

Pakistan Institute of Development Economics (PIDE) invites single stage two envelopes tender under PPRA Rules for providing the services of Group Health Takaful/Insurance from well-reputed insurance companies who qualify eligibility criteria for the following:

- a. Current Employees
- b. Eligible dependents of employees

The scope of Services will be based on the following benefits:

- a. Indoor patient facility (hospitalization)
- b. Out-Patient Department (OPD)
- c. Maternity facility
- d. Laboratory test
- e. Dental facility

3. Mode of Advertisement(s):

As per Rule 12(1&2), this Tender is being placed online at PPRA's website, as well as being advertised in print media.

As per Rule 12(2), this Tender is also placed online at the website of PIDE. The bidding document carrying all details can be downloaded from website **pide.org.pk** and from PPRA's website.

4. Type of Open Competitive Bidding:

As per Rule 36 (b), **Single Stage - Two Envelope Bidding** Procedure shall be followed. The said Procedure is reproduced as follows:



- (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;
- (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 non-responsive shall be returned un-opened to the respective bidders; and
- (ix) the bid found to be the *most advantageous bid shall be accepted.

5. Task to be performed by the Takaful/Insurance provider:

- a. To provide Medical Benefits throughout Pakistan in line with Scope of Work mentioned in the technical proposal;
- b. To ensure that their concerned staff/representatives shall behave properly and in a friendly manner with employees /staff/dependents of the Institute; and
- c. To coordinate the matters/affairs with authorized officer of PIDE regularly.
- d. The insurance provider shall reimburse the health claim(s) within 15 days (in case of emergency treatment from other than approved hospital(s)).



6. Responsibility of Pakistan Institute of Development Economics (PIDE):

- a. PIDE will provide the scope of work outlining the number of employees and their dependents to be insured along with their required benefit structure and additional benefits to be covered; and
- b. PIDE will bear the cost of premium based on the details provided under the scope of work.

7. Tender Eligibility/Qualification Criteria:

Eligible Bidder/Tenderer is a Bidder/Tenderer who:

- a. Has approved/ registered with SECP;
- b. Must be registered with Tax Authorities and having valid registration of Sales Tax and Income Tax and also having sound financial strengths can participate;
- c. Has submitted bid for all quoted categories and bid security. Non-compliance of the same shall cause rejection of the bid;
- d. Must have minimum A rating.
- e. Must be involved in relevant business for last 5 years;
- f. Has not been blacklisted by any of Provincial or Federal Government Department, Agency, Organization or Autonomous body or Private Sector Organization anywhere in Pakistan (submission of undertaking on legal stamp paper is mandatory), failing which will cause rejection of the bid;
- g. Have the required relevant qualified personnel and enough strength to fulfill the requirement of assignment;
- h. "Eligible" is defined as any country or region that is allowed to do business in Pakistan by the law of Government of Pakistan; and

8. Joint Venture/Consortium:

Joint venture/consortium are not eligible for this tender.

9. Tender Price & Currency:

The quoted price shall be:

- i. In Pak Rupees;
- ii. Inclusive of all Government applicable taxes; and
- iii. Where no premium is entered against any category(s), the premium of that category shall be deemed to be free, and no separate payment shall be made for that category(s).



10. **Bid Security:**

The Tenderer shall furnish the Bid Security (Earnest Money) as under:

- i. For a sum equivalent to 2.5% of the total Tender Price;
- ii. Denominated in Pak Rupees;
- iii. In the form of Call Deposit Receipt in favour of Pakistan Institute of Development Economics (PIDE), Islamabad; and
- iv. Have a minimum validity period of thirty (90) days from the last date for submission of the Tender or until furnishing of the Performance Security (Bank Guarantee), whichever is later.

11. **Performance Security:**

The successful Insurance provider shall furnish Performance Security as under:

- i. Within fourteen (14) days of the receipt of the Acceptance Letter from the Institute;
- ii. In the form of bank guarantee issued by a scheduled bank operating in Islamabad/Rawalpindi;
- iii. For a sum equivalent to 10% of the total value of the premium; and
- iv. Denominated in Pak Rupees.

12. **Contract Duration:**

The contract duration shall be for a period of one (01) year starting from the date of agreement.

13. **Mode of Payment:**

The Insurance provider shall be providing all necessary supporting documents along with invoice.

- i. The Insurance provider shall submit an Application for Payment of premium to the Institute. The Application for payment shall: be accompanied by such invoices, receipts or other documentary evidence as the PIDE may require; state the amount claimed; and set forth in detail.
- ii. The Institute shall pay the premium, after verification, within thirty (30) days, in Pak. Rupees, through treasury cheque after completion of the task;



14. Tender Validity

The Tender shall have a minimum validity period of ninety (90) days from the last date for submission of the Tender. The Institute may solicit the Tenderer's consent to an extension of the validity period of the Tender. The request and the response thereto shall be made in writing.

15. Opening of the Tender:

Tenders (Technical Bids) shall be opened at 11:30 am on the last date of submission of bids i.e. May 18, 2026. In case the last date of bid submission falls in / within the official holidays / weekends of the Institute, the last date for submission of the bids shall be the next working day.

16. Terms & condition of the Tender

- i. The Insurance company(s) should be provided Group Health Takaful/ Insurance profile and current client list.
- ii. The rates should be in round figure (in paisa's are not acceptable) inclusive of all applicable taxes (Sales Tax etc.).
- iii. The tenderers shall have to deposit @ Rs.2.5% of the total value of the bid as earnest money in the form of Call Deposit receipt only (Cheques are not acceptable) in favor of Pakistan Institute of Development Economics, Islamabad along with bids;
- iv. The earnest money will remain with the PIDE till the completion of the service providing period etc. It will be forfeited, if the firm fails to provide the services during the specified period or provides unsatisfactory services;
- v. The participating firms will have to provide G.S.T/NTN number, company profile for health Takaful insurance.
- vi. The participating firm(s) shall have to provide the claim settlement ratio/ claim ratio.
- vii. The insurance provider must be registered with SECP;
- viii. Bid(s) received after due date shall not be entertained and will be returned to the bidder(s);
- ix. No. alteration or amendment will be allowed in any case at the time of bid opening;
- x. All the prices must be quoted in Pak Rupees and should include all applicable taxes.
- xi. The quoted prices shall remain valid for a period of 90 days;
- xii. The PIDE has right to increase or decrease the number of staff and their dependents;
- xiii. The vendors must have established office(s) at Islamabad / Rawalpindi, which will be inspected by the Institute's authorized Officer (if deemed necessary);
- xiv. The Institute reserves the right to accept or reject any or all the proposals as per PPRA rules.

SCOPE OF WORK:

- a) Details of Medical Insurance benefits required are mentioned at Annexure “A”
- b) Category-wise details of PIDE Employees and their dependents are as under:

Category of Employees / Dependents Age Wise	Category “A” (BPS 19-Above)	Category “B” (BPS 16-18)	Category “C” (BPS 10-15)	Category “D” (BPS 1-9)	Total
(0 - 10)	52	46	62	85	245
(11 - 20)	56	24	43	91	214
(21 - 30)	22	26	17	37	102
(31 - 40)	24	33	36	51	144
(41 - 50)	50	25	34	58	167
(51 - 60)	20	29	21	34	104
(61+)	37	39	41	41	158
Grand Total	261	222	254	397	1134

- c) Financial Proposal should be submitted as per details attached at Annexure” B”

ELIGIBILITY CRITERIA OF INSURANCE PROVIDER:

- Approved/registered Insurance provider/Takaful from SECP
- Registered with Income Tax and Sales Tax authorities
- Companies scoring 50% or above marks as per technical evaluation criteria will be qualified for opening of their financial proposal
- Has not been blacklisted by any of Provincial or Federal Government Department, Agency, Organization or autonomous body or Private Sector Organization anywhere in Pakistan (Submission of undertaking on legal stamp paper is mandatory), failing which will cause rejection of the bid;
- Conditional tenders will not be accepted.
- Each paper of the tender document has to be stamped and signed by the authorized signatory of the insurance company.



17. SCORING CRITERIA FOR TECHNICAL EVALUATION:

Q# 1	Years in Business of Health Insurance/Takaful	Point
1	5 Years to 10 Years	05
2	More than 10 Years	10

Q #2	Existing Health Insurance Portfolio	Point
1	Less than Rs. 750 Million	03
2	More than Rs. 750 Million and less than Rs. 1000 Million	07
3	Rs. 1000 Million and above	10

Q#3	Credit Rating by PACRA/JCS-VIS	Point
1	A to AA	05
2	AA + and above	10

Q#4	No of Corporate Clients in Health Insurance having at least 200 employees	Point
1	Less than 30	03
2	30 to 50	07
3	More than 50	10

Q # 5	Paid up Capital of the insurance company	Point
1	Up to Rs. 750 Million	03
2	Rs. 751 Million to Rs. 1000 Million	05
3	More than 1000 Million	10

Q #6	No. of Panel Hospitals under credit facility in Rawalpindi/Islamabad	Point
1	Up to 10	05
2	More than 10	10

Q # 7	No. of Panel Hospitals under credit facility in Pakistan except Rawalpindi/Islamabad	Point
1	Up to 50	03
2	More than 50 and less than 100	07
3	More than 100	10

18. REQUIRED DOCUMENTS FOR TECHNICAL PROPOSAL:

- Company Profile (Health Insurance Takaful)
- Certificate of Incorporation with SECP
- NTN/ Registration certificate
- List of Panel hospitals under credit facility in Pakistan with contact information
- Separate List of Panel Hospitals in Rawalpindi/Islamabad



- List of Doctors & Health Insurance Management Team
- List of complete current clients of health/Takaful Insurance
- Details of claim settlement ratio/claim ratio
- Documentary proof of Experience in Health Insurance.
- PACRA/JCR-VIS Rating
- Last two-Year Audit Reports
- List of at least 3 current clients for reference check with contact information
- Name of Authorized person/Account Manager with full contact information on company's Letter Head
- Affidavit from insurance provider that the "Firm has never been blacklisted" by any of Provincial or Federal Government Department, Agency, Organization or autonomous body or Private Sector Organization anywhere in Pakistan (Submission of undertaking on legal stamp paper is mandatory),
- List of Exclusions.
- Processing of all settlements / disbursement of payment of claims must be at Islamabad/Rawalpindi office.
- Technical proposal should be containing all required and any additional information. Provide the copies of documents against each query. Absence of any documentary proof shall lead to the dis-qualification of technical proposal and hence from bidding process.

19. REQUIRED DOCUMENTS FOR FINANCIAL PROPOSAL:

- a. Financial Proposal as per Annexure "B"
- b. Call Deposit receipt @ PKR 2.5% earnest money in favor of, Pakistan Institute of Development Economics (PIDE).

20. TENDER COMMUNICATION CONTACTS:

All communication regarding this Tender, whether written or oral must be directed exclusively to the following authorized persons(s).

Name: **Muhammad Imran Qureish**

Designation: Assistant Registrar/In-charge (GS-I), PIDE

Quaid-i-Azam University Campus, Islamabad, Pakistan

Tel: 051-9248089

Any oral communication from or with the authorized persons (s) will be considered un-official and non-binding on PIDE. The Insurance/Takaful Company(s) should rely only on written statements exchanges with the authorized person of PIDE.



21. BID SECURITY:

A bid security of 2.5% of the total amount quoted in the name of Pakistan Institute of Development Economics (PIDE) in shape of a Call deposit receipt must be provided. Proposal submitted without a bid security will not be considered.

22. SUBMISSION PROCEDURE:

Single stage two envelopes procedure will be adopted through E-Pad 2.0 as per PPRA Rules.

The Procurement Agency may reject all or any bid subject to relevant provision of PPRA Rules.

23. EVALUATION OF BIDS:

First Technical bids will be opened and PIDE will examine the same as per tender documents made by a committee constituted by PIDE. Financial proposals of only those bidders will be opened who have secured 50% marks or above in the technical evaluation criteria. Successful bidders(s) will be called for presentation on any intimated date if required. Bidders who do not qualify cannot challenge the findings of evaluation or ask for reasons thereof.

24. TERM OF CONTRACT:

The contract period will be of one year but can be further renewed on same rates after one year with mutual consent on the basis of excellent customer services and feedback of employees through the authorized officer without any change in terms and conditions.

25. AWARD OF CONTRACT:

The successful bidder will have to sign an Agreement on stamp paper with the PIDE and every document submitted in the tender proposal as well as the policy documents.

NOTE:

Bidders are required to submit their proposals separately under the following categories:

- In-Patient Department (IPD) – Individual Coverage (without parents)
- In-Patient Department (IPD) – Coverage including parents
- Family-wise Coverage Proposal with parents
- Family-wise Coverage Proposal without parents
- Out-Patient Department (OPD) Coverage Rs.100,000 per annum, per family



Annexure “A”

DESCRIPTION / BENEFITS OF HEALTH POLICY: (SCOPE OF SERVICES)

The scope of services will be based on the following benefits:

- In-Patient Treatment (Hospitalization) and/or Day Care Treatment.
- Other Medical Services/Facilities/Investigative Procedures.

IN PATIENT TREATMENT (HOSPITALIZATION & DAY CARE) BENEFITS

The In Patient (hospitalization and day care) benefit must cover all medical expenses incurred up to the specified limit while an insured is hospitalized due to illness, surgery or accident (Pre & Post hospitalization up to 30 days)

Proposal

Hospitalization & Related Benefits (H &R)				
Description	BPS 19 & Above "A"	BPS 16-18 "B"	BPS 10-15 "C"	BPS 01-09 "D"
H&R Limit (Per Person per Year)	Rs.700,000	Rs.550,000	Rs.400,000	Rs.300,000
H&R Limit (Per family per Year)	3.5 million	2.75 million	2 million	1.5 million
Enhancement in H&R limits in case of accidental injuries	Covered 50% enhancement in In-patient Medical Claim (IMC) limit in case of RTA injuries			
Enhancement in H&R limits in case of accidental injuries	Major Medical care 50% increase in In-patient Medical Claim (IMC) limit			
Room & Board (per day)	Rs.20,000	Rs.15,000	Rs.10,000	Rs.8,000
Per Hospitalization				
Pre-Hospitalization Sub Limit (Diagnosis, Consultation, & Medicines)	30 Days	30 Days	30 Days	30 Days
Post-Hospitalization Sub Limit (Follow-Ups)	30 Days	30 Days	30 Days	30 Days
Daycare Surgeries & Specialized Investigations In Outpatient Settings Including but not limited to:	COVERED			
Dialysis, Cataract Surgery, MRI, CT Scan, Endoscopy, Thallium Scan, Angiography, Treatment of Fractures, Local Road Ambulance for Emergencies only, Dental Treatment: Root Canal Treatment (RCT), Tooth Extractions (Normal & Surgical), Emergency Dental Treatment due to accidental injuries.				
Maternity Benefits (Per Pregnancy / Per Person)				
Maternity (Normal)	Rs.100,000	Rs.70,000	Rs.60,000	Rs.50,000
Maternity (Complicated)	Rs.170,000	Rs.120,000	Rs.100,000	Rs.90,000
Out Patient Department (OPD) Facility	Coverage Rs.100,000 per annum, per family.			



PAYMENT OF BENEFITS

- a. All the benefits will be provided by the service provider/company as per the agreement. The Insured Member is bound to acquire the benefits with limitations as prescribed in the agreement.
- b. The Benefits under this Policy are always subject to the terms and provisions of this Policy and to the limits and sub-limits indicated in agreement.
- c. Satisfactory proof of Claim must be submitted in accordance with agreement in all cases and the Company may use an independent administrator to settle Claims on its behalf.
- d. All charges must be necessarily incurred and be wholly and exclusively for the purpose of treatment that is Medically Necessary, as determined under the agreement and whose decision in this regard shall be binding.

SUMMARY OF BENEFITS

Hospitalization Benefits

These include surgical and miscellaneous hospital expenses described below:

- a. **Daily Room and Boarding Charges**

The Company will pay the charges actually incurred for the eligible class of Hospital accommodation for In-Patient Treatment of a covered Disability but not more than the maximum amount per day as set forth in the Benefits Table

- b. **Intensive Care Unit (ICU) Charges**

If whilst being confined to a Hospital for In-Patient Treatment and on the recommendation of a Physician, an Insured Member needs to be admitted to the intensive care unit (or another unit for a similar purposes however denominated) the Company will pay the charges actually incurred for the Insured Member's accommodation in the intensive care unit, but for not more than the maximum number of days for each Policy-Period as set forth in the Benefits Table.

- c. **Physician's Visit (In-Patient) Charges**

The charges for professional attendance and Treatment by a Physician while the Insured Member is in Hospital as an In-Patient.

- d. **Specialist Consultation (In-Patient) Charges**

The charges for professional attendance and Treatment by a Specialist, upon the recommendation of a Physician, while the Insured Member is in Hospital as an In-Patient.



e. **Surgical Operation Charges**

The Benefits payable if a surgical operation is performed on the Insured Member. These charges can be for:

a) the charges made by a Surgeon in connection with the surgical operation, including preoperative investigations and preparation of the Insured Member, the operative procedure and the post-operative care rendered by the Surgeon while the Insured Member is in Hospital.

b) the charges made by an Anesthetist in connection with the surgical operation or examination requiring general anesthesia including pre-operative and post-operative visits, the administration of the anesthesia and the administration of fluids and/or blood incidental to the anesthesia or surgery;

c) use of the operating theatre, Treatment room and equipment; and

d) such other charges approved in writing by the Employer.

f. **Miscellaneous Hospital Expenses**

The Benefits available if an Insured Member is confined in a Hospital for In-Patient Treatment:

a) drugs, dressings and medicines prescribed by the attending Physician;

b) laboratory examinations and other diagnostic procedures;

c) physiotherapy;

d) intravenous injections and solutions;

e) administration of blood and blood plasma, including the cost of blood and blood plasma and any fluids administered during surgery;

f) general nursing services;

g) such other charges approved in writing by the Employer.

g. **Day-care Procedure Charges**

The total of the Day-care Procedure charges incurred for and in relation with a surgical procedure that is performed without the Insured Member being confined as an In- Patient,

h. **Pre-admission Diagnostic Testing and Post-hospitalization Consultation Charges**

These are charges connected to a period of Hospitalization and are for the same or a related Disability.

a). Pre-admission Diagnostic Testing charges are the expenses for diagnostic and laboratory examinations, on the basis of which admission of the Insured Member in Hospital is considered necessary and admission actually occurs.

b) Post-Hospitalization Consultation charges are the expenses for consultation with the



same Physician or Surgeon that treated the Insured Member during hospitalization.

Pre-admission Diagnostic Testing and Post-Hospitalization Consultation expenses covered by the Company are restricted by the following conditions:

- a) Admission to Hospital as an In-Patient or Day-care patient must take place while this Policy is in force;
- b) Pre-admission Diagnostic Testing charges must be incurred after the Effective Date of this Policy, and must immediately precede admission in Hospital by no more than the number of days specified; and
- c) Post-hospitalization consultation charges must be incurred immediately following discharge from the Hospital and within the number of days specified.

i. **Ambulance Cover (Within the Same City)**

These are the expenses incurred for the use of a road ambulance for the transportation of the Insured Member to or between Hospitals (within the Same City) in the course of a medical emergency.

j. **Emergency Accidental Outpatient Cover**

These are the expenses that relates to first emergency Treatment of an Accident, undertaken in an emergency room or casualty ward of a hospital or any other facility that is appropriate for the medical services provided. Treatment must be taken within forty-eight (48) hours of the Accident. in order to be eligible for cover.

k. **Emergency Accidental Dental Treatment**

These are the expenses that relate to the first emergency Treatment necessary to relieve pain only as the result of an Accident and for which Treatment is provided within forty-eight (48) hours following the Accident.

ELIGIBLE MEDICAL COVER HOSPITALIZATION, DAY CARE, SPECIALIZED INVESTIGATIONS OUTPATIENT COVER

HOSPITALIZATION	DAY CARE
Daily Room and Board Charges;	Lithotripsy;
In-Hospital Consultations Charges;	Endoscopy;
Surgical Fees;	Excision Biopsy;
Anesthetist's Fee;	Gastroscopy;
Diagnostic Investigations;	Partial Mastectomy;
Operation Theatre Charges;	Tonsillectomy/ Adenoidectomy;
Blood & Oxygen Supplies;	Veins/Varicose;
In-Patient medicines Expenses;	Non-malignant tumors/Abscess procedure;



<p>ICU / CCU /SCU Charges; Organ Transplant; Burns; Stroke/CVA; Local Ambulance Services; Pre & Post-hospitalization Out-Patient fully covered (as at para 5.5 above); Expenses, such as; Consultation Charges, cost of Prescribed medicines and Diagnostic Tests before & after (30-Days) subject to para 5.5 above; Angioplasty/By-Pass/Open Heart Surgery including Pacemakers / Batteries Thyroidectomy; Epidemic Disease COVID-19 up to full hospitalization limit including other relevant lab Tests; Other Operative Procedures</p>	<p>Cholecystectomy; Herniorrhapy; Appendectomy; Cataract & other Eyes Surgeries (excl LASC surgery); Angiography; MRI; CT Scan; Thallium Scan; Radiotherapy; Colonoscopy; Hydrocele; Piles / Fistula; Prostate surgery; Sinus surgery, Septoplasty; Liver aspiration; Sclerotherapy; Kidney Dialysis; Treatment of Cancer (including Chemotherapy, oral chemotherapy with Pre & Post-Hospitalization Expenses of Chemotherapy) up to full hospitalization limit; Medicines, investigations, injections related to Treatment of Hepatitis A, B, C & E such as, Inj. Interferon therapy/ Tab. Sovaldior equivalent along with all combination therapy, consultation & laboratory test such as PCR/LFT) up to full Hospitalization Limit; Treatment of all injuries/Fractures and lacerated wounds (out-patient within 24-Hours). <u>Dental Treatment,</u> Root Canal Treatment (RCT), Tooth Extractions (Normal & Surgical), Emergency Dental Treatment due to accidental injuries. Other Operative Procedures.</p>
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INVESTIGATIVE PROCEDURES

These are the expenses that are Medically Necessary to arrive at a diagnosis or to facilitate Treatment and only if required by a Physician or Specialist, this Policy will pay for the following investigative procedures:

- a) Magnetic Resonance Imaging (MRI)
- b) Computed Tomography (CT) Scans
- c) Thallium Scan
- d) Pet Scan
- e) EEG



- f) EMG
- g) ETT
- h) Echocardiography / Stress Echo
- i) Mammography
- j) OCT
- k) FFA
- l) Bone Scan
- m) Renal Scan
- n) Thyroid Scan
- o) All Type of Biopsies
- p) Barium Studies
- q) Dexa Scan/Bone Densitometry
- r) Intravenous Pyelography
- s) Fibro Scan
- t) Nerve Conduction Studies
- u) 24 Hours Ambulatory Holter Monitoring
- v) Ambulatory Polysomnography
- w) 24 Hours Esophageal pH Monitoring

OTHER INCLUSION

- a. Congenital Birth Defects (CBD) should be fully covered under basic hospitalization;
- b. Interferon/ Sovaladi or equivalent along with all combination therapy with & PCR and other relevant lab tests for COVID-19, Hepatitis B & C should be fully covered under basic hospitalization limit;
- c. Maternity Cover
 - a) Follow-up visits of patients during or after pregnancy;
 - b) Normal/Caesarean/Multiple Birth/Force/Complicated;
 - c) Pre & Post Natal Expenses are to be covered up to the maternity limit (after Delivery);
 - d) Obstetrician's Fee for delivery & Consultation during hospitalization;
 - e) Coverage of congenital birth defect/illness under all benefits;
 - f) Newly born babies are to be covered from very 1st day of birth;
 - g) New born baby's nursery care charges during mother's hospitalization, including incubator facility;
 - h) Miscarriage resulting into D&C or D&E payable from normal maternity limit once in a year.



***Annexure “B”**

FINANCIAL BIDS FORMAT GROUP HEALTH INSURANCE OF PIDE EMPLOYEES

STRENGTH COVERED (CATEGORY WISE)									
		Daughter	Father	Husband	Mother	Self	Son	Wife	
Grade	A (BPS 19+)	51	16	15	22	52	73	32	261
	B (BPS 16-18)	43	24	6	31	52	36	30	222
	C (BPS 10-15)	57	26	0	32	45	56	38	254
	D (BPS 01-09)	101	25	0	33	72	97	69	397
Total		252	91	21	118	221	262	169	1134

Grade * Gender Person Cross tabulation				
		Female	Male	Total
Grade	A (BPS 19+)	120	141	261
	B (BPS 16-18)	114	108	222
	C (BPS 10-15)	127	127	254
	D (BPS 01-09)	207	190	397
Total		568	566	1134

GROSS PREMUM CHARGED (CATEGORY WISE)						
		A (BPS 19+)	B (BPS 16-18)	C (BPS 10-15)	D (BPS 01-09)	Total
Age Group	(0 - 10)	52	46	62	85	245
	(11 - 20)	56	24	43	91	214
	(21 - 30)	22	26	17	37	102
	(31 - 40)	24	33	36	51	144
	(41 - 50)	50	25	34	58	167
	(51 - 60)	20	29	21	34	104
	(61+)	37	39	41	41	158
Total		261	222	254	397	1134

*Rate quoted above is inclusive of all applicable Taxes, surcharges, stamp duty, admin charges etc.

Authorized Signatory Name: _____ Designation: _____

Signature: _____

Stamp: _____

Date: _____