

*Government of Sindh*

# **Sindh Technical Education & Vocational Training Authority**

ST-19, Block 06, Gulshan-e-Iqbal, Near Nipa Chowranghi, Karachi

Tel: 021-99244112-7, Fax: 021-99244118

Website: [www.stevta.gos.pk](http://www.stevta.gos.pk)

## **EOI / BID DOCUMENT**



### **PROVISION OF HEALTH INSURANCE FOR THE EMPLOYEES AND THEIR DEPENDENTS OF SINDH TEVTA**



**Sindh Technical Education &  
Vocational Training Authority (STEVTA)**  
ST-19, Block 6, Gulshan-e-Iqbal, near NIPA, Karachi.  
Phone No. 99244112-7 Fax No. 99244118  
Website: <http://www.stevta.gos.pk>



## **EXPRESSION OF INTEREST (EOI)**

Sindh TEVTA has been established by Government of Sindh as an autonomous body to manage and regulate Technical Education & Vocational Training in the Province of Sindh. The Authority intends to provide Health coverage to its employees. Sindh TEVTA invites "Expression Of Interest" Single Stage – Single Envelop" from leading Insurance companies registered with Income Tax and Sales Tax Department.

- Health coverage to about 2000 employee and his/her spouse, children and parents.
- Hospitalization with 30 days pre/post consultation, diagnostics & Medicine.
- Chronic disease medication.
- Consultation, investigation & physiotherapy.

RFP Document may be obtained on payment of Rs.2,000/- payable in the form of Bank Draft / Pay Order in favor of STEVTA (Non-refundable) and submit alongwith Bid Security @Rs.2% of offered value in shape of Bank Draft / Pay Order at the office of undersigned. Bid Documents can be obtain from November 1 to 20, 2015. Bids can be submitted on November 23, 2015 till 11:00am and will be open on the same date 11:30am at Conference Room, STEVTA HQ.

The Authority may cancel / reject all or any bid(s) as per provision in Sindh PP Rules.

**Director (Procurement)**

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## **1. Introduction**

### **1.1 Purpose of RFP**

Sindh TEVTA intends to insure in-patient treatment (hospitalization and maternity benefit) for its employees and their dependents (spouse, children & parents), from well-reputed Insurance Companies who qualify eligibility criteria.

### **1.2 The Overall Task to be performed by Responding Organization (RO)**

- a) Provide Medical Benefits in line with the Scope of Work at all Panel Hospitals across Sindh
- b) Provide guidance on health benefits to the employees / dependents.

### **1.3 Responsibility of STEVTA**

- a) STEVTA will provide the Scope of Work outlining the details of the employees and their dependents to be insured along with their individual benefit plans, medical benefit structure and details of the coverage required for the dependents / employees of STEVTA.
- b) STEVTA will bear cost of premium based on the details provided under scope of Work.

## **2. Scope of Work**

The Hospitalization and Maternity benefit must include the following coverage:

### **Hospitalization Benefit:**

The Hospitalization Benefit must cover all medical expenses incurred up to the specified limit while an insured is hospitalized due to illness, surgery or accident etc. Eligible medical expenses include:

- Daily Room Rent.
- I.C.U., C.C.U., & N.C.U Charges.
- Specialist (Consultation) / RMO Charges / Nursing Charges.
- Surgeon fee.
- Anesthetist fee / Anesthetist Charges.
- Operation Theatre Charges / Rehabilitation Charges.
- Medicines used during Hospitalization.
- Blood & Oxygen.
- Ventilators and Allied Services.
- Kidney Dialysis / Blood Transfusion.

- Cancer Treatment (Chemo / Radio therapy).
- Daycare surgeries / Investigations
- Diagnostic Investigations during hospitalization.
- MRI, CT Scan, Biopsy, Thallium Scan etc.
- Endoscopies.
- Open Heart Surgery and related surgeries.
- Organ Transplant.
- In-Hospital Consultation.
- Fractures and Lacerated Wounds.
- Local Ambulance Charges.
- Pre & Post Hospitalization

### **Maternity Benefit:**

This Maternity benefit must cover all expenses related to pregnancy and childbirth. Eligible expenses include:

- Obstetrician's Fee for Delivery & Consultation
- Labour Room / Operation Theatre Charges
- Diagnostic Tests & Medicines during hospital stay
- Baby's nursery care charges during mother's hospitalization
- Normal Deliveries, complicated deliveries, multiple births
- Miscarriages resulting into D&C
- Pre & Post Natal Expenses
- Circumcision Expenses

***\*Please do refer to Medical Benefit Structure, details of additional benefits to be covered.***

### **OPD Benefit (Optional):**

Please quote OPD benefit rates on optional basis for the employees.

#### **2.1 Age Limit**

- Employees, Spouses and parents to be covered up to 80 - 85 years of ages.
- Dependent Sons to be covered up to 25 years of age.
- Dependent Daughters to be covered till Marriage.

#### **2.2 Category & Approx. No. of Employees/Dependents to be covered**

DESCRIPTION	A	B	C	TOTAL
	BPS 18 & above	BPS 16 to 17	BPS 1 to 15	
Employees	06	34	1899	1939
Spouse	-	-	-	
Children	-	-	-	
Parents	-	-	-	
Total:-				

## Medical Benefit Structure:

PARENTS AGE WISE HOSPITALIZATION	Age limits
Please provide separate rates of parents according to their age limits.	50-60
	61-70
	71-on words

## Medical Benefit Structure:

CATEGORY-WISE HOSPITALIZATION	<u>A</u>	<u>B</u>	<u>C</u>
Maximum Annual Limit (Per insured)	Rs.500,000	Rs.350,000	Rs.250,000
Room & Board Limit	Private	Semi Private	General
<b>MATERNITY BENEFIT LIMIT</b>			
Normal	60,000	40,000	30,000
Caesarian / Multiple Births / Forcep	90,000	60,000	40,000

### 2.3 Additional Benefits To Be Covered:

- Pre – Existing conditions shall be fully covered up to 80 - 85 years of age and up to full limits. (100% Covered)
- Pre & Post Hospitalization covering Consultation, prescribed medicines and diagnostic tests within 30 days before and after hospital confinement with no financial sublimit.
- Day Care Surgeries / Procedure such as Lithotripsy, Excision Biopsy, Gastroscopy, Tonsillectomy / Adenoidectomy, Veins / Varicose, Non-malignant tumors / Abscess, , Herniorrhaphy, Appendectomy, Cataract Surgery, Angiography, Endoscopy.
- Specialized Investigations from OPD such as MRI / CT Scan / Thallium scan (covered even if no hospitalization takes place).
- Treatment of Cancer, (including Chemotherapy with Pre & Post hospitalization expenses of Chemotherapy).
- Coverage of Congenital birth defects for all under all the benefits.
- Coverage of Hepatitis B & C (Interferon Therapy from hospitalization limit).
- Emergency dental treatment due to accidental injuries (within 48 hours for pain relief only).
- Treatment of Fractures & Lacerated Wounds (within 24 hours).
- Local Road Ambulance (for Emergency Only).
- Emergency Room Treatment for Accidental Injuries.
- Pre & Post Natal Expenses shall be covered up to the maternity limit (subject to the availability of the Maternity Limit).
- Circumcision Charges shall be covered up to 10% or Rs.2,000/- whichever is low (subject to the availability of the Maternity Limit).
- Newly Born Babies shall be covered from the day 1.

**\*P.S. Any deviation on the above benefits may kindly be mentioned separately addressed to the RFP Coordinator.**

### 3 Response Process

#### 3.1. Definitions

The following definition will apply when used in this RFP and any contact resulting from this RFP.

Subscribing organization	Responding Organization
Sindh TEVTA, Karachi	The Organization submitting a Response to this RFP

#### 3.2. RFP Communications Contacts

All Communications regarding this RFP, whether written or oral, must be directed exclusively to the RFP Coordinator or designee. Any oral communications from the RFP Coordinator will be considered unofficial and non-binding on Govt. of Sindh (Sindh TEVTA). The RO should rely only on written statements issued by the RFP Coordinator.

Officer1: **Abid Altaf Mian**, Director Procurement  
Officer2: **Dr. Lubna Mehmood Rizvi**, Sr. Medical Officer  
Address: Sindh TEVTA  
ST-19, Block 06, Gulshan-e-Iqbal, Karachi  
Tel: 021-99244112-7  
Email: [info@stevta.gos.pk](mailto:info@stevta.gos.pk)

**\*The RO questions regarding this RFP must be in writing and addressed to the RFP Coordinator.**

#### 3.3. Bid Bond

A bid bond of 2% of the total amount quoted in the name of Sindh TEVTA, in the form of a Pay Order must be deposited and placed in the Financial Proposal Envelope. Proposal submitted without a bid bond will not be considered.

#### 3.4. Other Response Information

- **No Obligation to buy**  
Sindh TEVTA reserves the right to refrain from contracting with any RO. Neither the release of this RFP nor the execution of subsequent contacts obligates Sindh TEVTA to enter into contract with any Insurance Company. Sindh TEVTA additionally reserves the right to acquire services from other sources, at its sole discretion.
- **Cost of RFP Response Preparation**  
Sindh TEVTA will not be liable for any costs associated with the preparation of a RO's response to this RFP.

- **Response Property of Sindh TEVTA**

All information/material/services provided in response to this solicitation will become the property of Sindh TEVTA which has the right to use any of the ideas presented with such materials. Selection or rejection of a response does not affect this right.

## **4. General Terms & Conditions**

### **4.1. Bid Proposal**

Two separate sealed envelopes containing separate Technical and Financial Proposals and marked as such at the top. Technical Proposal to contain documentary evidence as specified in Eligibility Criteria. Financial Proposals to contain lump sum bid amount on the prescribed Form. Financial proposals of the bidders (containing Bid Form) whose technical proposals qualify will be opened in the presence of bidders at a date to be informed after scrutiny of technical proposal. The financial proposal of will be returned un-opened to the bidders where technical proposals do not qualify.

### **4.2. Validity of Proposal**

All proposal and price shall remain valid for 90 days from the date of submission of the proposal. However, the responding organization is encouraged to state a longer period of validity for the proposal.

### **4.3. Penalty Clause**

The contract to be executed between Sindh TEVTA and the selected RO will contain penalty clauses for delay in the services. STEVTA also reserves to seek other legal remedies if the insurer fails to provide the services as per schedule or if the insurer violates the terms and conditions of the contract.

### **4.4. Currency**

All currency in the proposal shall be quoted in Pakistan Rupees (PKR).

### **4.5. Contracting**

The selected R.O will submit Contract, as per draft to be provided by Sindh TEVTA within 7 days of issuance of PO

### **4.6. Government law**

This RFP and any contract pursuant to this RFP shall be governed by and construed in accordance with the SPPRA Rules.

### **4.7. Acceptance of Proposal**

Sindh TEVTA reserves the right not to accept the lowest evaluated or any proposal and to annul the bidding process without assigning any reason whatsoever.

## **5. Technical Proposals**

Sindh TEVTA will evaluate Technical Proposals using the following criteria. RO will be considered disqualified and will not be considered for tendering Process from the very outset, if not approved from SECP. Technical Proposal must contain documentary evidence as specified in Eligibility Criteria.



## 5.1 Eligibility Criteria for Technical Evaluation

The following criteria will be used to evaluate Technical Proposal. Please note that the Bidder must possess minimum AA rating by Pakistan Credit Rating Agency (PACRA), and certified Qualify for participating into ultimate phase of Financial Bid Opening:

- a) Health Insurance Portfolio as on December 31, 2014 or June 2015
- b) List of Corporate Clients in Health Insurance (attach list)
- c) Experience in the Field of health Insurance at least 7 years
- d) Hospitals on Panel all over Pakistan particularly Sindh
- e) Hotline – 24/7 Customer Medical cum Service
- f) Number of Doctors in Medical / Claim Department
- g) Panel of Doctors & Medical Claims Section of the Company
- h) Average Turn Over of Last 5 years
- i) Companies scoring minimum 70% marks in the technical evaluation criteria will be qualified for further proceeding.

Note: All documents should be signed & stamped.

## 5.2. General

The responding organization should provide the following:

- Company Profile
- Complete Details of the Registered Office
- Details of Authorized Person
- Bio-Data of Key Personnel
- Annual Audited Financial Statements
- Financial Soundness Proof
- Minimum 7 years Health Insurance Certificate covering minimum 5000 families per year.

## 5.3. Registration Documents

The R.O must be registered in Pakistan. The RO must submit the following documents:

- Covering letter
- Certificate of Registration
- Certificate of Incorporation
- Valid NTN Certificate
- Certificate of SRB Registration
- Valid Sales Tax Registration Certificate
- Listed with Major Stock Exchange
- AA Rating certificate - by Pakistan Credit Rating Agency (PACRA) and JCR

## 5.4. Affidavit

The RO must submit an Affidavit from CFO stating that the "firm has never been blacklisted".

## **5.5. Description of Benefit**

The RO will be required to submit the following details:

- Description of Benefit
- Procedure to avail benefits at Panel Hospital.
- Procedure to Reimburse Claim of Non-Panel Hospital
- Documents required for Non-Panel Hospital Claim
- List of Treatments / Procedures not covered (exclusions).

## **5.5. Turn Around Time (TAT).**

The Turn Around Time (TAT) will be as follows:

- Issuance of Health Cards / Credit Letter after the receipt of Health Declaration Forms within 7 working days.
- TAT for Reimbursement Claims after received of complete documents within 10 working days

## **5.6. Value Added Feature**

The selected bidder will be required to provide the following service with no additional cost.

- Provide Benefit Guidelines in English and Urdu for better understanding on Health Benefits
- Conduct Education Sessions (awareness sessions) for employees on Health Benefits.
- Web Portal Facility – to track claims status online.

## **6. Financial Proposal**

### **Performance Security**

Within (07) working days of the receipt of notification of award from the Purchaser, the Bidder shall furnish the performance Security @Rs.10% of the contract amount, in accordance with the conditions of Contract, in the Performance Security Form provided in the Bidding Documents or any other form acceptable to the Purchaser.

## Performance Security Form

Date: \_\_\_\_\_

Contract Name and No. : \_\_\_\_\_

\_\_\_\_\_

Managing Director  
STEVTA  
Karachi.

WHEREAS \_\_\_\_\_ (hereinafter "the Supplier") has undertaken, pursuant to Contract No. \_\_\_\_\_ dated \_\_\_\_\_, \_\_\_\_\_ to supply \_\_\_\_\_ (hereinafter "the Contract").

AND WHEREAS it has been stipulated by you in the aforementioned Contract that the Supplier shall furnish you with a security \_\_\_\_\_ issued by a reputable guarantor for the sum specified therein as security for compliance with the Supplier's performance obligations in accordance with the Contract.

AND WHEREAS the undersigned \_\_\_\_\_, legally domiciled in \_\_\_\_\_ (hereinafter "the Guarantor"), have agreed to give the Supplier a security.

THEREFORE WE hereby affirm that we are Guarantors and responsible to you, on behalf of the Supplier, upto a total of \_\_\_\_\_ and we undertake to pay you, upon your first written demand declaring the Supplier to be in default under the Contract, without cavil or argument, any sum or sums within the limits of \_\_\_\_\_ as aforesaid, without your needing to prove or to show grounds or reasons for your demand or the sum specified therein.

This security is valid until the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Name \_\_\_\_\_

In the capacity of \_\_\_\_\_

Signed \_\_\_\_\_

Duly authorized to sign the security for and on behalf of \_\_\_\_\_

Date \_\_\_\_\_.

**PRICE SCHEDULE**

**Name of Bidder: M/s.**

\_\_\_\_\_

**Amount of Bid (Net Premium) Rs.**

\_\_\_\_\_

**Premium Mode:**

\_\_\_\_\_

**Notes:**

1. The above rates quoted must include all taxes and charges, if any.
2. In addition to above also include detail of quotation, terms and conditions, procedures to avail benefits and list of exclusions.

**Authorized Signature:** \_\_\_\_\_

**Stamp:** \_\_\_\_\_

**Name & Designation:** \_\_\_\_\_

**Date:** \_\_\_\_\_