



Government of Pakistan  
Pakistan Digital Authority



Pakistan Digital Authority

(Established under the Digital Nation Pakistan Act, 2025)

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**Bidding Document**

**“Medical/Health Insurance for PDA Employees”**

**Tender ID: “PDA/TDRS/HR/MEDICAL INSURANCE/2025-26/04”**

**Issued at Islamabad**



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## 1. INTRODUCTION

Pakistan Digital Authority (PDA) serves as the enabling engine of Pakistan’s digital future. PDA is responsible for architecting, governing, and enabling the national digital transformation strategy and plans. The aim is to develop a forward-looking digital society, a vibrant digital economy, and a collaborative digital governance ecosystem in line with the national vision of Digital Nation Pakistan.

PDA invites sealed bids from well reputed providers for the provision of health/medical insurance for its employees and their dependents, registered with the Federal Board of Revenue (FBR) for Income Tax and Sales Tax (Relevant Authority) as per the scope of work detailed under terms of reference (ToR).

## 2. BIDDING PROCESS

- a. An open, competitive, and transparent bidding process in accordance with Public Procurement Regulatory Authority (PPRA) Ordinance, 2002, Rules, Regulations and Guidelines made thereunder shall be adopted.
- b. Final assignment award will be on the basis of combined technical and financial score in the following manner:

| PROPOSAL     | WEIGHT      |
|--------------|-------------|
| Technical    | 80%         |
| Financial    | 20%         |
| <b>TOTAL</b> | <b>100%</b> |

- c. A Single Stage, Two Envelopes procedure as per Rule 36 (b) of the Public Procurement Rules, 2004 (the “Rules”) shall be adopted.
- d. The bid/proposal to be attached on e-Pak Acquisition & Disposal System (e-PADS), comprising both the technical proposal and the financial proposal. **The bidder shall ensure that the attachment of bid/proposal on e-PADS is mandatory, failing which the bid shall be rejected.**
- e. Initially, only the “**TECHNICAL PROPOSAL**” uploaded on **e-PADS** shall be opened.
- f. The “**FINANCIAL PROPOSAL**” shall be open on **e-PADS** only after the bidder is announced as “technically responsive” i.e after evaluation of the technical bid.
- g. PDA shall evaluate the submitted technical proposals in accordance with the eligibility and evaluation criteria of this document without reference to the price.
- h. PDA shall evaluate the technical proposals in a manner prescribed in this document without reference to the price and shall reject any proposal which does not conform to the specified requirements.



- i. For any clarifications, it is mandated that bidders communicate exclusively through e-PADs. Any attempt to utilize alternative modes of contact will result in consequential actions, potentially including disqualification of the bidder(s).

### 3. ELIGIBILITY CRITERIA

Bidders must give compliance with the below mentioned clauses as these are mandatory for being eligible for the bidding process:

| Sr.No# | Attributes   | Ref. Page no. in proposal                   |
|--------|--|---|
| a.     | In the case of a company, submit a copy of the incorporation certificate issued from the Security and Exchange Commission of Pakistan (SECP) with a valid NTN.   |   |
| b.     | Valid Registration with FBR for Income Tax purposes and with the relevant Tax/Revenue Authority for Sales Tax purposes and must be on Active Taxpayer List (ATL).  |   |
| c.     | The Bidder shall provide an undertaking on letterhead that the Bidder has not been declared blacklisted by any Government/Semi-Government institutions.  |   |
| d.     | <b>Minimum of Ten (10) major hospitals and two (2) labs with advanced medical tests and imaging services on the panel with OPD credit facilities in Islamabad and Rawalpindi.</b><br><br><b><i>Note: Provide an attested/verifiable list with Technical Proposal) The Health Insurance Firms/Companies shall also provide POC for each Hospital for verification Purposes. The proposal shall be rejected if the bidder failed to provide such requirements.</i></b> |   |
| e.     | Only those Health Insurance Firms/Companies can participate in the bidding process who have minimum <b>AA+ and above</b> rated for medical/health insurance by PACRA/JCR-VIS. Latest certification issued by the relevant agency shall be attached. Outdated certification will result in rejection of the bid and will lead to disqualification.  |   |
| f.     | The Bidder must have a minimum of five (05) years of similar and verifiable work experience at the national level.   |   |
| g.     | Bid Declaration Form   |   |
| h.     | Bidder must have a fully Independent office(s) in Islamabad/Rawalpindi for claims settlements.   | Acknowledgement on Stamp paper is required. |



|    |   |  |
|----|---|--|
| i. | Applicants are required to state, in their proposals, the name, title, contact number, and email address of the applicant's authorized representative through whom all communication shall be directed until the process has been completed or terminated.                              |  |
| j. | The solution shall be offered in line with the provisions outlined in ToRs.<br><br><b>(The bidder shall tick the checkbox for every clause mentioned in the ToRs; failure to do so may result in rejection of the bid)</b> Conditional terms and conditions proposal shall be rejected. |  |

**PDA shall not entertain incomplete or partial bids. Shall lead to rejection as per PPRA rules 18.**

**Any forged or false information will result in disqualification.**

#### 4. INSTRUCTIONS /GENERAL CONDITIONS

- a. The bidder will be selected after an open, competitive, and transparent bidding process.
- b. Proposals shall be submitted in English/Urdu language.
- c. All prices mentioned in the Financial Proposal shall be in Pak Rupees (PKR) **and inclusive of all applicable taxes.**
- d. Each page of the Technical and Financial Proposal shall be signed by an authorized representative of the Bidder. The representative's authorization shall be confirmed by Letter of Authorization on official letter head of the bidder accompanying the proposal.
- e. For clarification on any item of this bidding document, the bidder may send queries on **e-Pads**, up till five (05) days before the proposal submission date.
- f. In case of any grievances against this bidding document, the bidder shall seek clarification within the first three (3) days of the publication of this tender. Beyond this period, no grievances regarding this document will be entertained. All grievances shall be recorded through e-PADS
- g. PDA may reject all bids or proposals at any time prior to the acceptance of a bid or proposal.
- h. At any time before the submission of proposals, PDA may, for any reason, whether at its own initiative or in response to a clarification requested by Bidder(s), amend the bidding document. Any amendment shall be issued in writing through addendum. However, main source of all such information will be e-PADS. The addendum shall be considered part of the RFP/TOR and will be binding on the Bidders.



- i. The bidders shall bear all costs associated with the preparation and submission of their respective bids and PDA will, in no case, be responsible or liable for those costs, regardless of the conduct or outcome of the bidding process.
- j. Bidders are under obligation to read and understand complete information package/bid documents, PDA shall not be responsible towards the Bidders for any of their claim or complaint which may arise as a result of non-reading or misreading the bid documents/information package by Bidders.
- k. PDA is the originator of information package/bidding documents, any clarification or interpretation communicated by PDA, whether in response of a query or otherwise, shall be deemed final, conclusive and will remain unquestioned.
- l. Most Advantageous Bidder will be issued Letter of Intent (LoI) and it shall submit Letter of Acceptance (LoA). Upon submission of LoA by Most Advantageous Bidder, Contract will be signed for a period of one (01) year, which may be extended with mutual consent for a period decided mutually by the parties.
- m. PDA may reject all bids or proposals at any time prior to the acceptance of a bid or proposal. PDA shall, upon request, communicate to any Bidder who submitted a bid or proposal, the grounds for its rejection of all bids or proposals, But PDA is not required to justify those grounds as per Rule 33 of the Rules.
- n. PDA requires that Bidders observe the highest standard of ethics during the procurement and execution of such contract. In pursuit of this policy, the PDA:
  - I. Defines, for the purposes of this provision, the terms set forth below as follows:
  - II. "corrupt practice" is the offering, giving, receiving or soliciting, directly or indirectly, of anything of value to influence improperly the actions of another party;
  - III. "fraudulent practice" is any act or omission, including a misrepresentation, that knowingly or recklessly misleads, or attempts to mislead, a party to obtain a financial or other benefit or to avoid an obligation;
  - IV. "collusive practice" is an arrangement between two or more parties designed to achieve an improper purpose, including to influence improperly the actions of another party;
  - V. "coercive practice" is impairing or harming, or threatening to impair or harm, directly or indirectly, any party or the property of the party to influence improperly the actions of a party;
  - VI. "obstructive practice" is deliberately destroying, falsifying, altering or concealing of evidence material to the investigation or making false statements to investigators in order to materially impede PDA investigation into allegations of a corrupt, fraudulent, coercive or collusive practice; and/or threatening, harassing or intimidating any party to prevent it from disclosing its knowledge of matters relevant to the investigation or from pursuing the investigation.



- o. Only suppliers/service providers who are on Active Taxpayers List (ATL) of FBR are eligible to supply goods/services to PDA. Bids/Proposals/applications of all those bidders/service providers who are not found on ATL on the date of bid opening shall be rejected.
- p. In the event that there are more than one qualified bidder i.e. they have quoted equal prices in financial bids, the tied qualified bidders shall be notified by PDA and they will submit revised financial proposals in compliance with the bidding document. The revised bid amount must be either equal to the original submitted bid or less than the previous bid amount. The revised financial proposal shall be submitted in a sealed envelope that is securely closed.
- q. In case, the most advantageous bidder, at any stage prior to the execution of the contract fails for timely completion of all applicable processes, or the PDA Procurement Committee is not satisfied from the provided services, PDA reserves the right to obtain the services from second most advantageous bidder. In case the second most advantageous bidder fails to provide the required services or the PDA Procurement Committee is not satisfied from the provided services, the PDA reserves the right to obtain the services from third most advantageous bidder.
- r. For any clarifications, it is mandated that bidders communicate exclusively through e-PADs. Any attempt to utilize alternative modes of contact will result in consequential actions, potentially including disqualification of the bidder(s).
- s. if the medical insurance company found at any stage that the services provided are through a third-party and not by the actual insurance provider, strict actions may be taken. This could result in termination of the contract, recovery of premium issued, confiscation of the bank guarantee, and blacklisting of insurance company.
- t. **In case of any technical difficulty in using EPADS prospective bidders may contact PPRA at <https://www.ppra.org.pk/>**

**5. Evaluation Criteria:**

- a) PDA will evaluate the proposals on the basis of their compliance with the bidding document and evaluation criteria, and the point system as specified below in Table I.
- b) A proposal shall be rejected during technical evaluation if it does not comply with the bidding document or if it fails to achieve the minimum score as indicated in Table I below:



Table I- Evaluation Criteria

| Evaluation Criteria  |  |            |                       |
|--|--|------------|-----------------------|
| S/No   | Description  | Weight     | Reference in Page No. |
| 1  | <b>Experience of Firm / Company</b><br>>5=6 years 12 Marks<br>>6=7 years 14 Marks<br>>7=8 years 16 Marks<br>>8=9 years 18 Marks<br>>9 years 20 Marks   | 20         |                       |
| 2  | <b>Currently Providing Group Medical/Health Insurance to Public/ Private Limited, Public-Sector Companies</b><br>02-05 Clients 05 Marks<br>06-10 Clients 10 Marks<br>11-15 Clients 15 Marks<br>>15 Clients 20 Marks<br><b>(Provide attested list with Technical Proposal)</b>  | 20         |                       |
| 3  | <b>Currently Providing Group Medical/Health Insurance to International NGO</b><br>02-05 Clients 05 Marks<br>06-10 Clients 10 Marks<br>11-15 Clients 15 Marks<br>>15 Clients 20 Marks<br><b>(Provide attested list with Technical Proposal)</b><br><b>Note: For International NGO, the bidder shall attach at least one (01) overseas address for each INGO mentioned. Fails to which the mentioned INGO will not be counted.</b> | 20         |                       |
| 4  | <b>OPD Credit facility in Islamabad/Rawalpindi (List of Hospitals with credit Facility currently under insurance panel)</b><br>10-15 OPD Credit Facility 05 Marks<br>16-20 OPD Credit Facility 10 Marks<br>21-25 OPD Credit Facility 15 Marks<br>26-30 OPD Credit Facility 20 Marks  | 20         |                       |
| 4  | <b>Web portal to access Employees record (5 Marks)</b><br><b>(Provide evidence)</b>  | 5          |                       |
| 5  | Any salient features offered to PDA Employees which shall not affect or increase the premium <b>(Relative Marking)</b>   | 15         |                       |
| <b>Total Marks</b>   |  | <b>100</b> |                       |
| <b>Minimum Score Required for Technical Qualification (80 marks)</b> |  |            |                       |

- c) A proposal shall be rejected during technical evaluation if it does not comply with the RFP and ToRs or if it fails to achieve the minimum score.

For technically responsive bidder, the final scoring shall be done as per following:

- a. Technical Score (St) shall be calculated as follows:



$$St = \frac{\text{Technical Score Obtained by Bidder}}{\text{Total Technical Score}} * 80$$

- b. Financial Score (Sf) shall be calculated as follows:

$$Sf = \frac{\text{Lowest Bidder's Cost}}{\text{Bidder's Cost}} * 20$$

- c. Total Score shall be the sum of both technical score and financial score:

$$\text{Total Score, ST} = St + Sf$$

All technically qualified bidders will be ranked based on combined technical and financial scores.

## 6. PERFORMANCE GUARANTEE

- a. Performance Guarantee equivalent to ten percent [10%] in the shape of irrevocable Bank Guarantee will be mandatorily submitted by the Most Advantageous Bidder. In case of non-submission by the Most Advantageous Bidder within the stipulated time as mentioned in the Letter of Intent (LoI), PDA shall proceed accordingly.
- b. The Performance Guarantee submitted by Most Advantageous Bidder shall remain valid for a whole term of the contract from the date of signing of the contract or any other extended period, as the case may be.

## 7. TECHNICAL PROPOSAL

Technical Proposals to be uploaded by the applicants shall be in compliance with the requirements laid down in the bidding document and ToRs.

The Technical proposal shall be clearly marked with the following:

### ***“TECHNICAL PROPOSAL”***

The technical proposal shall include:

- a. A cover letter from the head of the Firms / Companies or an authorized representative of the applicant entailing the objectives and the executive summary.
- b. All the documents mentioned in the bidding document including the bid declaration form shall be part of the technical proposal except the financial proposal.
- c. Compliance against each clause and sub-clause of the Bidding Document and ToRs must be attached. Compliance shall be given by signing & stamping each page of the bidding document by authorized representative of the bidder (Firm/Company)



- d. Additional Information (If Any)

## 8. FINANCIAL PROPOSAL

The Financial Proposal may include the following specimen:

| Description                        | Total Financial Bid including all applicable taxes |
|------------------------------------|--|
| Health Insurance for PDA Employees |  |

- b. A lumpsum cost shall be provided as given in the above table. **Conditional bids shall be rejected.**
- c. The proposal must remain valid for a period of 180 days after the bid submission date.
- d. Taxes will be deducted at the time of the payment as per government rules and regulations.
- e. All payments will be subject to the active taxpayer status of the service provider at the time of the release of payment.
- f. The service provider shall pay all such taxes, Stamp duty or other duties, fees, and other impositions levied under the applicable law, the amount of which is deemed to have been included in the financial bid.
- g. The bidder shall mention the amount in the financial proposal, which shall be inclusive of all applicable taxes, levies, duties, and fees as per prevailing laws.
- h. All prices shall be in Pak Rupees.

## 9. SUBMISSION, OPENING, AND RECEIPT OF PROPOSALS

- a. The proposals (Technical and Financial Proposal) shall be attached and uploaded on e-PADS.
- b. Only the successful bidder is required to furnish hard copies of all documents submitted electronically via e-PADS to PDA prior to the contract being awarded.
- c. Technical and Financial proposals must be attached on e-PADS on or before **12:00 pm. (PST), 22<sup>nd</sup> April 2026.**
- d. Proposals shall be opened on the same day i.e., **12:30 PM. (PST), 22<sup>nd</sup> April 2026 (PST),** in the presence of all the applicants who chose to be present.



## 10. AWARD OF CONTRACT

- a. The Bidder (most advantageous bid), if not in conflict with any other law, rules, regulations, or policy of the Federal Government shall be awarded the contract, within the original or extended period of bid validity.
- b. A letter of Intent (LOI) will be issued to the Most Advantageous Bidder who shall submit a Letter of Acceptance (LOA) within the period stipulated under the LOI. The Bidder, to whom LOI has been issued, will have to submit the Performance Guarantee within prescribed time under LOI.
- c. After submission of the Letter of Acceptance and Performance Guarantee it is expected that the Contract will be signed within minimum possible time after receipt of Performance Guarantee by PDA, failing which PDA may proceed accordingly.
- d. In case of delay in submission of Performance Guarantee, PDA shall have the right to extend the timeline or accept any other instrument till the submission of Performance Guarantee (Bank Guarantee).
- e. The initial term of the contract shall be one year, which may be extended for another term as may be mutually agreed between the parties.

## 11. PAYMENT TERMS

The payment shall be made as per following details:

| PAYMENT TRIGGER           | PAYMENT DUE |
|---------------------------|-------------|
| After Signing of Contract | 100%        |

### Liquidated Damages:

- a. Delay damages @ 3% per day of the amount of delayed claims.
- b. Delay damages @ 3% per day of partial amount of claims which have been rejected without any solid grounds acceptable to both parties.
- c. The amount shall be deducted from performance guarantee.



## Form of Bid-Securing Declaration

*[The Bidder shall fill in this Form in accordance with the instructions indicated.]*

To: *[complete name of Procuring Agency]*

We, the undersigned, declare that:

We understand that, according to your conditions, Bids must be supported by a Bid- Securing Declaration.

We accept that we will be blacklisted and henceforth cross debarred for participating in respective category of public procurement proceedings for a period of (not more than) six months, if fail to abide with a bid securing declaration, however without indulging in corrupt and fraudulent practices, if we are in breach of our obligation(s) under the Bid conditions, because we:

- (a) have withdrawn our Bid during the period of Bid validity specified in the Letter of Bid; or
- (b) having been notified of the acceptance of our Bid by the Procuring Agency during the period of Bid validity, (i) fail or refuse to sign the Contract; or (ii) fail or refuse to furnish the Performance Security (or guarantee), if required, in accordance with the ITB.

We understand this Bid Securing Declaration shall expire if we are not the successful Bidder, upon the earlier of (i) our receipt of your notification to us of the name of the successful Bidder; or (ii) twenty-eight days after the expiration of our Bid.

Name of the Bidder\_\_

Name of the person duly authorized to sign the Bid on behalf of the Bidder\_\_\_\_\_

Title of the person signing the Bid\_\_

Signature of the person named above\_\_\_\_\_

Date signed\_\_day of\_, \_\_\_\_\_



**Terms of Reference (TOR):**

1. Claims shall be reimbursed as per PDA's specified limits for each category. The defined limits must be strictly adhered by the insurance company.
2. The Insurance company will strictly adhere to the specifics of the limits outlined below:
  - 2.1. The OPD limits provided by the insurance company shall cover all types of medical treatments, such as (but not limited to) Homeopathy, Allopathy, Hikmat, Acupuncture, Hijama, Physiotherapy, and Psychotherapy (registered practitioner), without any allocation of percentage or capping to any particular type.
  - 2.2. The limits of the In-Patient Department (IPD) shall be available for all types of medical treatment that require admission and discharge, day-care procedures, specialized investigations, and the Emergency Room (ER). Please find the exhaustive list attached in MI Limits file (but not limited to). Emergency cases will not be charged to the OPD, instead will be covered from IPD cover in all instances.
  - 2.3. The IPD limit of PKR 650,000 is applied per ailment, allowing a separate PKR 650,000 limit for each distinct illness. This benefit continues for as many unrelated ailments as may occur for the individual, with no time limit involved per ailment.
  - 2.4. There will be no capping on any medical procedures or visual care including cataract surgery/phaco cover (Doctor recommended IOL) and LASIK, dental care, diagnostic tests, etc. within the OPD and IPD limits.
  - 2.5. The limits of OPD shall also be available for all types of pandemic diseases such as Covid-19, etc., online consultation, and home sampling without assigning any percentage of limits to any type.
  - 2.6. Complete dental care and vision care shall also be covered in the OPD and IPD limits respectively without assigning any percentage of limits. LASIK will be allocated to IPD limits only.
  - 2.7. Pre-existing maternity cases shall also be covered in the maternity limits. Insurance coverage to neonatal babies shall be provided as per the assigned OPD & IPD limits of the employee. New born babies will be covered from the date of birth. Pre-natal and post-natal will be fully covered.



- 2.8. In case of injuries to the covered lives insured by the Insurance Company due to security forces/LEAs (including Police) operations or due to terrorism shall be covered as per assigned limits. [REDACTED]
- 2.9. In the event that a room falling within the Medical Insurance (MI) entitlement is unavailable, the next best available room—regardless of its designated name but equivalent to a private room—shall be considered applicable. [REDACTED]
3. The insurance company, not PDA Company, will have sole responsibility for settling credit bills or expenses of panel hospitals that are not covered under the policy or fall under the prescribed exclusions of the policy, or exceed the limit of the policy. [REDACTED]
4. Ambulance charges shall be covered by hospitalization benefits. [REDACTED]
5. The Insurance Company shall not refuse any admission request from panel hospital, where the attending specialist doctor or doctor on duty has in writing intimated that the concerned patient needs to be admitted for treatment. However, in case any employee insists to get himself or his/her dependent patient admitted (where the admission is not required), the statement of attending specialist doctor only regarding hospitalization shall be considered for final decision/approval. [REDACTED]
6. The insurance company will use every means to verify the genuineness of the claim. Any claim (OPD/IPD) reimbursed by the Insurance company, later found to be fake will be recovered from the insurance company. [REDACTED]
7. PDA employees are to be provided with international coverage (including OPD, IPD, and Maternity) within the designated limits as and when required. [REDACTED]
8. The following are the credit and panel hospital requirements:
- 8.1. A robust network of more than 200 above-IPD credit panel hospitals across the country. [REDACTED]
- 8.2. At least 20+ Hospitals on panel with OPD credit facility in Islamabad and Rawalpindi along with a minimum of 1 hospital each in Lahore, Karachi, Peshawar, Faisalabad, Multan, for PDA Employees. [REDACTED]
9. The Insurance Company is required to adhere to the PDA internal HR Standard Operating Procedures (SOPs) for medical processing, as defined and updated. These procedures include:
- 9.1. Submission of a single medical claim form for each employee on a monthly basis, covering all medical expenses incurred by the employee and their family during the month. [REDACTED]
- 9.2. Issuance of medical insurance cards to employees within the first week of contract signing. PDA will not be responsible for any inaccuracies in printing information on the medical insurance card. Separate cards for parents and individuals. [REDACTED]



- 9.3. Medical Insurance company shall provide **monthly** employee-wise status of claims and availed limits (OPD + IPD) along with [redacted] itemized bills shared by the hospitals and the IBFT report clearly showing the date of bank transfer of the amount for employees in case of reimbursement of medical claims.
- 9.4. Medical Insurance Company shall provide a monthly employee-wise status limit for all OPD expired cases. [redacted]
- 9.5. Medical Insurance Company shall depute a focal person who shall visit the PDA Co. office on a quarterly basis to resolve routine claim objections/queries of employees. Such a person shall also be available for any pre / unscheduled meeting at the specific request of PDA Co.
- 9.6. Any other updates or changes in the SOPs. [redacted]
10. The following are the details regarding reimbursement of medical claims:
- 10.1. All claims submitted by PDA shall be settled (i.e., money transferred to the bank accounts) within 10 working days. [redacted]
- 10.2. The Medical Insurance Company will entertain claims up to six months old. [redacted]
- 10.3. Failure to comply with any clause of the agreement during the contract term may result in PDA claiming damages. Such damages may be included, but are not limited to:
- 10.3.1. Delay damages at a rate of 3% per day for the amount of delayed claims. [redacted]
- 10.3.2. Delay damages at a rate of 3% per day for partial amounts of claims that have been rejected without any acceptable grounds for both parties. [redacted]
- 10.3.3. The Insurance Company shall ensure that all kind of approvals to panel hospitals in respect of Insurance coverage are given within 30 minutes, to the person or dependents as and when demanded by hospital, so the admitted patients and their dependents should not suffer due to non-availability of full approval or delayed approvals. Every delay beyond 30 minutes will be subject to a penalty of 3% of the premium per head. The penalty will be deducted from the next quarter premium. [redacted]
11. The selected insurance company will not demand a questionnaire for existing and future employees for pre-existing conditions. [redacted]
- 11.1. Premiums for new joiners and employees leaving in the middle of the period of contract will be prorated and adjusted in the quarterly addition and deletion invoices. [redacted]
12. A gel amount of Rs. 3,250,000/- (Three million, two hundred fifty thousand) shall be established and utilized at the discretion of the PDA management during the insurance period for major cases/minor cases/OPD limit expiry/IPD limit expiry/other purposes for employees/spouse/children/parents. [redacted]



13. The eligibility criteria for the medical insurance company are as follows:

13.1. Only insurance companies with independent fully functional offices in Islamabad/Rawalpindi for claim processing and all types of correspondence are eligible. These offices must have representatives with full authority to make decisions on the settlement and processing of medical claims. PDA will not be responsible for any correspondence, dealings, or settlements with the insurance company's offices in any other city. [REDACTED]

13.2. Insurance companies with an online web-based HR portal and a functional mobile application (Android/iOS) that clearly show the OPD and IPD limits status of each employee, digital insurance card, and categorized past and present claims will be preferred. [REDACTED]

13.3. To be eligible to apply, insurance companies must provide a certificate demonstrating the recommendation of their medical contract (in terms of service quality) with the last two organizations they have served. [REDACTED]

14. The medical policy requirements include the following:

14.1. Any exclusion list or any terms and conditions that are in contradiction with the TORs and other conditions of the bid document shall not be considered. The provisions of the TORs and Bid Documents shall prevail. [REDACTED]

14.2. In the absence of specific provisions in the contract and policy, past practices must be observed. [REDACTED]

14.3. Coverage for congenital and hereditary diseases, as well as any sick infants, is mandatory. [REDACTED]

14.4. The policy must include hormonal therapy for the prevention of dread diseases. [REDACTED]

14.5. Coverage for all health and safety-related vaccinations is required. [REDACTED]

14.6. All over-the-counter medicines and medical apparatuses must be covered. [REDACTED]

15. A mandatory compliance statement showing the bidder's compliance with all the above shall be submitted along with the bids. [REDACTED]

16. Any amendment to the contract shall be made with the consent of both parties. [REDACTED]

17. 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 regard. A non-panel hospital /clinic must comprise all necessary medical/ surgical facilities and standards of billing and record keeping constituting a hospital/ clinic and duly registered with local health authority. A list of black-listed hospitals will be shared and updated periodically by the insurance company. [REDACTED]



**Acceptance of above ToRs:**

Authorized signatures: \_\_\_\_\_

Company Stamp: \_\_\_\_\_

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



| Benefits Structure for Medical Insurance of Pakistan Digital Authority Employees.   |       |   |              |
|---|-------|---|--------------|
| Benefits Description  | Plans | A   | B            |
|   |       | <b>Hospitalization Expense Benefit:</b>   |              |
| <b>Room charges per day:</b>  |       | Private Room  | Semi-Private |
| <b>Limit Per Annum, Per Ailment, Per Insured Person : (Total Room Rent, Hospital/Surgical Expenses Per Annum, Per Ailment &amp; Per Insured)</b><br>(Total Room Rent, Hospital/Surgical Expenses Per Annum, Per Ailment & Per Insured)<br><b>Sublimit:</b> Consultation, prescribed Lab Test & Medicines, cover for 90 days before and after the hospitalization, subject to the availability of the basic hospitalization limit. |       | 650,000   |              |
| <b>Day-care surgeries and specialized investigations</b> in outpatient settings are also covered under the basic hospitalization limit. Please refer to the sheet "Day-care, Special Investigation" in this file for an exhaustive list but not limited to it.  |       |   |              |
| <b>Maternity Expense Benefit:</b>   |       |   |              |
| * Annual Limit for all pregnancy-related diagnostic tests, consultations, and hospitalization (Pre & Post Pregnancy OPD, Circumcision, NICU, sick infant, psychotherapy covered)  |       | 275,000   |              |
| * Cesarean Section / Multiple Births (Pre & Post Pregnancy OPD, Circumcision, NICU, sick infant, psychotherapy covered)   |       | 350,000   |              |
| <b>Medical top up layer (Gel)</b>   |       |   |              |
| Gel amount of Rs. 3,250,000/- (Three million Two hundred thousand only) will be used on the sole discretion of PDA Management during the insurance period for (but not limited to) major cases/minor cases/OPD limit expiry/IPD limit expiry/Dread Diseases/Maternity/Special Investigations/Day-care procedures, etc for employees, spouse, children and parents.  |       | <b>Rs. 3,250,000/- (Three million Two Hundred Fifty Thousand only) For any medical facility on discretion of PDA. Remaining gel amount will be carried forward in next year insurance if the contract is extended for next year with mutual consent or reimbursed if the contract is not renewed.</b> |              |
| <b>Out-Patient Expense Benefit :</b>  |       |   |              |
| Total Annual OPD Limit reimbursable to Married Employee (for all OPD treatments including all health safety related vaccinations e.g. Covid, Typhoid and others) Per Family per Year  |       | 260,000   |              |
| Total Annual OPD Limit reimbursable to Single Employee (for all OPD treatments including all health safety related vaccinations e.g. Covid, Typhoid and others) Per Individual Per Year   |       | 156,000   |              |

**Category A**

Chairpersons, Members, Chief Officers,  
Exe.Directors, Directors, Managers,  
Associates

**Category B**  
(Driver, Office Boys)



| <b>List of Day Care Procedures and Specialised Investigations (but not limited to)</b> |  |                           |               |
|--|--|---------------------------|---------------|
| <b>S. No.</b>  | <b>Procedure</b>   | <b>Classification</b>     | <b>Status</b> |
| 1  | Intra ocular lens implant (Both unifocal and multifocal lens as suggested by doctor) | Daycare procedure         | Covered       |
| 2  | Angiography / Angioplasty  | Specialized Investigation | Covered       |
| 3  | Dental Care  | Specialized Investigation | Covered       |
| 4  | Pre&Post Hospitalization   | Specialized Investigation | Covered       |
| 5  | Consultation Charges   | Specialized Investigation | Covered       |
| 6  | MRIs   | Specialized Investigation | Covered       |
| 7  | Thallium Scan  | Specialized Investigation | Covered       |
| 8  | Dialysis, Cataract surgery   | Specialized Investigation | Covered       |
| 9  | Stitches due to accidents  | Specialized Investigation | Covered       |
| 10   | Vision Care  | Specialized Investigation | Covered       |
| 11   | Diagnostic Tests   | Specialized Investigation | Covered       |
| 12   | Mental Ailment, etc  | Specialized Investigation | Covered       |
| 13   | CT-Scans   | Specialized Investigation | Covered       |
| 14   | Endoscopy  | Specialized Investigation | Covered       |
| 15   | Cataract Surgery   | Daycare procedure         | Covered       |
| 16   | Angiography  | Specialized Investigation | Covered       |
| 17   | MRI  | Specialized Investigation | Covered       |
| 18   | CT Scan  | Specialized Investigation | Covered       |
| 19   | Chemotherapy   | Daycare procedure         | Covered       |
| 20   | Radiotherapy   | Daycare procedure         | Covered       |
| 21   | Dialysis   | Daycare procedure         | Covered       |
| 22   | Treatment of Fractures & Lacerated Wounds  | Daycare procedure         | Covered       |
| 23   | Hemmeroidectomy  | Daycare procedure         | Covered       |
| 24   | Septoplasty  | Daycare procedure         | Covered       |



|    |   |                           |         |
|----|---|---------------------------|---------|
| 25 | Circumcision                            | Daycare procedure         | Covered |
| 26 | Lymph Node Biopsy                       | Daycare procedure         | Covered |
| 27 | Hypospadias Surgery                     | Daycare procedure         | Covered |
| 28 | Fissure & Fistula Surgery               | Daycare procedure         | Covered |
| 29 | Sebaceous Cyst Excision                 | Daycare procedure         | Covered |
| 30 | Musle Biopsy                            | Specialized Investigation | Covered |
| 31 | Kidney Biopsy                           | Specialized Investigation | Covered |
| 32 | SMR                                     | Daycare procedure         | Covered |
| 33 | Lithotripsy                             | Daycare procedure         | Covered |
| 34 | Endoscopy                               | Daycare procedure         | Covered |
| 35 | Colonoscopy                             | Daycare procedure         | Covered |
| 36 | Gastrosocopy                            | Daycare procedure         | Covered |
| 37 | Dilation & Cutterage                    | Daycare procedure         | Covered |
| 38 | Partial Mastectomy                      | Daycare procedure         | Covered |
| 39 | Tosillectomy/Adenoidectomy              | Daycare procedure         | Covered |
| 40 | Veins/Vericose (Cutting Operation Only) | Daycare procedure         | Covered |
| 41 | Non Malignant Tumors/Abcess             | Daycare procedure         | Covered |
| 42 | Cholecystectomy                         | Daycare procedure         | Covered |
| 43 | Herniorraphy                            | Daycare procedure         | Covered |
| 44 | Appendectomy                            | Daycare procedure         | Covered |
| 45 | Thallium Scan                           | Specialized Investigation | Covered |
| 46 | ERCP                                    | Specialized Investigation | Covered |
| 47 | Bronchoscopy                            | Daycare procedure         | Covered |
| 48 | CT Angiogram                            | Specialized Investigation | Covered |
| 49 | Angioplasty                             | Daycare procedure         | Covered |
| 50 | Cystoscopy                              | Daycare procedure         | Covered |
| 51 | Dex Scan                                | Specialized Investigation | Covered |
| 52 | Optical Coherence Tomography - OCT      | Specialized Investigation | Covered |
| 53 | Fundus Florescence Angiography          | Specialized Investigation | Covered |
| 54 | Thyroid Scan                            | Specialized Investigation | Covered |
| 55 | Pet Scan                                | Specialized Investigation | Covered |
| 56 | Band Ligation                           | Daycare procedure         | Covered |
| 57 | Sclerotherapy                           | Daycare procedure         | Covered |



|    |                                       |                              |         |
|----|---------------------------------------|------------------------------|---------|
| 58 | Avastin Injection                     | Daycare procedure            | Covered |
| 59 | Lucentis Injection                    | Daycare procedure            | Covered |
| 60 | Excision Biopsy of a tissue and organ | Daycare procedure            | Covered |
| 61 | Cleft Lip and Palate                  | Daycare procedure            | Covered |
| 62 | Dermoid Cyste of Skull                | Daycare procedure            | Covered |
| 63 | Lipoma excision                       | Daycare procedure            | Covered |
| 64 | Ganglion                              | Daycare procedure            | Covered |
| 65 | POP                                   | Daycare procedure            | Covered |
| 66 | MUA                                   | Daycare procedure            | Covered |
| 67 | Hydrocele                             | Daycare procedure            | Covered |
| 68 | Ingrowing toe nail                    | Daycare procedure            | Covered |
| 69 | Debridement under GA                  | Daycare procedure            | Covered |
| 70 | Glaucoma surgery                      | Daycare procedure            | Covered |
| 71 | Macular Degeneration                  | Daycare procedure            | Covered |
| 72 | Phaco surgery                         | Daycare procedure            | Covered |
| 73 | Pain free Delivery-Injection Epidural | Hospitalization for Delivery | Covered |
| 74 | Removal of stricture                  | Daycare procedure            | Covered |
| 75 | OCT                                   | Specialized Investigation    | Covered |
| 76 | Radiofrequency Ablation (RFA)         | Daycare procedure            | Covered |
| 77 | FFA                                   | Specialized Investigation    | Covered |
| 78 | Laparoscopic Cystectomy               | Daycare procedure            | Covered |
| 79 | Cyst ablation or fenestration         | Daycare procedure            | Covered |
| 80 | Investigative/Surgical laparoscopy    | Daycare procedure            | Covered |
| 81 | NCS                                   | Specialized Investigation    | Covered |
| 82 | EMG                                   | Specialized Investigation    | Covered |
| 83 | Ultrasound True Cut Needle Biopsy     | Specialized Investigation    | Covered |
| 84 | Liver Fibroscan                       | Specialized Investigation    | Covered |



Government of Pakistan  
**Pakistan Digital Authority**

