

**Points requiring clarifications in relation to Request for Proposals No. 64 “Group Health Insurance for Karandaaz Employees”**

<b>S#</b>	<b>Clarification/ Information Required</b>	<b>Comments</b>
1	Existing / Previous Insurance company Name	Confidential.
2	Claim experience provided by insurance company	Please refer to Annex A.
3	Kindly share your previous year loss history	Please refer to Annex A.
4	Please share Claim History	Please refer to Annex A.
5	Number & Amount of IPD Claim	Please refer to Annex A.
6	Number & Amount of MATERNITY Claim	Please refer to Annex A.
7	Number & Amount of OPD Claim	Please refer to Annex A.
8	Room Rent	Private/Private Plus/VIP Room. No limit on room rent.
9	Group Excess Pool Premium Basis or ASO Basis	Premium basis.
10	Proper Benefit structure with Room rent	Private/Private Plus/VIP Room. No limit on room rent.
11	Proper claims detail report with (Confinement date, Patient detail, paid/ pending etc.) preferably of 2 to 3 years	Please refer to Annex A. Details regarding confinement date/patient are confidential. All details mentioned in claim experience are paid claim.
12	Per day room limit /Entitlement has not been mentioned in TOR and please advise the same.	No limit on per day room rent. Entitlement: Private/Private Plus/VIP Room.
13	Share Claim experience with disease description wise.	Please refer to Annex A. Diseases vary for each claim. For details Please refer to TORs for coverage requirement.

“The End”

## **Annex A**

### **Claim Experience Year 1:**

<b>Claim Type</b>	<b>Estimate Total (PKR)</b>
OPD	3536797
Maternity	316367
IPD	1833718

### **Claim Experience Year 2:**

<b>Claim Type</b>	<b>Estimate Total (PKR)</b>
OPD	4979842
Maternity	205845
IPD	2163866

### **Claim Experience Year 3:**

*These are the amounts till date i.e. 10 Oct 2019.*

<b>Claim Type</b>	<b>Estimate Total (PKR)</b>
OPD	3434796
Maternity	278084
IPD	1272712