HUMANITY & INCLUSION
Bangladesh

ICFT for Group Life and Medical Insurance

Outpatient, Hospitalization & Maternity Coverage for National Staff of HI Bangladesh

Reference: ICFT REF: B51-DHAK-LOG-2026/02

FD Ref: FD-DHAK-00705

Issue date: Tuesday, 28 October 2026

Deadline: Sunday, 22 November 2026, 11:59 PM

Pre-bid meeting: Monday, 09 November 2026, 11:00 AM

Online: https://meet.google.com/jbi-gzkv-odo

Physical: HI Country Office, Gulshan, Dhaka

Purchaser identification

Name: Humanity & Inclusion (legal name: Handicap International Federation)

Address: Bangladesh Country Office, House 3/A, Road 36, Gulshan-2, Dhaka-1212

Contact details: logistics@bangladesh.hi.org

Website: www.hi.org

Handicap International is an independent and impartial international aid and development organisation working in situations of poverty and exclusion, conflict and disaster. Working alongside people with disabilities and vulnerable groups, it takes action and provides testimony in order to meet their basic needs, improve their living conditions and promote respect for their dignity and their fundamental rights. Handicap International is a non-profit organisation with no religious or political affiliation. It operates as a federation made up of a network of associations which provide human and financial resources, manage projects and implement its actions and campaigns. Handicap International is present in Bangladesh since 1997.

1. Contract description

Handicap International – Humanity & Inclusion (HI) in Bangladesh currently provides life and medical coverage to its national staff through its own medical coverage policy.

HI Bangladesh is now looking for an established insurance company to provide its national staff with **Group Life Insurance** and **Medical Insurance (Outpatient, Hospitalization and Maternity)** through a **yearly agreement**. The coverage required is:

Type of insurance	Coverage required
A. Group Term (GT) Life Insurance (HI staff only)	Basic: Group Term Life Insurance Supplementary: Accidental Death (AD&D); Permanent and Partial Disability (PPD); Critical Illness (CI)
B. Medical Insurance (HI staff and their dependants)	Hospitalization coverage Out-patient medical coverage without any sub-limit, including dental and optical treatment Maternity benefit

The agreement will be for an initial period of **one (1) year**, renewable for further one-year periods based on satisfactory performance and mutual agreement of both parties.

Planned start of coverage: **after signing of the insurance agreement (date to be confirmed at signing)**.

Full details of the required coverage are given in **Appendix A – Terms of Reference and Bidding Table**.

2. General and Key Conditions

General conditions

By submitting a bid, bidders accept without restriction all the **General and Specific Conditions** outlined in these specifications as being the only basis for this service contract procedure, irrespective of their own conditions, which they hereby waive.

Bidders shall carefully examine and comply with all the instructions, forms, clauses and specifications mentioned in this participation file.

Failure to submit a bid containing all the information and documents requested by the closing date may result in the bid's rejection.

The service provider must provide MUSHOK against all services when submitting bills. All taxes shall be calculated and deducted as per Bangladesh Government policy. To claim any tax exemption, the service provider must submit the authorised Government approval document in its name, with its validity period.

The service provider shall submit the revenue stamp with each bill, as per Government rules.

Key Conditions on Claim Settlement

- The insurance provider shall accept and settle all valid claims submitted by HI staff and eligible dependants in accordance with the benefits, coverage limits and exclusions expressly stated in this tender document and the final agreement.
- No claim shall be rejected, reduced or left unpaid on the basis of undisclosed exclusions, ambiguous wording, internal insurance company procedures, or administrative and technical requirements that were not expressly disclosed in the bidding documents and agreed in the final contract.
- Requirements such as advance notification, prescription validity periods, distinctions between minor and major surgery, and specific documentation formats shall not be used as grounds for rejecting an otherwise eligible claim, except where an applicable requirement is clearly stated in the agreed contract and is reasonably necessary to establish the claim's validity.

A claim may be rejected or reduced **only** on the following grounds:

1. Fraud or material misrepresentation;
2. Coverage limits exceeded;

3. Medicines, diagnostic tests or procedures were not prescribed or recommended by a registered and appropriately qualified medical practitioner;
4. The claim relates to a disease, treatment, service or circumstance specifically identified by mutual agreement and expressly accepted in the final agreement.

- The insurance provider shall disclose all exclusions, sub-limits, waiting periods, claim submission deadlines, notification requirements and supporting-document requirements in its bid.
- No additional exclusion, restriction or claim condition may be introduced after contract award without HI's prior written agreement.
- For every rejected or partially approved claim, the insurance provider shall provide HI with a written explanation identifying the specific contractual clause, the factual basis for the decision and the calculation of any deduction.
- HI or the affected staff member shall have the right to request a review through a designated senior claims officer.
- Bidders must explicitly confirm acceptance of these conditions in their technical proposals.
- Any proposed deviation must be clearly identified in the bid for HI's assessment; undisclosed deviations shall not be accepted as a basis for subsequently denying claims.
- If a staff member claims under only one of the health insurance benefits (IPD, OPD or Maternity), the premium paid for the unused benefits shall be returned or adjusted by the insurance provider on a pro-rata basis. For example, if a staff member claims only OPD, the IPD and Maternity premium shall be returned or adjusted accordingly.

3. Schedule

The table below shows the key dates for this tender process. The issuing of this tender notice and bid pack represents the start of the tender process.

Activity	Date
Tender published	Tuesday, 28 October 2026
Pre-bid meeting (questions may be raised until this date)	Monday, 09 November 2026, 11:00 AM
Written answers to pre-bid meeting questions shared with all bidders	Tuesday, 10 November 2026
Bid submission deadline	Sunday, 22 November 2026, 11:59 PM
Bid opening	Monday, 23 November 2026, 02:30 PM
Evaluation of bids	Monday, 30 November 2026
Due diligence / verification of shortlisted bidders completed	Monday, 07 December 2026
Final evaluation	Thursday, 24 December 2026
Notification of award	Thursday, 31 December 2026
Signing of insurance agreement	Tuesday, 12 January 2027
Go Live	Monday, 19 April 2027

The above dates are indicative only and may change. However, HI commits to ensuring that bidders are treated fairly and equally and have sufficient time to participate in this tender process.

CLOSING DATE FOR BID SUBMISSION

Your bid must be received, either at the address or the email address given in Section 5, no later than **Sunday, 22 November 2026, 11:59 PM (Bangladesh Standard Time)**. Bids received after the closing date will be rejected without evaluation.

All bids must remain valid for a period of 24 months from the closing date.

4. Eligibility and Obligations

All insurance companies legally registered in Bangladesh and licensed by the Insurance Development and Regulatory Authority (IDRA) are eligible to apply. A foreign insurance provider may participate only through an authorised local agent. However, certain criteria will be grounds for excluding applications.

Exclusion criteria:

Bidders shall be excluded from the selection and award procedure if:

- They are bankrupt or being wound up, their affairs are administered by the courts, they have entered into an arrangement with creditors, they have suspended business activities, or they are in any similar situation under national law;
- They have been convicted of an offence concerning professional misconduct by a final judgement;
- They have been found guilty of gross professional misconduct proven by any means which HI can justify;
- They have not fulfilled their obligations relating to the payment of social security contributions or taxes;
- They have been the subject of a final judgement for fraud, corruption, involvement in a criminal organisation or any other illegal activity;
- They have been found in serious breach of contract in another procurement or grant procedure.

In addition, contracts shall not be awarded to bidders who, during the procurement procedure:

- are in a position of conflict of interest;
- are guilty of misrepresentation in supplying the information required by HI, or fail to supply this information.

By returning this participation file duly stamped and signed, bidders confirm that they are not in any of the situations

described above, and undertake to send to HI within seven (7) calendar days of a request any additional documents HI considers necessary to perform its checks.

5. Participation procedure

The tender documents include the following appendixes:

1. Appendix A – Terms of Reference and Bidding Table
2. Appendix B – Service Provider Evaluation Questionnaire
3. Appendix C – General Purchasing Conditions
4. Appendix D – HI Good Commercial Practices
5. Appendix E – HI Institutional Policies (available on www.hi.org): Child Protection Policy; PSEAH Policy; Anti-fraud, Bribery and Corruption Policy; Strategies against Money Laundering and Terrorist Financing; Counter-terrorism Measures and Regulations; Data Protection Statement; Environmental Agenda

If any document from the list below is missing, the bid will be considered administratively non-compliant and will not be evaluated further.

For Administrative Compliance:

- This participation file is signed and stamped on all pages, including the appendixes.
- The bid follows the bidding table in Appendix A.
- The claim settlement time is clearly stated for each type of coverage.

Documents need to be attached to the Bid File

Document	Tick if attached (✓)
Updated copy of valid business registration / Trade Licence (Mandatory)	
Duly completed, dated, stamped and signed tender file, questionnaire and all appendixes (Mandatory)	
Copy of National ID card / Passport of the Owner / CEO / Managing Director, with address, phone and email	
Updated copy of valid VAT/BIN and TIN registration certificate in the company name (Mandatory)	
Copy of tax certificate for the last fiscal year (proof that the tax return was submitted / paid) (Mandatory)	
Insurance regulatory (IDRA) certificate (Mandatory)	
For foreign insurance providers: proof of authorised local agent	
Credit rating certificate / audited financial statements or certified annual report for three of the last five fiscal years (Mandatory)	
Client list for the last 5 years (Mandatory)	
Work experience certificates or copies of contracts / work orders with INGOs, NGOs or international organisations (Mandatory)	
Quality management policy / internal control and monitoring systems information	
Company banking details (Mandatory)	
Audit report / bank solvency certificate / banker's declaration on financial position with bank statement for the last 6 months, or a line of credit (individual transactions not required) (Mandatory)	
Information on at least 2 contact persons (full name, National ID, address, phone, email)	
Full policy wording, list of exclusions, sub-limits, waiting periods and claim requirements (Mandatory)	

For technical and financial evaluation:

- Technical proposal (all documents listed above, without any price information).

- Financial proposal using the bidding table in Appendix A (prices inclusive of all applicable VAT and tax as per Government rules; HI will deduct VAT and tax at source).

Responses will only be accepted in the requested format. Incomplete responses, or responses not using the templates provided, may be treated as void.

Bid clarification

Bidders may send questions about this tender to **logistics@bangladesh.hi.org** until the pre-bid meeting on **Monday, 09 November 2026 at 11:00 AM** (online: https://meet.google.com/jbi-gzkv-odo; or in person at the HI Country Office, Gulshan, Dhaka). Written answers will be shared with all bidders by **Tuesday, 10 November 2026**.

Commenté [NB1]: Link will be updated

Bid submission

HI prefers digital submission in line with its Environmental Agenda. Bids can be submitted in either of the following ways:

Digital file: by email to **etender@bangladesh.hi.org** with the subject: "Tender for Group Life and Medical Insurance Services – FD Ref: FD-DHAK-00705". If the file is larger than 20 MB, send it in several numbered emails.

Paper submission: in a single sealed envelope delivered to the HI Dhaka office reception desk, House 3/A, Road 36, Gulshan-2, Dhaka-1212. The envelope must show only the reference below and no other details of the bid:

"Tender for Group Life and Medical Insurance Services"

FD Ref: FD-DHAK-00705

Bids must comply with the following requirements. Any bid not meeting them will be rejected.

- **Language:** All written documents shall be in English.
- **Currency:** All prices in BDT.
- **Bid validity period:** Bids shall remain valid for twenty-four (24) months from the closing date.
- **Costs of preparing bids:** All costs of preparing and submitting bids are borne solely by the bidders and will not be reimbursed.

6. Bid selection criteria

Administrative Compliance

HI shall deem administratively compliant a bid which:

- Includes all documents listed in Section 5 above;
- Is submitted in paper or digital version;
- Meets the requirements listed in Section 5 above;

Selection Criteria

Bids that pass the administrative compliance check will be evaluated by an HI committee against the same criteria:

- **Technical evaluation – 60%**
- **Financial evaluation – 40%**

Sl.	Technical evaluation criteria	Score
1	**Organisation profile** a) Corporate governance, management team and structure b) Experience in group life and medical insurance c) Organisational strength and geographical coverage: number of employees (management and claim settlement team), geographic coverage and market share, number of contracted hospitals d) Financial capacity – turnover	20
2	**Previous experience and client references** Claim settlement history over the past three years, with: a) UN / international organisations / diplomatic missions b) INGOs / NGOs / development organisations c) MNCs / banks / non-bank financial institutions Experience with group life, medical and other insurance services (customer feedback will be considered)	25
3	**Proposed policy and Key Conditions (Section 2)** Minimum exclusion list and benefits of medical coverage; maximum benefit within the proposed limits Full disclosure in the bid of all exclusions, sub-limits, waiting periods, claim submission deadlines, notification and supporting-document requirements Degree of deviation from the Key Conditions on Claim Settlement (full acceptance without deviation scores highest) Pro-rata return or adjustment of premium for unused health benefits (IPD, OPD or Maternity)	20
4	**Claim handling procedure** Communication protocol for all types of claim (settlement lead time, minimum documents required, low complexity). The detailed procedure must be clearly described. Written explanation for every rejected or partially approved claim (contract clause, facts and calculation) and review by a designated senior claims officer	20
5	Credit rating, awards and achievements	10
6	Sustainability: environmental policy and green initiatives; wellbeing and corporate social responsibility	5
	Total	**100**

The financial evaluation will be based on the total premium quoted in the bidding table (Appendix A), including the profit-sharing percentage offered.

Further notes on conditions of tender notice

- HI reserves the right to negotiate, accept or reject any bid at its sole discretion. HI is not obliged to accept

the lowest price or any bid.

- Bidders may amend or withdraw their bids by written notice before the closing date. No bid may be modified after the closing date.
- In the interests of transparency and equal treatment, the evaluation committee may ask bidders in writing to clarify their bids within 48 hours, without modifying them.
- Shortlisted bidders may be invited by HI for verification and due diligence.
- Any bidder attempting to influence the evaluation committee or HI's award decision will have its bid immediately rejected.

Terms of Payment

Payment will be made in BDT by electronic fund transfer (EFT) to the service provider's nominated bank account within 30 (thirty) working days of receipt of a correct invoice with the necessary documents. HI will not make any cash payment. VAT and AIT will be deducted at source as per Government of Bangladesh rules.

7. Awarding of contract

The contract shall be awarded to the bid offering the best quality / price ratio according to the needs defined in this call for tender. HI shall evaluate bids in terms of total acquisition cost.

HI may award more than one service provider for different types of coverage, or one service provider for all coverage. HI may award the full or partial scope of this tender depending on available funds and the proposals received. Preference will be given to bidders who commit to a fixed rate for the entire contract duration.

By virtue of this document, HI holds ownership of all bids received as part of this tender procedure. Consequently, bids shall not be returned to bidders.

By signing and returning this participation file, the bidding company agrees with all the appendixes attached to this file.

Signature and company stamp preceded by the words **"Read and approved"**:

Name: _____

Position at the company: _____

Company: _____

Signature & Stamp: _____

Date: _____

Appendix A: Terms of Reference and Bidding Table

1. Scope of service

An agreement will be signed with the selected insurance company to implement an HI scheme of group life and medical insurance covering all salaried employees of HI Bangladesh, under the terms and conditions agreed between the insurer and HI. Claims must be settled within **14 calendar days** of submission of a valid claim with the required documents.

2. Insured members

Member group	Number of members
HI employees	[135] (Male: [82] / Female: [53] (approximate)
Hospitalization coverage	Staff [135] + Dependants [300] = [435] (approximate)
Outpatient coverage	Staff [135] + Dependants [300] = [435] (approximate)
Maternity coverage	[30] (approximate)

The detailed list will be shared with the selected service provider. Numbers may increase or decrease depending on the number of employees at the time of award. Medical coverage applies to employees together with either their spouse and children, or their parents.

- **Family** means the employee's spouse and all children up to age 21 (Maximum 03 children; no age limit for children with disability).
- **Parents:** bidders must quote for both options – (a) no age limit, and (b) up to age 75.
- Employees are covered primarily from age 18 to 65. Bidders may quote separately for employees above 65. The age limit for medical coverage is up to 75.

3. Group Term Life Insurance (HI staff only) – per staff per year

Sl.	Benefit	Sum assured (BDT)
1	General group life insurance (coverage up to age 65)	20,00,000
2	Accidental Death (AD&D)	40,00,000
3	Permanent and Partial Disability (PPD) – depending on the disability type	depending on the disability type & % will be relating to the death benefit
4	Critical Illness (CI)	6,00,000

Permanent disability (PPD / PTD): In case of PPD or PTD caused directly by an accident, the sum assured shall be paid according to the list of PPD & PTD benefits below. For multiple injuries from one accident, only the larger sum is paid. Once the total paid reaches 100% of the death-benefit sum assured, PPD/PTD cover for that insured person ends. Disabilities not listed are compensated according to their severity compared with those listed; loss of use of a limb is treated as loss of the limb. No indemnity is payable for a pre-existing degree of disability. The list corresponds to the First Schedule of the Bangladesh Labour Law.

List of PPD & PTD benefits

Sl.	Description of injury	% of death-benefit sum assured
General		
1	Loss of both hands or amputation from higher parts	100
2	Loss of one hand and one leg	100
3	Loss of sight of both eyes to such an extent as to render the claimant unable to perform any work for which eyesight is essential	100
4	Amputation of both legs or thighs, or amputation of one leg or thigh and loss of any leg	100
5	Severe facial disfigurement	100
6	Absolute deafness	100

Sl.	Description of injury	% of death-benefit sum assured
Amputation cases – upper limbs (either arm)		
7	Amputation up to shoulder joint	80
8	Amputation below shoulder with stump less than 20 cm from tip of acromion	70
9	Amputation from 20 cm from tip of acromion to less than 11 cm below tip of olecranon	60
10	Loss of a hand, or of the thumb and four fingers of one hand, or amputation from 20 cm below tip of olecranon	60
11	Loss of thumb	30
12	Loss of thumb and its metacarpal bone	30
13	Loss of four fingers of one hand	50
14	Loss of three fingers of one hand	30
15	Loss of two fingers of one hand	20
16	Loss of terminal phalanx of thumb	10
Amputation cases – lower limbs		
17	Amputation of both feet	90
18	Amputation through both feet proximal to the metatarso-phalangeal joint	80
19	Loss of all toes of both feet through the metatarso-phalangeal joint	40
20	Loss of all toes of both feet proximal to the proximal inter-phalangeal joint	30
21	Loss of all toes of both feet distal to the proximal inter-phalangeal joint	20
22	Amputation from lower part of the hip	90
23	Amputation from lower part of the hip with stump exceeding 12.5 cm from tip of great trochanter, but not beyond middle thigh	80
24	Amputation from lower part of the hip with stump not exceeding 12.5 cm from tip of great trochanter	70
25	Amputation from middle thigh to 9 cm below knee	60
26	Amputation below knee with stump exceeding 9 cm but not exceeding 12.5 cm	50
27	Amputation below knee with stump exceeding 12.5 cm	40
28	Amputation of one foot resulting in end-bearing	30
29	Amputation of one foot proximal to the metatarso-phalangeal joint	30
30	Loss of all toes of one foot through the metatarso-phalangeal joint	20
Other injuries		
31	Loss of one eye, without complications, the other being normal	40
32	Loss of vision of one eye, without complications or disfigurement of the eyeball, the other being normal	30
Loss of fingers of right or left hand – index finger		
33	Whole	14
34	Two phalanges	11
35	One phalanx	9
36	Guillotine amputation of tip without loss of bone	5
Middle finger		
37	Whole	12
38	Two phalanges	9
39	One phalanx	7
40	Guillotine amputation of tip without loss of bone	5
Ring or little finger		
41	Whole	7
42	Two phalanges	6
43	One phalanx	5
44	Guillotine amputation of tip without loss of bone	5
Toes of right or left foot – great toe		
45	Through metatarso-phalangeal joint	10

Sl.	Description of injury	% of death-benefit sum assured
46	Part, with some loss of bone	3
Any other toe		
47	Through metatarso-phalangeal joint	3
48	Part, with some loss of bone	2
Two toes of one foot, excluding great toe		
49	Through metatarso-phalangeal joint	5
50	Part, with some loss of bone	2
Three toes of one foot, excluding great toe		
51	Through metatarso-phalangeal joint	6
52	Part, with some loss of bone	3
Four toes of one foot, excluding great toe		
53	Through metatarso-phalangeal joint	9
54	Part, with some loss of bone	5

Critical Illness (CI) – BDT 6,00,000: If an insured person is diagnosed with one of the critical illnesses below, the CI sum assured shall be paid to the insured. Each diagnosis must be confirmed by a specialist.

Sl.	Critical illness	Definition
1	Cancer	A malignant tumour with uncontrolled growth and spread of malignant cells and invasion of tissue, confirmed by definite histology. Includes leukaemia and malignant diseases of the lymphatic system.
2	Heart attack (myocardial infarction)	Death of part of the heart muscle due to inadequate blood supply, evidenced by any of: typical chest pain; new characteristic ECG changes; elevation of infarction-specific enzymes, troponins or other biochemical markers.
3	Stroke	Any cerebrovascular incident producing permanent neurological sequelae (infarction of brain tissue, haemorrhage, embolisation from an extra-cranial source), evidenced by typical clinical symptoms and CT/MRI findings.
4	Coronary artery (bypass) surgery	Open-chest surgery to correct two or more narrowed or blocked coronary arteries by bypass graft (CABG), proven necessary by coronary angiography.
5	Kidney failure (end-stage renal disease)	Chronic irreversible failure of both kidneys, requiring regular dialysis or renal transplantation.
6	Major organ transplantation	Transplantation as recipient of a heart, lung, liver, pancreas, small bowel, kidney or bone marrow.
7	Paralysis	Total and irreversible loss of use of two or more limbs through paralysis due to accident or sickness of the spinal cord.
8	Multiple sclerosis	Unequivocal diagnosis (preferably by a neurologist), evidenced by typical clinical symptoms of demyelination, impaired motor and sensory functions, and typical MRI findings.
9	Blindness / loss of sight	Total, permanent and irreversible loss of all sight in both eyes due to sickness or accident, confirmed by an ophthalmologist with specific test results.
10	Heart valve replacement	Surgical replacement of one or more heart valves (aortic, mitral, pulmonary or tricuspid) with prosthetic valves due to stenosis, incompetence or both.
11	Surgery of aorta	Surgery for a chronic disease of the thoracic or abdominal aorta (not its branches) requiring excision and replacement with a graft.
12	Aplastic anaemia	Bone marrow failure confirmed by bone marrow biopsy, resulting in anaemia, neutropenia and thrombocytopenia and requiring at least one of: blood product transfusion; marrow-stimulating agents; immunosuppressive agents; bone marrow transplantation.
13	Benign brain tumour	Removal under general anaesthesia of a non-cancerous brain tumour leading to a permanent neurological deficit (or, if inoperable, causing such a deficit), documented for at least three months and evidenced by CT/MRI. Excludes cysts, granulomas, vascular malformations, haematomas and tumours of the pituitary gland or spine.

Sl.	Critical illness	Definition
14	Chronic / end-stage lung disease	Severe, permanent impairment of respiratory function evidenced by all of: persistent reduction in respiratory volume; persistent reduction in arterial oxygen tension; need for permanent oxygen supply.
15	Deafness / loss of hearing	Total, permanent and irreversible loss of hearing in both ears due to sickness or accident, confirmed by an ENT specialist and audiometry.
16	Major head trauma	Head trauma with disturbed brain function, evidenced by neuro-radiological tests, resulting in permanent inability to perform independently three or more activities of daily living (bathing, dressing, personal hygiene, mobility, continence, eating/drinking) or permanent bedridden state.
17	Loss of limbs	Total and irrecoverable severance of two or more limbs above the elbow/wrist or knee/ankle joint due to accident or medically required amputation.
18	Loss of speech	Total and irreversible loss of the ability to speak due to injury or disease of the vocal cords, confirmed by an ENT specialist. Psychogenic loss of speech is excluded.

4. Medical Insurance (HI staff and their dependants)

Hospitalization and maternity coverage

Service item	Type of coverage	Dependants	Maximum (BDT)
Hospitalization (maximum limit per incident; unlimited number of incidents)	Per disability / per person	Spouse & children OR parents	10,00,000 per family per year
Room rate limit per day (maximum)	Per day		Actual up to 30 Days
ICU / CCU / NICU (at actual, no sub-limit)	Per person per disability		2,00,000
Maternity coverage	Per case	Female employee / spouse	1,10,000

Outpatient coverage (without any sub-limit, including dental and optical) – please quote for both options

Service item	Type of coverage	Dependants	Maximum (BDT)
Option 1 – Outpatient coverage	Full family per year	Spouse & children OR parents	90,000
Option 2 – Outpatient coverage	Full family per year	Spouse & children OR parents	1,00,000
Doctor's visit / consultant fee (maximum, both options)	Per visit		2,000 – 2,500

Claim reimbursement must be 100% within the limit.

Hospitalization – must ensure high-quality care, including pre-existing, chronic and HIV/AIDS conditions, and must include at least:

- No sub-limit for room / board per disability or for other hospitalization costs;
- Accidental, maternity and all illness hospitalization (accommodation, doctors' fees, X-rays, physiotherapy, ICU, CCU, NICU, drugs, surgical appliances, etc.);
- Treatment while in hospital and in-patient surgery;
- Hospitalization for dental and optical cases, psychiatric hospitalization, mental disorders and gynaecological illness;

- Pre- and post-hospitalization benefits (seven days before and after hospitalization);
- Ambulance service;
- Chronic, congenital, HIV/AIDS and related conditions;
- Newborn babies before discharge entitled to in-patient benefits up to the full limit;
- Critical illness: the higher limit between group life and hospitalization coverage applies;
- Any additional benefits offered by the bidder.

Maternity benefit – for all female employees and spouses of male employees aged 18 to 45 with fewer than two (02) children, covering:

- Caesarean / ectopic / extra-uterine pregnancy;
- Normal delivery;
- Miscarriage / legal abortion;
- Emergency caesarean: limit of BDT 1,10,000 regardless of outcome (e.g. stillbirth).

Outpatient – covers illness not requiring hospital admission (examination, diagnosis and prompt treatment at clinics, chambers or hospitals), including at least:

- Routine consultations; diagnostic, laboratory and radiology services;
- Prescribed medicines, drugs and dressings, including vitamins prescribed by the doctor;
- Prescribed physiotherapy;
- HIV/AIDS-related conditions and prescribed ARVs;
- Routine immunisation (EPI) / baby-friendly services;
- Chronic and recurring conditions; renal treatment; congenital birth defects; any kind of skin disease;
- Outpatient emergency ambulance services;
- Dental and optical services;
- Counselling, psychiatric services and mental disorder treatment;
- Any additional benefits offered by the bidder.

Medicines and prescriptions: For chronic diseases, medicine can be purchased for up to 3 months at a time, and the prescription remains valid for one year. For other diseases, claims follow the dose and duration prescribed; if not specified, at least 15 days of treatment at a standard dose will be reimbursed. Prescription validity: 3–6 months for normal diseases and 1 year for chronic diseases. Medicine purchase limit: minimum 1 month, maximum 3 months.

5. Other terms and conditions

1. Pre-existing conditions are waived for all diseases, including maternity, for all employees and family members. ICU and CCU claims are reimbursed at actual within the limit.
2. The suicide exclusion is waived for employees who joined more than one year earlier.
3. Employees can be hospitalized at any hospital of their choice and claim reimbursement. Listed hospitals must provide a cashless facility; any issue must be addressed by the service provider within 6 hours of notification. The service provider must give clear guidelines for cashless facilities and a list of non-payable services.
4. Patient registration fees charged by hospitals are covered by the service provider.
5. If the same incident / disease recurs within three months, only the remaining balance of the hospitalization limit for that claim is available.
6. Claims are settled within 14 calendar days of submission of the required documents, and an email comparing submitted vs paid claims is shared at the same time. If a claim is not reimbursed on time (with all documents submitted), BDT 500 will be paid in addition to the claim.
7. On receiving death information from HI, the insurer pays the death benefit to the nominee within 14 days, whatever the cause of death. Bidders must state any exceptions and the list of documents required. Death notification from HI within 90 days must be accepted (bidders may offer a longer period).
8. No restriction applies to the insured employee's residence, travel or workplace. Bidders must state any exceptions.
9. Before the start of cover, HI will provide the list of employees. New employees are included from the date HI notifies the insurer, and leavers (except deceased) are removed on HI's request; premiums are adjusted

pro-rata. Inclusion / exclusion lists on the employee portal are updated monthly; premiums for new inclusions after the initial payment are paid quarterly.

10. Premium rates are quoted per one thousand taka of sum assured per year and are paid annually at the beginning of the year.
11. Profit commission: any profit during the contract period must be paid back to HI. Bidders must quote the highest percentage of profit they will pay back and the maximum percentage of administrative expenses against the paid premium.
12. Exclusions: bidders must clearly state all requirements, special conditions and exclusions, and options for dealing with them (see also Section 2 – Key Conditions on Claim Settlement).
13. Confidential information will be shared with the service provider subject to signing a Non-Disclosure Agreement (NDA) with HI.
14. Disputes are resolved through mutual discussion; failing that, under the arbitration laws of Bangladesh.
15. The selected company must print two copies of the contract on non-judicial stamp paper (minimum BDT 300 each) and start services immediately after signing.

Duration: initially one (1) year, renewable for further years based on a satisfactory yearly performance evaluation and mutual agreement. The contract may be terminated earlier for unsatisfactory performance.

Invoicing and payment: The service provider invoices on the basis of the inclusion / exclusion list from HI (adjusted monthly, pro-rata). Payment by EFT within 30 working days of a correct invoice. VAT and AIT are deducted at source as per Government rules.

Termination: HI may terminate the contract at any time with one month's written notice; the service provider must give three months' notice. In case of fraud, terrorism or breach of contract, HI may terminate with 7 days' notice. Outstanding payments / premium refunds are settled within 30 working days of submission of the relevant documents.

Negotiation: This tender does not oblige HI to accept any proposal in whole or in part, or the lowest-priced proposal. HI may negotiate price, cost and scope with any or all bidders. Only a signed written contract will bind HI.

6. Bidding table (prices inclusive of VAT & Tax)

Type of insurance	Premium per year per staff (BDT)	Modality / terms and conditions
Group Term (GT) Life Insurance I. Accidental Death (AD&D) II. Permanent and Partial Disability (PPD) III. Critical Illness (CI)		
Medical Insurance I. Hospitalization coverage		
Medical Insurance II. Outpatient coverage – Option 1 (BDT 90,000)		
Medical Insurance II. Outpatient coverage – Option 2 (BDT 1,00,000)		
Medical Insurance III. Maternity benefit		
Parents – Option (a) no age limit		
Parents – Option (b) up to age 70		
Employees above age 65 (if quoted separately)		
Profit-sharing percentage offered		
Maximum administrative expenses (% of paid premium)		

Company: _____

Name: _____

Signature & Stamp: _____

Date: _____

Appendix B: Service Provider Evaluation Questionnaire

Company name:	
Type of company (public company, LLC, association, etc.)	
Year and place of creation	
Registration number	
BIN/VAT registration number	
Address:	
Administrative address (if different)	
Proprietor / Managing Director name	
Phone number:	
Email:	
Sales/contact person 1 – name and position	
Contact mobile number	
Email:	
Sales/contact person 2 – name and position	
Contact mobile number	
Email:	
Date of submission:	

Please answer every question below (use separate pages if needed, with the same question number) and attach the documents requested.

1. Is the company registered in Bangladesh? Please provide a copy of the business registration.

Ans: _____

2. Is the company part of an international corporation? Please describe the link (headquarters / subsidiary) and list other business sites in Bangladesh and abroad.

Ans: _____

3. When was the company established in Bangladesh? When was the headquarters created?

Ans: _____

4. Please complete the financial data table below for the last 3 years and attach the audited financial statements.

Financial data (in million BDT)	Year [2025]	Year [2024]	Year [2023]
Gross premium income			
Claims paid			
Net profit / (loss) after tax			
Number of employees			

Bank data			
Bank name		Branch name	
Account number		Account holder name	
Routing number		Account type	
IBAN (if not in Bangladesh)		SWIFT (if not in Bangladesh)	

5. How many employees work for the company locally and abroad?
Ans: _____

6. Has the company already worked with an HI entity? Please give the entity, period, type of services, volumes and amounts.
Ans: _____

7. Does the company have: a) a quality management policy; b) national quality certification; c) international quality certification? Please provide copies.
Ans: _____

8. Describe the company's legal status, ownership and governance structure. Attach the organogram and short CVs of the key managers responsible for this contract (account / relationship manager, head of claims).
Ans: _____

9. How many years has the company provided group life and group medical insurance in Bangladesh? How many group policies are currently active, and for how many insured members in total?
Ans: _____

10. Please state: (a) total number of staff; (b) number of staff in the claim settlement team; (c) number of branches / service points and the districts covered (especially Dhaka, Cox's Bazar and Kurigram); (d) number of contracted hospitals with cashless facility (attach the list); (e) market share in group insurance, if known.
Ans: _____

11. Claim settlement history for the last three years: for each year, give the number of claims received, number settled, % settled, total amount paid and the average number of days to settle.
Ans: _____

12. List your group life / medical insurance clients of the last three years in each category below, with a copy of the contract or work order:

(a) UN agencies / international organisations / diplomatic missions:
Ans: _____

(b) INGOs / NGOs / development organisations:
Ans: _____

(c) MNCs / banks / non-bank financial institutions:
Ans: _____

13. Confirm the benefits and limits you offer for Group Life (life, AD&D, PPD, CI), Hospitalization, Outpatient (both options) and Maternity, compared with Appendix A. State any additional benefits offered.
Ans: _____

14. Attach the full policy wording and list ALL exclusions, sub-limits, waiting periods, claim submission deadlines, notification requirements and supporting-document requirements.
Ans: _____

15. If a staff member claims under only one health benefit (IPD, OPD or Maternity), will you return or adjust the premium for the unused benefits on a pro-rata basis? Yes / No. Please explain how it will be calculated.
Ans: _____

16. How many days do you need to pay a claim after receiving complete documents? Please state it for each claim type (OPD, hospitalization, maternity, death, critical illness).
Ans: _____

17. For each claim type (OPD, hospitalization, group life / death, critical illness), list the documents required and describe the steps of your claim procedure.
Ans: _____

18. Describe the cashless hospitalization process at your network hospitals and how quickly you resolve issues raised by staff or hospitals.
Ans: _____

19. (a) Will you give a written explanation for every rejected or partially paid claim (contract clause, facts and calculation)? (b) Will a designated senior claims officer review disputed claims? (c) Do you offer online / mobile-app claim submission and tracking? (d) Will you share a monthly claims report with HI?
Ans: _____

20. State your credit rating agency, rating and date, and attach the latest rating certificate (not older than 12 months).
Ans: _____

21. List any awards, recognitions or achievements in the insurance sector in the last three years, with proof.
Ans: _____

22. Do you have an environmental policy? Describe your green initiatives (e.g. paperless claims, digital policy documents, energy saving) and attach proof.
Ans: _____

23. Describe your staff wellbeing practices and corporate social responsibility (CSR) activities, especially any related to persons with disabilities or vulnerable groups.
Ans: _____

24. Customer references: give at least three references from current group insurance clients (experience with UN / international organisations / INGOs / NGOs / corporates will get preference). HI will contact them about claim settlement.

Sl.	Organisation / company name	Contact person	Contact number	Official email
1				
2				
3				
4				
5				

25. Do you accept the Key Conditions on Claim Settlement (Section 2) without deviation? Yes / No. If No, please list each proposed deviation clearly (undisclosed deviations will not be accepted as a basis for denying claims).
Ans: _____

Company registration name: _____

Represented by: _____

Place: _____

Date: _____

Signature & Stamp: _____

Appendix: C (General purchasing conditions)

ARTICLE 1: GENERAL PROVISIONS
The following general Terms and Conditions apply to all orders placed by HANDICAP INTERNATIONAL ("HI") with a supplier. The term "order" refers to any HI purchase order or contract.
Upon acceptance of the order, the supplier shall be entirely bound by the provisions of these Terms and Conditions which will prevail over any additional or differing terms in the supplier's terms of sale.
This Agreement may only be varied with the written consent of HI and any specific terms and conditions in the purchase order or contract will prevail over these terms and conditions.
ARTICLE 2: DELIVERY
Except if otherwise specified in writing in the purchase order or contract, all orders will be delivered carriage and insurance paid (CIP), or in conformity with the Incoterms 2010 specified on the purchase order.
Goods will remain the sole responsibility of the supplier until the delivery note has been signed by HI or by the forwarding agent appointed by HI.
All orders will be delivered in full, unless HI has agreed to partial deliveries in writing.
All deliveries will be accompanied by a delivery note mentioning the purchase order reference or contract numbers, complete descriptions and quantities of goods delivered, and batch or serial numbers if applicable.
HI reserves the right to request additional documentation such as certificates of analysis and/or certificates of origin for goods delivered.
Should the point of delivery be different to the billing address, a copy of the delivery note and shipping documentation will be sent to the ordering entity at least 24 hours before expedition of the goods.
HI reserves the right to refuse any goods delivered in excess of quantities ordered. Excess quantities will be returned to the supplier at their own risk and cost.
ARTICLE 3: DELIVERY TIMES
Delivery times and delivery dates appearing on the purchase order or contract are binding.
If contractual delivery times are not respected, HI may, in accordance with the law, apply late delivery penalties without prejudice to the cancellation clause. These penalties will amount to two percents (2 %) of the total amount of the undelivered goods, excluding taxes, per week of late delivery.
If goods have not been delivered within ten (10) calendar days after the contractual delivery date, HI reserves the right to cancel the order for undelivered goods without notice or payment to the supplier.
ARTICLE 4: COMPLIANCE
A delivery will only be considered as compliant after verification and acceptance by HI. Non-compliant goods can be refused, without written prior agreement from the supplier, and returned by HI at the supplier's cost and risks within fifteen (15) calendar days of delivery. After this time HI will be responsible for costs incurred returning the goods.
HI may also demand that the goods be brought up to standard or replaced within fifteen (15) calendar days of receipt of a written request from HI, that the total price be refunded, or the cancellation of the order in its entirety.
All delivery prices include packaging charges. No deposit can be applied to packaging without prior written agreement from HI. If such an arrangement is agreed, details of the deposit will be clearly
ARTICLE 5: PACKAGING
The supplier agrees to supply goods and services that comply with technical specifications defined by HI, official standards and, in all cases that comply with good professional practice in the sector in question.
Packaging must be compliant with the quality standards required by the nature of the goods, and their transport, storage and handling, in order that they are delivered in perfect condition.
ARTICLE 6: WARRANTY
The supplier guarantees that goods will be delivered undamaged and free from defects, contamination or unreasonable wear, and that they will comply with their destined usage. Any replacement or repair of goods by the supplier will renew the guarantee for a further twelve (12) months beginning on the date of acceptance by HI of the replaced or repaired goods. The supplier guarantees that any replacement parts will be provided at short notice, and an after-sales service will be guaranteed for five (5) years from the initial delivery date.
ARTICLE 7: DANGEROUS OR PERISHABLE GOODS
The supplier agrees to inform HI of the precautions, instructions, recommendations and applicable restrictions for the transport, warehousing and handling of perishable or dangerous goods.
The supplier agrees to provide all required official documentation for perishable and dangerous goods, particularly for international shipping.
Product expiry dates must be displayed clearly and permanently on packaging. The supplier guarantees that the remaining shelf life of the product at the time of delivery is longer than eighty percents (80 %) of its total initial shelf life.
ARTICLE 8: LIABILITY
The supplier is entirely liable for the delivery of goods in compliance with the terms and conditions of the purchase order or contract, and with the laws, regulations, recommendations, standards and good

professional practices applicable to the sector.
The supplier is solely liable for any damage caused by its staff or sub-contractors during the execution of the purchase order or contract.
The supplier agrees to hold a valid civil liability insurance policy for the entire duration of their contractual agreement with HI.

ARTICLE 9: ORDER CANCELLATION
Any order unfilled by the supplier or non-compliant with one or several of their contractual obligations may be lawfully cancelled by HI if the failure to comply is not addressed in the fourteen (14) calendar days following formal notification by HI by registered mail with acknowledgement receipt.
HI will notify the supplier in writing of the cancellation, which will take effect to the sole detriment of the supplier, and this notwithstanding all damages suffered or incurred by HI.
ARTICLE 10: PRICE
Unless stipulated otherwise by HI, the prices indicated on the purchase order are firm and not subject to change. They include all costs associated with the manufacture, packaging, loading, shipping and unloading of the goods. Prices for goods to be exported from the European Union to outside of the European Union do not include VAT.
ARTICLE 11: INVOICING AND PAYMENT
Two copies of all invoices will be issued and sent to the HI office that sent out the order within seven (7) calendar days of delivery. If several orders are contained in one delivery, a separate invoice will be issued for each order.
All invoices will feature the exact references of the delivery note and the order to which they correspond.
ARTICLE 12: SOCIAL AND ENVIRONMENTAL RESPONSIBILITY
HI reserves the right to denounce the order at any time, if the supplier is implied in acts of fraud, corruption, money laundering, or is implied in a criminal organization or quite other illegal activity or is in situation of conflict of interests or abuse of power towards the representatives of HI. HI also reserves the right to denounce the order at any time if the supplier does not respect the international laws in Human Rights or fundamental rights in labor law such as define by the International Labour Organization (ILO)((INTERNATIONAL LABOR ORGANIZATION)), in particular concerning the non-child labor, the nondiscrimination in the employment(use), the labor-union freedom and the right(law) of organization, the respect for salaries minimum and the equality of payment, the not appeal for the hard labor and the respect for durations and for conditions of work and hygiene. HI also reserves the right to denounce the order at any time if the supplier participates whatever shape it is for the distribution of antipersonnel land mines and bombs with sub-ammunitions (production, business, financing, shareholding, transport, storage, etc.), in the business or in the arms dealing, (Arms category A and B - as defined in the French Law article n°2012-304 of the 6 of march 2012) or if he devotes to practices who would make him comparable to a "war profiteer" (use of the economic springs(competences) of a conflict, an abuse of dominant position bound to the existence of a conflict), or still if he has links with terrorist networks about or their nature (acts of violence committed to populations or civil installations committed by an organization). Finally, HI attempts to use techniques and processes of production respecting the fundamental rules of environmental protection (mainly towards the deforestation, towards the use of chemical agents getting the protection of the biodiversity) and expects from his suppliers and persons receiving benefits (providers) for a similar approach.
ARTICLE 13: APPLICABLE LAW AND ATTRIBUTION OF JURISDICTION
HI purchase orders and contracts are governed by Bangladesh law.

Appendix: D (Good commercial practices)

Preamble
These Best Business Practices provide the basis of all working relations between HI and its suppliers.
They are general rules valid unless specific terms are mentioned in the agreement. In the event of contradictory terms between documents, the terms of the agreement or of the RFQ file will take precedence over these Best Business Practices.

I. Supply procedures principles

HI has set up transparent procedures to attribute contracts, of which the key principles are:

- *Transparency* in the supply procedure
- *Proportionality* between procedures followed to attribute agreements and the value of contracts.
- *Equal treatment* of potential suppliers

Usual criteria to select a supplier are:

- Authorisation to buy goods/services in the country
- Financial and economic capacity
- Technical expertise
- Professional capacity

Usual criteria to attribute a contract are:

- The principle of the lowest bid (the cheapest bid satisfying all the conditions required)
- Best value for money

II. Misconduct, ineligibility and exclusion

HI considers each case of misconduct below as a valid reason to exclude a bidder from a call for Bidprocedure and end all working relations and agreements with them:

- Fraud: defined as all intentional actions or omissions regarding:
  - The use or presentation of false, incorrect or incomplete declarations or documents, which would lead to fraudulent appropriation or reprehensible retention of HI's or institutional funding bodies' funds.
  - Concealment of information, having the same consequences.
  - Use of those funds for reasons other than those for which they had been originally attributed.
- Active corruption: promising or deliberately granting an advantage to any person so that they may act or refrain from acting according to their duty in such a way as to damage, or be capable of damaging the interests of HI or of institutional funding bodies.
- Direct corruption: offering HI employees money or gifts in kind to obtain additional contracts or to continue an agreement
- Collusion: agreement between two rival companies, which would have the probable effect of increasing prices, cutting production and increasing profits of allied companies to a greater extent than their natural increase. An attitude of collusion is not automatically based on the existence of explicit agreements between companies. It may also be tacit.
- Coercive practices: damaging or threatening to damage, directly or indirectly, persons or their property in order to influence their involvement in a supply procedure or influence the performance of an agreement.
- Involvement in a criminal organisation or any other illegal activity established by judgement by the American Government, European Union, United Nations or any other HI funding body.
- Immoral human resources practices: use of child labour and non-compliance with fundamental social rights and work conditions of employees or subcontractors.

HI will exclude from the supply procedure any candidate or bidder in any of the following cases:

- Being in a situation of bankruptcy or liquidation, or in receivership, in an arrangement situation (with creditors), having suspended business, in proceedings relating to those subjects or in a similar situation resulting from a procedure resulting from national regulations or law.
- Being sentenced for an offence within the framework of its professional activity by a court decision having the force of res judicata.
- Having been found guilty of grave professional misconduct proven by any means
- Not having satisfied obligations relating to the payment of social security contributions or tax in compliance with legal provisions, either in the country in which the business is established in HI's country of intervention or in the country in which the Agreement will be executed.

- Having been found guilty of fraud, corruption, involvement in a criminal organisation or any other illegal activity that could damage the financial interests of communities.
- Having been declared responsible for grave breach of contract due to non-compliance with contractual obligations in a previous procurement procedure.

HI will not attribute agreements to candidates or bidders who, in the course of the procedure will be:

- the subject of conflicting interests
- guilty of inaccurate declarations by providing information requested by HI to take part in the agreement procedure or by not providing such information.

III. Administrative and financial sanctions

Should the supplier, candidate or bidder be involved in corruptive, fraudulent, collusive or coercive practices, HI would impose:

- Administrative sanctions: A candidate's misconduct will be notified to competent civil or commercial authorities as will be the immediate end of any professional relations with it;
- Financial sanctions: HI will request the refunding of expenses directly and indirectly related to the conduct of the new RFQ or contract attribution procedure. If relevant, the bid guarantee or performance guarantee will be kept by HI.

IV. Information and Access for Funding Bodies

HI will immediately inform institutional funding bodies and will provide them with relevant information should a supplier, candidate or bidder be involved in corruptive, fraudulent, collusive or coercive practices.
Furthermore, entrepreneurs accept to guarantee right of access to their financial and accounting documents so that HI's Institutional Funding Bodies may conduct verifications and audits.

V. Documents to be presented by the supplier

Below are the minimum documents that any company or individual entrepreneur wishing to work with HI needs to produce:

- Supplier's / company representative's personal national identity paper
- Status and registration papers of the company
- Mission order or proxy authorising the representative to sign the Agreement
- Copy of tax registration

NB: Additional documents may be requested for a specific contract.
Furthermore, the Supplier must have minimum administrative equipment to be able to issue an Invoice, Delivery note and own an official stamp.

TO BE COMPLETED BY THE SUPPLIER

I, the undersigned, Name of owner representing certify having read and understood the rules hereto.
On behalf of the company for which I act, accept the terms of HI Best Business Practices and undertake to achieve the best performance should the contract be attributed to

I the undersigned, certify that the **company e** has not been involved and will take all necessary steps not to be involved in or supply material support or any other resource to individuals or entities that commit, attempt to commit, recommend, facilitate or participate in fraud, active or indirect corruption, collusion, coercive practices, involvement in a criminal organisation or any other illegal activity or that do not respect Human Rights or basic social rights and minimum work conditions as defined by the International Labour Organisation (ILO), in particular regarding child labour, discrimination, freedom of association, respect of the minimum wage, slave labour issues and compliance with work conditions and hygiene.

Finally, I hereby certify that **company name** is not involved in any current legal action or court proceedings as plaintiff or defendant, in its own name or on behalf of any other entity, for actions relating to fraud, corruption or any illegal activity and has never been found guilty of such practices.

Name:
Position:
Date:

Signature & Stamp:

Appendix E: HI Institutional Policies

Please read the HI institutional policies on www.hi.org: Child Protection Policy; PSEAH Policy; Anti-fraud, Bribery and Corruption Policy; HI Strategies against Money Laundering and Terrorist Financing; Counter-terrorism Measures and Regulations; HI Data Protection Statement; Environmental Agenda.