



**REPUBLIC OF CYPRUS**

**High Commission of the Republic of Cyprus in the UK**

***Health Insurance Plan for the Diplomatic Staff  
of the High Commission of the Republic of Cyprus in the UK  
and the members of their families***

**Tender procedure No.: 21/2026**

***London, 15 September 2026***

## ***Table of Contents***

|                                                                                        |           |
|----------------------------------------------------------------------------------------|-----------|
| <b>PART A: INSTRUCTIONS TO ECONOMIC OPERATORS.....</b>                                 | <b>3</b>  |
| <b>1 DEFINITIONS .....</b>                                                             | <b>3</b>  |
| <b>2 KEY DETAILS OF THE TENDER PROCEDURE .....</b>                                     | <b>4</b>  |
| <b>3 LEGAL FRAMEWORK.....</b>                                                          | <b>6</b>  |
| 3.1 <i>Applicable legislation .....</i>                                                | <i>6</i>  |
| 3.2 <i>General principles.....</i>                                                     | <i>6</i>  |
| <b>4 DETAILS OF TENDER DOCUMENTS .....</b>                                             | <b>7</b>  |
| 4.1 <i>Ownership and use of the Tender Documents.....</i>                              | <i>7</i>  |
| 4.2 <i>Contents of the Tender Documents .....</i>                                      | <i>7</i>  |
| <b>5 PROVISION OF CLARIFICATIONS ON THE TENDER DOCUMENTS.....</b>                      | <b>7</b>  |
| 5.1 <i>Clarifications by the Contracting Authority .....</i>                           | <i>7</i>  |
| 5.2 <i>Submission of questions in writing by the selected economic operators .....</i> | <i>7</i>  |
| <b>6 REQUIREMENTS FOR PARTICIPATION .....</b>                                          | <b>7</b>  |
| 6.1 <i>Requirements for participation .....</i>                                        | <i>7</i>  |
| <b>7 DETAILS OF TENDERS .....</b>                                                      | <b>8</b>  |
| 7.1 <i>Ownership .....</i>                                                             | <i>8</i>  |
| 7.2 <i>Confidentiality.....</i>                                                        | <i>8</i>  |
| 7.3 <i>Period of validity .....</i>                                                    | <i>9</i>  |
| 7.4 <i>Variants .....</i>                                                              | <i>9</i>  |
| 7.5 <i>Submission of Tenders for part of the Contract Scope.....</i>                   | <i>9</i>  |
| <b>8 FORMAT AND SUBMISSION OF TENDERS.....</b>                                         | <b>9</b>  |
| 8.1 <i>Time and place of submission .....</i>                                          | <i>9</i>  |
| 8.2 <i>Format of Tenders and Submission.....</i>                                       | <i>9</i>  |
| 8.3 <i>Contents of Tender.....</i>                                                     | <i>10</i> |
| <b>9 CONDUCT OF THE TENDER PROCEDURE .....</b>                                         | <b>10</b> |
| 9.1 <i>Opening of Tenders.....</i>                                                     | <i>10</i> |
| 9.2 <i>Tender Evaluation .....</i>                                                     | <i>10</i> |
| 9.3 <i>Clarifications on the Tenders .....</i>                                         | <i>11</i> |
| 9.4 <i>Conclusion of the Evaluation .....</i>                                          | <i>11</i> |

|           |                                                                 |           |
|-----------|-----------------------------------------------------------------|-----------|
| <b>10</b> | <b>CONCLUSION OF THE TENDER PROCEDURE .....</b>                 | <b>11</b> |
| 10.1      | <i>Award of Contract.....</i>                                   | <i>11</i> |
| 10.2      | <i>Notification of the results of the tender procedure.....</i> | <i>11</i> |
| 10.3      | <i>Cancellation of the tender procedure .....</i>               | <i>11</i> |
| 10.4      | <i>Drafting and Signing of the Agreement.....</i>               | <i>12</i> |

# PART A: INSTRUCTIONS TO ECONOMIC OPERATORS

## 1 DEFINITIONS

1.1 The following terms shall have the meanings ascribed to them below:

### **AWARD DECISION**

The decision issued by the Competent Body, whereby the Contract is awarded to the selected Tenderer.

### **COMPETENT AUTHORITY**

The Competent Authority is the Ministry of Foreign Affairs.

### **COMPETENT BODY**

A body established by virtue of Regulation 201/2007 of Cyprus law on the *Regulation of Procedures for the Award of Public Procurement and for Related Matters (Law 73(I)/2016)*, which, within the powers granted to it, undertakes and handles matters concerning public procurement.

### **CONTRACT**

The Sales Agreement between the Contracting Authority and the Consultant, which is concluded after announcement of the Award Decision and which comprises the Tender and any addendum or other correspondence in relation thereto between the Contracting Authority and the Health Insurance company.

### **CONTRACTING AUTHORITY**

The Ministry of Foreign Affairs of the Republic of Cyprus, represented by the High Commission of the Republic of Cyprus, located in UK.

### **CONTRACT SCOPE**

The Conclusion of a Health Insurance Plan for the Diplomatic Staff of the High Commission of the Republic of Cyprus in the UK and the members of their families. Details of the members to be included in the plan, as well as of their dependents will be available upon request through email at [tkyrou@mfa.gov.cy](mailto:tkyrou@mfa.gov.cy) within the time frame set in para. 2.11.

The insurance plan should be a private one, **not connected or be an addition to NHS services and be on a “medical history disregarded” basis**. It should - at least - cover:

- outpatient and inpatient services and treatment,
- pregnancy and childbirth,
- dental and optician services,
- routine exams,
- chronic conditions and treatment.

The medical plan should offer full coverage and be flexible to include or remove members at any time.

The specific minimum requirements to be covered are listed in **Annex I**.

**ECONOMIC OPERATOR**

Any legal entity which meets the requirements for participation as described in the tender documents.

**ESTIMATED VALUE**

The potential cost of the Sales Agreement, estimated by the Contracting Authority, exclusive of applicable taxes, including any form of options, as explicitly set out in the tender documents.

**REPRESENTATIVE**

The person representing the Tenderer.

**HEALTH INSURANCE COMPANY**

The Tenderer to be selected to enter into a Contract with the Contracting Authority.

**TENDER**

The financial proposal for implementation of the Contract Scope, drawn up and submitted by the Tenderer.

**TENDER DOCUMENTS**

The documents, as well as any addenda thereto issued for the purposes of the procedure.

**TENDERER**

Any Economic Operator that has submitted a tender.

- 1.2 Any other terms used in the present Part A of the Tender Documents shall have the meanings ascribed to any other part of the Tender Documents.
- 1.3 The headings, article titles, subtitles and table of contents are used for convenience and shall not be taken into consideration in the interpretation of the Tender Documents.

**2 KEY DETAILS OF THE TENDER PROCEDURE**

| <b>Par.</b> | <b>I T E M</b>              |                                                                                                                                            |
|-------------|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| <b>2.1</b>  | <b>Tender procedure No.</b> | <b>MFA 21/2026</b>                                                                                                                         |
| <b>2.2</b>  | <b>Contract Scope</b>       | Health Insurance Plan for the Diplomatic Staff of the High Commission of the Republic of Cyprus in the UK and the members of their family. |
| <b>2.3</b>  | <b>Estimated Value</b>      | <b>GBP 200.000 (Two Hundred Thousand GBP)</b> excluding VAT.                                                                               |
| <b>2.4</b>  | <b>Financing</b>            | The project is financed by the Ministry of Foreign Affairs Budget.                                                                         |
| <b>2.5</b>  | <b>Tender procedure</b>     | Open procedure via publication of tender documents on the website of the High Commission of the Republic of Cyprus in the UK.              |

| <b>Par.</b> | <b>ITEM</b>                                                                                                                                                                                                      |                                                                                                                                                                                                                                                      |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>2.6</b>  | <b>Award Criterion</b>                                                                                                                                                                                           | Most economically advantageous tender based on price.                                                                                                                                                                                                |
| <b>2.7</b>  | <b>Contracting Authority</b>                                                                                                                                                                                     | Ministry of Foreign Affairs of Cyprus – The High Commission of the Republic of Cyprus in the UK.                                                                                                                                                     |
| <b>2.8</b>  | <b>Competent Official</b>                                                                                                                                                                                        | <p>Tonia KYROU</p> <p>Telephone number: +44 207 321 4173</p> <p>Electronic mail address: tkyrou@mfa.gov.cy</p> <p>Postal address: High Commission of the Republic of Cyprus in the UK</p> <p>13 St. James's Square</p> <p>SW1Y 4LB</p> <p>London</p> |
| <b>2.9</b>  | <b>Period of time during which the Tender Documents may be available</b>                                                                                                                                         | 7 days                                                                                                                                                                                                                                               |
| <b>2.10</b> | <b>Method and Place for collection of the Tender Documents</b>                                                                                                                                                   | The Tender Documents and Provision of Clarifications will be made available on The High Commission of Cyprus's website.                                                                                                                              |
| <b>2.11</b> | <b>Deadline for the Submission of Comments / Questions / Recommendations and for requesting details of the members to be included in the plan</b><br><br><b>Dispatch of answers by the Contracting Authority</b> | <p>17 September 2026, by 12:00 noon</p> <p>18 September 2026, by 12:00 noon</p>                                                                                                                                                                      |
| <b>2.12</b> | <b>Deadline for the Submission of Tenders</b>                                                                                                                                                                    | 22 September 2026, by 12:00 noon                                                                                                                                                                                                                     |
| <b>2.13</b> | <b>Place of Submission of Tenders</b>                                                                                                                                                                            | <p>The High Commission of the Republic of Cyprus in the UK</p> <p>c/o Ms Tonia Kyrou</p> <p>13 St. James' Square,</p> <p>SW1Y 4LB</p> <p>London</p>                                                                                                  |

| <b>Par.</b> | <b>I T E M</b>                                                    |                                                                            |
|-------------|-------------------------------------------------------------------|----------------------------------------------------------------------------|
| <b>2.14</b> | <b>Commitment not to Withdraw the Offer</b>                       | <b>N/A</b>                                                                 |
| <b>2.15</b> | <b>Period of Validity of Tenders</b>                              | <b>2 months</b> from the deadline of submission of Tenders [see para. 7.3] |
| <b>2.16</b> | <b>Language in which Tenders must be drawn up</b>                 | English                                                                    |
| <b>2.17</b> | <b>Currency of Tenders</b>                                        | GBP                                                                        |
| <b>2.19</b> | <b>Estimated date of notification of tender procedure results</b> | 25 September 2026                                                          |
| <b>2.20</b> | <b>Estimated date of contract signature</b>                       | 28 September 2026                                                          |
| <b>2.21</b> | <b>Duration of Contract</b>                                       | The contract will be for a period of <b>twelve</b> (12) months.            |
| <b>2.22</b> | <b>Payment</b>                                                    | Settlement of the contract in quarterly installments.                      |

### **3 LEGAL FRAMEWORK**

#### **3.1 Applicable legislation**

This Tender Procedure is conducted in accordance with the relevant Laws and Regulations of the Republic of Cyprus on the award of public contracts, as amended and in force and as described in this Part A of the Tender Documents.

#### **3.2 General principles**

- 3.2.1 The Competent Body shall deem admissible the Tenders which comply with all terms, conditions and specifications of the Tender Documents, while it also may, in its absolute judgement and at its sole discretion, deem admissible Tenders exhibiting minor deviations. Minor deviations shall be taken to mean deviations which do not affect the extent of the Contract Scope or the quality of its execution, do not substantially limit the rights of the Contracting Authority or the obligations of the Consultant, and do not impair the principle of equal treatment of Tenderers.
- 3.2.2 Tenders which the Competent Body judges to be vague and impossible to be evaluated or contain terms which are contrary to the contents of the Tender Documents and/or conditional terms, shall be designated as inadmissible and shall be rejected.
- 3.2.3 Any attempt by or on behalf of a Tenderer to influence in any way whatsoever the judgement of the Contracting Authority or of the Competent Body in the discharge of their duties in connection with the tender procedure or its outcome, shall result in the rejection of its Tender.
- 3.2.4 Tenderers who have obtained or taken in their possession, without legal authority and at their own initiative, information or documents of a secret nature in connection to the tender procedure, shall be excluded from participation.

## **4 DETAILS OF TENDER DOCUMENTS**

### **4.1 *Ownership and use of the Tender Documents***

- 4.1.1 All information contained in the Tender Documents and all rights thereon are the property of the Contracting Authority.
- 4.1.2 Use of the Tender Documents by the economic operators is restricted to the purposes of preparation of their Tenders.

### **4.2 *Contents of the Tender Documents***

- 4.2.1 The Tender Documents comprise the present Part A “Instructions to Economic Operators”, the Form 1 and the Annexes attached hereto.
- 4.2.2 If it is found that the tender documents are incomplete, as compared against the table of contents of the preceding paragraph, economic operators are entitled to request its completion. Recourses filed against the legality of the tender procedure on the grounds of non-completeness of the tender documents shall be rejected as inadmissible.

## **5 PROVISION OF CLARIFICATIONS ON THE TENDER DOCUMENTS**

### **5.1 *Clarifications by the Contracting Authority***

The Contracting Authority may make additions, corrections, or modifications of a small scale to the terms of the Tender Documents, which will be made available to all economic operators within the period specified in paragraph 2.11.

### **5.2 *Submission of questions in writing by the economic operators***

- 5.2.1 Any clarification questions, recommendations, comments and/or remarks regarding the terms of the Tender Documents shall be submitted by economic operators within the period specified in paragraph 2.11.
- 5.2.2 As long as clarification requests, recommendations, comments and/or remarks are requested in accordance with the above, the Contracting Authority dispatches to the economic operators. supplementary documents and/or clarifications where deemed necessary within the period specified in paragraph 2.11.
- 5.2.3 Economic operators cannot invoke verbal responses/ answers/ explanations given by any staff member. The Contracting Authority is not bound by any verbal responses/ answers/ explanations.

## **6 REQUIREMENTS FOR PARTICIPATION**

### **6.1 *Requirements for participation***

- 6.1.1 Economic Operators which meet the following criteria are eligible submitting a tender:
  - **Legal and professional capacity:** The economic operator must be legally established and have the capacity to provide private health insurance services in the United Kingdom and the EU.

- **Relevant experience:** At least 3 years of experience in providing private health insurance services to individuals, companies, public bodies or other organisations.
- **Comparable experience:** Demonstrated experience in managing health insurance schemes of a comparable nature and scope, including coverage in more than one country where applicable.
- **Financial capacity:** The economic operator must have sufficient financial and economic capacity to perform the contract for its entire duration.
- **Healthcare network:** The economic operator must have access to an adequate network of hospitals, clinics, doctors and other healthcare providers in the UK and EU to ensure effective access to the insured services.
- **Claims and assistance capacity:** The economic operator must have adequate arrangements for claims administration, customer support and assistance, including the ability to assist insured persons when receiving treatment in the UK or EU.
- **Organisational and technical capacity:** The economic operator must have sufficient qualified personnel, systems and resources to administer the insurance scheme and provide the required services throughout the contract.
- **Data protection:** The economic operator must have appropriate arrangements for the secure processing and protection of personal and medical data in accordance with applicable data-protection legislation.
- **No exclusion grounds:** The economic operator must declare that none of the applicable grounds for exclusion from participation in a public procurement procedure apply to it, including serious professional misconduct, fraud, insolvency and failure to meet tax or social-security obligations.

6.1.2 Economic Operators are not allowed to enter into agreements with any other firms or establish subcontracting agreements between them regarding the present Tender.

## **7 DETAILS OF TENDERS**

### **7.1 Ownership**

7.1.1 The Contracting Authority will own the Tenders submitted in under the present tender procedure and the Tenderers are not entitled to the return of their Tenders by the Contracting Authority.

7.1.2 It is understood that any information contained in the submitted tenders will be used by the Contracting Authority for evaluation purposes and in compliance with the provisions of the Law.

### **7.2 Confidentiality**

7.2.1 The Contracting Authority shall consider the legitimate interests of the Tenderers concerning the protection of secrecy which applies to technical or trade aspects of their businesses.

7.2.2 Tenderers may specify in their Tenders the information which they consider to be confidential and which cannot be disclosed to third parties, stating the reasons for considering such information to be confidential.

The tender documents shall be used solely for the purpose of preparing and submitting a Tender and shall not be used for any other purpose without the express written consent by the Contracting Authority.

Any information given in the tender documents shall not be disclosed to third parties without the express written permission of the Contracting Authority. The Tenderers shall ensure that the tender documents are not disclosed, not limited to any loss, theft, misuse, misplacement, unauthorized disclosure, or other Health violation.

### **7.3 *Period of validity***

- 7.3.1 The period of validity of the Tenders is the period stated in paragraph 2.15 above. Tenders specifying a shorter period of validity than the one mentioned above shall be rejected as inadmissible.
- 7.3.2 The validity of Tenders may be extended, if requested by the Contracting Authority.
- 7.3.3 Should the issue of extension of the validity of the Tenders arise, the Contracting Authority shall address a written question to the Tenderers prior their expiry date. The tenderers must reply within the period specified by the Contracting Authority and if they refuse to extend the validity of their Tenders, such Tenders shall be rejected as inadmissible.

### **7.4 *Variants***

Variants for all or part of the Contract Scope shall not be admitted to this tender procedure.

### **7.5 *Submission of Tenders for part of the Contract Scope***

Tenders for part of the project scope will not be accepted.

## **8 *FORMAT AND SUBMISSION OF TENDERS***

### **8.1 *Time and place of submission***

- 8.1.1 Economic Operators must submit their Tenders no later than the deadline for the submission of Tenders specified in paragraph 2.12.
- 8.1.2 Tenders must be submitted to the address stated in paragraph 2.13.
- 8.1.3 Tenders submitted after the specified date and time are considered to be late and shall not be taken into consideration.
- 8.1.4 Tenderers are allowed to modify or withdraw their submitted Tenders, any time PRIOR to the deadline for the submission.
- 8.1.5 No clarification, modification or rejection, by the tenderer, of a term of its Tender is allowed after the expiry of the deadline for the submission of Tenders.

### **8.2 *Format of Tenders and Submission***

- 8.2.1 Tenders must be drawn up as determined in the Tender Documents in the language specified in paragraph 2.16.
- 8.2.2 The Tender must be submitted in a sealed envelope on which the following should be written:

***Tender Procedure MFA 21/2026***

***Tender for the provision of Health Insurance Plan of the Diplomatic Staff of the High Commission of the Republic of Cyprus in the UK and the members of their family***

*The High Commission of the Republic of Cyprus in the UK,*

*c/o Ms Tonia Kyrou*

*13 St James's Square*

*SW1Y 4LB*

*London*

**<Date for the Submission of Tender>**

**<Contact details of the tenderer: .....>**

- 8.2.3 The sealed envelope should be delivered and dropped at The High Commission of the Republic of Cyprus in the UK, 13 St. James's Square, SW1Y 4LB, London, not later than 22 September 2026, by 12:00 noon.

### **8.3 Contents of Tender**

8.3.1 Each Tenderer must submit the following documents completed and signed by an authorised person in a sealed enveloped according to para 8.2.2:

- a. the **"Form of Tender" (Form 1)**, with the total amount in GBP, for which the Tenderer intends to perform the Contract. The prices offered must include all duties, taxes and levies payable. The prices offered will be considered final and will not be affected by any fluctuations in the aforementioned taxes, duties and/or levies.
- b. **The proposal** of the insurance plan.
- c. **The Annex I**, duly completed and signed by an authorised representative of the Tenderer.
- d. any other supplementary document which the Tenderer considers useful.

## **9 CONDUCT OF THE TENDER PROCEDURE**

### **9.1 Opening of Tenders**

- 9.1.1 The opening of the tenders submitted timely shall be carried out by authorised persons, after the expiry of the deadline for the submission of tenders.

### **9.2 Tender Evaluation**

- 9.2.1 The Competent Body shall verify the fulfilment of all requirements of the Tender Documents and shall proceed with the evaluation of all tenders submitted in accordance with the Tender Documents to establish their completeness and determine whether or not they meet the requirements and specifications of the Contract Scope.
- 9.2.2 Where the Competent Body considers a Financial Offer to be abnormally low, the Competent Body must request in writing the Tenderer to supply, within twenty-four hours (24 hours) of being requested to do so, those clarifications about the composition of its Offer which the Competent Body may deem advisable. The Competent Body shall examine the clarifications and shall decide whether to accept or reject the tender.

### **9.3 Clarifications on the Tenders**

- 9.3.1 The Contracting Authority may, request a Tenderer to provide clarifications regarding the contents of its Tender, throughout the evaluation procedure. In such a case, the provision of clarifications is mandatory for the Tenderer and is not considered to be a counter-offer.
- 9.3.2 Where information or documentation to be submitted by economic operators is or appears to be incomplete or erroneous or where specific documents are missing, the Contracting Authority may request the economic operators concerned to submit, supplement, clarify or complete the relevant information or documentation within an appropriate time limit provided that such requests are made in full compliance with the principles of equal treatment and transparency. Economic operators in this case are obliged, under penalty of disqualification, to supply such missing information within twenty-four hours (24 hours) from the day on which they are requested to do so.
- 9.3.3 From the clarifications supplied by Tenderers in accordance with the above, only those concerning the issues for which they were requested shall be considered.

### **9.4 Conclusion of the Evaluation**

The establishment of the final ranking of Tenders in decreasing order is based solely on the price offered.

## **10 CONCLUSION OF THE TENDER PROCEDURE**

### **10.1 Award of Contract**

- 10.1.1 After the conclusion of the evaluation procedure, the Contract is awarded to the Tenderer whose Tender is found to be the most economically advantageous, based on price.
- 10.1.2 In the case of equivalent Tenders with the same –lowest– price, selection of the economic operator by the Contracting Authority shall take place by draw.

### **10.2 Notification of the results of the tender procedure**

- 10.2.1 The Contracting Authority shall inform the candidate economic operator (*successful tenderer*) of the Award Decision.
- 10.2.2 The Contracting Authority shall notify the Tenderers of the decision taken and of the reasons for it.

### **10.3 Cancellation of the tender procedure**

- 10.3.1 The tender procedure may be cancelled before the specified deadline for the submission of Tenders for specific and justified reasons, by decision of the Contracting Authority.
- 10.3.2 Cancellation of the tender procedure after expiry of the deadline for the submission of Tenders may be decided where one or more of the following conditions apply:
- When no Tender has been submitted within the specified deadline,
  - When the terms of the Tender Documents contain terms and it is established that these cannot be met by any of the Tenderers or that these specifications lead exclusively to a specific economic operator,

- c. When the prices/criteria of all Tenders meeting the terms of the Tender Documents are unrealistic or appear to be the product of collusion between the Tenderers, resulting in the circumvention of healthy competition,
- d. When the circumstances under which the tender procedure was announced have changed to such an extent that the scope of the tender procedure is no longer necessary, or
- e. When there is no approval for additional required budget in the case that the final award amount is expected to exceed the amount originally approved before the call for tender was published, or
- f. In the event of any other serious unforeseeable cause, which the Competent Body deems to be justified.

10.3.3 The economic operators / Tenderers do not maintain and shall waive any claim against the Contracting Authority on account of such cancellation, if any.

#### ***10.4 Drafting and Signing of the Sales Agreement***

- 10.4.1 The Sales Agreement should be signed within two days upon the notification of the results and of receipt of the relevant invitation to do so by the Contracting Authority. If the aforementioned deadline expires and the Sales Agreement is not signed, then the Tenderer shall be declared in default of the Award made to them and of all rights deriving from it.
- 10.4.2 In such a case, the Contracting Authority has the right to refer the matter back to the Competent Body, with a view to awarding the Contract to the Tenderer who has submitted the next, as per the ranking of paragraph 9.4. It is understood that the Tenders are valid at the date of award.

Form 1

FORM OF TENDER

To

**The Ministry of Foreign Affairs of the Republic of Cyprus**

Tender for the ***Health Insurance Plan for the Diplomatic Staff of the High Commission of the Republic of Cyprus in the UK and the members of their families***

Tender procedure No. **MFA 21/2026**

Date for the submission of Tenders ----/-----/ 202----

1. After examining the terms of the Tender Documents and developing a full understanding of the contract scope, we the undersigned undertake to commence, execute and complete the scope of the contract, in accordance with the Tender Documents in all respects, for the Total Amount of GBP (£) -----, (in words) -----  
----- GBP AND ----- cent, plus the Amount of (£)----- for VAT, or such amount as may be specified on a case by case basis in accordance with the provisions of the Conditions of Contract.
2. We agree that our present Tender shall be valid for a period of time equal to that stated in paragraph 2.15 of Part A of the Tender Documents, that it shall bind us and that it may be accepted at any time prior to the expiry of the said period.
3. Until an official Agreement is prepared and signed, our present Offer, together with your written acceptance, shall constitute a binding Contract between us.

Signature of Tenderer or .....  
of Tenderer's Representative

Name of signatory .....

Identity Card / Passport No. of signatory .....

Capacity of signatory .....

Date .....

Details of Tenderer

Name of Tenderer .....

Witness (Name, Signature and Address)

.....  
.....

## Annex I

### • Core Plan

| Mandatory Coverage                                                                                                             | Reference Limit / Level                                                                                                               | Insurer Proposed Cover / Limit | Clarifications / Conditions / Deviations |
|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|------------------------------------------|
| Annual Benefit                                                                                                                 | Up to £5,000,000 / €7,500,000 / \$7,500,000 / CHF7,500,000 per Year of Insurance, per member or independent, worldwide, excluding USA |                                |                                          |
| Chronic Conditions                                                                                                             | Covered up to policy limits                                                                                                           |                                |                                          |
| Congenital and Hereditary Conditions (Abnormalities, defects, disorders or diseases present at birth or inherited genetically) | Covered up to policy limits                                                                                                           |                                |                                          |
| Emergency Out of Area of Cover                                                                                                 | Treatment must commence within a period of 30 days of absence from the selected area of coverage                                      |                                |                                          |
| Pandemics, Epidemics and Outbreaks of Infectious Illnesses                                                                     | Covered in full up to policy limits                                                                                                   |                                |                                          |

### • Inpatient/Day Case Healthcare Benefits

| Mandatory Coverage                                                                                                                                                                 | Reference Limit / Level                             | Insurer Proposed Cover / Limit | Clarifications / Conditions / Deviations |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|--------------------------------|------------------------------------------|
| Hospital Charges (including nursing and accommodation for inpatient treatment, day case treatment, operating theater and recovery room, prescribed medicines, drugs and dressings) | Paid in Full                                        |                                |                                          |
| Parental Accommodation (for children under 18)                                                                                                                                     | Paid in Full<br>Up to 30 days per Year of Insurance |                                |                                          |
| Surgeon's and Anaesthetist's Fees                                                                                                                                                  | Paid in Full                                        |                                |                                          |
| Specialist Physician's Fees (for regular visits by specialist during stays in hospital, including intensive care, if required by medical necessity)                                | Paid in Full                                        |                                |                                          |
| Surgical Procedures                                                                                                                                                                | Paid in Full                                        |                                |                                          |
| High Dependency and Intensive Care Units                                                                                                                                           | Paid in Full                                        |                                |                                          |
| Prophylactic Surgery (if there is a significant family history and/or it is deemed appropriate following genetic test in an effort to prevent cancer developing)                   | Paid in Full                                        |                                |                                          |

- Inpatient/Day Case Healthcare Benefits**

| <b>Mandatory Coverage</b>                                                                                           | <b>Reference Limit / Level</b>                                                       | <b>Insurer Proposed Cover / Limit</b> | <b>Clarifications / Conditions / Deviations</b> |
|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------------|
| Reconstructive Surgery (to restore appearance following illness, injury or surgery)                                 | Paid in Full                                                                         |                                       |                                                 |
| Obesity Surgery                                                                                                     | Paid in Full                                                                         |                                       |                                                 |
| Sleep Surgery (Uvulopalatopharyngoplasty – UPPP)                                                                    | Paid in Full                                                                         |                                       |                                                 |
| Gender Confirmation Surgery                                                                                         | Up to £70,000 / \$105,000 / €105,000 / CHF105,000 per lifetime                       |                                       |                                                 |
| Cancer Treatment (includes consultation, surgery, drugs, diagnostic tests, oncology, radiotherapy and chemotherapy) | Paid in Full                                                                         |                                       |                                                 |
| Cancer Related Appliances                                                                                           | Paid in Full                                                                         |                                       |                                                 |
| HIV / AIDS (including drug therapy and/or antiretroviral therapy)                                                   | Paid in Full                                                                         |                                       |                                                 |
| Rehabilitation and Physiotherapy                                                                                    | Paid in Full                                                                         |                                       |                                                 |
| Diagnostic Tests (including pathology, x-rays, radiology, CAT scan, MRI scan and PET scan)                          | Paid in Full                                                                         |                                       |                                                 |
| Inpatient Cash Benefit                                                                                              | £100 / \$150 / €150 / CHF150 each night up to 30 nights per Year of Insurance        |                                       |                                                 |
| Home Nursing Charges                                                                                                | Paid in Full                                                                         |                                       |                                                 |
| Surgical Appliance and/or Medical Appliance                                                                         | Paid in Full                                                                         |                                       |                                                 |
| Organ Transplant                                                                                                    | Paid in Full                                                                         |                                       |                                                 |
| Kidney Dialysis                                                                                                     | Paid in Full                                                                         |                                       |                                                 |
| Psychiatric Care (in respect of mental disorders)                                                                   | Paid in Full<br>Up to 30 days per Year of Insurance                                  |                                       |                                                 |
| Hospice and Palliative Care                                                                                         | Paid in Full<br>Up to £40,000 / \$60,000 / €60,000 / CHF60,000 per Year of Insurance |                                       |                                                 |
| Private Ambulance (to or from a hospital when ordered for medical reasons)                                          | Paid in Full                                                                         |                                       |                                                 |
| Emergency In-patient Dental                                                                                         | Paid in Full                                                                         |                                       |                                                 |

- Outpatient Healthcare Benefits**

| <b>Mandatory Coverage</b>                                    | <b>Reference Limit / Level</b>        | <b>Insurer Proposed Cover / Limit</b> | <b>Clarifications / Conditions / Deviations</b> |
|--------------------------------------------------------------|---------------------------------------|---------------------------------------|-------------------------------------------------|
| Out-patient Annual Benefit – Maximum per Member or Dependent | Paid in Full up to overall plan limit |                                       |                                                 |
| Non-surgical and Minor Surgical Procedures and Treatment     | Paid in Full                          |                                       |                                                 |

|                                                                                                        |                             |  |  |
|--------------------------------------------------------------------------------------------------------|-----------------------------|--|--|
| Consultations with Medical Practitioners and Specialists                                               | Paid in Full                |  |  |
| Telehealth Consultations                                                                               | Covered up to policy limits |  |  |
| Diagnostic Tests (includes pathology, X-rays, radiology, electrocardiogram (ECG) and ultrasound scans. | Paid in Full                |  |  |

- Outpatient Healthcare Benefits – continued**

| <b>Mandatory Coverage</b>                                                                                                                        | <b>Reference Limit / Level</b>                                   | <b>Insurer Proposed Cover / Limit</b> | <b>Clarifications / Conditions / Deviations</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|---------------------------------------|-------------------------------------------------|
| Advanced Medical Imaging (including MRI, CT and positron emission tomography)                                                                    | Paid in Full                                                     |                                       |                                                 |
| Cancer Treatment (including consultations, surgery, drugs, diagnostic tests, oncology, radiotherapy and chemotherapy)                            | Paid in Full                                                     |                                       |                                                 |
| HIV / AIDS (including drug therapy or antiretroviral therapy)                                                                                    | Paid in Full                                                     |                                       |                                                 |
| Hormone Replacement Therapy (HRT)                                                                                                                | Paid in Full                                                     |                                       |                                                 |
| Prescribed Medicines/Drugs and Dressings                                                                                                         | Paid in Full                                                     |                                       |                                                 |
| Physiotherapy, Chiropractic, Osteopathy and Chiropody Treatment                                                                                  | Paid in Full                                                     |                                       |                                                 |
| Speech Therapy, Oculomotor and Occupational Therapy                                                                                              | Paid in Full                                                     |                                       |                                                 |
| Alternative Therapies (including acupuncture and homeopathy)                                                                                     | Paid in Full                                                     |                                       |                                                 |
| Annual Routine Tests (one eye test and hearing test for children)                                                                                | Paid in Full                                                     |                                       |                                                 |
| Well Child Tests (including physical examination, development assessment, anticipatory guidance, appropriate immunizations and laboratory tests) | Paid in Full                                                     |                                       |                                                 |
| Adult Vaccinations (for influenza, HPV Gardasil, Pneumococcal vaccine, varicella, zoster)                                                        | Paid in Full                                                     |                                       |                                                 |
| Travel Vaccinations (immunizations to employees and/or dependents related to travel)                                                             | Paid in Full                                                     |                                       |                                                 |
| Emergency Dental Treatment                                                                                                                       | Up to £2,000 / \$3,000 / €3,000 / CHF3,000 per Year of Insurance |                                       |                                                 |
| Psychiatric Care in respect of mental disorders                                                                                                  | Paid in Full<br>Up to 80 sessions per Year of Insurance          |                                       |                                                 |

|                                                                  |                                                                  |  |  |
|------------------------------------------------------------------|------------------------------------------------------------------|--|--|
| Surgical Appliance and/or Medical Appliance                      | Paid in Full                                                     |  |  |
| Medical Aids necessary and prescribed to support everyday living | Up to £1,000 / \$1,500 / €1,500 / CHF1,500 per Year of Insurance |  |  |
| Sleep Apnea Appliance                                            | Paid in Full                                                     |  |  |

## • Maternity Benefits

| Mandatory Coverage                                                                                                                                  | Reference Limit / Level | Insurer Proposed Cover / Limit | Clarifications / Conditions / Deviations |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|--------------------------------|------------------------------------------|
| Routine Maternity Cover and Childbirth at Home                                                                                                      | Paid in Full            |                                |                                          |
| Complicated Maternity Cover (for inpatient, day case or outpatient complicated maternity expenses)                                                  | Paid in Full            |                                |                                          |
| Newborn Care (up to 10 days routine care for the baby following birth and all treatment required for the baby during the first 90 days after birth) | Paid in Full            |                                |                                          |

## • Wellness Benefits

| Mandatory Coverage                                                                                                                                                                                                        | Reference Limit / Level                                          | Insurer Proposed Cover / Limit | Clarifications / Conditions / Deviations |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|--------------------------------|------------------------------------------|
| Routine Adult Physical Exams                                                                                                                                                                                              | Up to £1,000 / \$1,500 / €1,500 / CHF1,500 per Year of Insurance |                                |                                          |
| Pap Smear (annual Papanicolaou screening)                                                                                                                                                                                 | Paid in Full                                                     |                                |                                          |
| Prostate Cancer Screening (annual prostate cancer screening for males over 50 years old)                                                                                                                                  | Paid in Full                                                     |                                |                                          |
| Mammograms for Breast Cancer Screening or Diagnostic Purposes (including a baseline mammogram between 35-39 years, a mammogram every two years between 40-49 years and a mammogram every year for women aged 50 and over) | Paid in Full                                                     |                                |                                          |
| Bowel Cancer Screening (every five years for members over 50 years old or over 40 if there is an immediate family history of bowel cancer)                                                                                | Paid in Full                                                     |                                |                                          |
| Bone Densitometry (one scan every five years for women aged 50 and over)                                                                                                                                                  | Paid in Full                                                     |                                |                                          |

- **Pandemics, Epidemics, and Infectious Illness**

| <b>Mandatory Coverage</b>                                                 | <b>Reference Limit / Level</b>                   | <b>Insurer Proposed Cover / Limit</b> | <b>Clarifications / Conditions / Deviations</b> |
|---------------------------------------------------------------------------|--------------------------------------------------|---------------------------------------|-------------------------------------------------|
| Testing for Future Emergence of Pandemic, Epidemic and Infectious Illness | Covered up to Out-Patient Diagnostic Tests Limit |                                       |                                                 |
| Drug Shipment                                                             | Covered unless prevented by local restrictions   |                                       |                                                 |

- **Whole Health Services**

| <b>Mandatory Coverage</b>                                                                                                                                                       | <b>Reference Limit / Level</b> | <b>Insurer Proposed Cover / Limit</b> | <b>Clarifications / Conditions / Deviations</b> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|---------------------------------------|-------------------------------------------------|
| Global Telehealth (video or phone consultations with a licensed doctor to receive answers to health questions, diagnosis, treatment options and convenient appointment options) | Included                       |                                       |                                                 |
| Online Health Platform                                                                                                                                                          | Included                       |                                       |                                                 |

- **Whole Health Services – continued**

| <b>Mandatory Coverage</b>              | <b>Reference Limit / Level</b>                                                                                                                                                                                                                                                                                                                                                                                               | <b>Insurer Proposed Cover / Limit</b> | <b>Clarifications / Conditions / Deviations</b> |
|----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------------|
| Employee Assistance Programme          | Insurance will provide unlimited access to telephone support. The programme is to be available 24/7 through a toll-free line. A multilingual team of qualified counsellors will help with work, personal or family issues, including advice relating to legal, financial, childcare or elderly care matters. Answer plan questions, assess the problem discuss and develop an action plan together with the member. Included |                                       |                                                 |
| Pre-departure Medical Assessment       | Included                                                                                                                                                                                                                                                                                                                                                                                                                     |                                       |                                                 |
| Decision Support Programme             | Included                                                                                                                                                                                                                                                                                                                                                                                                                     |                                       |                                                 |
| Case Management Programme              | Included                                                                                                                                                                                                                                                                                                                                                                                                                     |                                       |                                                 |
| Chronic Condition Management Programme | Included                                                                                                                                                                                                                                                                                                                                                                                                                     |                                       |                                                 |

- **International Emergency Services**

| <b>Mandatory Coverage</b>                                                                                                                                                                        | <b>Reference Limit / Level</b>                                                                | <b>Insurer Proposed Cover / Limit</b> | <b>Clarifications / Conditions / Deviations</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------------|
| Area of Cover                                                                                                                                                                                    | Worldwide, excluding USA – paid in nearest location where treatment is available              |                                       |                                                 |
| Medical Evacuation and Assistance Annual Maximum Limit                                                                                                                                           | 100% up to annual maximum per Year of Insurance                                               |                                       |                                                 |
| Medical Evacuation and Assistance Services - Search and/or Rescue Costs                                                                                                                          | £1,275 / €1,500 / CHF1,500 / \$1,500 up to overall maximum per annum                          |                                       |                                                 |
| Medical Evacuation and Assistance Services - Dispatch of Medicines Unavailable Locally                                                                                                           | 100% up to overall maximum per annum                                                          |                                       |                                                 |
| Repatriation Assistance - Organising and Paying the Cost for return or transportation to a hospital                                                                                              | 100% up to overall maximum per annum                                                          |                                       |                                                 |
| Repatriation Assistance - Organising and Paying the Cost of an insured Travel Companion and Minor Children                                                                                       | Outward/Return, 2 journeys per annum £1,000 / €1,500 / CHF1,500 / \$1,500                     |                                       |                                                 |
| Repatriation Assistance - Reimbursement of Accommodation Costs and Those Incurred by the Insured Members of the Family or an Insured Person Traveling with the member                            | 100% up to £85 / €100 / CHF100 / \$100 per day up to overall maximum per annum (max. 10 days) |                                       |                                                 |
| Hospitalisation in situ paying the costs that enable a member of the family of the member to get them to the hospital - Outward/ Return Journey/ Accommodation Locally Until You Are Repatriated | 100% up to £85 / €100 / CHF100 / \$100 per day up to overall maximum per annum (max. 10 days) |                                       |                                                 |
| Early Return Assistance - Organising and paying transportation costs                                                                                                                             | 100% up to overall maximum per annum                                                          |                                       |                                                 |
| Assistance in the event the organisation assignment being curtailed - Paying the Travel Costs for Replacing a Colleague                                                                          | 100% up to overall maximum per annum                                                          |                                       |                                                 |
| Unforeseen Assistance – Communication with family or company, Theft Identity Documents, Credit Cards, Travel Tickets or Business Documents                                                       | 100% up to £340 / €400 / CHF400 / \$400 up to overall maximum per annum                       |                                       |                                                 |
| Psychological Support in the Event of Severe Trauma as a Result of a Covered 'Illness or Accident'                                                                                               | 100% up to £85 / €100 / CHF100 / \$100 per day up to overall maximum per annum (max. 10 days) |                                       |                                                 |
| In the event of an Insured Person's Death - Transporting the Body                                                                                                                                | 100% up to overall maximum per annum                                                          |                                       |                                                 |

|                                                                                                                                                         |                                                                      |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|--|--|
| In the event of an Insured Person's Death -Funeral Costs Necessary for Transportation                                                                   | £2,550 / €3,000 / CHF3,000 / \$3,000 up to overall maximum per annum |  |  |
| In the event of an Insured Person's Death -Additional Costs for the Transportation of the Insured Members of the Deceased's Family or an Insured Person | 100% up to overall maximum per annum                                 |  |  |
| In the event of an Insured Person's Death -Burial at the Location                                                                                       | 100% up to overall maximum per annum                                 |  |  |

## • Dental Coverage

| <b>Mandatory Coverage</b>                                                                                                                                            | <b>Reference Limit / Level</b>                                                           | <b>Insurer Proposed Cover / Limit</b> | <b>Clarifications / Conditions / Deviations</b> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------------|
| Annual Benefit                                                                                                                                                       | Up to £3,500 / \$5,250 / €5,250 / CHF5,250 per member or defendant per Year of Insurance |                                       |                                                 |
| Investigative and preventive treatment (including routine check ups, examinations, x-rays, scale & polish)                                                           | Paid in Full<br>Up to 2 visits per Year of Insurance                                     |                                       |                                                 |
| Basic Restorative Treatment, periodontal Treatment and Treatment of Dental Injury (including root canal treatment, anesthetics, extractions and surgical procedures) | 80% refund                                                                               |                                       |                                                 |
| Major Restorative (including crowns, implants, inlays, dentures)                                                                                                     | 50% refund                                                                               |                                       |                                                 |
| Orthodontic Treatment – for dependent under the age of 18                                                                                                            | 50% refund<br>Up to £1,000 / \$1,500 / €1,500 / CHF1,500 per Year of Insurance           |                                       |                                                 |

## • Vision Coverage

| <b>Mandatory Coverage</b>                                                         | <b>Reference Limit / Level</b>                           | <b>Insurer Proposed Cover / Limit</b> | <b>Clarifications / Conditions / Deviations</b> |
|-----------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------------------|-------------------------------------------------|
| One eye examination per Year of Insurance by an Optometrist or an Ophthalmologist | Paid in Full                                             |                                       |                                                 |
| Expenses for lenses to correct vision and Eyeglass frames                         | Up to £250 / \$375 / €375 / CHF375 per Year of Insurance |                                       |                                                 |