



# TransPeshawar (The Urban Mobility Company)

Addendum-1  
For Provision of Health Insurance Services for TransPeshawar



**Note: The changes/addendum are highlighted in red.**

**1. Breakup of Quoted Premium  
(To be submitted on Official Company Letterhead Duly Signed & Stamp)**

S. NO	CATEGORY	AGE GROUP	NUMBER of PERSONS	YEARLY PREMIUM
01	Male Employee	18-25		
02	Male Employee	26-35		
03	Male Employee	36-45		
04	Male Employee	46-55		
05	Male Employee	56-60		
06	Male Employee	Above 60		
07	Female Employee	18-25		
08	Female Employee	26-35		
09	Female Employee	36-45		
10	Female Employee	46-55		
11	Female Employee	56-60		
12	Female Employee	Above 60		
13	Male Spouse	18-25		
14	Male Spouse	26-35		
15	Male Spouse	36-45		
16	Male Spouse	46-55		
17	Male Spouse	56-60		
18	Male Spouse	Above 60		
19	Female Spouse	18-25		
20	Female Spouse	26-35		
21	Female Spouse	36-45		
22	Female Spouse	46-55		
23	Female Spouse	56-60		
24	Female Spouse	Above 60		
25	Sons & Daughters	25 or Below		
26	Daughters (Unmarried)	25 & Above		
27	<b><u>Parents</u></b>	<b><u>60 or Below</u></b>		
28	<b><u>Parents</u></b>	<b><u>61-80</u></b>		
29	<b><u>Parents</u></b>	<b><u>Above 80</u></b>		
	TOTAL			

#### 4. TERMS AND CONDITIONS FOR PROVISION OF SERVICES

4. Processing of Claim

- c) The Service Provider shall ensure the payment of claim within 15 days **at max.** subject to fulfillment of minimum required formalities.

#### TERMS OF REFERENCE (TORs)

**I. General Terms and Conditions**

4. Insurance coverage to neonatal babies shall be provided as per assigned **hospitalization** limits of the employee.

**II. Scope of Work**

- d) Eligible Medical Expenses (including but not limited) to be covered from ANNUAL HOSPITALIZATION LIMITS shall include Hospitalization & Day Care Treatment as Follows:

HOSPITALIZATION	DAY CARE
<ul style="list-style-type: none"> <li>• Daily Room &amp; Board Charges</li> <li>• In-Hospital Consultation Charges</li> <li>• Surgical Fee</li> <li>• Diagnostic Investigations</li> <li>• OT Charges</li> <li>• Blood &amp; Oxygen Supplies</li> <li>• ICU/CCU/SCU/HDU Charges</li> <li>• Organ Transplant</li> <li>• Local Ambulance Charges</li> <li>• Burns</li> <li>• Stroke/CVA</li> <li>• Cancer (up to hospitalization limit)</li> <li>• Pre &amp; Post Hospitalization including OPD, Medicines, Consultation &amp; Diagnostic Tests before &amp; after (30 Days.)</li> <li>• Angioplasty / By-Pass Surgery/Stunts</li> <li>• Thyroid Dichotomy</li> <li>• Miscellaneous Hospital Services and Supplies</li> <li>• Emergency Room Treatment leading to Hospitalization.</li> <li>• Other Operative Procedures.</li> </ul>	<ul style="list-style-type: none"> <li>• Lithotripsy</li> <li>• Endoscopy</li> <li>• Excision Biopsy</li> <li>• Gastroscopy</li> <li>• Partial Mastectomy</li> <li>• Tonsillectomy / Adenoidectomy</li> <li>• Veins / Varicose</li> <li>• Non-Malignant Tumors/Abscess</li> <li>• Cholecystectomy</li> <li>• Herniorrhaphy</li> <li>• Appendectomy</li> <li>• <b>Cataract Surgery limit up to PKR. 60,000/-</b></li> <li>• Angiography</li> <li>• MRI</li> <li>• CT Scan</li> <li>• Thallium Scan</li> <li>• Kidney Dialysis</li> <li>• Treatment of Cancer (including Chemotherapy with pre &amp; post cover) up to full Hospitalization Limits.</li> <li>• Other day care procedures.</li> </ul>

e) Details of the employees according to their categories covered under the hospitalization coverage are given below:

Details	Category						TOTAL
	A	B	C	D	E	F	
Employees	2	5	6	6	25	16	60
Spouse	2	5	6	5	11	8	37
Child	5	13	15	16	17	20	86
Parents	4	7	9	10	<u>44</u>	26	100
<b>TOTAL</b>	<b>13</b>	<b>30</b>	<b>36</b>	<b>37</b>	<b><u>97</u></b>	<b>70</b>	<b>283</b>

f) The categorized hospitalization benefit plan of TransPeshawar as under:

Sr. #	Benefits / Coverage	Categories and Annual Entitlements in Rs.					
		A	B	C	D	E	F
1.	<b>Hospitalization</b> (Employees, Spouses, Children, & <b>Parents</b> )	600,000	450,000	300,000	200,000	150,000	100,000
2.	<b>Daily Room &amp; Board Limits</b>	15,000	12,000	10,000	8,000	5,000	3,000
3.	<b>Normal Delivery &amp; Miscarriage</b>	75,000	65,000	60,000	50,000	40,000	30,000
4.	<b>Caesarean Section &amp; Multiple Births</b>	120,000	100,000	90,000	70,000	50,000	40,000