



# KENYA FERRY SERVICES LTD.

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Our Ref: **KFS/SMI/02/02/2020**

**6<sup>th</sup> March 2020**.....20.....

To All Bidders,

## ADDENDUM 2

### TENDER NO. KFS/SMI/02/02/2020- PROVISION OF STAFF MEDICAL INSURANCE COVER

Reference is made to the above named tender.

Kenya Ferry Services Ltd issues a clarification following a request by one of the prospective bidders as follows;

#### Clarification sought

1. What is the In-Patient limit for option 3 as there is none indicated?
2. Are all the Out-Patient options required inclusive of copay hence the reason copay has been indicated in the table?

#### Response


The table on cover limits in the tender documents is hereby substituted as follows:

CATEGORY	OPTION I (A) Annual limit per member family	OPTION I (B) Annual limit per member family	Premium	OPTION 2 (A) Annual limit per member family	OPTION 2 (B) Annual limit per member family	Premium
<b>OUT PATIENT</b>						
CEO	140,000.00	Co-pay	.....	160,000.00	Co-pay	.....
HODS	120,000.00	Consultation fee	.....	140,000.00	Consultation fee	.....
OTHER MGT	100,000.00	limit at Kshs	.....	120,000.00	limit at Kshs	.....
NON MGT	90,000.00	800.00 payable by the insurance per visit while employee pays balance ( On consultation fee only)	.....	100,000.00	800.00 payable by the insurance per visit while employee pays balance ( On consultation fee only)	.....
<b>IN PATIENT</b>						
CEO	3,300,000.00	3,300,000.00	.....	2,500,000.00	2,500,000.00	.....
HODS	2,500,000.00	2,500,000.00	.....	2,000,000.00	2,000,000.00	.....
OTHER MGT	800,000.00	800,000.00	.....	1,500,000.00	1,500,000.00	.....
NON MGT	700,000.00	700,000.00	.....	1,000,000.00	1,000,000.00	.....

All other conditions remain as stated in the tender.

Yours Faithfully,

**For: KENYA FERRY SERVICES LTD**

A handwritten signature in blue ink, appearing to be 'J. Cirindi', written over a horizontal line.

J. Cirindi

**PROCUREMENT & SUPPLIES MANAGER**

**FOR: MANAGING DIRECTOR**