Kimisitu Investment Company PLC
'Your umbrella in fair weather'

AEA Plaza, 4th Floor, Valley Road | P.O. Box 37159, 00200 | Nairobi, Kenya

REQUEST FOR PROPOSALS (RFP)

PROVISION OF STAFF GROUP MEDICAL INSURANCE COVER FOR THE 2027 POLICY PERIOD RFP REFERENCE: KICL/RFP/MED/2026/03

Item	Particulars
RFP reference	KICL/RFP/MED/2026/03
Date of issue	26-Nov-26
Closing date	11-Dec-26
Closing time	4:00 p.m. East Africa Time
Procuring entity	Kimisitu Investment Company PLC
Policy period	15 January 2027 to 14 January 2028
Application fee	KES 4,000 (non-refundable)
Proposal validity	90 days from the closing date
Submission	KICL Tender Box, AEA Plaza, 4th Floor, Valley Road, Nairobi

This document is issued to invited bidders only. It remains the property of Kimisitu Investment Company PLC and shall be treated as confidential.

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SECTION 1: INVITATION TO SUBMIT A PROPOSAL

Date: 26th November 2026

To*: [Name of Invited Insurance Company]*

RE: INVITATION TO SUBMIT A REQUEST FOR PROPOSAL (RFP) FOR THE PROVISION OF STAFF GROUP MEDICAL INSURANCE COVER FOR THE 2027 POLICY PERIOD

Kimisitu Investment Company PLC (KICL or the Company) invites your organization to submit a proposal for the provision of comprehensive Group Medical Insurance Cover for its employees and eligible dependants for the policy period 15 January 2027 to 14 January 2028.

The objective of this procurement is to engage a reputable, financially sound and experienced insurance service provider capable of delivering comprehensive, affordable and reliable medical insurance services while ensuring value for money.

The proposed cover shall comprise the mandatory benefit limits set out in Table 1, quoted per family.

Table 1: Mandatory benefit limits

No.	Benefit Category	Required Limit per Family (KES)
1	Inpatient	1,000,000
2	Outpatient	150,000
3	Dental	50,000
4	Optical	50,000
5	Maternity	100,000
6	Last Expense	100,000
7	General Medical Check-up	25,000

Bidders shall submit comprehensive technical and financial proposals addressing the requirements, specifications, evaluation criteria and conditions detailed in this RFP.

1.1 RFP Application Fee

Each interested bidder shall pay a non-refundable application fee of **KES 4,000 (Kenya Shillings Four Thousand Only)**. Payment shall be made through the following designated channels:

Particulars	Details
Payment method	MPESA
Paybill / Account number	Paybill number: 544890 Account number: **MEDICAL INSURANCE**
Account name	Kimisitu Investment Company PLC

Proof of payment shall be attached to the Technical Proposal. Failure to submit proof of payment shall render the proposal non-responsive. The fee is non-refundable irrespective of the outcome of the process.

1.2 Clarifications

Any request for clarification regarding this RFP shall be submitted in writing to:

The Procurement Committee
Kimisitu Investment Company PLC
AEA Plaza, 4th Floor, Valley Road
Nairobi, Kenya
Email: Procurement@kimisituinvestment.co.ke, copied to info@kimisituinvest.co.ke

All clarification requests must be received by **9 December 2026**. Responses to material clarifications shall be communicated in writing to all bidders to ensure fairness and transparency.

1.3 General Conditions

KICL reserves the right to accept or reject any proposal, in whole or in part, and to cancel or terminate the procurement process in accordance with its approved procurement procedures and applicable requirements, as further set out in Section 15.

The issuance of this invitation shall not constitute a commitment by KICL to award a contract to any bidder.

We look forward to receiving your proposal and to establishing a mutually beneficial working relationship.

Yours faithfully,



_____

STANLEY HUSSEIN

Chief Executive Officer

Kimisitu Investment Company PLC

SECTION 2: BACKGROUND AND PURPOSE

KICL recognizes the importance of employee health and welfare in promoting staff productivity, retention and organizational performance.

The Company therefore intends to engage a competent insurance service provider to provide comprehensive medical insurance cover for its employees and eligible dependants. The selected provider will be expected to demonstrate:

i. Adequate medical benefits and comprehensive healthcare coverage.
ii. Access to a wide and reputable network of hospitals and healthcare providers.
iii. Efficient claims administration and settlement.
iv. Responsive customer service and effective account management.
v. Competitive and transparent premium pricing.
vi. Financial stability, regulatory compliance and demonstrated experience in managing corporate medical schemes.

SECTION 3: ELIGIBILITY AND MEMBERSHIP

The proposed scheme shall cover KICL employees and their eligible dependants.

Bidders shall clearly state:

i. The maximum eligible age for principal members and dependants.
ii. The definition of eligible dependants.
iii. The rules governing registration of newborn children.
iv. The procedures for adding or removing members.
v. Premium adjustments arising from membership changes.
vi. The treatment of employees who join or leave employment during the policy period.

SECTION 4: SCOPE OF SERVICES

The successful bidder shall provide Group Medical Insurance Cover for KICL employees and their eligible dependants for the policy period 15 January 2027 to 14 January 2028. The scope of services shall include, but not be limited to:

i. Provision of inpatient and outpatient medical insurance.
ii. Provision of dental, optical and maternity benefits.
iii. Provision of last expense benefits.
iv. Provision of general medical check-up benefits.
v. Access to an extensive network of hospitals, clinics, laboratories and pharmacies.
vi. Issuance of medical membership cards or equivalent digital access credentials.
vii. Administration and settlement of eligible medical claims.
viii. Provision of emergency medical assistance and referral services.
ix. Provision of periodic claims utilization and scheme performance reports.
x. Designation of a dedicated relationship or account manager.
xi. Provision of member education and sensitization on policy benefits and utilization.
xii. Assistance with member registration, additions, deletions and amendments during the policy period.
xiii. Any other additional services or value additions proposed by the bidder.

The bidder shall clearly explain how each of the above services will be delivered.

SECTION 5: REQUIRED MEDICAL BENEFITS AND LIMITS

5.1 Mandatory Benefit Schedule

Bidders shall quote for the mandatory benefits in Table 2. The stated limits constitute the minimum required cover and shall be quoted on a per-family basis.

Table 2: Mandatory benefit limits per family

No.	Benefit Category	Required Limit per Family (KES)
1	Inpatient	1,000,000
2	Outpatient	150,000
3	Dental	50,000
4	Optical	50,000
5	Maternity	100,000
6	Last Expense	100,000
7	General Medical Check-up	25,000

5.2 Specific Requirements

Bidders shall provide detailed information on each of the following benefit categories.

(a) Inpatient Cover

- Hospitalization and accommodation.
- Surgical procedures and specialist fees.
- Intensive Care Unit (ICU) and High Dependency Unit (HDU).
- Emergency admissions.
- Diagnostic investigations and laboratory services.
- Cancer treatment and management.

- Chronic and pre-existing conditions.
- Kidney dialysis and other specialized treatments.
- Day-care procedures.
- Ambulance and emergency evacuation services.
- Post-hospitalization treatment and follow-up.

(b) Outpatient Cover

- General practitioner and specialist consultations.
- Prescribed medication.
- Laboratory and diagnostic investigations.
- Physiotherapy.
- Minor procedures.
- Chronic disease management.
- Emergency outpatient treatment.
- Mental and psychological healthcare, where covered.

(c) Dental Cover

- Dental consultations and examinations.
- Routine dental procedures.
- Tooth extractions.
- Fillings and other restorative procedures.
- Root canal treatment.
- Other dental procedures, clearly indicating exclusions.

(d) Optical Cover

- Eye examinations.
- Prescription lenses.
- Spectacles and frames.
- Contact lenses, where covered.
- Other optical services, clearly indicating any sub-limits.

(e) Maternity Cover

- Normal delivery.
- Caesarean section.
- Pre-natal and post-natal care.
- Complications arising from pregnancy and childbirth.
- Newborn care, clearly indicating the extent and duration of cover.

(f) Last Expense Cover

- Death benefit for the principal member.
- Death benefit for eligible dependants.
- Benefit payable per covered person.
- Documentation and claims settlement requirements.

(g) General Medical Check-up

- Routine medical examinations.
- Basic laboratory investigations.
- Other preventive health screening services.
- Frequency of utilisation and applicable restrictions.

5.3 Benefit Interpretation and Conditions

Bidders shall:

i. Confirm that the stated limits are available on a per-family basis for the entire policy year.

ii. Indicate whether each benefit is an independent annual limit or subject to an overall aggregate limit.

iii. Disclose all sub-limits, co-payments, deductibles, waiting periods and restrictions.

iv. Clearly identify the exclusions applicable to each benefit.

v. Indicate whether benefits are shared among family members or available separately to each member.

vi. State whether unused benefit limits may be carried forward; if not, this shall be expressly stated.

vii. Identify any additional benefits included at no extra cost.

No reduction of the mandatory benefit limits shall be permitted in the base proposal. Any enhanced benefits shall be presented separately as optional enhancements under Annex 3.

SECTION 6: TECHNICAL REQUIREMENTS

Bidders shall submit a comprehensive technical proposal addressing the following areas.

6.1 Company Profile and Experience

Bidders shall provide:

i. A company profile covering background, ownership and organizational structure.

ii. Evidence of at least three (3) similar medical insurance contracts undertaken within the last three (3) years.

iii. Details of experience in serving corporate and institutional clients, including at least three (3) relevant client references.

iv. Evidence of financial capacity and operational capability.

Where an insurance intermediary is submitting the proposal, it shall identify the proposed underwriting insurer and provide evidence of its authority to act on the insurer's behalf.

6.2 Hospital and Healthcare Provider Network

Bidders shall provide:

i. A comprehensive list of hospitals and healthcare providers within 47 counties in Kenya, categorized into the applicable provider tiers.

ii. Details of access to Level 4, Level 5 and Level 6 hospitals.

iii. Availability of specialist facilities and referral hospitals.

iv. Network coverage in counties where KICL employees may reside or work.

v. Procedures for accessing out-of-network treatment and for emergency treatment.

Bidders shall specifically identify any restrictions on access to major hospitals and specialist facilities if any.

6.3 Claims Management

Bidders shall describe:

i. Claims submission procedures.

ii. Average claims processing and reimbursement turnaround times.

iii. Procedures for pre-authorization of inpatient treatment and for emergency admissions.

iv. Claims escalation and dispute resolution mechanisms, including processes for handling rejected or disputed claims.

v. Availability of digital claims management platforms.

6.4 Customer Service and Account Management

Bidders shall demonstrate how they will:

i. Assign a dedicated account manager(s).

ii. Provide at least two designated customer service contacts.

iii. Assist members with benefit interpretation and access to services.

iv. Conduct member sensitization sessions.

v. Provide periodic claims utilization reports.

vi. Address member complaints and service-related concerns promptly.

Bidders shall also submit a proposed implementation and member onboarding plan.

6.5 Regulatory Compliance and Financial Capacity

Bidders shall provide evidence of compliance as listed in Section 8, including licensing by the Insurance Regulatory Authority, tax compliance, audited financial statements for the latest three (3) financial years and disclosure of any material litigation, regulatory sanctions or insolvency proceedings.

SECTION 7: FINANCIAL PROPOSAL AND PRICING SCHEDULE

Bidders shall submit a detailed and itemized financial proposal in Kenya Shillings (KES), clearly indicating the premium attributable to each benefit category.

7.1 Itemized Premium Schedule

Table 3: Itemized annual premium per family

No.	Benefit Category	Required Limit per Family (KES)	Annual Premium per Family (KES)
1	Inpatient	1,000,000	
2	Outpatient	150,000	
3	Dental	50,000	
4	Optical	50,000	
5	Maternity	100,000	
6	Last Expense	100,000	
7	General Medical Check-up	25,000	
	Applicable taxes and statutory levies		
	Other charges (specify)		
	Total annual premium per family		

The bidder shall ensure that the premium allocation across benefit categories reconciles to the total annual premium quoted.

7.2 Membership-Based Premium Schedule

In addition to the itemized benefit premiums, bidders shall provide rates for the following family compositions, which also form the pricing basis of specific requirements this RFP places on membership categories.

Table 4: Annual premium by membership category

No.	Membership Category	Employees	Population	Annual Premium (KES)
1	M+0	2	2	
2	M+1	1	2	
3	M+2	2	6	
4	M+3	3	12	
5	M+4	3	16	
6	M+5	0	0	

7.3 Additional Pricing Information

Bidders shall disclose:

i. Applicable taxes and statutory levies.

ii. Any administration, policy issuance or membership fees.

iii. Any additional charges not included in the quoted premium.

iv. Premium adjustment terms for additions and deletions of members.

v. Any discounts or preferential rates offered.

vi. Optional enhancements and their corresponding additional premiums.

vii. Whether the quoted premium is guaranteed for the entire policy period.

All financial proposals shall be inclusive of all applicable charges and taxes, which must be separately disclosed.

SECTION 8: DOCUMENTS TO ACCOMPANY THE PROPOSAL

Each bidder shall submit the following documents, assembled in the order shown:

Table 5: Required submission checklist

No.	Document	Submitted (Yes/No)	Page Reference
1	Duly completed and signed Form of Tender (Annex 1)		
2	Company profile		
3	Certificate of incorporation or registration		
4	Valid IRA license or evidence of relevant regulatory authorization		
5	Current tax compliance certificate		
6	Audited financial statements for the latest three (3) financial years		
7	Evidence of relevant corporate medical insurance experience and client references		
8	Proposed hospital and healthcare provider network		

9	Detailed technical proposal		
10	Completed itemized financial proposal		
11	Sample policy wording and benefit schedule		
12	Claims management and service delivery procedures		
13	Declaration of conflict of interest (Annex 2)		
14	Bidder's compliance and deviation schedule (Annex 3)		
15	Optional enhancements schedule (Annex 4), if applicable		
16	Proof of payment of the application fee		

Any document required above that is not submitted may render the proposal non-responsive.

SECTION 9: SERVICE LEVEL REQUIREMENTS

The bidder shall meet, or propose standards not less favorable than, the minimum service levels in Table 6.

Table 6: Minimum service standards

Service Area	Required Service Standard
Medical membership cards / access credentials	Within 7 working days of receipt of complete member details
Inpatient pre-authorization	Within 1 hour of receipt of complete information, subject to medical urgency
Emergency admissions	Immediate assistance and authorization arrangements
Routine outpatient access	Cashless access within the approved provider network
Reimbursement claims	Within 14 working days of receipt of complete documentation
Member additions / deletions	Within 5 working days of receipt of complete instructions
Complaints acknowledgement	Within 1 working day
Complaints resolution	Within 5 working days, or communication of an agreed resolution timeline
Claims utilization reports	Quarterly
Account management meetings	At least quarterly

Bidders shall confirm compliance with these standards or propose alternatives, clearly explaining any deviations.

SECTION 10: PROPOSAL PREPARATION AND SUBMISSION

10.1 Composition of the Proposal

The proposal shall be submitted in two separate parts:

- **Technical Proposal:** company profile, regulatory documents, proposed benefits, hospital and healthcare provider network, claims management arrangements, service delivery standards, relevant experience and all other supporting documentation required under this RFP.
- **Financial Proposal:** the duly completed itemized premium schedules, membership-based pricing, applicable taxes, statutory levies, administrative charges and any other financial information requested in this RFP.

10.2 Packaging and Sealing

The Technical Proposal and the Financial Proposal shall each be prepared in a separate envelope, properly sealed and labelled **"TECHNICAL PROPOSAL – KICL/RFP/MED/2026/03"** and **"FINANCIAL PROPOSAL – KICL/RFP/MED/2026/03"** respectively. Both sealed envelopes shall be placed inside one larger outer envelope or package, properly sealed and clearly marked:

"REQUEST FOR PROPOSALS FOR THE PROVISION OF STAFF GROUP MEDICAL INSURANCE COVER – KICL/RFP/MED/2026/03"

The outer envelope shall bear the bidder's name, address and contact details. The bidder's name and contact details shall not appear on the inner envelopes in a manner that compromises the confidentiality of the evaluation process.

10.3 Pagination and Organization

All proposals shall be properly bound or securely fastened, consecutively paginated, legible and signed by an authorized representative of the bidder. Each part shall be accompanied by its own Table of Contents indicating the relevant sections and page numbers, and shall be organized in the order of the requirements set out in this RFP.

10.4 Submission Deadline and Location

Completed proposals shall be physically delivered and deposited in the KICL Tender Box at:

Kimisitu Investment Company PLC
AEA Plaza, 4th Floor, Valley Road
P.O. Box 37159, 00200
Nairobi, Kenya

Particulars	Details
Closing date	11 December 2026
Closing time	4:00 p.m. East Africa Time

Bidders are responsible for ensuring that their proposals are deposited in the Tender Box before the closing date and time. Proposals submitted by email, delivered to individual officers or submitted by any other means outside the designated Tender Box shall not be accepted.

10.5 Late Submissions

Any proposal deposited after the specified closing date and time shall be considered late and shall not be accepted for evaluation. KICL shall not be responsible for delays occasioned by bidders in delivering or depositing their proposals.

10.6 Proposal Validity

Proposals shall remain valid for a period of ninety (90) days from the closing date, unless otherwise extended by mutual agreement and in accordance with applicable procurement requirements.

10.7 Opening of Proposals

Proposals shall be opened in accordance with KICL's approved procurement procedures and applicable procurement requirements. Technical Proposals shall be opened and evaluated separately from Financial Proposals, which shall remain sealed and shall be opened only for bidders who qualify at the technical evaluation stage. KICL shall maintain appropriate records of the opening and evaluation process.

SECTION 11: EVALUATION OF PROPOSALS

Proposals shall undergo preliminary compliance evaluation, followed by technical and financial evaluation using the weighted scoring methodology in Table 7.

Table 7: Evaluation weighting

Evaluation Stage	Weight	Basis of Assessment
Preliminary examination	Pass / Fail	Mandatory documents, application fee, signing and packaging requirements
Technical evaluation	70%	Company profile and experience, provider network, claims management, service levels, compliance and financial capacity
Financial evaluation	30%	Total annual premium and reconciliation of the itemized schedules

Only bidders who satisfy the mandatory requirements and attain the prescribed minimum technical score shall proceed to financial evaluation. The minimum technical score and the detailed scoring matrix shall be set out in the evaluation criteria issued with this RFP.

SECTION 12: CONTRACT AND POLICY ADMINISTRATION

The successful bidder shall enter into a formal agreement with KICL and issue the relevant policy documentation before commencement of cover. The contract shall provide for:

- A policy period of twelve (12) months, commencing 15 January 2027.
- The agreed benefits, limits, premiums and applicable conditions.
- Clear claims management and settlement procedures.
- Defined service levels and performance monitoring.
- Confidentiality and protection of employee personal and medical information.
- Procedures for resolving disputes and complaints.
- Terms governing additions and deletions of members.
- Termination and renewal provisions.
- Compliance with applicable laws and regulatory requirements.

The successful bidder shall ensure that all members are able to access the agreed benefits from the commencement date.

SECTION 13: CONFIDENTIALITY AND DATA PROTECTION

All information provided by KICL in connection with this RFP shall be treated as confidential and used solely for the purpose of preparing the proposal.

The successful bidder shall comply with the Data Protection Act, 2019 and all applicable data protection regulations in Kenya. Employee personal and medical information shall not be disclosed to unauthorized parties or used for purposes unrelated to the administration of the scheme.

SECTION 14: CONFLICT OF INTEREST

Bidders shall disclose any actual or potential conflict of interest, including any relationship with a KICL employee, director or agent involved in this procurement, using the declaration in Annex 2. Failure to disclose a material conflict of interest may result in disqualification or termination of any resulting contract.

SECTION 15: RESERVATION OF RIGHTS

KICL reserves the right to:

i. Accept or reject any proposal, in whole or in part.

ii. Cancel or terminate the procurement process at any stage, subject to applicable requirements.

iii. Seek clarification or additional information from bidders.

iv. Conduct due diligence and verify information submitted by bidders.

v. Negotiate with the preferred bidder where permitted under the applicable procurement framework.

vi. Decline to make an award where the proposals do not meet the Company's requirements or do not represent value for money.

Issuance of this RFP shall not constitute a commitment by KICL to award a contract to any bidder.

ANNEX 1: FORM OF TENDER

(To be completed, signed and stamped by the bidder and submitted as the first document in the Technical Proposal.)

To: The Procurement Committee
Kimisitu Investment Company PLC
AEA Plaza, 4th Floor, Valley Road
P.O. Box 37159, 00200, Nairobi, Kenya

RE: PROVISION OF STAFF GROUP MEDICAL INSURANCE COVER FOR THE 2027 POLICY PERIOD – RFP REFERENCE KICL/RFP/MED/2026/03

1. Having examined the Request for Proposals, including the invitation, scope of services, benefit schedules, specifications, conditions and forms of tender, we, the undersigned, offer to provide the staff group medical insurance cover for the 2027 policy period in conformity with the said documents for the annual premium, fees and charges set out in our Financial Proposal.

2. We undertake to provide cover on the terms, benefit limits and service standards set out in this RFP, and to enter into a formal agreement and issue the relevant policy documentation if our proposal is accepted.

3. We confirm that we have paid the non-refundable application fee of KES 4,000 and have attached proof of payment to the Technical Proposal.

4. We confirm that the mandatory benefit limits specified in this RFP form the basis of our proposal, and that any deviation, sub-limit or exclusion has been disclosed in our Compliance and Deviation Schedule (Annex 3).

5. We agree to abide by this proposal, which shall remain valid for ninety (90) days from the closing date, and may be accepted at any time before the expiry of that period.

6. We understand that KICL is not bound to accept the lowest-priced or any proposal it may receive.

7. Until a formal agreement is executed, this Form of Tender, together with KICL's written acceptance, shall constitute a binding contract between us.

Bidder's particulars

Particulars	Bidder's Details
Name of bidder	
Postal address	
Physical address	
Telephone and email	
Company registration / incorporation number	
IRA licence number and class	
Underwriting insurer represented (if intermediary)	
KRA PIN	
Quoted annual premium per family (KES)	
Quoted total annual premium for the scheme (KES)	
Premium validity period	

Execution

Declaration	Signature
Name of authorized representative	
Designation	
Signature	
Company stamp	
Date	

In the capacity of _____, duly authorized to sign on behalf of the bidder named above.

Witness

Particulars	Witness's Details
Name	
Address and telephone	
Signature	
Date	

ANNEX 2: DECLARATION OF CONFLICT OF INTEREST

We, the undersigned, being duly authorized representatives of the bidder named below, declare that:

1. We have no conflict of interest, actual or potential, in relation to this procurement.
2. To the best of our knowledge, no director, employee or agent of the bidder has any relationship with a director, employee or agent of KICL involved in this procurement that could create a conflict of interest.
3. Where a potential conflict exists, it is fully disclosed in the table below.
4. We undertake to notify KICL in writing immediately should any conflict of interest arise during the procurement process.
5. We acknowledge that failure to disclose a material conflict of interest may lead to disqualification or termination of any resulting contract.

Disclosure of any potential conflict of interest

No.	Nature of Relationship or Interest	Parties Involved	Mitigation Measures
1			
2			

(State "Nil" if there is no conflict to declare.)

Declaration	Signature
Name of bidder	
Name of authorized representative	
Designation	

Signature	
Company stamp	
Date	

ANNEX 3: BIDDER'S COMPLIANCE AND DEVIATION SCHEDULE

Bidders shall complete the schedule below, indicating compliance with each requirement and providing details of any limitation or deviation.

No.	Requirement	Compliant (Yes/No)	Details / Remarks
1	Inpatient cover: KES 1,000,000		
2	Outpatient cover: KES 150,000		
3	Dental cover: KES 50,000		
4	Optical cover: KES 50,000		
5	Maternity cover: KES 100,000		
6	Last expense cover: KES 100,000		
7	General medical check-up: KES 25,000		
8	Wide hospital and healthcare provider network		
9	Dedicated account management		
10	Quarterly claims utilization reports		
11	Claims settlement within the service standards in Section 9		
12	Compliance with applicable data protection requirements		
13	Full Medicare and other statutory compliance, as applicable		

Important: Any deviation, exclusion, limitation or sub-limit affecting the mandatory benefits must be expressly disclosed. Failure to disclose material limitations may constitute grounds for disqualification or rejection of the proposal.

ANNEX 4: OPTIONAL ENHANCEMENTS

Bidders may propose additional benefits or enhancements beyond the mandatory requirements. Such enhancements shall be quoted separately and shall not form part of the mandatory base premium.

No.	Proposed Additional Benefit	Proposed Limit (KES)	Additional Annual Premium (KES)
1			
2			
3			
4			
5			

Signature of authorized representative: _____ Date: _____

— End of Document —