

# भारतीय प्रबन्ध संस्थान, लखनऊ INDIAN INSTITUTE OF MANAGEMENT LUCKNOW

#### **CORRIGENDUM-I**

Dated: 23/09/2022

**SUB: CORRIGENDUM IN TECHNICAL BID.** 

REF: NIT NO. - IIML/SA Insurance/12/2022-23 Dated September 21, 2022

General Health Insurance Policy for all PGP/ABM Students at IIM

Lucknow.

With reference to NIT NO. <u>IIML/SA Insurance/12/2022-23 Dated September 21, 2022</u>, it is informed that 'No Earnest Money (EMD)' is required for participation in the tender. The EMD amount mentioned on the first page of the above referred NIT may be read as 'NIL'.

While submitting the bid on eProcurement portal, in EMD part, the bidders may upload this corrigendum as proof of submission of EMD and proceed further for submission of bids.

Others terms and conditions of NIT remains the same.

-s/d-Administrative Officer PURCHASE & STORES



# भारतीय प्रबन्ध संस्थान, लखनऊ INDIAN INSTITUTE OF MANAGEMENT, LUCKNOW Prabandh Nagar, IIM Road, Lucknow-226013

NIT NO. IIML/SA\_Insurance/12/2022-23

September 21, 2022

#### **Notice Inviting Tender (NIT)**

### Subject: General Health Insurance Policy for all PGP/ABM Students at IIM Lucknow

The Indian Institute of Management Lucknow (hereinafter referred to as "IIML") invites tenders under "TWO BID SYSTEM" from *Recognized General Insurance Company* for providing Health Insurance Policy for the Students of IIM Lucknow. Interested eligible Insurance Companies (**Agents / broker are not permitted to bid**) may submit the bids through Govt. E-Procurement portal i.e. <a href="https://eprocure.gov.in">https://eprocure.gov.in</a>. A free view NIT is also available on Govt. E-Procurement portal i.e. <a href="https://eprocure.gov.in">https://eprocure.gov.in</a>. Interested Insurance Company are requested to sign-in (new user sign-in only with DSC) online to obtain user-ID and password using Digital Signature.

The tender documents comprise of technical and financial bid. It is requested to download the tender by accepting the terms and conditions. The technical and financial bid duly filled may be uploaded on E-Portal of Govt. site i.e. <a href="http://eprocure.gov.in">http://eprocure.gov.in</a> using Digital Signature before the last date and time of submission as mentioned below.

The credentials as listed ahead shall be uploaded online. The bids are to be uploaded on <a href="http://eprocure.gov.in">http://eprocure.gov.in</a> along with supporting documents. The bids shall be signed by a person duly authorized on behalf of the participating Insurance Company.

IMPORTANT DATES		
Estimated Annual Tender Value / Existing Premium	9,00,000/-	
Last date for submission of bids	01st October 2022 upto 03:00 PM	
Date and time for Opening of technical bid	03 <sup>rd</sup> October 2022 at 11:00 AM	
Date and time for Opening of financial bid	To be communicated by on CPP portal	
Performance Security	Nil	
EMD/Security deposit	Rs. 10,000/- (Approx.)	
Tender/ NIT issuing Authority	Chief Administrative Officer Indian Institute of Management Lucknow Prabandh Nagar, IIM Road, Lucknow-226013 Phone No. +91-522-669 6917/02 Email id: purchase@iiml.ac.in	

#### **ELIGIBILITY CRITERIA TO BE TECHNICALLY QUALIFIED:**

The bidders meeting the following eligibility criteria and submitting documents in support of their claims will be declared as 'Technically Qualified bidders' and the 'Financial Bid' of only technically qualified bidders will be opened:

- 1. The bidder must submit the following forms:
  - (a) Filled, signed & stamped Annexure-I & III of this document.
  - (b) The Company must be registered with IRDA for providing General Health Insurance (enclosed valid certificate with Annexure-I)
  - (c) The bidder must be registered with GST (enclose GST Registration certificate) and Income Tax Department (enclose PAN Card)

1	Policy to be issued in	Indian Institute of Management Lucknow		
	favor of			
2	Address	Indian Institute of Management Lucknow		
		Prabandh Nagar, IIM Road, Lucknow 226013		
3	Period	For Group A: From 10th Oct 2022 to 31st May 2023		
		For Group B: For One year from 10 <sup>th</sup> Oct 2022		
		It may be noted that for Group-A, existing policy expires on 9th		
		Oct 2022		
		Claim Settlement ratio for last 2 years (available) is attached.		
4	Policy Type	General Health Insurance		
5	Sum Insured	INR 1, 00,000/- Per Student,		
6	Policy conditions/ coverages	<ul> <li>a) 3% of the sum insured for both room &amp; ICU i.e. Rs.3,000/-per day</li> <li>b) Pre-existing: to be covered</li> <li>c) Maternity: Not to be covered</li> <li>d) Pre &amp; Post hospitalization: To be covered for 30 days &amp; 60 days respectively</li> <li>e) Domically Hospitalization: Not covered</li> <li>f) Waiting period: Exempted</li> <li>g) Addition &amp; deletion of lives: Yes</li> <li>h) Co-pay of any kind: No</li> <li>i) TPA: Raksha or Medi Assist or equivalent</li> <li>j) E-cards: Yes</li> <li>k) Covid-19 coverage: yes</li> </ul>		
7.	Claim settlement procedure	The insurance company shall be liable to settle the cashless claims instantly whereas, the reimbursement claims within a maximum turn-around time of fifteen (15) days after submission of documents and in case of the delay reasons has to be informed to IIML in writing. If reasons are not found justified, the Insurance Company shall be liable to pay interest as per IRDA notification.		
8.	Payment of premium	100% premium quoted by the successful bidder (the technically-qualified insurance company quoting the lowest premium) will be released by the Institute (IIML) in advance. The successful bidder will be required to issue the provisional policy immediately on receipt of premium amount and original policy within 3 days.		

#### **GENERAL TERMS AND CONDITIONS:**

- **1.** No changes shall be made in this document.
- **2.** All the pages of document along with the proposals should be duly signed & stamped by the insurance company as a token of acceptance of the terms & conditions of document.
- **3.** Proposals if not signed & stamped by the insurance company will not be entertained.
- **4.** Medi-claim Policy Cards for availing Cashless facility by all the Students to be provided within 10 days from the date of issue of the Policy.
- **5.** The Insurance Company should also confirm that, they have not been blacklisted/debarred by any organization, department etc.
- **6.** Proposals received after the closing date will not be considered.

- **7.** Return of original documents: In some cases, after the claims are submitted along with the original documents for reimbursement, where the patient is in need of the original documents after the verifications are over by the TPA/Insurer, the same should be returned on furnishing a request towards the same by the concerned student after the settlement of the case.
- **8.** Periodic meeting to be held in Institute campus between the Institute and the TPA/Insurance Company for review of cases/settlement of grievances of the students.
- **9.** Any other facilities that would be extended for the policy without any additional premium may also be stated.
- **10.** No additional terms and conditions shall beapplicable.
- **11.** The response time by the TPA at the time of admission should be maximum six hours.
- **12.** Payment shall be released by NEFT / RTGS.
- **13.** The Institute reserves the right to accept or reject any proposal in full or part without assigning any reason thereof. The decision of IIML in this regard shall be final and binding on the proposer.
- **14.** In the event of dispute, Director, IIM Lucknow shall be the sole arbitrator and his decision shall be final and binding on both the parties.

# ANNEXURE - I

# (ON THE LETTER HEAD)

# No. IIML/SA\_Insurance/12/2022-23

SL. No.	Particulars	Details
1.	Name of the Insurance company	
2.	Full particulars of the office	
	a) Address	
	b) Telephone No.	
	c) E-Mail address	
3.	IRDA Reg. No. (enclose valid certificate)	
4.	PAN No. (enclose valid certificate)	
5.	GST Reg. No. (enclose valid certificate)	
6.	Full particulars of the Third Party Administrators (if any). If more than one is available, all TPAs may be indicated.	Number of TPAs: List enclosed as Annexure
7	Enclose the Certificate of Declaration for Confirmation of IRDA guidelines (Refer Annexure-III)	Dully signed and stamp
8	snowing name & account number)	Bank Account No : IFSC No: It may be noted that premium will be transferred to this bank account of the selected insurance company.
DECLAI	RATION	
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I have carefully read and understood all the terms and conditions of the DOCUMENT and hereby  $accept \ the same.$ 

The information/document furnished along with the above application is true and authentic to the best of knowledge and belief.

Date:	Signatureoftheauthorizedperson
Place:	<b>Company Seal</b>

#### (ON THE LETTER HEAD)

## NIT No. IIML/SA\_Insurance/12/2022-23

# FINANCIAL BID (SUM ASSURED)- FORMAT FOR REFERENCE ONLY (PLEASE QUOTE YOUR BID ON BOQ SHEET AVAILABLE ON EPROCUREMENT PORTAL)

1. Providing group Medi-claim Policy for the Group A and B:

S. No.	Sum insured per Student	Premium Amount (In Rs.)	Total in Figures (In Rs.)	Total in Words (In Rupees)
01	Group-A PGP37/ABM18 Policy Period (10th Oct 2022 to 31st May 2023) Rs. 1,00,000/- (Rupees One Lakh Only) For Age Group 20-25 Years-347 Students 26-30 Years-209 Students 31-35 Years-04 Student Total-560 Students			
02	Group-B PGP38/ABM19 Policy Period (One year from date of issuance of the policy) Rs. 1,00,000/-(Rupees One Lakh Only) For Age Group 20-25 Years-451 Students 26-30 Years-123 Students 31-35 Years-02 Student Total-576 Students			

#### Note:

- 1. The Lowest bidder will be decided based on total quoted rate/premium for the plan opted by the Institute.
- 2. GST WILL BE EXTRA AS APPLICABLE.

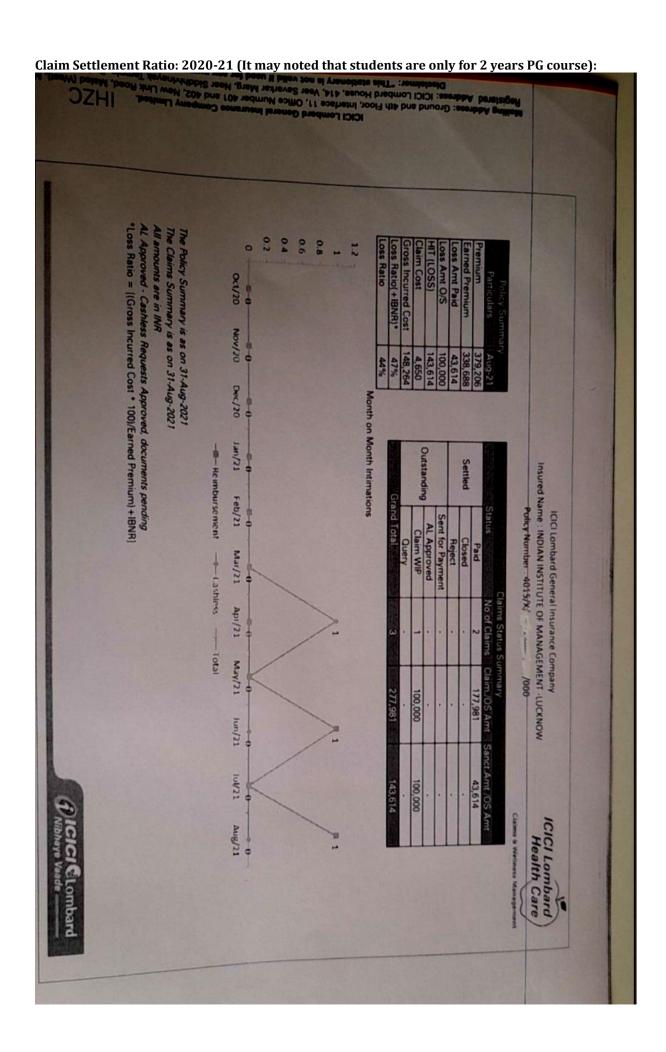
We agree with all the details of the Insurance Scheme and the Terms and Condition of tender document, against which we have quoted our premium and the quoted premium is valid for 60 days from the last date of submission of this bid.

te: Signature of the authoriz	
Place:	Company Seal

# ANNEXURE - III (ONTHELETTERHEAD)

# CERTIFICATE OF DECLARATION FOR CONFIRMATION OF IRDA GUIDELINES

1.	I/We,_			
	hereby certify that our offer submitted against NIT no.			
	dateddoes not amount to any breach of IRDA guidelines. I further confirm that in the event of disclosure at a later stage that the same are not in line with			
	IRDA Guidelines and IIML is put to any disadvantage or face cancellation of the Policy or			
	any claim becomes substandard/untenable, the whole liabilities arising out of this shall lie squarely on us.			
2.	I/Weherby undertakes that in case of any violations to the above declarations at any stage			
	of the contract, IIML reserves the sole right to cancel the contract and recover the full value of the contract			
	from us.			
3.	I/We, further certify that I am the duly authorized representative of the Insurer and competent to agree as above.			
4.	/We herby also declare that our company has not been blacklisted/debarred by any			
	organization, PSU, department etc.			
5.	I/We hereby accept all the terms and conditions of the document and premium quoted considering			
	the terms and conditions of the document.			
Date:	Signatureoftheauthorizedperson			
Place:	Company Seal			



	urance (TPA) Limited FHPL-MI	
	Institute Of Management Luckn	0W
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Policy Plan Period	10-Oct-21	9-0ct-22
Claim Analysis	Report As on :	6-Sep-22
STATUS	NUMBER	
REPORTED		AMOUNT
SETTLED	8 7	885,587 397,900
OUTSTANDING	1	397,900
Intimation		30,744
Registration	-	
For Bill Entry	-	<u>-</u>
For Adjudication	<u>-</u>	<u>-</u>
Under Query		
For Investigation	-	
Sent for Audit	_	
For Audit	-	<u>-</u> -
Audit Return		<u>-</u>
For Payment	1	30,744
For Settlement	-	30,744
CS Response	-	
Enrollment Response		<u> </u>
From CRM	-	
Insurer Authorization		
Insurer Response	-	<u> </u>
Investigation Done	-	
Query Response		
Query to Insurer	-	
Received Requests		
Refer to CRM		
Refer to CS	-	
Refer to Enrollment	_	
Refer to Insurer	_	
Cashless Approved	_	-
REJECTED & CLOSED	_	_
REJECTED & GEOSED		
	MAIN ME	MBERS Vs DEPENDANTS
MEMBER TYPE	NUMBER	AMOUNT
MAIN MEMBER	8	428,644
DEPENDANT	-	-
TOTAL	8	428,644
		GENDER WISE ANALYSIS
GENDER	NUMBER	AMOUNT
FEMALE	2	130,744
MALE	6	297,900
TOTAL	8	428,644
	RI	ELATION WISE ANALYSIS
RELATION	NUMBER	AMOUNT
Self	8	428,644

Spouse	1 -	_
Son	_	_
Daughter	_	_
Father	_	_
Mother	_	
Others	<u> </u>	
Outers		-
TOTAL	8	428,644
TOTAL	0	420,044
		ACE WICE ANALOWS
ACE	MIMDED	AGE WISE ANALSYS
AGE	NUMBER	AMOUNT
0 to 10	-	-
11 to 20	-	-
21 to 30	8	428,644
31 to 40	-	-
41 to 50	-	-
51 to 60	-	-
61 to 70	-	-
> 70	-	-
	_	
TOTAL	8	428,644
		CLAIM TYPE ANALYSIS
CLAIM TYPE	NUMBER	AMOUNT
Reimbursement	4	294,247
Cashless	4	134,397
	_	
TOTAL	8	428,644
		INCURRED CLAIMS RATIO
STATUS	NUMBER	AMOUNT
PAID	7	397,900
OUTSTANDINGS	1	30,744
PRORATA PREMIUM		344,138
ICR		124.56%
TOTAL PREMIUM		379,487
ICR		112.95%
	T-	DISEASE WISE ANALYSIS
DISEASE	NUMBER	AMOUNT
Certain conditions originating in the perinatal period	-	-
Certain infectious and parasitic diseases	-	-
Codes for special purposes	-	-
Congenital malformations, deformations and chromosomal		
abnormalities	-	-
Diseases of the blood and blood-forming organs and certain		
disorders involving the immune mechanism	-	-
Diseases of the circulatory system	3	00.071
Diseases of the digestive system		98,871
Diseases of the ear and mastoid process	-	-
Diseases of the eye and adnexa	-	
Diseases of the genitourinary system	2	66,270
Diseases of the musculoskeletal system and connective tissue	-	F0.000
Diseases of the nervous system	1	78,332
Diseases of the respiratory system		· ·

Diseases of the skin and subcutaneous tissue	-	- 1
Endocrine, nutritional and metabolic diseases	-	-
External causes of morbidity and mortality	-	-
Factors influencing health status and contact with health services	-	-
Injury, poisoning and certain other consequences of external		
causes	2	185,171
Mental and behavioural disorders	-	-
Neoplasms	-	-
Pregnancy, childbirth and the puerperium	-	-
Symptoms, signs and abnormal clinical and laboratory findings,		
not else where classified	-	-
Others	-	-
TOTAL	8	428,644

Note: Claim - Resettlement & pre/post claims are not considered as separate claims count, but amounts are considered.