NIT No: WBSEDCL /Gr. Med/2021-22/01 Date: 15.07.2021

### **INTRODUCTION:**

On April 1, 2007, the Govt. of West Bengal unbundled the erstwhile West Bengal State Electricity Board (WBSEB) into two companies viz., West Bengal State Electricity Distribution Company Limited (WBSEDCL).

The main business of WBSEDCL is distribution and hydro generation of electricity. It is also the nodal Agency of the Government of West Bengal for undertaking Rural Electrification task in the State with objective of providing access of electricity to all rural households in the state in line with the National Rural Electrification Policy.

Over the years, WBSEDCL has been continually evolving to position itself as a leading Power Utility services organization of the Country. With its extensive service network spanning across 5 Zones, 21 Regional Offices, 77 Distribution Divisions and 536 Customer Care Centers, WBSEDCL strives to provide quality power to a vast customer base of more than 2.8 crore across the length and breadth of West Bengal.

Sealed tenders are hereby invited by WBSEDCL from IRDA approved Insurance companies for Group Floater Medical Insurance Policy for their retired employees for the year 2021-22.

#### **IMPORTANT INFORMATION:**

Name of the Policy: GROUP MEDICAL INSURANCE POLICY (FLOATER BASIS) FOR THE RETIRED

EMPLOYEES OF WBSEDCL (2021-22).

**Period of Insurance:** One year from the date of Inception of the Policy.

Beneficiaries: (i) A retired employee of WBSEDCL, along with his/ her spouse, wherever

applicable, who may either be a Pensioner/ Non-Pensioner;

(ii) A person in receipt of Family Pension, following the death of the retired

employee;

(iii) A person who is not in receipt of Family Pension, but having equivalent relationship to the deceased as would have ordinarily entitled him/her to be a

family pensioner, had the deceased retired employee been a Pension holder.

**Policy Type:** Cashless Floater Type and Reimbursement Option.

Parts of the Policy: (a) Lowest Premium Amount (inclusive of GST) against fixed Sum Insured of

Rs. 2,00,000.00 per beneficiary. (PART A)

(b) Lowest Premium Amount (inclusive of GST) against fixed Sum Insured of Rs.

3,50,000.00 per beneficiary. (PART B)

The company reserves the right to implement or reject any/ all parts of the policy subject to its discretion after obtaining of bids through the tender

procedure.

**Estimated Membership:** At present around 14100 primary members are covered under the existing policy. It is predicted that 85% of them will be covered under Part A & rest 15%

of them will be covered under Part B of the proposed policy for 2021-22.

### **INSTRUCTIONS TO INTERESTED BIDDERS:**

NIT No: WBSEDCL /Gr. Med/2021-2	2/01 date 15.07.2021
Name of the Tendering Authority	The General Manager (HR&A), WBSEDCL
Address for Bid Submission	"Drop Box", Group Medical Insurance Cell, WBSEDCL, 6 <sup>th</sup> Floor, Block C, Vidyut Bhavan, Bidhannagar, Dist. – North 24 Parganas, West Bengal. PIN: 700091
Last Date & Time of Submission of Bid	18.08.2021 upto 2:00 pm.
Date & Time of Opening of Bid	18.08.2021 at 3:00 pm.
Date & Time of Pre-Bid Discussion	05.08.2021 at 3:00 pm. NB: Any query regarding NIT is to be submitted 2(Two) days prior to the pre-bid discussion in the official e-mail id:- gr.medins@gmail.com

### **General Instructions**

- 1. The offers complete in all respect, in prescribed formats, should be submitted at the specified address on or before the time and date fixed for the receipt of offers as set forth herewith in the tender documents. Offers received after stipulated time and date shall be summarily rejected. Any offer submitted by the bidder through telex/telegram/fax or e-mail would not be considered as a valid offer. No further correspondence will be entertained in this matter.
- 2. The Bidder should submit Bids in two parts viz. "Technical Bid' and 'Financial Bid'. The Technical Bid should be sealed in a separate sealed envelope, subscribing "Technical Bid for Group Medical Insurance Policy (Floater Basis) for the Retired Employees of WBSEDCL (2021-22)' and the 'Financial Bid' should be sealed in a separate sealed envelope subscribing 'Financial Bid for Group Medical Insurance Policy (Floater Basis) for the Retired Employees of WBSEDCL (2021-22)'. Both Technical and Financial Bid envelopes should be enclosed and sealed in a separate envelope marked as "Bid for Group Medical Insurance Policy (Floater Basis) for the Retired Employees of WBSEDCL (2021-22)".
- 3. All prices and other such information shall be written both in figures and words in the prescribed form. All the papers submitted with the bids as above for Technical and Financial Terms and Conditions must be signed by the tenderer. Each page of the bid document must bear the signature and seal of the tenderer at the bottom. All offers shall be either typewritten or written neatly in indelible ink. Any correction should be properly authenticated.

- 4. WBSEDCL shall not be responsible for non-receipt/non-delivery of the tender documents due to any reasons whatsoever. Tenders received after due date/ in unsealed condition will not be taken into consideration under any circumstances.
- 5. The interested bidder has to bid for all parts of the policy as bid for only one part will not be considered. Lowest bidder shall be identified on the lowest value of "P" as per the following formula.

$$P = (P1 \times 0.85 + P2 \times 0.15)$$

Where P1: Premium Quoted for Part A
P2: Premium Quoted for Part B

- 6. Technical Bid: The Technical bid must be submitted in the specified format as outlined in Annexure I along with photocopies of the documents arranged and labeled as per the eligibility criteria. Each document should be labeled on the top right so as to indicate the eligibility criteria serial number. The technical bid and the enclosed documents must bear the signature and seal of the tenderer at the bottom.
- 7. Financial Bid: The Financial Bid must be submitted in the specified format as outlined in Annexure II and contain the price bids for Part A and Part B of the policy. The offers shall be clearly legible in both figures and words. The financial bid must bear the signature and seal of the tenderer at the bottom. All bids shall remain valid for a period of 90 (ninety) days from the date of opening of tender.
- 8. Clarification of Bids: To assist in the examination, evaluation and comparison of bids the company may, at its discretion, ask the Bidder(s) for clarification(s) of the bid. The request for clarification and the response shall be in writing.
- 9. Effects and Validity of Offer
  - a) The submission of any offer connected with these specifications and documents shall constitute an agreement that the tenderer shall have no cause of action or claim, against the tendering authority for rejection of their offer. The company reserves the right to reject or accept any offer or offers at its sole discretion and any such action will not be called into question and the tenderer shall have no claim in that regard. The company further reserves the right to amend the terms & conditions before the award of the contract.
  - b) The offer shall be kept valid for acceptance for a minimum period of 90 (ninety) calendar days

from the date of opening of Bid.

- c) The offer shall be deemed to be under consideration immediately after they are opened and until such time the official intimation of award of contract is made by the company to the tenderer. While the offer is under consideration, if necessary, the tendering authority may obtain clarification on the offer by requesting for such information from any or all the tenderers either in writing or through personal contacts as may be considered necessary. The tenderer shall not be permitted to change the substance of their offer, after the offer has been opened.
- 10. Selection of Bidders: Bidders will be selected by the following steps given as under.
  - a. Short-listing of eligible vendors satisfying the technical qualification requirements laid in this Tender document.
  - b. Selection of Bidder as the Service Provider who offers the lowest price and meets the financial qualification requirements from the technically qualified short-listed vendors.
  - c. Vendors will be short listed by the duly constituted Tender Committee. The short-listed vendors may be called for detailed discussion at a specified date, time and venue if needed, by the committee.
- 11. Acceptance of Offer: The tender shall be processed as per standard procedure. The tendering authority, however, reserves the right to accept or reject any or all of the bids without disclosing any reason. The company would not be under any obligation to give clarifications to those vendors whose tenders have been rejected.
- 12. Signing of Agreement: The successful bidder(s) shall execute a Memorandum of Understanding (MoU) with the tendering authority based on this Tender Document and agreed Terms and Conditions. After the expiry of the agreement, the tendering authority, based on the performance of the services offered and on its sole discretion, may offer the successful bidder(s) to extend the contract for a period of another one year.
- 13. Delay in settlement of claim beyond prescribed limit may attract penal measures as per IRDAI guidelines.
- 14. Any attempt by any vendor to bring pressure of any kind/ canvassing/ marketing etc. in any form may disqualify the vendor for the present tender and the vendor may be liable to be debarred from bidding for tenders in future.

### **TECHNICAL BID**

NIT Reference No. & Date: To, The General Manager (HR), Corporate HR, WBSEDCL, 7th Floor, Block D, Vidyut Bhavan, Bidhannagar, Kol – 700091.

## <u>Sub: Technical Bid for Group Medical Insurance Policy (Floater Basis) for the Retired Employees of WBSEDCL</u> (2021-22)

Dear Sir,

We, the undersigned Tenderer, having read and examined in detail the scope of the work as specified in the tender, hereby submit the Technical Bid for Group Medical Insurance Policy (Floater Basis) for the Retired Employees of WBSEDCL (2021-22)

We confirm that we satisfy the qualifying criteria and have attached the photocopies of the requisite documents (as mentioned below) as documentary proofs. In case you require any further information/documentary proof in this regard during evaluation of our Bid, we agree to furnish the same in time to your satisfaction.

Sl. No.	Name of the Document	Copy enclosed (Yes/No)
1	Copy of Firm's Registration under Insurance Act 1938 and latest receipt of IRDAI i.r.o renewal of registration for financial year 2021-22	
2	Copy of valid PAN	
3	Copy of Goods and Service Tax Registration Certificate & Copy of GST Annual Return as on 31.03.2021	
4	Compliance with Solvency ratio as stipulated by IRDAI guideline	
5	Proof of at least one Group medical insurance scheme of at least 500 members	
6	Self Declaration Form (as per Format Annexure IV)	

We hereby declare that our proposal is made in good faith, without collusion or fraud and the information contained in the proposal is true and correct to the best of our knowledge & belief.

	Thanking you,	
	Yours faithfully,	
	(Signature & Seal of Authorized Signatory)	
Date:	Name:	
Place:	Designation:	
	Address & Contact No:	
	E-mail Id:	

### **FINANCIAL BID**

NIT Reference No. & Date:
To,
The General Manager (HR),
Corporate HR, WBSEDCL,
7th Floor, Block D,
VidyutBhavan,
Bidhannagar, Kol – 91.

Sub: Financial Bid for Group Medical Insurance Policy (Floater Basis) for the Retired Employees of WBSEDCL (2021-22)

Dear Sir,

We, the undersigned Tenderer, having read and examined in detail the scope of the work as specified in the tender, hereby submit the Financial Bid for Group Medical Insurance Policy (Floater Basis) for the Retired Employees of WBSEDCL (2021-22)

We are submitting the following offer for Group Floater Medical Insurance Facility for retired employees of WBSEDCL:-

**PART A**- Minimum Premium (inclusive of GST) against fixed Sum Insured of Rs. 2,00,000.00/- per beneficiary per policy with clubbing facility under hospitalization with his/her spouse:-

**PART B**-Minimum Premium (inclusive of GST) against fixed Sum Insured of Rs. 3,50,000.00/- per beneficiary per policy with clubbing facility under hospitalization with his/her spouse:-

We understand that the tendering authority reserves the right to implement or reject any/ all parts of this bid subject to its discretion after obtaining of bids through the tender procedure. We also agree to abide by all the terms & conditions mentioned under Annexure III of this tender document.

Thanking you,

Yours faithfully,

(Signature & Seal of Authorized Signatory)

Name:

Designation:

Address & Contact No:

E-mail Id:

Date:

Place:

### **ANNEXURE-III**

### **SALIENT FEATURES OF THE PROPOSED POLICY:**

(i) Class of Insurance: Group Floater Medical Insurance Scheme. (ii) Period of Insurance: Twelve months from the date of commencement of policy. (iii) No. of Primary members: (a) 12700+ (approx) primary members for Part A of Policy. (b) 1400+ (approx) primary members for Part B of Policy. (iv) Policy type: Cashless Floater Type / Reimbursement Option. (v) Premium Value: (a) Lowest Premium Amount (inclusive of GST) against fixed Sum Insured of Rs. 2,00,000.00 per beneficiary with clubbing facility under hospitalization with his/her spouse. (PART A). (b) Lowest Premium Amount (inclusive of GST) against fixed Sum Insured of Rs. 3,50,000.00 per beneficiary with clubbing facility under hospitalization with his/her spouse. (PART B). (vi) Eligibility Criteria: As per definition of "Beneficiary" above. (vii) Geographical limit: The territory of India. (viii) Policy Coverage: (i) Includes coverage of pre-existing diseases from day one. No age bar for entering member & without any prior medical examination. Employees who retire during the course of the operation of the policy and intend to join the policy may also be included against payment of pro-rata premium every Quarter & will carry full amount of coverage of sum insured (floater basis). (ii) Policy covers cashless facility in approved list of hospitals / nursing homes etc. & reimbursement of hospitalization expenses in

other cases.

(iii) In the event of any claim becoming under this policy, the insurance company will pay to the hospital (for cashless treatment) & to the insured person (for non-cashless treatment) for this purpose of the said Group Medical Insurance Scheme, the ex-employee &

his/her spouse will be treated as two distinct members.

### (ix) Hospitalization (IPD):

a)

- i) Room rent including administration charges for I.V fluid, injection charges excluding their cost in non- ICU/ HDU / ITU / ICCU bed will carry a maximum limit of Rs 2500/- per day for Part A and Rs 3500/- for part B of the policy respectively.
- ii) Room rent including administration charges for fluid, Injection, Ventilator, infusion pump, Bi-pap, monitor, oxygen, blood transfusion charges in ICU / HDU / ITU / ICCU bed will carry a maximum limit of Rs 5000/- per day for Part A and Rs 7,000/- for part B of the policy respectively.
- b) Surgeon, Anesthetist, Consultant fees, Nursing charges, and physiotherapy charges will carry a maximum limit of 25% of sum insured amount per member for all parts of the policy.
- c) Hospital charges like investigation, OT charges, consumables & disposable, medicine, oxygen, blood, diagnostic material, dialysis, chemotherapy, radiotherapy, cost of pacemaker or any implant will have maximum limit of 75% of sum insured per member for all parts of the policy. No capping will be allowed on individual items like stent, orthopedic implants etc.
- d) All types of treatments / procedures / investigations done in hospital/ nursing home (including day care treatment, i.e. where the period of hospitalization is less than 24 hours and the insured person is discharged on the same day), should be considered under hospitalization benefit {like stitching of wounds, dialysis, chemotherapy, radiotherapy, arthroscopy, ENT Lithotripsy, endoscopy, surgery, angiography, eye surgeries(including refractive surgery as per IRDAI guideline) ,cataract operation, psychiatric & psychosomatic disorder, any condition directly or indirectly caused to or associated with HIV and ,or COVID 19} for all parts of the policy.
- e) As per existing IRDAI guidelines, the Exclusions which are not allowed in health insurance policies, are equally applicable for all parts of policies.
- f) The terms under Clause ix(d) includes treatment undertaken on package basis, where full amount of package cost will be entertained ignoring Clause ix(a), (b) &(c) within sum insured. It also includes all types of treatment under hospitalization for less than 24 hrs. in addition to day care treatment.

### (x) Pre Hospitalization:

Relevant medical expenses incurred during the period up to 15 days prior to hospitalization will be considered as part of claims mentioned under hospitalization expenses for all parts of the policy.

### (xi) Post Hospitalization:

Relevant medical expenses incurred during the period up to 30 days after discharge from hospital will be considered as part of claims mentioned under hospitalization expenses for all parts of the policy.

Relevant expenses as mentioned at (x) & (xi) above will include Doctor consultations, physiotherapy, dressing charges, investigating charges, medicines etc.

### (xii) Claim submission for Hospitalization treatment on cashless/ re-imbursement basis:

- (i) The reimbursement claim (inclusive of pre & post IPD) is to be submitted to the insurance company within 60 days after completion of permissible post hospitalization treatment.
- (ii) After receipt of claim, the concerned insurance company will release payment of admissible amount of claim latest by 30 days from the date of receipt of the necessary documents.
- (iii) Any claim cannot be repudiated simply on the ground of claim submission beyond permissible period and the delay may be condoned on reasonable grounds.

### (xiii) Capping of Diseases:

(a) <u>Capping (excluding pre and post hospitalization treatment) of 16 Surgical treatments</u> shall be applicable for Part A of the policy as stated below:

SL NO.	Surgical Treatment	ALLOWABLE LIMITS (Rs)
1	Cataract surgery – each eye (including cost of IOL)	15500
2	Tympanoplasty (unilateral)	25000
3	Fissurectomy/Fistulectomy	25000
4	Haemorrhoidectomy	25000
5	FESS (unilateral)	25000
6	Surgery for Appendicitis, Hernia (excluding mesh)	30000
7	Hysterectomy	35000
8	TURP	35000
9	Surgical removal of Gall Bladder (excluding cancer)	30000
10	Angioplasty/PTCA due to Coronary Artery Diseases/Ischemic Heart Disease(excluding cost of stent)	50000
11	Knee Joint Replacement- unilateral, (excluding implant)	55000
12	DJ stenting with PCNL	40000
13	Surgery for Varicose veins	40000
14	Pancreatic surgery (excluding cancer)	45000
15	Surgical treatment for Gastric Ulcer/ Peptic Ulcer/Acute or Sub-acute Intestinal Obstruction	45000
16	Hydrocelectomy, Varicocelectomy	20000

The aforesaid capping is indicative and may be subject to further review/ revision at the time of signing of MoU.

(b) There shall be no capping for Part B of the policy.

(xiv) Help Desk:	One authorized person of the Insurance Company/ TPA shall be present three days in a week at the Group Medical Insurance Cell, 6 <sup>th</sup> Floor, C- Block, Vidyut Bhawan, for interactions with the beneficiaries of the scheme and facilitation of submission of claim documents, settlement of queries, grievances etc.	
(xv) Payment of Premium:	The company shall arrange for recovery of Premium from the beneficiaries and deposit lump sum payment to the insurance company prior to commencement of the policy and on quarterly basis against inclusion of new members which shall be calculated on pro-rata basis. Payment for different parts of the policy shall be made separately.	
(xvi) Settlement of Claim:	Settlement of claim if any, will be strictly followed as per stipulated time schedule of IRDAI regulation i.r.o a health insurance Policy.	
(xvii) Renewal of Policy:	Renewal of policy may be considered fully on discretion of the company and may continue or terminate through fresh tendering depending upon merit of the policy administration & service.	
(xviii) Dispute Resolution:	(a) If any issues or disputes arise among the part concerning the matters covered by the Agreement, the part will use their best endeavour to resolve the dispute amica with utmost promptitude on verification of requisidocumentary evidences submitted by the parties.	
	(b) At no stage during the operation of the policy, the Insurance Company shall reject any rightful claims placed by the Insured persons who are under the ambit of the Group Medical Insurance Scheme. Failure to settle claims may invite suitable legal action on part of WBSEDCL. The Courts in Kolkata alone shall exercise jurisdiction in this matter.	
The policy features as stated above are for indicative purposes only and all benefits/ terms and conditions mentioned herein are subject to revision by the tendering authority at the time of signing of Agreement/ MoU with the Insurance Company.		
	(Signature & Seal of Authorized Signatory)	
Date:	Name:	
Place:	Designation:	
	Address & Contact No:	

E-mail Id:

### PROFORMA OF DECLARATION OF BLACK LISTING/HOLIDAY LISTING

(To be executed on non-Judicial stamp paper of requisite value)

Ref: NIT No: WBSEDCL/Gr. Me	ed /2021-22/01	Date: 15.07.2021
We hereby declare that we are having any tender or declared ineligible for collist or holiday list either indefinitely of State Government/PSU/Autonomous It is pending through any Investigating arising out of an FIR made against specified otherwise through an order of	orrupt & fraudulent pr or for a particular peri Body/Institution under g Agency/Vigilance E any recruitment proj	actices or have been placed on black iod of time declared by any Central/ the Government or no investigation Dept. of any PSU/Govt. Department ect handled by the Agency, unless
(Here give particulars of black listing o	or holiday listing, and in	absence thereof state "NIL")
It is understood that if this declarat have the right to reject the Bid and liable to be terminated.		· -
	Signature of the	e bidder with Office Seal