



Life Insurance Corporation of India  
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**NOTICE INVITING E-TENDER REQUEST FOR PROPOSAL (RFP) FOR PREMIUM (EXCLUDING GST) OF GROUP MEDICLAIM FAMILY FLOATER POLICY FOR THE YEAR 2023-24 FOR LIC EMPLOYEES, RETIRED EMPLOYEE AND THEIR ELIGIBLE FAMILY MEMBERS**

Issued by: Personnel/ERA Deptt,  
LIC of India,  
Central Office,  
'Yogakshema',  
Jeevan Bima Marg,  
Mumbai- 400021

**E-Tender Ref: BID/ERA/2022-23/02**  
**Date of issue: 16<sup>th</sup> February, 2023**  
**Online Bid Submission: 08<sup>th</sup> March, 2023 by 23:59 Hrs**

Note: Any addendum/corrigendum/ extension in respect of above tender shall be issued on website: <http://www.tenderwizard.com/LIC> only and no separate notification shall be issued in the press. Bidders are therefore requested to regularly visit this website to keep themselves updated. Detailed tender notice and Bid documents for downloading are also available in this website.

**Dated 16.02.2023**

**SECRETARY (ER)**

## **DISCLAIMER**

This Request for Proposal (hereinafter to be referred as RFP) document is not an agreement or offer by Life Insurance Corporation of India (hereinafter to be referred as LIC) to the prospective Bidders or any other party. The purpose of this RFP document is to provide information to eligible bidders (general / health insurance companies) for participating in e-tendering process for renewal of Group Mediciclaim policy for LIC employees/retired employees and their eligible family members

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**REQUEST FOR PROPOSAL (RFP)**  
**RENEWAL OF GROUP MEDICLAIM FAMILY FLOATER POLICY**  
**FOR THE YEAR 2023-24**

**1. Letter of Invitation:**

Life Insurance Corporation of India invites e-bids through **website** <http://www.tenderwizard.com/LIC> from eligible bidders (General / Health Insurance Companies) for renewal of group mediclaim family floater policy for LIC's existing employees, retired employees and their eligible family members.

**2. (A) Timeline**

<b>Sr No</b>	<b>Event</b>	<b>Schedule Date/Time</b>
1.	RFP Reference	BID/ERA/2022-23/02
2	Date of issue of RFP	16 <sup>th</sup> February, 2023
3.	Pre-Bid Queries	Bidders can upload their pre-bid queries in the tender portal <a href="http://www.tenderwizard.com/LIC">http://www.tenderwizard.com/LIC</a> upto 22 <sup>nd</sup> February; 2023, 11.00 Hrs.
4.	Pre-bid meeting	22 <sup>nd</sup> February, 2023 at 11:30 am
5.	<b>Last date &amp; Time for submission of online tender</b>	<b>08<sup>th</sup> March, 2023 by 23:59 hrs.</b>
6.	Opening of Technical Bid	09 <sup>th</sup> March, 2023 at 10.30 a.m.
7.	Display of Qualified bidders	Shall be informed later on
8.	Date and Time of Reverse Auction	Will be intimated later on to only technically qualified bidder(s).
9.	Contact Details	Secretary (ER) Life Insurance Corporation of India, Central Office, Personnel Department, 5 <sup>th</sup> Floor, Life Insurance West Wing, "Yogakshema" Nariman Point, Mumbai- 400021 Email address: <a href="mailto:secy_era@licindia.com">secy_era@licindia.com</a>

**If a holiday is declared on the dates mentioned above, the activities shall be taken up on the immediate next working day at the same time specified above unless communicated otherwise.**

## 2. (B) **Information to the bidders for using online electronic tendering system (eTS)**

Information for using online Electronic Tendering System (eTS) through portal (website) <http://www.tenderwizard.com/LIC> adopted by Life Insurance Corporation of India as given in the RFP will over-rule the conditions stated in the tender documents, wherever relevant and applicable.

- 1) **Registration of the Contractors/Bidders:** All the bidders intending to participate in the tenders floated online using Electronic Tendering System (ETS) are required to get registered on the e-Tender Portal (website) <http://www.tenderwizard.com/LIC>.
- 2) After successful Registration on above mentioned portal, bidders will get a User ID and a Password to access the website.
- 3) **Viewing of Online Tenders:** The bidders can view tenders floated on Electronic Tendering System (ETS) hereinafter referred as “e-Tendering System” through portal (website) at <http://www.tenderwizard.com/LIC>.
- 4) Obtaining a Digital Certificate and its Usage: On e-Tendering System the bids should be Encrypted and Signed electronically with a Digital Signature Certificate (DSC) to establish the identity of the bidder on online Portal. The Digital Signature Certificates (DSCs) are issued by an approved Certifying Authority, by the Controller of Certifying Authorities (CCA India), Government of India.
- 5) The Bid (online) for a particular e-Tender may be submitted only using the Digital Signature Certificate (DSC), In case, during the process of a particular e-Tender, the user loses his Digital Certificate (i.e. due to virus attack, hardware problem, operating system problem), he may not be able to submit the bid online. Hence, the users are advised to keep their Digital Signature Certificate in safe custody.

Bidders participating in e-tendering shall check his/her validity of Digital Signature Certificate before bidding in the specific work floated online at the e-Tendering Portal (website) through <http://www.tenderwizard.com/LIC>.

**Download of Tender Documents:** The tender documents can only be downloaded from the Electronic Tendering System on the Portal <http://www.tenderwizard.com/LIC>.

Possession of Digital Signature Certificate (DSC) and registration of the Bidders on the portal i.e. <http://www.tenderwizard.com/LIC> is a prerequisite for e-Tendering.

For Registration and for further details on e-tendering, please visit website above mentioned portal (website) or below mentioned Helpdesk details.

**Office Address:**

Antares Systems Limited.  
E-Tender helpdesk  
#24, Sudha Complex,  
03rd Stage, 04th Block,  
Basaveshwaranagara,  
Bangalore - 560079,

**Help Desk Contact Details:**

Tel: 080-40482000/121/133/140

Mobile: 9686115304/9686115323

E-mail: [lokesh.hr@antaressystems.com](mailto:lokesh.hr@antaressystems.com)

[raghuprashanth@antaressystems.com](mailto:raghuprashanth@antaressystems.com)

1. Senthil Raj-Mob.: 8693843194 2. Sushant Panchal-Mob: 9731468511

**3. Eligibility Conditions** of bidders (general/health insurance companies) for participating in bidding process are given below-:

Sr. no.	Eligibility Criteria	Documents to be submitted (Duly attested)
1	The bidder must have an IRDAI license as on the date for submission of RFP for procuring Insurance business in India	A copy of the certificate to be submitted
2	The bidder should be in existence for at least 10 years and should be in the line of business of providing health Insurance during the said period in Indian insurance market.	Certified copy of the certificate of incorporation
3	Health Premium underwritten within India should not be less than Rs.2500 Cr. in Financial Year 2021-22	Undertaking on the bidder's Letter Head signed by the Authorized Signatory should be furnished, along with the copy of audited balance sheet, (unaudited balance sheet in case audited balance sheet is not finalized for FY 2021-2022, will be accepted)
4	The bidder should have proven experience of managing corporate Group Health Insurance Policy for a group size of minimum size of 100000 members in each of the last 3 financial years i.e 2019-20,2020-21, 2021-22.	Copies of Work Orders/Agreements clearly stipulating the group size should be furnished.

General /Health Insurance company has to furnish undertaking on company's letter head duly signed by the authorized signatory that:

1. They have never been involved in any illegal activity or financial frauds.
2. Their contract in the past was neither terminated during the contract period due to unsatisfactory performance nor refused to continue the service for any Company after the contract was awarded to them.
3. They have not been put in black list by any Govt./Semi Govt./Public Sector Units.
4. They will collect the claim papers physically for mediclaim settlement from each Divisional offices, Zonal offices and Central office at least twice in a week.

**4. Technical Bid:** Parameters with evaluation matrix for Technical bid are given below:

<b>Sr. No</b>	<b>Criterion</b>	<b>Points</b>	<b>Total</b>
<b>1</b>	<b>Number of empanelled hospitals for cashless in India</b>		<b>20</b>
	Up to 5000	10	
	More than 5000 but less or equal to 6000	15	
	More than 6000 but less or equal to 7000	18	
	Above 7000	20	
<b>2</b>	<b>Physical presence</b>		<b>20</b>
	Present in all locations of our Divisional Office	20	
	Present in equal or greater than 95% but less than 100% locations	15	
	Present in equal or greater than 90% but less than 95% locations	10	
	present in less than 90%	5	
<b>3</b>	<b>Number of Corporate Group Mediclaim Policies being serviced in India where total lives covered are 100000 and above during the last three financial year.</b>		<b>20</b>
	1 policy with minimum size of 1 lakh members in each of the last three financial years	10	
	2 policies with minimum size of 1 lakh members in each of the last three financial years	15	
	3 policies with minimum size of 1 lakh members in each of the last three financial years	18	
	More than 3 policies with minimum size of 1 lakh members in each of the last three financial years	20	
<b>4</b>	<b>% of repudiated claims out of total intimated claims under health policies during the financial year 2021-22</b>		<b>20</b>
	Greater than 5%	10	
	Greater than 3% up to 5 %	15	
	Greater than 2% up to 3 %	18	
	Up to 2 %	20	
<b>5</b>	<b>Gross written premium during financial year 2021-22 under health insurance portfolio</b>		<b>20</b>
	Rs 2500 to 3000 Cr.	10	
	Rs 3001 to 4000 Cr.	15	
	Rs 4001 to 6000 Cr.	18	
	More than 6000 Cr.	20	

**Note:**

- | **For point no. 2** in above table, location of LIC Divisional Offices are to be mapped with location of offices of general/health insurance companies by giving address of their offices for respective location in column no. 4 of **Annexure III**.
- | **For point no.3**, in the above table of evaluation matrix, following conditions will apply:
  - (i) Policies where company is a Co-insurer will not be considered.
  - (ii) Micro Insurance/State Policies will not be considered.
  - (iii) Only Corporate Group Mediclaim Insurance policies will be considered for the technical bid.
  - (iv) Lowest number of policies among the last three financial years shall be considered for evaluation.
- | **Only those bidders who have scored equal to or more than 60% marks in the Technical Bid will be qualified for participating in online Reverse Auction event.**

## **5. SUBMISSION OF PROPOSAL**

The Bidder shall upload the filled up and signed scanned copy of Annexure I, II & III (Filled up and signed) along with supporting documents. All documents shall be self-attested by authorized person of bidder with an undertaking that full responsibility is taken by him/ her on behalf of the bidder for veracity of submitted documents.

Those intending bidders (general/health insurance companies) are not registered on the website i.e. [www.tenderwizard.com](http://www.tenderwizard.com)/LIC mentioned above with M/s Antares Systems Limited are required to get registered beforehand. If needed they can be imparted training on online tendering process as per details available on the website ie, [www.tenderwizard.com](http://www.tenderwizard.com) The intending bidders (general/health insurance companies) must have class-III digital signature to submit the tender.

The bidders are advised in their own interest to submit their bid documents well in advance from last date/time of submission of bids so as to avoid problems which the bidders may face in submission at last moment /during rush hours.

However, after submission of the Bid the Bidder can re-submit revised Bid any number of times but before last time and date of submission of tender as notified.

Bidder should fill in all the relevant information in prescribed templates/forms/annexures as required in the e-tendering System.

LIC of India shall have liberty on choice of TPAs for settlement of claims and/or providing facility of cashless. If any additional information and/or supporting documents related to the bid are called for, the bidders will be required to submit the same within two working days. If the additional information and/or supporting documents as called for are not submitted within stipulated time, such bidders shall not be entitled for participating further in the bid including the financial bid.

### **Price Bid (Base Price Quotation):**

Price Bid for **Provisional Premium** is to be quoted only online. The bidders should

quote online the Lump Sum amount in INR (excluding GST) only in the Price Bid Template. Price Bid Template is provided in protected Excl Sheet format, keeping open only those cells where the Bidder needs to fill the information like the name of Firm and the Lump Sum amount to be quoted. No liability whatsoever will be admitted nor claim allowed in respect of errors in the submitted Bid due to missing / duplicate uploaded documents etc.

The bidders are advised to submit complete details with their bids as Technical Bid Evaluation will be done on the basis of documents uploaded on website by the bidders with the bids. The information should be submitted in the prescribed proforma. Bids with Incomplete /Ambiguous information will be rejected.

The bidders are required to quote strictly as per terms and conditions and specifications given in the tender documents and not to stipulate any deviations.

## **6. Process for selection of Insurer:**

Evaluation of bidding process shall be as under:

Bidders who fulfill the eligibility criteria and have submitted all required documents in their proposal along with online submission of Price Bid (Base Price Quotation) shall be considered for further bidding process. Quotation for Financial Bid shall be submitted by technically qualified bidders through online Reverse Auction to be conducted by Service Provider (M/S Antares Systems Limited). **The lowest of the Price Bid (Base Price) or price decided by us would appear as the Bid Starting Price for the Reverse Auction.**

**If bidder submits Price Bid (Base Price quotation) but does not participate in Reverse Auction event, quotation submitted by bidder for Price Bid (Base Price) shall be considered as final Financial Bid for calculation of Composite Score.**

6.1 Technical Bid for **Premium excluding GST** will be assigned a technical score (TS) out of a maximum of 100 points.

6.2 The marks scored by the technically qualified Bidders in the technical bid will then be given a weightage of 70%. Similarly, the Financial Bids through Reverse Auction of the qualified bidders will be given a weightage of 30%. The combined score based on Quality-Cum-Cost Based System (QCCBS) of technical and financial bids will determine the H1, H2, H3 and so on each category.

6.3 The commercial scores would be normalized on a scale of 100, with lowest score being normalized to 100 and the rest being awarded on a pro-rata basis. Such normalized scores would be considered for the purpose of QCBS based evaluation, explained below

The individual bidder's commercial scores are normalized as per the formula below:



$F_n = F_{min}/F_b * 100$  (rounded off to 2 decimal places), where  
 $F_n$ = Normalized commercial score for the bidder under consideration  
 $F_b$ = Absolute Financial Quote for the bidders under consideration  
 $F_{min}$ = Minimum absolute financial quote

**Composite Score (S) = TS\*0.70 + F<sub>n</sub>\*0.30**

6.4 The bidder with the highest Composite Score (S) would be awarded the contract.

6.5 Since only one Bidder may be appointed, the Bidder scoring the highest points/marks (H1) based on the above principles would be appointed as insurer of LIC Group Mediclaim Policy for the year 2023-24. However, there may be a ranking list prepared in case the top scoring Bidder fails to take the work or is rejected for any reason or on disqualification on any ground for replacing with the other Bidders in the order of ranking.

6.6 In case of a tie in the H1, H2, H3 positions, the Bidder who has a higher technical score, will be selected as insurer.

6.7 Sub-contracting of the assignment will not be allowed. The appointed Bidder, shall be solely responsible for all the required final deliverables as assigned to them.

6.8 All the rights for rejection / consideration of H1 bidder are reserved with LIC of India without assigning any reason whatsoever.

6.9 Notwithstanding anything stated above, LIC reserves the right to assess the capabilities and capacity of the tenderer to perform the contract, in the overall interest of LIC. In case, tenderer's capabilities and capacities are not found satisfactory, LIC reserves the right to reject the tender.

**EXAMPLE FOR EVALUATION:**

The proposals will be ranked in terms of Total Scores arrived at as above. The proposal with the highest Total Score will be awarded of RFP.

70% weightage Technical Evaluation  
 30% weightage Financial Evaluation

TECHNICAL SCORE (TS)				
Bidder 1	Bidder 2	Bidder 3		
79	75	70		

FINANCIAL BID AS BY BIDDERS				
Bidder 1	Bidder 2	Bidder 3		
10000	9000	7000		

NORMALISED COMMERCIAL SCORES				
$F_n = F_{min}/F_b * 100$				
	Fmin	Fb	Fn	
BIDDER 1	7000	10000	70	
BIDDER 2	7000	9000	77.78	
BIDDER 3	7000	7000	100	

COMPOSITE SCORE (S) = (Ts * 0.70) + (Fn * 0.30)				
COMPOSITE SCORE (S)				
	TS	Fn	S	
BIDDER 1	79	70	76.3	
BIDDER 2	75	77.78	75.83	
BIDDER 3	70	100	79	
TS - Technical Score, Fn - Financial Score (Normalized Commercial Score)				

**7. Pre-bid meeting:**

a. LICl shall hold a pre-bid meeting with the prospective bidders on the mentioned schedule. It is proposed to conduct the pre-bid through video conference (virtual).

b. All queries to be raised in the pre-bid meeting will relate to the RFP alone.

**8. Letter of Authorization:**

General Insurance/health insurance Companies has to authorize one of their officers for submitting application along with desired information for renewal of Group Medclaim family floater policy for the year 2023-24. This authorization letter is to be submitted along with application and **Annexure I**.

**9. Reverse Auction**

Only qualified bidders will be invited for participating in online Reverse Auction event (Financial Bid) for Group Medclaim Family Floater policy for the year 2023-24 for LIC employees/retired employees and their eligible family members. Details about the Reverse Auction shall be provided to qualified bidders later on through service provider who will conduct Reverse Auction event for renewal of Group Medclaim policy for the year 2023-24.

**10. Disqualification:**

Even if any bidder meets the Qualification Criteria, he shall be subject to disqualification if bidder is found to have made misleading any document submitted for bidding process.

**11. Annexures:**

Annexure A, I, II & III

## ANNEXURE A

### **Benefit Features:**

Annual Renewal date of Group Medclaim policy for LIC employees/ retired employees and their eligible members is 01.04.2023

Qualified bidders (General/Health Insurance Companies) are eligible for participating in online **Reverse Auction** event for Renewal of the Group Medclaim policy on terms and conditions which are given below in brief.

**Category wise Basic (Compulsory) family floater Sum Assured will depend on Basic Pay of employees/retired employees is as under;**

<b>BASIC PAY</b>	<b>CATEGORY</b>	<b>FAMILY FLOATER SUM INSURED</b>
<b>Below Rs.69045/-</b>	III	Rs.5,00,000/-
<b>Between Rs.69,046/- and Rs.96,139/-</b>	II	Rs.6,00,000/-
<b>Rs.96,140/- and above</b>	I	Rs.10,00,000/-

There is also provision of optional increased total sum insured in which employee can opt for increased total sum insured (on floater basis) for **6 lakh, 8 lakh, 10 lakh, 12 lakh, 15 lakh, 20 lakh, 25 lakh, 30 lakh, 40 lakh, 50 lakh and 75 lakh**

Existing policy is cashless through Preferred Provider's Network (PPN) of TPAs for all diseases/treatments.

### **The group consists of :**

1. In-service employees.
2. Spouse, dependent children and independent children up to age 45 (LBD) OR up to date of death of both parents covered under the policy whichever is earlier.
3. Retired employees.
4. Spouse, dependent children and independent children up to age 45 (LBD) OR up to date of death of both parents covered under the policy whichever is earlier.
5. Dependent parents and parent-in-laws of in-service employees.
6. Continuation of coverage to dependent parents/parent-in-laws after retirement of in-service employees.
7. Spouse and dependent children of deceased employees (both in-service and retired).
8. Regular Part Timers (at present total members are 41) for family floater cover of Rs. 1 lakh only.

### **Dependent children means**

- a. Legitimate children including legally adopted children.

- b. Male children up to the age of 21 years and up to 25 years of age if Unemployed, else they will be considered as Independent Children for purpose of coverage.
- c. Unmarried female children or those who are widowed or divorced, and Residing with and dependent on the employee. However, after the marriage of unmarried female children or remarriage of widowed/divorced female children, the cover shall remain valid for 3 months or policy expiry date, whichever is earlier.
- d. Mentally Retarded children fully dependent on the employee / retired employee
- e. Physically handicapped children fully dependent on the employee/ retired employee
- f. Dependent children upto 25 years of age studying abroad during their visit to India. (Provided annual premium is paid at the inception of policy)

**DEPENDENT MEANS:** Financially dependent on the employee / retired employee and their income not more than **Rs.11,790/-per month**.

**Note:** After 2011, dependent parents/parent-in-laws are covered under the policy only at the time of confirmation of newly recruited employee.

**A few salient features of the policy for the year 2023-24 are:**

1. Hospitalization expenses including Pre-30 days & Post hospitalization-60 days are covered.
2. All pre-existing diseases are covered.
3. Congenital diseases are covered.
4. 0 year old babies are covered for separate sum insured.
5. Maternity benefit included.
6. Waiting period clauses are not applicable.
7. Coverage of certain diagnostic tests (viz MRI, CT Scan, PET Scan, Biopsy, Sonography, TMT,
8. 2D Echo, Gastroscopy, Colonoscopy, EEG, EMG, Holter Monitor Test, PAP Smear, PSA, PET Scan and Mammography) without hospitalization
9. Robotic surgery for Cancer, Brain, Heart and Spine.
10. Service Tax/Surcharge included
11. Cochlear implant
12. Second International Medical Opinion
13. Facility of 24x7 online tele-consultation for covered members under Group Mediclaim scheme from anywhere from India through software application.
14. One post graduate medical examiner at premises of Central Office and each Zonal Office by insurer through respective TPA on working days.

## 15. Expenses relating to Diagnostic Tests without Hospitalization

Following Diagnostic Tests without hospitalization shall be covered subject to the following:

Diagnostic Tests	Maximum charges payable.
MRI charges	Rs.8,500/- each Insured
Contrast MRI charges	Rs.12000/- each Insured
CT Scan charges	Rs.6,500/- each Insured
Contrast CT Scan/Angio CT charges	Rs.9000/- each insured
Sonography charges (Excluding maternity related)	Rs.2,500/- each Insured
Biopsy	Rs.4,500/- each Insured
Tread Mill Test	Rs.2000/- each Insured
Echo Test	Rs.2000/- each Insured
Gastroscopy	Rs.5500/- each Insured
Colonoscopy	Rs.7500/- each Insured
EEG (Electroencephalogram)	Rs.1000/- each Insured
EMG (Electromyogram)	Rs.2000/- each Insured
Holter Monitor Test	Rs. 5000/- each insured
PAP SMEAR	Rs. 750/- each insured
PSA (Prostate Specific Antigen)	Rs. 750/- each insured
Mammography	Rs. 5000/- each insured
PET Scan	Rs.20000/-each insured

Reimbursement of expenses is allowed only for the above tests and no equivalent diagnostic test will be considered for this purpose. The maximum reimbursable amount under this benefit shall be Rs. 80,000/- for the family, during the policy year. The above amounts shall be within the overall Sum Insured limit. For claiming reimbursement under this, the tests should have been recommended by an MD DOCTOR or A DOCTOR WITH EQUIVALENT QUALIFICATION and supported by documents and certification evidencing present complaints necessitating the tests to be carried out. However, if the Test is recommended by prescription from a Govt. Hospital then the above condition can be waived.

These expenses incurred without hospitalization are payable per insured only once for respective diagnostic tests during the policy period. However, for MRI, CT Scan, Sonography & Biopsy tests, the same are allowed twice during the policy period, per Insured person, if done for a different organ/body part.

## 16. SUB-LIMIT CLAUSE

Fees paid in cash will be reimbursed on submission of numbered bills upto a limit of:

Surgeon/Consultant/Specialist: Rs. 30,000/-

Assistant Surgeon: Rs 12,000/-

Anesthetist: Rs 20,000/-.

Cataract shall be limited to Actual OR maximum of **Rs. 60,000/-** (inclusive of all charges, excluding service tax) for each eye, whichever is less.

Expenses incurred for Ayurvedic/Homeopathic/Unani Treatment are admissible provided the treatment for illness/disease and accidental injuries, is taken in a Government hospital or in any institute recognized by Government and/or accredited by Quality Council Of India / National

Accreditation Board on Health, excluding centers for spas, massage and health rejuvenation procedures. Further, Steam Bath, Shirodhara, PANCHAKARMA and similar ayurvedic treatments are NOT payable. However, the maximum reimbursement will be 25% of sum insured during the policy period.

**Ambulance Charges:** Actual or subject to maximum Rs.5000/- per trip per hospitalization. For a patient hospitalized due to cardiac ailment and has to be transported in a Cardiac Equipped Ambulance, the above limit is extended to Rs. 10000/- for going to hospital only.

**Lasik Laser treatment:** The maximum amount payable is **Rs. 35,000/-** per eye for keratotomy of Insured having **(-4)** and above refractive error, and for therapeutic reasons like recurrent corneal erosions, nebular opacities and non healing ulcers.

Age Related Macular Degeneration (ARMD) and/or treatment for retinal disease by intravitreal/intraocular injection/intervention admissible only upto Rs 100,000/- per member per eye per year.

**17. Robotic surgery** for Malignant Cancer/Cancer, Brain, Heart and Spine only are payable.

**18. Cochlear Implant** –Hospitalization expenses for cochlear implantation surgery (including cost of cochlear implant) is payable upto a sublimit of Rs 10,00,000/- per member with an excess of Rs 1,50,000/- to be borne by Insured member.

**19. Maternity Expenses Benefit:**

Normal Delivery: The maximum benefit allowable will be maximum upto Rs. 65,000/-

Caesarian Section Delivery: The maximum benefit allowable will be maximum upto Rs. 1,25,000/-.

**20.** Physiotherapy as a part of the Pre & Post hospitalization period is payable upto a limit of INR 40,000/- per person per year. Physiotherapy treatment taken at clinic or at specialized physiotherapy treatment centre is only payable. Treatment for Physiotherapy at home not payable. Physiotherapy treatment at home is payable only when the patient is permanently or temporarily disabled (Partial & Total). However, such disability should be certified by the consultant doctor under whom patient is treated. Temporary Disability for Physiotherapy to be availed at home – Can be defined as: Impairment of mental or physical faculties that may impede the affected person from functioning normally only so far as he or she is under treatment; with a minimum of 15 days of treatment certified by the treating doctor. The pre & post hospitalization period limit of 30/60 days shall not be applicable for patients who are totally and permanently disabled/paralyzed.

**21. Hospitalization less than 24 hrs.**

Limitation of 24 hrs. hospitalization is NOT applicable for defined surgeries/procedures. Surgeries/Procedures not defined but agreed by Company/TPA which require less than 24 hours hospitalization due to advancement in Medical Technology are also covered.

**The above features are only indicative and not exhaustive.**

**Room Rent Limit** : Room rent limit **excluding GST** is given below:

<b>Class of City</b>	<b>Cities</b>	<b>Room Rent Limit per day</b>
A	Ahmedabad, Gandhinagar, Bengaluru, Chandigarh TriCity (Chandigarh, Mohali, Panchkula), Chennai, Hyderabad, Secunderabad, Jaipur, Kolkata, Howrah, Lucknow, Kanpur, Patna, Mumbai (MMR), New Delhi, Faridabad, Ghaziabad, Gurgaon, Noida, Pune, PCMC and Surat	(i) 1.5% of Total Floater Sum Insured subject to maximum Rs.7,500/- for members covered for total sum insured upto Rs.30 Lakh/- (ii) 1.5% of Total Floater Sum Insured subject to maximum Rs.10,000/- for members covered for total sum insured Rs.40 Lakh/-, Rs.50 Lakh and Rs.75 Lakh
B	Agra, Allahabad, Asansol, Bhopal, Bhuvaneshwar, Coimbatore, Dehradun, Goa (Entire State), Guwahati, Indore, Jabalpur, Jamshedpur, Kannur, Kochi, Kozhikode, Ludhiana, Gorakhpur, Madurai, Mallapuram, Meerut, Nagpur, Nasik, Ranchi, Rajkot, Srinagar, Thrissur, Thiruvanthapuram, Vadodra, Varanasi, Visakhapatnam, Guntur and Vijaywada	1.5% of Total Floater Sum Insured subject to maximum Rs.6000/- for all members.
C	Others	1.5% of Total Floater Sum Insured subject to maximum Rs.4000/- for all members.

Intensive Care Unit (ICU) / Intensive Cardiac Care Unit (ICCU) expenses: There is NO Capping/Ceiling on ICU/ICCU expenses.

In case of admission to a Room Rent at rates exceeding the aforesaid limits, the reimbursement/payment of all other expenses incurred at the Hospital, with the exception of cost of medicines, drugs and implants, shall be affected as per eligible room category (reduced proportionately) in the Hospital.

**Claim statistics:**

<b>Premium and Claim Paid statistics for the last five years</b>	
<b>Policy Year</b>	<b>Claim paid (Rs. in Cr)</b>
2018-19	370.92
2019-20	399.63
2020-21	461.19
2021-22	600.14
2022-23	440.66 (As on 31.01.2023)

**Member's Data:** Age bracket and sum assured wise number of members as on 01.04.2022 is given below:

LIC of India : Group Mediclaim : Number of Employees/Retired Employees								
	0-35	36-45	46-55	56-65	66-70	71-75	76+	Total
500000	1294	475	734	793	573	460	928	5257
600000	115	91	562	842	784	1112	3497	7003
800000	67	67	185	198	146	179	527	1369
1000000	920	505	1469	1965	1282	1575	4224	11940
1200000	64	54	179	197	93	134	329	1050
1500000	279	198	530	606	299	373	746	3031
2000000	832	653	1968	2372	1095	858	1451	9229
2500000	426	327	792	777	218	184	310	3034
3000000	716	748	2375	2633	594	429	593	8088
4000000	281	429	1793	1495	367	255	248	4868
5000000	3744	3913	12501	11815	1295	731	663	34662
7500000	4747	7678	29731	19068	1079	498	293	63094
Total	13485	15138	52819	42761	7825	6788	13809	152625

LIC of India : Group Mediclaim : Number of Dependents								
	0-35	36-45	46-55	56-65	66-70	71-75	76+	Total
500000	2934	539	840	830	254	142	137	5676
600000	1626	241	534	751	444	513	761	4870
800000	651	118	193	185	112	111	147	1517
1000000	5395	911	1824	1728	936	903	1110	12807
1200000	599	114	186	182	95	91	112	1379
1500000	2076	428	602	562	278	237	289	4472
2000000	7323	1263	2141	2012	737	581	658	14715
2500000	3145	566	883	678	211	195	211	5889
3000000	8702	1401	2485	1865	554	461	485	15953
4000000	5958	998	1762	1080	361	308	358	10825
5000000	45770	6613	13281	7930	1912	1548	2104	79158
7500000	98890	13142	28688	13479	3115	3107	4516	164937
Total	183069	26334	53419	31282	9009	8197	10888	322198

Total number of members to be covered as on 01.04.2022: 474823.

**Payment of Premium:**

***As member's data as on 01.04.2023 shall be available after 31.03.2023, Provisional premium shall be paid to insurer of the policy for the year 2023-24 based on data as on 01.04.2022. Difference in premium due to increase/decrease in number of members shall be paid/recovered in March 2024 after collection of member's data as on 01.04.2023.***



**ANNEXURE I**

(To be submitted on Company's Letter Head)

Eligibility conditions for general/health insurance companies

1. Name of the company: \_\_\_\_\_

(Copy of certificate of license issued by IRDAI to be enclosed)

2. Experience ( No. of years) for writing non-life business in Indian Insurance Market  
\_\_\_\_\_ Years.

3. Health Premium underwritten within India in last Financial Year \_\_\_\_\_ (in Crore)

4.

Financial Year	No. of written group schemes/policies of minimum size of 100000 lives.
2019-20	
2020-21	
2021-22	

Note: Participants are required to submit verifiable evidence to support their claim on data furnished in the above table.

(Signature of authorized signatory with stamp)

**ANNEXURE II**

(To be submitted on Company's Letter Head)

1. Number of empanelled hospitals for cashless in India \_\_\_\_\_
2. Physical Presence: \_\_\_\_\_% of locations as per attached Annexure III.
3. Corporate Group Mediciam Policy being serviced in India during the last three financial years:

Financial Year	No. of written group schemes/policies of minimum size of 100000 lives.
2019-20	
2020-21	
2021-22	

Bidders are requested not to mention details of policies where

- (i) Company is a Co-insurer will not be considered.
- (ii) Micro Insurance/State Policies will not be considered.
- (iii) Only Corporate Group Mediciam Insurance policies will be considered for the technical bid.

4. Percentage of repudiated claims out of total intimated claims under health policies during the financial year 2021-22 \_\_\_\_\_%.
5. Gross written premium during the financial year 2021-22 under health insurance portfolio in Indian market Rs. \_\_\_\_\_Crore.

(Signature of authorized signatory with stamp)

**Note:** Bidders (general/health insurance companies) are required to submit verifiable evidence to support their claim on data furnished in the above table.

Zone(1)	S. No. (2)	DIVISION (3)	Local office address of greeneral/health insurance Co.
<b>Central Zone</b>	1	BHOPAL	
	2	BILASPUR	
	3	GWALIOR	
	4	INDORE	
	5	JABALPUR	
	6	RAIPUR	
	7	SATNA	
	8	SHAHDOL	
<b>Western Zone</b>	9	AHMEDABAD	
	10	AMRAVATI	
	11	AURANGABAD	
	12	BHAVNAGAR	
	13	GANDHINAGAR	
	14	GOA	
	15	KOLHAPUR	
	16	MUMBAI - I	
		MUMBAI - II	
		MUMBAI - III	
		MUMBAI - IV	
		MUMBAI-SSS	
	17	NADIAD	
	18	NAGPUR	
	19	NANDED	
	20	NASHIK	
	21	PUNE - I	
		PUNE - II	
	22	RAJKOT	
	23	SATARA	
24	SURAT		
25	THANE		
26	VADODARA		
<b>Eastern Zone</b>	27	ASANSOL	
	28	BARDHAMAN	
	29	BONGAIGAON	
	30	GUWAHATI	
	31	HOWRAH	
	32	JALPAIGURI	
	33	JORHAT	
	34	KHARAGPUR	
	35	KMDO-I	
		KMDO-II	
		KSDO	
36	SILCHAR		

<b>Zone(1)</b>	<b>S. No. (2)</b>	<b>DIVISION (3)</b>	<b>Local office address of general/health insurance Co.</b>
<b>East Central Zone</b>	37	PATNA DO□1	
		PATNA DO□2	
	38	MUZAFFARPUR	
	39	BEGUSARAI	
	40	BHAGALPUR	
	41	HAZARIBAGH	
	42	JAMSHEDPUR	
	43	CUTTACK	
	44	BHUBANESWAR	
	45	SAMBALPUR	
<b>Northern Zone</b>	46	BERHAMPUR	
	47	AJMER	
	48	AMRITSAR	
	49	BIKANER	
	50	CHANDIGARH	
	51	DELHI-I	
		DELHI-II	
		DELHI-III	
	52	JAIPUR-I	
		JAIPUR-II	
	53	JALANDHAR	
	54	JODHPUR	
	55	KARNAL	
	56	LUDHIANA	
	57	ROHTAK	
58	SHIMLA		
59	SRINAGAR		
60	UDIPUR		
<b>North Central Zone</b>	61	AGRA	
	62	ALIGARH	
	63	ALLAHABAD	
	64	BAREILLY	
	65	DEHRADUN	
	66	GORAKHPUR	
	67	HALDWANI	
	68	KANPUR	
	69	LUCKNOW	
	70	MEERUT	
	71	FAIZABAD	
	72	VARANSI	

<b>Zone(1)</b>	<b>S. No. (2)</b>	<b>DIVISION (3)</b>	<b>Local office address of general/health insurance Co.</b>
<b>Southern Zone</b>	73	CHENNAI-1	
		CHENNAI-2	
	74	COIMBATORE	
	75	MADURAI	
	76	SALEM	
	77	THANJAVUR	
	78	TIRUNELVELI LV	
	79	VELLORE	
	80	ERNAKULAM	
	81	KOTTAYAM	
	82	KOZHIKODE	
	83	THIRUVANANTHPURAM	
	84	THRISSUR	
<b>South Central Zone</b>	85	HYDERABAD	
	86	KADAPA	
	87	KARIMNAGAR	
	88	MACHLIPATNAM	
	89	NELLORE	
	90	RAJAHMUNDRY	
	91	SECUNDERABAD	
	92	VISAKHPATNAM	
	93	WARANGAL	
	94	BANGLORE-I	
		BANGLORE-II	
	95	BELGAUM	
	96	DHARWAD	
	97	MYSORE	
	98	RAICHUR	
	99	SHIMOGA	
100	UDUPI		