**Annexure-II**

**GENERALISED PLAN FOR GROUP HEALTH INSURANCE POLICY FOR**

**EMPLOYEES OF PRIMARY AGRICULTURAL CO-OPERATIVE SOCIETIES AFFILIATED TO**

**TAMLUK GHATAL CENTRAL CO-OPERTIVE BANK LTD.**

|  |  |  |
| --- | --- | --- |
| **Technical Details**  | **Remarks**  | **Comments of the Insurer**  |
| Group Name  | Employees of Primary Agricultural Co-operative Societies affiliated to TGCCB Ltd.  | This is a requisite plan/scheme for the said group health insurance. However, the interested insurance company may provide a dummy copy of its group health insurance scheme which must satisfy all the requisite of this proposed group health insurance plan. |  |
| Location  | Tamluk :: Purba Medinipur  |
| Commencement Date  | 01.07.2024 | Period  | One year |
| Insured Group Details  |  |  |
| Beneficiaries Strength as on  | 01.06.2024 |  |  |
| No. of enrolled employees of PACS  | 700 |  |  |
|  |  |  |  |
| Coverage Age  | Existing employees of concerned PACS for age upto 60 years .  |  |  |
| Floater/Individual  | Floater  |  |  |
| Sum Insured Bands  | ₹2,00,000-00 |  |  |
| Help line | There should be a dedicated helpline (24X7) from the Insurance Company available and the contact details should be furnished in the tender. |  |  |

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|  |  |  |
| --- | --- | --- |
| Coverage & Benefits Details  | **Remark**  | **Comments of the Insurer** |
| Coverage of Pre existing diseases | To be covered |  |  |
| Cashless facility  | To be applicable |  |  |
| Reimbursement facility | To be applicable |  |  |
| Waiting Period  | To be applicable |  |  |
| Pre and post hospitalization expenses  | 30 days pre and 60 days post hospitalization Expenses to be covered. |  |  |
| Co-Payment  | To be covered |  |  |
| Sub-Limits for Diseases  | To be covered  |  |  |
| Room Rent Capping  | To be covered |  |  |
| AYUSH Treatment  | To be covered.  |  |  |
| Day Care Procedures  | Applicable. List to be provided by Insurer.  |  |  |
| Critical illness cover | To be covered |  |  |
| Sub limit of diseases, if any  | List to be provided by insurer |  |  |
| Exclusion of diseases, if any  | List to be provided by insurer |  |  |
| Robotic surgery | To be covered |  |  |
| List of deductible | To be provided by insurer |  |  |
| Coverage of consumables  | Covered as per IRDA guidelines.  |  |  |
| Ambulance charges  | To be covered . |  |  |
| Any other Benefit  | Any other benefit that the insurance company may have in its fold and want to provide may please be declared in tender. 1. Annual Health checkup of the employee.  |  |  |
| TPA | IRDAI approved TPA services Involved (if any) and Name and contact details to be submitted. The authorized representative of the corporation will participate in the screening process of TPA. List of Network of Authorized hospitals to be provided.  |  |  |
| Any Service Charges on Medical Bills  | Should not be deducted from the individual claim. |  |  |

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| --- | --- | --- | --- |
| **Company Information** |  | **Remarks** | **Comment of the Insurer** |
| Experience in Health Insurance Business | 10 years | Submit a copy |  |
| Whether Blacklisted to participate in Govt. Tenders | (Yes/No) | Declaration under Annexure –V to be submitted |  |
| Solvency ratio | Above 1.7 |  |  |
| Claim settlement ratio | Above 95% |  |  |
| Incurred claim ratio | upto 85%,Exception for public sector undertakings |  |  |
|  |  |  |  |

***Name and Signature of Authorised Person***

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**Section-IV**

**PRICE BID.**

**Annexure –VI**

**PRICE BID FOR**

**GROUP HEALTH INSURANCE POLICY FOR OPTCL REGULAR AND RETIRED**

**EMPLOYEES AND THEIR FAMILY MEMBERS.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| SLNo. | Description  | Total No. of family units | Quoted Price in INR | GST @% | Total including GST per family unit in INR | **Total Premium (In INR)** |
|  | 1)Premium for coverage of Rs. **5.00** lakh per employee **(regular)** family unit for first year along with Buffer and other condition. | 2587 |  |  |  |  |
|  | 2)Premium for coverage of Rs. **7.00** lakh per employee **(regular)** family unit (GM and above) for first year along with Buffer and other condition.  | 70 |  |  |  |  |
|  | Premium for coverage of Rs. **5.00**  lakh per employee **(retired)** family unit for first year along with Buffer and other condition.  | 500 |  |  |  |  |
|  |  |  |  | Grand total in INR |  |

**Note :**

* Conditional tenders are not acceptable.
* Tenders submitted in the above format is only acceptable.
* Number of Employee (retired) family unit may vary as per the participation of retired employees.

**To be submitted in part-II i.e. for Price – bid in Excel format only.**

**Evaluation Criteria :** Bidders are requested to quote for both “A” & “B”. The overall selection of tender will be on the basis of price quoted by the bidders in “A” & “B” taken together. However OPTCL reserves the right either to select “A” or (“A” + “B”) together and award accordingly.