



INDIAN INSTITUTE
OF TECHNOLOGY
PALAKKAD

Indian Institute of Technology Palakkad

भारतीय प्रौद्योगिकी संस्थान पालक्काड

STORES & PURCHASE SECTION

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Tender No. TENDER/2022-23/119

Date of Publication:11-08-2022

Date/Time of Closing: 26-08-2022, 1500 hours

Indian Institute of Technology Palakkad Invites Tender under Two-bid system for the:

NOTICE INVITING TENDER (NIT) FOR CUSTOM MADE MEDICAL INSURANCE AND PERSONAL ACCIDENT INSURANCE FOR THE EMPLOYEES AND CUSTOM MADE MEDICAL INSURANCE AND PERSONAL ACCIDENT INSURANCE FOR THE STUDENTS OF IIT PALAKKAD

| S. No. | Events | Date and Time |
|--------|--|------------------------|
| 1 | Publication of the Tender Document | 11-08-2022 |
| 2 | Date of Pre Bid Meeting and Time | 18-08-2022, 1100 hours |
| 3 | Last Date/Time for submission of the manual Bids | 26-08-2022, 1500 hours |
| 4 | Opening of Technical Bids | 26-08-2022, 1515 hours |

1. The tender document can be accessed from <https://iitpkd.ac.in/tenders>. Last date/time for submission of the bids in OFFLINE mode is **26-08-2022**, 1500 hours. The bids will be opened by the duly constituted Committee on the closing date. The technical bids will be opened and examined by the committee, which will decide the suitability of the bid as per the specifications and requirements of IITPKD.
2. Only those who qualify in the technical evaluation will be graduated to the opening of financial bids. In case of any holiday or unforeseen closure of the institute on the scheduled day of opening of the bids, the bids will be opened on the next working day at the same time, but the deadline for submission of bids remains the same as indicated above.
3. The Technical and the Commercial Bids shall be sealed by the bidder in **two separate covers** duly superscribed as “TENDER FOR CUSTOM MADE MEDICAL INSURANCE AND PERSONAL ACCIDENT INSURANCE FOR THE EMPLOYEES AND STUDENTS” and both these sealed covers are to be put in a bigger cover, which should also be sealed and duly superscribed as “TENDER FOR CUSTOM MADE MEDICAL INSURANCE AND PERSONAL ACCIDENT INSURANCE FOR THE EMPLOYEES AND STUDENTS” - Tender No. **TENDER/2022-23/119**.
4. **The bids should be submitted offline**; dropped in the tender box or may be sent to IIT Palakkad (Address: The Registrar, Kind attention “Officer in-charge, Purchase Section”, Ahalia Integrated Campus, Kozhipara, Palakkad 678557) latest by **26-08-2022**, 1500 hours. Bids received after the above mentioned date and time shall not be considered. Conditional bids will be rejected outright.
5. Pre-bid Meeting will be held in ONLINE Mode. The link for the meeting will be intimated through a separate notification. Bidders who are unable to participate in the Prebid Meeting may please send their queries to purchase@iitpkd.ac.in. Queries, if any, shall be sent latest by 1600 hours of 17-08-2022. The bidders who wish to participate in the Pre-bid Meeting are requested to send their official email address, name of the authorized representative who will be participating in the meeting on behalf of them and his/her mobile number to purchase@iitpkd.ac.in latest by 1600 hours of 17-08-2022.
6. Any modification or clarification sought in the tender document post the Pre-bid Meeting shall not be entertained.

TERMS AND CONDITIONS

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| 1 | GENERAL | <p>(a) The responsibility of submission of the bids on or before the last date shall rest with the tenderer. The institute will hold no responsibility for the non-receipt of the bids or the bids received after the date/time specified. Any bid received by IITPKD after the bid submission deadline prescribed by IITPKD, shall be rejected and returned unopened to the Bidder.</p> <p>(b) Canvassing or offer of an advantage or any other inducement by any person with a view to influencing acceptance of a bid is an offense under the Laws of India. Such action will result in the rejection of bid, in addition to other punitive measures.</p> <p>(c) Each bidder shall submit only one bid, either by himself or as a partner in a joint venture or as a member of the consortium. If a bidder or if any of the partners in a joint venture or any one of the members of the consortium participate with more than one bid, the bids (of both the individual and the partnership/consortium/joint venture) are liable to be rejected.</p> <p>(d) The bidder shall bear all costs associated with the preparation and submission of his bid and IITPKD shall in no case be responsible or liable for those costs, regardless of the conduct or outcome of the tender process.</p> <p>(e) IITPKD will respond to any request for clarification or modification of the Tender Document that is received during the prebid meeting. Deviations, if any, observed by the Institute in the submitted bids, from the Terms and Conditions of the Tender Document will not be accepted by the Institute.</p> <p>(f) Except for any such clarification by the Institute, which is expressly stated to be an addendum to the tender document issued by the Registrar, IIT Palakkad, no written or oral communication, presentation or explanation by any other employee of any of the Sections/Departments of the Institute, shall be taken to bind or fetter the Institute.</p> <p>(g) The bidder is expected to examine all instructions, forms, terms and conditions in the Tender Document. In the event of discovery of any missing pages, the bidder shall inform the same to the Section/ Department concerned. Failure to furnish the information required by the Tender Document or submission of a tender not substantially responsive to the Tender Document in every respect will be at the bidder's risk and may result in rejection of the bid.</p> <p>(h) The bidder shall not make or cause to be made any alteration, erasure or obliteration to the text of the Tender Document.</p> <p>(i) The Supplier shall not, without the prior written consent of IITPKD, assign to any third party, the Contract or any part thereof.</p> |
| 2 | COMPOSITION OF THE TENDER DOCUMENT | <p>The Tender Document comprises of:</p> <p>Instruction to the bidders including terms and conditions</p> <ol style="list-style-type: none"> 1. Terms of Reference (Annexure-I) 2. Pre- Qualification Criteria (Annexure-II) 3. Techno Commercial (Annexure-III) 4. Undertaking (Annexure-IV) 5. Blacklisting Declaration (Annexure-V) 6. Abstract age of Students (Annexure-VI) 7. Abstract age of Employees & Dependents (Annexure-VII) 8. Payment Liability in case of personal accident Insurance (Annexure-VIII) 9. Format of Commercial Bid (Annexure-IX) |

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| 3 | <p>DOCUMENTS COMPRISING THE BID</p> | <p>(a) Information related to the agency/bidder such as photocopies of the Registration/PAN/GST/TIN shall be furnished.</p> <p>(b) The pre-qualification bid should consist of all technical details as per the terms and conditions. No prices should be included in the technical bid. Mentioning of Prices in the Technical Bid shall lead to <u>DISQUALIFICATION</u>.</p> <p>(c) Bidders, who are bidding for this NIT shall comply the following:</p> <ol style="list-style-type: none"> 1. The bidder must have an IRDAI license as on the date of submission of the bids, for procuring Medical Insurance business in India. A copy of the certificate should be submitted along with the Bid. 2. The bidder should be in existence for at least 5 years and should be in the line of business of providing Medical Insurance during the said period. Copies of Certificate of Incorporation and Certificate of Commencement of business shall be submitted as supporting documents. 3. The bidder should have a minimum Claim Settlement Ratio (as per IRDAI) of 90% during the last TWO Financial Years as on 31-03-2020 and 31-03-2021. Undertaking on the company's letter head shall be submitted in this regard. 4. Total Premium Collection should be at least Rs.50,00,00,000/- (Rupees Fifty Crore Only) during the last TWO Financial Years. Copies of Audited Accounts to be submitted. 5. The bidding firm should have filed Income Tax Return for last TWO Financial Years. Copy of ITR Acknowledgment shall be submitted. |
| 4 | <p>EARNEST MONEY DEPOSIT (EMD)</p> | <p>(a) The bidder shall furnish, as part of the bid, an EMD (Earnest Money Deposit) for Rs.1,00,000/- (Rupees One Lakh Only) in the form of Demand Draft/FDR in the name of Registrar IIT Palakkad payable. The amount may also be transferred as online payment to the institute's account. (IIT PALAKKAD , Account No. 35520964533 , Bank Name STATE BANK OF INDIA , Branch KANJIKODE, PALAKKAD , IFSC SBIN0006640)</p> <p>(b) Bids not accompanied by EMD shall be DISQUALIFIED.</p> |

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| 5 | PERFORMANCE SECURITY | <p>(a) The performance security shall be submitted within FIFTEEN DAYS from the date of issuance of work order by IITPKD. The successful bidder shall furnish the Performance Security equal to 3% of the order / contract value. The Performance Security shall be valid all along the contract period and shall extend upto SIXTY DAYS after the date of completion of contract period. It shall be ensured by the successful bidder that the validity of the Performance Security submitted is extended depending on the date of commencement of the contract. The performance security shall be a bank guarantee (in the format as provided) issued by the Indian Scheduled bank acceptable to IITPKD or a Demand Draft favoring, INDIAN INSTITUTE OF TECHNOLOGY PALAKKAD payable at PALAKKAD. The amount may also be transferred as online payment to the institute's account. (IIT PALAKKAD , Account No. 35520964533 , Bank Name STATE BANK OF INDIA , Branch KANJIKODE, PALAKKAD , IFSC SBIN0006640)</p> <p>(b) The performance security shall automatically become null and void once all the obligations of the Supplier under the Contract have been fulfilled, including, but not limited to, any obligations during the contract Period and any extensions to the period. The performance security shall be returned to the Supplier not later than fifteen (15) days after its expiry.</p> <p>(c) Failure of the successful Bidder to comply with the requirements shall constitute enough grounds for the annulment of the award and forfeiture of the EMD, in which event IITPKD may call for new bids.</p> |
| 6 | BID PRICES AND CURRENCY | Prices shall be quoted ONLY in Indian Rupees. |
| 7 | PERIOD OF VALIDITY OF BIDS | <p>(a) Bids shall remain valid for a period of 180 DAYS after the date of the deadline for submission of bids prescribed by IITPKD.</p> <p>(b) If the deadline is extended due to unforeseen circumstances, the bid validity shall be deemed to have extended accordingly.</p> |

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| 8 | SERVICES TO BE PROVIDED | <ol style="list-style-type: none"> 1. Preference will be given for Cashless facility. 2. The service providers shall share the list of TPA and PAN India Network Hospitals along with the bid. It is preferred to have a minimum of 5 network hospitals in each district of Kerala and Coimbatore (Tamil Nadu) 3. The service provider should have a mechanism for its network hospitals to verify the database of insured employees of IIT Palakkad, 24x7x365 basis, to avoid any delay in cashless treatment on account of approval from the insurer or their approved third party agencies 4. In no event cashless treatment in network hospitals can be withdrawn unilaterally /stopped /delayed / terminated by the agency or hospitals involved. A penalty clause will be included in the Agreement in this regard. 5. During the policy period there will be no revision in the premium amount. 6. No co-payment shall be insisted on for policy coverage. 7. The selected company should furnish a monthly statement of claims including buffer claim to the Nodal Officer designated for the purpose on or before 10th of the following month. 8. Coverage should be provided to the newly appointed employees also from the date of their joining the Institute. The Institute will pay the necessary pro-rata premium to your company, on demand. 9. Identity Cards/e-Cards are to be issued to all the persons covered under the policy as early as possible, but not later than 20 days from the date of payment of premium. Till then IIT Palakkad ID card of the employees shall be honoured in all the network hospitals. 10. In case the Institute decides to extend the period of coverage for subsequent years under the same terms and conditions, with provision to modify any of them depending on the development in Healthcare, please indicate the discounts that may be offered on the premium for such periods (2 to 5 years) that may be decided prior to finalizing the contract. |
| 9 | ORIENTATION/AWARENESS FOR THE EMPLOYEES | <ol style="list-style-type: none"> 1. The employees of the institute shall be oriented on the schemes upon issuance of the contract. 2. SPoC: The agency to whom the contract is awarded shall deploy a Single Point of Contact (SPoC) with whom all the technical/claim related issues will be taken up by the institute. 3. The SPoC shall visit the institute at least once in every month/ as and when required to get updated on the matters pertaining to the policy. |
| 10 | GOVERNING LAW AND SETTLEMENT OF DISPUTES | <ol style="list-style-type: none"> (a) The Contract shall be governed by and interpreted in accordance with the laws of India. (b) Any dispute or claim arising out of/relating to this Contract of the breach, termination or the invalidity thereof, shall be settled by the Hon'ble Courts of Justice at Palakkad. (c) The page number should be marked in all pages serially (including all supporting documents enclosed with the tender document) and the declaration for the same shall be submitted by the bidder as in Annexure-II. (d) IITPKD reserves the right to accept or reject any or all the tenders in part or whole or may cancel the tender at its sole discretion without assigning any reason whatsoever. No further correspondence in this regard will be entertained. |

AWARD OF CONTRACT

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| <p align="center">1</p> | <p align="center">AWARD CRITERIA</p> | <ol style="list-style-type: none"> 1. IITPKD will award the Contract to the Bidder, whose bid has been determined to be substantially responsive and evaluated as the lowest quote. The Institute reserves the right to issue Contracts to different bidders, who may be the: 2. Lowest one in the different types of the Proposals that are floated. The Contract will be awarded to the L1 in each of the proposal, namely, (A) Custom Made Medical Insurance for Employees and their Dependents, (B) Personal Accident Insurance for the Employees (C) Custom Made Medical Insurance for the Students and (D) Personal Accident Insurance for the Students. 3. The Institute reserves its right to consider part or full of the offer or reject the offer without assigning any reasons, whatsoever. 4. IITPKD reserves the right to accept or reject any bid or to annul the bidding process and reject all bids at any time prior to Contract award, without thereby incurring any liability to the Bidders. 5. IITPKD reserves the right to negotiate with the Bidder, whose bid has been evaluated as the lowest quote. |
| <p align="center">2</p> | <p align="center">AWARD OF WORK ORDER</p> | <ol style="list-style-type: none"> 1. Prior to the expiration of the period of bid validity, IITPKD will issue the Letter of Intent / Work Order to the successful Bidder in writing. 2. Any amendment(s) in the Work Order will be permitted within SEVEN DAYS of its issuance. No amendments will be permitted beyond this period. 3. The Work Order will constitute the foundation of the Contract. |
| <p align="center">3</p> | <p align="center">CONTRACT AGREEMENT</p> | <ol style="list-style-type: none"> 1. Within SEVEN DAYS of receipt of the Work Order, the successful Bidder shall sign and date its copy on each page and return it to the Purchaser. 2. Copy of Work Order duly signed and dated by the successful Bidder on each page shall constitute the Contract Agreement. |

ANNEXURE-I

TERMS OF REFERENCE (TOR)

PROPOSAL-A

CUSTOM MADE MEDICAL INSURANCE FOR THE EMPLOYEES OF IIT PALAKKAD AND THEIR DEPENDENTS

| Category | No. of persons to be covered (Approx.) | Sum Insured (SI) per Family (floater) (Basic Coverage) (INR) | Corporate Buffer (INR) |
|--------------------------------|--|--|------------------------|
| Employees and their dependents | 500 | 3,00,000/- | 20,00,000/- |

- The premium will be on actual employee basis irrespective of the no. of dependants. For addition/deletion of dependants during the insurance period, there will be no financial implications. For addition/deletion of employees during the insurance period, additional premium amount will be given / withdrawn on pro-rata basis.
- Premium for Additional Coverage on Rs.1,00,000/- basis up to total sum insured of Rs.7,00,000/- may be opted and paid by the employees based on the premium rates quoted for the Basic Coverage.
- The choice to opt for an Additional Coverage is completely up to the employee. A maximum of 15% of the existing employees may opt for the Additional Coverage, which will be confirmed only when the premium amount for every plan is quoted, within two months of the issuance of Contract.
- Lowest Bidder will be decided based only on the quote that is received for the premium for Basic Coverage. The Contract will be awarded accordingly.
- Abstract of Age Group of Employees and Dependents (listed below), may be considered while quoting the premium.
- Group Mediciclaim Cover: Rs.3,00,000/- Floater per Family (See definition of Family (as per the norms of Govt. of India.) which includes employees and their dependents).
- Buffer Comprehensive Medical Cover: Rs. 20,00,000/- Floater amongst employees and their dependants, with no individual limit on amount and number of claims made. Sanction of expenditure from the Corporate Buffer will be at the discretion of the competent authority of the institute for families who have exhausted their ceiling limit.
- **Sub-limits**
 - Maternity: The Maternity claims shall be a maximum of Rs.50,000/- per child, towards any abnormalities or issues during pregnancy (Both for Normal and Cesarean).
 - Cataract: Rs.35,000/- per eye.
- **Room Rent:** For those who are covered under basic Sum Insured (SI), a maximum of Rs. 5,000/- per day per employee, will be paid/reimbursed for the Room Rent, by the insurer. Only for those who are opting for

Additional SI and paying the additional premium charges, the room rent shall be upto 2% of the Revised SI, which shall be reimbursed by the insurer.

- **ICU/ICMU/Similar Care:** A maximum of Rs.10,000/- per day per employee, will be paid/reimbursed for ICU/ICMU, by the insurer. Only for those who are opting for Additional SI and paying the additional premium charges, the rent shall be upto 4% of the Revised SI, which shall be reimbursed by the insurer.
- **Ambulance Charges:** A maximum of Rs.5,000/- per employee per claim will be permitted (This will include the use of an ambulance for all transfers).
- **Family/Dependency Definition:** As per the norms of Govt. of India.
- **Others:**

The rates quoted should be inclusive of “Arogya Sanjeevani”, which covers Inpatient COVID-19 related illnesses in the Group Mediclaim Policy, as per the IRDAI’s Press Release dated 24-07-2020.

- Pre-existing disease shall be covered from day 1 of issuance of policy.
 - Waiting period for the first 30 days shall be waived off.
 - 1,2,3,4 years waiting period shall be waived off.
 - All critical illnesses are to be covered
 - Exclusions in the policy have to be mentioned explicitly along with the quote.
 - The procedure followed for settlement of claims should be simplified and described in detail along with the quote.
 - Maternity shall be covered with a 9 months waiting period waiver.
 - Baby day-one cover benefit within the floater SI.
 - Pre-post-natal coverage within the maternity limit.
 - Day care treatment covered up to the Basic Coverage of SI.
 - Pre-Post hospitalization coverage of 30/60 days respectively.
 - Entitled room category clause waived off/ No proportionate clause applicable.
 - Full body Health Check-up Camps for the employees and their dependents to be arranged at Palakkad once during the contract period.
 - Psychiatric disorder is to be covered excluding counseling or observation
 - Dental treatment that requires hospitalization to be covered
 - Congenital diseases to be covered
 - Any hospitalization on account of earthquake and terrorism to be covered
 - Ayurvedic / Homeopathic /Unani hospitalization expenses are admissible up to Rs.50,000/- only when the treatment is taken as in patient in a Government hospital / medical college hospital
 - Domiciliary hospitalization to be covered
 - Internal congenital diseases, genetic diseases or disorders, treatment of mental illness, stress or psychological disorders and neurodegenerative disorders treatment, etc shall be as per the IRDA’s Circular IRDAI/HLT/REG/CIR/177/09/2019 dated 27-09-2019
- **Coverage for animal/serpent attacks:** Rs. 5,000/- for both IP/OPD, covered for less than 24 hours hospitalization also.
 - **Coverage of claims in transition period of a policy on renewal:** Any hospitalization which occurs during the transition period of the policy will be covered by the current insurer if the date of admission of the member falls within the policy period in force irrespective of the date of discharge occurring at a later date. All Such claims will have to be intimated to the insurer within the policy period and bills submitted within 30 days of discharge for claiming the benefit.
 - **Time limit for preferring claim:** Whenever treatment is taken for the employees/dependents covered under the scheme in any of the non-network hospital of the agency, and the employee pays the hospital bills, the Insurance claim should be sent in the prescribed claim form along with all supporting documents, such as Discharge Summary, prescription and Pharmacy bills, Lab / investigation reports in original, ECS form and cancelled cheque (or) First page of Bank Passbook copy within 30 days direct to the agency. The reimbursement to such employees shall be made within 30 days of submission of documents.

PERSONAL ACCIDENT INSURANCE FOR THE EMPLOYEES OF IIT PALAKKAD

| Category | No. of persons to be covered (Approx.) | Sum insured (Basic Coverage) per Employee (INR) |
|-----------------|---|--|
| Employees | 175 | 10,00,000/- |

- The premium will be on an actual employee basis. For addition/deletion of employees during the insurance period, additional premium amount will be given / withdrawn on a pro-rata basis.
- The policy shall also cover accidents during foreign visits by employees.
- Lowest Bidder will be decided based only on the quote that is received for the premium for basic coverage. The Contract will be awarded accordingly.
- The Payment Liability is as per Annexure VIII.

General Terms and Conditions

- Preference will be given for Cashless facility.
- The service providers shall share the list of TPA and PAN India Network Hospitals along with the bid. It is preferred to have a minimum of 5 network hospitals in each district of Kerala and Coimbatore (Tamil Nadu).
- The service provider should have a mechanism for its network hospitals to verify the database of insured employees of IIT Palakkad, 24x7x365 basis, to avoid any delay in cashless treatment on account of approval from the insurer or their approved third party agencies.
- No co-payment shall be insisted on for policy coverage.
- In no event cashless treatment in network hospitals can be withdrawn unilaterally /stopped / delayed / terminated by the agency or hospitals involved. A penalty clause will be included in the Agreement in this regard.
- During the policy period there will be no revision in the premium amount.
- The selected company should furnish a monthly statement of claims including buffer claim to the Nodal Officer designated for the purpose on or before 10th of the following month.
- Coverage should be provided to the newly appointed employees also from the date of their joining the Institute. The Institute will pay the necessary pro-rata premium to your company, on demand.
- Identity Cards/e-Cards are to be issued to all the persons covered under the policy as early as possible, but not later than 20 days from the date of payment of premium. Till then the IIT Palakkad ID card of the employees shall be honoured in all the network hospitals.
- In case the Institute decides to extend the period of coverage for subsequent years under the same terms and conditions, with provision to modify any of them depending on the development in Healthcare, please indicate the discounts that may be offered on the premium for such periods (2 to 5 years) that may be decided prior to finalizing the contract.
- **Orientation/Awareness for the employees:** The employees of the institute shall be oriented on the schemes upon issuance of the contract.
- **SPoC:** The agency to whom the contract is awarded shall deploy a Single Point of Contact (SPoC) with whom all the technical/claim related issues will be taken up by the institute.
- The SPoC shall visit the institute at least once in every month/ as and when required to get updated on the matters pertaining to the policy.

PROPOSAL-C

CUSTOM MADE MEDICAL INSURANCE FOR THE STUDENTS OF IIT PALAKKAD

| S. No. | Category | No. of persons to be covered (Approx.) | Sum Insured (floater) (Basic Coverage) per Student (INR) | Corporate Buffer (INR) |
|---------------|-----------------|---|---|-------------------------------|
| 1 | Students | 645 (As in Annexure VI) | 1,50,000/- | 10,00,000/- |

- The premium will be on actual number of students. For addition/deletion of students during the insurance period, additional premium amount will be given / withdrawn on pro-rata basis.
- Abstract of Age Group of Students is in **Annexure VI**, which may be considered while quoting the premium.
- Lowest Bidder will be decided based only on the quote that is received for the premium for basic coverage. The Contract will be awarded accordingly
- Pre-existing illness to be covered retrospectively up to a period of 30 days
- For any claims, 24-hours hospitalization is mandatory. However, for the claims related to specific treatments during Day Care such as Dialysis, Radiotherapy, K wire fixation, CT scan, MRI, ECG etc. and for such other specialized procedures which requires hospitalization less than 24 hours, claims shall be honoured. The bidder is requested to provide an elaborate list of such specific treatments during requiring hospitalization for less than 24 hours.
- Compensation towards Death/PTD (Permanent Total Disability) and reimbursement of medical expenses due to all types of accidents.
 - Death - Compensation of Rs.3,00,000/- (Rupees Three Lakh only).
 - Reimbursement of hospital medical expenses upto maximum of Rs.1,50,000/- (Rupees One Lakh and Fifty Thousand only)
- **Buffer Amount utilization:** Rs.10,00,000/- Floater amongst the students, with no individual limit on amount and number of claims made. Sanction of expenditure from the Corporate Buffer will be at the discretion of the competent authority of the institute for the students who have exhausted their ceiling limit.
- **Others:**
 - Psychiatric disorder is to be covered excluding counselling or observation.
 - Dental treatment that requires hospitalization to be covered.
 - Domiciliary hospitalization to be covered
 - 100% Cashless treatment at network hospitals
 - Pre and Post hospitalization expenses to be included under coverage “30 and 60 days” respectively
 - **Ambulance Charges:** A maximum of Rs.5,000/- per student per claim will be permitted (This will include the use of ambulance for all transfers).
 - **Room Rent:** A maximum of 2% of the Sum Insured per day per student, will be paid/reimbursed for Room Rent, by the insurer.
 - **ICU/ICMU/Similar Care:** A maximum of 4% of the Sum Insured per day per student, will be paid/reimbursed for ICU/ICMU, by the insurer.
 - A minimum of Six Months should be given for claiming reimbursement after discharge from hospitalization

PROPOSAL-D

PERSONAL ACCIDENT INSURANCE FOR THE STUDENTS OF IIT PALAKKAD

| Category | No. of persons to be covered (Approx.) | Sum Insured (Basic Coverage) per Student (INR) |
|-----------------|---|---|
| Students | 645 | Rs.1,50,000/- |

- The premium will be on actual student basis. For addition/deletion of students during the insurance period, additional premium amount will be given / withdrawn on pro-rata basis.
- Lowest Bidder will be decided based only on the quote that is received for the premium for basic coverage. The Contract will be awarded accordingly.
- The Payment Liability is as per Annexure VIII.

ANNEXURE-II

QUALIFICATION CRITERIA

| S. No. | Eligibility / Qualifying Criteria | Documents to be Submitted |
|--------|--|---|
| 1. | The bidder shall furnish, as part of the bid, an EMD (Earnest Money Deposit) for Rs.1,00,000/- (Rupees One Lakh Only) in the form of Demand Draft/FDR in the name of Registrar IIT Palakkad payable. The amount may also be transferred as online payment to the institute's account. (IIT PALAKKAD, Account No. 35520964533, Bank Name STATE BANK OF INDIA, Branch KANJIKODE, PALAKKAD, IFSC SBIN0006640). | In case of claiming exemption from EMD, appropriate and valid MSME/NSIC documents shall be submitted. |
| 2. | Cashless treatment should be available in all network hospitals including Ahalia Chain of Hospitals, Palakkad. | The self-attested list of all hospitals where cashless facilities are available with the agency shall be provided. |
| 3. | Registration Certificate, PAN, GST related information shall be furnished. | Self-attested Photocopies of the documents shall be submitted. |
| 4. | IRDAI license as on the date of submission of the bids, for procuring Medical Insurance business in India. | A self-attested photocopy of the certificate should be submitted. |
| 5. | The bidder should be in existence for at least 5 years and should be in the line of business of providing Medical Insurance during the said period. | Self-attested copies of Certificate of Incorporation and Certificate of Commencement of business shall be submitted as supporting document. |
| 6. | The bidder should have a minimum Claim Settlement Ratio (as per IRDAI) of 90% during the last TWO Financial Years as on 31-03-2020 and 31-03-2021. | Undertaking on the company's letter head shall be submitted in this regard. |
| 7. | Total Premium Collection should be at least RS.50,00,00,000/- (Rupees Fifty Crore) during the last TWO Financial Years. | Self-attested copies of Audited Accounts shall be submitted. |
| 8. | TPA Services Involved (if any), Name and Contact details to be submitted. | Relevant Self-attested Supporting Documents shall be submitted. |
| 9. | List of Network hospitals to be provided. | Relevant Self-attested Supporting Documents/Brochures/Web References shall be submitted. |
| 10. | The bidding firm should have filed Income Tax Return for the last TWO Financial Years. | Self-attested copies of ITR Acknowledgments shall be submitted. |
| 11. | The bidder should produce at least three testimonials from its earlier or existing clients. | Self-attested Photocopies of the documents shall be submitted. |
| 12. | Tender Document | Signed tender document, with the sign and stamp of the Designated Authority shall be submitted. |

TECHNO-COMMERCIAL BID

| A. Company Profile | |
|--|--|
| Name of the Bidder | |
| Postal Address of the Registered Office | |
| Telephone (Landline) No. | |
| Mobile No. | |
| Email Address (Official) | |
| Name of the CEO/Director/Contact Person | |
| Name(s) of the Partners (if applicable) | |
| Registration No. (Upload supporting document) | |
| Type of Firm (Proprietary/Partnership/Private Ltd./Private/MNC/Cooperative/Govt. Undertaking/Any Other) | |
| Email Address and Contact Number(s) of CEO/Director | |
| Year of Establishment | |
| No. of Years of Operations in India | |
| Location of Offices in India / Abroad | |
| PAN (Upload supporting document) | |
| GST (Upload supporting document) | |
| Website Address | |
| B. Experience/Credentials | |
| List of Clients and Testimonials (Please upload necessary supporting document) | |
| C. Financial Background of the Firm – Premium Collection (Upload supporting document signed by Competent Authority) | |
| 2019-20 | |
| 2020-21 | |
| E. Service Support pertaining to the Claims made | |
| Track record of service provided during last 2 years (Upload supporting documents) pertaining to the claims made | |
| F. Others | |
| Has the firm ever been debarred/blacklisted by any Govt. Organization/Dept.? If 'yes' the details thereof. Upload (supporting document) | |
| Note: Supporting Documents, wherever asked for, shall be enclosed along with the Bid, without which the Bid shall be rejected outright. | |

UNDERTAKING BY THE BIDDER

I/we have carefully gone through all the Terms and Conditions as mentioned in the tender document. I/we declare that all the provisions of this tender are acceptable to my company. I/we further certify that I am an authorized signatory of my company and am, therefore, competent to make this declaration.

I/We hereby undertake that there are _____ pages, serially numbered, in the submitted tender including the supporting documents. (Please serially number all the pages including blank pages, if any).

Note:

This letter should be on the letterhead of the bidding firm and should be signed by the Competent Authority.

DECLARATION REGARDING CLEAN TRACK BY THE BIDDER

I/we carefully gone through the Terms & Conditions contained in the above referred tender. I/we hereby declare that my company / firm is not currently debarred / blacklisted or no legal case is pending by any Government / Semi Government Organizations / Institutions in India or abroad. I/we further certify that I am the competent officer in my company /firm to make this declaration.

Note:

1. Please submit this in the Company's Letterhead with the sign and stamp of the Competent Authority.
2. In case the company/firm was blacklisted previously, please provide the details regarding Period for which the company / firm was blacklisted and the reason/s for the same.

Note:

Please submit this in the Company's Letterhead with the sign and stamp of the Competent Authority.

ABSTRACT OF AGE GROUP OF STUDENTS – APPROX.

| Age Group | No. of Members |
|------------------|-----------------------|
| 15 to 20 | 373 |
| 21 to 25 | 250 |
| 26 to 30 | 130 |
| 31 to 35 | 40 |
| 36 to 40 | 8 |
| 40 to 50 | 8 |
| Total | 809 |

ABSTRACT OF AGE GROUP OF EMPLOYEES AND DEPENDENTS

| Age Group | No. of Members |
|------------------|-----------------------|
| 0 to 5 | 52 |
| 6 to 10 | 25 |
| 11 to 15 | 5 |
| 16 to 20 | 5 |
| 21 to 25 | 17 |
| 26 to 30 | 62 |
| 31 to 35 | 98 |
| 36 to 40 | 69 |
| 41 to 45 | 15 |
| 46 to 50 | 15 |
| 51 to 55 | 25 |
| 56 to 60 | 34 |
| 61 to 65 | 32 |
| 66 to 70 | 24 |
| 71 to 75 | 17 |
| 76 and above | 5 |
| Total | 500 (approx.) |

PAYMENT LIABILITY IN CASE OF PERSONAL ACCIDENT INSURANCE

Payment Liability as per the tables below which shall be considered while quoting the premium.

Permanent Total Disablement

| | |
|--|---------------------|
| For Death | 100% of Sum insured |
| Loss of sight of both the eyes | 100% of Sum insured |
| Loss of two entire hands or two entire feet | 100% of Sum insured |
| Loss of one entire hand or one entire foot | 100% of Sum insured |
| Complete loss of hearing of both eyes and complete loss of speech | 100% of Sum insured |
| Complete loss of hearing of both eyes and complete loss of speech and loss of one limb or loss of sight of one eye | 100% of Sum insured |

Permanent Partial Disablement

| Part of the Body | Liability Part | Percentage of Sum Insured |
|---|--|----------------------------------|
| Toe | Loss of Toes - All | 20 |
| | Great - both phalanges | 5 |
| | Great - one phalanx | 2 |
| | Other than great, if more than one toe lost each | 1 |
| Ear | Loss of Hearing - Both Ears | 50 |
| | Loss of hearing - One Ear | 15 |
| Finger | Loss of Four fingers and thumb of one hand | 40 |
| | Loss of Four Fingers | 35 |
| | Loss of thumb - both phalanges | 25 |
| | Loss of thumb - one phalanx | 10 |
| | Loss of Index Finger - three phalanges | 10 |
| | Loss of Index Finger - two phalanges | 8 |
| | Loss of Index Finger - one phalanx | 4 |
| | Loss of Middle Finger - three phalanges | 6 |
| | Loss of Middle Finger - two phalanges | 4 |
| | Loss of Middle Finger - one phalanx | 2 |
| | Loss of Ring Finger - three phalanges | 5 |
| | Loss of Ring Finger - two phalanges | 4 |
| | Loss of Ring Finger - one phalanx | 2 |
| Loss of Little Finger - three phalanges | 4 | |
| Loss of Little Finger - two phalanges | 3 | |

| | | |
|-----------------------|---|----|
| | Loss of Little Finger - one phalanx | 2 |
| | Loss of Metacarples – First or Second (additional) | 3 |
| | Loss of Metacarples – Third, Fourth or Fifth (additional) | 2 |
| Shoulder/Elbow | An arm at the shoulder joint | 50 |
| | An arm above the elbow joint | 50 |
| | An arm beneath the elbow joint | 50 |
| | A hand at the Wrist | 50 |
| | A thumb | 10 |
| Leg | A leg above mid-thigh | 50 |
| | A leg up to mid-thigh | 50 |
| | A leg up to beneath the knee | 50 |
| | A leg up to mid-calf | 40 |
| | A foot at the ankle | 40 |
| Eye | Loss of sight of one eye | 50 |
| Others | Sense of Smell | 10 |
| | Sense of taste | 5 |

TO BE SUBMITTED IN A SEPARATE SEALED COVER SUPERSCRIBING FINANCIAL BID

| FORMAT OF COMMERCIAL BID | | | | | | | |
|--|------|---|------------------------|--|-------|------------|-------------------|
| Tender No. | | | | | | | |
| Name and address of the Bidder | | | | | | | |
| Name of the Service | Qty. | Sum Insured per Family/ Employee/ Student (INR) | Corporate Buffer (INR) | Premium per Family/ Employee / Student (INR) | GST % | GST AMOUNT | Grand Total (INR) |
| <u>Proposal A :</u> Custom Made Medical Insurance for the Employees of IIT Palakkad and their Dependents | 500 | 3,00,000 | 20,00,000 | | | | |
| <u>Proposal B :</u> Personal Accident Insurance for the Employees of IIT Palakkad | 175 | 10,00,000 | Not Applicable | | | | |
| <u>Proposal C :</u> Custom Made Medical Insurance for the Students of IIT Palakkad | 645 | 1,50,000 | 10,00,000 | | | | |

| | | | | | | | |
|---|------------|-----------------|---------------------------|--|--|--|--|
| <u>Proposal D :</u> | 645 | 1,50,000 | Not Applicable | | | | |
| Personal Accident Insurance for the Students of IIT Palakkad | | | | | | | |

Note:

1. The premium will be on an actual employee basis. For addition/deletion of employees/dependents during the insurance period, additional premium amount will be given / withdrawn on a pro-rata basis.
2. Lowest Bidder will be decided based only on the quote that is received for the premium quoted. The Contract will be awarded accordingly.
3. Abstract of Age Group of Employees and Dependents is in Annexure-VII, which may be considered while quoting the premium.
4. Abstract of Age Group of Students is in Annexure-VI, which may be considered while quoting the premium.
5. The Payment Liability is as per the Annexure-VIII.