

TERMS OF REFERENCE

MEDI-CLAIM COVERAGE OF SAU STAFF

- 1) **Background:**
No. of persons to be insured – 100 approx
- 2) **Objective of the assignment:** The objective of this assignment is coverage of Health Insurance and Group Accidental Insurance (GIA) Policy from an authorized agency which could provide a well designed and appropriate policy for the employees of SAU.
- 3) **Expectations from Insurance agency:** The agency will have to submit a detail Policy Proposal consisting the best benefits and compensation for the employees of SAU. This insurance coverage will be valid till the staff will remain working with SAU. The staff may retain the policy if he requires so. In such cases the agency will have to deal separately with the person concerned.
- 4) **Category wise Insurance benefit required by SAU as hereunder:**

The policy will cover maximum for Rs. 5,00,000.00 for medi-claim. The policy will cover 5 dependant members of the employee e.g. Parents, Spouse and Children. Parents-in-laws in case of female employees can be covered in place of parents within the quoted price. The agency will submit their proposal with detail description required as hereunder: If in certain case the dependent is more than 5 members, their name should also be considered within the existing quoted price. However, if any employee's dependent is less than 5 members, he/she can include name of their father, mother or father-in-law & mother-in-law but the members should be within 5 nos.

Apart from this the agency will provide Group Accidental Insurance (GIA) Coverage for Rs. 20.00 lakhs per employee and the following facilities should be covered in the GIA.

- a) Benefit and compensation in case of Partial Disablement (minimum 30 % of the total coverage)
- b) Benefit and compensation in case of Permanent disablement ((minimum 60 % of the total coverage)
- c) Benefit and compensation in case of Death (minimum 100 % of the total coverage)
- d) Compensation for the earning (Man days) lost due to hospitalization and treatment ((minimum 10 % of the total coverage or Rs. 700.00 per days for the LWP, whichever is in higher side)
- e) Declaration of Service Delivery conditions and Minimum time prescribed for settlement of Insurance Claims.
- f) Requirement of Documents necessary for Insurance agreement with SAU/employees
- g) Apart from all the above, the agency will also declare the incremental benefits and its condition as and when applied by IRDA.
- h) Any other optional benefit, if any:

5) An appropriate Medi-claim Insurance Policy maximum benefit for its employee which must include the following:

- a) Benefit in case of Hospitalization.
 - b) Benefit in case of continued treatment/Nursing in case of Post Hospitalization treatment.
 - c) Benefit in case of all expenses incurred in case of any type of Medical treatment but not limited to i.e.
 - Room, Boarding, Nursing Charges etc.
 - Visiting Doctors, Surgeons, Anesthetist, Physiotherapist, Consultants special fees.
 - Anesthesia, Blood, Oxygen, OT charges, Surgical appliances, Medicines, Any Diagnostic check up charges, diagnostic Material & X-ray, Dialysis, Chemotherapy, Radio Therapy, Physiotherapy, Cost of Pace Maker, Artificial limbs, Cost for organ transplant and its related expenses and Ambulance Charges.
 - Declaration of Service Delivery conditions and Minimum time period prescribed for settlement of Insurance Claims
 - Any other facility provisions like cashless facility, ID card and others.
 - Requirement of Documents necessary for Insurance agreement with SAU and its employees.
 - Apart from this, the agency will also declare the incremental benefits and its condition as and when applied/revised by IRDA.
 - Any other conditional benefit which can be opted by SAU/Insured person.
 - All Pre Existing Diseases
 - Waiver of 30 days waiting period
 - Waiver of 1st year exclusions
 - Waiver of 2nd year exclusions
 - Maternity Benefits
 - Waiver of waiting period for maternity
 - Child cover from day 1, vaccination expenses,
 - Outdoor hospital expenses including testing, consultation, medicines, Medical Aids etc. Maximum up to Rs. 30,000.00 per employees should be reimbursed during the policy period. The claim less than Rs. 3000.00 shall not be by the agency.
 - List of Day-care procedures
 - List of alternative medicine Treatments
- Servicing Support – Highlight the scope of services and timelines thereto. Single point of contact for all Policy vetting services. Establish clear escalation matrix for query resolution.
 - Communication support - Communication assistance for change management in case of any major change in plan design. Design and Implementation of Communication. Frequently Asked Question design.
 - Claim monitoring & Periodic Review - Monthly / Quarterly utilization report & presentation. Quarterly Third Party Administrator data audit to ensure consistency between claims filed and claims cleared by the Third Party Administrator.

6) Schedule and Outputs:

The key outputs include the following:

- Coverage of insurance for all employees of SAU.
- A Proposal of Medi-claim Policy with details consisting the benefits and compensation as stated herein above along with their applicable condition at a minimum annual premium rate.

Sl. No.	Deliverables	Time Schedule
1.	Submission of Proposal	1 week
2.	Presentation of the proposed policy and conditions (if required)	1 week
3	Recommendation of the Committee of SAU	2 week
4	Signing of Policy agreement with the most suitable agency	2 week

7) Review Committee to Monitor the Agency's services

A Review Committee may be constituted by JLSPS to monitor the service of the agency providing insurance policy in the interest of the project and it's employees. The committee may also seek comments and inputs on the agency's work if required in case of any service delay or other discrepancies arising out of agreement and may initiate legal action for relief. The SAU will continue with the agreement once its services found to be satisfactory till end of the project or also terminate the agreement either in case of non compliance of the service declaration or on the fulfillment of the project objective.

8) Extension of the Contract:

SAU can continue the Agency for a minimum period of 3 years or till end of the project period subject to performance of the Agency. The policy for next year onwards shall be extended with the base premium amount. In case IRDA changes the premium amount during the policy period, the premium amount shall be consider to change on a mutual discussion. In case the range of age group changes, that cost will bear by the SAU as per the base amount.

Draft Letter of Contract for Insurance Agency

Subject :

(Name of Agency) :

- 1) Set out below are the terms and conditions under which (Name of Agency) has agreed to carry out for (Name of Client) the above-mentioned assignment specified in the attached Terms of Reference.
- 2) For administrative purposes (Name of responsible staff of Client) has been assigned to administer the assignment and to provide [Name of Consultant] with all relevant information needed to carry out the assignment. The services will be required in (Name of Project) for about _____ days/months, during the period from _____ to _____.
- 3) The (Name of Client) may find it necessary to postpone or cancel the assignment and/or shorten or extend its duration. In such case, every effort will be made to give you, as early as possible, notice of any changes. In the event of termination, the (Name of Agency) shall be paid for the services provided to the date of termination, and the [Name of Agency] will provide the (Name of Client) with any reports or parts thereof, or any other information and documentation gathered under this Contract prior to the date of termination.
- 4) The services to be performed, the estimated time to be spent will be in accordance with the attached Description of Services.
- 5) This Contract, its meaning and interpretation and the relation between the parties shall be governed by the laws of Union of India
- 6) This Contract will become effective upon confirmation of this letter on behalf of (Name of Agency) and will terminate on _____, or such other date as mutually agreed between the (Name of Client) and the (Name of Agency).
- 7) Payments for the services will not exceed a total amount of Rs. _____.
- 8) The above charges includes all the costs related to carrying out the services, including overhead and any taxes imposed on [Name of Agency.]
- 9) The [Name of Agency] shall indemnify and hold harmless the (Name of Client) against any and all claims, demands, and/or judgments of any nature brought against the (Name of Borrower) arising out of the services by the [Name of Agency] under this Contract. The obligation under this paragraph shall survive the termination of this Contract.
- 10) The Agency agrees that, during the term of this Contract and after its termination, the Agency and any entity affiliated with the Agency, shall be disqualified from providing goods, works or services (other than the Services and any continuation thereof) for any project resulting from or closely related to the Services.

- 11) The Agency undertake to carry out the assignment in accordance with the highest standard of professional and ethical competence and integrity, having due regard to the nature and purpose of the assignment, and to ensure that the staff assigned to perform the services under this Contract, will conduct themselves in a manner consistent herewith.
- 12) The Agency will not assign this Contract or sub-contract or any portion of it without the Client's prior written consent.
- 13) The [Name of Agency] shall pay the taxes, duties fee, levies and other impositions levied under the Applicable law and the Client shall perform such duties, in regard to the deduction of such tax, as may be lawfully imposed.
- 14) The [Name of Agency] also agree that all knowledge and information not within the public domain which may be acquired during the carrying out of this Contract, shall be, for all time and for all purpose, regarded as strictly confidential and held in confidence, and shall not be directly or indirectly disclosed to any person whatsoever, except with the (Name of Client) written permission.
- 15) Any dispute arising out of the Contract, which cannot be amicably settled between the parties, shall be referred to adjudication/arbitration in accordance with Arbitration & Conciliation Act 1996.

Place:

Date:

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(Signature of Authorized Representative
on behalf of Agency)

(Signature & Name of the Client's
Representative)

LIST OF ANNEXURE

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| Annexure- A: | Terms of Reference and Scope of Services |
| Annexure - B: | Consultant's Authorised Représentative |

SCHEDULE OF PRICE BID FOR MEDI-CLAIM

Sl. No.	Categories	Maximum Coverage (Rs.)	Age Group of the Employees (Range)	Premium amount per person along with 5 dependant members	Service Charges (%)	Total Premium (Rs.)
1	Category I	Medi-claim up to Rs. 5.00 lakhs	0-35			
			36-45			
			46 & above			
2	Category I	Group Accidental Insurance (GIA) up to Rs. 20.00 lakhs.	All range of age group			

Signature of Authorized representative
Name of the Agency

Annexure-III (A)

For illustrative Purposes only:

SL. No.	Age Group of Employees (Range)	No. of Employees
1	0-35	60%
2	36-45	27%
3	46 & above	13%
	Total	100%

Technical Data Sheet

Technical Information/compliance data sheet for selection of Agency for Medi-Claim for SAU Staff				
Sl. No.	Requirement	Compliance /Any additional facility apart from requirement	Any Deviation or Additional Benefits for the employee, Please Mention	Provide supporting documents, if any
1	Benefit in case of continued treatment/Nursing in case of Post Hospitalization treatment.			
2	Benefit in case of continued treatment/Nursing in case of Pre Hospitalization treatment.			
3	Compensation for the earning (Man-days) lost due to hospitalization and treatment			
4	Benefit in case of all expenses incurred in case of any type of Medical treatment:			
A	Room, Boarding, Nursing Charges etc.			
B	Visiting Doctors, Surgeons, Anesthetist, Physiotherapist, Consultants special fees			
C	Anesthesia, Blood, Oxygen, OT charges, Surgical appliances, Medicines, Any Diagnostic check up charges, diagnostic Material & X-ray, Dialysis, Chemotherapy, Radio Therapy, Physiotherapy, Cost of Pace Maker, Artificial limbs, Cost for organ transplant and its related expenses and Ambulance Charges.			
5	Declaration of Service Delivery conditions and Minimum time period prescribed for settlement of Insurance Claims			
6	Any other facility provisions like cashless facility, ID card and others facilities			
7	Apart from this, the agency will also declare the incremental benefits and its condition as and when applied/revised by IRDA.			
8	Any other conditional benefit which can be opted by SAU/Insured person.			
9	All Pre Existing Diseases (Please provide the list of diseases to be covered)			
10	Waiver of 30 days waiting period			
11	Waiver of 1st year exclusions			
12	Waiver of 2nd year exclusions			
13	Maternity Benefits			
14	Waiver of waiting period for maternity			
15	Child cover from day 1			
16	Outdoor hospital expenses including testing, consultation, medicines, Medical Aids etc. Maximum up to Rs. 30,000.00 per employees should be reimbursed during the policy period. The claim less than Rs.			

	3000.00 shall not be entertained by the agency.			
17	The policy to be covered 5 dependant members of the employee e.g. Parents, spouse and 2 children within the quoted rates. In case of parent/souce expired, the policy should cover more than two children and will not exceed more than 5 dependant members of the employee.			
18	Room rent charges			
19	TPA (Third Party Assessment) or In house settlement			
20	Any other Benefits to be covered under the Policy			
21	Requirement of Documents necessary for Insurance agreement with SAU for its employees			
22	Name and Designation of person who would be responsible for the service. (At least two).			
23	IRDA Registration No. details			
24	List of Authorised Hospital in Jharkhand			