



विन्या से मुक्ति

कर्मचारी राज्य बीमा निगम
Employees' State Insurance Corporation
आदर्श चिकित्सालय एवं व्यावसायिक रोग केन्द्र
Model Hospital and Occupational Disease Centre
नन्दा नगर, इन्दौर Nanda Nagar, Indore - 452011
दूरभाष / Phone - 0731-2554411 फेक्स / Fax - 0731-2559080
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TENDER FORM FOR THE YEAR 2015-2017

INVITING SUPPLYMENTARY TENDER FOR SUPER SPECIALITY TREATMENT FACILITIES FROM HOSPITALS

Medical Superintendent, ESIC Model Hospital, Indore invites open tender for Super Speciality Treatment from Hospitals. The details can be downloaded from the ESIC website www.esic.nic.in and www.esicmp.in.

Tender forms can be purchased from Super Speciality Cell, ESIC Model Hospital by depositing demand draft of Rs. 500/- from a Nationalized Bank, in favour of ESIC Fund A/C No. 1 payable at Indore, from 16.02.2015 to 09.03.2015 Monday- Saturdays 10:00 am to 1:00 pm.

Last date of submitting the tender document- 10.03.2015, Upto 1:00PM

Date of opening the tender- 10.03.2015, 2:30PM

Medical Superintendent
ESIC Model Hospital,
Nanda Nagar, Indore (M.P.)

Application form

(For Empanelment of Super Speciality treatment facilities from Hospitals)

To,
The Medical Superintendent,
ESIC Model Hospital,
Nanda Nagar, Indore (M.P.) 452011

Subject: Expression of Interest (EOI) for Empanelment for super speciality treatment to ESI beneficiaries.

Sir,

In reference to your advertisement in the news paper/website dated..... I/We wish to offer super speciality treatment to ESI beneficiaries on cashless basis.

I/we Pledge to abide by the terms and conditions of the tender document and I/We also certify that the above information as submitted by me/us in Annexure I,II,III and IV is correct and I/We fully understand the consequences of default, if any.

Place:

Date:

(Name and signature of the Proprietor)

Enclosures: duly filled Annexures I,II,III ,IV and Demand Draft.

Annexure I

Employees' State Insurance Corporation Model Hospital and Occupational Disease Centre
Nanda Nagar, Indore - 452011
Tele - 0731-2559080 Fax-0731-2559080
E-Mail: ms-indore@esic.nic.in / www.esic.nic.in

No. 18-D/25/14/02/14/M.H. Indore SST Tender Vol. III

Date: 02.02.2015

(Please read all terms and conditions carefully before filling the application form and annexures thereto)

I. General Terms and Conditions

a) The Hospitals which have already been empanelled with this office for super speciality treatment/investigation should also give their expression of interest for continuation of services afresh on prescribed form along with cost of form and necessary enclosures otherwise their contract would be treated as terminated on respective due dates.

b) The cost of the application form and tender document is Rs 500/- (five hundred only) Non Refundable which is payable in the form of a Demand Draft drawn on any nationalized/Scheduled bank in favour of ESIC fund Account No-I Payable at SBI Indore.

Duly completed tender forms may either be dropped in person in tender box kept at the SST Cell on **date 10.03.2015, time- upto 1:00pm** or be sent by Registered/Speed post. The sealed envelope should be super scribed "Tender for empanelment of Hospitals for Super specialty treatment".

Documents received after the scheduled date and time (either by hand or by post) or open tender or tenders received through e-mail/fax or without the prescribed fee shall summarily be rejected.

c) Rates of package and procedure should be as per Revised CGHS RATES.

d) Tenderer is at liberty to apply for any number of super specialty treatment for which tie-up hospital must have regular super specialist doctor.

e) Successful tenderer (who intends to apply for Super-specialty Treatment) shall have to furnish a security deposit of **Rs. 20,000/- (Twenty Thousand only)** in the form of bank guarantee from any of the nationalized bank having validity of 24 plus 6 months (180 days extra from the expiry of contract) and the same will be refunded without any interest after termination/completion of the contract.

f) Application form and (Annexure I, II, III & IV) should be duly filled and signed by the proprietor, or duly authorized person.

g) The applications, if received, from the Hospitals/diagnostic Centers which have been de-empanelled by ESIC/CGHS/or any other Govt. Institution, will not be taken into consideration for three years from the date of de-empanelment.

h) An Agreement on stamp paper of Rs. 100/- shall be signed with Hospitals that are approved for empanelment after finalizing verification/physical verification of records/Institution and incidental charges related to agreement shall be borne by the Empanelled centre. Contract will be effective from the date of the contract.

i) Only those applications will be considered for Award of contract that fulfill all the technical conditions and also have satisfactory report of inspection committee. Technical Bid must be accompanied with all prescribed mandatory documents duly verified & signed, failing which the bid will not be entertained.

2. **Minimum Requirement** for Empanelment under following subcategories :-

(A) For super specialty treatment:-

The hospitals must satisfy the following conditions applying for super speciality treatment:-

- I. Hospitals with 50 or more beds with 24hr treatment facilities with regular super specialist doctor with all the necessary facilities in at least one of the following Super Specialties:-
 - a. Nephrology & Urology/ Urosurgery
 - b. Neurosurgery & Neurology
 - c. Gastro-enterology & GI Surgery
 - d. Pediatric Surgery
 - e. Well equipped Burn Unit & Plastic Surgery
 - f. Dental services
- II. Intensive Care Unit.
- III. 24 hours emergency services managed by technically qualified staff.
- IV. Provision of dietary services.
- V. Super specialty hospital may have in-house investigation facilities for providing super specialty treatment
- VI. In house Blood Bank services preferably (if in-house blood bank not available than tie up hospital has to arrange blood for ESIC patient without charging any money from patient and will claim in bill as per CGHS Rates) declaration to be given on Rs 50 stamp paper regarding the same.

Note: - Only those applications will be considered for award of contract that fulfill all the technical conditions & also the satisfaction report of inspection committee.

3. Conditions Related to Packages and Rates

CGHS "Package Rate" shall mean all inclusive – including lump sum cost of inpatient treatment / day care / diagnostic procedure for which a CGHS beneficiary has been permitted by the competent authority or for treatment under emergency from the time of admission to the time of discharge including (but not limited to) – (i) Registration charges, (ii) Admission charges, (iii) Accommodation charges including patients diet, (iv) Operation charges, (v) injection charges, (vi) Dressing charges, (vii) Doctor / consultant visit charges, (viii) ICU /ICCU/ charges, (ix) Monitoring charges, (x) Transfusion charges and Blood processing charges (xi)Pre Anesthetic checkup and Anesthesia charges, (xii) Operation theatre charges, (xiii) Procedural charges / surgeon's fee,(xiv) Cost of surgical disposables and all sundries used during hospitalization, (xv) Cost of medicines and consumables (xvi) Related routine and essential investigations (xvii) Physiotherapy charges etc. (xviii) Nursing care charges etc.

Package rates as mentioned in CGHS approved rate list for various treatment procedure are for semiprivate ward . if the beneficiary is entitled for general ward there will be a decrease of 10 % in these rates ; for private ward entitlement there will be an increase of 15%. However for investigations the rates as mentioned in CGHS list would apply irrespective of entitlement of the beneficiary.

Package rates also include two pre-operative consultations and two post-operative consultations.

- The Bidding Hospital shall provide certain discounts on drugs/treatment/procedures/ devices.

These are:-

- 15% discount on hospital rates if there is no package procedure under CGHS
- For devices/stents etc. not described in CGHS rates/terms & conditions, 15% discount on Maximum Retail Price (MRP).
- In case of drugs, not available in the CGHS package/Procedure, 10% discount on the MRP.

In case of emergency, if the ESI patient is admitted for the speciality/ super- speciality procedure for which the hospital is not empanelled to, the hospital centre shall levy CGHS approved rates for the procedure. If no such rates are available, then there shall be a discount of 15% on normal scheduled rates of the hospital with prior permission of M.S. Office Indore.

The empanelled hospital shall not refuse to treat any ESI patient in case of emergency in any specialty/super specialty which is available in hospital despite it is empanelled or not for the same. However, intimation for approval has to be given to the office of M.S. as soon as practicable/preferably next working day in case of holiday. In case of genuine delay, reason should be given and approval should be taken from M.S. office.

Hospitals empanelled under Medical Superintendent, ESIC, Indore shall not charge more than package rate. The services provided to ESIC beneficiaries shall be cashless.

Cost of Implants / stents / grafts are reimbursable in addition to package rates as per CGHS ceiling rates or as per actual, whichever is lower.

In case a beneficiary demands a specific Brand of Stent / Implant and give his consent in writing, the difference in cost over and above the ceiling rate may be charged from the beneficiary, which is non-reimbursable.

During In-patient treatment of the ESIC beneficiary, the hospital will not ask the Beneficiary or his / her attendant to purchase separately the medicines / sundries / equipment or accessories from outside and will provide the treatment within the package rate, fixed by the CGHS which includes the cost of all the items.

However, the following items are not admissible for reimbursement:

- Toiletries
- Sanitary napkins
- Talcum powder
- Mouth fresheners

In cases of conservative treatment / where there is no CGHS package rate, calculation of admissible amount would be done item wise as per CGHS rates.

Package rates envisage up to a maximum duration of indoor treatment as follows:

- Up to 12 days for Specialized (Super Specialties) treatment
- Up to 7 days for other Major Surgeries
- Up to 3 days for / Laparoscopic surgeries /elective Angioplasty / normal deliveries and
- 1 day for day care / Minor (OPD) surgeries.

However, if the beneficiary has to stay in the hospital for his / her recovery for a period more than the period covered in package rate, in exceptional cases, supported by relevant medical records and certified as such by hospital, the additional reimbursement may be allowed, which shall be limited to accommodation charges as per entitlement, investigations charges at approved rates, doctors visit charges (not more than 2 visits per day) and cost of Medicines (for additional stay).

No additional charge on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure/ faulty investigation procedure etc.

The empanelled health Care Organization cannot charge more than CGHS approved rates

In case of any instance of overcharging the overcharged amount over and above CGHS rate (except inadmissible items and difference paid due to implant/stent of a specific brand chosen by ESIC beneficiary) shall be recovered from the pending bills of the hospital.

If any empanelled health care Organization charges from CGHS beneficiary for any expenses incurred over and above the package rates vis-à-vis medicine, consumables, sundry equipment and accessories etc., which are purchased from external sources, based on specific authorization of treating doctor / staff of the concerned hospital and if they are not falling under the list of non-admissible items, reimbursement shall be made to the beneficiary and the amount shall be recovered from the pending bills of hospitals.

4. The maximum room rent for different categories would be as per CGHS rates/terms & conditions.

(a) Room rent is applicable only for treatment procedures for which there is no CGHS prescribed package rate. Room rent will include charges for occupation of Bed, diet for the patient, charges for water and electricity supply, linen charges, nursing and routine up keeping. Room rent for different categories would be as per CGHS terms & conditions.

(b) Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room shall have furnishings like wardrobe, dressing table, bedside table, sofa set etc. as well as a bed for attendant. The room has to be air conditioned.

(c) Semi private ward is a hospital room where 2 or 3 patients are accommodated which has attached toilet facilities and necessary furnishings.

(d) General ward is defined as Hall that accommodates 4 to 10 patients.

(e) Normally treatment in higher category of accommodation than the entitled category is not permissible, however in case of an emergency when entitled category accommodation is not available; admission in immediate higher category is to be allowed till entitled accommodation is available. Even in this case the empanelled centre has to charge as per entitlement of the patient.

5. Directions/Instructions for Tie-up Hospitals:

- The tie-up hospital will honour the referral letter issued by ESIC Model hospital and will provide medical care on priority basis. The tie-up hospital will provide medical care as specified in the referral letter; no payment will be made to tie-up hospitals for treatment/procedure/investigation which are not mentioned in the referral letter. If the tie-up hospitals feel necessity of carrying out any additional treatment/procedure/investigation in order to carry out the procedure for which patient was referred, the permission for the same is essentially required from the referring hospital either through e-mail, fax or telephonically (to be confirmed in writing at the earliest). The tie-up hospitals will not charge any money from the patient/attendant referred by ESIC System for any treatment/procedure/investigation carried out. If it is reported that the tie-up hospital has charged money from the patient then the concerned tie-up hospital may attract action for de-empanelment/blacklisting. All the drugs/dressings used during the treatment of the patient requiring reimbursement should be of generic nature. All the drugs/dressings used by the tie-up hospital requiring

reimbursement should be approved under FDA/IP/BP/USP pharmacopeia or DG ESIC Rate Contract. Any drug/dressings not covered under any of these pharmacopeia will not be reimbursed. Food supplement will not be reimbursed.

- It shall be mandatory for the tie up hospital to send a report online to the MS concerned on the same day or the very next working day on receipt of referral, giving details of the case, their specific opinion about the treatment to be given and estimates of treatment.
- The tie-up hospitals shall raise the bills on their hospital letter head with address and e-mail/fax number of the hospital, as per the P-II & P-III format. The tie-up hospitals shall raise the bills with supporting documents as listed in P-III duly signed by the authorised signatory. The specimen signatures of the authorised signatory duly certified by competent authority of the tie-up hospital shall be submitted to all the referring ESIC Model hospital. The bills which are not signed by the authorised signatory and are incomplete or not as per the format will not be processed and shall be returned to concerned tie-up hospital. Any change in the authorised signatory shall be promptly intimated by the tie-up hospitals to all the referring ESIC hospital.
- The drugs prescribed at the time of discharge of the patient after SST/secondary care treatment shall be issued by tie-up hospital for seven days for which the tie-up hospital can claim Rs. 2000/- or actual cost per patient, whichever is less, in the claimed bill. Afterwards all the medicines shall be issued by the ESIS system.

6. Other Instructions:

- The hospital/diagnostic centre shall provide treatment/investigation on cashless basis to the Insured person and dependent family members/ESIC staff (serving and retired).
- If one or more minor procedures form part of a major treatment procedure then package charges would be permissible for major procedure and only 50% of charges for minor procedures.
- Any legal liability arising out of such services shall be the sole responsibility of the empanelled Hospital/Centre and shall be dealt with by the concerned empanelled hospital/diagnostic centre. However, Services will be provided by the hospital/diagnostic centre as per the terms of contract.
- Empanelled Centres will investigate/treat the ESI beneficiary patient only for the condition for which they are referred with permission, and in the specialty/surperspecialty and/or purpose for which they are approved by ESIC. However, in case of unforeseen emergencies during admission necessary life saving measures may be taken and

concerned authorities may be informed accordingly with justification for approval as soon as it is practicable to do so.

- During the in-patient treatment of ESI beneficiary, the tie-up hospitals/empanelled centre will not ask the attendant to provide separately the medicine/sundries/equipment or accessories from outside and will provide the treatment within the package rates, fixed by the CGHS which includes the cost of all the items.
- In case of any natural disaster/epidemic, the hospital/diagnostic centre shall have to fully cooperate with the ESIC and will convey/reveal all the required information, apart from providing treatment/investigation facility.
- The empanelled centre **will have to report on daily basis** the details of admitted patients for indoor treatment to Medical Superintendent, Indore on e-mail address ms-indore@esic.nic.in & ms-indore@esic.in as per the prescribed format, failing which **hospital may be considered for de-empanelment.**
- If in emergency conditions a patient comes with a temporary referral letter having signature of Casualty Medical Officer, send the patient's attendant to ESIC for permanent referral letter the next day or before discharging the patient.

7. Payment Schedule:

The empanelled Super speciality hospital will send bills along with necessary supportive documents to the office of Medical Superintendent, Indore as soon as bills are generated after discharge of patient for further necessary action. The details of documents to be submitted are as follows:-

- a) Original Discharge slip duly verified by treating doctor incorporating brief history of the case, diagnosis, details of procedure done/treatment given/advised along with the duration.
- b) Original Reports of investigations duly verified.
- c) Original receipts of medicines/implants duly verified.
- d) Original invoice of stents/ implants duly verified.
- e) Original Stickers of implants duly verified.
- f) Wrappers of costly medicine (>5000Rs)/implants duly verified.
- g) Referral Slip/Form (Original)
- h) ESI Benefit entitlement certificate etc.
- i) Essential Certificate.
- j) Satisfaction Certificate.
- k) Original extended permission letter.

The above documents related to treatment/investigation duly verified by the treating/investigating Doctor shall be submitted by the hospital/diagnostic center along with the bill in duplicate in prescribed proforma. The CD of procedure /MRI/CT Scan /X ray film etc. is required with each and every bills if it is done. The bills must be submitted to this office within 07 days of discharge/investigation to this office for payment.

The bills received after the above mentioned period shall not be entertained.

If in any case excess payment has been done to the tie-up hospital for any reason, it will be recovered from the pending bills/ Security Deposit money.

8. Duties and Responsibilities of Empanelled Hospitals/Diagnostic Centres:

It shall be the duty and responsibility of the hospital/investigation centre at all times, to obtain, maintain and sustain the valid registration and high quality& standards of its services and healthcare and to have all statutory/mandatory licenses, permits or approvals of the concerned authorities as per the existing laws.

Display board regarding cashless facility for ESI beneficiary will be required. The list of necessary documents required for treatment/investigations at the Empanelled Hospital/ Diagnostic Centre must be displayed on the board. A help desk shall be there for facilitation of ESI beneficiaries. The Name and Contact Number of ESI Nodal Officer(s) should also be displayed on the notice board both in English and Hindi.

9. Duration of the contract:

The contract shall remain in force for two years (1yr full –1yr extension based on the satisfactory report after completion of 1year) and it may be extended for subsequent period at the sole discretion of the Medical Superintendent subject to fulfillment of all terms and conditions of this contract and with mutual consent. An agreement will be signed on Stamp paper of appropriate value before starting of services/extension of Contract. Cost of stamp paper and incidental charges related to contract shall be borne by the empanelled centre. Contract will be effective with effect from the date of the contract.

10. Hospital/Diagnostic Centre's obligations during the Contract Period:

The Hospital/diagnostic centre is responsible for and obliged to carry on all duties in accordance with the Contract, using state-of-the-art equipments/methods and economic principles and exercising all means available to achieve the performance specified in the Contract. The Hospital is obliged to act within its own authority and abide by the directives issued by the ESIC from time to time. The hospital is responsible for managing the activities of its personnel and will hold itself responsible for their misdemeanors, negligence, misconduct or deficiency in services, if any.

11. Liquidated Damages:

Empanelled centre shall provide the services as specified by the ESIC under terms & conditions of this contract. In case of violation of the provisions of the contract by the empanelled centre, payment of the incoming/pending bills may be withheld and Security Deposit may be forfeited. For over billing and unnecessary procedures, the extra amount so charged will be deducted from the pending/further bills of the Hospital/diagnostic centre. ESIC shall have exclusive right to terminate the contract at any time.

12. Termination for Default:

a) Medical Superintendent, Indore may, without prejudice to any other remedy and for breach of Contract in whole or part may terminate the contract:-

i. If the Hospital/diagnostic centre fails to provide any or all of the services for which it has been empanelled within the period(s) specified in the contract, or within any extended period thereof if any, granted by ESIC.

ii. If the Hospital fails to perform any other obligation(s) under the Contract.

iii. If the Hospital, in the judgment of the ESIC, is engaged in corrupt or fraudulent practices in competing for or in executing the Contract.

iv. If the hospital fails to follow instructions, guidelines, submits bills in its own way and with repeated deficiencies, the Institution shall be liable for de-empanelment.

v. The empanelled centre **will have to report on daily basis** the details of admitted patients for indoor treatment to Medical Superintendent, Indore on e-mail address ms-indore@esic.nic.in & ms-indore@esic.in as per the prescribed format, failing which **hospital may be considered for de-empanelment.**

b) If the Hospital is found to be involved in or associated with any unethical, illegal or unlawful activity, the contract will be summarily suspended by ESIC without any notice and thereafter ESIC may terminate the Contract, after giving a show cause notice and considering its reply, if any, received within 10 days of the receipt of show cause notice. Terms and conditions can be modified on sole discretion of the ESIC only.

c) The Tie-up hospital/diagnostic centre will not terminate the contract without giving notice of three months, on the failure of which, security deposit shall be forfeited.

13. Risk and Cost:

In case of failure by the empanelled hospital/diagnostic centre to perform its duties under this contract, M.S., Indore has right to get the performance of duties done from any other hospital or diagnostic centre at the sole risk and cost of the empanelled Hospital/diagnostic centre.

14. Penalty:

a) Patient can't be denied treatment on the pretext of non-availability of beds/Specialists, failing which if the ESI patient takes treatment at some other hospital a penalty of rupees Five thousands (Rs 5000/-) will be imposed on empanelled hospital and the same may be recovered from incoming /pending bills/security money.

b) In case of premature termination of contract by the empanelled centre, it will have to deposit Rs Two Lakh with Medical Superintendent, ESIC, Indore as damages. An affidavit of appropriate value for the same is required to be given at the time of contract. If Hospital fails to deposit money, the same will be recovered & appropriated from security deposit or incoming/pending bills.

15. Indemnity:

The Empanelled Hospital/diagnostic centre shall at all times, indemnify and keep indemnified ESIC against all actions, suits, claims and demands brought or made against in respect of anything done or purported to be done by the Hospital/centre in execution of or in connection with the services under this contract and against any loss or damage to ESIC in consequence to any action or suit being brought against the ESIC along with the Hospital/centre or otherwise, as a party for anything done or purported to be done in the course of the execution of this Contract. The Hospital/diagnostic center will at all times abide by the job safety measures and other statutory requirements prevalent in India and will keep free and indemnify the ESIC from all demands or responsibilities arising from accidents or loss of life resulting from negligence or unreasonable conduct on the part of empanelled hospital/diagnostic centre. The Hospital/diagnostic center will solely pay all the indemnities arising from such incidents without any extra cost to ESIC and will not hold the ESIC responsible or obligated. ESIC may at its discretion and always entirely at the cost of the tie up Hospital/diagnostic center defend such suit, either jointly with the tie up Hospital or unilaterally in case the latter chooses not to defend the case.

16. Arbitration:

If any dispute or difference of any kind what so ever (the decision thereof not being otherwise provided for) shall arise between the ESIC and the Empanelled Hospital/Diagnostic Center upon or relation to or in connection with or arising out of the Contract, shall be referred for arbitration by the Medical Superintendent, ESIC, Indore. The Arbitrator will be appointed by Medical Superintendent, Indore. The decision of the Arbitrator will be final and binding. The provision of Arbitration and Conciliation Act, 1996 shall apply to the arbitration proceedings. The venue of the arbitration proceedings shall be at the office of Medical Superintendent, Indore. Any legal dispute shall be settled in District Indore., jurisdiction only.

17. TDS and other Statutory Deductions:

TDS and other Statutory Deductions will be done as per Income Tax Rules or other applicable statutory provisions prevalent from time to time.

18. Miscellaneous:

a) Nothing under this Contract shall be construed as establishing or creating between the Parties any relationship of Master and Servant or Principle and Agent between the ESIC and Empanelled Center. The Empanelled Hospital/Diagnostic Center shall not represent or hold itself out as an agent of the ESIC.

b) The ESIC will not be responsible in any way for any negligence or misconduct on the part of the Empanelled Hospital/Diagnostic Center and its employees for any accident, injury or damage sustained or suffered by any ESIC beneficiary or any third party resulting from or by any operation conducted by or on behalf of the Hospital or in the course of doing its work or performing its duties under this Contract or otherwise.

c) The Empanelled Hospital/Diagnostic Center shall notify ESIC of any material change in their status and their shareholdings or that of any Guarantor of the Empanelled Hospital/Center in particular where such change would have an impact in the performance of obligation under this Contract.

d) This Contract can be modified or altered only on written Contract signed by both the parties with mutual consent.

e) The ESIC shall have the right to terminate the Contract in case the empanelled hospital is wound up/dissolved. The termination of Contract shall not relieve the Empanelled Center or their heirs and legal representatives from their liability in respect of the services provided by the Empanelled Center during the period when the Contract was in force.

f) Terms & conditions of the tender document may be modified at the discretion of the corporation. However, if such modification is made, the same shall be incorporated into the final agreement to be entered with the empanelled Hospital/diagnostic centre.

19. Notices:

a) Any notice given by one Party to other pursuant to this Contract shall be sent to other party in writing by Registered Post at the official addresses mentioned in the contract.

b) A notice shall be effective when served or on the notice's effective date, whichever is later.

c) Registered communication shall be deemed to have been served even if it is returned with the remarks like refused left premises, locked etc.

Medical Superintendent, ESIC, Model Hospital, Indore, reserves the right to accept or reject any tender without assigning any reason thereof.

I/We (name of proprietor) have carefully gone through and understood the contents of the tender document and I/We undertake to abide myself/ourselves by all the terms and conditions set forth.

Date:

Place:

(Name and signature of proprietor
with Office seal/rubber stamp)

Expression of Interest/Offer Form

ANNEXURE-II

(To be submitted duly filled along with supporting documents along with the application form)

1. General Information for Hospital/Diagnostic Centre:

- i. Name of the Hospital with complete address
- ii. Telephone and Fax Number(s) along with STD Code.
- iii. Mobile No(s).
- iv. Distance from ESIC Model Hospital in KMs
- v. Distance from Nearest Civil/ Govt. Hospital in KMs
- vi. Nearest Landmark:
- vii. Name, designation along with contact no's (landline and mobile) of authorized person: (attach authority letter)
- viii. List of Available equipments i.e. name and year of manufacturing/installation: (separate sheet to be attached).
- ix. Demand Draft Number, date & Amount :
- x. Drawee bank branch:
- xi. ECS Transfer Details: Bank Account number of the Tenderer and name of bank and IFSC of Branch:
- xii. PAN/TAN number of firm/proprietor(Photocopy to be attached)

2. Information Regarding Hospitals

- i. Bed strength of the Hospital (As per super specialties applied for)
- ii. No of ICU Beds (As per Specialties Applied For):
- iii. List of Available specialties for which the hospital is interested for tie-up arrangement: (As per Annexure-III).
- iv. No of functioning Operation Theatres super specialty wise:
- v. List of Availability of full time super specialists along with their Degrees/certificates for which center is going to empanelled :(separate sheet to be attached)

- vi. Daily and monthly number of patients specialty wise (separate sheet to be attached)
- vii. List of Availability of part-time and on call specialist/super specialist along with their Degrees/certificates for which center is going to empanelled: (separate sheet be attached).
- viii. List of all doctors, paramedical and non-medical :(separate list for doctor, paramedical and non medical be attached) along with period of stay and qualification.
- ix. Name of existing organizations/institutions empanelled with the Hospital (with details):
- x. Category of the hospital (As per CGHS) NABH, NON NABH, Super Specialty Hospital (attach proof) .

3. Information Regarding Diagnostic facility available at tie up hospital:

- i. List of Super Specialty investigations available at tie up hospital:
- ii. Category of the Diagnostic centre (As per CGHS) NABL, NON NABL.(attach proof)
- iii. List of Available equipments i.e. name and year of manufacturing/installation: (separate sheet be attached).
- iv. Total number of super specialty investigations done (Separate Sheet to be attached).
- v. Daily and monthly number of procedures specialty & super-specialty wise (Separate sheet to be attached)
- vi. List of Available specialties for which the hospital is interested for tie-up arrangement: (As per Annexure-II)
- vii. List of Availability of full time super specialists along with their Degrees/certificates for which center is going to empanelled :(separate sheet to be attached)
- viii. List of Availability of part-time and on call specialist/super specialist along with their Degrees/certificates for which center is going to empanelled: (separate sheet be attached).
- ix. List of all doctors, paramedical and non medical - (separate list for doctor, paramedical and non medical be attached) along with period of stay and qualification.
- x. Actual Rate list of hospital/empanelled centre for various packages/procedures not existing in CGHS rate list. (Separate sheet be attached). Definition of Package rates should be as per CGHS.
- xi. Category of the Diagnostic centre (As per CGHS) NABL, Non- NABL.(attach proof)

xii. Name of existing organizations/institutions empanelled with the Diagnostic centre(with details):

Date:

Place :

(Name and signature of proprietor with seal)

Note 1: Enclosures should be attached in the order as per the information given above.

Note 2: Technical evaluation of the Hospital/diagnostic centers shall be based on information provided by them on the above mentioned points and they shall mandatorily provide documentary proof for the same. No future correspondence shall be entertained in this regard. An inspection committee will visit these centers for inspection which qualify in the technical bid.

ANNEXURE-III

Information about Super Specialty services being offered for Empanelment

(Tick the specialties in which empanelment are desired by Hospital/centre)

Name of the Hospital /Diagnostic Centre:

- | | |
|--|-----|
| (a) Neurology & Neurosurgery | () |
| (b) Nephrology & Dialysis/Urology and Urosurgery | () |
| (c) Gastroenterology & GIsurgery | () |
| (d) Paediatric Surgery | () |
| (e) Burns management/surgery & Plastic Surgery | () |
| (f) Dental Services | () |
| (g) Other, if any | () |

Super Speciality Investigation:-

- | | |
|--|-----|
| a) CT Scan | () |
| b) MRI | () |
| c) PET Scan | () |
| d) Echocardiography | () |
| e) Bone Scan & screening of other parts of body | () |
| f) Specialized Biochemical, Immunological investigations | () |
| g) Others, if any | () |

Secondary Care Treatment

- | | |
|---|-----|
| a) General Medicine (with ICU) | () |
| b) General Surgery | () |
| c) ENT | () |
| d) Ophthalmology | () |
| e) Orthopedics | () |
| f) Obs & Gynae | () |
| g) Neonatology & Paediatrics (with NICU & PICU) | () |
| h) Radiology investigations | () |
| i) Lab Services | () |
| j) Blood Bank Services | () |
| k) Others, if any | () |

Date:

Place:

(Name and signature of proprietor with seal)

Annexure-IV

UNDERTAKING (on the Stamp paper of Rs. 100/-)

I/We (name of proprietor/Director) have carefully gone through and understood the contents of the Document form and I/We undertake to abide myself/ourselves by all the terms and conditions set forth. I/We are legally bound to provide services to ESIC Beneficiaries as per CGHS/AIIMS rates and terms and conditions of Tender documents failing which Medical Superintendent, ESIC Model Hospital, Nanda Nagar, Indore is entitled to take action against me/us as he/she deems fit. I/We also undertake to provide uninterrupted services otherwise alternative arrangements will be made at the risk and cost of our institute.

I/We undertake that the information submitted along with document and Annexure I is correct and also fully understand the consequences of default.

I/We certify herewith that my/our empanelled/Hospital/diagnostic centre has never been de-empanelled/ black listed by any ESIC/CGHS or any other Govt. Institution/empanelling centre in the last three years.

Date:

Place:

(Name and Signature with seal/rubber stamp)