EXPRESSION OF INTREST (EOI) FOR MEDICLAIM INSURANCE POLICY FOR EMPLOYEES/Ex-EMPLOYEES OF HEAVY ENGINNERING CORPORATION LIMITED (HECL)

1) BACKGROUND

Heavy Engineering Corporation Ltd., is one of the leading suppliers of capital equipment in India for steel, mining, railways, power, defense, space research, nuclear and strategic sectors. It also executes turn-key projects from concept-to-commissioning.

With the seamless integration of its facilities, HEC is one of the largest integrated engineering complex sprawling in an area of around 21,00,000 sq.m. HEC has facilities starting from steel melting, casting, forging, fabrication, machining, assembly and testing. It has its own in-house research and product development wing to deliver products suiting customers' specifications.

HEC is headquartered at Ranchi, the capital city of Jharkhand, in eastern part of India, and also has its manufacturing facilities located here. A well-suited location nearing to customer sites and proximity to the ports for import items is an added advantage for its cost-effectiveness.

2) SCOPE & OBJECTIVE

To facilitate financial access to health services for all regular employees of HEC and their dependant family members as well as ex-employees (superannuated) and their spouses, the Organization wishes to introduce Medical/Health Insurance Plan through an experienced, licensed and registered Insurance Provider capable of implementing and managing a transparent, efficient, cost effective and sustainable Medical/Health Insurance Plan.

3) INVITATION FOR "EXPRESSION OF INTEREST"

HEC Ltd invites "expressions of interest" from IRDA Accredited Insurance Companies (PSUs only) for Group Insurance Policy for its employees and their family members as well as ex-employees (superannuated) and their spouses.

Expressions of interest along with prescribed documents must be submitted at the office of the Manager (P&A)/HQ, HEC Ltd, Plant Plaza Road, P.O. Dhurwa, Ranchi-834004, Jharkhand on or before O4:00 PM of 03/10/2018. Initially period of policy shall be for 02 (two) years which can be extended to one more year subject to satisfactory performance.

A brief of the requirements have been described in the following sections:

4) CREDENTIALS

Only agencies (**PSUs only**) having the following credentials are requested to respond:

- a) The agency should be an IRDA Accredited Insurance Company (Non life).
- b) The agency should have experience of providing Group Medical/Health Insurance cover to employees of Government/Semi Government organizations during the past 5 financial years.
- c) The agency should have satisfactory Medical Claims Settlement record.
- d) The agency should have Average Annual Turnover of at least Rs.500 Crores during the last three financial years 2015-16, 2016-17 & 2017-18.

5) EVALUATION / SELECTION PROCEDURE:

Evaluation / selection shall be carried out in the following stages:-

- (i) A selection committee of the Company shall go through the documents of the agencies and prepare the list of agencies fulfilling the eligibility conditions.
- (ii) The shortlisted agencies will be called for making presentation on technical and commercial parameters to demonstrate their capabilities, their financial resources and experience covering, inter-alia, the following areas:
 - a) Company Profile Management Structure, Main Business & Areas of Specialization, Duration of Business, Service Centers in Ranchi, Delhi/NCR & Kolkata etc
 - b) Key Corporate Clients, Value of Contracts and Salient Features of Contract/Agreement with Clients
 - c) List of Empanelled Hospitals in the State of Jharkhand/Bihar and in the cities of Mumbai, Kolkata, Delhi and Chennai.
 - d) Details of Third Party Administrators and their role & responsibilities.
 - e) Stepwise business/enrollment/claim process
 - f) Profit & Loss Account of the last three financial years and Net Worth.
- (iii) Based on inputs received against this EOI, a tender will be issued amongst the short listed agencies. They will be required to submit their bids in two parts Technical Bid & Financial Bid. The Financial Bid will be opened only of those firms who will be found technically qualified after evaluation of their technical bid.
- (iv) Agencies are required to sign & place Company's Stamp on all the pages of the tender document in lieu of acceptance of the tender conditions.

6) PARTICULARS/DOCUMENTS TO BE SUBMITTED WITH SEAL / SIGNATURE AND A COVERING LETTER IN THE PARTY'S LETTERHEAD:

(i) Details of the establishment:

- a. Name and address of the agency with e-mail ID and contact numbers
- b. Address of local Office in Ranchi, Delhi/ NCR and Kolkata with e-mail ID & contact numbers.
- c. Attested/notarized copy of Certificate of Incorporation
- d. Attested/notarized copy of IRDA Certificate
- e. Attested/notarized copy of GST Registration Certificate
- f. Attested/notarized copy of Permanent Account Number (PAN) Card.
- q. Any other useful information- Escalation matrix etc.

(ii) Details of Experience & Financial Standing:

- a. Average Annual Turnover during the last three financial years certified by Auditor/Chartered Accountant in the format at **Annexure-A**
- b. Claims Settlement Performance during the last three financial years certified by IRDA/ Auditor/Chartered Accountant in the format at **Annexure-B**
- c. Attested/notarized copies of at least 03 (three) contracts for Group Medical/Health Insurance executed for Government/Semi Government organizations during the last 03 (three) financial years.

(iii) Other Details:

a. List of empanelled general & super-speciality hospitals in Jharkhand/Bihar, Delhi & NCR, Kolkata and other major cities.

7) EMPLOYEES/EX-EMPLOYEES & THEIR FAMILY MEMBERS MEDI-CLAIM INSURANCE:

The age group of the existing regular employees of the Company is in the range of 18 years to 60 years. The total number of regular employees as on 01^{st} Sept, 2018 is around 1520. Besides this, 3000 (approx) numbers of medical cards of ex-employees (superannuated) have been renewed, in the last calendar year. The regular employees and their dependant family members (Tentatively-In case of Regular Employees- 1 Dependent Spouse, 2 Dependent Children & 2 Dependent Parents and in case of Ex-employees-1 dependent Spouse) will be insured through Family Floater plan and the insured amount would be **Rs.03.00 lakh p.a.** for each regular employee with Corporate buffer. The maximum amount of Corporate Buffer shall be Rs.02 (two) crore for one year.

Besides this, the interested ex-employees and their spouse will be insured on contributory basis and the insured amount would be **Rs.50,000/- p.a.** for each ex-employee without corporate buffer.

The terms & conditions of the insured employees/ex-employee & their family members will be as per **Annexure-C.**

8) LAST DATE AND TIME OF SUBMISSION OF EOI: 04:00 PM of 03rd October, 2018

<u>Interested agencies (PSUs only)</u> are requested to send their EoI in a sealed envelope, along with supporting credentials, so as to reach to the Company on or before <u>04:00 PM of 03rd</u> <u>October, 2018</u> at the following address. The envelope should be super-scribed / marked with: "EOI FOR MEDICLAIM INSURANCE FOR HECL"

9) A pre-financial bid meeting with the participants of EOIs would be held after due date. Same will be intimated to the short listed firm separately.

10) PLACE OF SUBMISSION

MANAGER P&A/HQ
HEAVY ENGINEERING CORPORATION LIMITED
PLANT PLAZA ROAD, DHURWA,
RANCHI, JHARKHAND – 834004

CONTACT No.: 0651 - 2401152

[ON THE LETTERHEAD OF THE COMPANY]

ANNEXURE-A

ANNUA	AL TURNOVER STATEMENT	The Annual Turnover of M/s
	for the past three	years are given below and certified that the statement is
true and	d correct.	
SI. No.	FINANCIAL YEAR	TURNOVER (Rs in Cr)
1	2015-16	
2	2016-17	
3	2017-18	
	тот	ΓAL RsCr
Average	e Annual Turnover	RsCr
Date:		Signature of Auditor/ Chartered Accountant Seal: (Name in Capital)

[ON THE LETTERHEAD OF THE COMPANY]

ANNEXURE-B

CLAIM SETTLEMENT – GROUP MEDICLAIM

GROUP MEDICLAIM STATUS (NUMBER OF CLAIMS)

Particulars	2015-16	2016-17	2017-18
No. of Claims pending at start of year (A)			
Claims intimated / booked (B)			
Total Claims (C=A+B)			
No. of Claims paid (D) within 30 days			
No. of Claims paid within 90 days			
No. of Claims paid after 90 days			
Claims repudiated (E)			
Claims closed during the Year (F)			
Claims pending at end of year			

(GROUP MEDICLAIM STATUS (**AMOUNT OF CLAIMS**))

in Lakhs

Particulars	2015-16	2016-17	2017-18
Claims pending at start of year (A)			
Claims intimated / booked (B)			
Total Claims (C=A+B)			
Claims paid (D) within 30 days			
Claims paid within 90 days			
Claims paid after 90 days			
Claims repudiated (E)			
Claims closed during the Year (F)			
Claims pending at end of year			

POLICY COVERAGE:

- Regular Employee-Per Family a cover of <u>Rs.3.00 lakh</u> per annum on family floater basis with corporate buffer and interested Ex-employee-Per Family a cover of Rs 50000/- (which can be enhanced by interested ex-employees by Top up facility) only without corporate buffer on contributory basis. The definition of family as per HEC Policy is as follows
 - **A-** "Family":- In relation to a regular employee includes:
 - (i) the wife or husband as the case may be of the employee whether residing with him or not but does not include a wife or husband as the case may be, separated from the employee by a decree or order of a competent court.
 - (ii) sons or daughters or step sons or step daughters of the employee and wholly dependent on him, but does not include child or step child who is on longer in any way dependent on the employee or has been deprived of by or under any law.
 - **B-** In relation to Retired/Superannuated Employees- only husband or wife as the case may be, shall be treated as dependent.
- 2. Corporate Buffer of **Rs.02.00 crore** for the regular Employees of HEC & their family members.
- 3. Premium will be payable annually for sum assured & corporate buffer.
- 4. The same shall be subject to the following conditions:
 - a. Pre-existing ailments to be covered without any deletion.
 - b. No age limit for dependent parents, however son more than 25 years and daughter after marriage shall not be treated as dependent.
 - c. No waiting period (Addition and Deletion from the date of nomination/relieving from the services respectively).
 - d. Newborn child to be covered from day one of the birth.
 - e. No first year exclusions.
 - f. No waiting period for maternity.
 - g. Treatment in any hospital in India within Insurance coverage.
 - h. In case of hospitals not covered by TPA for cashless facility, reimbursement is to be acceptable and no restriction on number of beds
 - i. Maternity benefit subject to maximum Rs. 50,000/-. Mother and Child to be considered as one unit when in hospital. Pre and post hospitalization expenses to be covered in Maternity (From pregnancy test to delivery and post delivery one month).

- j. Miscarriage and abortion including Medical Termination of Pregnancy for any congenital or genetic abnormality or for medical complication to be covered.
- k. 30 days before and 60 days after hospitalization for the same illness is covered.
- I. Settlement within 15 working days on receipt of final claim documents
- m. Angiography payable irrespective of the result.
- n. Cost of blood /transfusion in case of admission.
- o. Local ambulance charges.
- p. 24 hr. hospitalization not mandatory for Appendicitis, Tonsils, Cataract, Eye surgery, Radio Therapy, Kidney Stones, Dental Surgery, Dialysis, Chemotherapy, Gastroscopy, Arthroscopy, other scopy and Laser surgery. There should not be any first year exclusion. This will be covered under day care.
- q. Refund, if any, in respect of deletions may be paid within 15 days.
- r. Mid-term inclusion only in case of childbirth or any death will not be charged extra.
- s. TPA will be at our choice.