



No.F.Admn.III/P1/2012/

Dt.:18.12.2012

Τо

(Address List Enclosed)

Sir,

Sub: Group Medical Insurance for regular and retired staff members & Fire and General Insurance - Quotations called for - Reg.

Sealed Quotations are invited for providing Group Medical Insurance coverage for employees and their dependents, Pensioners and Spouses and Family Pensioners of this Institute for the period 01.02.2013 to 31.01.2014 and Fire and General Insurance with Earthquake & Terrorism cover for the Institute's fixed Assets for a period of 1 year i.e., 25.02.2013 to 24.02.2014.

1. Group Medical Insurance:

The details regarding no. of persons to be covered and the amount of coverage are given below:

| SI.No. | Category | No. of persons to be covered | Sum insured per family (floater) (Basic Coverage) ₹ | Additional Coverage on payment of additional premium by individual staff/pensioner ₹ | Special Contingency Cover(Buffer) ₹ |
|--------|-----------------------------------|------------------------------------|--|--|---|
| 1. | Employees and their dependents | 1215+ 3137 | 50,000/- | 50,000/- 1,00,000/- 2,00,000/- 3,00,000/- | 30,00,000/- (Subject to a limit of ₹2.00 lakh per family on first cum first served basis) |
| 2. | Pensioners and their spouses | 891 + 664 | 50,000/- | 50,000/- 1,00,000/- 2,00,000/- 3,00,000/- | - |
| 3. | Family Pensioners | 445 | 50,000/- | - do - | - |

Please quote the premium for basic coverage (₹50000/-) and additional coverage (₹50000/-/

₹1.00 / ₹2.00 / ₹3.00 Lakh) as below:

| | Premium for Basic Coverage of ₹50000/- for all | Rs. |
|----|---|--------------------------------|
| Α. | employees/pensioners/ family pensioners (including dependants and spouses as stated above) | RS. (Inclusive of Tax @ Rs. |
| | dependants and spouses as stated above) | |

B. Premium for Additional Coverage:

| Amount of Additional Coverage | Premium per Employee (Inclusive of Tax) | Premium per Pensioner / Family Pensioner (Inclusive of Tax) |
|----------------------------------|--|---|
| 50000 | | |
| 1 Lakh | | |
| 2 Lakh | | |
| 3 Lakh | | |

The main terms and conditions and features to be covered under the Group Medical Insurance are given in **Annexure - I & II**, which shall form part of the quotations. Additional features provided are to be stated separetely. Deviations if any have to be justified.

The following additional information are furnished, which may be taken into account while quoting the premium:

(i) The claims settled by the TPA during the current policy period (from 1.2.2012 to 31.1.2013) as on 20.11.2012 are furnished below for your information:

| SI.No. | Sum Insured | Total No. of Claims | Paid Amt | Total Claim Amount Rs. |
|--------|---------------------------------|---------------------|----------|---------------------------|
| | | | | |
| | EMPLOYEES: | | | |
| 1 | 50000 | 180 | 3723588 | |
| 2 | 100000 | 41 | 1103305 | |
| 3 | 150000 | 69 | 2257430 | 1,18,84,114/- |
| 4 | 250000 | 47 | 2106292 | |
| 5 | 350000 | 68 | 2693499 | |
| | PENSIONERS & FAMILY PENSIONERS: | | | |
| 6 | 50000 | 32 | 726665 | |
| 7 | 100000 | 24 | 551489 | - |
| 8 | 150000 | 23 | 794627 | - 54,50,994/- |
| 9 | 250000 | 22 | 919079 | |
| 10 | 350000 | 42 | 2459134 | |
| | Total Claims as on 23.11.2012 | | | 1,73,35,108/- |

(ii) Additional Coverage details on Co-Payment (2012-2013):

| SI.No. | Addl. Coverage on Co-payment | Employees | Pensioners | Family Pensioners | Total No. of persons who opted for Addl.Coverage (2012-13) |
|--------|---------------------------------|-----------|------------|----------------------|---|
| 1. | 50,000 Coverage | 86 | 157 | 26 | |
| 2. | 1 Lakh Coverage | 173 | 162 | 35 | |
| 3. | 2 Lakh Coverage | 96 | 109 | 11 | 1067 |
| 4. | 3 Lakh Coverage | 106 | 94 | 12 | |
| | Total | 461 | 522 | 84 | |

With a view to facilitate you to calculate the premium, we are enclosing a CD containing the details of employees and their dependents, pensioners and their spouses and family pensioners. This information is only approximate (retirement/death details are not included). However, the premium will be an actual employee/pensioner basis. For addition/deletion during the insurance period, additional premium amount will be given/withdrawn on prorata basis.

2. Fire and General Insurance:

Quotations are also invited for providing Fire and General Insurance coverage for the Fixed Assets of this Institute. The details are given below:

| | Valuation | | |
|-------------------------------------|------------------------------|--------------------------|--|
| | Standard & Spl. Peril Policy | | Burglary |
| | Building ₹ | Equipments/Contents ₹ | Furniture/Books, Journals etc. ₹ |
| Admn. Building & Heritage Center | 542,00,000 | 46,00,000 | - |
| IC & SR Building | 1179,00,000 | 1,65,81,222 | 99,25,674 |
| Library Building | 22,95,00,000 | 2,64,90,726 | 60,39,87,111 |
| Computer Sci. & Engg. | - | 6,63,84,224 | - |
| Dept. Labs.* | | 64,75,89,223 | |
| Total Coverage amount | | 177.72 Crores | |

* List of Equipment/Contents vide Annexure - III.

Normally the institute enters into contract with the same company for both Group Medical Insurance and Fire Insurance Policy. However, the Institute reserves its right to consider giving Mediclaim and Fire Insurance separately to different companies.

Kindly submit the quotations on or before 04.01.2013, *3.00 pm* at the *Registrar's Office, I Floor, Administration Building, IIT Madras* in a sealed envelope along with a copy of the IRDA certificate mentioning clearly the validity of the IRDA approval superscribed on the top of the envelope, the Enguiry No. and Due date and addressed to the **Registrar, IIT Madras, Chennai 600 036**.

Yours faithfully,

Encl: as above

Registrar

Copy to: The Chief Medical Officer i/c, Institute Hospital.

| buffer utilisation ii. Cancer iii. Any debilitating illness that may lead to cancer (or) a permanent disability iv. Diseases of the Head & Neck, Thorax and abdomen where surgeries are indicated for near normal life v. Renal failure vi Stroke viii. Malpip Sclerosis viii. Matipip Sclerosis viii. Matipip Sclerosis viii. Maternity - Normal Delivery claims: Normal Delivery a) For Normal Coverage - Rs.20,000/- (For basic coverage Rs.50,000/- SI) b)For Additional Coverage - Rs.20,000/- (for Rs.10,000/- additional coverage) Rs.30,000/- (for Rs.2,00,000/- additional coverage) Rs.40,000/- (for Rs.20,000/- (For basic coverage Rs.50,000/- SI) b) For Additional Coverage - Rs.40,000/- (for Rs.20,000/- additional coverage) Rs.50,000/- (for Rs.20,000/- (For basic coverage Rs.50,000/- SI) | Illness covered for | i. Coronary Artery surgery | | | |
|---|---------------------|--|--|--|--|
| disability iv. Diseases of the Head & Neck, Thorax and abdomen where surgeries are indicated for near normal life x. Renal failure vi Stroke vii Multiple Sclerosis viii. Major accident claims involving expenditure more than Rs.50,000/- x. Complication arising out of surgery performed during the policy period. Sublimits i. Maternity - Normal Delivery claims: Normal Delivery a) For Normal Coverage -Rs.20,000/- (For basic coverage Rs.50,000/- SI) b) For Additional Coverage - Rs.25,000/- (for Rs.1,00,000/- additional coverage) Rs.40,000/- (for Rs.2,00,000/- additional coverage) Rs.40,000/- (for Rs.3,00,000/- additional coverage) Rs.40,000/- (for Rs.1,00,000/- additional coverage) Rs.40,000/- (for Rs.1,00,000/- additional coverage) Rs.60,000/- (for Rs.1,00,000/- additional coverage) Rs.60,000/- (for Rs.2,00,000/- additional coverage) < | buffer utilisation | | | | |
| iv. Diseases of the Head & Neck, Thorax and abdomen where surgeries are indicated for near normal life v. Rend Failure vi Stroke vii Multiple Sclerosis viii. Major transplants ix. Major accident claims involving expenditure more than Rs.50,000/- x. Complication arising out of surgery performed during the policy period. Sublimits i. Maternity - Normal Delivery claims: Normal Delivery a) For Normal Coverage - Rs.20,000/- (For basic coverage Rs.50,000/- SI) b) For Additional Coverage - Rs.25,000/- (for Rs.1,00,000/- additional coverage) Rs.30,000/- (for Rs.1,00,000/- additional coverage) Rs.30,000/- (for Rs.2,00,000/- additional coverage) Rs.50,000/- (for Rs.2,00,000/- additional coverage) Rs.40,000/- (for Rs.30,000/- additional coverage) Rs.50,000/- (for Rs.1,00,000/- additional coverage) Rs.50,000/- (for Rs.1,00,000/- additional coverage) Rs.50,000/- (for Rs.1,00,000/- additional coverage) Rs.50,000/- (for Rs.1,00,000/- additional coverage) Rs.50,000/- (for Rs.2,00,000/- additional coverage) Rs.50,000/- (for Rs.2,00,000/- additional coverage) Rs.50,000/- (for Rs.2,00,000/- additional coverage) Rs.70,000/- (for Rs.2,00,000/- additional coverage) Rs.30,000/- (for Rs.2,00,000/- additional coverage) Rs.30,000/- (for Rs.1,00,000/- additional coverage) Rs.30,000/- (for Rs.1,00,000/- additional coverage) Rs.30,000/- (for Rs.1,00,000/- additional coverage) Rs.30,000/- (for Rs.2,00,000/- additional coverage) Rs.30,000/- (for Rs.2,00,000/- additional coverage) Rs.40,000/- (for Rs.2,00,000/- additional coverage) Rs.40,000/- (for Rs.2,00,000/- additional coverage) Rs.50,000/- (for Rs.3,00,000/- addition | | | | | |
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| | ICU per day will be 4% of the total sum insured. RMO/DMO and Service charges are covered. v. Ambulance hiring expenditure coverage irrespective of Illness. | | |
|------------------|--|--|--|
| Other conditions | No Claim Intimation clause for Non-Network Hospitals. Maternity (9 Months no waiting Period) Coverage for pre-existing diseases. No upper age limit for claim. Both Congenital and Psychiatric disorders also covered. No initial waiting period and no exclusion for first year. Dental treatment or surgery except requiring hospitalisation and cost of spectacles, contact lens and hearing aids are excluded. Domicilliary hospitalisation is not covered. Day 1 coverage for new born babies. Pre and Post hospitalisation included under coverage. | | |

| Hospitalisation Period: | Expenses on hospitalisation are admissible only if hospitalisation is for a minimum period of 24 hrs. However, |
|-------------------------|---|
| | A) This time limit will not apply to following specific treatments taken in the Network Hospital/Nursing Home/Speciality Centres irrespective of the bed strength where the insured is discharged on the same day. Such treatment will be considered to have been taken under Hospitalisation Benefit. |
| | i. Haemo Dialysis, ii. Parentral Chemotheraphy, iii. Parentral Immunotheraphy, |
| | iv. Radiotherapy, v. Lithotripsy (Kidney Stone removal), vi. Surgery of Eye, vii. Surgery of Nose, |
| | viii. Surgery of Throat, ix. Tonsillectomy, x. Bronochoscopic therapetic procedures, |
| | xi. Surgery of Hernia, xii. Surgery of Hydrocele, xiii. Surgery of Prostrate, xiv. Gastrointestinal Surgery, |
| | xv. Genital Surgery, xvi. Hysterectomy, xvii. D&C, MTP, xviii. Dental surgery following an accident, |
| | xviii. Dental surgery following an accident, xix. Coronary Angioplasty, xx. Coronary Angiography, xxi. Orthopaedic procedures including POP applications, |
| | xxii. Laproscopic and Endoscopic therapeutic procedures, xxiii. Minor surgical procedures under General Anaesthesia, xxiv. Laser Surgical procedures under Local Anaesthesia. xxv. EECP |

Terms & Conditions:

- i. Minimum two "Third Party Administrators" are to be indicated. Preference will be given for Cashless facility.
- ii. In no event cashless treatment in listed hospitals can be withdrawn unilaterally /stopped / delayed / terminated by the Third Party Administrator or hospitals involved. A penalty clause will be included in the Agreement in this regard.
- iii. Voluntary Health Services, Adyar, Child Trust Hospital, Nungambakkam, St. Isabels Hospital, Mylapore and Sundaram Medical Foundation are to be included in the list of hospitals for cashless treatment.
- iv. Period of validity for your quotation may be indicated. The premium quoted should be valid for not less than 90 days.
- v. As per IIT norms during the contract period there is no revision in the premium amount.
- vi. For additional coverage on co-payment basis, please specify the minimum number of persons to be accommodated, if any.
- vii. The selected company should furnish monthly statement of claims including buffer claim to the **Assistant Registrar (Admn.III)** with a copy to the Institute Hospital of this Institute before 10th of the following month.
- viii. In addition to the above, the firms may also indicate any other options/schemes with them with appropriate documents (optional).
- ix. 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.
- x. Identity Cards are to be issued to all the persons covered under the policy as early as possible, but not later than 30 days from the date of payment of premium. Till then the IITM ID card of the employees has to be honoured in all the listed hospitals.
- xi. 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 finalising the contract.
- xii. The Institute reserves its right to consider part or full of the offer or reject the offer without assiging any reasons, whatsoever.