



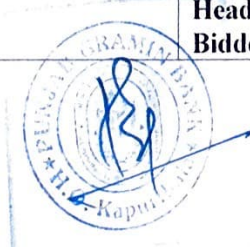
Date: 14.11.2024

REG: Corrigendum Notice- Group Medclaim Policy for Period 01.12.2024 To 30.11.2025- Call for Quotations/Applications from IRDAI licensed Public and Private Sector General Insurance Companies/ Standalone Health Insurance companies& IRDAI Licensed Insurance Brokers.

Our Bank through RFP No. HRD/Med/2024-25/01 Dated 08.11.2024 and Corrigendum Notice dated 13.11.2024 published on [https://www.tenderwizard.com/PGB& Bank's website \(www.pgb.org.in\)](https://www.tenderwizard.com/PGB& Bank's website (www.pgb.org.in)) invited proposals from IRDAI licensed Public & Private Sector General Insurance Companies/ Standalone Health Insurance companies& IRDAI Licensed Insurance Brokers for Group Medclaim Insurance Policy for in Service Officers/Employees (with Dependents) through a two stage bidding process.

We have observed some discrepancies in the RFP. Accordingly, the same have been examined and to avoid any misunderstanding we may issue clarifications through this corrigendum notice as per the details given below:

Sr. No	Existing Clause / Guidelines / Data	Revised Clause / Guidelines / Data
1.	<p>Annexure-I</p> <p>Bidder Details</p> <p>Financial Details</p> <ol style="list-style-type: none"> 1. Annual turnover (2019-20) in Crore 2. Annual turnover (2020-21) in Crore 3. Annual turnover (2021-22) in Crore <p>Annexure-VI-For Insurance Company</p> <p>The bidder should have a minimum average premium collection of Rs. 100 crores for the last three financial years (2019-20, 2020-21, 2021-22)</p> <p>Annexure-VI-Additionally, to be submitted by Only Insurance Brokers</p> <p>CA Certified* copies (For 2019-20, 2020-21, 2021-22) mentioning the premium collected/ audited balance sheets clearly mentioning the premium collected</p>	<p>The Financial Year's in Annexure I & VI to be read as follows: -</p> <p>Bidder Details</p> <p>Financial Details</p> <ol style="list-style-type: none"> 1. Annual turnover (2021-22) in Crore 2. Annual turnover (2022-23) in Crore 3. Annual turnover (2023-24) in Crore <p>Annexure-VI For Insurance Company</p> <p>The bidder should have a minimum average premium collection of Rs. 100 crores for the last three financial years (2021-22, 2022-23, 2023-24)</p> <p>Annexure-VI-Additionally, to be submitted by Only Insurance Brokers</p> <p>CA Certified* copies (For (2021-22, 2022-23, 2023-24) mentioning the premium collected/ audited balance sheets clearly mentioning the premium collected</p> <p>** All financial details solicited in the RFP to be read as "for the last three financial years (2021-22, 2022-23, 2023-24)"</p>
2.	<p>Annexure VI-</p> <p>Power of Attorney for Signing of Application</p>	<p>Annexure VI-</p> <p>Header to be read as- Details of the Bidder</p>



(To be submitted on a INR 100 Stamp Paper only)	& to be submitted on Company Letter Head of the Bidder.
<p>3. Point 8 Policy Details (15) Corporate Buffer</p> <p>Nature and Scope of Cover: Terms & Conditions of Group Mediciam Policy for Existing Employees</p> <p>Corporate Buffer is mentioned as 1 Crore</p>	<p>Point 8 Policy Details (15) Corporate Buffer</p> <p>Nature and Scope of Cover: Terms & Conditions of Group Mediciam Policy for Existing Employees</p> <p>Corporate buffer to be considered for the Policy Year 2024-25 as Rs. 50,00,000/- (Fifty lacs Only/-).</p>
<p>4. Point 8 Policy Details (9). Family Definition</p> <p>Staff+ Spouse+ Dependent Children+ any two of dependent parents/ parents-in-law Dependent Children including stepchildren and legally adopted children are covered Widowed daughter and dependent/divorced /separated daughter, sisters including unmarried/divorce/abandoned or separated from husband/widowed sisters and crippled child/ brother shall be considered as dependent for the purpose of this policy. Special abled brother/ sister with 40% or more disability shall also be covered as dependents for the purpose of this policy. No age limit for dependent parents. Any two i.e. Either dependent parents or parents-in-law will be covered as dependent for purpose of the policy.</p>	<p>Point 8 Policy Details (9). Family Definition throughout RFP to be read as</p> <p>Employee + Spouse + Dependent Children + 2 Dependent Parents or In-laws.</p> <ul style="list-style-type: none"> • No age limit for dependent children. Wholly dependent unmarried children (including stepchildren and legally adopted children. A child could be considered dependent if his/her monthly income does not exceed Rs. 18,000/- per month: which is at present or revised by Indian Banks' Association in due course) • Widowed daughters and dependent divorced / separated daughters, sisters including unmarried / divorced / abandoned or separated from husband/ widowed sisters shall be considered as dependent for the purpose of this policy. Wholly dependent physically and mentally challenged Brother / Sister with 40% or more disability. • Provided that in the case of physically and mentally challenged children irrespective of the age, they shall be construed as dependents even after their marriage subject to however fulfilling the income criteria for dependent. The term wholly dependent family member shall mean such member of the family having a monthly income not exceeding Rs. 18,000/- • If the monthly of one of the parents exceeds Rs. 18000/-, or aggregate of monthly income of both the parents exceeds Rs. 18000/-, both the parents shall not be considered wholly dependent on the officer. • No Age Limits for Dependent Parents. Either Dependent Parents or In-laws will be covered. • A married female employee may include her natural / legal parents or parents-in-law under



		the definition of family, but not both, provided that the parents/parents-in-law are wholly dependent on her.								
5.	Claims % 2022-23 is 111.67 %	<table border="1"> <thead> <tr> <th colspan="2">Policy Year wise ICR %</th> </tr> </thead> <tbody> <tr> <td>2021-22</td> <td>114.46%</td> </tr> <tr> <td>2022-23</td> <td>121.95%</td> </tr> <tr> <td>2023-24</td> <td>100.31%</td> </tr> </tbody> </table>	Policy Year wise ICR %		2021-22	114.46%	2022-23	121.95%	2023-24	100.31%
Policy Year wise ICR %										
2021-22	114.46%									
2022-23	121.95%									
2023-24	100.31%									
6.	<p>Point 3.1 (I) & (II) -Room Rent</p> <p>Room and Boarding expenses as provided by the Hospital/Nursing Home not exceeding Rs. 7500 per day.</p> <p>Intensive Care Unit (ICU) expenses as provided by the Hospital/Nursing Home not exceeding Rs. 10.000 per day.</p>	<p>Point 3.1 (I) & (II) -Room Rent to be read as</p> <p>Room and Boarding expenses as provided by the Hospital/Nursing Home not exceeding Rs. 5000 per day.</p> <p>Intensive Care Unit (ICU) expenses as provided by the Hospital/Nursing Home not exceeding Rs. 7500 per day.</p>								
7.	<p>Point 4.34 ROOM RENT:</p> <p>Room Rent shall mean the amount charged by the hospital towards room and boarding (nursing) expenses on per day (24 hours) basis.</p>	<p>Point 4.34 ROOM RENT:</p> <p>Room rent shall mean the amount charged by the hospital for the occupancy of a bed on per day basis.</p> <p>Nursing charge is separately payable</p>								
8.	<p>Point 5.5 - Maternity Expense Benefit Extension</p> <p>(ii) Pre-natal & post-natal expenses will be covered on OPD & as well as IPD basis for sum-insured (sub-limit as INR 3,500) within the maternity cover as Rs. 75,000/- for Normal Delivery and Rs.1,00,000/- for Caesarean Section under the policy up to 30 days and 60 days only, unless the same requires hospitalization.</p>	<p>Point 5.5- Maternity Expense Benefit Extension</p> <p>(ii) Pre-natal & post-natal charges in respect of maternity benefit are covered under the policy up to 30 days and 60 days only, within maternity sum insured in case of inpatient hospitalization only</p>								
9.	<p>Point 8 (34) Congenital anomalies cover</p> <p>(Internal disease/defect anomalies covered)</p>	<p>Point 8 (34) Congenital anomalies cover</p> <p>Expenses for Treatment of Congenital Internal & External diseases, defects anomalies are covered under the policy.</p>								
10.	<p>Standalone Ceiling/cap on treatments, Ambulance Category & Ceiling, Other Charges, Physician Consultation Charges per visit, Specialist Consultation charges per visit, Charges for Operations (Maximum)</p>	<p>Following Standalone Ceiling/cap on treatments, Ambulance Category & Ceiling . Other Charges, Physician Consultation Charges per visit, Specialist Consultation charges per visit, Charges for Operations (Maximum) as mentioned in RFP is not applicable.</p> <p>All the Terms & conditions of the Group Mediclaim Policy are required to be in accordance with the Group Mediclaim Insurance guidelines mentioned in Bipartite Settlement and Joint Note as revised by IBA from time to time.</p>								
11.	Point 8 Policy details	Point 8 Policy details								



	<p>(21) Medicines, drugs, injections (including disposable syringes), bandage and dressing materials, etc. except 21 tonics/vitamins which are Covered prescribed by the attending doctor and certified as essential for the period of hospitalization may be considered for reimbursement.)</p>	<ul style="list-style-type: none"> • Walker, crutches, Belts, Collars, Caps, Splints, Slings, Braces, Stockings, elastocrepe bandages, external orthopaedic pads, sub cutaneous insulin pump, Diabetic foot wear, Glucometer(including Glucose Test Strips)/Nebulizer/ prosthetic devise/ Thermometer, alpha / water bed and similar related items etc. will be covered. • All Taxes, Surcharges, Service Charges, Registration charges, Admission Charges, Nursing, and Administration charges to be payable. Charges for diapers and sanitary pads are payable if necessary, as part of the treatment. Charges for Hiring a nurse / attendant during hospitalization will be payable only in case of recommendation from the treating doctor in case ICU/ CCU, Neo natal nursing care or any other case where the patient is critical and requiring special care. • Expenses on vitamins and tonics unless forming part of treatment for injury or diseases as certified by the attending physician falls under Policy Exclusion
12.	<p>Point 8 Policy details (37) - Cataract Surgery Rs.50000/- per eye</p>	<p>Point 8 Policy details (37) - No capping applicable on any surgical interventions All the Terms & conditions of the Group Mediclaim Policy are required to be in accordance with the Group Mediclaim Insurance guidelines mentioned in Bipartite Settlement and Joint Note as revised by IBA from time to time.</p>

All other Terms and Conditions provided in above cited tender notice and Corrigendum Notice 1 remain unaltered.

Further, we may also provide the Claim MIS for the current policy (Annexure A) to interested bidders.

Submitted for approval, please.



General Manager
14.11.24