German Development Cooperation

B 5/1, Safdarjung Enclave, New Delhi 110029

Terms of Reference

1. BACKGROUND / CONTEXT

About GIZ

The services delivered by the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH draw on a wealth of regional and technical expertise and tried and tested management know-how. As a federal enterprise, we support the German Government in achieving its objectives in the field of international cooperation for sustainable development. GIZ currently operates in more than 130 countries worldwide.

GIZ in India

Germany has been cooperating with India by providing expertise through GIZ for more than 50 years. To address India's priority of sustainable and inclusive growth, GIZ's joint efforts with the partners in India currently focus on the following areas:

- Energy- renewable energy and energy efficiency
- Environment - Sustainable Urban and Industrial Development, Natural Resource Management
- Private Sector Development
- Social Protection

(http://www.giz.de/de/weltweit/368.html)

2. SCOPE OF SERVICE

An approximate number of 300 employee strength (national) staff and around 600 dependents of employees need to be covered with a health insurance and OPD services. Demographic details about employees are as follows:

S.No	Age Group	No of Employees
1	20-30	57
2	30-40	121
3	40-50	79
4	50-60	20
5	60-70	5
	Total	**282**

Gender	No of Employees
Male	188

Female	94
Total	**282**

The insurance is expected to deliver quality insurance/coverage that ensures the health and safety of employees and their dependents. Furthermore, an excellent service around all insurance concerns is expected to an acceptable price.

Sum Insured: Rs. 3 lac per family per policy with floater facility under hospitalization.

OPD benefits: Rs. 35,000/- per Family per policy period Detailed Benefits / Services

Eligibility: All the Employees of GIZ India and their family members

Family: Employee+ Spouse+ upto 2 dependent children

Other Insurance Coverage & Terms & Conditions related details are mentioned in **Annexure I.**

3. Experts Profile

A. The Agencies applying for the tender should meet the following criteria:

a) Should be IRDA registered
b) Should have cumulative Annual Health Insurance business of Rs.15 crores or more premium in the past three financial years (viz.,2010-11,11-12, 12-13)
c) Should have at least one year experience in providing Health Insurance of 500 families or more under one group Health Scheme in the last three years (viz.,2010-11,11-12,12-13).

Technical Proposal shall be provided as per details mentioned in the 'Bidding Conditions', which constitutes a part of the tender.

The bidder shall provide in the technical proposal a description of the benefit package, service delivery mechanism, reliability and provider network selection for providing hassle medical facilities to the insured.

A copy of the technical proposal in the format of a PowerPoint with important points highlighted should be submitted

ANNEXURE I

Insurance Coverage and Terms & Conditions

Details of Insurance Coverage:

01. .Number of families to be covered: The number of employees with age and gender profile is provided Section "Scope of Service". The figures may vary marginally.

02. The cover for serving employees will be for self, spouse and upto 2 dependent children. Any children beyond this to be covered only at additional premium quoted.

03. This cover is for Hospitalization expenses and OPD expenses relating to any Medical or Surgical illness or injury/accident requiring hospitalization, day care procedures and/or OPD for the members of the policy.

Sum Insured for Inpatient: Rs. 3 lac per family per policy with floater facility under hospitalization.

Employees and their family would be entitled to CASHLESS/ REIMBURSEMENT of the treatment at the identified hospitals/nursing homes up to the sum insured.The beneficiary can avail cashless inpatient treatment at any of the empanelled hospital on PAN India basis.

OPD benefits: Rs. 35,000/- per Family per policy period Detailed Benefits / Services

OPD Health (Cashless/Reimbursement) treatment to employees and their family upto the sum insured of Rs. 35,000 on family floater basis

04. Policy provides cashless/ reimbursable hospitalization/OPD arising out of following conditions:

- Pre-existing diseases are Covered from day one for existing members and the new joinees.
- 30 Days Wait Period condition is Waived off for existing members and the new joinees.
- First Year Exclusion condition for specific diseases is Waived off for all Insured Members.
- Pre & Post Hospitalization is covered for 30 days and 60 days respectively only
- In Patient Care (IP) requiring hospitalization. Doctor's fees, Diagnostics tests, Medicines, drugs and consumables, Operation Theater, Intensive Care Unit, Intravenous fluids, blood transfusion, injection administration charges,Accommodation charges(as per plan) ,No capping on intensive care unit(ICU)
- All Primary, Secondary, Tertiary ailments requiring hospitalization.

- All emergency conditions requiring medical or surgical intervention.
- All Day care procedures requiring medical or surgical intervention. This should cover expenses for Dialysis, Chemotherapy, Radiotherapy, Cataract, Lithotripsy, Tosillectomy etc., where the hospitalization is less than 24 hours.
- Maternity benefit upto the limit Rs**.** 50,000 both in case of normal as well as caesarian delivery (limited to two living children).
- No waiting period in case of maternity benefit. 9 month waiting period in respect of maternity claims waived off for all Insured Members
- No upper limit on room rent.
- HIV patients to be included
- Baby covered from day one including hospitalization expenses incurred in connection with new born child right from day one
- Mid-term Inclusion benefit, i.e. including for fresh entrants during insurance cover period. In case of getting married spouse including in the policy
- Addition and deletion of employees on pro-rata basis during the period of insurance
- No age restriction for health insurance. Cover options for families across all life stages, from newborns to senior citizens of any age.
- Free health check-up once in two years
- The cost of prosthetic and other devices or equipment if implanted internally during a Surgical Procedure.
- Ambulance charges covered upto INR 2000 per event in case of emergency
- No capping on intensive care unit(ICU)
- No separate or extra capping on overall doctor fees, medicine costs, surgeon fees
- No other disease wise capping. No other ailment wise capping
- Customer services for any kind of emergency
- PAN India network hospital
- Dental benefits (non-cosmetic, requiring hospitalization and due to injury)
- Cashless facility 24*7
- 24/7 Customer Service. Customer services for any kind of emergency

- Hospital Service Charges (like insurance processing charges) covered
- Any other facilities that would be extended for the policy without additional premium may also be stated
- Cashless cards to all the employees, pensioners and dependents to be provided within 7 days of the assignment of Policy
- If any additional conditions are applicable, the same may be specified in the quote
- Periodic meeting to be held in GIZ Office, New Delhi, between GIZ and the Insurance company for review of cases/settlement of grievances of the employees.

OPD Terms & Conditions

1) Out Patient Medical Benefits covered under the policy: Sum insured INR 35000 per Family.

   a) Consultation Fees across all specialties

   b) Diagnostic Test
      - Radiology
      - Pathology
      - Microbiology
      - Biochemistry

   c) Dental treatment and Care only for Root Canal treatment and fillings.

2) Pharmacy Expenses are not covered