



**TEA BOARD INDIA**  
14, B.T.M SARANI (BRABOURNE ROAD)  
KOLKATA – 700 001, INDIA

## **REQUEST FOR PROPOSAL**

**FOR**

**GROUP HEALTH INSURANCE POLICY FOR THE EMPLOYEE  
OF TEA BOARD OF INDIA AND THEIR DEPENDENTS**

**BID DOCUMENTS  
&  
GENERAL TERMS & CONDITIONS**

**LAST DATE OF SUBMISSION: 25/09/2018 at 1500 Hrs.**

**22/1/Estt/Medical/2017**

*चाय पियो मस्त जियो !*



World's Gold Standard





**TEA BOARD OF INDIA**  
**14, B.T.M SARANI (BRABOURNE ROAD) KOLKATA 700 001**  
[www.teaboard.gov.in](http://www.teaboard.gov.in)

Ref.No.22 (1)/Estt/Medical/2017/

Date 27/08/2018

**NOTICE INVITING TENDER FOR TAILOR MADE GROUP HEALTH INSURANCE  
POLICY FOR TEA BOARD EMPLOYEES AND THEIR DEPENDENT MEMBERS**

The Tea Board of India a body corporate established under the Tea Act 1953 ( Act No XXIX of 1953) having its Head office at 14, B.T.M. Sarani, Kolkata – 700 001 and various Zonal and Regional Offices located in different parts of country invites sealed **Expression of Interest** from **IRDA Licensed General Insurance companies operating in India** for **Group Health Insurance Policy** for the Board's employees and their dependents as per the attached format.

**Important Date & Time**

Sl.No.	Particulars	Time	Date
1	Last date & time for submission of tender	15.00 hrs	25/09/2018
2	Date & time of opening the Technical Bids	16.00 hrs	25/09/2018
3	Date & time of opening of financial Bids	15.00 hrs	To be intimated to the technically qualified bidder at later date

The bids/offers received after the due date and time mentioned above will not be entertained under any circumstances. Incomplete, unsigned bids, without proper seal or the bids not in proper format will be rejected without assigning any reason. The bids/offer should be complete in all respects and submitted to

The Secretary,  
Tea Board of India,  
14, B.T.M Sarani (Brabourne Road),  
Kolkata 700 001

Sd/-  
Secretary

## Terms and Conditions

### 1. Procedure for submission:

Sealed envelope A & B (as stated below) to be placed in a single cover (sealed) and superscribed as "Tender for Group Health Insurance Policy for Tea Board of India Employee and their dependents". The sealed envelope should be dropped in the tender box placed in the Ground Floor of the Tea Board Building before the due date & time. Those sending the documents by posts or courier have to ensure that the sealed envelope containing the A & B shall reach to the Secretary, Tea Board of India, 14, B.T.M Sarani (Brabourne Road), Kolkata 700 001, West Bengal before the prescribed date & time. The Board will not take any responsibility under any circumstances for postal/courier delays.

### Envelope A

This envelope should contain the following

- a) Covering Letter in letter head complete in all respect as per Annexure – I
- b) Technical Bid as per Annexure – II, Annexure – III and the terms and conditions duly signed and seal with date
- c) Relevant supporting documents of technical bids, if any

### Envelope B

This envelope should contain only the financial bid as per Annexure – IV

2. One authorized representative of the bidder may be present while opening the tender
3. Financial bids of technically qualified parties shall be opened at a later date
4. The Technical Evaluation Committee of the Tea Board constituted for the purpose shall assess the ability of the agencies to render the requisite services based on the company profile, rating and on such other criteria as it may fix and the Financial Bids of only those firms qualifying the technical evaluation will be considered
5. The tenderer should sign on each page of the tender documents
6. All the regular and temporary employees of the Tea Board of India (Tea Board) and their dependent members irrespective of the age group is eligible to join the scheme. At present the retirement age of the Board's employee is 60 Years. (Considering the last day of the month of attaining the age of 60)
7. Bids which are late/vague/conditional/incomplete/not confirming to the laid down procedure in any respect will be rejected
8. Tenders sent by fax & e-mail will not be accepted
9. In case of differences arising in the terms and conditions of the tender documents with the firm(s), the decision of the Deputy Chairman of Tea Board shall prevail.
10. The scheme should have provisions for new entrants in service to get coverage within 24 hours of communication from the Board.
11. The successful Company shall at its own cost comply with the provision of orders and notifications issued by IRDA and Government from time to time
12. In case of any unsatisfactory service, suitable penalties as decided by the Deputy Chairman shall be levied after issuing notice
13. In case of failure in settlement of claims within the time frame, the penalty will be enforced as per Board's norms
14. The period of contract will initially be for one year (from midnight to midnight) and extendable on mutually agreed terms and conditions, which is liable to be terminated with one month's notice, if any lapse or unsatisfactory performance of the Company/firm is noticed or for any other reasons to be specify in writing
15. The Courts of Kolkata will have the jurisdiction to try any matter, dispute or reference between the bidders and the Institute arising out of this service. It is specifically agreed that

no court outside and other than Court in Kolkata, West Bengal shall have jurisdiction in the matter

16. Tea Board reserves the right to modify/change/delete/add any further terms and conditions prior to issue of the agreement
17. Arbitration- All dispute and differences which may arise between the Tea Board and the Insurance Company shall be referred to the Deputy Chairman, Tea Board whose decision shall be binding on all concerned

### **Special Terms and Conditions**

1. Cashless facility should be provided on Pan India Basis. Details of the Hospitals are to be provided. All transactions with these hospitals should be totally **cashless**
2. There should be a dedicated helpline (24 x 7) from the TPA of Insurance Company available and the contact details should be furnished in the tender. Contact details of the TPA should be provided by the Insurance Company including the name of the contact person, contact numbers and postal & email address
3. Door-step reimbursement facility for cases of reimbursement to individual and reimbursement amount can be made directly to the members through digital mode only preferably within 15 days from the date of submission of required documents. The response time by the TPA at the time of admission should be maximum of six hours
4. Reports including the claims of individuals and the details of settlement are to be furnished to the Board office located at Kolkata on monthly basis or as and when required by the Board

### **The Company/ Agency should also furnish the copies of following documents in addition to the documents asked for in the tender document**

1. IRDA Accreditation Certificate with validity
2. List of Government/Semi-Government/ Govt. of India Undertaking/Autonomous Body or Private Body for which such Insurance Scheme has been provided along with the proof
3. Details of the TPA
4. A dummy copy of Group Health Insurance policy with detailed terms and conditions

Signature of the Authorized Person

Name:

Contact Details +91

Email ID

Date

Seal of the Firm/Agency

**Annexure- I**

(On office letter head)

Ref.No.

Date:\_\_\_/0\_/2018

To,  
The Secretary,  
Tea Board of India,  
14, B.T.M Sarani (Brabourne Road),  
Kolkata 700 001

Sir,

**Sub: Notice Inviting Tender for Group Health Insurance Policy for Tea Board of  
India Employees and their dependents members  
Ref: Tender No. – 22 (1)/Estt/Medical/2017/ dated \_\_\_/0\_/2018**

With reference to the above, I am/ We are enclosing our bids for the Group Health Insurance Policy for Tea Board of India for their employee and their dependents

I / We hereby reconfirm and declare that I / We have carefully read and understood the above referred Tender document including instructions, terms & conditions, special terms and conditions and all the contents stated therein and all subsequent corrigendum published on Board's website or any other portal.

(Signature of the authorized person)

Date:

Name of the Contact Person

Contact Details : +91

E-mail Address:

## Annexure- II

### ELIGIBILITY CRITERIA

Technical Requirements	Complied Yes / No	Supporting documents to be enclosed. Yes/No
1. IRDA Accreditation Certificate		
2. Number of Years Since License given by IRDA as on 31/03/2018		
3. Gross Total Premium underwritten within India (INR in Crores) as on 31.03.2018		
4. Health Premium underwritten within India (INR in Crores) as on 31.03.2018		
5. Number of Group Medical Insurance Policies being serviced where Total Lives covered are 20,000 Lives in Each Policy for the Financial Year 2017-18 \$ *		
6. Number of Group Medical Insurance Policies where the Premium is more than INR 20 Crores for the Financial Year 2017-18 # *		
7. Tender documents duly signed on each page		
8. Cashless treatment at least <b>30</b> major multi-specialty hospitals located in Kolkata, Chennai, Mumbai and New Delhi and <b>25 to 15</b> (depending on the city) for rests of the place where Board's offices are located. Name of such Hospitals to be provided.		
9. 24X7 helpline of TPA along with contact details of TPA		
10. A dummy copy of Group Health Insurance policy		
11. Disease wise capping as per Appendix - 3		

#### **\$ Point No 5 – Required Details**

Details in respect of each such policy to be provided as under:

Name of the Company & Contact Person (s)	No. of Lives Covered	Premium Per Life Covered	Total Yearly Premium (INR) (Exclusive of Tax)

#### **#Point No 6 – Required Details**

Details in respect of each such policy to be provided as under:

Name of the Company & Contact Person (s)	No. of Lives Covered	Premium Per Life Covered	Total Yearly Premium (INR) (Exclusive of Tax)

**\*For Point Number 5 and 6 mentioned above, the following conditions will apply:**

- Policies where your company is a Co-Insurer will not be considered.
- Micro Insurance/State Policies will not be considered. Only Corporate Group Medical Insurance policies will be considered for the Technical Bid.
- Company that does not have any policy of the required size will not get any points.

\*Tea Board of India reserves the right to verify the information provided against item Nos.5 & 6 above.

Signature of the Authorized Person

Name:

Contact Details +91

Email ID

Date

Seal of the Firm/Agency

### ANNEXURE – III

#### Technical Bid for the Group Health Insurance Policy for Tea Board of India and their dependent members

Technical		Remarks
Group Name	Tea Board of India	This is the 1 <sup>st</sup> Policy
Location	All India	
Commencement Date	0___/0___/2018	
Period	One Year from the date of commencement	
Insured Group Details		
Employee strength as on *31/03/2018		Details of employee and their dependents are attached as appendix- 1
Number of Employees	469	
Number of Dependents	947	
Total number of lives	1416	
Family Definition	Employee, Spouse, parents, sisters, widowed sisters, widowed daughters, brothers, children, step children, divorced/separated daughter and step mother wholly dependent upon the employee and are normally residing with the employee	In case of son, the coverage will be till he starts earning or he attains the age of 25 years, whichever is earlier. In case of daughter, the coverage will be till she starts earning or gets married, whichever is earlier irrespective of the age limit. Dependency and other criteria to be decided as per Government of India Medical Attendance Rules.
Maximum Age	Not Applicable	
Floater/Individual	Floater	
Sum Insured bands	Rs. 5.00 Lakh plus	
Primary Member (Self) + Age Bands* (* number approx. subject to change)		
0-25	01	
26-30	32	
31-35	65	
36-40	77	
41-45	39	
46-50	68	
51-55	113	
56-60	74	

Dependents Age Band*		
0-25	449	
26-30	65	
31-35	44	
36-40	57	
41-45	72	
46-50	65	
51-55	48	
56-60	39	
more than 60 years	108	
Total	1416	
<b>Coverage and Benefit Details</b>		
Domiciliary Hospitalization	Covered	
Coverage of Pre Existing diseases	Covered	
Exclusions	Applicable	To be specified
Cashless facility	Applicable	
30 days waiting Period	Waived	
1st Year and 2 years exclusions	Waived	
30 Days Pre and 60 Days post hospitalization Expenses covered	Covered	
Maternity Benefit / New Born Baby	Covered.	Limit up to Sum Insured
**Corporate Buffer	Rs <b>50,00,000/-</b> Limit up to Sum Insured.	
Co-Payment	Not Applicable	
Sub Limits For Disease or Room Rent Capping	Applicable. Cap should not be lower than as mentioned in <b>Appendix -3.</b>	<ol style="list-style-type: none"> <li>1. Room-Rent –Rs.7500 per day (Max.)</li> <li>2. ICU – Rs.10, 000/- per day (Max.)</li> <li>3. Minimum cap on diseases subject to Sum Insured should not be below as specified in the list attached. <b>(Appendix -3)</b></li> </ol>



Other Conditions	New Employees shall be included in policy from date of joining and resigned /terminated employees shall be deleted from date of resignation/termination.	
	Monthly declarations will be given for Additions and Deletions by end of the following month	
	Pro rata Premium to be charged / Refund in case of Addition and Deletion	
TPA	TPA Services Involved (if any) and Name and contact details to be submitted.	List of Network of Authorized Hospitals to be provided.
Any Service Charges on Medical Bills	Should not be deducted from the individual Claim.	

\*\* The corporate buffer shall only be utilized for the "Critical Illness" means an illness or sickness or a disease or a corrective measure like Cancer, Kidney failure, coronary artery (by pass)surgery, Heart attack (myocardial infarction), Heart Valve Surgery, Major Organ Transplant, Multiple Sclerosis, Primary Pulmonary Arterial Hypertension, Aorata graft surgery, paralysis, coma, total blindness and stroke be utilized

Signature of the Authorized Person

Name:

Contact Details +91

Email ID

Date

Seal of the Firm/Agency



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**Appendix – 2**

<b>Employee Strength as on</b>	<b>31/03/2018</b>
<b>Total numbers of employees*</b>	<b>469</b>
<b>Numbers of dependents*</b>	<b>947</b>
<b>Total numbers of lives*</b>	<b>1416</b>

Primary Member (Self) + Age Bands* (* number approx. subject to change)	
0-25	01
26-30	32
31-35	65
36-40	77
41-45	39
46-50	68
51-55	113
56-60	74
<b>Sub-Total</b>	<b>469</b>

Dependents Age Band*	
0-25	449
26-30	65
31-35	44
36-40	57
41-45	72
46-50	65
51-55	48
56-60	39
more than 60	108
<b>Sub-Total</b>	<b>947</b>

<b>Grand Total</b>	<b>1416</b>
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Sd/-  
**Secretary**



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**Appendix – 3**

**Disease wise Capping**

Sl.No	Disease	Metro Location	Other Locations
1	Appendix	50,000/-	35,000/-
2	Eye Related	60,000/-	50,000/-
3	Gall Bladder	60,000/-	50,000/-
4	Hernia	50,000/-	40,000/-
5	Hydrocele	25,000/-	20,000/-
6	Hysterectomy	50,000/-	40,000/-
7	Piles	45,000/-	35,000/-
8	Kidney Stone (including DJ stent removal for same stone)	70,000/-	60,000/-
9	Joint Replacement including Vertebral joints	2,00,000/-	1,60,000/-
10	Others		

Sd/-  
**Secretary**



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**FINANCIAL BID FOR GROUP HEALTH INSURANCE POLICY FOR TEA BOARD OF INDIA EMPLOYEES AND THEIR DEPENDENTS**

<b>Sl.No.</b>	<b>Particulars</b>	<b>Total Premium amount in Rupees</b>
1	Premium for coverage of Rs.5.00 Lakh per family for a period of one year	
2	Taxes (if any) GST/Service Charge etc	
3	Total in Figures	
	Total in Words	

**Note**

1. All terms and conditions and special condition as stated in the tender documents
2. Conditional bids are not acceptable
3. Bids in above format shall only be acceptable

Sd/-  
**Secretary**

## Process for evaluation of Technical Bids

In the first stage, only the „Technical Bids“ will be opened in respect of those bidders who fulfill the details indicated in Annexure - II. The Technical Bids will be evaluated on the basis of Technical details and the points to be awarded as per following table:

### EVALUATION CRITERIA FOR TECHNICAL BIDS

Sr. No.	Criterion	Points	Total
<b>1</b>	<b>Number of Years Since License given by IRDA as on 31.03.2018</b>		<b>10</b>
	1. Up to Three Years	4	
	2. More than three years and Up to Five Years	6	
	3. More than five years and Up to Seven Years	8	
	4. Above Seven Years	10	
<b>2</b>	<b>Gross Total Premium underwritten within India (in Crores) as on 31.03.2018</b>		<b>10</b>
	1. Up to Rs. 100 Crores	4	
	2. > Rs. 100 Crores - Rs.200 Crores	6	
	3. > Rs.200 Crores – Rs. 400 Crores	8	
	4. > Rs.400 Crores	10	
<b>3</b>	<b>Health Premium underwritten within India (INR. In Crores) as on 31.03.2018*</b>		<b>20</b>
	1. Up to Rs. 25 Crores	5	
	2. > Rs. 25 Crores - Rs.50 Crores	10	
	3. > Rs. 50 Crores – Rs.150 Crores	15	
	4. > Rs. 150 Crores	20	
<b>4.</b>	<b>Number of Group Mediciclaim policies being serviced where Total Lives covered are 20,000 Lives in each policy during Financial Year April 2017 to March 2018 *</b>		<b>30</b>
	1. One Policy	7.5	
	2. Two Policies	15.0	
	3. Three Policies	22.5	
	4. Four or more Policies	30.0	
<b>5.</b>	<b>Number of Group Mediciclaim Policies where the Premium paid is more than INR 20 Crores during Financial Year April 2017 to March 2018 @</b>		<b>30</b>
	1. One Policy	7.5	
	2. Two Policies	15.0	
	3. Three Policies	22.5	
	4. Four or more Policies	30.0	

\*For Point Number 4 and 5 mentioned above, the following conditions will apply:

- Policies where your company is a Co-Insurer will not be considered.
- Micro Insurance/State Policies will not be considered. Only Corporate Group Medical Insurance policies will be considered for the Technical Bid.
- Company that does not have any policy of the required size will not get any points

Bidders scoring equal to or more than 60% marks, as per above evaluation in Technical Bid, will qualify for further process of bidding.

In the second stage, the Financial Bids of only those bidders, who have qualified through the above process on the basis of evaluation of their Technical Bids, will be opened. In case of eliminated bidders, the sealed financial bids will be returned.

**Appendix - IV**

**Tea Board of India Group Medical Policy for their employee and its dependent**

Type of Cover	Cover is for Board's Employees and their dependents  Irrespective of Age  Corporate Buffer of Rs. 50.00 Lakhs will be provided for the members, to take care of multiple hospitalizations subject to claim per hospitalization
Sum Insured & Limit per hospitalization of Tea Board employee & their dependents	5.0 Lakhs SI
Scope of Cover	<p>The Policy should cover expenses of hospitalization (room Charges Doctors/surgeons fees, ICU/ICCU, Medicines, pathology reports, etc.) on a reimbursement/cashless basis, incurred as a result of illness and/or accidents as an inpatient in a recognized hospital.</p> <p>The policy should cover dental treatment following an injury/accident</p> <p>The policy should cover hospitalization expenses incurred in connection with accidents caused due to terrorism</p> <p>Pre/Post Hospitalization to be covered 30 &amp; 60 days respectively. In case of Physiotherapy, the post hospitalization is to be covered up to 180 days, subject to applicable per hospitalization ceiling.</p> <p>The policy should cover standard day care procedures (140+) indicative list of procedures are attached in <u>APPENDIX V</u>. The day care list will also be inclusive of day care Medical Treatment undertaken due to advancement of technology.</p>
Additional Features Required	<p>The policy must offer following covers</p> <p>1. Cashless facility (Minimum 24 hour hospitalization or irrespective of day care surgeries) for hospitalization procedures arising out of sickness or accident. Claims can be made on cashless/reimbursement basis</p>

2. For repeated hospitalization of the same ailments within 45 days of hospitalization reimbursement facility will be available, except in the case of serious ailments viz. cancer, CRF & heart ailments, etc. where cashless facility would continue
3. Cover for new members and their dependents from the date of joining of the member (date of retirement/superannuation/ special retirement scheme/inclusion under MAF, etc at the discretion of Tea Board Of India).
4. Pre-existing diseases must be covered for all the members
5. Waiting period (30 days, First year, etc) will not be applicable.
6. Waiver of domiciliary hospitalization benefit
7. Chemotherapy, Dialysis, Radiotherapy, Chronic Renal failure including medicines, AIDS & HIV, Indoor Ayurvedic Treatment taken in government run/government approved hospital and at CGHS empaneled Ayurveda hospitals
8. Ayurvedic treatment for cancer patients at Private Ayurvedic Hospitals
9. Supply and fitting of external prosthetic devices, artificial aids including eye glasses, hearing aids, artificial limbs, etc. if the same is necessitated following an accident
10. Local Ambulance charges for admission, transfer to another hospital and /or discharge under critical condition as advised by the doctor.
11. Surcharges levied by hospital
12. Registration charges levied by hospital
13. Nursing charges should not be clubbed with room rent for arriving at eligibility.
14. Service Charge levied by the Hospital
15. Charges for special nurse for persons above the age of 65 years during the hospitalization
16. Special nursing charges for persons above 80 years of age for a maximum period of 60 days after hospitalization if recommended by attending doctor or hospital.
17. In case of bilateral knee or hip replacement surgery done during the same hospitalization, reimbursement to be made up to twice the ceiling applicable and Cashless Extended in empanelled hospitals to be made twice the ceiling applicable

	<p>18. Cataract operation with a cap of Rs.40000/ uniform for all.</p> <p>19. Investigation charges during hospitalization will be reimbursed in full irrespective of room occupied. Pro-rata deduction will not be applicable on investigation charges.</p> <p>20. Oral chemotherapy subject to sum insured on cumulative basis.</p> <p>21. Endoscopy /Colonoscopy as day care procedure.</p> <p>22. Eye treatment- Reimbursement of cost of intra vitreous injection Avastin/ Lucentis /Macugen/ Ozurdex etc. up to ceiling of Rs. 25,000/- (inclusive of all hospitalization cost) per dose/ per eye up to maximum three dosages per eye during the policy year. Total Sub Limit – Rs. 75,000/-</p> <p>23. Psychiatric Treatment to be included on IPD Basis up to the Sum Insured.</p> <p>24. EECF (Enhanced external counter pulsation) to be included under the policy on OPD basis up to the per hospitalization limit. Settlement of claim to be done on reimbursement basis only after completion of full treatment</p> <p>25. Donor Medical expenses in case of transplants like kidney, liver etc., to be covered within the sum insured (Organ cost not covered under policy)</p> <p>26. Zolendronic Injection, Bortezomib Injection &amp; Terifrac Injection administration covered under day care procedures subject to sum insured on cumulative basis.</p>
<p>Exclusions</p>	<p>1.Circumcision unless necessary for the treatment of illness not otherwise excluded in this section or required as a result of accidental body injury</p> <p>2. Vaccination, inoculation cosmetic treatment (including any complications arising out of or how ever attributable to any cosmetic treatments, or the replacement of the existing breast implant), aesthetic treatment, experimental, investigational or unproven procedures or treatments, devices &amp; Pharmacological regiments.</p> <p>3. Vitamins &amp; tonic unless forming necessary part of the treatment/ illness as certified by the attending doctor.</p> <p>4. Personal comfort and convenience items or services such as television, telephone, barber or beauty service, guest service, and similar incidental services &amp; supplies.</p> <p>5.The treatment of obesity (including morbid obesity) &amp; any other weight control programs, services or supplies.</p>



	<p>6. Durable medical equipment (including but not limited to wheel chairs, crutches, artificial limbs &amp; the like), (namely that equipment used externally from the human body which can withstand repeated use; is not designed to be disposable is used to serve a medical purpose; is generally is not useful in the absence of illness or injury and is usable outside of the hospital) unless required for the treatment of illness or accidental bodily injury</p> <p>7. Any travel/ transportation cost or expenses (accept local ambulance charges)</p> <p>8. Ionizing, radiation or contamination by radio activity from any nuclear waste or from combustion of nuclear fuel or otherwise; or the radioactive toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof, or asbestosis or any related condition resulting from the existence, production, handling processing , manufacture, sales, distribution, deposit, or use of asbestos or asbestos products</p> <p>9. In vitro fertilization (IVF), GIFT procedures, ZIFT procedures or any related prescription, medication, and treatment. Embryo transport, donor ovum &amp; semen &amp; related cost including collection &amp; preparation; voluntary medical termination of pregnancy</p>
<p>Important policy features</p>	<p>The policy will pay in respect of the hospitalization expenses as per the limit per hospitalization. If the insured is diagnosed with an illness or suffer accidental bodily injury, which necessitates his hospitalization, the insurer will reimburse the insured person's consequent hospitalization expenses for medical expenses reasonably and necessarily incurred including but not limited to:</p> <p>1. Room &amp; Board charges are applicable as per Sum Insured &amp; Pay matrix. In the event of the insured utilizing room rent higher than his/her limits then following procedure will be followed in settling the claim</p> <p>a) If the hospital maintains the tariff depending upon the room rent then claim will be settled on the rates specified therein for all charges incurred.</p> <p>b) If such list is not available then the charges will be settled on pro-rata basis.</p> <p>c) In any case the pro-rata claim cannot be below the procedure charges of such treatment.</p> <p>d) In case of death also the claim will be settled on Pro-rata basis if Insured is utilizing room rent higher than his/her Limit.</p> <p>e) Claims will be settled on proportionate basis if higher room rent is opted, however the minimum payment will be made as per PPN tariff irrespective of higher room rent.</p>

	<ol style="list-style-type: none"> <li>2. Doctor's fees</li> <li>3. Intensive care unit</li> <li>4. Nursing expenses</li> <li>5. Surgical fees, operating theatre, anesthesia &amp; oxygen &amp; their administration</li> <li>6. Physiotherapy</li> <li>7. Drugs &amp; medicines consumed on the premises</li> <li>8. Hospitalization miscellaneous services (such as laboratory, x-ray, diagnostic test)</li> <li>9. Dressing, ordinary splints &amp; plaster casts</li> <li>10. Cost of prosthetic devices</li> <li>11. Organ transplantation including the treatment costs of the donor but excluding the cost of organ</li> </ol>
Other Customized Features	<ol style="list-style-type: none"> <li>1. Individual ID cards for each member &amp; dependents</li> <li>2. Access to a 24 hours help line (TPA must set up special help line numbers for Tea Board Of India employees)</li> <li>3. In case of death of the insured during hospitalization or within 48 hours of discharge from the hospital full amount (Refer Para d of Point 1 of the Important Policy features) excluding non-medical items of the hospital bills will be paid irrespective of the hospitalization limit</li> <li>4. No members will be out of the scheme till the buffer amount is available.</li> <li>5. There will be no cap/restriction on the number of medically justified hospital confinements per policy period (except in appendix 3).</li> <li>6. In case of treatment in government/municipal hospital where the cashless facility is not available on account (advance) payment facility up to 50% of the estimated cost of treatment within the limit per hospitalization will be paid directly to the hospital from where the estimate is taken</li> <li>7. Bifurcation need not be given by the hospital if package charges on PTCA, CABG, Renal transplantation, etc. if charged with in the entitled ceiling of the employee &amp; approved by the TPA.</li> </ol>
Settlement of Claims	<p>Intimation of hospitalization should be within 7 days from Date of admission. Immediately after the submission of relevant documents from DOD from hospital, not later than 30 days, the claims will be settled within 15 days. (In case the members are not availing cashless facility)</p> <p>Repudiation of claims shall be at sole discretion of Tea Board HQ, Kolkata</p>

<p>Policy Administration</p>	<ol style="list-style-type: none"> <li>1. Shall be through a TPA/Panel of TPA which will be decided with prior approval of Tea Board with a written service level agreement in place prior to the date of commencement of the cover.</li> <li>2. In case of new entries, cover starts from the date of joining.</li> <li>3. In case of separations/ death, coverage ceases automatically from that date. Pro-rata refund of premium shall be credited in cases of deletion of members provided no claim has been admitted in respect of such member(s).</li> <li>4. In the event of death of Board's employee, the dependents continue to be covered till the currency of the policy.</li> <li>5. All admissions / exits shall be adjusted pro-rata, subject to monthly declarations- cover shall not be denied on grounds that the deposit premium was inadequate for that month.</li> <li>6. The insured shall maintain a deposit premium to take care of additions / exits of the employees. This deposit shall be replenished each month to maintain the deposit balance.</li> <li>7. Monthly declarations shall be sent through email by the insured to the insurer in the succeeding month. The insurer shall calculate the pro-rata premium/ refund and communicate the same to Tea Board who will arrange to give a cheque for additional premium, if any. Refund premiums, if any shall be credited to the deposit account. The final refund, if any shall be returned to the insured within one month from the date of expiry of the policy.</li> <li>8. There should be a monthly meeting where the insured, the insurer and the TPA (s) to review the progress/ health and service related issues.</li> <li>9. Tea Board of India would carry out review of administration of claims on sample basis during the currency of GMP 2018-19 Tea Board of India by itself or any third party may carry out review of administration of claims as a part of scope of work</li> </ol>
<p>Special Condition</p>	<p>The policy shall be valid for One year. Insurance policy should not have a cancellation clause</p>
<p>Servicing</p>	<p>MOU for servicing will be signed by the insured, Insurer, TPAs. Tea Board reserves the right to seek a change of TPA, by giving 30 days' notice, at any time during the currency of the policy without assigning any reasons.</p>

## APPENDIX - V

### Day Care Facilities

140+ day care surgeries are covered under the policy.

Please find below the list of 140+ daycare surgeries but not limited to:

### Operation on the Ears:

#### **Microsurgical Operations on the Middle Ear**

Stapedotomy

Stapedectomy

Revision of a Stapedectomy

Other operations on the auditory ossicles

Myringoplasty(Type 1- tympanoplasty)

Tympanoplasty(Closure of an eardrum perforation and reconstruction of the auditory ossicles)

Revision of a Tympanoplasty

Other Microsurgical operations on the Middle Ear

#### **Other Operations on the Middle and Internal Ear**

Paracentesis(mryingotomy)

Removal of a tympanic drain

Incision of the mastoid process and middle ear

Mastoidectomy

Reconstruction of the middle ear

Other excisions of the middle and inner ear

Fenestration of the inner ear

Revision of afenestration of the inner ear

Incision (opening) and destruction (elimination) of the inner ear

Other operations on the middle and inner ear

#### **Operation on the nose and the Nasal Sinuses**

Excision and destruction of disease tissue of the nose

Operations on the tuTea Board of Indianates' (Nasal Concha)

Other operations on the nose

Nasal Sinus aspiration

#### **Operation on the eyes**

Incision of the tear glands

Other operation on the tear ducts

Incision of diseased eyelids

Excision and destrucation of diseased tissue of the eyelid

Operations on the canthus and epicanthus

Corrective surgery for entropion and ectropioyl

Corrective surgery for blepharoptosis

Removal of foreign body from conjunctiva

Removal of foreign body from the cornea

Incision of the cornea

Operations for pterygium  
Other operations on the cornea  
Removal of foreign body from the lens of the eye  
Removal of foreign body from the posterior chamber of the eye  
Removal of a foreign body from the orbit and eyeball  
Operation of cataract with a cap of Rs.40000/-  
Reimbursement of cost of intra vitreous injection Avastin/Lucentis/Macugen/Ozurdex etc. up to ceiling of Rs. 25000/- (inclusive of all cost) per dose/ per eye and maximum three dosages per eye during the policy year.

### **Operation of the skin and subcutaneous tissue**

Incision of a pilonidal sinus  
Other incisions of the skin and subcutaneous tissues  
Surgical wound toilet(wound debridement) and removal of diseased tissue of the skin and subcutaneous tissue  
Local excision of the diseased tissue of the skin and subcutaneous tissues  
Other excisions of the skin and subcutaneous tissues  
Simple restoration of surface continuity of the skin and subcutaneous tissues  
Free skin transplantation, donor site  
Free skin transplantation, recipient site  
Revision of skin plasty  
Other restoration and reconstruction of the skin and subcutaneous tissues  
Chemosurgery of the skin  
Destruction of diseased tissue in the skin and subcutaneous tissues

### **Operation on mouth and face**

#### **Operation on the tongue**

Incision, excision and destruction of diseased tissue of the tongue  
Partial glossectomy  
Glossectomy  
Reconstruction of the tongue  
Other operation on the tongue

#### **Operation on the salivary glands and salivary ducts**

Incision and lancing of a salivary gland and salivary duct  
Excision of diseased tissue of a salivary gland and salivary duct  
Resection of salivary gland  
Reconstruction of a salivary gland and salivary duct  
Other operations on the salivary glands and salivary ducts.

#### **Other operations on the Mouth and Face**

#### **Operation on the tongue**

Incision, excision and destruction of diseased tissue of the tongue  
Partial glossectomy  
Glossectomy  
Reconstruction of the tongue  
Other operation on the tongue

## **Operation on the salivary glands and salivary ducts**

Incision and lancing of a salivary gland and salivary duct  
Excision of diseased tissue of a salivary gland and salivary duct  
Resection of salivary gland  
Reconstruction of a salivary gland and salivary duct  
Other operations on the salivary glands and salivary ducts.

## **Other operations on the Mouth and Face**

External incision and drainage in the region of the mouth, jaw and face  
Incision of the hard and soft palate  
Excision and destruction of diseased hard and soft palate  
Incision, excision and destruction in the mouth  
Plastic surgery to the floor of the mouth  
Palatoplasty  
Other operations in the mouth

## **Operations on the Tonsils and adenoids**

Transoral incision and drainage of a pharyngeal abscess  
Tonsillectomy without adenoidectomy  
Tonsillectomy with adenoidectomy  
Excision and destruction of a lingual tonsil  
Other operations on the tonsils and adenoids

## **Traumatological surgery and orthopedics**

Incision on bone, septic and aseptic  
Closed reduction of fracture, luxation or epiphyseolysis with osteosynthesis  
Suture and other operations on tendons and tendon sheath  
Reduction of dislocation under GA, including K-wire  
Arthroscopic knee aspiration

## **Operation on the breast**

Incision of the breast  
Operation on the nipple.

## **Operation on the digestive tract**

Incision and excision of tissue in the perianal region  
Surgical treatment of anal fistula  
Surgical treatment of haemorrhoids  
Division of the anal sphincter (sphincterotomy)  
Other operations on the anus  
Ultrasound guided aspirations  
Sclerotherapy  
Endoscopy/Colonoscopy

## **Operations of female sexual organs**

Incision of the ovary  
Insufflation of the fallopian tube

Other operation on the fallopian tube  
Dilation of the cervical canal  
Conisation of the uterine cervix  
Other operations on the uterine cervix  
Incision of the uterus (Hysterotomy)  
Therapeutic curettage

Culdotomy  
Incision of the vagina  
Local excision and destruction of the diseased tissue of the vagina and the pouch of douglas  
Operation's on bartholin's gland (cysts)  
Incision of the vulva

## **Operations of the Male Sexual Organs**

### **Operations on the Prostate and Seminal Vesicles**

Incision of the prostate.  
Transurethral excision and destruction of prostate tissue.  
Transurethral and precutaneous destruction of prostate tissue.  
Open surgical excision and destruction of Prostate tissue.  
Radical Prostatovesiculectomy.  
Other excision and destruction of prostate tissue.  
Operations on the seminal vesicles.  
Incision and excision of periprostatic tissue.  
Other Operations on the prostate.

### **Operation on the Scrotum and Tunica Vaginalis Testis**

Incision of the Scrotum and Tunica Vaginalis testis.  
Operation on a testicular hydrocele.  
Excision and destruction of diseased scrotal tissue.  
Plastic reconstruction of the Scrotum and tunica vaginalis testies.  
Other operations on the scrotum and tunica vaginalis testis.

### **Operation on the Testes**

Incision of the Testes  
Excision and destruction of diseased tissue of the testes.  
Unilateral orchidectomy.  
Bilateral orchidectomy.  
Orchidopexy  
Abdominal exploration in cryptorchidism  
Surgical reposition of an abdominal testis  
Reconstruction of the testis  
Implantation, exchange and removal of a testicular porsthesis.

**Other operations on the testis.** \_

### **Operations on the Spermatic Cord, Epididymis and Ductus Deferens**

Surgical treatment of a varicocele and a hydrocele of the spermatic cord.  
Excision in the area of the epididymis.  
Epididymectomy.  
Reconstruction of the spermatic cord.

Reconstruction of the ductus deferens and epididymis.  
Other operations on the spermatic cord, epididymis and ductus deferens.

### **Operations on the Penis**

Operations on the foreskin.  
Local excision and destruction of diseased tissue of the penis.  
Amputation of the penis.  
Plastic reconstruction of the penis.  
Other operations on the penis.

### **Operations on the Urinary System**

Cystoscopical removal of stones.

### **Other Operations / Procedures**

Lithotripsy.  
Coronary angio graphies.  
Dialysis  
Coronary CT angiography  
Chemotherapy & radiotherapy  
Oral chemotherapy subject to sum insured on cumulative basis.  
Age related Macular Degeneration (Laser Treatment)  
Carotid Artery Angiography  
Foam sclerotherapy  
Treatment of pemphigus varigaris by rituximab therapy (injection rituximab)  
All types of Angiography covered  
Cystoscopy  
Photo dynamic laser therapy covered under ARMD treatment  
Cost of CRF/CKD treatment including the cost of injection Erythropoietin/Cyclosporine/  
Sandimmune up to admissible per hospitalization limit on cumulative basis  
**Zoledronic Injection, Bortezomib Injection & Terifrac Injection administration covered under day care procedures subject to sum insured on cumulative basis.**



## Corporate Buffer Structure

### Usage

Once the sum insured is fully utilized, the subsequent payable claims as per each employees eligibility and as per hospitalization limit is paid from the corporate buffer

<b>Corporate Buffer Utilization - Illustration</b>						
Sum Insured Per Hospitalization	225,000					
	<b>Claimed Amount</b>	<b>SI used</b>	<b>SI Balance</b>	<b>Corp Buffer Used</b>	<b>Corp Buffer Balance</b>	<b>Claim Amount Paid</b>
Employee A Claim 1	60,000	60,000	165,000	-	70,000,000	60,000
Employee A Claim 2	260,000	165,000	-	95,000	69,905,000	260,000
Employee A Claim 3	100,000	-	-	100,000	69,805,000	100,000
Employee B Claim 1	280,000	140,000	85,000	-	69,805,000	140,000
Employee B Claim 2	300,000	85,000	-	165,000	69,640,000	250,000

### Enhancement of Corporate Buffer

Once the corporate is fully utilized, Tea Board would pay additional premium @ 100% to enhance the corporate buffer amount as required.



**TEA BOARD OF INDIA**  
**14, B.T.M SARANI (BRABOURNE ROAD), KOLKATA 700 001**  
[www.teaboard.gov.in](http://www.teaboard.gov.in)

**LIST OF OFFICES: State and District**

Sl.No.	State	District
1	Assam	Guwahati
		Dibrugarh
		Tinsukia
		Tezpur/Lakimpur
		Sibsagar
		Golaghat
		Jorhat
		Bongaigaon
		Silchar
2	Mizoram	Aizawal
3	Tripura	Agartala
4	Arunachal Pradesh	Itanagar
5	Meghalaya	Shillong
6	Uttarkhnad	Almorah/Lucknow
7	Tamil Nadu	Coimbatore
		The Nilgiris
		Chennai
8	Andhra Pradesh	Tirumala
9	Bihar	Kisanganj/Patna
10	Himachal Pradesh	Palampur
11	Delhi	Delhi
12	Maharashtra	Mumbai
13	West Bengal	Kolkata
		Siliguri
		Jalpaiguri
		Darjeeling

Sd/-  
**Secretary**



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**GRADE WISE LIMITS**

**For SI of Rs. 5.0 Lakhs**

Category	Sum Insured Limit Per Hospitalization	Limit of Bed Charges per day for normal hospitalization	Limit of Bed Charges per day for ICU
Group A	500000	7500.00	10000.00
Group B	500000	5000.00	7500.00
Group C	500000	3000.00	5000.00

Sd/-  
**Secretary**