

No. Z.28015/01/2006-HD Cell (Pt-I) AYUSH/CGHS/AMSD
Government of India
Ministry of Health & Family Welfare
CENTRAL GOVERNMENT HEALTH SCHEME
AYURVEDIC MEDICAL STORE DEPOT

Serial No: -

Dated: -

**NOTICE INVITING TENDER BIDS FOR DETERMINATION OF RATES AND
EMPANELMENT OF AYUSH HOSPITALS UNDER CGHS AND CS (MA) RULES
1944**

Director CGHS invites sealed tenders from eligible private Ayurvedic, Yoga & Naturopathy, Unani, Siddha and Homoeopathy Hospitals (city wise) for determination of rates for various procedures / treatment to be provided to CGHS beneficiaries / Central Government employees and their eligible family members covered under CS(MA) rules 1944 and empanelment under CGHS through a two-bid tender system.


The hospitals /specialty centers, which already stand recognized under CGHS/CS (MA) Rules also, need to apply for continuing recognition.

BIDDING SCHEDULE

1.	Date of issue of tender.	Between 11:00 Hrs to 16:00 Hrs on any working day from 08-11-2011 to 17-12-2011.
2.	Office from where the Tenders can be obtained.	Office of Chief Medical Officer, CGHS (AMSD), Barrack NO.8 & 9, Bikaner House Hutments, Shahjahan Road, New Delhi-11.
3.	Cost of Tender Form (Non-refundable).	Rs. 1000/- in the form of DD drawn in favour of "Pay&Accounts Officer" CGHS Delhi, payable at Delhi.
4.	Amount of Earnest Money Deposit E.M.D. (refundable).	Rs. 50000/- in the form of DD drawn in favour of "Pay&Accounts Officer" CGHS Delhi, payable at Delhi
5.	Last date for submission of Completed Tender.	1600 Hrs. on 22-12-2011 at the Office of Chief Medical Officer, CGHS (AMSD), Barrack NO.8 & 9, Bikaner House Hutments, Shahjahan Road, New Delhi-11 along with samples.
6.	Date of pre- bid meeting.	14:30 Hrs on 02-12-2011 at the Office of Chief Medical Officer, CGHS (AMSD).
7.	Date of opening of Tender.	14:00 Hrs on 23-12-2011 at the Office of Chief Medical Officer, CGHS (AMSD), Barrack NO.8 & 9, Bikaner House Hutments, Shahjahan Road, New Delhi.

PREAMBLE

In the past the Department of AYUSH, Min. of Health and Family welfare was taken up the matter of empanelling private Hospitals of AYUSH with the CGHS by floating tenders. This process often resulted in situations where hospitals etc. whose tenders were rejected could not apply for empanelment till tenders were floated afresh. Similarly, new hospitals that were set up after the tender had been floated could not be empanelled till


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new tenders were floated. Taking into account representations received from various hospitals etc. it has been decided that henceforth empanelment with CGHS would be a continuous process. Interested hospitals could apply for empanelment at any point of time provided they had the prescribed infrastructure and staff and were willing to accept the rates fixed by CGHS for concerned city. Such hospitals would be inspected for verification of infrastructure, facilities and staff and if found to be complying with the prescribed norms / requirements, would be empanelled. CGHS would in this process also encourage accreditation of hospitals with professional bodies. For future on the basis of the decision taken by the competent authorities in the Department of Health, the empanelment process will be undertaken by CGHS instead of Department of AYUSH. This will cover for dependent eligible family members who are residing in non-CGHS covered areas are covered under Central Service (Medical Attendant) Rules 1944.

Payment Assurance

CGHS would ensure that subject to fulfillment of prescribed conditions, **payment of hospital claims (admissible amount)** in respect of pensioners would be done in time bound manner- **within a period of ten days from the date of submission of the hard copy of the bills** to the designated bill clearing agency (BCA) by the BCA itself after the electronic processing of bills is commenced however till such time every effort would be made to reimburse the credit bills within a period of 60 days from the date of receipt of the bills. This submission would be preceded by an electronic submission of the claim/bill to the BCA. CGHS has identified UTI-TSL as its bill clearing agency. CGHS would however, continue to audit the physical bills as per existing practice. In case, any excess or unauthorized payment is noted during audit, the same would be recovered by the BCA from the subsequent bills of the hospital or the Performance Bank Guarantee as the case may be.

A. CATEGORIES OF HOSPITALS

The following categories of private Hospitals (including Teaching Hospitals) would be considered for empanelment under CGHS / CS (MA) Rules 1944:

- a) Ayurveda
- b) Yoga and Naturopathy
- c) Unani
- d) Siddha
- e) Homeopathy

B. ELIGIBILITY CRITERIA

Ayurvedic, Yoga & Naturopathy, Unani, Siddha and Homoeopathy private Hospitals and teaching Hospitals, who fulfill the under mentioned conditions are eligible to apply:

- i. Hospitals must have 20 beds or more.
- ii. Hospitals must have infrastructure and manpower as per the terms and conditions mentioned in the tender **Annexure – IV**.



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- iii. The Hospitals must have at least one or more of specialized treatment facilities for providing Ayurvedic, Yoga & Naturopathy, Unani, Siddha and Homoeopathy treatments.
- iv. Inspection of such applicant private Hospitals (Technically qualified) will be carried out by Quality Council of India (QCI) or duly authorized / appointed by the QCI or other bodies by competent authority at a prescribed fee of rupees 25,000. Such inspection fee will be borne by the applying private Hospitals.
- v. Hospitals must have the capacity to submit all claims / bills in electronic format to the Bill Clearing Agency and must also have dedicated equipment, software and net connectivity for such electronic submission as stipulated below:
 - Dedicated Personal Computer with Dual Core /Core 2 DUO processor and minimum 2 GB RAM supported by UPS. OS should be Windows. Dedicated Colour scanner with a minimum resolution 300dpi.
 - Scalable Broad Band internet connectivity with minimum assured speed of 512kbps.

C. INSTRUCTIONS TO BIDDERS

1. Hospitals must quote rates for all procedures / services available with the hospital. Quoting for selective procedures/services will render the bidder ineligible for empanelment.
2. Hospitals must agree to accept and abide by the terms and conditions spelt out in the Memorandum of Agreement (Draft at Annexure VI) which should be read as part of the bid document.
3. **Hospitals must certify that the rates quoted by them are the lowest and lesser rates than the quoted rates are not charged from other normal patients / organizations who are not CGHS beneficiaries.**
4. Hospitals must certify that they are fulfilling all special conditions / statutory requirements that have been in force / imposed by any authority in lieu of special concessions such as but not limited to concessional allotment of land or customs duty exemption.

D. TWO BID PROCESS

1. Tenders are invited under a two bid process –

‘Technical Bid’ and ‘Commercial Bid’

Technical Bid Comprises of EMD and Annexure- I to IV.

Annexure –I: Application format to be filled up and submitted by the bidder.

Annexure –II: Certificate of Undertaking.

Annexure –III: List of attested photocopy documents to be submitted along with the tender document.

Annexure –IV: Manpower and space requirements.

Annexure – V: Acceptance proforma.



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Annexure – VI: MOA.

Annexure – VII: Performance Bank Guarantee proforma.

Annexure VIII: Commercial Bid of Tender comprises list of Rates quoted by bidder for various procedures / services.

Annexure V, VI&VII to be submitted by the private hospitals subjected to their consideration for empanelment.

2. LAST DATE FOR SUBMISSION OF TENDERS

The last date for submission of Tender shall be as per bidding schedule.

3. TENDER PROCESSING FEE

The interested Hospitals/institutions may apply as per the procedure laid down in the Tender Enquiry Form (non transferable), the soft copy of the tender can be downloaded and submitted along with DD for Rs. 1000/- (non refundable) in favour of Pay & Accounts Officer, CGHS, Delhi. The DD details need to be submitted in the tender documents. The tender enquiry form is available on the Ministry's website at: www.mohfw.nic.in/cghsnew/index.asp and www.indianmedicine.nic.in duly filled form should be submitted as per bidding schedule for which a demand drafts for Rs. 1000/- drawn in favour of Pay & Accounts officer CGHS, Delhi should be enclosed with the tender.

4. EARNEST MONEY DEPOSIT

Earnest Money Deposit of Rs. 50000/- (Rupees Fifty Thousands Only) (Refundable) in the form of **Demand Draft** from any Scheduled Bank, drawn in favour of "Pay & Accounts Officer", CGHS, Delhi, shall be submitted along with the tender Document. Every page of tender documents needs to be numbered serially and signed by the authorized signatory of the Hospital/Institute invariably other wise the tender will be rejected out rightly. The signatory must mention as to whether he is the sole proprietor or authorized agent. In case of partnerships / Limited Company, a copy of the partnership agreement / MOA (Memorandum of Association) duly attested by a notary should be furnished.

5. SUBMISSION OF TENDER

As far as possible, all information should be given in the tender. If a particular facility is not available, it should be entered as 'not available'. All facilities available should be offered for empanelment. Request for selective specialty empanelment will not be accepted.

6. PRE-BID MEETING:

A Pre-bid meeting open to all prospective bidders / their representatives will be held, the date and time of which will be indicated in the bidding schedule. The prospective bidders / their duly authorized representatives shall be free to ask for any additional information / clarification concerning work. These clarifications will



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also be common and applicable to all bidders. No individual correspondence shall be made thereafter with prospective bidders / their representatives.

7. CONDITIONAL BIDS:

Any conditional bid or a bid that is not in the prescribed proforma will not be accepted.

8. EARNEST MONEY REFUND

- i) In case the application is rejected on technical grounds like documents not authenticated, serially numbered etc, the application along with Earnest Money would be refunded in due course. However, the applicant would be eligible to apply afresh.
- ii) In case, the application after scrutiny of documents but before the inspection is rejected on grounds like lack of infrastructure as stipulated in the application, then, 20% of the Earnest Money would be deducted and the balance would be refunded in due course.
- iii) In case, the application is rejected after inspection then 50% of the Earnest Money would be forfeited and the balance would be refunded in due course.

9. OPENING OF TECHNICAL BID.

- The tender documents in sealed cover received on or before scheduled time and date will be opened as per the bidding schedule at the office of the Director CGHS, Nirman Bhavan, New Delhi or at designated place.
- Bidder or its authorized agent can be present at the time of opening of the Tender.
- Private hospitals which do not fulfill the technical criteria as specified in the tender shall become ineligible and the rates quoted by them in 'Commercial Bid' shall not be considered.
- The tender is liable to be ignored, if the information given on eligibility criteria is not complete.

10. PRELIMINARY EXAMINATION OF TECHNICAL BIDS

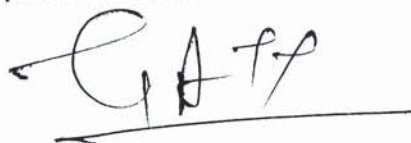
The bids will be examined to determine whether they are complete, whether Earnest Money Deposit has been furnished, and whether the bids are generally in order.

Incomplete Bids / Bids without full technical details and/or EMD, and/or incomplete Annexure –I, II, III and IV will be rejected.

Department may waive any minor formality or non-conformity in a bid that does not constitute a material deviation.

11. OPENING OF COMMERCIAL BID OF TENDERS

The Commercial Bids of only such bidders who are found to be eligible as per criteria given at point "B" and fulfilling the technical criteria would be opened on the given date and time by the expert committee.



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12. APPROVED RATES

The lowest rate (L1 - for each procedure) quoted in the commercial Bid by eligible bidders would be the CGHS CS (MA) package rate for that treatment / procedure in that particular city and these rates would be notified on the website of CGHS at www.mohfw.nic.in/cghs.htm, and for information on the website of Department of AYUSH. The CGHS rates so determined would be valid for period of 02 years from the date of signing the MOA. The CGHS notified rates will be a part of the MOA.

All eligible private hospitals whose commercial bids are opened shall be offered the CGHS Notified package rate for listed treatment / procedure in the concerned specialty.

N.B.: *In case the CGHS approved rates are more than what is being charged for same procedure from other (non-CGHS) patients or institutions, then the hospital has to offer the same reduced rates for the said procedure by allowing appropriate discount to CGHS. An authenticated list of rates being charged from other non-CGHS institutions should also be supplied.*

In case, it appears to CGHS that the rate(s) quoted for a particular procedure is not a viable rate, it may ask the bidder to provide justification for such low rates, in the form of the various components included in the rate. If CGHS comes to the conclusion that the rate is indeed unviable, it would reject the rate and consider the next lowest rate. The L-1 bidder would in such cases be disqualified for empanelment with CGHS.

In case, it appears to CGHS that the rate(s) quoted for a particular procedure or procedures is /are unrealistically high and that the bidders have formed a cartel, CGHS would reject such rate or rates. In such case(s) the last rates available would be offered and such bidders would be disqualified for empanelment with CGHS.

13. ACCEPTANCE OF RATES

All the eligible hospitals whose commercial bids have been opened shall have to furnish to Director, CGHS within 10 days of the notification, the acceptance of the approved rates made available on the web site and terms of agreement, in writing. No individual communication would be sent to any hospital. If the letter of acceptance is not received within the stipulated period then such hospitals would be excluded from the list of hospitals under consideration for empanelment.

14. OFFER OF EMPANELMENT

1. All Technically eligible private hospitals would be inspected by a team of experts to verify that the Hospital has the necessary infrastructure and manpower mentioned in the tender application and compliance with statutory requirement for providing required treatment.
2. The summary of the inspection report shall be uploaded on the web site of CGHS/ or by any other agency authorized by CGHS.



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3. In case, the inspection report points out deficiencies and does not recommend empanelment, the deficiencies shall be communicated to the tenderer and fifty percent of the earnest money deposit shall be forfeited.
4. In case, a private hospital is recommended for empanelment by the inspection committee / authorized agency, it shall be informed accordingly and asked to sign a Memorandum of Agreement along with performance bank guarantee.

15. MEMORANDUM OF AGREEMENT

The Hospitals which are selected for empanelment will have to enter into an agreement with CGHS for providing services at rates notified by CGHS as per format provided at annexure VIII. This **MOA has to be executed on Rs.100/- Non-Judicial Stamp paper.** MOA should be read as part of bid document.

16. VALIDITY OF CGHS / CS (M.A.) Rules RATES

The rates shall be valid for two years and such validity is extendable for further duration with mutual agreement.

The empanelled institutions shall not charge more than CGHS rates if the rates are reduced in the mean time, then reduced rates will be reimbursable.

17. PERFORMANCE BANK GUARANTEE

Hospitals that are recommended for empanelment after the assessment shall also have to furnish a performance Bank Guarantee for Rs. 2 lakhs valid for a period of thirty months to ensure efficient service and to safeguard against any default:

In case of hospitals already empanelled under CGHS, they shall submit a new Performance Bank Guarantee. The old performance guarantee will be discharged after its validity is over.

18. BILLING TO BE IN ELECTRONIC FORMAT


All Billing is to be done in electronic format and medical records need to be submitted in digital format to the Bill Clearing agency (BCA) for necessary action. In addition to this the physical record will also have to be submitted to the BCA. This is required for switching over to on-line submission of bills/claims. Hospitals that do not have the capacity or ability to comply with this condition will not be empanelled.

19. FEE FOR PROCESSING OF BILLS/CLAIMS

Director, CGHS would charge a processing fee and service tax thereon for electronic processing of claims/bills. The details are given in the copy of MOA at Annexure VI.

20. PAYMENT OF CLAIMS WITHIN AN ASSURED PERIOD

CGHS shall be appointing a Bill Clearing Agency (BCA), for processing of Data/ Bills of all CGHS beneficiaries (both serving and pensioner) attending these Hospitals and for making payment of the admissible amount to the claimant hospital on behalf


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of the CGHS within a period of ten days from the date of submission of the hard copy of the bill/claim and other supporting documents. Details are given in the MOA annexed.

21. CORRUPT AND FRAUDULENT PRACTICES

“Corrupt practices” means the offering, giving, receiving or soliciting of anything of value to influence the action of the public official for furtherance of their business interest.

“Fraudulent practices” means a misrepresentation of facts in order to influence Tender process or a execution of a contract to the detriment of CGHS, and includes collusive practice among bidding Hospitals / Authorized representative/service providers (prior to or after bid submission) designed to establish bid prices at artificial non-competitive levels and to deprive CGHS of the benefits of the free and open competition;

CGHS after consulting Department of AYUSH will reject a proposal for empanelment if it considers that the hospital recommended for empanelment has engaged in corrupt / fraudulent practices.

CGHS in consultation with Department of AYUSH will declare bidder ineligible, either indefinitely or for a stated period of time, to be awarded a contract if it at any time determines that the bidding hospital has engaged in corrupt and fraudulent practices in competing for, or in executing, a contract.

22. INTERPRETATION OF THE CLAUSES IN THE BID DOCUMENT

In case of any ambiguity in the interpretation of any of the clauses in Bid Document, interpretation of Director, CGHS after consultation with department of AYUSH of the clauses shall be final and binding on all parties.

23. RIGHT TO ACCEPT ANY BID AND TO REJECT ANY OR ALL BIDS

Department reserves the right to accept or reject any bid and to annul the bidding process and to reject all the bids at any time without thereby incurring any liability to the affected hospital/ authorized representative/ service provider or any obligation to inform the affected hospital / authorized representative/ service provider of the grounds for his action.

24. CERTIFICATE OF UNDERTAKING AT ANNEXURE II

Every tender document must have a certificate of undertaking signed by the applicant or its authorized agent.

25. LIST OF DOCUMENTS AT ANNEXURE III

Every Tender must be accompanied by documents as listed at Annexure III.



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26. MONITORING AND MEDICAL AUDIT

CGHS reserves the right to inspect the hospitals at any time to ascertain their compliance with the requirements of CGHS / mandatory/statutory provisions.

Bills of hospitals shall be reviewed every quarterly for irregularities including declaration of planned procedures / admissions as 'emergencies', unjustified investigations and prolonged stay, etc., and if found involved in any wrong doings, the concerned hospitals would be removed from panel and black listed for future empanelment. Performance Bank guarantee shall also be forfeited.

27. EXIT FROM THE PANEL

The Rates fixed by the CGHS / under CS (MA) shall continue to hold good unless revised by CGHS. In case the notified rates are not acceptable to the empanelled Hospitals, or for any other reason, the private Hospitals no longer wishes to continue on the list of empanelled Hospitals, it can apply for exclusion from the panel by giving three months notice and by depositing an exit fee of Rs Ten thousand.



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