



**भारत संचार निगम लिमिटेड**  
( भारत सरकार का उपक्रम )  
**BHARAT SANCHAR NIGAM LIMITED**  
(A Govt. of India Enterprise)

## Notice Inviting Budgetary Quote

No. 25-4/2021-BSNL(WL)/Admn dated 16.11.2021

**NAME OF WORK: SELECTION OF HEALTH INSURER FOR PROVIDING HEALTH INSURANCE POLICY TO BSNL EMPLOYEES.**

**Last date of Submission of Budgetary Quote (By post/By hand)**

**: On or Before 12:00 hrs on 08.12.2021**

(Terms of Reference)

**NAME OF WORK : SELECTION OF HEALTH INSURER FOR PROVIDING HEALTH INSURANCE POLICY TO BSNL EMPLOYEES.**

**1. INTRODUCTION :**

Bharat Sanchar Nigam Limited (BSNL) is a government owned telecommunication service provider with headquarter in New Delhi. It is a fully Government of India owned company under Department of Telecommunications, Ministry of Communications, Government of India. It was incorporated on 15<sup>th</sup> September 2000 by the Government of India. It provides all kind of telecommunication services viz mobile, voice and internet services through its nationwide telecommunication network across India except Delhi & Mumbai. It is the largest wire line telecommunication network service provider in India with more than 50% market share and fourth largest wireless telecommunication operator.

BSNL is divided into a number of administrative/field units, variously known as: telecom Circles, metro districts, core network transmission and specialized units such as ITPC, Quality assurance and BBNW throughout the country. It has 24 telecom circles, two metro districts, 5 core-network transmission Circles, 1 ITPC, QA and BBNW, one apex Training Centre at ALTTC Ghaziabad with 6 Zonal Training Centre telecom units.

**2. BACKDROP OF THE CASE :**

**Medical Policy of BSNL:** After formation of BSNL, BSNLMRS (BSNL Employees Medical Reimbursement Scheme) has been introduced for employees w.e.f. 24.02.2003. The scheme covers both Indoor and Outdoor medical treatment taken by the employees. All serving and retired employees of BSNL are eligible for this scheme. However, other options such as CGHS etc are also available for the employees, if they opt for it. Now recently BSNL has taken many reforms including Voluntary Retirement Scheme. The company has successfully implemented the VRS with budgetary support of the Government. Following this VRS, company is now focussing on its core functions by outsourcing many activities and at the same time without compromising with any welfare measures and amenities conducive to the good health and morale of our employees. Health insurance policy is one of the step in this direction.

The present policy is applicable only for all the regular employees of BSNL and all the employees working on deputation / deployment basis in BSNL (hereinafter mentioned as "beneficiaries").

- (i) **Age Group Profile of BSNL employees :** Currently, BSNL has approx. 63,000 employees on its roll which includes both Executives and Non-Executives.

The age group profile of employees working in BSNL are as under:

**Age Group Profile of Working Employees ( As on October -2021)**

	22-25	25-30	30-35	35-40	40-45	45-50	50-55	55-60	Grand Total
Group A				1	39	546	1275	450	2320
Group B	3	1321	2453	6926	7574	5448	3080	705	27525
No. of Executives	3	1321	2453	6927	7613	5994	4355	1155	29845
Group C	7	1171	2687	1859	2206	3669	5035	6143	22943
Group D	9	64	180	564	1132	2388	3612	2063	10040
I/W			1	4	21	33	90	55	211
No. of Non-Executives	16	1235	2868	2427	3359	6090	8737	8261	33194
Grand Total	19	2556	5321	9354	10972	12084	13092	9416	63039

**Working Employees in E5 and above scale out of 63039 ( As on October -2021)**

Number of employees working in E5 and above scale of pay	<b>3040</b>
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**(ii) Need for a separate Health Insurance Policy :**

BSNL works on the sound industrial relation principles and many initiatives are taken based on the feedback from the trade Unions and Associations and in consultation with them. This helps in building trust and commitment among the workforce and the Management. Management in consultation with its Unions & Associations has felt the need to have a Group Health Insurance Policy for its employees. In this endeavour, BSNL wants its employees to be secured with some of health insurance also to protect themselves and their families.

Accordingly, BSNL Management has decided to plan group health insurance policy for BSNL employees on PAN India basis from any of the reputed Govt Insurance Companies. Premium of the policy shall be borne by the "beneficiaries" which will be deducted from their salaries. BSNL will only facilitate a common platform for the "beneficiaries" for payment of premium i.e. BSNL will deduct the premium amount from the salary of "beneficiaries" and deposit the same with Insurance Company.

**3. Terms and Conditions & Parameters of the Health Insurance Policy**

**(i) Terms and Conditions from BSNL point of view :**

- a. BSNL Management will only act as facilitator on behalf of "beneficiaries" for the Health Insurance Policy.

- b. The policy is on PAN India basis which means it is applicable on All India Basis and serve all the employees working in BSNL in any State/UT across India.
- c. The Health Insurance policy shall be independent from BSNLMRS and shall have no linkage of any kind with it.
- d. The policy shall be optional for the employees.
- e. The policy shall be applicable for following category of employees who are working in BSNL :
  - (i) All the regular employees of BSNL and
  - (ii) All the employees working on deputation/ deployment basis in BSNL.
- f. The health insurance policy will be offered in following two categories :
  - (i) Rs 5 Lakh health insurance cover.
  - (ii) Rs 10 Lakh health insurance cover.
- g. Rs 5 Lakh health insurance cover shall be applicable for all the employees including employees having scale of pay E5 & above. Three family options shall be available in this category. Top up value of Rs 5 Lakh shall be available in this category which shall be optional.
- h. Rs 10 Lakh health insurance cover shall be available only for the employees having scale of pay E5 & above. Six family options shall be available in this category i.e. three each in Rs 5 Lakh & Rs 10 lakh cover respectively. Top up value of Rs 10 Lakh shall be available in this category which shall be optional.
- i. The validity of the policy shall be one year from the date of effect. The same shall be renewable on expiry of one year period as per the terms and conditions and premium amount mutually decided by the BSNL management and the Insurance Company as per the extant guidelines of IRDA.
- j. A Memorandum of Understanding (MoU) will be required to be signed with the selected Insurer Company which in addition to general terms & conditions will mention all the policy terms and conditions.
- k. After signing of MoU, the Insurance Company shall prepare and circulate a User Guide/ Manual /FAQ consisting of general guidelines/various forms etc relating to policy for the use of "beneficiaries" so that they may get acquainted with the process of admission in hospital/claim etc. without any hurdles/complications.
- l. After signing of MoU with the selected Insurance Company, BSNL will call for option from the employees and a list of such employees who opt for the policy shall be informed to the Insurance Company.
- m. BSNL will deduct the premium amount from the salary of "beneficiaries" and deposit the same with Insurance Company.
- n. The Insurance Company will issue policy documents, Identity and/ or Medical Card, other documents related with the policy directly to the employees who subscribed for the policy.
- o. The claim will be raised and settled by individual employee on its own. However, any grievance of employees in this respect will also be looked into by BSNL through nodal officer to be appointed by the Insurance Company.
- p. The Insurance Company will appoint a nodal officer stationed at New Delhi who will liaison with nodal officer of BSNL Corporate Office appointed specially for the purpose to look after the grievance of the employees, if any, in respect of the policy, its implementation and claim settlement.
- q. The Insurance Company, in order to facilitate the operationalization and grievances of the employees and day to day working e.g. addition/deletion of name etc., will set up a team at the insurance company office which will exclusively cater to BSNL policy holders as per following :

Team HQ	Cluster of State's/ UT's to be dealt by team
Guwahati	Assam & All the states of North East
New Delhi	Delhi, Haryana, Punjab, J&K, Himachal Pradesh
Lucknow	Uttarakhand & UP
Ahmedabad	Rajasthan, Gujarat, Chhattisgarh & Madhya Pradesh
Patna	Bihar, Jharkhand, Odisha, A&N & West Bengal
Mumbai	Maharashtra, Telengana & Andhra Pradesh
Bangaluru	Karnataka, Tamil Nadu & Kerala

The said team is in addition to the TPA (Third Party Administration) who generally look after the claim settlements. The name, Designation, official address and mobile number of the Team Head shall be provided by the selected insurance company before implementation of the policy.

- r. BSNL will have no liability in respect of any default of individual employees in whatsoever manner related to insurance policy. BSNL will have no liability in respect of any data given in the application form by the individual employee. The Insurance Company will satisfy itself about the details submitted by the individual employee. BSNL will only deduct the premium amount from the salary of "beneficiaries", if they choose the same. BSNL will not force the employees to opt for the policy or continue it for longer period.

(ii) **Parameters of the policy from insurer point of view :**

A brief parameters of the policy showing benefits given to policy holder is attached as Annexure "A" (For Rs 5 lakh health insurance policy) & as Annexure "B" (For Rs 10 lakh health insurance policy), which is termed as "Base Policy Document".

**4. BUDGETARY QUOTE:**

- (i) The request for budgetary quote is sent to HQs of the four Govt. Insurance Companies. A copy of the same is also marked to their Regional / Divisional / Branch / Local office, as the case may be, of Insurance Company located at Delhi/New Delhi. The request for budgetary quote will be sent by post as well as through email. **However, it may be noted that only one quotation needs to be submitted from one Insurance Company to the BSNL.**
- (ii) BSNL desires from the Govt Insurance companies to offer their budgetary quote on the premium amount having benefits shown in Annexure "A" (Rs 5 Lakh cover) & Annexure "B" (Rs 10 Lakh cover) in respect of "beneficiaries". The Insurance Company shall also indicate GST and other tax liability on the premium amount separately.
- (iii) The benefits shown in the Annexure "A" are illustrative but are minimum requirements and the Insurance Company may, if they desire, also mention any additional benefit including creation of any buffer amount for the policy holders, in the

said list without any extra liability on the "beneficiaries". Insurance Company may add any extra parameter in the said list without any extra liability. The addition may be clearly indicated in the said table. Insurance Company may also enhance the limits in any of the parameters in the said list without any extra liability. The enhancement may be clearly indicated in the said table.

- (iv) The Insurance Company will submit their quote along with other terms and conditions, if any, for providing "beneficiaries" with Rs 5 lakh insurance health cover and Rs 10 lakh insurance health cover separately so that "beneficiaries" may opt according to their requirement. It is categorically stated that Rs 5 lakh insurance health cover is meant for all the employees irrespective of scale of pay. Whereas employees having scale of pay E5 and above shall be given option also for Rs 10 lakh insurance health cover.
- (v) The insurance company has to submit separate quote for Rs 5 Lakh Health Insurance Cover (Annexure "A") and Rs 10 Lakh Health Insurance Cover in Annexure "B".

#### **5. EVALUATION:**

- (i) It may be noted that only one company shall be considered for providing both Rs 5 lakh and Rs 10 lakh insurance cover.
- (ii) BSNL will call the Insurance Company offering lowest quote for negotiations, if required. The negotiation will be done by a Committee formed for the purpose of implementation of the Health Insurance Policy for BSNL Employees in BSNL and authorized representatives of Union's/ Association's.
- (iii) The company offering lowest quote for Rs 5 lakh insurance cover shall be called for negotiations for both Rs 5 lakh Insurance cover and Rs 10 lakh insurance cover for BSNL employees.
- (iv) In case, the lowest quote in respect of Rs 5 lakh offered by two or more companies are same, the company offering lowest quote for Rs 10 lakh insurance cover shall be called for negotiations.
- (v) If the quotes offered by two or more companies for Rs 5 lakh and Rs 10 lakh insurance cover are the same, all such companies shall be asked to submit a lower quote within a specified period of time considering the earlier quote as base quote.
- (vi) The negotiation, if necessitates, will be carried with the lowest quotationer only. However, in exceptional cases, where direct comparison will not be possible to be made on account of any additional parameter by any insurance company, the negotiation will be done first with lowest quotationer considering other terms and conditions same, to add the same parameter without increasing the premium amount. In case, the lowest quotationer does not agree for the same, the negotiation will be done with second lowest quotationer to make their offer at par with lowest quotationer in all respect, considering other terms and conditions same, by reducing the premium amount.

**NOTE :** The representative authorized by the Government Health Insurance Company shall only be permitted to negotiate the financial offer and other terms of the policy.

**6. SUBMISSION OF BUDGETARY QUOTE:**

- (i) The budgetary quote (proposal) must be submitted in the format attached herewith duly signed on each page by the authorised signatory of the company
- (ii) The budgetary quote (proposal) may be submitted (By post/ By hand) in a sealed envelope at the following address -

Dy. General Manager (Admin)  
BSNL Corporate Office  
Ground Floor, Bharat Sanchar Bhawan,  
Janpath, New Delhi - 110001

- (iii) The name of the work must be superscribed on the envelop.
- (iv) Budgetary quote must reach this office on or before 12:00 hrs. of 08.12.2021 (By post / By hand).
- (v) Budgetary quote received after 12:00 hrs. of 08.12.2021 will not be considered.

Letter of Proposal

(On Applicant's letter head)

(Date and Reference)

To,

Dy. General Manager (Admn)  
BSNL Corporate Office,  
Ground Floor, Bharat Sanchar Bhawan,  
Janpath, New Delhi – 110001.

**NAME OF WORK : SELECTION OF HEALTH INSURER FOR PROVIDING HEALTH INSURANCE POLICY TO BSNL EMLOYEES.**

Ref.:- Your letter No. 25-4/2021-BSNL(WL)/Admn dated 16.11.2021.

Dear Sir,

1. With reference to your Budgetary Quote request vide letter under reference, I/We, having examined all relevant documents and understood their contents, hereby submit our quote. The Budgetary Quote is unconditional and unqualified.
2. All information provided in the Budgetary Quote and in the Appendices is true and correct and all documents accompanying such Proposal are true copies of their respective originals.
3. This statement is made for the express purpose of selection as the Insurance Company for the aforesaid subject.
4. I/We shall make available to the BSNL any additional information it may deem necessary or require for supplementing or authenticating the Budgetary Quote.
5. I/We acknowledge the right of the BSNL to reject our Budgetary Quote without assigning any reason or otherwise and hereby waive our right to challenge the same on any account whatsoever.
6. I/We declare that:
  - (a) I/We have examined and have no reservations to the Quotation Documents,
  - (b) I/We have not directly or indirectly or through an agent engaged or indulged in any corrupt practice, fraudulent practice, coercive practice, undesirable practice or restrictive practice in respect of any Budgetary quote/ Tender/ Quotation etc issued by or any agreement entered into with the BSNL or any other public sector enterprise or any Government, Central or State; and
  - (c) I/We hereby certify that we have taken steps to ensure that no person acting for us or on our behalf will engage in any corrupt practice, fraudulent practice, coercive practice, undesirable practice or restrictive practice.
7. I/We understand that you may cancel the selection process at any time and that you are neither bound to accept any Budgetary Quote that you may receive nor to select the Insurance Company, without incurring any liability to the Insurance Companies.
8. I/We hereby irrevocably waive off right which we may have at any stage at law or howsoever otherwise arising to challenge or question any decision taken by the BSNL and/ or the Government of India in connection with the selection of the Insurance Company or in connection with the Selection process itself in respect of the above mentioned Subject Work.



9. I/We agree and understand that the Budgetary Quote is subject to the provisions of the Quotation document. In no case, shall I/We have any claim or right to whatsoever nature if the Subject work is not awarded to me/us or our Budgetary Quote is not opened.
10. I/We agree to keep this offer valid for **90 (Ninety) days** from the quotation opening date specified in the quotation document.
11. I/We have studied the quotation document and all other documents carefully. We understand that except to the extent as expressly set forth in the bid document, we shall have no claim, right or title arising out of any documents or information provided to us by BSNL or in respect of any matter arising out of or concerning or relating to the selection of Insurance Company.
12. I/We agree and undertake to abide by all the terms and conditions of the quotation Document. In witness thereof, I/We submit this Budgetary Quote under and in the accordance with the terms of the quotation Document.

Yours faithfully,

(Signature of the Authorised Signatory)

(Name and designation of the Authorised Signatory)

(Name and seal of the Applicant)

Encl: 1.Duly signed Terms of Reference.  
2.Annexure "A"& "B".

Note: - To be submitted in original duly signed with blue ink. Xeroxed/scanned will not be accepted and Budgetary Quote shall be summarily rejected.

**(For Rs 5 Lakh Health Insurance Cover)**

We, the undersigned, offer to provide the Budgetary Quote in accordance with your Terms of Reference. Our Budgetary quote for the subject work would be as under:

Proposed Policy			
Policy Period	1 Year		
Per Family Sum Insured	Rs. 5,00,000 (Rs Five Lakh only)	Meant for all the regular employees of BSNL and all the employees working on deputation / deployment basis in BSNL irrespective of scale of pay	
Type of proposal	Fresh		
Policy Coverage for family	Self, Spouse, Children and parents as detailed in three options given below		
No. of Employees	<b>There are presently approx 63,000 working employees in BSNL. However, the exact number of employees opting for the policy in the different category will be known only after finalization of option.</b>		
Addition of Existing Employee	Addition allowed within 1 month from the start date of the policy		
Addition of New Employee	Addition allowed within policy period on charge of pro rata premium		
Addition of New Born baby and Newly married spouse	Addition allowed within policy period		
Family Floater	Yes		
Family Description	As per below details.		
Benefits Covered			
	Option 1	Option 2	Option 3
	Without Parents	With one Parent*	With two Parents#
Family Description	Self+ Spouse + 3 children upto age of 25 Years^	Self+ Spouse + 3 children upto age of 25 Years^ + one parent upto age of 85 Years^	Self+ Spouse + 3 children upto age of 25 Years^ + Two parents upto age of 85 Years^
Standard Hospitalisation - Minimum 24 Hours	Yes	Yes	Yes
TPA services	Yes	Yes	Yes
Pre-existing Disease Covered from day one	Yes- No waiting period for any disease. Covered from day one	Yes- No waiting period for any disease. Covered from day one	Yes- No waiting period for any disease. Covered from day one
Waiver on 1st ,2nd & 4th year exclusion	Waived for All	Waived for All	Waived for All
Waiver on 1st 90 days exclusion	Waived for All	Waived for All	Waived for All
Waiver on 1st 30 days exclusion	Waived for All	Waived for All	Waived for All
No Waiting Period	applicable	applicable	applicable
Pre Hospitalisation Cover	30 days	30 days	30 days
Post hospitalisation Cover	60 days	60 days	60 days
New Born Baby Cover (Day 1) with in family SI	Covered from Day one	Covered from Day one	Covered from Day one
9 Months waiting period waived	Not applicable	Not applicable	Not applicable

Maternity benefits - for first two children	Not Covered	Not Covered	Not Covered
Pre and Post Natal Expenses	Not Covered	Not Covered	Not Covered
Room Rent Capping - proportionate capping applicable	Room Rent (Normal) - 2% of SI	Room Rent (Normal) - 2% of SI	Room Rent (Normal) - 2% of SI
ICU	Actual	Actual	Actual
Disease wise Capping	Not applicable	Not applicable	Not applicable
Internal congenital Disease	Covered	Covered	Covered
Cataract Limit	Rs. 30,000/eye	Rs. 30,000/eye	Rs. 30,000/eye
AYUSH - Expenses incurred for Ayurvedic / Homeopathic / Unani Treatment	Max Rs. 60,000	Max Rs. 60,000	Max Rs. 60,000
Domiciliary Treatment	Covered only if either hospital does not have beds or patient is not in condition to be moved to hospital.	Covered only if either hospital does not have beds or patient is not in condition to be moved to hospital.	Covered only if either hospital does not have beds or patient is not in condition to be moved to hospital.
Dental treatment	Covered in case of injury due to accident	Covered in case of injury due to accident	Covered in case of injury due to accident
Covid-19 Hospitalization Treatment	Covered if minimum 24 hours hospitalisation	Covered if minimum 24 hours hospitalisation	Covered if minimum 24 hours hospitalisation
Shifting of hospital during treatment for better medical on the request of patient	Admissible	Admissible	Admissible
Mental illness	Max Rs. 50,000 on IPD basis	Max Rs. 50,000 on IPD basis	Max Rs. 50,000 on IPD basis
Reimbursement in case of Treatment in Non-Network Hospitals	Reimbursement allowed as per applicable rates only if treatment is taken in minimum 15 bedded hospital	Reimbursement allowed as per applicable rates only if treatment is taken in minimum 15 bedded hospital	Reimbursement allowed as per applicable rates only if treatment is taken in minimum 15 bedded hospital
Ambulance Services	Rs. 2,000 /- per incident	Rs. 2,000 /- per incident	Rs. 2,000 /- per incident
Investigation and evaluation	Any diagnostic expenses which are related or incidental to the current diagnosis and treatment are covered	Any diagnostic expenses which are related or incidental to the current diagnosis and treatment are covered	Any diagnostic expenses which are related or incidental to the current diagnosis and treatment are covered
Top UP of Rs SLacs	Applicable	Applicable	Applicable
<b>Addition if any</b>			
<b>DISEASE-WISE SUBLIMITS LIST</b>	<b>METRO</b>	<b>NON-METRO</b>	
Appendix	No Limit	No Limit	
Eye related	No Limit	No Limit	
Gall Bladder	No Limit	No Limit	
Hernia	No Limit	No Limit	
Hydrocele	No Limit	No Limit	
Hysterectomy	No Limit	No Limit	

Piles	No Limit	No Limit	
Urinary Stone (incl DJ stent removal for same stone)	No Limit	No Limit	
Joint Replacement including Vertebral joints (Per knee)	No Limit	No Limit	
Coverage		Remarks	
Timelines for intimation of claims		Preliminary notice of claim should be given to the Company/TPA within 7 days from the date of hospitalization in respect of reimbursement claims. Final claim documents should be submitted not later than 30 days of discharge from the hospital.	
Any additions/deletion during Policy period		Premium to be charged on Prorata scale for addition/ deletion endorsement . Please note no deletion of premium in case of claimed lives.	
Hospitalization expenses (excluding cost of organ) incurred on the donor during the course of organ transplant to the insured person. The Company's liability towards expenses incurred on the donor and the insured recipient shall not exceed the sum insured of the insured person receiving the organ.			
Reasonable and Customary Charges		Waived off	
GIPSA rates		Applicable	
Proportionate capping applicable – Surgeon, Anesthetist, Medical Practitioner, Consultants, Specialists Fees, Anesthesia, Blood, Oxygen, Operation Theatre Charges, Surgical Appliances, Medicines & Drugs, Diagnostic Materials and X-ray, Dialysis, Chemotherapy, Radiotherapy, Cost of Pacemaker, Artificial Limbs & Cost of Organs and similar expenses.		In case of admission to a room/ICU/CCU at rates exceeding the limits as mentioned above, the reimbursement / payment of all other expenses incurred at the Hospital, with the exception of cost of medicines, shall be affected in the same proportion as the admissible rate per day bears to the actual rate per day of room rent/ ICU/ ICCU charges.	
Ayush Treatment		Upto Rs 60,000/- per family. The liability of the company in case of Ayurvedic/ Homoeopathic/ Unani treatment will be maximum Rs 60,000/- provided the treatment is taken in a government hospital or in any institute recognized by government or accredited by Quality Council of India or National Accreditation Board on Health, excluding centres for Spas, massage and health rejuvenation procedures.	
Impairment of Person's intellectual faculties		100% of SI	
Artificial life maintenance		100% of SI	
Treatment of mental illness, stress or psychological disorders and neurodegenerative disorders :		Only in IPD cases upto Rs 50,000/-	
Exclusion : Any kind of Psychological counselling, cognitive/family/group/behaviour/ palliative therapy or other kinds of psychotherapy for which hospitalisation is not necessary shall not be covered.			
Puberty and Menopause related disorders		30% of SI	
Age related Macular Degeneration (ARMD)		30% of SI	
Behavioural and Neuro Development Disorders		30% of SI	
Genetic diseases or disorders		30% of SI	

<b>COVERAGE FOR MODERN TREATMENT OR PROCEDURES :</b>	<b>As per standard policy terms</b>
<b>Treatment or Procedure</b>	<b>Limit (Per Policy period)</b>
Uterine Artery Embolization and HIFU (High Intensity Focused Ultrasound)	50% of SI
Balloon Sinuplasty	50% of SI
Deep Brain Stimulation	50% of SI
Oral Chemotherapy	50% of SI
Immunotherapy – Monoclonal Antibody to be given as injection	50% of SI
Intravitreal injection	50% of SI
Robotic surgeries	50% of SI
Stereotactic radio surgeries	50% of SI
Bronchial Thermoplasty	50% of SI
Vaporisation of the prostate (Green laser treatment or holmium laser treatment)	50% of SI
IONM - (Intra Operative Neuro Monitoring)	50% of SI
Stem cell therapy : Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered	50% of SI
Refractive Error – Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptres	Covered- Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptres
Change of treatment from one system to another unless recommended by the consultant / hospital under whom the treatment is given	Covered
Service charges or any other charges levied by hospital, except registration/ admission charges	Service charges covered
Lasik Surgery	Lasik Surgery is covered if correction index is +/- 6.5 D- upto Rs 50% of SI only
Cyber Knife Surgery	50% co payment for Cyber Knife Surgery
Trauma Care	50% co payment for Trauma Care
Animal Bite	Covered only for IPD case
Day care treatment	Covered – as per day care treatment list
Eye care treatments	Covered except exclusion list
<b>EXCLUSIONS SUMMARY</b>	
Investigation and evaluation	Excluded as per standard policy terms
Rest cure, Rehabilitation and Respite Care	Excluded as per standard policy terms

Obesity/ Weight Control	Excluded as per standard policy terms
Change of Gender Treatments	Excluded as per standard policy terms
Cosmetic or Plastic Surgery	Excluded as per standard policy terms
Hazardous or Adventure Sports	Excluded as per standard policy terms
Breach of Law	Excluded as per standard policy terms
Excluded Providers	Excluded as per standard policy terms
Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences thereof	
Treatments received in health spas, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishment or where admission is arranged wholly or partly for domestic reasons	
Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of hospitalization claim or day care procedure.	
Unproven treatments	Excluded as per standard policy terms
Sterility and infertility	Expenses related to sterility and infertility – This includes : a. Any type of contraception, sterilization b. Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI c. Gestational Surrogacy d. Reversal of sterilization.
War (whether declared or not) and war like occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, revolutions, insurrections, mutiny, military or usurped power, seizure, capture, arrest, restraints and detainment of all kinds	
Nuclear, chemical or biological attack or weapons, contributed to, caused by, resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense.	
Circumcision unless required to treat injury or illness	
Vaccination and inoculation	
Cost of braces, equipment or external prosthetic devices, non-durable implants, eyeglasses, cost of spectacles and contact lenses, hearing aids including cochlear implants, durable medical equipment	
All types of Dental treatments except arising out of an accident	
Convalescence, general debility	
Bodily injury or sickness due to wilful or deliberate exposure to danger (except in an attempt to save human life), intentional self-inflicted injury, attempted suicide	
Treatment of any bodily injury sustained whilst or as a result of participating in any criminal act	
Naturopathy treatment	
Instrument used in treatment of Sleep Apnea Syndrome (CPAP) and continuous Peritoneal Ambulatory Dialysis (CPAD) and Oxygen Concentrator for Bronchial Asthmatic condition	
Stem cell implantation /surgery for other than those treatments mentioned under <b>Stem Cell Therapy above.</b>	

Treatment taken outside India
Any other charges levied by hospital, except registration/ admission charges/ service charges
Treatment such as Rotational Field Quantum Magnetic Resonance (RFQMR), External Counter Pulsation (ECP), Enhanced External Counter Pulsation (EECP), Hyperbaric Oxygen Therapy.
Treatment of any injury due to Suicidality shall not be covered.
OPD treatment is not covered under the policy.
Hospital cash is not covered.

<b>Premium Quote (In Rs) (Both in Words and figure)</b>			
	<b>without Parents</b>	<b>With one Parent</b>	<b>With two Parents</b>
Premium excluding tax per family			
GST @ 18%			
Any other cess or tax			
<b>Total Premium including tax per family</b>			
<b>Top Up Policy rates for SI of Rs 5 Lakh (GST to be mentioned separately)</b>			

\*One parent means either "Father" Or "Mother" Or "Father in law" Or "Mother in law".

#Two parents means either "Father & Mother" Or "Father in law & Mother in law". Cross selection of parents is not allowed e.g. while making a set of two parents Father in law & Mother is not allowed.

^The age of children and parents will be reckoned from the date of implementation of the policy.

**Note :**

- (1) In case of any discrepancy between words and figures, the former will prevail.
- (2) We understand clearly that you are not bound to accept any Budgetary Quote you receive. We also understand that incomplete or conditional offers would be summarily rejected.
- (3) Insurance Company may add any extra parameter in the above list without any extra liability. The addition may be clearly indicated in the above table.
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- (5) In this form, Insurance Company shall fill only their quote.

Yours faithfully,  
 Authorized Signatory  
 Name  
 Seal of the Company

**(For Rs 10 Lakh Health Insurance Cover)**

We, the undersigned, offer to provide the Budgetary Quote in accordance with your Terms of Reference. Our Budgetary quote for the subject work would be as under:

<b>Proposed Policy</b>			
Policy Period	1 Year		
Per Family Sum Insured	Rs. 10,00,000 (Rs Ten Lakh only)	Meant for all the regular employees of BSNL and all the employees working on deputation / deployment basis in BSNL, having scale of pay E5 & above	
Type of proposal	Fresh		
Policy Coverage for family	Self, Spouse, Children and parents as detailed in three options given below		
No. of Employees	<b>There are presently approx 3000 employees working in E5 and above scale of pay. However, the exact number of employees opting for the policy in the different category will be known only after finalization of option.</b>		
Addition of Existing Employee	Addition allowed within 1 month from the start date of the policy		
Addition of New Employee	Addition allowed within policy period on charge of pro rata premium		
Addition of New Born baby and Newly married spouse	Addition allowed within policy period		
Family Floater	Yes		
Family Description	As per below details		
<b>Benefits Covered</b>			
	<b>Option 1</b>	<b>Option 2</b>	<b>Option 3</b>
	<b>Without Parents</b>	<b>With one Parent*</b>	<b>With two Parents#</b>
Family Description	Self+ Spouse + 3 children upto age of 25 Years^	Self+ Spouse + 3 children upto age of 25 Years^ + one parent upto age of 85 Years^	Self+ Spouse + 3 children upto age of 25 Years^ + any set of parents upto age of 85 Years^
Standard Hospitalisation - Minimum 24 Hours	Yes	Yes	Yes
TPA services	Yes	Yes	Yes
Pre-existing Disease Covered from day one	Yes- No waiting period for any disease. Covered from day one	Yes- No waiting period for any disease. Covered from day one	Yes- No waiting period for any disease. Covered from day one
Waiver on 1st ,2nd & 4th year exclusion	Waived for All	Waived for All	Waived for All
Waiver on 1st 90 days exclusion	Waived for All	Waived for All	Waived for All
Waiver on 1st 30 days exclusion	Waived for All	Waived for All	Waived for All
No Waiting Period	applicable	applicable	applicable
Pre Hospitalisation Cover	30 days	30 days	30 days
Post hospitalisation Cover	60 days	60 days	60 days
New Born Baby Cover (Day 1) with in family SI	Covered from Day one	Covered from Day one	Covered from Day one
9 Months waiting period waived	Not applicable	Not applicable	Not applicable
Maternity benefits - for first two children	Not Covered	Not Covered	Not Covered



Pre and Post Natal Expenses	Not Covered	Not Covered	Not Covered
Room Rent Capping - proportionate capping applicable	Room Rent (Normal) - 2% of SI	Room Rent (Normal) - 2% of SI	Room Rent (Normal) - 2% of SI
ICU	Actual	Actual	Actual
Disease wise Capping	Not applicable	Not applicable	Not applicable
Internal congenital Disease	Covered	Covered	Covered
Cataract Limit	Rs. 60,000/eye	Rs. 60,000/eye	Rs. 60,000/eye
AYUSH - Expenses incurred for Ayurvedic / Homeopathic / Unani Treatment	Max Rs. 60,000	Max Rs. 60,000	Max Rs. 60,000
Domiciliary Treatment	Covered only if either hospital does not have beds or patient is not in condition to be moved to hospital.	Covered only if either hospital does not have beds or patient is not in condition to be moved to hospital.	Covered only if either hospital does not have beds or patient is not in condition to be moved to hospital.
Dental treatment	Covered in case of injury due to accident	Covered in case of injury due to accident	Covered in case of injury due to accident
Covid-19 Hospitalization Treatment	Covered if minimum 24 hours hospitalisation	Covered if minimum 24 hours hospitalisation	Covered if minimum 24 hours hospitalisation
Shifting of hospital during treatment for better medical on the request of patient	Admissible	Admissible	Admissible
Mental Illness	Max Rs. 50,000 on IPD basis	Max Rs. 50,000 on IPD basis	Max Rs. 50,000 on IPD basis
Reimbursement in case of Treatment in Non-Network Hospitals	Reimbursement allowed as per applicable rates only if treatment is taken in minimum 15 bedded hospital	Reimbursement allowed as per applicable rates only if treatment is taken in minimum 15 bedded hospital	Reimbursement allowed as per applicable rates only if treatment is taken in minimum 15 bedded hospital
Ambulance Services	Rs. 2,000 /- per incident	Rs. 2,000 /- per incident	Rs. 2,000 /- per incident
Investigation and evaluation	Any diagnostic expenses which are related or incidental to the current diagnosis and treatment are covered	Any diagnostic expenses which are related or incidental to the current diagnosis and treatment are covered	Any diagnostic expenses which are related or incidental to the current diagnosis and treatment are covered
Top UP of Rs 10 Lacs	Applicable	Applicable	Applicable
<b>Addition, if any</b>			
<b>DISEASE-WISE SUBLIMITS LIST</b>	<b>METRO</b>	<b>NON-METRO</b>	
Appendix	No limit	No limit	
Eye related	No limit	No limit	
Gall Bladder	No limit	No limit	
Hernia	No limit	No limit	
Hydrocele	No limit	No limit	
Hysterectomy	No limit	No limit	

Piles	No limit	No limit	
Urinary Stone (incl DI stent removal for same stone)	No limit	No limit	
Joint Replacement including Vertebral joints (Per knee)	No limit	No limit	
Coverage		Remarks	
Timelines for intimation of claims		Preliminary notice of claim should be given to the Company/TPA within 7 days from the date of hospitalization in respect of reimbursement claims. Final claim documents should be submitted not later than 30 days of discharge from the hospital.	
Any additions/deletion during Policy period		Premium to be charged on Prorata scale for addition/ deletion endorsement . Please note no deletion of premium in case of claimed lives.	
Hospitalization expenses (excluding cost of organ) incurred on the donor during the course of organ transplant to the insured person. The Company's liability towards expenses incurred on the donor and the insured recipient shall not exceed the sum insured of the insured person receiving the organ.			
Reasonable and Customary Charges		Waived off	
GIPSA rates		Applicable	
Proportionate capping applicable – Surgeon, Anesthetist, Medical Practitioner, Consultants, Specialists Fees, Anesthesia, Blood, Oxygen, Operation Theatre Charges, Surgical Appliances, Medicines & Drugs, Diagnostic Materials and X-ray, Dialysis, Chemotherapy, Radiotherapy, Cost of Pacemaker, Artificial Limbs & Cost of Organs and similar expenses.		In case of admission to a room/ICU/ICCU at rates exceeding the limits as mentioned above, the reimbursement / payment of all other expenses incurred at the Hospital, with the exception of cost of medicines, shall be affected in the same proportion as the admissible rate per day bears to the actual rate per day of room rent/ ICU/ ICCU charges.	
Ayush Treatment		Upto Rs 60,000/- per family. The liability of the company in case of Ayurvedic/ Homoeopathic/ Unani treatment will be maximum Rs 60,000/- provided the treatment is taken in a government hospital or in any institute recognized by government or accredited by Quality Council of India or National Accreditation Board on Health, excluding centres for Spas, massage and health rejuvenation procedures.	
Impairment of Person's intellectual faculties		100% of SI	
Artificial life maintenance		100% of SI	
Treatment of mental illness, stress or psychological disorders and neurodegenerative disorders		Only in IPD cases upto Rs 50,000/-	
Exclusion : Any kind of Psychological counselling, cognitive/family/group/behaviour/ palliative therapy or other kinds of psychotherapy for which hospitalisation is not necessary shall not be covered.			
Puberty and Menopause related disorders		30% of SI	
Age related Macular Degeneration (ARMD)		30% of SI	
Behavioural and Neuro Development Disorders		30% of SI	
Genetic diseases or disorders		30% of SI	

<b>COVERAGE FOR MODERN TREATMENT OR PROCEDURES :</b>	<b>As per standard policy terms</b>
<b>Treatment or Procedure</b>	<b>Limit (Per Policy period)</b>
Uterine Artery Embolization and HIFU (High Intensity Focused Ultrasound)	50% of SI
Balloon Sinuplasty	50% of SI
Deep Brain Stimulation	50% of SI
Oral Chemotherapy	50% of SI
Immunotherapy – Monoclonal Antibody to be given as injection	50% of SI
Intravitreal injection	50% of SI
Robotic surgeries	50% of SI
Stereotactic radio surgeries	50% of SI
Bronchial Thermoplasty	50% of SI
Vaporisation of the prostate (Green laser treatment or holmium laser treatment)	50% of SI
IONM - (Intra Operative Neuro Monitoring)	50% of SI
Stem cell therapy : Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered	50% of SI
Refractive Error – Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptres	Covered- Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptres
Change of treatment from one system to another unless recommended by the consultant / hospital under whom the treatment is given	Covered
Service charges or any other charges levied by hospital, except registration/ admission charges	Service charges covered
Lasik Surgery	Lasik Surgery is covered if correction index is +/- 6.5 D- upto Rs 50% of SI only
Cyber Knife Surgery	50% co payment for Cyber Knife Surgery
Trauma Care	50% co payment for Trauma Care
Animal Bite	Covered only for IPD case
Day care treatment	Covered – as per day care treatment list
Eye care treatments	Covered except exclusion list
<b>EXCLUSIONS SUMMARY</b>	
Investigation and evaluation	Excluded as per standard policy terms
Rest cure, Rehabilitation and Respite Care	Excluded as per standard policy terms

Obesity/ Weight Control	Excluded as per standard policy terms
Change of Gender Treatments	Excluded as per standard policy terms
Cosmetic or Plastic Surgery	Excluded as per standard policy terms
Hazardous or Adventure Sports	Excluded as per standard policy terms
Breach of Law	Excluded as per standard policy terms
Excluded Providers	Excluded as per standard policy terms
Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences thereof	
Treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishment or where admission is arranged wholly or partly for domestic reasons	
Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of hospitalization claim or day care procedure.	
Unproven treatments	Excluded as per standard policy terms
Sterility and infertility	Expenses related to sterility and infertility – This includes a. Any type of contraception, sterilization b. Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI c. Gestational Surrogacy d. Reversal of sterilization.
War (whether declared or not) and war like occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, revolutions, insurrections, mutiny, military or usurped power, seizure, capture, arrest, restraints and detainment of all kinds	
Nuclear, chemical or biological attack or weapons, contributed to, caused by, resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense.	
Circumcision unless required to treat injury or illness	
Vaccination and inoculation	
Cost of braces, equipment or external prosthetic devices, non-durable implants, eyeglasses, cost of spectacles and contact lenses, hearing aids including cochlear implants, durable medical equipment	
All types of Dental treatments except arising out of an accident	
Convalescence, general debility	
Bodily injury or sickness due to wilful or deliberate exposure to danger (except in an attempt to save human life), intentional self-inflicted injury, attempted suicide	
Treatment of any bodily injury sustained whilst or as a result of participating in any criminal act	
Naturopathy treatment	
Instrument used in treatment of Sleep Apnea Syndrome (CPAP) and continuous Peritoneal Ambulatory Dialysis (CPAD) and Oxygen Concentrator for Bronchial Asthmatic condition	
Stem cell implantation /surgery for other than those treatments mentioned under <b>Stem Cell Therapy above.</b>	

Treatment taken outside India
Any other charges levied by hospital, except registration/ admission charges/ service charges
Treatment such as Rotational Field Quantum Magnetic Resonance (RFQMR), External Counter Pulsation (ECP), Enhanced External Counter Pulsation (EECP), Hyperbaric Oxygen Therapy.
Treatment of any injury due to Suicidality shall not be covered.
OPD treatment is not covered under the policy.
Hospital cash is not covered.

<b>Premium Quote (In Rs) (Both in Words and figure)</b>			
	<b>without Parents</b>	<b>With one Parent</b>	<b>With two Parents</b>
Premium excluding tax per family			
GST @ 18%			
Any other cess or tax			
<b>Total Premium including tax per family</b>			
<b>Top Up policy rates for SI for Rs 10 Lakh (GST to be mentioned separately)</b>			

\*One parent means either "Father" Or "Mother" Or "Father in law" Or "Mother in law".

#Two parents means either "Father & Mother" Or "Father in law & Mother in law". Cross selection of parents is not allowed e.g. while making a set of two parents Father in law & Mother is not allowed.

^The age of children and parents will be reckoned from the date of implementation of the policy.

**Note :**

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