



कर्मचारी राज्य बीमा निगम
Employees' State Insurance Corporation
(Ministry of Labour & Employment, Government of India)



वरिष्ठ राज्य चिकित्सा आयुक्त कार्यालय (पूर्वी क्षेत्र)

पंचदीप भवन, क्षेत्रीय कार्यालय, 5/1, ग्रांट लेन, कोलकाता -700012 (प०ब०)
फोन नं० 033-22364451-55 (5 लाइन), फेक्स-033-22364432

Office of the Sr.State Medical Commissioner (E.Z.)

"Panchdeep Bhawan" Regional Office,
5/1 Grant Lane, Kolkata - 700 012 (W.B.).
Phone No.: 033-22364451-55 (5 lines), Fax: 033-22364432
Website: www.esicwestbengal.org / www.esic.nic.in ;
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No.41-U-13/12/1/SS/Tie up/SSMC/Kol/2017-18

Dated 22.09.2017

Sub: Notice inviting Expression of Interest (EOI) for Empanelment of Private/Reputed Hospitals/Diagnostic centres in State of West Bengal and Sikkim for Superspeciality services (Procedure and Diagnostic) for the beneficiaries of ESI Corporation

The Sr. State Medical Commissioner (Eastern Zone) hereinafter called SSMC, invites sealed Expression of Interest (EOI) from Government/Semi-Govt/CGHS approved/Private Hospitals/diagnostic centres of repute located in the State of West Bengal and Sikkim for Empanelment of centres for Super specialty and investigations for ESI beneficiary on cashless basis at up to date CGHS Rates (given at its website).

The applicants shall download tender documents which comprises the Application forms along with Terms and conditions (Annexure-I), Application Format for Empanelment (Annexure-II), Certificate of Undertaking (Annexure-III), List of Necessary Documents (Annexure-IV) and Procedure of Referral and Bill Processing through M/s UTI-ITSL (Annexure-V) from the website at www.esicwestbengal.org or www.esic.nic.in. EOIs in sealed envelope complete in all respects should reach the office of The Sr. State Medical Commissioner (E.Z.) as per schedule given below:

Availability of tender document in website or by hand in Office	Last Date & Time of submission of Tender document	Date & Time of Opening of Tender	Place of submission of Tender forms/ opening of tender forms
25.09.2017 09.45 Hrs	13.10.2017 13.00 Hrs	13.10.2017 15.00 Hrs.	Office of The SSMC (E.Z.), ESIC R.O. Panchdeep Bhawan, 5/1, Grant Lane, Kolkata- 700012 (W.B.)

If Bids opening date happens to be a holiday, it will be accepted & opened on next working day

Sr. State Medical Commissioner (EZ)

Enclosures: Annexure-I, II, III, IV and V.

TERMS AND CONDITIONS

(Please read all terms and conditions carefully before filling the application form and annexures thereto)

EoI Document Cost:

The cost of Tender document is non-refundable Rs. 1000/- (Rupees One thousand Only) which is payable in the form of a Demand Draft drawn on any nationalized/ Scheduled bank in favour of “ESIC fund Account No-1” payable at Kolkata, to be submitted along with Tender.

Document Acceptance:

Duly completed tender forms along with annexure and necessary documents may either be dropped in person in the tender box kept at The Office of the SSMC (E.Z.) or be sent by Registered/ Speed Post at the address mentioned below. The sealed envelope should be superscribed as “**Empanelment of Private/Reputed Hospitals/Diagnostic centres in State of West Bengal and Sikkim for Superspeciality services (Procedure and Diagnostic).**” Tenders received after the scheduled date and time (either by hand or by post) or open tenders or tenders received though e-mail/fax or without the prescribed fee shall summarily be rejected.

Condition for opening of Documents/ Bids:

1. Please ensure that each page of the tender is downloaded and is submitted in toto with each page signed by the appropriate signatory authority.
2. EOI Document will be out rightly rejected if any technical condition is not fulfilled.
3. Photocopy of necessary certificates (as mentioned below) should be attached with technical bid. Tenderers will be informed about date and time of inspection of their centre (if required) by a duly Constituted Committee on the address given by the applicant HCO.

Security/Performance Guarantee Deposit:

The amount as well as the mode of submission may be intimated to the bidders at the time of empanelment.

Tie-Up agreement:

The applicants who fulfill all the criteria as laid down in the EOI document may be invited for executing an agreement on appropriate value of stamp paper through the authorized representative of the Applicant and the designated signatory authority of this office.

Period of Empanelment:

The empanelment shall be initially up to 31.03.2018 which may be extended for a period of **one year** by mutual consent.

Proposal for empanelment may be sent to **The Sr. State Medical Commissioner (EZ), ESI Corporation, Panchdeep Bhawan, 5/1 Grant Lane, Kolkata-700012, West Bengal.**

The S.S.M.C. (E.Z.), ESIC reserves the rights to accept/ reject one or all of the applications without assigning reasons thereof.

Sr. State Medical Commissioner (EZ)

Conditions for Empanelment:

1. The Health Care Organizations (HCOs) (hospitals/Cancer Hospitals/Imaging Centres/Diagnostic Laboratories) which are empanelled by **CGHS** need to submit a consent letter accepting the terms and conditions mentioned herein along with the tender documents duly signed and stamped.
 2. **State Govt approved** health Care Organizations may be considered for empanelment after they submit a consent letter accepting the terms and conditions mentioned herein along with the tender documents duly signed and stamped.
 3. Health Care Organizations which are approved by **Public Sector Insurance Companies** may be considered for empanelment after they submit a consent letter accepting the terms and conditions mentioned herein along with the tender documents duly signed and stamped.
 4. For all other Health Care Organizations following criteria need to be fulfilled:
 - I. The Health Care Organizations should preferably be accredited by **National Accreditation Board for Hospitals & Healthcare Providers (NABH)**.
 - II. However, the hospitals which are not accredited by NABH may also apply for empanelment but their empanelment shall be provisional till they get NABH accreditation, which must preferably be done within a period of six months but not later than one year from the date of their empanelment.
 - III. Similarly, the diagnostic laboratories should have been accredited by **National Accreditation Board for Testing and Calibration Laboratories (NABL)**. However, the diagnostic laboratories, which are not accredited by NABL may also apply for empanelment but their empanelment shall be provisional till they are accredited for NABL certificate, which must be done preferably within a period of six months but not later than one year from the date of their empanelment.
 - IV. The hospitals/Cancer Hospitals/Imaging centres which are not NABH accredited and diagnostic laboratories which are not NABL accredited may be empanelled **provisionally** on the basis of fulfilling the criteria and submission of an affidavit that the information provided has been correct and in the event of failure to get recommendation from NABH/NABL as the case may be, which must preferably be done with in a period of six months but not later than one year of their empanelment, the empanelled hospital/diagnostic laboratory shall forego 50% of the Performance Bank Guarantee and its name would be removed from the panel of ESIC.
 - V. ESIC also reserves the right to prescribe/revise rates for new or existing treatment procedure(s)/investigation(s) as and when CGHS revises the rates, or otherwise.
 - VI. Scanned Copies of all the documents mentioned in the criteria for empanelment
- Annexure-IV.**

- VII. The Health Care Organization must have been in operation for at least one full financial year. Copy of audited balance sheet, profit and loss account for the preceding financial year to be submitted (Main documents only).
- VIII. Copy of NABH/NABL Accreditation in case of NABH/NABL accredited Health Care Organizations.
- IX. Copy of NABH/NABL application in case of Non-NABH/Non NABL accredited Health Care Organizations.
- X. List of treatment procedures/investigations/facilities available in the Health Care Organization.
- XI. State registration certificate/Registration with Local bodies, wherever applicable.
- XII. Compliance with all statutory requirements including that of Waste Management.
- XIII. Fire Clearance Certificate/Certificate by authorized third party regarding the details of Fire safety mechanism as in place in the Health Care Organization.
- XIV. Registration under PNDT Act, for empanelment of Ultrasonography facility.
- XV. AERB approval for tie-up for radiological investigations/Radiotherapy, wherever applicable
- XVI. Certificate of Undertaking as per the **Annexure-III** .
- XVII. Certificate of Registration for Organ Transplant facilities, wherever applicable.
- XVIII. The Health Care Organization must have the capacity to submit all claims/bills in electronic format to the ESIC/ESIS system and must also have dedicated equipment, software and connectivity for such electronic submission.
- XIX. The Health Care Organization must certify that they shall charge as per CGHS rates and that the rates charged by them are not higher than the rates being charged from their other patients who are not ESI beneficiaries.
- XX. The Health Care Organization must certify that they are fulfilling all special conditions that have been imposed by any authority in lieu of special concessions such as but not limited to concessional allotment of land or customs duty exemption. The Health Care Organization (except exclusive eye hospitals/centres, exclusive dental clinics/diagnostic laboratories/imagine Centre) must agree for implementation of EMR/EHR as per the standards notified by Ministry of Health & Family Welfare within one year of their empanelment.
- XXI. The Health Care Organizations must have minimal annual turnover of Rs.2 Crores for Metro cities and Rs.1 Crore for Non-Metro cities. Exclusive Eye hospitals/Centres, Exclusive Dental Clinics, Diagnostic Laboratories and Imagine Centre must have a minimal annual turnover of Rs.20 Lacs in Metro Cities and Rs.10 Lacs in Non-Metro Cities. However, the competent authority reserves the right to relax the turnover requirement
- XXII. Photo copy of PAN Card.

XXIII. Bank details.

The scope of services to be covered under SST

A) Super Speciality Procedure

Superspeciality will mean the following Superspeciality services.

- 1) Any treatment rendered to the patient at a Tertiary centre / Superspeciality hospital by a Superspecialist.
- 2) Cardiology and Cardiothoracic Vascular surgery
- 3) Neurology and Neurosurgery
- 4) Paediatric Surgery
- 5) Oncology and Oncosurgery
- 6) Urology and Urosurgery
- 7) Gastroenterology and GI surgery
- 8) Endocrinology and Endocrine surgery
- 9) Burns and Plastic Surgery
- 10) Reconstructive surgery

B) Super Specialty Investigations

Superspeciality investigations will include all the investigations which require intervention and monitoring by Super specialists in the disciplines mentioned above. In addition the following specialised investigations will also be covered.

- 1) CT scan
- 2) MRI
- 3) PET Scan
- 4) Echo Cardiography
- 5) Scanning of other body parts
- 6) Specialised bio-chemical and immunological investigations
- 7) Any other investigation costing more than Rs.3000/ test.

MINIMUM NUMBER OF BEDS REQUIRED

- i. Metro cities50
- ii. Other cities30

NB: The number of beds as certified in the Registration Certificate of State Government/Local Bodies/NABH/Fire Authorities shall be taken as the valid bed strength of the hospital.

In addition the imagine centres shall meet the following criteria – copies or relevant documents:

A. MRI Centre

Must have MRI machine with magnet strength of 1.0 Tesla or more.

B. CT Scan Centre

Whole Body CT Scanner with scan cycle of less than one second (sub-second) Must have been approved by AERB

C. X-ray Centre /Dental X-ray/OPG centre

- i. X- Ray machine must have a minimum current rating of 500 MA with image intensifier TV system

- ii. Portable X-ray machine must have a minimum current rating of 60 MA. Dental X-ray machine must have a minimum current rating of 6 MA. OPG X-ray machine must have a current rating of 4.5 -10 MA
 - iii. Must have been approved by AERB
- D. Mammography Centre**
Standard quality mammography machine with low radiations and biopsy attachment.
- E. USG /Colour Doppler Centre**
- i. It should be of high-resolution Ultrasound standard and of equipment having convex, sector, linear probes of frequency ranging from 3.5 to 10 MHz should have minimum three probes and provision/facilities of trans Vaginal/ Trans Rectal Probes.
 - ii. Must have been registered under PNDT Act
- F. Bone Densitometry Centre**
- i. Must be capable of scanning whole body
- G. Nuclear Medicine Centre**
- i. Must have been approved by AERB / BARC

APPLICATION FORMAT FOR EMPANELMENT OF HOSPITALS

1. Name of the city where hospital is located.

2. Name of the hospital

3. Address of the hospital

4. Tel / fax/e-mail

Telephone No	
Fax	
e-mail address	
Name and Contact details of Nodal persons	

Whether NABH Accredited

Whether NABH applied for

Details of Accreditation and Validity period

a. Details of the application fee draft of Rs. 1000/-

Name & Address of the Bank	DD No.	Date of Issue

b. Total turnover during last financial year
(Certificate from Chartered Accountant is to be enclosed).

5. For Empanelment as

Hospital for all available facilities

Cancer Hospital/Unit

(Please select the appropriate column)

6. Total Number of beds

7. Categories of beds available with number of total beds in following type of wards

Casualty/Emergency ward		
ICCU/ICU		
Private		
Semi-Private (2-3 bedded)		
General Ward bed (4-10)		
Others		

8. Total Area of the hospital

Area allotted to OPD

Area allotted to IPD

Area allotted to Wards

9. Specifications of beds with physical facilities/ amenities

Dimension of ward

Number of beds in each ward

Length

Breadth

(Seven Square Meter Floor area per bed required-) (IS: 12433-Part 2:2001)

10. Furnishing specify as (a), (b), (c), (d) as per index below

(a) Bedsides table

(b) Wardrobe

(c) Telephone

(d) Any other

11. Amenities specify as (a), (b) (c) (d) as per index below Amenities

(a) Air conditioner

(b) T.V.

(c) Room service

(d) Any other

12. Nursing Care

Total No. of Nurses

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No. of Para-medical staff

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Category of bed Bed/Nurse Ratio (acceptable Actual bed/nurse standard) ratio

a) General

6:1

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b) Semi-Private

4:1

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c) Private

4:1

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d) ICU/ICCU 1:1

e) High dependency Unit 1:1

13. Alternate power source Yes No

14. Bed occupancy rate

General bed

Semi-Private Bed

Private Bed

15. Availability of Doctors

1. No. of in house Doctors

2. No. of in house Specialists/Consultants

16. Laboratory facilities available - Pathology Biochemistry Microbiology
or any other

17. Imaging facilities available

18. No. of Operation Theaters.

19. Whether there is separate OT for Septic cases Yes/No

20. Supportive services

Boilers/sterilizers

Ambulance

Laundry

Housekeeping

Canteen

Gas plant

Dietary

Others (preferably)

Blood Bank

Pharmacy	<input type="text"/>
Physiotherapy	<input type="text"/>

21. Waste disposal system as per statutory requirements

22. ESSENTIAL INFORMATION REGARDING CARDIOLOGY & CTVS

Number of coronary angiograms done in last one year	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of Angioplasty done in last one year	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of open heart surgery done in last one year	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of CABG done in last year	<input type="text"/>	<input type="text"/>	<input type="text"/>

23. RENAL TRANSPLANTATION, HAEMODIALYSIS/ UROLOGY- UROSURGERY

Number of Renal Transplantations done during last one year	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of years this facilities is available	<input type="text"/>	<input type="text"/>	
Number of Hemodialysis unit.	<input type="text"/>	<input type="text"/>	

Criteria for Dialysis:

- The center should have good dialysis unit neat, clean and hygienic like a minor OT.
- Centre should have at least **four** good Haemodialysis machines with facility of giving bicarbonate Haemodialysis.
- Centre should have **water-purifying unit equipped with reverse osmosis**.
- Unit should be **regularly fumigated** and they should perform regular antiseptic precautions.
- Centre should have **facility for providing dialysis in Sero positive** cases.
- Centre should have trained dialysis Technician, Nurses, **full time Nephrologist** and Resident Doctors available to manage the complications during the dialysis.
- Centre should conduct at least **150** dialysis per month and each session of hemodialysis should be at least of 4 hours duration.
- Facility should be available 24 hours a day.

Whether it has an immunology lab. Yes/No

If so, does it exist within the city where the hospital is located Yes/No

Whether it has blood transfusion Service with facilities for screening HIV markers for Hepatitis (B&C), VDRL Yes/No

Whether it has a tissue typing unit DBCA/IMSA/DRCG scan facility and the basic radiology facilities Yes/No

24. LITHOTRIPSY

No. of cases treated by lithotripsy in last one year

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Average number of sitting required Per case

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Percentage of cases selected for Lithotripsy, which required conventional Surgery due to failure of lithotripsy

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25. LIVER TRANSPLANTATION- Essential information reg.

Technical expert with experience in liver

Transplantation who had assisted in at least Yes/No fifty liver transplants.

(Name and qualifications)

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Month and year since Liver
Transplantation
is being carried out

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No. of liver transplantation done during the last one year

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Success rate of Liver Transplant

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Facilities of transplant immunology lab.

Tissue typing facilities

Yes/No

Blood Bank

Yes/No

26. ORTHOPAEDIC JOINT REPLACEMENT

a. Whether there is Barrier Nursing for Isolation for patient. Yes/No

b. Facilities for Arthroscopy

Yes/No

27. NEUROSURGERY.

Whether the hospital has aseptic Operation theatre for Neuro Surgery Yes/No

Whether there is Barrier Nursing for Isolation for patient.

Yes/No

Whether, it has required instrumentation for Neuro-surgery Yes/No

Facility for Gamma Knife Surgery

Yes/No

Facility for Trans-sphenoidal endoscopic Surgery

Yes/No

Facility for Stereotactic surgery

Yes/No

28. GASTRO-ENTEROLOGY

Whether the hospital has aseptic Operation theatre for Gastro-Enterology & GI Surgery Yes/No

Whether, it has required instrumentation for Gastro-Enterology – GI Surgery Yes/No

Facilities for Endoscopy – specify details

29. Oncology

i. Whether the hospital has aseptic Operation theatre for Oncology – Surgery Yes/No

a. Whether, it has required instrumentation for Oncology Surgery Yes/No

ii. Facilities for Chemotherapy Yes/No

iii. Facilities for Radio-therapy (specify) Yes/No

iv. Radio-therapy facility and Manpower shall be as Per guidelines of BARC Yes/No

v. Details of facilities under Radiotherapy

30. Endoscopic / Laparoscopic Surgery:

Criteria for Laparoscopic/Endoscopic Surgery:

- Center should have facilities for casualty/emergency ward, full-fledged ICU, proper wards, proper number of nurses and paramedical, qualified and sufficient number of Resident doctors/specialists.
- The surgeon should be Post Graduate with sufficient experience and qualification in the specialty concerned.
- He/She should be able to carry out the surgery with its variations and able to handle its complications.
- The hospital should carry out at least 250 laparoscopic surgeries per year.

The hospital should have at least one complete set of laparoscopic equipment and instruments with accessories and should have facilities for open surgery i.e. after conversion from Laparoscopic surgery. Yes / No

SIGNATURE OF APPLICANT OR AUTHORIZED AGENT

CERTIFICATE OF UNDERTAKING

1. It is Certified that the particulars given above are correct and eligibility criteria are satisfied.
2. That Hospital/ eye centre/Exclusive Dental Clinic/ Diagnostic laboratory/ Imaging Centre shall not charge ESI beneficiaries higher than the CGHS notified rates or the rates charged from other patients who are not ESI beneficiaries.
3. That the rates have been provided against a facility/procedure/investigation actually available at the Organization.
4. That if any information is found to be untrue, Hospital/ Eye centre/Dental clinic/ Diagnostic Centre would be liable for de-recognition by ESI. The Organization will be liable to pay compensation for any financial loss caused to ESI or physical and or mental injuries caused to its beneficiaries.
5. That the Hospital/ Eye centre/Dental clinic/ Diagnostic Centre has the capability to submit bills and medical records in digital format and that all Billing will be done in electronic format and medical records will be submitted in digital format as per BPA of ESIC **M/s UTI-ITSL contained in the Annexure-V.**
6. The Hospital/ Eye centre/Dental clinic/ Diagnostic Centre will pay damage to the beneficiaries if any injury, loss of part or death occurs due to gross negligence.
7. That the Hospital/ Eye centre/Dental clinic/ Diagnostic Centre has not been derecognized by CGHS or any State Government or other Organizations.
8. That no investigation by central Government/State Government or any statutory Investigating agency is pending or contemplated against the Hospital/ Eye centre/Dental clinic/ Diagnostic Centre.
9. Agree for the terms and conditions prescribed in the tender document.
10. Hospital agrees to implement Electronic Medical Records and EHR as per the standards approved by Ministry of Health & Family Welfare within one year of its empanelment

SIGNATURE OF APPLICANT OR AUTHORIZED AGENT

Scanned Copies of the following documents (wherever applicable) are to be uploaded along with the Tender

1. Copy of legal status, place of registration and principal place of business of the health care Organization or partnership firm, etc.,
2. A copy of partnership deed/memorandum and articles of association, if any
3. Copy of Customs duty exemption certificate and the conditions on which exemption was accorded.
4. Copy of the license for running Blood Bank.
5. Copy of the documents fulfilling necessary statutory requirements.

SIGNATURE OF APPLICANT OR AUTHORIZED AGENT

The salient features of the on-line bill processing system through BPA are elaborated as below:

Introduction

ESIC is providing comprehensive medical care facility to its beneficiaries and their dependents. In the process, ESIC has empanelled hospitals/diagnostic centers for providing treatment to its beneficiaries. ESIC has decided to appoint UTIITSL as a Bill Processing Agency (BPA) for processing the claims and recommending the payment to be released on behalf of ESIC. The medical care facility is extended to the ESIC beneficiaries who are entitled to cashless facility in the ESIC empanelled hospitals/diagnostic centers.

Here after respective MS's-ESIC Hospitals & SMC Offices will enter into MOU/Addendum to MoU (as the case maybe) with empanelled hospitals to enable referral generation and online billing through UTI Module. BPA will provide a front end user interface through the software where in the respective MS's-ESIC Hospitals/SMC Offices/ designated officials of ESIC will be able to update all necessary details of registration of empanelled hospitals/diagnostic centers with validity, extension of validity, details of accreditation (NABH/NABL), de-empanelment of hospital, classification of hospital and any other parameters/criteria as specified by ESIC from time to time.

Expenditure incurred on services provided by empanelled hospital/diagnostic center is paid directly to the empanelled facility by ESIC after the bill is processed by BPA. UTIITSL/BPA has agreed to provide a transparent system for online referral generation and bill processing (as per ESIC Policy and Standard Operating Procedures) for scrutiny and processing of all bills (SST/Secondary/Investigations etc) of Empanelled Hospitals/Diagnostic Centers for beneficiaries referred from ESIC Hospitals and bills for only Super Specialty treatment in case of ESIS Hospitals.

BPA shall be providing the required software as per MOU to all empanelled hospitals/diagnostic centers of ESI to run the process.

I Pre-requisites:

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1. The empanelled hospitals/diagnostic centers are required to sign the addendum (Annexure – A) of MoU with ESIC Hospital / Institution/SMC Office.
 2. Soft copy of the addendum duly signed by both parties is also required to be **uploaded on to BPA's software module.**
 3. Empanelled hospitals/diagnostic centers need to submit attested copies of following physical documents to BPA
 - a. Revised MoU/agreement signed by ESI hospital/Institution/SMC Office (Healthcare payer) with the empanelled hospital (Healthcare provider), showing the date/duration of validity of agreement/MoU.
 - b. Empanelled hospitals/diagnostic centers to provide user details, roles to be played and authority of users who shall be processing/submitting the claims online of referred patients of ESI Hospital/Institution using BPA.
 - c. NABH/NABL and other relevant certificates of the empanelled hospital/diagnostic center along with the validity date / period.
 - d. Rate list for procedures and services.
 4. Empanelled hospital/diagnostic center shall abide by any other requirement specified from time to time by ESIC and/or BPA in regards to implementation of online referral processes, clinical data and claim generation using the software application.
 5. On fulfilling requirements by the empanelled hospital/diagnostic center, BPA shall provide Login Details along with User access details; the receipt of which is to be confirmed by the empanelled hospital/diagnostic center to both ESIC and BPA.
 6. BPA shall provide training to the identified employees of the empanelled hospital/diagnostic center on the access and use of the web based application software, process of honoring routine referrals, emergency referral treatment protocol, final bill uploading/submission processes, and uploading/submission of clinical reports, etc. BPA shall train on the Standard Operating Processes related to bill processing.
 7. BPA shall check and verify the authenticity of documents submitted by the empanelled hospital and tally with the document submitted to ESIC/ESIS Hospital/Institution. BPA shall check and keep a track on steps online, in the online processing activities in order to ensure transparent and fair processes.

8. Empanelled Hospital/diagnostic center shall only be able to upload claims from the date of initiation of revised MoU. System shall auto-reject any claim which is backdated or for past period.
9. The validity of revised MoU with ESIC Hospital/Institution/SMC Office and NABH/NABL certificates shall be visible to all parties in the module so as to ensure checking while processing claims. The application software shall have different validations of rates based on criteria for NABH/NABL certified status of the empanelled hospital/diagnostic center. As and when the MoU validity/Accreditation validity is about to expire, the empanelled hospital/diagnostic centre needs to upload the renewed relevant document within its login account to maintain continuity for uploading and processing of claims.
10. Access for empanelled hospitals/diagnostics centers, validity of which has expired, will be blocked in the Online Referral generation template of UTI-Module but still exist in the payment module till such time that the respective empanelled hospitals/diagnostics centers are re-empanelled or completion of billing or as directed by ESIC.
11. On expiry of validity as per MoA / MoU at respective locations, empanelled hospitals/diagnostic centers should upload all pending bills at the earliest **but not later than Three (03) months from the date of expiry of MoU**, failing which the empanelled hospitals/diagnostic centers shall have to give justification and seek waiver/condonation of delay from the Competent Authority of respective ESIC Hospital/SMC office.
12. System shall accept the patient claim only with the referral letter within its validity period i.e 7 days (excluding the date of referral). As and when the referral is issued, its validity shall get captured online. Therefore, when the empanelled hospital shall submit the claim, system shall authenticate the referral validity.
13. BPA software shall accept documents only in PDF format, of limited size or in any other secure format as modified by ESIC from time to time. If the uploaded document is not legible, BPA software shall auto-reject the same.
14. Empanelled hospital/diagnostic center shall submit original hard copies of bills along with duly signed detailed discharge summary and chronologically placed clinical sheets/investigation reports/Blood bank notes/IPD notes (if needed)/clinical reports/Films/pouches/invoices/price stickers/ Utilization certificates/OT Notes/pre and post operation radiological images for procedures/wrappers and invoice for drugs costing more than Rs 5000/ or any other requirement (as per T&C of MoA which the hospitals and

diagnostic centers have with ESIC) etc, which were uploaded in the system in support of the claim, within 7 (seven) working days and not beyond 30 days to the ESIC/ESIS Hospitals/Institutions from where referral was generated. Any bill/claim submitted beyond 30 days should be accompanied with online/offline waiver from ESIC/ESIS hospital/institution and BPA shall not adhere to TAT while processing such claims.

The claim cannot be considered as complete for processing by BPA until such physical submissions are carried out.

15. Any delay in processing owing to non-submission/delayed submission of hard copies/physical bills will be the sole responsibility of the empanelled hospital, thereby meaning, ESIC or BPA shall not be held responsible for the same.
16. BPA shall provide training on e-claim processing and technical assistance related to software glitches.
17. Empanelled hospitals/diagnostic centers are requested to register with the BPA i.e. BPA at the earliest as all referrals shall be made through the systems only to the registered hospitals effective from the date of signing of MOU between ESIC and BPA.

II Deployment of software

BPA shall set up and deploy the customized application (software) as already being used and accepted by ESIC for the bill processing assignment.

III Training

BPA has imparted initial free of cost training to ESIC and empanelled hospitals/diagnostic centers before signing of the contract. The BPA shall again impart refresher onsite training, free of cost at all locations after the MoU is signed. In addition, BPA will prepare a video film, free of cost along with ESIC Officials for complete training purposes.

Additional 3 (three) trainings if required, shall be given through electronic platforms like Skype, Team Viewer, Video Conference, Videos etc without any cost to ESIC / hospitals.

BPA shall further impart training to newly empanelled hospitals at any point later whenever fresh empanelment is undertaken for that respective location and no extra charges will be paid by ESIC for such training on fresh empanelment of a new entity. In such cases also, additional 3 (three)

trainings shall be given through electronic platforms like Skype, Team Viewer, Video Conference, Videos etc without any cost to ESIC / hospitals.

After the above trainings have been given and still there is a requirement of any further additional training, then it would be at a cost to be decided by BPA which shall be borne by the empanelled hospital/diagnostic centre.

IV Creation of User ID (Activation/ Deactivation)

User IDs will be created for users of empanelled Hospitals/diagnostic centres as per the procedure mentioned below:

- a) Filling the User ID creation form by prospective user.
- b) The role of the user to be mentioned, as defined in the form.(Eg: login details, user access details etc)
- c) The form should be signed by the user and authorized by respective authorised signatory along with official seal and signature of the empanelled hospital/diagnostic centre.
- d) Filling of the user creation template in the Excel format.
- e) Scanned copies of these documents to be forwarded to esicbpa@utiitsl.com along with User Creation Template in .XLS format.
- f) If any user is discontinued by whatsoever reason, **it is imperative that** the same should be communicated to BPA by respective authorised signatory along with official seal and signature of the empanelled hospital/diagnostic centre for deactivation of old IDs and creation of fresh user IDs by following the above procedure.

V. Queries:

BPA shall facilitate the replies to the queries for all users of the system i.e. ESI Hospitals/Institutions and empanelled hospitals/diagnostic centers through e-mails (BPA - IT & Training Helpdesk) and escalation matrix as under:

Divisional Manager
Assistant Vice President
Dy Vice President Vice
President

Senior Vice President

All queries will be addressed by the BPA promptly within 24 hrs. E-mail resolution MIS will be provided by the BPA. The BPA shall also publish on its webpage www.esicbpa.utiitsl.com/esic the process flow and the procedures followed, so that the user does not have to constantly interact with BPA.

BPA shall discourage direct personal discussions of employees with the hospital staff.

VI Procedures- Empanelled hospital/diagnostic centre shall follow ESIC Policy and Standard Operating Procedure as per document attached and as modified by ESIC from time to time.

VII Processing Fees

Subject to BPA rendering bill-processing services as per the guidelines, the empanelled hospitals/diagnostic centers/claimants shall pay to the BPA, the service fees and service tax/GST/any other tax by any name called as applicable on per claim basis, as detailed below, through ESIC.

Processing Fee to BPA will be paid @2% of the claimed amount of the empanelled hospital/diagnostic centre (and not the approved amount) and service tax there on subject to minimum of Rs.12.50/- (exclusive of tax) and maximum of Rs.750/- (exclusive of tax) per bill/claim. This shall be auto calculated by the software and prompted to the ESI Hospital/Institution on the UTI Module at the time of final settlement of the claim. ESIC shall pay this amount to BPA from the inward claims/bills of the empanelled hospitals/diagnostic centres.

The Service Fee and Service Tax, GST or any other taxes by whatever name called payable to BPA will be deducted by ESIC from the amount payable to the empanelled hospital/diagnostic center and the amount after deduction of applicable income tax plus Service Tax, GST or any other taxes by whatever name called shall be transferred to the account of BPA through ECS, or otherwise, as decided from time to time, simultaneously along with the

payment/s for empanelled hospital/diagnostic centers. The Income tax to be deducted at source shall be applicable only on the processing fee.

If the claim was rejected or results into nonpayment to the empanelled hospital/diagnostic center, ESIC shall recover the service fee and service tax/GST/any other tax by any name due to the BPA from the subsequent claims of the respective empanelled hospital/diagnostic center (or the group hospitals / companies) and shall pay to the account of the BPA. If there are no subsequent claims from empanelled hospitals/diagnostic center, then said fee and service tax/GST/any other relevant tax by any name shall be recovered by ESIC from the empanelled hospital and paid to BPA.

BPA shall strive to adhere to the TAT of 10(ten) working days after the receipt of claim (as defined) / physical bills/ receipt of clarification or completion of period of NMI Disposal (whichever is later). ESIC reserves the right to levy a penalty upto 10% on the service fees payable to BPA for the claims pending beyond TAT of the respective bill of the empanelled hospital/s/diagnostic centers. This penalty shall be added to the approved amount of the respective empanelled hospital/diagnostic center and shall be validated by the system to be developed and shall be auto calculated by such system and prompted to the respective ESIC Hospital/ SMC on the system at the time of final recommendation on the claim. Letter confirming the amount due to BPA shall be issued by respective CFA within 30 days from date of last recommendation of claim by BPA.

Empanelled hospitals are requested to register with the BPA i.e. UTIITSL at the earliest as all referrals shall be made through the systems only to the registered hospitals effective from the date of signing of MOU between ESIC and BPA.

