

PRE-BID MEETING MINUTES – TDEA

Date: May 11, 2020
Start Time: 11:30 a.m.
End Time: 1:00 p.m.

Ref. No: ITB No.298

Participants:

- Adamjee Insurance
- Jubilee Insurance
- Operations Unit, TDEA

Objective/Agenda of the Meeting:

The meeting was held via Skype due to Covid-19 pandemic to respond the queries and offer clarifications, if any, regarding ITB No. 298.

Meeting Discussion Points:

The meeting began with a brief introduction of the participants. The vendors were requested to put forward their queries for clarification. The proceedings are summarized below.

Vendor's Query 01:

The RFQ notes that "OPD facility will be provided through pool amount". Please explain.

TDEA's Response:

TDEA will provide a pool amount to the insurance provider to be utilized as per the consumption from the employees. The pool shall be replenished as and when required. Insurance provider shall be responsible to manage the pool amount.

Vendor's Query 02:

Please explain In-patient Medical Care.

TDEA's Response:

This is a major medical care. Insurance providers are requested to provide the best quotes and offerings with respect to major medical care.

Vendor's Query 03:

Please explain "MAT Coverage including 3 months pre & postnatal treatment and medicines."

TDEA's Response:

This means MAT bills/medicines bills of 3 months pre-natal and 3 months post-natal shall be covered.

Note: In case the insurance provider provides better offering than the required, it will be given score(s) accordingly.

Vendor's Query 04:

Please explain point 3 of Other facilities "Direct bill payments on actual basis instead of bench-marking

process for claims incurred at non-panel hospitals especially in far-flung areas after verification.”

TDEA’s Response:

TDEA expects that the insurance provider shall provide full payments on reimbursement basis, after due verification of claims incurred at non-panel hospital. This is because, if a certain coverage limit is available and claim is legitimate, it should be entertained in full. The reason being some of our employees and their families reside in remote districts. The insurance providers may provide their bids accordingly.

Vendor’s Query 05:

Please explain point 10 of Other facilities “Facilitation for newborns will not be charged from MAT limit. However, newborns registration will be done and intimated within 1 week of birth. However, if newborn is registered and requires admission after birth for some problem, it will be charged from IPD limit of newborn. Normal Nursery admission will be charged from MAT limit.”

TDEA’s Response:

A newborn’s normal nursery admission may be charged to MAT limit, however, if the newborn has a birth defect (for example, lungs) and s/he requires immediate medical treatment, it should be charged to separate coverage of the newborn’s insurance limit and not from the MAT limit.

During the course of discussion, the participants was of the view that the mother should be discharged before newborn’s medical charges can be separated from the MAT. It was, however, explained that TDEA’s expectation is that insurance providers submit the best offering in this regard with more details and without any ambiguity so that bids can be evaluated accordingly.

Vendor’s Query 06:

Please explain point 12 of other facilities “Pre-existing MAT cases will be covered completely at the time of inception of policy, however, additions of pre-existing MAT cases during the year should be charged no more than 20% of N-MAT premium or 30% of C-MAT premium. However, MAT charging can be negotiable on case to case basis.”

TDEA’s Response:

TDEA’s current insurance policy will end on June 30, 2020 and new insurance policy will be effective from July 1, 2020. There may be employees who will be expecting deliveries after the existing policy expires on June 30th 2020. This means that their pre-existing MAT cases will be covered completely at the time of inception of the policy, i.e. July 2020 onward. Additional premium charges may be negotiated as explained in the original bid document, see point 12.

A participant raised a point that the current insurance provider should bear the pre-natal expenses, which falls within the current policy.

It was clarified that TDEA, being an NGO, wishes to provide maximum facilitation to its employees and would like to engage an insurance provider, which can offer the best services and facilitations for its staff. TDEA also provided a room for extra-premium for the insurance provider to adjust the cases of such nature.

Vendor's Query 07:

Please explain, point 14 of other facilities "Recovery of credit OPD bills from all panel hospitals should be made within 15 work days; In case employee leaves the organization."

TDEA's Response:

This means that TDEA employees have a maximum OPD limit of Rs. 30,000 (pro-rated over 12 months). If an employee is leaving the organization and spends more than the entitlement (especially in credit OPD cases), the insurance providers is expected to share the total consumption of the employee's OPD within 15 days, so that TDEA may adjust the excess amount with the employee's salary/final settlement accordingly. The deducted amount shall be reverted to OPD pool amount.

Minutes By:
Operations Unit