

**Annexure-A**

**GENERALISED PLAN FOR GROUP HEALTH INSURANCE POLICY FOR  
TAMLUK GHATAL CENTRAL COOPERATIVE BANK LTD EMPLOYEES AND RETIRED EMPLOYEES  
AND THEIR FAMILY MEMBERS**

**Technical Bid**

| Technical Details            |                                      |  |          | Remarks   | Comments of the Insurer |
|------------------------------|--------------------------------------|--|----------|---|-------------------------|
| Group Name                   | Tamluk Ghatal Central Coop. Bank Ltd |  |          | This is a requisite plan/scheme for the said group health insurance. However, the interested insurance company may provide a dummy copy of its group health insurance scheme which must satisfy all the requisite of this proposed group health insurance plan. |                         |
| Location                     | Tamluk :: Purba Medinipur            |  |          |   |                         |
| Commencement Date            | 31.12.2025                           | Period   | One year |   |                         |
| Insured Group Details        |                                      |  |          |   |                         |
| Employee Strength as on      |                                      | 31.12.2025 (Projected)   |          | Actual number beneficiaries to be finalized before Award of contract  |                         |
| No. of employees Family Unit |                                      | 1049   |          |   |                         |
|                              |                                      |  |          |   |                         |
| Family Definition            |                                      | Structurally the family size will be of 6(six) members [1 Primary member +1 spouse + 2 Childern (sons unmarried dependent upto 25 years/Daughters(unmarried/dependent widowed or divorced without age limit) +dependent parents]   |          |   |                         |
| Coverage Age                 |                                      | Child upto 25 years(sons unmarried dependent upto 25years/Daughters (unmarried /dependent widowed or divorced without age limit)<br>Existing employee till in employment of the Bank.<br>Retired employees from 01.04.2024 may be continued with own contribution.<br>Dependent Parents are covered without age limit. |          |   |                         |
| Floater/Individual           |                                      | Floater  |          |   |                         |
| Sum Insured                  |                                      | ₹6,00,000-00 per family floater basis  |          |   |                         |
| Help line                    |                                      | There should be a dedicated helpline (24 x 7) from the Insurance Company available and the contact details should be furnished in the tender.  |          |   |                         |



| Coverage & Benefits Details           |  | Remark | Comments of the Insurer |
|---------------------------------------|--|--------|-------------------------|
| Coverage of Pre existing diseases     | To be covered  |        |                         |
| Cashless facility                     | To be applicable   |        |                         |
| Reimbursement facility                | To be applicable   |        |                         |
| Waiting Period                        | To be waived   |        |                         |
| Pre and post hospitalization expenses | 60 days pre and 90 days post hospitalization Expenses to be covered.   |        |                         |
| Room Rent Capping                     | To be covered  |        |                         |
| AYUSH Treatment                       | Applicable, treatment in Govt. Hospitals/Medical Corporations recognized by NABH to be covered in the scheme.  |        |                         |
| Day Care Procedures                   | Applicable.<br>List to be provided by Insurer.   |        |                         |
| Coverage of consumables               | Covered as per IRDA guidelines.  |        |                         |
| Mid-term Addition                     | New Employees and family shall be included in policy immediately upon joining, on pro-rata payment basis. No additional premium to be provided for mid-term addition of new members into the family.<br>Pro rata premium shall be adjusted/ refunded on exit of an employee. |        |                         |
| Ambulance charges                     | To be covered.   |        |                         |
| Copayment                             | To be covered  |        |                         |
| Any other Benefit                     | Any other benefit that the insurance company may have in its fold and want to provide may please be declared in tender.<br>1. Annual Health checkup of the employee.<br>3. Individual top up on sum assured.   |        |                         |
| Day care coverage                     | To be covered  |        |                         |
| Critical illness cover                | To be covered  |        |                         |
| Sub limit of diseases, if any         | list to be submitted   |        |                         |
| Exclusion of diseases, if any         | list to be submitted   |        |                         |
| Any deductibles                       | list to be submitted   |        |                         |
| Robotic surgery                       | To be covered  |        |                         |
| TPA                                   | IRDAI approved TPA services Involved (if any) and Name and contact details to be submitted. The authorized representative of the corporation will participate in the screening process of TPA. List of Network of Authorized hospitals to be provided.                       |        |                         |
| Any Service Charges on Medical Bills  | Should not be deducted from the individual claim.  |        |                         |



| <b>Company Information</b>                          |           | <b>Remarks</b>                               | <b>Comments of the Insurer</b> |
|---|-----------|--|--------------------------------|
| Experience in Health Insurance Business             | 10 years  | Submit a copy                                |                                |
| Whether Blacklisted to participate in Govt. tenders | (yes/no)  | Declaration under annexure-v to be submitted |                                |
| Solvency ratio                                      | Above 1.7 |  |                                |
| Claim settlement ratio                              | Above 95% |  |                                |
| Hospital Presence                                   | PAN India | No. of Cashless hospitals tied up            |                                |

***Name and Signature of Authorised Person***

