

**Bid Document No. BGL/569/2023-24** 



# **BHAGYANAGAR GAS LIMITED**

(A JOINT VENTURE OF HPCL & GAIL)

## **BID DOCUMENT FOR**

## **Tender for Hiring of Group Medical Insurance** Family Floater Policy for BGL Employees & Dependents

**UNDER OPEN DOMESTIC COMPETITIVE BIDDING** 

Bid Document No.: BGL/569/2023-24

**VOLUME-II of II** 

(Sign & Seal of Bidder)

Page 1 of 33



Bid Document No. BGL/569/2023-24

## **CONTENTS**

## **VOLUME II OF II**

- **SECTION 6** : SCOPE OF WORK&
- **SECTION 7** : SPECIAL CONDITIONS OF CONTRACT.
- **SECTION 8** : SCHEDULE OF RATES / PRICE SCHEDULE.



Bid Document No. BGL/569/2023-24

Volume II of II

# **SECTION 6**

## **SCOPE OF WORK**

(Sign & Seal of Bidder)

Page 3 of 33



### **SCOPE OF WORK**

1. A Group Mediclaim Insurance policy is required for BGL employees and their dependent parents. The coverage is required on cash less basis from the date of inception of the policy for one year from award which can be extended on mutual consent on same rate, terms and conditions.

Floater sum insured policy covering dependent parents and fix the sum insured as follows:

E0 - E2: Rs.5 lakhs for the entire family

E3 – E9: Rs.8 lakhs for the entire family.

The proposed policy will cover dependent parents and being a floater policy will have wide coverage of each member of the family.

The details of employees & their dependents i.e. age, date of birth, sex etc., is attached herewith as **Annexure-1**.

#### List of Day care treatments attached as Annexure -II

The claim dumb of previous year is attached as **annexure-III.** 

- 2. Family shall mean employees, spouse, DEPENDENT parents and TWO (02) dependent children up to 25 years of age OR till he or she started earning whichever is earlier.
- 3. The premium quoted & agreed herein shall remain firm till the expiry of the contract and the insurer shall not be entitled to increase or revision (statutory or otherwise) or any other right or claim whatsoever.
- 4. **Payment Terms** The premium shall be paid in advance on Annual basis or at the time of renewal of the policy if applicable.
- 5. New employees joining the Group mid-term or Spouse of newly married employee should be covered by charging pro-rata premium.
- 6. Midterm inclusion/deletion of members are allowed subject to the confirmation from BGL.
- 7. Suitable provision for addition and deletion of members during the contract period shall be available. For which Premium shall be calculated on pro rata basis.
- 8. Refund should be allowed on pro-rata basis for the unexpired period in case of withdrawal of the policy.
- 9. Physical health card to be issued Individual and dependent family members.
- 10. Cashless Access Service for SOR Part A: The Insurer has to ensure that all the members are provided with adequate facilities so that they do not have to pay any deposits at the commencement of the treatment or at the end of the period in the network hospital of the Insurer subject to the allowable limit. In other cases all



reimbursement of claim must be settled within 30 days of submission of final bill. Query against the submitted bill if any must be raised within a week by the TPA.

- 11. Pre-Existing Diseases coverage required for all insured persons.
- 12. Coverage for Pre and Post hospitalization for 30 days and 60 days required respectively in case of Medical tests /investigations before / after hospitalization(s).
- 13. On hospitalization capping for normal room rent can be 2% of SI for Non-ICU & 3% for ICU/ICCU on sum insured per day.
- 14. The Policy should cover expenses of hospitalization (Room Charges, Doctors/ Surgeon, Anesthetist, Medical Practitioner, Consultants special fees, ICU/ICCU, Medicines, pathology reports, Anesthesia, Blood, Oxygen, OT Charges, Surgical appliances, Medicines, Drugs, Diagnostic Material, X-Ray, Dialysis, Chemotherapy, Radiopathy, Cost of Pacemaker, Artificial Limbs and cost of Stent & Implant etc.) on a reimbursement/cashless basis, incurred as a result of illness and/or accidents as an inpatient in a recognized hospital with no restriction upto the sum insured (SI) value.
- 15. All doctors' charges including Surgeon, anesthetist, medical practitioner, consultants, sand specialist fees whether charged within the main hospitalization bill and/or billed separately to be covered under the policy and will not form part of non-admissible expenses.
- 16. Day care procedures / treatments or any other similar surgery procedure / treatment taken in the hospital where the patient is discharged on the same day require to be covered on actual basis. Please refer Annexure II for minimum day care procedure / treatment to be cover.
- 17. **Maternity and Newborn benefit:** Includes maternity related procedure/treatments arising from child birth (including both normal delivery/caesarean section, including miscarriage or abortion included by accident or other medical emergency treated in a registered hospital/nursing home should be cover. Maternity benefit for normal & C section to be covered on actual within the Sum Insured (SI) value.
- 18. Newborn child (single/twins) to an insured mother would be covered under the policy from day one for the expenses (subject to policy limitations) incurred for treatment taken in registered Hospital / Nursing Home as in patient and will be treated as a part of the mother. Congenital diseases for new born child shall be covered under the policy.
- 19. Any type of treatment or procedure or surgeries which require Laser Assistant should be reimbursed due to advancement to technology.
- 20. Coverages related to Psychiatric type disease(s): The Policy should cover the medical expenses for In patient treatment in a recognized psychiatric unit of a hospital including consultation, diagnostics, counselling and / or therapy and



medication. The in – patient treatment under this benefit must at all times be administrated under the direct control of the registered psychiatrist.

- 21. Waiver of Waiting period (30 days, First year, etc.) is applicable for all the insurance claims.
- 22. Local Ambulance charges for admission, transfer to another hospital and /or discharge under critical condition should be cover on actual.
- 23. Ambulance charges should be cover per incident in case of emergency.
- 24. Registration charges levied by hospital or any other charges similar in nature would be payable under the policy.
- 25. Service Charge levied by the Hospital or any other charges similar in nature would be payable under the policy.
- 26. Coverage for Ayurvedic & Homeopathic Treatment as applicable.
- 27. Coverage for Outpatient Treatment **(OPD)** up to a maximum of Rs. 15,000 per family.
  - i. **SOR Part-B.** Insurance Policy for any illness of the family, to an extent of Rs.15000/- per family, which will be reimbursed to the insured on production of prescription, dispensary bills on actuals, any X-rays, scans or diagnostic reports, recommended by the attending doctor.
  - ii. The total count in tender is for 47 nos employees and may be increased/ decreased based on addition of new joinees during the policy period. Premium shall be paid on proportionate basis.
- 28. Insurer are requested to quote their best offer considering the above terms and conditions.



Bid Document No. BGL/569/2023-24

Volume II of II

## **ANNEXURE-1**

		Group Med	ical Policy- 2023	3-24		
S.No	Code/ID	Name	Location	Relation	Date of Birth	Sum insured for Family Floater policy
1	BGL/01/08	P.Krishna	KKD	SELF	01.07.1974	
		S. Krishna Veni		SPOUSE	14.05.1975	
		P. Parnika		DAUGHTER	26.05.2007	
		P. Varish		SON	31.03.2009	800000
		P N Ratnam		Mother	01.07.1949	
		P Appa Rao		Father	10.08.1954	
2	BGL/28/11	T V K H Subrahmanyam	HYD	SELF	11.12.1968	
		T. Srilakshmi		SPOUSE	10.07.1969	
		T. Sruthi		DAUGHTER	06.10.1996	800000
		T. Sudensha		SON	09.06.2001	-
3	BGL/42/12	T Bhaskar Yadav	HYD	SELF	18.08.1983	
		T. Rajani		SPOUSE	28.09.1988	
		T. Aaradhya		DAUGHTER	11.09.2012	500000
		T.Dhruvin Yadav		SON	13.02.2019	
		T.Laxmamma		Mother	01.01.1951	
4	BGL/43/12	S Suman	HYD	SELF	12.04.1978	
		S. Prashanthi		SPOUSE	30.08.1984	
		S. Hara Govind		SON	29.11.2006	5,00,000
		S. Nitya Srividhya		DAUGHTER	31.10.2008	0,00,000
		S.Balasurahmanyam		Father	13.09.1952	
		S.Saraswathi		Mother	12.07.1956	
5	BGL/47/12	D Gurunath Babu	VJA	Self	18.11.1979	
		D. Bhagya Lakshmi		Spouse	17.09.1984	800000
		D. Mohit Babu		Son	14.12.2014	800000
		D.Jaswitha		DAUGHTER	14.04.2018	
6	BGL/55/13	Bonny K. Joseph	HYD	Self	12.04.1983	
		Anu Mary Thomas		Wife	22.03.1987	000000
		Deon Jas Bonny		Son	25.03.2018	800000
		Mrs. Dolly Joseph		Mother	07.06.1957	

(Sign & Seal of Bidder)

Page 7 of 33



Volume II of II

#### **Bid Docume**

ent No. BGL/569/2023-24
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7	BGL/58/14	Sudhir Kumar Alladi	HYD	SELF	28.08.1981	
		Meghana Chandra		Spouse	29.02.1988	800000
		Ratan Theodore Alladi		Son	22.06.2019	
8	BGL/60/14	G.Malleswari	HYD	Self	10.03.1976	
		Y. Sri Karunakar		Husband	01.06.1971	
		Y.S.V. Abhijna		Daughter	08.08.2010	800000
		Y.S. Adithi		Daughter	28.06.2014	
9	BGL/64/15	B. Venkatesh	ККД	SELF	01.04.1988	
		P.Anusha		Spouse	31.08.1990	
		Boni Chirasvi sanvi		Daughter	09.03.2019	800000
		Boni Laxmi		Mother	01.04.1965	
10	BGL/72/17	B.Bhanu Chander	HYD	SELF	24.04.1986	
		Kalyani		Spouse	15.08.1989	
		Anuradha Kumari		Mother	12.08.1964	500000
		Soma Sundaram		Father	04.06.1956	
11	BGL/75/17	Mohammad Sibgatullah	HYD	SELF	02.11.1990	
		Reshma Parween		Spouse	17.12.1995	
		Abdul Majeed		Father	01.03.1951	800000
		Zeenat Ara		Mother	25.11.1962	
		Reyan Ahmad		SON	19.06.2021	
12	BGL/76/17	Hitesh Hasija	HYD	SELF	05.10.1989	

12	BGL/76/17	Hitesh Hasija	HYD	SELF	05.10.1989	
		Mamta Hasija		Mother	23-04-1966	500000
		Om prakash Hasija		Father	07-09-1953	
13	BGL/79/18	Satish Chandra Mishra	HYD	SELF	20-07-1992	
		Suresh chandra Mishra		Father	20-11-1964	500000
		Rajesvari mishra		Mother	01-01-1971	500000
		Ekta Satish Mishra		Spouse	15.07.1992	
14	BGL/82/18	Shaik Akram Javed	HYD	SELF	21-04-1997	500000
		Shaik Ruksanabegum		Mother	24-05-1975	500000
15	BGL/86/18	Syed Mohd Kumail	HYD	SELF	21-03-1991	
		Syed Ejaz Askari		Father	05.11.1956	
		Umme Kulsoom		Mother	01.07.1964	800000
		Alina Fatima		Wife	05.02.1999	



Volume II of II

## Bid Document No. BGL/569/2023-24

16	BGL/89/19	Alok Nath	HYD	SELF	28-12-1988	
		Ram Gyan Mishra		Father	03.01.1961	500000
		Asha Mishra		Mother	15.11.1968	
17	BGL/91/19	Suraj Yedla	HYD	SELF	27-08-1990	800000
		Pappala Radha		Spouse	08.07.1994	
18	BGL/94/19	R S CH P PAVAN B	VJA	Self	23.07.1988	
-		U S V N Saisree		Spouse	26.06.1990	
		B Naga Sathwik		Son	13.06.2017	800000
		B K Viswanadha Sastry		Father	01.01.1958	
		B Sita RamaLakshmi		Mother	01.01.1962	
19	BGL/107/19	Rahul Chafekar	HYD	SELF	07.06.1993	
		Ramesh Chafekar		Father	01.01.1961	500000
		Anuradha Chafekar		Mother	10.10.1971	
20	BGL/108/19	Bandaru Johnson	HYD	SELF	08.10.1995	
20	BGE/100/19	B.Satya kumar Chand		Father	15.04.1964	500000
		B.Jai geeta Mani		Mother	26.08.1969	
		D.Jai geeta Main		Wother	20.00.1909	
21	BGL/98/19	DHARMATEJA INEEDU	Hyd	SELF	03-08-1998	500000
22	BGL/101/19	Siripurapu Baby Dharani	HYD	SELF	11-06-1998	500000
23	BGL/102/19	Duggirala Manoj	VJA	SELF	06-06-1998	
		Janisha		Father	06-05-1972	500000
		Ratnamma		Mother	27-03-1976	
24	BGL/111/20	Mani Shanker	HYD	Self	05.02.1989	
		Arpna Priya		Spouse	02.05.1990	
		Takshavi M		Doughter	10.11.2017	500000
		Shiva Kumari Devi		Mother	15. 07. 1948	
		Rajendra Prasad Karn		Father	03. 04.1953	
25	BGL/112/20	Subhashis Bhattacharjee	HYD	SELF	02.11.1974	
		Samatha Bhattacharjee		Spouse	20.04.1979	00000
		Malhaar Bhattacharjee		Son	11.02.2015	800000
26	BGL/113/20	Dheeravath Mohan Rao	HYD	Self	05.06.1984	800000
		Keloth Manasa		Spouse	03.08.1995	

(Sign & Seal of Bidder)

Page 9 of 33



Volume II of II

## Bid Document No. BGL/569/2023-24

		Dheeravath Anil Duminy		Son	20.06.2015	
		Dheeravath Amarendra Duminy		Son	24.08.2015	
		Dheeravath Bali		Mother	1963	
		Dheeravath Somla		Father	1959	
27	BGL/115/20	G. Venkatesh	HYD	Self	13.07.1990	
		M Devi Priyanka		Spouse	21.11.1994	800000
		Sudheeksha Govada		Doughter	13.09.2019	00000
		Kasi Visalakshi Govada		Mother	25. 07. 1970	

28	BGL/117/22	Ankita Sharma	HYD	Self	02.03.1998	
		Anil Sharma		Father	03.03.1964	500000
		Nirmal Sharma		Mother	25.02.1966	
29	BGL/118/22	Ayush Gandhi	HYD	Self	04.01.2001	500000
30	BGL/119/22	Katukuri Jhansi	HYD	Self	28.08.2000	
		Katukuri Shanta		Mother	12.01.1982	500000
		Katukuri Upender		Father	03.05.1976	
31	BGL/122/22	Shruti Aaryan	HYD	Self	07.04.1998	500000
		Punam Kumari Singh		Mother	15.12.1968	
32	BGL/123/22	Kamal Patel	HYD	Self	28.07.2000	500000
33	BGL/125/22	Parth Solanki	HYD	Self	15.01.2001	500000
34	BGL/126/22	Rishab Verma	HYD	Self	04.02.2000	
		Kamlesh Kumar Verma			07.07.1972	500000
		Anjali Devi			03.03.1975	
35	BGL/127/22	GOKEDA VISHNU PRASAD	VJA	Self	14.11.2000	500000
					_	
36	BGL/128/22	Gaurav Kumar	HYD	Self	04.03.2002	500000
37	BGL/129/22	Vishal Kumar Gupta	HYD	Self	10.07.1998	
		Chunni Lal		Father	01.01.1962	500000
		Amaravati		Mother	17.01.1962	
38	BGL/131/22	SHAIK ABDUL SAMAD	HYD	Self	10.08.2000	500000
	[	Γ			<b>I</b>	
39	BGL/132/22	Anita Sahu	HYD	SELF	15.06.1996	500000

(Sign & Seal of Bidder)

Page 10 of 33



Volume II of II

Bid Document No. BGL/569/2023-24

	Father	07.06.1972	
	Mother	01.01.1979	
HYD	Self	27.01.1993	
	HYD	Mother	Mother 01.01.1972

40	BGL/133/22	K Harsh	HYD	Self	27.01.1993	
		Ganti Sravani		wife	04.10.1995	500000
		K V Manohar		Father	11.03.1959	500000
		K Anuradha		Mother	25.11.1965	

41	BGL/134/22	Ratnala Sai Prasad Chowdari	HYD	Self	28.03.1972	
		Ratnala Sudharani		wife	20.02.19981	800000
		Ratnala Sai Vineeth Chowdari		son	15.07.2000	800000
		Ratnala Parvathamma		Mother	21.11.1948	

42	BGL/135/22	Samarth Kohli	HYD	Self	20.10.1991	
		Rajiv Kohli		Father	30.11.1953	80000
		Vani Kohli		Mother	15.12.1959	800000
		Anchal Shrivastava		Wife	14.10.1993	

43	BGL/136/22	Mudumby Vishnu Vardhan	HYD	Self	17.10.1992	
		Vakula Devi Mudumby		Mother	23.07.1966	500000
		Naga Kavya Vangipuram		wife	14.05.1994	

44	BGL/137/23	Allaka Dhananjaya	Self	01.04.1994	
		A Gurumurthy	Father	01.01.1967	500000
		A Padmavati	Mother	01.01.1975	

		Aaditri Yadav	Doughter	<b>11.12.2010</b>	
		Archana Yadav	Wife	03.6.1985	
		Ram Rati Yadav	Mother	12.07.1956	800000
		Ram Nath Yadav	Father	08.07.1954	
46	BGL/139/23	Sushil Kumar Yadav	Self	10.06.1981	
		Usha Govind Tungar	Mother	12.05.1967	
		Govind Mahadu Tungar	Father	01.06.1959	
		Aryan Nithin Tungar	Son	19.12.2020	800000
		Pooja Nitin Tungar	Wife	21.02.1993	
45	BGL/138/23	Nitin Govind Tungar	Self	19.08.1987	

• The total count envisaged in tender is for 47 nos employees and may be increased/ decreased based on addition of new joinees during the policy period. Premium shall be paid on proportionate basis.



Bid Document No. BGL/569/2023-24

### ANNEXURE – II

## LIST OF DAY CARE TREATMENTS

#### 1 Cardiology Related:

1. CORONARY ANGIOGRAPHY

#### 2 Critical Care Related:

- 2. INSERT NON- TUNNEL CV CATH
- 3. INSERT PICC CATH (PERIPHERALLY INSERTED CENTRAL CATHETER )
- 4. REPLACE PICC CATH (PERIPHERALLY INSERTED CENTRAL CATHETER )
- 5. INSERTION CATHETER, INTRA ANTERIOR
- 6. INSERTION OF PORTACATH

#### 3 Dental Related:

- 7. SUTURING LACERATED LIP
- 8. SUTURING ORAL MUCOSA
- 9. ORAL BIOPSY IN CASE OF ABNORMAL TISSUE PRESENTATION
- 10. FNAC

#### 4 ENT Related:

- 11. MYRINGOTOMY WITH GROMMET INSERTION
- TYMANOPLASTY (CLOSURE OF AN EARDRUM PERFORATION/RECONSTRUCTION OF THE AUDITORY OSSICLES)
  REMOVAL OF A TYMPANIC DRAIN
- 13. REMOVAL OF A LYMPANIC DRAIN
- 14. KERATOSIS REMOVAL UNDER GA
- 15. OPERATIONS ON THE TURBINATES (NASAL CONCHA)
- 16. REMOVAL OF KERATOSIS OBTURANS
- 17. STAPEDOTOMY TO TREAT VARIOUS LESIONS IN MIDDLE EAR
- 18. REVISION OF A STAPEDECTOMY
- 19. OTHER OPERATIONS ON THE AUDITORY OSSICLES
- 20. MYRINGOPLASTY (POST-AURA/ENDAURAL APPROACH AS WELL AS SIMPLE TYPE-I TYMPANOPLASTY)
- 21. FENESTRATION OF THE INNER EAR
- 22. REVISION OF A FENESTRATION OF THE INNER EAR
- 23. PALATOPLASTY
- 24. TRANSORAL INCISION AND DRAINAGE OF A PHARYNGEAL ABSCESS
- 25. TONSILLECTOMY WITHOUT ADENOIDECTOMY
- 26. TONSILLECTOMY WITH ADENOIDECTOMY
- 27. EXCISION AND DESTRUCTION OF A LINGUAL TONSIL
- 28. REVISION OF A TYMPANOPLASTY
- 29. OTHER MICROSURGICAL OPERATIONS ON THE MIDDLE EAR
- 30. INCISION OF THE MASTOID PROCESS AND MIDDLE EAR
- 31. MASTOIDECTOMY
- 32. RECONSTRUCTION OF THE MIDDLE EAR
- 33. OTHER EXCISIONS OF THE MIDDLE AND INNER EAR



Bid Document No. BGL/569/2023-24

- 34 INCISION (OPENING) AND DESTRUCTION (ELIMINATION) OF THE INNER EAR.
- 35. OTHER OPERATIONS ON THE MIDDLE AND INNER EAR
- 36. EXCISION AND DESTRUCTION OF DISEASED TISSUE OF THE NOSE
- 37. OTHER OPERATIONS ON THE NOSE
- 38. NASAL SINUS ASPIRATION
- 39. FOREIGN BODY REMOVAL FROM NOSE
- 40. OTHER OPERATIONS ON THE TONSILS AND ADENOIDS
- 41. ADENOIDECTOMY
- 42. LABYRINTHECTOMY FOR SEVERE VERTIGO
- 43. STAPEDECTOMY UNDER GA
- 44. STAPEDECTOMY UNDER LA
- 45. TYMPANOPLASTY (TYPE IV)
- 46. ENDOLYMPHATIC SAC SURGERY FOR MENIERE'S DISEASE
- 47. TURBINECTOMY
- 48. ENDOSCOPIC STAPEDECTOMY
- 49. INCISION AND DRAINAGE OF PERICHONDRITIS
- 50. SEPTOPLASTY
- 51. VESTIBULAR NERVE SECTION
- 52. THYROPLASTY TYPE I
- 53. PSEUDOCYST OF THE PINNA EXCISION
- 54. INCISION AND DRAINAGE HAEMATOMA AURICLE
- 55. TYMPANOPLASTY (TYPE II)
- 56. REDUCTION OF FRACTURE OF NASAL BONE
- 57. THYROPLASTY TYPE II
- 58. TRACHEOSTOMY
- 59. EXCISION OF ANGIOMA SEPTUM
- 60. TURBINOPLASTY
- 61. INCISION & DRAINAGE OF RETRO PHARYNGEAL ABSCESS
- 62. UVULO PALATO PHARYNGO PLASTY
- 63. ADENOIDECTOMY WITH GROMMET INSERTION
- 64. ADENOIDECTOMY WITHOUT GROMMET INSERTION
- 65. VOCAL CORD LATERALISATION PROCEDURE
- 66. INCISION & DRAINAGE OF PARA PHARYNGEAL ABSCESS
- 67. TRACHEOPLASTY

#### 5 Gastroenterology Related:

- 68. CHOLECYSTECTOMY AND CHOLEDOCHO-JEJUNOSTOMY/ DUODENOSTOMY / GASTROSTOMY / EXPLORATION COMMON BILE DUCT
- 69. ESOPHAGOSCOPY, GASTROSCOPY, DUODENOSCOPY WITH POLYPECTOMY/ REMOVAL OF FOREIGN BODY/DIATHERMY OF BLEEDING LESIONS
- 70. PANCREATIC PSEUDOCYST EUS & DRAINAGE
- 71. RF ABLATION FOR BARRETT'S OESOPHAGUS
- 72. ERCP AND PAPILLOTOMY
- 73. ESOPHAGOSCOPE AND SCLEROSANT INJECTION
- 74. EUS + SUBMUCOSAL RESECTION



Bid Document No. BGL/569/2023-24

- 75. CONSTRUCTION OF GASTROSTOMY TUBE
- 76. EUS + ASPIRATION PANCREATIC CYST
- 77. SMALL BOWEL ENDOSCOPY (THERAPEUTIC)
- 78. COLONOSCOPY ,LESION REMOVAL
- 79. ERCP
- 80. COLONSCOPY STENTING OF STRICTURE
- 81. PERCUTANEOUS ENDOSCOPIC GASTROSTOMY
- 82. EUS AND PANCREATIC PSEUDO CYST DRAINAGE
- 83. ERCP AND CHOLEDOCHOSCOPY
- 84. PROCTOSIGMOIDOSCOPY VOLVULUS DETORSION
- 85. ERCP AND SPHINCTEROTOMY
- 86. ESOPHAGEAL STENT PLACEMENT
- 87. ERCP + PLACEMENT OF BILIARY STENTS
- 88. SIGMOIDOSCOPY W / STENT
- 89. EUS + COELIAC NODE BIOPSY
- 90. UGI SCOPY AND INJECTION OF ADRENALINE, SCLEROSANTS BLEEDING ULCERS

#### 6 General Surgery Related:

- 91. INCISION OF A PILONIDAL SINUS / ABSCESS
- 92. FISSURE IN ANO SPHINCTEROTOMY
- 93. SURGICAL TREATMENT OF A VARICOCELE AND A HYDROCELE OFTHE SPERMATIC CORD
- 94. ORCHIDOPEXY
- 95. ABDOMINAL EXPLORATION IN CRYPTORCHIDISM
- 96. SURGICAL TREATMENT OF ANAL FISTULAS
- 97. DIVISION OF THE ANAL SPHINCTER (SPHINCTEROTOMY)
- 98. EPIDIDYMECTOMY
- 99. INCISION OF THE BREAST ABSCESS
- 100. OPERATIONS ON THE NIPPLE
- 101. EXCISION OF SINGLE BREAST LUMP
- 102. INCISION AND EXCISION OF TISSUE IN THE PERIANAL REGION
- 103. SURGICAL TREATMENT OF HEMORRHOIDS
- 104. OTHER OPERATIONS ON THE ANUS
- 105. ULTRASOUND GUIDED ASPIRATIONS
- 106. SCLEROTHERAPY, ETC.
- 107. LAPAROTOMY FOR GRADING LYMPHOMA WITH SPLENECTOMY/LIVER/LYMPH NODE BIOPSY
- 108. THERAPEUTIC LAPAROSCOPY WITH LASER
- 109. APPENDICECTOMY WITH/WITHOUT DRAINAGE
- 110. INFECTED KELOID EXCISION
- 111. AXILLARY LYMPHADENECTOMY
- 112. WOUND DEBRIDEMENT AND COVER
- 113. ABSCESS-DECOMPRESSION
- 114. CERVICAL LYMPHADENECTOMY
- 115. INFECTED SEBACEOUS CYST
- 116. INGUINAL LYMPHADENECTOMY
- 117. INCISION AND DRAINAGE OF ABSCESS
- 118. SUTURING OF LACERATIONS
- 119. SCALP SUTURING
- 120. INFECTED LIPOMA EXCISION
- 121. MAXIMAL ANAL DILATATION



Bid Document No. BGL/569/2023-24

- 122. PILES
  - A) INJECTION
- 123. LIVER ABSCESS- CATHETER DRAINAGE
- 124. FISSURE IN ANO- FISSURECTOMY
- 125. FIBROADENOMA BREAST EXCISION
- 126. OESOPHAGEAL VARICES SCLEROTHERAPY
- 127. ERCP PANCREATIC DUCT STONE REMOVAL
- 128. PERIANAL ABSCESS I&D
- 129. PERIANAL HEMATOMA EVACUATION
- 130. UGI SCOPY AND POLYPECTOMY OESOPHAGUS
- 131. BREAST ABSCESS I& D
- 132. FEEDING GASTROSTOMY
- 133. OESOPHAGOSCOPY AND BIOPSY OF GROWTH OESOPHAGUS
- 134. ERCP BILE DUCT STONE REMOVAL
- 135. ILEOSTOMY CLOSURE
- 136. COLONOSCOPY
- 137. POLYPECTOMY COLON
- 138. SPLENIC ABSCESSES LAPAROSCOPIC DRAINAGE
- 139. UGI SCOPY AND POLYPECTOMY STOMACH
- 140. RIGID OESOPHAGOSCOPY FOR FB REMOVAL
- 141. FEEDING JEJUNOSTOMY
- 142. COLOSTOMY
- 143. ILEOSTOMY
- 144. COLOSTOMY CLOSURE
- 145. SUBMANDIBULAR SALIVARY DUCT STONE REMOVAL
- 146. PNEUMATIC REDUCTION OF INTUSSUSCEPTION
- 147. VARICOSE VEINS LEGS INJECTION SCLEROTHERAPY
- 148. RIGID OESOPHAGOSCOPY FOR PLUMMER VINSON SYNDROME
- 149. PANCREATIC PSEUDOCYSTS ENDOSCOPIC DRAINAGE
- 150. ZADEK'S NAIL BED EXCISION
- 151. SUBCUTANEOUS MASTECTOMY
- 152. EXCISION OF RANULA UNDER GA
- 153. RIGID OESOPHAGOSCOPY FOR DILATION OF BENIGN STRICTURES
- 154. EVERSION OF SAC -UNILATERAL -BILATERAL
- 155. LORD'S PLICATION
- 156. JABOULAY'S PROCEDURE
- 157. SCROTOPLASTY
- 158. CIRCUMCISION FOR TRAUMA
- 159. MEATOPLASTY
- 160. INTERSPHINCTERIC ABSCESS INCISION AND DRAINAGE
- 161. PSOAS ABSCESS INCISION AND DRAINAGE
- 162. THYROID ABSCESS INCISION AND DRAINAGE
- 163. TIPS PROCEDURE FOR PORTAL HYPERTENSION
- 164. ESOPHAGEAL GROWTH STENT
- 165. PAIR PROCEDURE OF HYDATID CYST LIVER
- 166. TRU CUT LIVER BIOPSY
- 167. PHOTODYNAMIC THERAPY OR ESOPHAGEAL TUMOUR AND LUNG TUMOUR
- 168. EXCISION OF CERVICAL RIB
- 169. LAPAROSCOPIC REDUCTION OF INTUSSUSCEPTION



- 170. MICRODOCHECTOMY BREAST
- 171. SURGERY FOR FRACTURE PENIS
- 172. SENTINEL NODE BIOPSY
- 173. PARASTOMAL HERNIA
- 174. REVISION COLOSTOMY
- 175. PROLAPSED COLOSTOMY- CORRECTION
- 176. TESTICULAR BIOPSY
- 177. LAPAROSCOPIC CARDIOMYOTOMY(HELLERS)
- 178. SENTINEL NODE BIOPSY MALIGNANT MELANOMA
- 179. LAPAROSCOPIC PYLOROMYOTOMY(RAMSTEDT)

#### 7 Gynecology Related:

- 180. OPERATIONS ON BARTHOLIN'S GLANDS (CYST)
- 181. INCISION OF THE OVARY
- 182. INSUFFLATIONS OF THE FALLOPIAN TUBES
- 183. OTHER OPERATIONS ON THE FALLOPIAN TUBE
- 184. DILATATION OF THE CERVICAL CANAL
- 185. CONISATION OF THE UTERINE CERVIX
- 186. THERAPEUTIC CURETTAGE WITH COLPOSCOPY / BIOPSY / DIATHERMY / CRYOSURGERY
- 187. LASER THERAPY OF CERVIX FOR VARIOUS LESIONS OF UTERUS
- 188. OTHER OPERATIONS ON THE UTERINE CERVIX
- 189. INCISION OF THE UTERUS (HYSTERECTOMY)
- 190. LOCAL EXCISION AND DESTRUCTION OF DISEASED TISSUE OF THE VAGINA AND THE POUCH OF DOUGLAS
- 191. INCISION OF VAGINA
- 192. INCISION OF VULVA
- 193. CULDOTOMY
- 194. SALPINGO-OOPHORECTOMY VIA LAPAROTOMY
- 195. ENDOSCOPIC POLYPECTOMY
- 196. HYSTEROSCOPIC REMOVAL OF MYOMA
- 197. D&C
- 198. HYSTEROSCOPIC RESECTION OF SEPTUM
- 199. THERMAL CAUTERISATION OF CERVIX
- 200. MIRENA INSERTION
- 201. HYSTEROSCOPIC ADHESIOLYSIS
- 202. LEEP
- 203. CRYOCAUTERISATION OF CERVIX
- 204. POLYPECTOMY ENDOMETRIUM
- 205. HYSTEROSCOPIC RESECTION OF FIBROID
- 206. LLETZ
- 207. CONIZATION
- 208. POLYPECTOMY CERVIX
- 209. HYSTEROSCOPIC RESECTION OF ENDOMETRIAL POLYP
- 210. VULVAL WART EXCISION
- 211. LAPAROSCOPIC PARAOVARIAN CYST EXCISION
- 212. UTERINE ARTERY EMBOLIZATION
- 213. LAPAROSCOPIC CYSTECTOMY
- 214. HYMENECTOMY( IMPERFORATE HYMEN)
- 215. ENDOMETRIAL ABLATION
- 216. VAGINAL WALL CYST EXCISION
- 217. VULVAL CYST EXCISION



Bid Document No. BGL/569/2023-24

- 218. LAPAROSCOPIC PARATUBAL CYST EXCISION
- 219. REPAIR OF VAGINA (VAGINAL ATRESIA)
- 220. HYSTEROSCOPY, REMOVAL OF MYOMA
- 221. TURBT
- 222. URETEROCOELE REPAIR CONGENITAL INTERNAL
- 223. VAGINAL MESH FOR POP
- 224. LAPAROSCOPIC MYOMECTOMY
- 225. SURGERY FOR SUI
- 226. REPAIR RECTO- VAGINA FISTULA
- 227. PELVIC FLOOR REPAIR( EXCLUDING FISTULA REPAIR)
- 228. URS + LL
- 229. LAPAROSCOPIC OOPHORECTOMY
- 230. NORMAL VAGINAL DELIVERY AND VARIANTS

#### 8 Neurology Related:

- 231. FACIAL NERVE GLYCEROL RHIZOTOMY
- 232. SPINAL CORD STIMULATION
- 233. MOTOR CORTEX STIMULATION
- 234. STEREOTACTIC RADIOSURGERY
- 235. PERCUTANEOUS CORDOTOMY
- 236. INTRATHECAL BACLOFEN THERAPY
- 237. ENTRAPMENT NEUROPATHY RELEASE
- 238. DIAGNOSTIC CEREBRAL ANGIOGRAPHY
- 239. VP SHUNT
- 240. VENTRICULOATRIAL SHUNT

#### 9 Oncology Related:

- 241. RADIOTHERAPY FOR CANCER
- 242. CANCER CHEMOTHERAPY
- 243. IV PUSH CHEMOTHERAPY
- 244. HBI-HEMIBODY RADIOTHERAPY
- 245. INFUSIONAL TARGETED THERAPY
- 246. SRT-STEREOTACTIC ARC THERAPY
- 247. SC ADMINISTRATION OF GROWTH FACTORS
- 248. CONTINUOUS INFUSIONAL CHEMOTHERAPY
- 249. INFUSIONAL CHEMOTHERAPY
- 250. CCRT-CONCURRENT CHEMO + RT
- 251. 2D RADIOTHERAPY
- 252. 3D CONFORMAL RADIOTHERAPY
- 253. IGRT- IMAGE GUIDED RADIOTHERAPY
- 254. IMRT- STEP & SHOOT
- 255. INFUSIONAL BISPHOSPHONATES
- 256. IMRT-DMLC
- 257. ROTATIONAL ARC THERAPY
- 258. TELE GAMMA THERAPY
- 259. FSRT-FRACTIONATED SRT
- 260. VMAT-VOLUMETRIC MODULATED ARC THERAPY
- 261. SBRT-STEREOTACTIC BODY RADIOTHERAPY
- 262. HELICAL TOMOTHERAPY
- 263. SRS-STEREOTACTIC RADIOSURGERY
- 264. X-KNIFE SRS
- 265. GAMMAKNIFE SRS



Bid Document No. BGL/569/2023-24

- 266. TBI- TOTAL BODY RADIOTHERAPY 267. INTRALUMINAL BRACHYTHERAPY 268. ELECTRON THERAPY 269. TSET-TOTAL ELECTRON SKIN THERAPY 270. EXTRACORPOREAL IRRADIATION OF BLOOD PRODUCTS 271. TELECOBALT THERAPY 272. TELECESIUM THERAPY 273. EXTERNAL MOULD BRACHYTHERAPY 274. INTERSTITIAL BRACHYTHERAPY 275. INTRACAVITY BRACHYTHERAPY 276. 3D BRACHYTHERAPY 277. IMPLANT BRACHYTHERAPY 278. INTRAVESICAL BRACHYTHERAPY 279. ADJUVANT RADIOTHERAPY 280. AFTERLOADING CATHETER BRACHYTHERAPY 281. CONDITIONING RADIOTHEARPY FOR BMT 282. NERVE BIOPSY 283. MUSCLE BIOPSY 284. EPIDURAL STEROID INJECTION 285. EXTRACORPOREAL IRRADIATION TO THE HOMOLOGOUS BONE GRAFTS 286. RADICAL CHEMOTHERAPY 287. NEOADJUVANT RADIOTHERAPY 288. LDR BRACHYTHERAPY 289. PALLIATIVE RADIOTHERAPY 290. RADICAL RADIOTHERAPY 291. PALLIATIVE CHEMOTHERAPY 292. TEMPLATE BRACHYTHERAPY 293. NEOADJUVANT CHEMOTHERAPY 294. ADJUVANT CHEMOTHERAPY 295. INDUCTION CHEMOTHERAPY 296. CONSOLIDATION CHEMOTHERAPY 297. MAINTENANCE CHEMOTHERAPY 298. HDR BRACHYTHERAPY 10 Operations on the salivary glands & salivary ducts: 299. INCISION AND LANCING OF A SALIVARY GLAND AND A SALIVARY DUCT 300. EXCISION OF DISEASED TISSUE OF A SALIVARY GLAND AND A SALIVARY DUCT 301. RESECTION OF A SALIVARY GLAND 302. RECONSTRUCTION OF A SALIVARY GLAND AND A SALIVARY DUCT 303. OTHER OPERATIONS ON THE SALIVARY GLANDS AND SALIVARY DUCTS 11 Operations on the skin & subcutaneous tissues: 304. OTHER INCISIONS OF THE SKIN AND SUBCUTANEOUS TISSUES 305. SURGICAL WOUND TOILET (WOUND DEBRIDEMENT) AND REMOVAL OF DISEASED TISSUE OF THE SKIN AND SUBCUTANEOUS TISSUES
  - 306. LOCAL EXCISION OF DISEASED TISSUE OF THE SKIN AND SUBCUTANEOUS TISSUES
  - 307. OTHER EXCISIONS OF THE SKIN AND SUBCUTANEOUS TISSUES
  - 308. SIMPLE RESTORATION OF SURFACE CONTINUITY OF THE SKIN AND SUBCUTANEOUS TISSUES
  - 309. FREE SKIN TRANSPLANTATION, DONOR SITE

(Sign & Seal of Bidder)

Page 18 of 33



Bid Document No. BGL/569/2023-24

- 310. FREE SKIN TRANSPLANTATION, RECIPIENT SITE
- 311. REVISION OF SKIN PLASTY
- 312. OTHER RESTORATION AND RECONSTRUCTION OF THE SKIN AND SUBCUTANEOUS TISSUES.
- 313. CHEMOSURGERY TO THE SKIN.
- 314. DESTRUCTION OF DISEASED TISSUE IN THE SKIN AND SUBCUTANEOUS TISSUES
- 315. RECONSTRUCTION OF DEFORMITY/DEFECT IN NAIL BED
- 316. EXCISION OF BURSIRTIS
- 317. TENNIS ELBOW RELEASE

#### **12** Operations on the Tongue:

- 318. INCISION, EXCISION AND DESTRUCTION OF DISEASED TISSUE OF THE TONGUE
- 319. PARTIAL GLOSSECTOMY
- 320. GLOSSECTOMY
- 321. RECONSTRUCTION OF THE TONGUE
- 322. OTHER OPERATIONS ON THE TONGUE

#### 13 Ophthalmology Related

- 323. SURGERY FOR CATARACT
- 324. INCISION OF TEAR GLANDS
- 325. OTHER OPERATIONS ON THE TEAR DUCTS
- 326. INCISION OF DISEASED EYELIDS
- 327. EXCISION AND DESTRUCTION OF DISEASED TISSUE OF THE EYELID
- 328. OPERATIONS ON THE CANTHUS AND EPICANTHUS
- 329. CORRECTIVE SURGERY FOR ENTROPION AND ECTROPION
- 330. CORRECTIVE SURGERY FOR BLEPHAROPTOSIS
- 331. REMOVAL OF A FOREIGN BODY FROM THE CONJUNCTIVA
- 332. REMOVAL OF A FOREIGN BODY FROM THE CORNEA
- 333. INCISION OF THE CORNEA
- 334. OPERATIONS FOR PTERYGIUM
- 335. OTHER OPERATIONS ON THE CORNEA
- 336. REMOVAL OF A FOREIGN BODY FROM THE LENS OF THE EYE
- 337. REMOVAL OF A FOREIGN BODY FROM THE POSTERIOR CHAMBER OF THE EYE
- 338. REMOVAL OF A FOREIGN BODY FROM THE ORBIT AND EYEBALL
- 339. CORRECTION OF EYELID PTOSIS BY LEVATOR PALPEBRAE SUPERIORIS RESECTION (BILATERAL)
- 340. CORRECTION OF EYELID PTOSIS BY FASCIA LATA GRAFT (BILATERAL)
- 341. DIATHERMY/CRYOTHERAPY TO TREAT RETINAL TEAR
- 342. ANTERIOR CHAMBER PARACENTESIS / CYCLODIATHERMY / CYCLOCRYOTHERAPY / GONIOTOMY / TRABECULOTOMY AND FILTERING AND ALLIED OPERATIONS TO TREAT GLAUCOMA
- 343. ENUCLEATION OF EYE WITHOUT IMPLANT
- 344. DACRYOCYSTORHINOSTOMY FOR VARIOUS LESIONS OF LACRIMAL GLAND
- 345. LASER PHOTOCOAGULATION TO TREAT RATINAL TEAR
- 346. BIOPSY OF TEAR GLAND
- 347. TREATMENT OF RETINAL LESION

#### 14 Orthopedics Related:



Bid Document No. BGL/569/2023-24

- 348. SURGERY FOR MENISCUS TEAR
- 349. INCISION ON BONE, SEPTIC AND ASEPTIC
- 350. CLOSED REDUCTION ON FRACTURE, LUXATION OR EPIPHYSEOLYSIS WITH OSTEOSYNTHESIS
- 351. SUTURE AND OTHER OPERATIONS ON TENDONS AND TENDON SHEATH
- 352. REDUCTION OF DISLOCATION UNDER GA
- 353. ARTHROSCOPIC KNEE ASPIRATION
- 354. SURGERY FOR LIGAMENT TEAR
- 355. SURGERY FOR HEMOARTHROSIS/PYOARTHROSIS
- 356. REMOVAL OF FRACTURE PINS/NAILS
- 357. REMOVAL OF METAL WIRE
- 358. CLOSED REDUCTION ON FRACTURE, LUXATION
- 359. REDUCTION OF DISLOCATION UNDER GA
- 360. EPIPHYSEOLYSIS WITH OSTEOSYNTHESIS
- 361. EXCISION OF VARIOUS LESIONS IN COCCYX
- 362. ARTHROSCOPIC REPAIR OF ACL TEAR KNEE
- 363. CLOSED REDUCTION OF MINOR FRACTURES
- 364. ARTHROSCOPIC REPAIR OF PCL TEAR KNEE
- 365. TENDON SHORTENING
- 366. ARTHROSCOPIC MENISCECTOMY KNEE
- 367. TREATMENT OF CLAVICLE DISLOCATION
- 368. HAEMARTHROSIS KNEE- LAVAGE
- 369. ABSCESS KNEE JOINT DRAINAGE
- 370. CARPAL TUNNEL RELEASE
- 371. CLOSED REDUCTION OF MINOR DISLOCATION
- 372. REPAIR OF KNEE CAP TENDON
- 373. ORIF WITH K WIRE FIXATION- SMALL BONES
- 374. RELEASE OF MIDFOOT JOINT
- 375. ORIF WITH PLATING- SMALL LONG BONES
- 376. IMPLANT REMOVAL MINOR
- 377. K WIRE REMOVAL
- 378. CLOSED REDUCTION AND EXTERNAL FIXATION
- 379. ARTHROTOMY HIP JOINT
- 380. SYME'S AMPUTATION
- 381. ARTHROPLASTY
- 382. PARTIAL REMOVAL OF RIB
- 383. TREATMENT OF SESAMOID BONE FRACTURE
- 384. SHOULDER ARTHROSCOPY / SURGERY
- 385. ELBOW ARTHROSCOPY
- 386. AMPUTATION OF METACARPAL BONE

387. RELEASE OF THUMB CONTRACTURE

388. INCISION OF FOOT FASCIA

389. PARTIAL REMOVAL OF METATARSAL

- 390. REPAIR / GRAFT OF FOOT TENDON
- 391. REVISION/REMOVAL OF KNEE CAP

392. AMPUTATION FOLLOW-UP SURGERY

393. EXPLORATION OF ANKLE JOINT

394. REMOVE/GRAFT LEG BONE LESION

395. REPAIR/GRAFT ACHILLES TENDON

396. REMOVE OF TISSUE EXPANDER

397. BIOPSY ELBOW JOINT LINING

398. REMOVAL OF WRIST PROSTHESIS



#### Bid Document No. BGL/569/2023-24

401. TREATMENT OF SHOULDER DISLOCATION

411. REMOVAL OF TUMOR OF ARM/ ELBOW UNDER RA/GA

412. REPAIR OF RUPTURED TENDON

399. BIOPSY FINGER JOINT LINING **400. TENDON LENGTHENING** 

**402. LENGTHENING OF HAND TENDON** 403. REMOVAL OF ELBOW BURSA 404. FIXATION OF KNEE JOINT

**405. TREATMENT OF FOOT DISLOCATION** 

**407. TENDON TRANSFER PROCEDURE** 408. REMOVAL OF KNEE CAP BURSA 409. TREATMENT OF FRACTURE OF ULNA 410. TREATMENT OF SCAPULA FRACTURE

413. DECOMPRESS FOREARM SPACE

414. REVISION OF NECK MUSCLE (TORTICOLLIS RELEASE)

- 415. LENGTHENING OF THIGH TENDONS
- 416. TREATMENT FRACTURE OF RADIUS & ULNA
- 417. REPAIR OF KNEE JOINT

406. SURGERY OF BUNION

#### 15 Other operations on the mouth & face:

- 418. EXTERNAL INCISION AND DRAINAGE IN THE REGION OF THE MOUTH, JAW AND FACE
- 419. INCISION OF THE HARD AND SOFT PALATE
- 420. EXCISION AND DESTRUCTION OF DISEASED HARD AND SOFT PALATE
- 421. INCISION, EXCISION AND DESTRUCTION IN THE MOUTH
- 422. OTHER OPERATIONS IN THE MOUTH

#### 16 Pediatric surgery Related:

423. EXCISION OF FISTULA-IN-ANO

424. EXCISION JUVENILE POLYPS RECTUM

425. VAGINOPLASTY

426. DILATATION OF ACCIDENTAL CAUSTIC STRICTURE OESOPHAGEAL

427. PRESACRAL TERATOMAS EXCISION

**428. REMOVAL OF VESICAL STONE** 

429. EXCISION SIGMOID POLYP

430. STERNOMASTOID TENOTOMY

431. INFANTILE HYPERTROPHIC PYLORIC STENOSISPYLOROMYOTOMY

- 432. EXCISION OF SOFT TISSUE RHABDOMYOSARCOMA
  - 433. MEDIASTINAL LYMPH NODE BIOPSY
  - 434. HIGH ORCHIDECTOMY FOR TESTIS TUMOURS
  - 435. EXCISION OF CERVICAL TERATOMA
  - 436. RECTAL-MYOMECTOMY
  - 437. RECTAL PROLAPSE (DELORME'S PROCEDURE)
  - 438. DETORSION OF TORSION TESTIS
  - 439. EUA + BIOPSY MULTIPLE FISTULA IN ANO

#### 17 **Plastic Surgery Related:**

- 440. CONSTRUCTION SKIN PEDICLE FLAP
- 441. GLUTEAL PRESSURE ULCER-EXCISION
- 442. MUSCLE-SKIN GRAFT, LEG
- 443. REMOVAL OF BONE FOR GRAFT



Bid Document No. BGL/569/2023-24

- 444. MUSCLE-SKIN GRAFT DUCT FISTULA
- 445. REMOVAL CARTILAGE GRAFT
- 446. MYOCUTANEOUS FLAP
- 447. FIBRO MYOCUTANEOUS FLAP
- 448. BREAST RECONSTRUCTION SURGERY AFTER MASTECTOMY
- 449. SLING OPERATION FOR FACIAL PALSY
- 450. SPLIT SKIN GRAFTING UNDER RA
- 451. WOLFE SKIN GRAFT
- 452. PLASTIC SURGERY TO THE FLOOR OF THE MOUTH UNDER GA

#### **18** Thoracic surgery Related:

- 453. THORACOSCOPY AND LUNG BIOPSY
- 454. EXCISION OF CERVICAL SYMPATHETIC CHAIN THORACOSCOPIC
- 455. LASER ABLATION OF BARRETT'S OESOPHAGUS
- 456. PLEURODESIS
- 457. THORACOSCOPY AND PLEURAL BIOPSY
- 458. EBUS + BIOPSY
- 459. THORACOSCOPY LIGATION THORACIC DUCT
- 460. THORACOSCOPY ASSISTED EMPYAEMA DRAINAGE

#### **19** Urology Related:

- 461. HAEMODIALYSIS
- 462. LITHOTRIPSY/NEPHROLITHOTOMY FOR RENAL CALCULUS
- 463. EXCISION OF RENAL CYST
- 464. DRAINAGE OF PYONEPHROSIS/PERINEPHRIC ABSCESS
- 465. INCISION OF THE PROSTATE
- 466. TRANSURETHRAL EXCISION AND DESTRUCTION OF PROSTATE TISSUE
- 467. TRANSURETHRAL AND PERCUTANEOUS DESTRUCTION OF PROSTATE TISSUE
- 468. OPEN SURGICAL EXCISION AND DESTRUCTION OF PROSTATE TISSUE
- 469. RADICAL PROSTATOVESICULECTOMY
- 470. OTHER EXCISION AND DESTRUCTION OF PROSTATE TISSUE
- 471. OPERATIONS ON THE SEMINAL VESICLES
- 472. INCISION AND EXCISION OF PERIPROSTATIC TISSUE
- 473. OTHER OPERATIONS ON THE PROSTATE
- 474. INCISION OF THE SCROTUM AND TUNICA VAGINALIS TESTIS
- 475. OPERATION ON A TESTICULAR HYDROCELE
- 476. EXCISION AND DESTRUCTION OF DISEASED SCROTAL TISSUE
- 477. OTHER OPERATIONS ON THE SCROTUM AND TUNICA VAGINALIS TESTIS
- 478. INCISION OF THE TESTES
- 479. EXCISION AND DESTRUCTION OF DISEASED TISSUE OF THE TESTES
- 480. UNILATERAL ORCHIDECTOMY
- 481. BILATERAL ORCHIDECTOMY
- 482. SURGICAL REPOSITIONING OF AN ABDOMINAL TESTIS
- 483. RECONSTRUCTION OF THE TESTIS
- 484. IMPLANTATION, EXCHANGE AND REMOVAL OF A TESTICULAR PROSTHESIS
- 485. OTHER OPERATIONS ON THE TESTIS
- 486. EXCISION IN THE AREA OF THE EPIDIDYMIS
- 487. OPERATIONS ON THE FORESKIN
- 488. LOCAL EXCISION AND DESTRUCTION OF DISEASED TISSUE OF THE PENIS
- 489. AMPUTATION OF THE PENIS
- 490. OTHER OPERATIONS ON THE PENIS



Bid Document No. BGL/569/2023-24

	Dia Document No. Dally 5057 2025 21	
	CYSTOSCOPICAL REMOVAL OF STONES	
-	LITHOTRIPSY	
	BIOPSY OFTEMPORAL ARTERY FOR VARIOUS LESIONS	
-	EXTERNAL ARTERIO-VENOUS SHUNT	
	AV FISTULA - WRIST	
	URSL WITH STENTING	
	URSL WITH LITHOTRIPSY	
	CYSTOSCOPIC LITHOLAPAXY	
	ESWL	
500.		
501.		
502.		
503.	SUPRAPUBIC CYSTOSTOMY	
504.	PERCUTANEOUS NEPHROSTOMY	
505.	CYSTOSCOPY AND "SLING" PROCEDURE.	
506.	TUNA- PROSTATE	
507.	EXCISION OF URETHRAL DIVERTICULUM	
508.	REMOVAL OF URETHRAL STONE	
509.	EXCISION OF URETHRAL PROLAPSE	
510.	MEGA-URETER RECONSTRUCTION	
511.	KIDNEY RENOSCOPY AND BIOPSY	
512.	URETER ENDOSCOPY AND TREATMENT	
513.	VESICO URETERIC REFLUX CORRECTION	
514.	SURGERY FOR PELVI URETERIC JUNCTION OBSTRUCTION	
515.	ANDERSON HYNES OPERATION	
516.	KIDNEY ENDOSCOPY AND BIOPSY	
517.	PARAPHIMOSIS SURGERY	
518.	INJURY PREPUCE- CIRCUMCISION	
519.	FRENULAR TEAR REPAIR	
520.	MEATOTOMY FOR MEATAL STENOSIS	
521.	SURGERY FOR FOURNIER'S GANGRENE SCROTUM	
522.	SURGERY FILARIAL SCROTUM	
523.	SURGERY FOR WATERING CAN PERINEUM	
524.	REPAIR OF PENILE TORSION	
525.	DRAINAGE OF PROSTATE ABSCESS	
	ORCHIECTOMY	
526. 527.	CYSTOSCOPY AND REMOVAL OF FB	



Bid Document No. BGL/569/2023-24

## **SECTION 7**

## **SPECIAL CONDITIONS OF CONTRACT**



Bid Document No. BGL/569/2023-24

### **SPECIAL CONDITIONS OF CONTRACT:**

#### **GENERAL INFORMATION: -**

The special conditions of contract shall be read in conjunction with general condition of contract (GCC), if any, Schedule of rates, scope of work and any other document forming part of contract, wherever Context so Requires. GCC, if any is available at tender issuing office and same shall be referred to by Tendered. Notwithstanding, the subdivisions of the documents in to separate sections every part of each shall be deemed to be supplementary of every other part and shall be read with and into the Contract so for as it may be practicable to do so. Where any portion of the special conditions of the Contract (SCC) is repugnant to or at variance with any provisions of the GCC, if any then provision of SCC Shall be deemed to override the provision of GCC only to the extent of each repugnance or variations. In case of any contradictions the Decision of the Engineer-I In-Charge will be final and binding on the Contractor.

1) CONTRACT PERIOD /VALIDITY: One year from the date of Issuance of Insurance Policy for SOR Part -A & SOR Part-B.

#### 2) VALIDITY OF QUOTED RATES/PRICES

The quoted / accepted rates shall remain valid for the entire duration of the Contract, and no escalation, for whatsoever reason, shall be permissible at a later date in cluding applicable stamp duties.

- 3) Performance Security & Defect Liability Period (DLP) Period Not Applicable.
- 4) Payment Terms/Premium Amount:
  - SOR Part -A: 100% premium amount shall be paid in advance along with placement of Purchase Order.
  - SOR Part -A: 100% premium amount shall be paid after the receipt of amount after the disbursal of claims/ reimbursements on actual basis. Vendor to submit receipt of Invoices in a individual claims or as a lot with supporting documents.

#### 5) OTHER CONDITIONS

- The entire scope of coverage as specified in the Bidding Document shall be treated a. as Insurance Contract.
- b. The bidder shall quote the premium rates and total premium against respective areas of coverage for respective sum insured as per format of price Schedule. The total premium will be inclusive of all expenditures to be incurred by the bidders and applicable taxes, duties, GST and surcharge etc. and no expenditure other than those quoted in the SOR will be paid by Bhagyanagar Gas Limited on any account for the defined scope of coverage.



c. All premium rates & Total premium to be quoted by the bidders will be in Indian Rupees only on firm price basis and shall remain valid during the currency of the policy.

#### 6. **RESPONSIBILITY OF INSURER**

The following terms and conditions shall have the meaning hereby assigned to them except where the context otherwise requires:

- i. The bidders are required to quote the premium rates strictly as per IRDA tariff provisions and violation/breach of IRDA tariff provisions will not be accepted. In case of any violation of the IRDA tariff provisions by the insurance company, in the quotation, Bhagyanagar Gas Limited will not be liable for any differential premium in any case. Also there will be no effect on the settlement of the claims.
- ii. The terms & conditions of cover and the wordings of the policies, warranties and clauses should be strictly inline with IRDA provisions & draft policy issued by IRDA from time to time.
- iii. The rates quoted should be with minimum excess as stipulated in the IRDA tariff.
- iv. Bidders are required to quote for entire scope of insurance cover as mentioned in the bid document

#### 7. ADDITIONAL DOCUMENTS REQUIRED:

I. Letter of confirmation by bidder regarding compliance of guidelines, circulars and amendments thereof issued by IRDA from time to time. (as per annexure – A) below:

#### **ANNEXURE - A**

#### To Bhagyanagar Gas Limited Hyderabad

#### Sub: Tender ref: BGL/531/2021-22

It is hereby certified that the quotations given by us against tender no....... dt........ are as per IRDA provisions and that there is no violation of the IRDA provisions whatsoever. In case of any violation of the tariff provisions by the insurance company, in the quotation, Bhagyanagar Gas Limited would not be liable for any differential premium in any case. Also there would be no effect on the settlement of the claims. However, in case there is any downward movement of the tariff provisions, which are applicable to Bhagyanagar Gas Limited , the insurance company would ensure that the same is passed on to Bhagyanagar Gas Limited.

Further we hereby confirm that we are competent enough to handle upto 100%, if provided to us.

On Behalf of the Insurer

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(Sign & Seal of Bidder)

Page 26 of 33



Bid Document No. BGL/569/2023-24

Authorized Signatory with designation

Place : Date :

Bhagyanagar Gas Ltd.	
Bhagyanagar Gas Limited	5

Hiring of Group Medical Insurance Family Floater Policy for BGL Employees & Dependents	Volume II of II
Bid Document No. BGL/569/2023-24	volume ii oi ii

#### ANNEXURE-III

Reimbursement & Cashless Details of existing policy (Claims Dumb)

Period from: 14-04-2022 TO 04-04-2023

	Claims	Value (Rs.)	% Claims	% Claims
Cashless Settled	7	2,10,313.00	100.00%	100.00%
Cashless Processed	0	0.00	0.00%	0.00%
Reimbursement Settled	0	0.00	0.00%	0.00%
Reimbursement Processed	0	0.00	0.00%	0.00%
Denials	0	0.00	0.00%	0.00%
Denials due to Shortfall	0	0.00	0.00%	0.00%
Closed	0	0.00	0.00%	0.00%
Domicilary claims	0	0.00	0.00%	0.00%
Total	7	2,10,313.00		
Cashless in Process*	0	0.00		
Reimbursement in Process*	1	1.00		
Grand Total (Rs.)	8	2,10,314.00		
First Time Premium (Rs.)^				17,00,000.00
Endo Premium (Rs.)^				0.00
Deletion Premium (Rs.)^				12,089.00
Total Premium (Rs.)^			16,87,911.00	
Claims Ratio (%)				12.46%
Claims Ratio (%) - On Earned Premium#				12.78%

#### **Total Claims Experience Report**



Bid Document No. BGL/569/2023-24

Volume II of II

Blu Document No. BGL/309/2023-24

Value of Denied claims (Rs.):		0.00
Value of Denied(Document Shortfall) claims (Rs.):		0.00
Value of Closed claims (Rs.):		0.00

\* Depicts the claimed amount for claims in process. The settlement amount will be less than the above figures and will result in respective decrease in the claims ratio.

\*\* The value is for preauthorisation issued and awaiting for final documentation. Depicts the Processed PA amount for PA issued. The settlement amount will be less than or equal to the above figures and could result in respective decrease in the claims ratio.

# Does not apply to policies with Instalment Premium

^ Premium as made available and updated in our system is shown above. This may vary from figures as per Insurer and have corresponding impact on the ICR and ICR on Earned Premium shown in the report.

#### Morbidity Ratio

Descriptions	Values
No. of lives Insured	137
No. of Claims	8
No. of Claims made per 100 Lives Insured	5.84%
No. of lives Inception	136
Addition	1
Deletion	0
CurrentLives	137



Bid Document No. BGL/569/2023-24

Volume II of II

# **SECTION – 8**

## **SCHEDULE OF RATES (SOR)**

(Sign & Seal of Bidder)

Page 30 of 33

Bhagyan	Hiring of Group Med for BGL H					ter Policy	Volume	e II of II		
Bhagyar	nagar Gas Bid Docum	ent No. B	GL/56	9/2	023-24	ł				
	Item: Group <b>N</b>	Medical In	ocume	CHE Fin nt ro e Fa	DULE ancial ef: BGL mily F	gar Gas Lin OF RATES Bid / Priced //569/2023-2 loater Policy	(SOR) Bid 4, dtd. 06		ees & Dependent:	δ.
		Na	me of t	he V	endor					
Sr. No.	Description	SAC Code	Uo	Μ	Qty	Basic Premium in Rs.	GST (%)	GST (Rs)	Total premium amount Premium all incl. of taxes & duties in Rs. (in figures)	Total premium amount Premium all incl. of taxes & duties in Rs. (in words)
1		2	3	4	5	6	7	8 =7 X6	9	10
	SOR Part-A: Mediclaim Insurance									
1	Providing Group Medical Insurance Policy for BGL		Lu	mp	1			0	0	

Employees as per scope of vork in bid document for One				•				
1) Year		sum						
SOR Part-B.								
<b>SOR Part-B.</b> Insurance Policy for any illness of the family, to an extent of Rs.15000/- per family, which will be reimbursed to the insured on production of prescription, dispensary bills on actuals, any X-rays, scans or liagnostic reports, recommended by the attending doctor.								
Charges for any illness of the amily, to an extent of Rs.15000/- per family. (total: 7 nos) for a period of 01 (one) year.		Lump sum	1			0	0	
	<b>SOR Part-B.</b> Insurance Policy for any illness of the family, to an extent of Rs.15000/- per amily, which will be reimbursed to the insured on production of prescription, dispensary bills on ctuals, any X-rays, scans or liagnostic reports, recommended by the attending doctor. Charges for any illness of the amily, to an extent of <b>Rs.15000/- per family. (total:</b> <b>7 nos) for a period of 01 (one)</b>	SOR Part-B. Insurance Policy for any illness of the family, to an extent of Rs.15000/- per amily, which will be reimbursed o the insured on production of orescription, dispensary bills on ctuals, any X-rays, scans or liagnostic reports, recommended by the attending doctor.Charges for any illness of the amily, to an extent of Rs.15000/- per family. (total: 7 nos) for a period of 01 (one)	SOR Part-B. Insurance Policy for any illness of the family, to an extent of Rs.15000/- per amily, which will be reimbursed to the insured on production of orescription, dispensary bills on ctuals, any X-rays, scans or liagnostic reports, recommended by the attending doctor.Lump sumCharges for any illness of the amily, to an extent of Rs.15000/- per family. (total: 7 nos) for a period of 01 (one)Lump	SOR Part-B. Insurance Policy for any illness of the family, to an extent of Rs.15000/- per amily, which will be reimbursed to the insured on production of orescription, dispensary bills on ctuals, any X-rays, scans or liagnostic reports, recommended by the attending doctor.Lump 1 	SOR Part-B. Insurance Policy for any illness of the family, to an extent of Rs.15000/- per amily, which will be reimbursed to the insured on production of orescription, dispensary bills on ctuals, any X-rays, scans or liagnostic reports, recommended by the attending doctor.Lump 1 sumCharges for any illness of the amily, to an extent of Rs.15000/- per family. (total: 7 nos) for a period of 01 (one)Lump	<b>BOR Part-B.</b> Insurance Policy     for any illness of the family, to     in extent of Rs.15000/- per     amily, which will be reimbursed     o the insured on production of     prescription, dispensary bills on     ctuals, any X-rays, scans or     liagnostic reports, recommended     by the attending doctor.     Charges for any illness of the     amily, to an extent of <b>Ss.15000/- per family. (total: 7 nos) for a period of 01 (one)</b>	SOR Part-B. Insurance Policy for any illness of the family, to n extent of Rs.15000/- per amily, which will be reimbursed to the insured on production of orrescription, dispensary bills on ctuals, any X-rays, scans or liagnostic reports, recommended by the attending doctor.Lump 10Charges for any illness of the amily, to an extent of Rs.15000/- per family. (total: 7 nos) for a period of 01 (one)Lump 10	SOR Part-B. Insurance Policy for any illness of the family, to in extent of Rs.15000/- per amily, which will be reimbursed to the insured on production of orescription, dispensary bills on ctuals, any X-rays, scans or liagnostic reports, recommended by the attending doctor.Image: Charges for any illness of the amily, to an extent of Rs.15000/- per family. (total: 17 nos) for a period of 01 (one)Image: Lump sumImage: Charges for any illness of the sumImage: Charges for any illness



Hiring of Group Medical Insurance Family Floater Policy for BGL Employees & Dependents	Volume II of II
Bid Document No. BGL/569/2023-24	

### Notes:

- 1. The bids shall be evaluated based on Net Premium quoted by the Insurer in the SOR. Bid quoted with lowest Net Premium charges shall be considered for award of work.
- 2. The applicable rate of service tax shall be paid extra at actual against documentary proof. However, for evaluation purpose GST @ 18% shall be considered.
- 3. Evaluation for SOR Part A & SOR Part B shall be evaluated separately. Award shall be done on least cost basis to each SOR part.
- 4. SOR Part B-- Reimbursement for OPD(Out-Patient Dept) Expenses shall be paid on actual utilizations amount . The total count in tender is for 47 nos employees and may be increased/ decreased based on addition of new joinees during the policy period.