

**AAROgyASRI COMMUNITY HEALTH INSURANCE SCHEME  
FOR  
BELOW POVERTY LINE FAMILIES  
IN  
MAHABOObNAGAR, ANANTAPUT AND SRIKAKULAM DISTRICTS**

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Competitive Quotations are invited from Insurance companies (Licensed and Registered with IRDA) dealing with Health Insurance for implementation of Aarogyasri Community Health Insurance Scheme for BPL families in 3 select districts of Andhra Pradesh.

Technical and Financial Bid documents can be obtained from below mentioned address OR downloaded from website <http://dme.ap.nic.in>. The completed Bid documents should be submitted before 12:00 Hours of 29<sup>th</sup> January 2007, at the following address:

Dr.Ch.Chandrasekhar,  
Jt. Director & Person in-charge – Health Insurance  
O/o. Director of Medical Education,  
Sultan Bazar, Koti, Hyderabad – 500 095.

Phone: 040-24656909  
Fax: 040-65580942  
e-mail: [dme@ap.nic.in](mailto:dme@ap.nic.in)

All correspondence / communications on the scheme should be made at the above address.

**PRINCIPAL SECRETARY TO GOVERNMENT,  
HEALTH, MEDICAL AND FAMILY WELFARE DEPARTMENT  
GOVERNMENT OF ANDHRA PRADESH**

**AAROGYASRI COMMUNITY HEALTH INSURANCE SCHEME**  
**FOR BPL POPULATION IN 3 DISTRICTS OF ANDHRA PRADESH**

There is a felt need in the State to provide financial protection to families living below poverty line for the treatment of major ailments such as cancer, kidney failure, heart and neurosurgical diseases etc., requiring hospitalization and surgery. Government hospitals lack the requisite facility and the specialist pool of doctors to meet the state wide requirement for the treatment of such diseases. Large proportions of people, especially below poverty line borrow money or sell assets to pay for treatment in private hospitals. Health Insurance could be a way of removing the financial barriers and improving access of poor to quality medical care; of providing financial protection against high medical expenses; and negotiating with the providers for better quality care. Government of Andhra Pradesh have accordingly formulated this scheme for implementation on a pilot basis in three most backward districts of the State viz., Anantapur, Mahaboobnagar and Srikakulam. "Aarogyasri Health Care Trust" has been set up to act as "State level nodal agency" for the implementation of the Scheme.

In order to operate the scheme professionally in a cost effective manner, public private partnership is envisaged between the Insurance Company, the private sector hospitals and the State agencies. On request, State Government / Trust will assist the Insurance Company in establishing network of hospitals, fixing of treatment protocol and costs, treatment authorization, claims scrutiny and any other related work, such that the cost of administering the scheme is kept at the lowest, while making the full use of resources available in the Government system. Private hospitals fulfilling minimum qualifications in terms of availability of inpatient medical beds, laboratory, equipment, operation theatres etc. and a track record in the treatment of specified diseases can be enlisted for providing treatment to the BPL families under the scheme. An illustrative list of such specialty hospitals, recognized by the Directorate of Medical Education (DME) for medical reimbursement purpose is enclosed as **Annexure-3**. Premium under this scheme shall be borne by the Government / Trust.

AROGYASRI COMMUNITY HEALTH INSURANCE SCHEME  
FOR BPL FAMILIES IN THE STATE OF ANDHRA PRADESH

**1.0 Name:**

The name of the scheme shall be “**AROGYA SRI COMMUNITY HELATH INSURANCE SHCEME**”.

**2.0 Objective:**

To improve access of BPL families to quality medical care for treatment of diseases involving hospitalization and surgery through an identified network of health care providers. In the initial phase, the scheme would provide coverage for the following system;

- i) Heart,
- ii) Cancer,
- iii) Neurosurgery,
- iv) Renal diseases,
- v) Burns,
- vi) Poly trauma cases. not covered by the Motor Vehicle Act

Detailed list of surgeries falling in the identified groups is given at **Annexure-4**.

**3.0 Beneficiaries:**

The scheme is intended to benefit below poverty line (BPL) population in the 3 backward districts of the State viz., Anantapur, Mahaboobnagar and Srikakulam on pilot basis. According to a recent enumeration, there are 23,16,426 BPL families on three districts of the State, comprising of a population of 8339854. Database and photograph in electronic format of these families is available in white rations cards issued by the Civil Supplies Department. District wise profile of the BPL families is give below:

<b>S.No.</b>	<b>Name of the District</b>	<b>No. of BPL families</b>	<b>Total BPL Population</b>
1	Anantapur	870616	3134218
2	Mahaboobnagar	781777	2814397
3	Srikakulam	2316426	8339854
	Total	2316426	8339854

**Note:** Such of the white ration card holders who are covered for the specified diseases by other insurance scheme such as CGHS, ESIS, Railway, RTC etc., will not be eligible for any benefit under the scheme.

### **3.1 Family:**

Means head of the family, spouse, dependent children and dependent parents as enumerated and photographed on the white ration card. The photograph indicated in the white card will be taken as the proof for determining the eligibility of the beneficiary. Any addition of family member during the currency of the policy shall not be considered. Such additions shall be included at the time of renewal of the policy provided the name has been incorporated in the White Ration Card.

### **3.2 Enrollment:**

GoAP / Trust will provide the details of each BPL family covered under the Scheme electronically through the white ration card. This card will be a part of enrolment / identification for availing the health insurance facility.

### **4.0 Sum Insured on Floater Basis:**

The scheme shall provide coverage for meeting expenses of hospitalization and surgical procedures of beneficiary members up to Rs.1.50 lakhs per family per year subject to limits, in any of the network hospitals. The benefit on family will be on floater basis i.e. the total reimbursement of Rs.1.50 lakhs can be availed of individually or collectively by members of the family.

### **5.0 Buffer / Corporate Sum Insured:**

An additional sum of Rs. 5 crores be provided as Buffer / corporate floater to take care of expenses, if it exceeds the original sum i.e. Rs.1.50 lakhs per family. In such cases an amount up to Rs.50000/- per family shall be additionally provided on the recommendation of the committee set up by the Trust.

### **6.0 Procedures for enrolment of Hospitals:**

**HOSPITAL / NURSING HOME:** means any institution in Andhra Pradesh established for indoor medical care and treatment of disease and injuries and which either

Hospital / Nursing Home run by Government fulfilling relevant requirements of the scheme.

OR

In case of networked hospital, it should comply with minimum criteria as under:

- a) It should have at least **50** inpatient medical beds.
- b) Fully equipped and engaged in providing Medical and Surgical facilities along with Diagnostic facilities i.e., Pathological test and X-ray, E.C.G. etc., for the care and treatment of injured or sick persons as inpatient.
- c) Fully equipped Operation Theatre of its own wherever surgical operations are carried out.

- d) Fully qualified nursing staff under its employment round the clock.
- e) Fully qualified doctor(s) should be **physically** in charge round the clock.
- f) Maintaining complete record as required on day to day basis and be able to provide necessary records of the insured patient to the Insurer or his representative as and when required.
- g) Using ICD and OPQS codes for Drugs, Diagnosis, Surgical procedures etc.
- h) Having sufficient experience in the specific identified field.

And

Hospital should be a position to provide following additional benefit to the BPL beneficiaries related to identified systems:

- a. Free OPD consultation.
- b. Substantial discounts on diagnostic tests and medical treatment required for beneficiaries.
- c. Minimum 10-12 free Health Camps in villages in a year for the screening of the BPL patient suffering from the identified ailments. Villages shall be identified in consultation with the Trust.

#### **7.0 Payment of Premium:**

The Trust/Government will pay the insurance premium on behalf of the BPL beneficiaries to the Insurance Company directly.

#### **8.0 IMPLEMENTATION PROCEDURE:**

The entire scheme is intended to be implemented as cashless hospitalization arranged by the Insurance Company through Third party Administrators (TPA). TPA should have one office in each district. The Hospital will raise the bill on TPA and TPA shall process the claim and settle the claims in consultation with the Insurance Company. The Insurance Company shall keep the adequate floating fund available at the disposal of the TPA for meeting the claim expenses. The replenishment of float fund is to be made strictly within five working days of submission of replenishment note by the TPA enabling them to make the payment to the hospitals within specified time. The insurance company will pay the service charges in time to the TPA, enable them to elaborate the infrastructure and render quality services. The bipartite/ tripartite agreement will be entered between trust. Insurance company and TPA initially for one year as decided by the trust/GoAP.

#### **9.0 CRITERIA FOR EVALUATING BIDS/PROPOSALS:**

The Technical Proposals will be evaluated by a panel of officials nominated by the Government of Andhra Pradesh. Once the technical bids have been evaluated, the successful bidders will be informed about the date of opened who are declared successful in the technical Bid Evaluation stage. Financial bids will be opened in presence of the representative of insurance companies that have been declared successful in the technical bid evaluation stage.

## **10.0 AWARD OF CONTRACT**

Government of Andhra Pradesh/Trust shall award the contract to the successful bidder/s whose Bid has/have been determined to be substantially responsive, lowest evaluated bid, provided further that the bidder has been determined by the Government of Andhra Pradesh/Trust to be qualified to perform the contract satisfactorily.

## **11.0 RIGHT TO NEGOTIATE AT THE TIME OF AWARD:**

Government of Andhra Pradesh/Trust reserves the right to negotiate with lowest bidder after opening the price Bid.

## **12.0 GOVERNMENT OF ANDHRA PRADESH/TRUST'S RIGHT TO ACCEPT OF REJECT ANY OR ALL BIDS:**

Government of Andhra Pradesh/Trust reserves the right to accept or reject any Bid or annual the Bidding process and reject all Bids at any time prior to award of Contract, without thereby incurring any liability to the affected Bidder or Bidders. Government of Andhra Pradesh/Trust is not bound to accept the lowest or any bid.

## **13.0 NOTIFICATION OF AWARD AND SIGNING OF MOU:**

The Notification of Award will be issued with the approval of the Tender Accepting Authority. The terms of MOU will be discussed with the representatives of the successful insurance company and the company is expected to furnish a duly signing MOU proposed by GoAP/trust in duplicate within 7 days of declaration of 'award of contract', failing which the contract may be offered to the next bidder in order of merit. Once the MOU is signed, the insurer will have no right to cancel the MOU signed between the GoAP/Trust and insurer.

## **14.0 CANVASSING:**

Bidders are hereby warned that canvassing in any form for influencing the process of notification of award result in disqualification of the Bidder.

## **15.0 Signature in each page of document:**

Each paper of Bid Document must be signed by the competent authority of the Bidder. Any document/sheet not signed shall tantamount to rejection of Bid.

## **16.0 SUBMISSION OF PROPOSALS:**

**The bidder must submit the proposal as per the details mentioned below:**

- i. Technical proposal should be sealed in a separate envelop clearly marked in **BOLD “SECTION A – TECHNICAL PROPOSAL” and TECHNICAL PROPOSAL FOR IMPLEMENTING “AAROgyASRI HEALTH INSURANCE SCHEME”** written on the top of the envelope.
- ii. Financial proposal should be sealed in another envelop clearly marked in **BOLD “SECTION B – FINANCIAL PROPOSAL” and FINANCIAL PROPOSAL FOR IMPLEMENTING “AAROgyASRI HEALTH INSURANCE SCHEME”** written on the top of the envelope.
- iii. Both envelop should have the bidders Name and Address clearly written at the Left Bottom Corner of the envelope.
- iv. Both envelop should be put in **large cover /envelop**, sealed and clearly marked in BOLD have

**“SECTION A – TECHNICAL PROPOSAL” for “Aarogyasri Health Insurance Scheme”.**

**“SECTION B – FINANCIAL PROPOSAL” for “Aarogyasri Health Insurance Scheme”.** written on envelop and have the bidders Name and Address clearly written at the BOLD at the Left Bottom Corner.

- v. The bids may be cancelled and not evaluated if the bidder fails to:
  - a. Clearly mention Technical/Financial Proposal of respective envelops
  - b. The envelope are not properly sealed with sealing tape.
  - c. If both envelope i.e. financial proposal and Technical proposal are not submitted together keeping in large envelop.

## **17.0 Deadline for submission Bids/proposals:**

Complete bid documents should be received at the address mentioned below not later than **12.00 hours on 29<sup>th</sup> day, January 2007**. Bids documents received later than the prescribed date and time will not be considered for evaluation

Address  
Dr.Ch.Chandrasekhar,  
Jt. Director & Person in-charge – Health Insurance  
O/o.Director of Medical Education,  
Sultan Bazar, Koti, Hyderabad-500 095

Phone:040-2465 6909

Fax :040- 655 80942

e-mail :dme@ap.nic.in

**Submission Of Bids/Proposals:**

The Government of Andhra Pradesh / “Aarogyasri Health Care Trust” seeks detailed proposal from insurance companies interested in implementing “Aarogyasri Health Insurance Scheme”. In the State. The proposal document should include the following.

**SECTION A- TECHNICAL PROPOSAL:**

**A)QUALIFYING CRITERIA:**

**Insurance company having full fledged establishment with experience in conceptualizing. Designing and implementing large healthcare scheme and registered with IRDA.**

**The qualifying requirements data shall be enclosed with the Technical Bid only.** The bidders who do not qualify the above criteria, they will be disqualified immediately and their bids will not be considered.

**B) AMENDMENT OF BIDDING DOCUMENTS:**

- a) At any time prior to the deadline for submission of bids, the GoAP/Trust may, for any reason modify the Bidding documents, by amendment.
- b) The amendment will be notified in writing or by fax or telegram to all prospective bidders who have purchased the Bidding documents and amendments will be binding on them.
- c) In order to afford prospective bidders reasonable time to take the amendment into account in preparing their bids, the purchaser may, at its discretion, extend deadline for the submission of the Bid.

**NOTE:** Oral statements made by the Bidder at any time regarding quality of service or arrangements of any other matter shall not be considered.

**C.Others:**

- I. **Geographical area:** Initially the scheme is proposed to be launched in three districts of Andhra Pradesh as pilot project.
  - i. Ananthapur
  - ii. Mahaboobnagar
  - iii. Srikakulam
- II. **Experience:** Experience of the agency in implementing health insurance scheme through government agencies. **(Annexure-1)**



- III. **Infrastructure:** Details of infrastructure available with the agency in the state of Andhra Pradesh. **(Annexure-2)**
- IV. **Empanelled health facilities:** List of existing empanelled Tertiary. Multi, Single specialty health facilities in the state of Andhra Pradesh. The illustrative list of Hospitals recognized by the Directorate of Medical Education is enclosed. **(Annexure-3)**
- V. **Package rates:** Insurer and TPA will negotiate the rates of various surgical procedures covered under the scheme with the hospitals in consultation with GoAP/Trust and those hospitals who agree to accept the package rates shall be empanelled. These package rates will include bed charges (general ward). Nursing and boarding charges, Surgeons, Anesthetists, Medical practitioner, Consultants fees, Anesthesia, Blood, Oxygen, O.T. Charges, Cost of surgical Appliances, Medicines and Drugs, Cost of Prosthetic Devices, implants, X-Ray and Diagnostic Tests etc. Expenses incurred for diagnostic test and medicines upto 3 days before the admission of the patient and cost of diagnostic test and medicine upto 10<sup>th</sup> day of the discharge from the hospital for the same ailment /surgery will also be the part of package.
- Insurer is supposed to provide the existing **lowest package rates** of the procedures fixed with the hospitals by them in the present scenario **(Annexure-4)**.
- VI. **Detailed write –up on scheme:** Detailed write-up on Insurance scheme, including benefits available, exclusions, conditions, bonus / malus clause etc including day care coverage for procedures which can be performed as day care surgery may not require 24 hours hospitalization under the scheme. **Write-up [detailed prospectus] should be the apart of Technical proposal (Annexure-5)**
- VII. **Additional benefits:** In case the bidder wants to offer additional benefits in addition to those mentioned earlier, the same way be given in detail. **This will be the part of financial bid (Annexure-6)**.
- VIII. **Cash less Transaction:** It is desired that for each hospitalization the transaction shall be cashless for covered procedures. Enrolled BPL beneficiary will go to hospital and come out without making any payment to the hospital subject to procedure covered under the scheme.
- IX. **Pre existing diseases:** All diseases under the proposed scheme shall be covered from day one. A person suffering from any disease prior to the inception of the policy shall also be covered.
- X. **Domiciliary treatment:** Not required.
- XI. **Pre and Post hospitalization :** Upto 3 day prior to hospitalization and upto 10 days from the date of discharge from the hospital shall be part of the package rates.

- XII. **Draft MOU:** The insurer is required to enter into a MOU for implementation of the scheme with GoAP/Trust. Insurer may propose a draft MOU their end. GoAP/Trust is not bound to accept the same. **(Annexure-7).**
- XIII. **Installment facilities for payment of premium :** The trust will pay the premium in instalments (say quarterly).
- XIV. **Premium Adjustment Clause :** Bonus / Malus clause
- XV. **Activity :** Activity wise flowchart depicting the sequence of the activities and a detailed time schedule for all activities proposed (Annexure-8).
- XVI. **Period of agreement :** The agreement will be for one year from the effective date. The trust shall be having the right to accord the contract to other insurer in case of finding the unsatisfactory service track of the insurer.
- XVII. **Capacity Building :** The insurer will arrange the workshop for the capacity building of the insurer, their representatives and other stake holders in respect of specific field of insurance at each district on the convenience of the insured.
- XVIII. **Non compliance by any medical institution :** Empanelled medical institutions are supposed to extend medical aids to the beneficiary under the scheme. A provision is to be made in MOU of non compliance clause while signing them. Such matter shall be looked in to by Empowered committee at district level constituted by the GoAP/trust consisting of voluntary organizations, known experts on public health, representatives of medical institution apart from the District collector.
- XIX. **Mechanism for Publicity :** Ways and steps to be suggested (Annexure – 9).
- XX. **Penalty clause :** Failure to abide with the terms will attract penalty as suggested by the GoAP / Trust at the time of finalizing the terms.
- XXI. **Business Plan :** Detailed business plan highlighting process proposed to be adopted for , should be given as per following manner. **The sequence of the same, as under, sis to be maintained (Annexure – 10).**
- a. Mechanism for empanelment of desired private / public health facilities / day care health facilities.
  - b. Mechanism for standardization of various formats used for cashless transactions, discharged summary, billing pattern etc.
  - c. Mechanism for using ICD and OPQS codes for Drugs, Diagnosis, Surgical procedures etc.

- d. Mechanism for Awareness generation :
1. Ways and means for making beneficiaries/hospitals/insured aware about the same.
  2. Regarding list of approved health providers, diseases/illnesses covered, claim limits etc.
  3. Requirements of claims documents.
  4. Procedure for submitting claims.
  5. Time frame for settlement of claims etc.
- e. Mechanism for monitoring : Enumerate the process.
- f. Mechanism for ensuring timely receipt of list of empanelled hospitals by the beneficiary.
- g. Mechanism for ensuring proper administration of policy (prompt verification and settlement of claims).
- h. MIS for claims reporting, claims settlement, claims paid, float amount and other related information as required by GoAP / Trust on monthly basis and as and when required.
- i. Time-line for entire process – from beneficiary approaching the network hospital for treatment to lodging of claims and settlement.
- j. Procedure for reporting the progress to appropriate authority nominated by GoAP at state, division and district level.
- k. Grievance redressal mechanism procedure at district and state level.

**Note :** Terms can be amended by the GoAP / Trust before entering into the contract.

**Bidder is supposed to give point wise reply of the tender document for agreement / disagreement.**

**SECTION B – FINANCIAL PROPOSAL (To be given in Annexure-6)**

Financial costs including administrative expenses, overheads, service charges to TPA etc. that the insurance company expects for rendering the services in the following manner.

**A)** Premium quote for a sum insured of Rs.1.50 Lakhs per family on floater basis.

S.No.	FAMILY SLAB	PREMIUM PER FAILY	TOTAL PREMIUM WITHOUT S.T.	TOTAL PREMIUM WITH S.T.
1	20lacs	Rs.	Rs.	Rs.

**B)** Premium quote for Rupees 5 Crores as buffer / corporate sum insured. A sum of Rs.50,000 can be availed by the family if it has consumed the basic sum insured of Rs. 1.50 lakhs. This is subject to the case being recommended by the Committee appointed by the Trust and to the availability of balance amount in buffer account.

<b>BUFFER AMOUNT</b>	<b>PREMIUM WITHOUT S.T.</b>	<b>PREMIUM WITH S.T</b>
Rs.5 Crores	Rs.	Rs.

**Total Premium without S.T. (A+B) =**

**Total Premium with S.T. (A+B) =**

**C) Details of Add on cover without any additional premium :**

<b>S.No.</b>	<b>Benefits</b>	<b>Details</b>
1		
2		
3		
4		

**Name of the Insurance Company :**

**SECTION A – DETAILS OF TECHNICAL PROPOSAL :**

		<b>Section of Technical Bid</b>	<b>Comments / Observation of Insurer /</b>
	A	QUALIFYING CRITERIA	IRDA license attached
	B	<b>AMENDMENT OF BIDDING DOCUMENTS :</b>	
	C	Others :	
	I	Geographical Area	i. Ananthapur ii. Mahaboobnagar iii. Srikakulam
	II	Experience :	Annexure – 1
	III	Infrastructure :	Annexure – 2
	IV	Empanelled health facilities :	Annexure – 3
	V	Package rate :	Annexure – 4
	VI	Detailed write-up on scheme	Annexure – 5
	VII	Additional benefits :	
	VIII	Cash less Transaction :	
	IX	Pre existing diseases :	
	X	Domiciliary treatment :	<b>Not required.</b>
	XI.	Pre and Post hospitalization	
	XII	Draft MOU :	Annexure – 7
	XIII	Installment facilities for payment	
	XIV	Premium adjustment Clause	
	XV	Activity	Annexure – 8
	XVI	Period of agreement	
	XVII	Capacity Building :	
	XVIII	Non Compliances by any medical institution :	
	XIX	Mechanism for Publicity :	Annexure – 9
	XX	Penalty clause	
	XXI	Business Plan :	Annexure – 10

**Experience of Bidder**

**Annexure 1**

Sr. No.	Name of the Scheme and Beneficiary Group	State / area where implemented	Number of Beneficiaries	Premium (in Rs.)		Number of years the scheme has been in operation (YEAR WISE)	Claims	
				Per Beneficiary	Total Premium		Received (no)	Settled (Rs.)
	1	2	3	4	5	6	7	8

**Organizational Setup :**

**Annexure 2**

3.1 Organogram of organization at national level

3.2 Organogram of organization at Regional level (Southern Region)

3.3 Organogram of organization at State level – specific to Andhra Pradesh

Location of Offices in Andhra Pradesh	Number of Staff in each office	Name & Designation of Staff members in each office	Name & designation of Office Incharge	Address Email and Contact Number of Each Office
1	2	3	4	5





**ILLUSTRATIVE LIST OF SPECIALITY HOSPITALS,  
RECOGNIZED BY THE DME FOR MEDICAL REIMBURSEMENT**

<b>S.No.</b>		<b>Specialization for which recognized</b>
	<b>Hyderabad</b>	
1	Usha Mullapudi Cardiac Centre, Gajularamaram, Qutubullahpur Municipality, R.R. District, Hyderabad	Cardiac
2	Sri Sai Kidney Centre, (A unit of Twin Cities Kidney Centre Pvt. Ltd.), 7-1-59/4/8, Near Lal Bunglow, Ameerpet, Hyderabad.	Kidney
3	Satya Kidney Centre, Street No. 4, Himayathnagar, Hyderabad.	Kidney & Multi
4	ARK Hospital, Kukatpally, Hyderabad	Medical & General Surgery Obstetrics & Gynecology and Pediatrics
5	Aditya Hospital, 4-1-16, Boggulakunta, Tilak Road, Abids, Hyderabad.	Multi
6	Apollo Hospital, Jubilee Hills, Hyderabad.	Multi
7	Care Hospital (A Unit of Quality care India Ltd), Banjara Hills, Hyderabad	Multi
8	Life kare Dental Hospital, 9-7-83/1, Sri Laxmi Complex, Maruthi Nagar, Santhosh Nagar, Hyderabad – 500 059	Cardiac
9	Care Hospital (Quality Care India Limited) Exhibition Road, Nampally, Hyderabad.	Multi
10	Global Hospitals ( A unit of Ravindranath GE Medical Association Pvt. Ltd.), Lakadi-ka-pool, Hyderabad.	Multi
11	Global Hospitals, Banjara Hills, Hyderabad	Multi
12	Heritage Hospital, 6-3-907/2, Somajiguda, Hyderabad	Multi
13	Hyderabad Kidney & Laproscopic Centre, Judges Colony, Malakpet, Hyderabad.	Multi
14	Image Hospital (Image Health Care Limited) Ameerpet, Hyderabad	Multi
15	Into-American Cancer Institute & Research Centre, Banjara Hills, Hyderabad.	Multi
16	Kamineni Hospitals, L.B. Nagar, Hyderabad	Multi
17	Krishna Children’s Hospital, ( A unit Ashwik Hospital Pvt Ltd), Niloufer Hospital Road, Opp-Hanuman Temple, Lakdikapool, Hyderabad - 500006	Multi
18	L.K. Hospitals Pvt. Ltd. 4-159 & 4-172, Maruthi Nagar, Malkajiri, Ranga Reddy Dist.	Multi
19	Life Hospital (a Unit of Sai Balaji Health Care)Shivam Road, D.D. Colony, Hyderabad – 500 007.	Multi
20	Medwin Hospital, Chiraj Ali Lane, Hyderabad	Multi

21	Mythri Multi Speciality Hospitals, Ameerpet, Hyderabad.	Multi.
22	New Life Hospital, Kamal Theatre Complex, Chaderghat, Hyderabad.	Multi
23	Nightingale Hospital, 17-1-383/N. S/3 & 4, Opp. Amber Biscuit Factory, Nagarjuna Sagar Road, Hyderabad.	
24	Premier Hospital, Masab tank, Humayun Nagar, Mehdiapatnam, Hyderabad.	Multi
25	Ram Hospital, Shapur Nagar, IDA Jeedmetla Hyderabad – 500 055.	Multi
26	Remedy Heart Institute (A unit of Remedy Hospital Ltd.), Opp. TTD, Himayatnagar, Hyderabad.	Milti
27	Remedy Hospitals, Ferozguda, Balanagar, Hyderabad	Multi
28	Sai Krishna Super Speciality Neuro & Trauma Hospital, Kukatpally, Hyderabad – 500 072	Multi
29	Sai Krishna Super Speciality Neuro & Trauma Hospital, Kachiguda, Hyderabad.	Multi
30	Sai Vani Hospital ( A Unit of Lakshmi Jaya Hospitals Ltd. Opp. Indira Park, Domalguda, Hyderabad.	Multi
31	Shravana Hospitals, 5-3-847, Mozamjahi Market, Hyderabad.	Multi
32	Sigma Hospital, (A unit of D.B.R. Hospital Pvt. Ltd. 35, S.D. Road, Secunderabad.	Multi
33	Woodlands Hospital, Barkatpura, Hyderabad.	Multi
34	Yashoda Super Speciality Hospital (A unit of Datta Chandra Construction & Hospital, Pvt. Ltd.) Malakpet, Hyderabad	Multi
35	Yashoda Super Speciality Hospital, Somajiguda, Hyderabad.	Multi
36	Alpha Hospital, 23-1-863, Near MCH Swimmingpool, Moghalpura, Hyderabad.	Ob&Gynec, and Paediatrics.
37	Krishna Institute of Medical Science, Minister Road, Begumpet, Hyderabad.	Paediatric
38	Pragna Children's Hospital, 6-3-347/22/B/1, Dwarakapuri Colony, Near Sai Baba Temple, Punjagutta, Hyderabad.	Paediatric Specialization
39	Rainbow Children Hospital, Banjara Hills, Hyderabad.	Paediatric Specialization
40	Durgabai Deshmukh Hospital, Hyderabad	
41	KIMS, Hyderabad	
42	Mahavir Cardio Vascular Centre, Hospital, Hyderabad	
43	Medicity Hospital, Hyderabad.	
44	NIMS	
45	Osmania General Hospital, Hyderabad.	
	<b>Secunderabad</b>	
46	Poulomi Hospital, Rukminipuri Colony, Dr. A.S. Rao Nagar, Main Road, Secunderbad.	Multi
47	Gandhi Hospital, Secunderabad.	

48	Vijaya Health Care Centre, 8-2-86, Kumariguda, Near Passport Office, Secunderabad.	Cardiac
49	Soumya Multi Speciality Hospital, Karkhana, Secunderabad.	Multi
50	Geeta Multi Speciality Hospital, Secunderabad.	Multi
51	Yashoda Hospital, Secunderabad.	Multi
	<b>Warangal</b>	
52	MGM Hospital, Warangal	
53	Jaya Hospitals, Chowrastha, Hanamkonda, Warangal	Cancer
54	St. Ann's Hospital, Fathimanagar, Kazipet, Warangal	Multi
55	Rohini Medicare (Pvt.) Limited, Subedari, Hanamkonda – 506 001, Warangal.	Multi
	<b>Khammam</b>	
56	Kinnera Super Speciality Hospital, Wyra Road, Khammam	Multi
57	Mamatha General Hospital, 5-7-200, Giri Prasad Nagar, Urban Mandal, Khammam Dist.	Multi
58	Sri Vijaya Durga Cardiac Centre 46-728-C, Budhawarpet, Kurnool	Cardiac
59	Gowri Gopal Hospitals Pvt. Ltd., Kurnool	Multi
60	Viswa Bharathi Super Speciality Hospital, Gayatri Estates, Kurnool.	Cardiac
61	Viswabharathi Hospital, Kurnool	
62	Govt. General Hospital, Kurnool	
	<b>Tirupathi</b>	
63	SVIMS, Tirupathi	
64	SVRRGGH, Tirupathi	
	<b>Ananthapur</b>	
65	Govt. General Hospital, Ananthapur	
66	Asha Hospitals, Court Road, Anantapur.	Multi
	<b>Cuddapah</b>	
67	Govt. General Hospital, Cuddapah	
	<b>Vijayawada</b>	
68	Sibar Charitable Trust (Cancer Hospital) Governorpet, Vijayawada	Cancer
69	City Cardiac Research Center Ltd. Ring Road, Near ITI College, Vijayawada – 5200 008.	Cardiac
70	Help Hospital, MG Road, Vijayawada	Cardiac

71	Govt. General Hospital, Vijayawada	
72	Usha Cardiac Centre, Vijayawada	
73	Global Medical Centre (A unit of Andhra Health Diagnostic Services Ltd.,) 27-39-1, MG Road, Vijayawada – 520 002.	Multi
74	Nagarjuna Hospital, kanuru, Vijayawada – 7.	Multi
75	Pinamaneni Care Hospital, Siddhartha Nagar, Vijayawada.	Multi
76	Hearth Care Centre, Dornakal Road, Near Andhra Bank, Suryaraopet, Vijayawada.	Multi
77	SVR Neuro Hospital ( A unit of SVR Neuro & Trauma Super Speciality Hospital Pvt. Ltd., M.G. Road, VJA.	Multi
78	Usha Cardiac Centre, Labbipet, M.G. Road, Vijayawada	Multi
79	Vijetha Hospital (A unit of Vijetha Health Care and Research Centre Pvt. Ltd.) Suryaraopet Eluru Road, Vijayawada.	Multi
80	Dr.Sridhar International Dental Hospital & Research Center, Eluru Road, Vijayawada	Multi
81	MVS Accident Hospital, Suryaraopet, Vijayawada	Orthopedics
82	Andhra Hospital, CVR Complex, Prakasam Road, Vijayawada	Orthopedics General Surgery
	<b>Visakhapatnam</b>	
83	Apollo Hospital, Waltair Mainroad, Visakhapatnam	Multi
84	KGH, Visakhapatnam	
85	Care Hospital, Waltair main road, Visakhapatnam	Multi
86	Lazarus Hospital, Waltair main road, Visakhapatnam	Multi
87	Seven Hills Hospital, Rockdale Layout, Visakhapatnam	Multi
	<b>Rajahmundry</b>	
88	Raju Neuro & Multispeciality Hospital and Raju Emergency Hospital, 76-4-7, Gandhipuram – II, Rajahmundry.	Multi
89	Swatantra Hospitals (Multi Specialities) Pvt. Ltd. Near Kambala Park, Rajahmundry	Multi
90	GSL Hospital, Rajahmundry	
91	Bollineni Heart Centre, 46-7-47, Danavaipet, Rajhmundry	Cardiac
	<b>Guntur</b>	
92	Dulipala Hospital, Guntur	
93	Lalitha Superspeciality Hospital Heart & Brain Centre, Gowrisankar Theatre Raod, Kothapet, Guntur	Multi
94	NRI General Hospital, Chinakakani, Guntur District.	Multi
95	Veena Hospital, Guntur	

96	Govt. General Hospital, Guntur	
97	Amaravathi Institute of Medical Science Pvt Ltd. Kothapet, Guntur	Multi
	<b>Kakinada</b>	
98	Govt. General Hospital, Kakinada	
99	Apollo Hospitals, D.No. 13-1-13, Main Road, Kakinada	Multi
100	Samudra Apollo Hospital, Kakinada	
	<b>Nellore</b>	
101	Aravind Kidney Centre, 15/402, Brindavanam, Main Road, Nellore	Kidney
102	Ravi Institute of Child Health (RICH Hospitals) 16-11/131, Kasturidevi Nagar, Pogathota, Nellore	Paediatric
	<b>East Godavari</b>	
103	Konaseema Institute of Medical Sciences, NH – 214, Chaitanya Nagar, Amalapuram – 533 201, E.G. Dist.	Multi
	<b>West Godavari</b>	
104	Bhimavaram Hospital, J.P. Road, Bhimavaram	Multi

## List of Surgeries and Therapies

## Annexure 4

	1	<b>CARDIAC</b>	
1	1.1	Coronary Bypass Surgery	
2	1.2	Coronary Bypass Surgery-post Angioplasty	
3	1.3	Coronary Baloon Angioplasty	
4	1.4	Balloon angioplasty with Valvotomy	
5	1.5	Open Heart Procedures	
6	1.6	Total Correction of Tetralogy of Fallot	
7	1.7	RSUV Correction	
8	1.8	TAPVC Correction	
9	1.9	Open ASD VSD	
10	1.10	Open Pulmonary Valvotomy	
11	1.11	Open Aortic Valvotomy	
12	1.12	Balock Taussing Operation	
13	1.13	Mitral Valvotomy	
14	1.14	Mitral Valve Replacement	
15	1.15	Aortic Valve Replacement	
16	1.16	Double Valve Replacement	
17	1.17	Closed Valvotomy	
18	1.18	Coarctation-Aorta Repair of Block Taussing Shunt	
19	1.19	Patent Ducts Arteriousus	
20	1.20	Mitral Valvotomy (Open)	
21	1.21	Pericardiostomy	
22	1.22	Pericardiectomy	
23	1.23	Pericardio Centosis	
24	1.24	Permanent Pacemaker Implantation	
25	1.25	Temporary Pacemaker Implantation	
26	1.26	Aneurysm Resection & Grafting	
27	1.27	Intrathoracic Aneurysm – Aneurysm not Requiring Bypass techniques	
28	1.28	Intrathoracic Aneurysm – Requiring Bypass Techniques	
29	1.29	Dissecting aneurysms	
30	1.30	Vertebral angioplasty	

	2	<b>CANCER</b>	
31	2.1	Head & Neck	
32	2.2	Gastrointestinal Tract	
33	2.3	Genito Urinary System	
34	2.4	Gynaecological Oncology	
35	2.5	Tumors of the Female Breast	
36	2.6	Skin Tumors	
37	2.7	Soft Tissue and Bone Tumors	
38	2.8	Cancer Lung	
	2.A	<b>Cobalt 60 Therapy (only as pre / post surgery Therapy protocol)</b>	
39	2.A.1	Radical treatment	
40	2.A.2	Palliative Treatment	
41	2.A.3	Adjustment Therapy	
	2.B	<b>Linear Accelerators (only as pre / post surgery Therapy protocol)</b>	
42	2.B.1	Radical Radiotherapy Liner	
43	2.B.2	Palliative Radiotherapy Liner	
	2.C	<b>Brachy Therapy Only as pre / post surgery Therapy protocol)</b>	
44	2.C.1	Intracavitary	
		Interestical (Implant)	
45	2.C.2	Head & Heck	
46	2.C.3	Breast	
47	2.C.4	Soft tissue Sarcoma	
	2.D	<b>Chemotherapy (only as pre / post surgery Therapy protocol)</b>	
48	2.D.1	Single Drug Therapy per day	
49	2.D.2	Multiple Drug Therapy per Day	
50	2.D.3	Infusional Chemotherapy	
51	3.1	HaemoDialysis (Pre Transplant only)	51

52	3.2	Renal Transplantation ( With Post Transplant Treatment upto one year )	
53	3.2	Surgery for Renal Calculi	
54	3.4	Renal angioplasty	
	4	<b>NEUROSURGERY</b>	
55	4.1	Craniotomy and Evacuation of Haematoma -Subdural	
56	4.2	Craniotomy and Evacuation of Haematoma -Extradural	
57	4.3	Evacuation of Brain Abscess	
58	4.4	Excision of Lobe (Frontal, Temporal, Cerebellum etc.)	
59	4.5	Excision of Brain Tumours -Supratentorial	
60	4.6	Excision of Brain Tumours -Subtentorial	
61	4.7	Surgery of Cord Tumours	
62	4.8	Ventriculoatrial / Ventriculoperitoneal Shunt	
63	4.9	Excision of Cervical Inter-Vertebral Discs	
64	4.10	Twist Drill Craniostomy	
65	4.11	Subdural Tapping	
66	4.12	Ventricular Tapping	
67	4.13	Abscess Tapping	
68	4.14	Vascular Malformations	
69	4.15	Peritoneal Shunt	
70	4.16	Atrial Shunt	
71	4.17	Meningo Encephalocoel	
72	4.18	Meningomyelocoel	
73	4.19	C.S.F. Rhinorrhoea	
74	4.20	Cranioplasty	
75	4.21	Posterior Cervical Dissectomy	
76	4.22	Anterior Cervical Dissectomy	
77	4.23	Meningocele Excision	
78	4.24	Ventriculo-Atrial Shunt	
79	4.25	Anterior Cervical Spine Surgery with fusion	
80	4.26	Anterior Lateral Decompression	
81	4.27	Cervical or Dorsal Laminectomy	



82	4.28	Combined Trans-oral Surgery & CV Junction Fusion	
83	4.29	C.V. Junction Fusion	
84	4.30	Depressed Fracture	
85	4.31	Discectomy	
86	4.32	Spinal Fusion Procedure	
87	4.33	Spinal Intra Medullary Tumours	
88	4.34	Spinal Bifida Surgery Major	
89	4.35	Spinal Bifida surgery Minor	
90	4.36	Stereotactic Procedures	
91	4.37	Trans Sphenoidal Surgery	
92	4.38	Trans Oral Surgery	
	5	<b>BURNS</b>	
93	5.1	30% -50% Burns	
94	5.2	Above 50% Burns	
	6	<b>TRUAMA &amp; ACCIDENTS SURGERIES (Where major surgical procedure is involve; excluding accident trauma cases covered under the MV Act.)</b>	
95	6.2	Neurosurgical Trauma	
96	6.3	Polytrauma	
97	6.4	Longbone Fractures (Surgical Correction)	

**(Kindly note that Format 6 should be included as a part of Section B – Financial Proposal only)**

**Financial Costs**

**Annexure-6**

A) Premium quote for a sum insured of Rs. 1.50 Lakhs per family on floater basis:

<b>S.No.</b>	<b>FAMILY SLAB</b>	<b>PREMIUM PER FAMILY</b>	<b>TOTAL PREMIUM WITHOUT S.T.</b>	<b>TOTAL PREMIUM WITH S.T.</b>
1	20lacs	Rs.	Rs.	Rs.

B) Premium quote for Rupees 5 Crores as buffer / corporate sum insured. A sum of Rs. 50,000 can be availed by the family if it has consumed the basis sum insured of Rs. 1.50 lakhs. This is subject to the case being recommended by the local MLA/ MP and to the availability of balance amount in buffer account.

<b>BUFFER AMOUNT</b>	<b>PREMIUM WITHOUT S.T.</b>	<b>PREMIUM WITH S.T.</b>
Rs. 5 Crores	Rs.	Rs.

**Total Premium without S.T. (A + B) =**

**Total Premium with S.T. (A + B) =**

C) Details of Add on cover without any additional premium:

<b>S.No.</b>	<b>Benefits</b>	<b>Details</b>
1		
2		
3		
4		
5		
6		