

**GOVT OF NAGALAND
DIRECTORATE OF HEALTH & FAMILY WELFARE
STATE HEALTH AGENCY (AB PM-JAY CMHIS)
NAGALAND :: KOHIMA**

No: SHA/AB PM-JAY CMHIS/TENDER/2022/246

Dated Kohima, the 15th September 2022

Corrigendum No.1

TENDER : AYUSHMAN BHARAT PRADHAN MANTRI JAN AROGYA YOJANA CHIEF MINISTER'S HEALTH INSURANCE SCHEME (AB PM-JAY CMHIS)

Tender Ref No: No: SHA/AB PM-JAY CMHIS/TENDER/2022/228 Dated Kohima, the 31st August 2022

Website : cmhis.nagaland.gov.in

Date: 15th September 2022

Sl. no.	References from bid	Content in original documents	Corrigendum	Remark
1.	ITB Vol I: Clause 1.9.2.3(b)	<p>a) Package rate includes all the expenses for in-patient treatment, and specific daycare procedures. Beneficiaries are permitted by the competent authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to):</p> <ul style="list-style-type: none"> • Registration charges • Admission charges • Accommodation charges • Diet charges • Operation charges • Injection charges • Dressing charges • Doctor consultant charges • ICU/ICCU charges • Monitoring charges • Transfusion charges • Anesthesia charges • Operation theatre charges • Procedural charges • Surgeon fee • Surgical disposables cost • Medicines cost • Physiotherapy charges • Nursing charges 	<p>b) Package rate includes all the expenses for in-patient treatment, and specific daycare procedures. Beneficiaries are permitted by the competent authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to):</p> <ul style="list-style-type: none"> • Registration charges • Admission charges • Accommodation charges • Diet charges • Operation charges • Injection charges • Dressing charges • Doctor consultant charges • ICU/ICCU charges • Monitoring charges • Transfusion charges • Anesthesia charges • Operation theatre charges • Procedural charges • Surgeon fee • Surgical disposables cost • Medicines cost • Physiotherapy charges • Nursing charges • cost of investigations 	Cost of investigations shall also be included in the package rate

2.	ITB Vol I: 10.4.4.(e):	If no winner is identified through this process, the total Bid price of each bidder shall be computed across the 3 (three) Quotations (multiplication of the Bid price per family with minimum committed number of families for the respective categories) and the Bidder with the lowest total Bid price shall be declared as the 'Selected Bidder'.	If no winner is identified through this process, the total Bid price of each bidder shall be computed across the 4 (four) Quotations (multiplication of the Bid price per family with minimum committed number of families for the respective categories) and the Bidder with the lowest total Bid price shall be declared as the 'Selected Bidder'.	Corrected no. of quotations , should be read as 4(four) Quotations instead of 3(three) Quotations
3.	ITB Vol I: 1.10(i)	Be responsible for operations and management, including HR and equipping of the call center which shall be operational 24*7 for beneficiaries and other stakeholders of the Scheme;	Deleted	Call Centre shall be managed by SHA/NHA
4.	Draft Contract Vol II: 5.4.8(b):	<p>c) Package rate includes all the expenses for in-patient treatment, and specific daycare procedures. Beneficiaries are permitted by the competent authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to):</p> <ul style="list-style-type: none"> • Registration charges • Admission charges • Accommodation charges • Diet charges • Operation charges • Injection charges • Dressing charges • Doctor consultant charges • ICU/ICCU charges • Monitoring charges • Transfusion charges • Anesthesia charges • Operation theatre charges • Procedural charges • Surgeon fee • Surgical disposables cost • Medicines cost • Physiotherapy charges • Nursing charges 	<p>d) Package rate includes all the expenses for in-patient treatment, and specific daycare procedures. Beneficiaries are permitted by the competent authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to):</p> <ul style="list-style-type: none"> • Registration charges • Admission charges • Accommodation charges • Diet charges • Operation charges • Injection charges • Dressing charges • Doctor consultant charges • ICU/ICCU charges • Monitoring charges • Transfusion charges • Anesthesia charges • Operation theatre charges • Procedural charges • Surgeon fee • Surgical disposables cost • Medicines cost • Physiotherapy charges • Nursing charges • cost of investigations 	<ul style="list-style-type: none"> • Cost of investigations shall also be included in the package rate

5.	Draft Contract Vol II: 5.8.7	Incentivization will be provided to AB PM-JAY CMHIS empanelled hospitals based on the guidelines provided in Schedule 3D which will be over and above the rates defined in Schedule 3A. However no incentives will be applied for providing treatment to CMHIS(EP) beneficiaries, and the rates provided in Schedule 3B are fixed with no additional incentive.	Incentivization will be provided to AB PM-JAY CMHIS empanelled hospitals based on the guidelines provided in Schedule 3D which will be over and above the rates defined in Schedule 3A. For CMHIS(EP) beneficiaries availing treatment under HBP 2022(CMHIS EP) in CGHS empanelled hospitals, only incentive for NABH accredited hospitals shall be applicable as per the detailed incentives provided in Schedule 3B.	Added applicable NABH incentives for NABH certified hospitals empanelled under CGHS.																										
6.	Draft Contract Vol II: 10.2.1	Call Centre be responsible for call center operations and management, including recruitment of staff, and licensing of the software and technology upgradation to ensure compliance with Clause 10.1.1 and Clause 10.1.2, at its own cost without any liability to the SHA.	Deleted	Call Centre shall be managed by SHA/NHA																										
7.	Draft Contract Vol II: 13.1.1:	<p>The SHA shall pay the Insurer a Premium on a family floater basis as per the Premium rate schedule provided in the table under this clause 13.1.1:</p> <table border="1" data-bbox="322 751 904 1222"> <thead> <tr> <th data-bbox="322 751 479 874">Beneficiary Type</th> <th data-bbox="479 751 712 874">Category</th> <th data-bbox="712 751 904 874">Premium Per Annum Per Beneficiary Family Unit</th> </tr> </thead> <tbody> <tr> <td data-bbox="322 874 479 1066" rowspan="3">CMHIS (GEN)</td> <td data-bbox="479 874 712 938">Cat 1: AB PM-JAY</td> <td data-bbox="712 874 904 1066" rowspan="3">Rs. XX</td> </tr> <tr> <td data-bbox="479 938 712 1002">Cat 2: Additional AB PM-JAY</td> </tr> <tr> <td data-bbox="479 1002 712 1066">Cat 5: General Population</td> </tr> <tr> <td data-bbox="322 1066 479 1222" rowspan="2">CMHIS (EP)</td> <td data-bbox="479 1066 712 1161">Cat 3: GoN regular employees and other officials</td> <td data-bbox="712 1066 904 1222" rowspan="2">Rs. YY</td> </tr> <tr> <td data-bbox="479 1161 712 1222">Cat 4: GoN Pensioners</td> </tr> </tbody> </table>	Beneficiary Type	Category	Premium Per Annum Per Beneficiary Family Unit	CMHIS (GEN)	Cat 1: AB PM-JAY	Rs. XX	Cat 2: Additional AB PM-JAY	Cat 5: General Population	CMHIS (EP)	Cat 3: GoN regular employees and other officials	Rs. YY	Cat 4: GoN Pensioners	<table border="1" data-bbox="1032 603 1666 1414"> <thead> <tr> <th data-bbox="1032 603 1182 916">Beneficiary Type</th> <th data-bbox="1182 603 1346 916">Category</th> <th data-bbox="1346 603 1503 916">Premium Per Annum Per Beneficiary Family Unit</th> <th data-bbox="1503 603 1666 916">Top-Up Premium per Beneficiary Family Unit (as applicable after Premium discovery)</th> </tr> </thead> <tbody> <tr> <td data-bbox="1032 916 1182 1193" rowspan="2">CMHIS (GEN)</td> <td data-bbox="1182 916 1346 979">Cat 1: AB PM-JAY</td> <td data-bbox="1346 916 1503 1193" rowspan="2">Rs. XX</td> <td data-bbox="1503 916 1666 1193" rowspan="2">N/A</td> </tr> <tr> <td data-bbox="1182 979 1346 1193">Cat 2: Additional AB PM-JAY</td> </tr> <tr> <td data-bbox="1032 1193 1182 1414" rowspan="2">CMHIS (EP)</td> <td data-bbox="1182 1193 1346 1353">Cat 3: GoN regular employees and other officials</td> <td data-bbox="1346 1193 1503 1414" rowspan="2">Rs. YY</td> <td data-bbox="1503 1193 1666 1414" rowspan="2">Rs. ZZ</td> </tr> <tr> <td data-bbox="1182 1353 1346 1414">Cat 4: GoN Pensioners</td> </tr> </tbody> </table>	Beneficiary Type	Category	Premium Per Annum Per Beneficiary Family Unit	Top-Up Premium per Beneficiary Family Unit (as applicable after Premium discovery)	CMHIS (GEN)	Cat 1: AB PM-JAY	Rs. XX	N/A	Cat 2: Additional AB PM-JAY	CMHIS (EP)	Cat 3: GoN regular employees and other officials	Rs. YY	Rs. ZZ	Cat 4: GoN Pensioners	Added Column for applicable Top Up
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8.	Draft Contract Vol II: 13.1.5:	Processing and payment of Invoices for Beneficiary Category 1 and Beneficiary Category 2: The SHA shall process and pay all invoices for Beneficiary Category 1 and Beneficiary Category 2 as per provisions of Schedule 11, subject to deductions against penalties if any, as set forth in Schedule 13A to Schedule 13D.	Processing and payment of Invoices for Beneficiary Category 1 : The SHA shall process and pay all invoices for Beneficiary Category 1 as per provisions of Schedule 11, subject to deductions against penalties if any, as set forth in Schedule 13A to Schedule 13D.	Moved Beneficiary Category 2 to Clause 13.1.6
9.	Draft Contract Vol II: 13.1.6:	Processing and payment of Invoices for Beneficiary Category 3 , Beneficiary Category 2 and Beneficiary Category 5: The SHA shall process and pay all invoices for Beneficiary Category 3, Beneficiary Category 2 and Beneficiary Category 5 shall be paid within 21(twenty one) days of receiving the invoice, subject to deductions against penalties if any, as set forth in Schedule 13A to Schedule 13D.	Processing and payment of Invoices for Beneficiary Category 2 , Beneficiary Category 3, Beneficiary Category 4 and Beneficiary Category 5: The SHA shall process and pay all invoices for Beneficiary Category 2, Beneficiary Category 3, Beneficiary Category 4 and Beneficiary Category 5 shall be paid within 21(twenty one) days of receiving the invoice, subject to deductions against penalties if any, as set forth in Schedule 13A to Schedule 13D.	Moved Beneficiary Category 2 from Clause 13.1.5 to Clause 13.1.6
10.	Draft Contract Vol II: 17.1.2	If the EHCP fails to submit the claims within 7 (seven) days as set forth in Clause 17.1.1 above but within 45(Forty-Five) days, specific approvals from the SHA will be required to allow the claim to be processed, in line with OMs/guidelines issued by SHA from time to time. Claims from private EHCPs submitted beyond 45(forty-five) of discharge of patients will not be admissible under any circumstances whatsoever. However, in case of Public EHCPs this time may be relaxed as defined by the SHA	17.1.2 If the EHCP fails to submit the claims within 7 (seven) days as set forth in Clause 17.1.1 above but within 45(Forty-Five) days, specific approvals from the SHA will be required to allow the claim to be processed, in line with OMs/guidelines issued by SHA from time to time. However, in case of Public EHCPs this time may be relaxed as defined by the SHA from time to time.	Deleted statement "Claims from private EHCPs submitted beyond 45(forty-five) of discharge of patients will not be admissible under any circumstances whatsoever."
11.	Draft Contract Vol II: 20.1.9	The Insurer has at no time, whether prior to or at the time of submission of its Bid and at the time of execution of this Contract, been black-listed or been declared as ineligible from participating in government sponsored Schemes (including the AB PM-JAY) by the IRDAI.	The Insurer has at no time, whether prior to or at the time of submission of its Bid and at the time of execution of this Contract, been black-listed or been declared as ineligible from participating in government sponsored Schemes (including the AB PM-JAY) by the IRDAI, any State Governments or Central Government.	Added State Governments or Central Government

12	Vol 3 Draft Schedules- Schedule 12: 8.6	<p>Claim Settlement: A claim raised by the empaneled hospital will first be received by the Trust/Insurer of the Treatment State which shall decide based on its own internal processes. The approval of the claim shall be shared with the Home State Insurance Company/Trust which can raise an objection on any ground within 3 (three) days. In case the Home State raises no objection, the Treatment State IC/Trust shall settle the claim with the hospital. In case the Home State raises an objection, the Treatment State shall settle the claim as it deems fit. However, the objection of the Home State shall only be recommendatory in nature and the Home State shall have to honor the decision of the Treatment State during the time of interagency settlement.</p>	All Claim settlement under portability shall be by the Insurer of the Home State, i.e., selected Insurer for AB P-JAY CMHIS	All Claim settlement under portability shall be by the Insurer of the Home State, i.e., selected Insurer for AB P-JAY CMHIS
	Vol 3 Draft Schedules- Schedule 3A	HBP 2022 for CMHIS(GEN)	<p>Added the following package rates.</p> <ol style="list-style-type: none"> 1. In NHBP for CMHIS (GEN), the implant cost for procedure ‘Cranioplasty with exogenous graft’ (Code SN002B) is Rs. 22000. 2. In NHBP for CMHIS (GEN), the implant cost for procedure ‘Duroplasty with Exogenous graft’ (Code SN007B) is Rs. 22000. 3. In NHBP for CMHIS (GEN), implant for "Transoral surgery (Anterior) and CV Junction (Posterior Sterlization)’ (Code SN019A) is Rs. 33000. 	Added.

14	Vol 3 Draft Schedules- Schedule 3B	HBP 2022 for CMHIS(EP)	<p>1. The packages are provided in the CGHS Package Master Format configured in TMS of NHA. However, the CGHS Serial numbers are retained so that the package rates which have undergone revision during this corrigendum can be compared with the previous version released on 31st August 2022.</p> <p>2. OPD services, stand-alone diagnostics and preventative checkups are not covered. The CGHS package master format is followed and therefore the packages for OPD are retained. However, through preauthorization the OPD services (consultations/investigations/procedures) will not be allowed to be utilized unless they form a part of the hospitalized treatment or defined day-care procedures.</p> <p>3. For procedures which are not permissible under CMHIS, the 'Exclusions to the policy/scheme' as given in Claims Adjudication Manual 2.0, AB PM-JAY, October 2020 shall be applicable.(pmjay.gov.in)</p>	Updated HBP 2022 for CMHIS(EP) uploaded with the changes mentioned .
15	Draft Contract Vol II Clause 13.2.1	At the end of each Policy Period, and subject to the provisions of Clause 13.2.3, the Insurer shall submit a statement as per Schedule 16 duly certified by its Appointed Actuary stating the Insurer's average Claim Ratio for the entire Term of this Insurance Contract covering all Policy Periods therein.	<p>At the end of each Policy Period, and subject to the provisions of Clause 13.2.3, the Insurer shall submit statements as per Schedule 16 duly certified by its Appointed Actuary stating the Insurer's average Claim Ratio for the entire Term of this Insurance Contract covering all Policy Periods therein.</p> <p>1. For Categories 1, 2, 5 2. For Categories 3,5(for both Base and Top Up)</p>	Separated the Claim Ratio and Claim Settlement Calculation for Premium Refund according to the Premium Category.
16	Draft Contract Vol II - 10	10. Call Centre Establishment and Management	Deleted Clause 10	Call Centre shall be managed by SHA/NHA
17	Vol 3 Draft Schedules - Schedule 23	Schedule 23: Call Centre Operations -Service Levels and KPIs	Deleted Schedule 23	Call Centre shall be managed by SHA/NHA
18	Draft Contract Vol II - 31.6	iii. -Certification of handover of technology and software's of the call centre	Deleted	Call Centre shall be managed by SHA/NHA

19	Draft Contract Vol II - Clause 23.3	23.3 The Insurer has to ensure that this benefit of portability shall also be available for Beneficiary Category 3 and Beneficiary Category 4 who are eligible for CMHIS (EP) Benefits should they chose to seek services outside Nagaland at AB PM-JAY benefits package of the state where they are getting treated within access only to general wards for treatment.	Deleted	CMHIS(EP) shall have access only to CGHS network hospitals for portability Cases.
20	Draft Contract Vol II - Clause 23.4	23.4 The Insurer shall hereby further ensure that for CMHIS(EP) beneficiaries, in addition to portability benefits under Clause 24.3, they can avail treatment in all CGHS empanelled hospitals across the country. For CGHS empanelled hospitals offering treatment to CMHIS (EP) beneficiaries, the CGHS rates applicable for the booked procedure/package shall be used to reimburse EHCP claims.	1.1 The Insurer shall hereby further ensure that for CMHIS(EP) beneficiaries, they can avail treatment in all CGHS empanelled hospitals across the country. For CGHS empanelled hospitals offering treatment to CMHIS (EP) beneficiaries, the CGHS rates applicable for the booked procedure/package shall be used to reimburse EHCP claims.	Deleted “in addition to portability benefits under Clause 24.3”
21	Draft Contract Vol II - Clause 5.8.7	5.8.7 Incentivization will be provided to AB PM-JAY CMHIS empanelled hospitals based on the guidelines provided in Schedule 3D which will be over and above the rates defined in Schedule 3A. However, no incentives will be applied for providing treatment to CMHIS(EP) beneficiaries, and the rates provided in Schedule 3B are fixed with no additional incentive.	Incentivization will be provided to AB PM-JAY CMHIS empanelled hospitals based on the guidelines provided in Schedule 3D which will be over and above the rates defined in Schedule 3A. For treatment to CMHIS(EP) beneficiaries in CGHS hospitals within and outside the state , only NABH accredited hospitals shall be incentivised, as detailed in Schedule 3B.	Amended to include NABH Incentives for CGHS Hospitals.
22	Vol 3 Draft- Schedules Schedule 3D		2. Differential Package Pricing for CGHS empanelled hospitals using <i>N-HBP 2022 for CMHIS (EP)</i> . CGHS empanelled hospitals including those within and outside the state, for treatment of Government Employees/Pensioners/ex-Legislators/other Government Officials at the published N-HBP 2022 for CMHIS (EP) shall be eligible for NABH incentive of 15% over and above published rates (only procedures) for NABH accredited hospitals .	Amended to include NABH Incentives for CGHS Hospitals.
23	Vol 3 Draft- Schedules Schedule 13 B	Penalty Clause for KPI 5, 7 and 9	Deleted	As the Scheme is implemented in Insurance Mode with full financial liability on the IC, Penalty Clause related to KPI 5 , KPI 7, KPI 9 are deleted.

24	Vol 2 Contract: 7.1.6 c	Draft. All hospitals empanelled by the Government of Nagaland for the existing Medical Reimbursement Scheme of the State Government shall be empanelled under the CMHIS(EP).	. All hospitals empanelled by the Government of Nagaland for the existing Medical Reimbursement Scheme of the State Government may be empanelled under the CMHIS(EP), provided such hospitals are wiling to empanel under CGHS	Amended
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Annexure 1: Response to Prebid Queries
Refer to excel sheet uploaded



DR. KIKA LONGKUMER
STATE NODAL OFFICER (AB PM-JAY CMHIS)