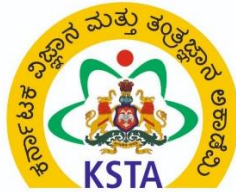


Karnataka Science and Technology Academy (KSTA)

Dept. of Science & Technology, Govt. of Karnataka

Tender Document for Group Medical Insurance Policy for KSTA Employees & Their Dependent Family Members



Prof. U R Rao Vijnana Bhavana, Major Sandeep Unnikrishnan Road,
Near Doddabettahalli Layout, Vidyaranyapura Post, Bengaluru- 560 097
Tel/Fax-080-29721549/50; e-mail: ksta.gok@gmail.com

Karnataka Science and Technology Academy (KSTA)

Dept. of Science and Technology, Govt. of Karnataka

Prof U. R. Rao Vijnana Bhavan, Horticulture Science College Entrance, GKV Campus, Major Sandeep Unnikrishnan Road, Vidyaranyapura Post, Bangalore – 560 097

Phone No. 080-29721550/149, Email: ksta.gok@gmail.com

Tender for Group Medical Insurance Policy for KSTA Employees & Their Dependent Family Members

Tender Ref No.: KSTA/Admn/11/2020-21, Date: 11/08/2020 Karnataka Science and Technology Academy (KSTA), is an autonomous organisation under the Department of Science and Technology, Government of Karnataka. KSTA is carrying out many unique programs across the state and it has been playing a pivotal role in providing impetus for basic science education and popularization of science among different cross sections of society, more particularly among rural students. KSTA is having a small group of dedicated staff with the age ranging between 24 and 56 years. Duly sealed tender is invited from reputed Public Sector General Insurance Companies for Medical Insurance Policy for KSTA employees and their dependent family members.

Important Dates & time

Sl. No.	Particulars	Date	Time
1	Last date & time for submission of tender	17.08.2020	2.30pm
2	Date and time of opening Tender	18.08.2020	3.00PM

The bids/offers received after the due date and time mentioned above will not be entertained under any circumstances. Incomplete and unsigned bids or the bids not in prescribed format will be rejected without assigning any reason. The bid/offers should be complete in all respects and submitted to The Chief Executive officer, Karnataka Science and Technology Academy, Dept. of Science and Technology, Govt. of Karnataka, Prof U. R. Rao Vijnana Bhavan, Horticulture Science College Entrance, GKV Campus, Major Sandeep Unnikrishnan Road, Vidyaranyapura Post, Bangalore – 560 097

Terms and conditions:

1. Procedure for submission: Sealed envelopes to be placed and super scribed as “Tender for Medical Insurance Policy for KSTA employees and their dependent family members”. The sealed envelope should be dropped in the tender box placed in the office before the due date and time. Those who send the tender documents by post, have to ensure that the documents should reach before the prescribed time & date. The Institute will not take any responsibility under any circumstances for courier/ postal delays.
2. **The envelope should contain the following:**
 - 1) Duly completed covering letter as per Annexure-I on official letter head.
 - 2) The terms and conditions duly signed as Annexure-II.
 - 3) Relevant supporting documents.
 - 4) The financial bid as per Annexure-III.

- 5) The list of Government organization/ major corporate clients handled during the last three years for medical insurance coverage must be submitted with documentary proof.
3. During the tender opening one authorized representative of the bidder may be present.
4. The bid shall be opened at 3.00 PM on the date mentioned above. If the said date is declared as holiday tender will be opened on the next working day at 12.00 noon.
5. The rate/commercial/technical offer of the firm should remain valid for 90 days from the date of tender opening.
6. The tenderer should sign on each page of the tender documents.
7. Bid which are late/vague/conditional/incomplete/not confirming to the laid down procedure in any respect will be rejected.
8. Tenders sent by fax & email will not be accepted.
9. In case of differences arising in the terms and conditions of the tender documents with the firms, the decision of KSTA shall prevail.
10. KSTA reserves the right to modify/change/delete/add any further terms and conditions prior to issue of agreement.
11. Arbitration- All dispute and differences which may arise between the KSTA and the Insurance Company shall be referred to CEO, KSTA whose decision shall be binding on all concerned.
12. KSTA reserves the right to accept or reject any or all offers without assigning any reason(s) thereof.
13. The enquiry number and last date should be super scribed on the envelope and offer (duly sealed offer) should reach us on or before as above mentioned date & time. Tenders shall be opened on 18.08.2020 at 3.00 pm.

JURISDICTION: Disputes, legal matters, court matters, if any, shall be subject to Bengaluru Jurisdiction only. "Corrigenda/Addendum/Clarification (if any) in the tender will be published only on our website kstacademy.in at least 3 days before the tender closing date"

All tenderers should forward a declaration in the enclosed format, which should form a part of tender documents. Tenders received without this declaration will not be considered

-sd-
Chief executive Officer
Karnataka Science and technology Academy

To,

The Chief Executive officer

Karnataka Science and Technology Academy (KSTA)
Dept. of Science and Technology, Govt. of Karnataka
Prof U. R. Rao Vijnana Bhavan, Horticulture Science College Entrance
GKVK Campus, Major Sandeep Unnikrishnan Road
Vidyaranyapura Post, Bangalore – 560 097

Sub: - Tender for Medical Insurance Policy for KSTA Employees & their Dependent Family Members

Ref: Notice inviting Tender No.

With reference to the above, I am/ we are offering our competitive prices for Group Medical Insurance Policy for KSTA, Bengaluru.

I/We hereby reconfirm and declare that I/ We have carefully read and understood the above referred tender document including instructions, terms & conditions, specifications, schedule and all the contents stated therein and all subsequent corrigendum published on website.

I/We hereby declare that my/our firm has not been blacklisted/suspended by any department/unit/Autonomous Body/PSU of Central/State Government.

Thanking you,

Yours faithfully,

(Signature of the Tenderer)

Name : _____

Mobile No. _____

**TENDER OF MEDICAL INSURANCE POLICY FOR KSTA EMPLOYEES AND THEIR
DEPENDENT FAMILY MEMBERS**

Technical details		Remarks
Name	Karnataka Science and Technology Academy	
Commencement Date	20.08.2020	
Period	One Year	
Insured details		
Employee strength as on 10.08.2020	15	
No. of employees	15	Detail attached in ANNEXURE - IV
No. of Dependents	45	
Total No. of Lives	60	
Maximum Age	Not applicable	
Sum Insured bands	Rs. 5,00,000/-	
Coverage and Benefits details		
Family Definition	Employee, spouse, children and parents	
Domiciliary Hospitalization	Covered	
Pre-existing diseases	Covered	
Pre health check-up	Waived	
1st Year and 2nd year exclusions	Waived	
Cashless facility	Applicable	
30 days waiting period	Waived	
30 days Pre and 60 days post hospitalization expenses	Covered	
Co-payment	Not applicable	
Sub Limit for Room Rent Capping	1. Room Rent – 1% of the sum insured/day 2. ICU – 2% of the sum insured/day	
Ambulance Service	1. Per claim – Not less than Rs. 2000/-; Maximum during policy period – Not less than Rs. 6000/-	
Daily cash allowance and	0.1% of sum insured per day; Maximum period not less than 10 days per illness	
Attendance allowance	Not less than Rs. 500/- per day; Maximum period not less than 10 days per illness	
TPA	TPA Service involved (if any) and Name to be submitted at the time of Final Placement.	List of Network hospitals to be provided.
Medical Second opinion on major illness	Not less than Rs. 10,000/-	
Medical Expenses	Not less than 30 days prior and 60 days of hospitalisation	
Any Service charges on Medical Bills	Should not be deducted from the Claim	
Personal Accident Cover	World-wide	

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Sandeep Unnikrishnan Road, Vidyaranyapura Post, Bangalore – 560 097

Phone No. 080-29721550/149, Email: ksta.gok@gmail.com

Financial Bid

Name of Work: Tender for Medical Insurance Policy for KSTA Employees & their Dependent Family
Members from the Public Sector General Insurance Companies

Tender Ref No.: KSTA/Admn/Medical Ins./2019-20 Dated:18/10/2019

Name of agency: _____

Address : _____

Item No.	Employee Details	Age	Sum Insured (Rs.)	Premium (Rs.)	Total Amount (Rs.)
	Taxes				
	Total Premium Payable				

Total amount of Premium (in words):

Date: ____/____/____

Place: _____

Signature of Authorized Signatory

Seal

Employee Details

SI No.	Employee & Dependents	Date of Birth
1	Employee - 01	20-05-1965
	Wife	05-11-1973
	Daughter	20-11-1998
	Mother	24-04-1942
2	Employee - 02	20-07-1971
	Wife	13-03-1973
	Son	06-10-2005
	Mother	12-10-1954
3	Employee - 03	03-03-1977
	Wife	21-01-1987
	Daughter	30-01-2015
	Mother	06-10-1958
	Father	29-05-1955
4	Employee - 04	16-09-1969
	Wife	01-06-1978
	Son	07-12-1998
	Mother	01-01-1949
5	Employee - 05	01-07-1983
	Mother	20-08-1956
	Father	01-03-1946
6	Employee - 06	09-10-1985
	Wife	16-05-1991
	Daughter	26-12-2017
	Mother	01-01-1959
	Father	04-03-1947
7	Employee - 07	01-06-1985
	Wife	08-07-1991
	Daughter-1	13-05-2014
	Daughter-2	20-03-2017
	Mother	26-02-1965
	Father	19-04-1950
8	Employee - 08	31-03-1979
9	Employee - 09	14-06-1979
	Wife	24-12-1987
	Son	07-06-2015
	Daughter	26-01-2010
	Mother	01-01-1962
	Father	01-01-1948

Sl	Employee & Dependents	Date of Birth
No.		
10	Employee - 10	25-04-1973
	Wife	30-11-1976
	Daughter-1	07-10-2004
	Daughter-2	21-02-2011
	Mother	21-12-1948
11	Employee - 11	26-05-1979
	Wife	06-06-1982
	Daughter	26-11-2001
	Mother	11-02-1959
12	Employee - 12	18-07-1974
	Wife	25-05-1984
	Son	25-11-2009
	Daughter	01-04-2006
	Mother	01-01-1958
13	Employee - 13	21-06-1982
	Wife	01-03-1991
	Daughter-1	09-07-2011
	Daughter-2	03-02-2015
14	Employee - 14	22-12-1996
	Mother	01-01-1972
15	Employee - 15	29-05-1991
	Mother	11-06-1969