

RFP Number: S-12017/86/2020/NHA-Part (3)

Title:- RFE for "Selection of Implementation Support Agencies"

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Responses to the pre-bid queries

S N o	Volu me (I/II), Page No,Se ction No.	Section Name	Statement as per RFE document	Query by bidder	Response/Clarification
1	Vol- 1,13, 3.1 (f)	Scope of Work	Selected bidders will have to perform the activities under all the abovementioned categories; however, one agency cannot perform more than one (1) activity for the same case. For example, out of selected agencies "A" agency performs the activity of Preauthorization then subsequent activity of claim processing shall be performed by one of the rest 3 agencies (B,C &D).	In scenarios where agencies inadvertently handle the same case across different stages (e.g., Pre-auth, CEX, or CPD), what measures will the NHA implement to ensure compliance with the guideline that a single agency cannot handle more than one activity for the same case?	NHA's IT system has been configured to ensure compliance, i.e. one agency will not perform more than one (1) activity for the same case.

			Accordingly, agencies need to ensure for adequate resources to perform all the roles mentioned above. Agencies shall submit the rate for preauth approval and rates for the other activities will be derived based on the formula provided in the financial bid sheet.		
2	Vol- 1,13, 3.1 (h)	Scope of Work	NHA reserves the right to distribute the workload amongst the empaneled agencies as per its own discretion at any point of time during the currency of the contract and the same will be final and binding on all the parties.	Are there predefined parameters or criteria (e.g., performance metrics, geographical coverage, or specific expertise) that will guide the distribution of workload among the agencies?	The workload will be distributed among the empaneled agencies based on work orders issued by the National Health Authority (NHA). The NHA will determine the number of agencies to whom work orders to be issued issued, considering NHA requirements (Clause 26 - Evaluation of Bids and Selection of Successful Bidder (s), Page no. 26) and the vendors' capacity. During the contract period, the declared and actual capacities of the vendors will be periodically reviewed by the NHA, which may lead to adjustments in the number of onboarded vendors. Priority in work order issuance will be as follows: 1. The first opportunity will be given to the vendor offering the cumulative lowest quotation that matches the discovered L1 (lowest) price. 2. Subsequently, priority will be extended to the vendor with the next higher quotation that matches the discovered L1 (lowest) price, and so on.

					For vendors receiving work orders, the following criteria will govern the distribution of workload among the empaneled agencies. 1. System assigns new case to the 'active' user as soon as the earlier assigned case is processed. For this, system does not differentiate among ISAs. 2. Point 1 under 'Clause B1: Penalty for not meeting the target' states Penalty for each ISA will be calculated monthly based on the shortfall from the target which will be the equal distribution of submitted preauth / claims in the month, after factoring in claim pendency ratio. So, workload distribution will be equal among 'active' users. However, in scenario of non-performing ISA(s), NHA may activate this clause and alter the
					activate this clause and alter the distribution to ensure pendency of claims do not go beyond the
3	Vol- 1,14, 3.11	Scope of Work	Selected bidders shall abide by the productivity KPI mentioned in Appendix III. Each empaneled agency should process required percentage of cases to ensure that they combinedly meet the TAT, however in case they fail, the liability would be calculated as per the Appendix III. However, NHA reserves the right to allocate the case load amongst the empaneled	Please clarify what is the required percentage of cases should be process? And also Could you clarify whether the TAT is calculated: 1. From the date the cases are allocated by the NHA to the selected agencies, or 2. From the date of discharge of the beneficiary by the Health Care Provider (HCP)?	set limits. 1. For required percentage of cases: Please refer to Point 1 under 'Clause B1: Penalty for not meeting the target' states, page 53. 2. TAT for clause B1: TAT will be calculated from the time case is allocated to the user. Refer corrigendum point no7

			agencies at any given time during the currency of the contract and the same will be final and binding on all the parties.		
4	Vol- 1,14, 4.3 (1)	Eligibilit y and pre- qualific ation technic al criteria for bidders & Bid security	Pre-Qualification Criteria The bidder should be registered as private or public limited insurance company	Since the tender is for ISA / TPA, request to pls change the word Insurance company.	The bidder should be registered as private or public limited insurance company / Third Party Administrators (TPA) Refer corrigendum point no1
5	Vol- 1,45,F ormat -7	ANNEX URES: FORMA TS	PQ-7: Blacklisting And Pending Suit Declaration (on Non-Judicial paper of Rs. 200/-duly notarized by Notary Public / First Class Magistrate)	Please clarify the stamp paper value?	Undertaking must be on Rs. 100/- non judicial stamp paper duly notarized by Notary Public / First Class Magistrate
6	Vol- 1,15, 4.3 (7)	Eligibilit y and pre- qualific ation technic al criteria for bidders & Bid security	Pre-qualification criteria The Bidder(s) shall inform NHA of any such pending suits/ enquiry/ investigation against the Bidder in any court of law, legal authority, paralegal authority which may hamper the execution of works under this RFE Undertaking to be submitted on a non- judicial stamp paper-INR 100	Please clarify the stamp paper value?	Undertaking must be on Rs. 100/- non judicial stamp paper
7	Vol- 1,13,	Scope of Work	Claim audit and investigation post the scrutiny of claims at PPD	% of audit need to be confirmed?	Refer corrigendum point no11 to 14

	3.1 (d)		and CPD level and will submit the audit report at the end of each reporting quarter		
8	Vol- 1,13, 3.1 (g)	Scope of Work	Selected bidders will conduct the audit of the claims. The number of claims allocated to the selected bidders for audit will be proportionate to number of claims scrutinized (at PPD and CPD level) by that bidder. Claims scrutinized by the selected bidders at PPD and CPD level will not be allocated to the bidder for audit purposes.	Could you pls clarify: 1. What is the minimum percentage (%) of claims that will be mandated for audit by each bidder?	Refer corrigendum point no11 to 14
9	Vol- 1,52, Appe ndix- 1, KPI- SLA	B - Perform ance KPI	Turn around time (TAT)	is any dashboard/MIS/ Data will be provided to ISA for Monitoring of TAT.	This information will be provided to ISAs onboarded by NHA.
10	Vol- 1,57, Appe ndix- 1, KPI- SLA	B - Perform ance KPI (Daily Action Count)	Each user, such as PPD, CEX, CPD, and ACO, is required to perform one of the actions authorized for the specific role (e.g., Approve, query to HCO, Reject) for each presented claim. Every empanelled ISA is required to ensure an average of 22,000 actions* per day, encompassing actions taken at CPD level across all convergence schemes.	In case technical issues & non availability of sufficient claim data than how penalty will be calculated for the ISA.	For Daily action count, may refer Corrigendum point no10 The answer to the query: MEDCOs in empanelled HCOs (Health Care Organization) across India are submitting claims on daily basis. NHA will onboard ISAs basis the daily / weekly / monthly trend of claim submission on its portal. So, there will always be sufficient claims to process by each onboarded ISAs. In case of any technical issue, ISAs may raise ticket on NHA's support portal for earliest possible resolution and its documentation.

11	Volu me 2,48, Appe ndix- 1	Empane Iment Agreem ent	ISA will also provide the following additional support services: i. Support NHA in deployment of IT platform and maintenance including modification in IT systems (if any). Also provide claim processing software wherever required.	specification of software requirement.	Refer Corrigendum point no17
12	Volu me 2,48, Appe ndix- 1	Empane Iment Agreem ent	ISA will also provide the following additional support services: ii. Provide mobile handsets (android based smartphone) and pay monthly service charges.	Quantity required	Refer Corrigendum point no17
13	Volu me 2,48, Appe ndix- 1	Empane Iment Agreem ent	ISA will also provide the following additional support services: iii. Coordination with toll free call center including linkage with national call centre as defined by Government of India, wherever requested for.	Process of linkage & criteria.	Refer Corrigendum point no17
14	Volu me 2,44, 25 (c)	Reporti ng Require ments	All reports shall be uploaded by the ISA online on the NHA web portal along with separate email and physical copy.	is any login provided for submission of online report?	Refer Corrigendum point no 18,19 & 20
15	Vol- 1,,	schedul e-1		NHA will pay the ISA fee with in the 30 days after the bill submission. If payment is not made within the 30 days from the date of bill submission, will NHA pay compensation for the delay.	No compensation
16	Vol 2,,13 (J)			point no 13 (J) -Investigation part should not be applicable for ISA.	Refer Corrigendum point no 2,3,4, 21 & 22

				empanelment agreement (G) following points should not be the part of ISA	Refer Corrigendum point no17
	Vol	Append	i. Support NHA in deployment of IT platform and maintenance including modification in IT systems (if any). Also provide claim processing software wherever required.		
17	2,,	ix - 1		ii. ii. Provide mobile handsets (android based Smartphone) and pay monthly service charges.	
				iii. iii. Coordination with toll free call center including linkage with national call centre as defined by Government of India	
18	"			ACO: Claim Sanctioning - Account Officer (ACO) Role Will login credentials be provided to the ISA for sanctioning claims after CPD approval? In the previous policy, this responsibility did not lie with the ISA. Kindly confirm the current policy regarding this process.	Requirement of ACO role shall be in few convergence schemes only, which will be decided by NHA and accordingly communicated to ISAs.
19	,,			Audit Percentage at PPD, CEX, & CPD Levels What is the mandated audit percentage at each level (PPD, CEX, and CPD)?	Refer corrigendum point no11 to 14
20	"			ISA Responsibilities in Tripartite Agreement (Page 22, Vol-2) The tripartite agreement involving SHAs, ISAs, and healthcare providers mentions the state-wise allocation of ISA responsibilities. Could you provide more details on how these responsibilities will be distributed across states?	Refer corrigendum point no 27 & 28

21	Vol- 1,23,	True certified copies of work orders/LoA/ client certificate clearly stating the experience of handling at least 50,000 (fifty thousand) hospitalization health claims	Could you please accept CA certificate instead Work Order/LOA /Client Certificate, As in Work Order or LOA doesn't mention the experience of handling of claims .	As per RFE
22	Vol- 1,12,	The purpose of this RFE Document is to empanel maximum 10 (ten) competent and experienced implementation support agencies (ISAs) to support NHA in order to facilitate implementation of healthcare schemes converged at NHA's IT platform.	Kindly Elaborate how many ISA/TPA will get work distribution out of selected 10 ISA/TPA. Do all the selected or Qualified 10 TPAs/ISAs need to submit a Bank Guarantee? If yes, does this imply that every TPA/ISA will receive an equal opportunity for work allocation at the L1 rate?	a. The workload will be distributed among the empaneled agencies based on work orders issued by the National Health Authority (NHA). The NHA will determine the number of agencies to whom work orders are issued, considering its requirements (Clause 26 - Evaluation of Bids and Selection of Successful Bidder (s), Page no. 26) and the vendors' capacity. During the contract period, the declared and actual capacities of the vendors will be periodically reviewed by the NHA, which may lead to adjustments in the number of onboarded vendors. Priority in work order issuance will be as follows: 1. The first opportunity will be given to the vendor offering the cumulative lowest quotation that matches the discovered L1 (lowest) price. 2. Subsequently, priority will be extended to the vendor with the next higher quotation that matches the discovered L1 (lowest) price, and so on. For vendors receiving work orders, the following criteria will govern the distribution of workload among the empaneled agencies. 1. System assigns new case to the 'active' user as soon as the

			The ICA shall support the		earlier assigned case is processed. For this, system does not differentiate among ISAs. 2. Point 1 under 'Clause B1: Penalty for not meeting the target' states Penalty for each ISA will be calculated monthly based on the shortfall from the target which will be the equal distribution of submitted preauth / claims in the month, after factoring in claim pendency ratio. So, workload distribution will be equal among 'active' users. However, in scenario of nonperforming ISA(s), NHA may activate this clause and alter the distribution to ensure pendency of claims do not go beyond the set limits. b. Yes, all selected or qualified TPAs/ISAs who accept to match the L1 rate are required to submit a Bank Guarantee as a Security Deposit. The empanelment agreement will be finalized only after the receipt of the Security Deposit.
23	2,37,		The ISA shall support the call centre function by providing information related to projects established by NHA for the benefit of all covered Persons by providing call centre executives.	Kindly Clarify this Point , Do ISA need to setup a Call Centre or Do ISA need to provide or deploy manpower support to NHA .	Refer Corrigendum point no17
24	"	General Queries		How do We get the data for Billing , Do we need to be dependent upon NHA for Data to generate Invoice	This information will be provided to ISAs onboarded by NHA.
25	"	General Queries		What is Payment TAT to ISA, after raising the Invoice to NHA	Refer Corrigendum point no16

26	,,	General Queries		Can an ISA/TPA issue a pro forma invoice for payment ?	Refer Corrigendum point no16
27	n	General Queries		Since TPAs/ISAs need to deploy a significant number of doctors and manpower for processing preauthorizations and claims, can the NHA limit the penalty amount to a maximum of 10% of the invoice value?	As per RFE
28	n	General Queries		Will the NHA provide TPAs/ISAs with a dashboard to monitor daily, monthly, and quarterly progress, as well as to view processed data on the NHA-TMS1 and TMS2 software?	This information will be provided to ISAs onboarded by NHA.
29	Vol 1,23- 24,18 .1	Formats checklis t for Pre- Qualific ation Bid		Check List Not in line with Reference	Refer Annexure-A of the Corrigendum
30	Vol 1,50,	Append ix 1		Audit % and Parameters Missing Payment KPI's Missing	Refer corrigendum point no11 to 14
31	Vol 2,23, 7.2	Perform ance Bank Guarant ee	7.2.1.1 The ISA shall submit to the NHA within 15 (fifteen) days of on or before the date of execution of this Contract, an irrevocable, unconditional and ondemand bank guarantee from a Scheduled Bank for a sum of INR 30,00,000 (INR Thirty Lakhs only) that is payable or confirmed for payment in New Delhi, in the format set forth in Schedule 5 (the "Performance Security" or "Performance Bank Guarantee" or PBG), to secure the due performance of the ISA's obligations and the discharge of the ISA's	PGB amount to be Negotiated	As per RFE

			liabilities under this Agreement, whether during or after the Term		
32	Vol 2,35, 17.2	Organiz ational Set up and Functio ns	a. In addition to the mandatory staff for the duties, the ISA shall recruit or employ experienced and qualified personnel exclusively for the purpose of implementation of the scheme and for the performance of its obligations and discharge of its liabilities under the insurance Contract. List of staff provided under Schedule 15 are minimum manpower to start the project, but ISA must have sufficient manpower to perform the various functions of the scheme implementation:	As per this point Schedule 15 not found in any of the Volumes of the tender	Refer Corrigendum point no32
33	Vol 2,35, 17.2	Organiz ational Set up and Functio ns	b. In addition to the personnel mentioned in Schedule 2, the ISA shall recruit or employ experienced and qualified personnel including but not limited to following roles within its organisation exclusively for the purpose of the implementation of the Scheme:	Requested to Specify the roles as the given roles or any specific requirement	Refer Corrigendum point no25

34	Vol 2,37, 17.2.f	Project Office and Manpo wer	The ISA agrees to provide support to national toll-free telephone services for the guidance and benefit of the beneficiaries whereby the covered Persons shall receive a. Call Centre Information The ISA shall support the call centre function by providing information related to projects established by NHA for the benefit of all covered Persons by providing call centre executives. The Call Centre functions for 24 hours a day, 7 days a week and round the year. The cost of operating of the number shall be borne solely by the NHA but the cost of training and capacity building shall be taken care by ISA. As a part of the Call Centre Service the ISA shall provide all the necessary information aboutscheme benefits to any person who calls for this purpose. The call centre shall have access to all the relevant information of scheme convergence along with eligibility under various schemes as per the parent organization of scheme convergence project so that it can provide answer satisfactorily.	Require clarity on Manpower deployment at NHA Call Centre	Refer Corrigendum point no17
35	Vol 2,39- 40,22	Manage ment Informa tion System	Management Information System	Require data access for analysis and dashboard preparation	

36	Vol 1,22, 17	Fee For Services		Currently There is no ACO Provision in the System. Kindly Conform to bid for ACO Login or not.	Requirement of ACO role shall be in few convergence schemes only, which will be decided by NHA and accordingly communicated to ISAs. Bid for ACO to be provided by the agencies.
37	Vol 1,54,		In the event of failure of maintaining performance metrics specified in Appendix I, Key Performance Indicators-SLA, penalties as defined in the metrics would be levied on amount of the invoice, subject to a maximum of 25% of the payment for that invoice period. NHA may recover such amount of penalty from the associated payment being released to ISA and if required, the additional amount may be recovered from the Performance Bank Guarantee.	Penalty should be maximum 10% of the total Invoice value. The ISA's are quoting a small amount of fee and total outgo to the ISA is already less than 2% of the total outgo of claims processed. In such a situation total penalty should not be more than 10%. NHA can reserve a right to remove ISA's which have a higher Penalty	as per RFE
38	"			Clarification regarding ACO Role In current tender ACO role was removed and no cases were given. If cases are to be given what volume of such cases can be expected?	Requirement of ACO role shall be in few convergence schemes only, which will be decided by NHA and accordingly communicated to ISAs. Exact number cannot be assured at this juncture.
39	Vol 1,69,		MBBS/MD from a recognized medical college. Experience in insurance or TPA industry in the area of provider claim processing and audit is desirable.	BHMS/ BDS can be part of this project as we have OPD claims to process	as per RFE
40	"			Claim summary of last 1 year (OPD/IPD separate)	as per RFE
41	Vol 1,57,		Percentage of Audit to be performed is not available	Percentage of Audit to be performed is not available	Refer corrigendum point no11 to 14