

Coal India Limited A Maharatna Company (A Govt. of India Enterprise) Medical Department

Request for Empanelment of Hospital

Coal India Limited (CIL) is the largest coal producing, Maharatna Public Sector Undertaking under Ministry of Coal, Govt. of India with Head Quarter at Kolkata.

It has the following 8 (eight) subsidiaries in India:

- Eastern Coalfields Limited (ECL), Sanctoria, West Bengal
- Bharat Coking Coal Limited (BCCL), Dhanbad, Jharkhand
- Central Coalfields Limited (CCL), Ranchi, Jharkhand
- 4. South Eastern Coalfields Limited (SECL), Bilaspur, Chhattisgarh
- 5. Western Coalfields Limited (WCL), Nagpur, Maharashtra
- 6. Northern Coalfields Limited (NCL), Singrauli, Madhya Pradesh
- 7. Mahanadi Coalfields Limited (MCL), Sambalpur, Orissa
- 8. Central Mine Planning & Design Institute Limited (CMPDIL), Ranchi, Jharkhand

and one division, North Eastern Coalfields (NEC), Margherita, Assam as well as Sales & Marketing Office at Ahmedabad, Bangalore, Chandigarh, Chennai, Delhi, Hyderabad, Jaipur, Lucknow, Mumbai & Pune.

CIL has a total workforce of near about 3.20 lakhs and is providing free medical facilities to all its employees and their dependent family members.

Moreover, CIL is also providing Contributory Post-Retirement Medicare Scheme for Executives (CPRMSE) and Contributory Post-Retirement Medicare Scheme for Non-Executives (CPRMS NE)

As a continuous on-going exercise for empanelment of hospitals for treatment of existing employees and their dependent family members and retired employees and their spouse of Coal India Limited and its different subsidiaries, offers are invited from reputed hospitals located in different parts of country.

Hospitals should fulfill following eligibility criteria and accept terms and conditions as mentioned below:

Extension of Treatment Facility -

- a) Existing employees and their dependent family members
- b) Retired employees and their spouse

For total treatment facilities available including indoor, OPD, Day care, Investigation, Consultation etc.



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Eligibility Criteria:

- NABH accredited Hospitals accepting CGHS rate.
- 2. Hospitals which have been empaneled by at least 3 (three) CPSE Central Public Sector Enterprise/ Undertaking accepting CGHS rate.
- 3. Valid empanelment with CGHS, ESI, and any Central Govt. organization like Railways etc. will be taken at par with PSU empanelment.
- 4. In case of non-availability of NABH accredited hospital or hospital empaneled by 3 (three) CPSEs (in certain remote places), empanelment of other hospitals may be done on the basis of physical inspection but based on specific recommendation of CMD of Subsidiary with approval of Director (P&IR) and Chairman, CIL.
- 5. Total Bed Strength of hospital should be 100 or more.
- 6. There should be in-house availability of Critical Care Unit, laboratory, X-ray and Ultrasonography. The in-house availability of critical care unit, laboratory, x-ay, Ultrasound etc. should be for 24 hrs, round the clock
- 7. For dedicated single speciality or super-speciality hospitals viz. Nephrology & Dialysis, Joint Replacement and Orthopedics, Burn or Plastic Surgery, Eye, ENT, Dental etc. may be allowed to be empaneled even if having less than 100 beds & having need based facilities like CCU, Xray, and Ultrasound & Laboratory.
- 8. AERB certificate for centers where related equipment is available.
- 9. Bio Medical Waste (BMW) certification from respective State Govt. Pollution Control Board.
- 10. Income Tax exemption certificate of the hospital.
- 11. Fire Safety certificate issued by concerned authority.
- 12. If there is a date of validity of certificates like NABH etc. received from hospitals, the empanelment will be limited to that period only which can be extended only when the said period of validity is extended.
- 13. Claim of eligibility should be supported by notarized copy of relevant certificate from appropriate authority.

Treatment Charges:

As applicable and approved from time to time by Central Government Health Scheme (CGHS) rate for specific cities or hospital own rate whichever is less.

Hospital fulfilling above eligibility criteria, but located in the cities where CGHS rate are not applicable and approved are also welcome to submit their offers. Basis of rates for these hospitals will be the CGHS rates applicable to the Capital of the State where hospital is located. In case no CGHS approved rates are available in that State Capital, the CGHS rate as applicable to Kolkata will be considered.

Payment Terms:

- For existing employees and their dependent family members
 - a. In emergency or on specific situations 100% credit/ cashless facility should be extended by the hospital on production of photo identity card of the employee. However, endorsement/ Referral for the employee/ patient by concerned Chief of Medical Services of respective subsidiary/ CMO, CIL may be asked in next 24 hours.
 - b. Whenever an employee or his/her dependent family member is referred officially in prescribed format from subsidiary companies or from CIL-HQ, 100% credit/ cashless facility should be extended in OPD, Indoor, day care etc.
 - c. In case of credit facility, the payment will be made within 30 days after satisfactory receipt of hospital bills, countersigned by patient/ attendant, by respective Subsidiary/ CIL.



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- 2. For retired Employees and their spouse
 - a. Retired employees (executives & non-executives) and their spouse have been provided with Photo Medical Identity Card issued by respective Personnel Department of Subsidiary Company/ CIL. This Photo Medical Identity Card beside having photographs of beneficiaries and other detail also indicate the name of the Subsidiary Company/ CIL where person concerned has opted for availing medical benefits.
 - b. 100% credit/ cashless facility should be extended by the hospital in OPD, Indoor, day care etc. on production of Photo Medical Identity Card of the retired employee and spouse. However, endorsement for the retired employee or spouse by concerned Chief of Medical Services of respective subsidiary/ CMS, CIL may be asked in next 24 hours.
 - c. Hospital may send an estimate (through FAX/ email/post) and photocopy of patient's Photo Medical Identity Card along with a letter of request from retired employee/ patient, if possible, for getting a letter of endorsement for 100% credit/ cashless facility from concerned Chief of Medical Services of respective subsidiary/ CMS, CIL.
 - d. In case of credit facility, the payment will be made within 30 days after satisfactory receipt of hospital bills, countersigned by patient/ attendant, by respective Subsidiary/ CIL.
- 3. Payment will be made in form of A/c payee cheque/ draft/ e-payment.
- 4. For dedicated single speciality or super-speciality hospitals also, treatment charges will remain as before e.g. CGHS Rates or actual whichever is less.
- 5. No payment on account of cosmetics, phone call, toilet articles, food/ diet (if charged separately, over and above cabin/ bed charges. However, there will be no deduction for diet where charges for diet is included in cabin/ bed charges), beverages, wines, etc. will be made by CIL/ Subsidiaries. The same, if any is to be paid by employee/ retired employee/
- 6. If hospital authorities want to enclose any document to strengthen their claim for empanelment, they are welcome to do so.
- 7. CIL reserves the right to short list and reject any offer without assigning any reason.
- 8. All supportive documents/ credentials should be properly notarized.
- 9. Copy of check list is enclosed which may be duly filled, signed and submitted with offer. Offer to be submitted in closed envelop preferably super scribed with "Offer for Empanelment of Hospitals" to undersigned at address mentioned below.

Chief of Medical Services/ HoD - Medical,

Coal India Limited, "Coal Bhawan", Coal India Limited, Premises No 04, MAR, Plot No AF-III, Action Area-1A, New Town, Rajarhat, Kolkata-700156.

Contact No.: 033-2324-4076, 7110-4214/ 4618/ 4637 /4638

Fax No.: 033-23246525

Email: medical.cil@coalindia.in

As empanelment of hospitals will be a continuous ongoing exercise, no last date for submission of offer is fixed. Offers will be examined as and when received as per CIL guidelines.



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CHECK LIST

| | CHECK LIST | | | |
|------------|--|-----------------------------------|--|--|
| 1. | Name of the Hospital (with address including contact no., fax no. & e-mail) | V/N- | | |
| 2. | NARH Accreditation (with supportive notarized document) | Yes/ No | | |
| 3. | Empanelled by at least 3 CPSEs (with supportive notarized document) | Yes/ No (Pl. Specify) No. of Beds | | |
| 4. | Rod strength of the Hospital (with supportive notarized document) | | | |
| 5. | Natarized copy of Valid registration Certificate of the Hospital | Yes/ No | | |
| 6. | Distribution of Bods: General Ward, Cabin – private & Selfii private, 100 etc. | Yes/ No | | |
| 7. | Availability of in-house facility of Critical Care Unit, Laboratory, X-ray & | Yes/ No (Pl. | | |
| /. | Ultrasound (with supportive notarized document) | Specify) | | |
| 8. | Notarized copy of Valid PNDT Certificate for USG | Yes/ No | | |
| 9. | List of Permanent/ On roll Doctors of the Hospital | Yes/ No | | |
| 10. | Number & Detail of X-ray machine/s | Yes/ No | | |
| 11. | Laboratory tests performed and list of Laboratory Equipment | Yes/ No | | |
| 12. | Blood Bank with Notarized copy of license | Yes/ No | | |
| | ICU No. of Beds & List of equipment & availability of trained staff | Yes/ No | | |
| 13. | A SDD - artificate for centers where related equipment is available. | Yes/ No | | |
| 14. 15. | Bio Medical Waste (BMW) certification from respective State Govt. Foliation | Yes/ No | | |
| | Control Board. | Yes/ No | | |
| 16. | Income Tax exemption certificate of the hospital. | Yes/ No | | |
| 17. | Fire Safety certificate issued by concerned authority. | Yes/ No | | |
| 18. | A sentence of treatment charges as applicable and approved from time to | 100/110 | | |
| | time by Central Govt. Health Scheme (CGHS) for specific respective cities. | | | |
| 19 | Acceptance of Payment terms | Yes/ No | | |
| 20.A | For existing employees and their dependents (as mentioned in the request | 100, 110 | | |
| | s | Yes/ No | | |
| 20.B | For retired employees and their spouse (as mentioned in the request for | 100,110 | | |
| | ampanolment) | Yes/ No | | |
| 20.C | 100% credit/ cashless facility should be extended by the hospital | 103/110 | | |
| | For retired employee and spouse, on production of Photo Medical Identity | | | |
| | Cd | | | |
| | For existing employee and dependent family members, on production of | | | |
| | referral letter from CMS of Subsidiary companies/ CMS, CIL and photo | | | |
| | identity card | Yes/ No | | |
| 21. | to the second for inspection of Hospital whenever CIL deems to do so | Yes/ No | | |
| 22. | Undertaking that hospital charges to patients from Coal India will never be | 103/110 | | |
| | higher than what is charged to other Govt./ PSU organization. | | | |

| Authorized Signatory with | Designation and | seal |
|---------------------------|-----------------|------|
| Authorized organization / | | |

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