

EXPRESSION OF INTEREST BY REPUTED HOSPITALS/NURSING HOMES INCLUDING LABORATORIES/ IMAGING CENTERS FOR LGBRIMH, TEZPUR, ASSAM

Expression of Interest (EOI) is hereby invited from reputed hospitals/ Nursing homes located at Tezpur/ Guwahati, Assam for OPD consultation, emergency casualty, Indoor treatment & investigations of LGBRIMH, Tezpur beneficiaries at prevalent CGHS/ equivalent rates or hospital/ Nursing home rates whichever is lower on the following terms & conditions by Director, LGBRIMH, Tezpur.

The interested hospitals/ nursing homes should enclose all the required documents along with application form. The incomplete applications & submission after the due date will be rejected. The application for empanelment must be submitted in a sealed envelope prescribed as "Application for Empanelment of Hospitals" in office of the Director, LGBRIMH, Tezpur, Sonitpur, Assam-784001 on or before 03:30 pm on 15th November, 2021. EOI shall be opened on the same date or on a specified date & time to be notified later on.

All the application will be examined by the office of Director & those eligible will be informed accordingly. The specialties for which a hospital/ nursing home will be empanelled, will be as per requirements of LGBRIMH & decision of Director will be final and binding to all. After selection, hospitals/nursing home will have to sign MOU with LGBRIMH, Tezpur for providing cashless Medical treatment to LGBRIMH beneficiaries.

All the empanelment will be done on CGHS/equivalent rates only. Other than CGHS, ECHS & ESIC empanelled hospitals, which are interested to provide cashless medical treatment under EOI, they can also give their willingness for empanelment on their hospital tariff rates.

1. Only those hospitals are to be empanelled which are providing treatment through modern system of medicine i.e. Allopathy.
2. Hospitals should submit their rates for all the facilities/services available with their center.
3. Director, LGBRIMH, Tezpur or any other nominated officers/committee will identify the specialties for which the treatment for the LGBRIMH beneficiaries are required from the hospitals/ Nursing homes. Even if the CGHS, ESIC & ECHS hospitals are recognized for multi-specialty treatment, the specialties for which they are to be recognized by LGBRIMH, Tezpur for treatment of beneficiaries will be decided by the Director, LGBRIMH.
4. Hospital must agree to accept the terms & conditions specified in the Memorandum of Understanding(MoU), which should be read as a part of the application document.
5. Hospitals must certify that they shall charge as per CGHS rates/ CSMA rule /or equivalent rates or their hospital tariff rates, whichever is lower. The rates charged by them for LGBRIMH's beneficiaries are not higher than the rates being charged from General Patients.
6. Comparative list of CGHS rates & hospital rates should be attached to know which one is lower.
7. For those items/procedures/Investigations not covered under CGHS rate list, the



hospital/Lab/Imaging Center should offer some discounts on prevalent hospital rates. They should also offer some discounts on Medicines/Injections/Consumables etc separately.

8. The hospital should certify that no investigation/case by any Central Government/State Government on any statutory investigating agency is pending or contemplated against the hospital.
9. The Application/EOI must be submitted in duplicate.
10. All the pages of application form and Annexure(s) (each Sheet) should be serially numbered.
11. Every page of Application form and Annexure(s) need to be signed by the authorized person. The signatory must mention as to whether he/she is the sole proprietor of authorized agent. In case of partnership, a copy of the partnership agreement on stamp paper duly attested by a notary should be furnished. Similarly, in case of authorization, appropriate legal document should be furnished.
12. Application/EOI for empanelment must be submitted in the tender box placed at the LGBRIMH, Tezpur. Application/EOI received after the due date & time will not be considered. The application can also be sent by the registered post at the following address:

Office of Director,
LGBRIMH
Tezpur, Sonitpur,
Assam-784001

However, the Institute is not liable for any postal delay for whatever the reason it may be. Any application/EOI sent otherwise will be at the risk of the applicant.
13. As far as possible, all information should be given in the application. If a particular facility is not available, it should be entered as "Not Available" and not as "Not Applicable".
14. Director, LGBRIMH reserves the right to accept or reject any or all the applications at any time without thereby incurring any liability to the affected hospital/authorized representative/Service provided on any obligation to inform the affected hospital/authorized representative/service provider of the grounds for his/her action.
15. Director, LGBRIMH reserves the right to inspect the hospitals or nominated committee of doctors at any time to ascertain their compliance with the requirement of the Institute.
16. The rates shall continue to hold good unless revised by CGHS, Ministry of Health & Family Welfare. In case the notified rates are not acceptable to the empanelled private hospital, or for any other reason, the hospital/ nursing home no longer wishes to continue on the list of empanelled hospital/ nursing home, it can apply for exclusion from the panel by giving three months' notice.
17. Free Ambulance services should be provided to the LGBRIMH beneficiaries as and when necessary/needed for indoor admission.
18. Services to be extended to LGBRIMH accident victims if requested by LGBRIMH administration as and when necessary at par rates with regular LGBRIMH beneficiaries.

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19. Hospitals/ Nursing homes can even express interest for only specific specialty empanelment like Orthopedics, Neurosurgery, Cardiovascular surgeries, Obstetrics & Gynecological emergencies, Urological emergencies, Pediatrics including Neonatal emergencies.
20. Expression of Interest is for all investigations including laboratory, CT/MRI/PET scan etc if available with hospitals/ nursing homes or labs/imaging center.
21. Exclusive CGHS empanelled Laboratory/Imaging centers (NABL/Non NABL) can also apply independently.

22. SCRUTINY OF APPLICATIONS

- a) All the applications will be opened in office of the Director, LGBRIMH, Tezpur at the notified date and time.
 - b) Applicants or his/her authorized person may be present at the time of opening of the EOI containing application documents.
 - c) Director, LGBRIMH or his nominated officer will examine the application to determine:-
 - i. Whether they are complete.
 - ii. Whether any computational errors have been made.
 - iii. Whether the documents have been properly signed and serially numbered.
 - iv. Whether the application is in order.
 - v. Only those applications that are found to be complete in all respects shall be accepted for consideration of empanelment.
23. After the Hospitals/ Nursing homes are found eligible for empanelment, they will be informed accordingly & they will have to enter into MOU with LGBRIMH, Tezpur.
24. The Hospitals would be empanelled for a period of **ONE YEAR** initially. The empanelment may be extended further after satisfactory performance of the hospital.
25. The rates to be charged by the empanelled hospitals should be as per CGHS prescribed rates/ equivalent rates based on the classification of the hospitals or the Hospital tariff, (if they are not willing to empanel on CGHS rates), whichever is lower.
26. For any query contact at lgbrimh@gov.in or at 8486279647.



APPLICATION FORM

FOR RECOGNITION OF HOSPITALS/ NURSING HOMES FOR LGBRIMH, TEZPUR
AS PER CGHS/ EQUIVALENT RATES

Sr. No	Particulars	Remarks
1	Name of the Hospital/ Nursing home	
2	Address of the Hospital/ Nursing home (with email ID & Fax)	
3	Telephone No.	
4	Name of contact details of nodal persons	
5	Empanelled with CGHS, ECHS & ESIC or Not Empanelled Hospital/ Nursing home (Please attach a copy of the relevant certificates).	
6	Application for Empanelment as:	
a)	General Purpose/Specialty hospital	
b)	Super-Specialty hospital	
c)	Cancer Hospital/Eye Hospital	

7	Specialty for which recognized under CGHS, ECHS & ESIC	
8	Total Numbers of beds	
9	Whether willing to work on CGHS latest rates or Hospital Tariff rates	
10	List of Doctors working in the hospital & their qualification (Separate Annexure should be attached)	
11	Detail of infrastructure, facilities & others (documents should be attached)	
12	Whether accredited by NABH/NABL (if yes, please attach copy of certificate)	
13	Name of the owner of the hospital/institution/company	
<p>Declaration: This is to certify that I have read the instructions, MOU and the terms & conditions carefully. The information given by me is true to the best of my knowledge and if any particular time, it is found to be false, I shall be fully responsible and my hospital will be subjected to be de-empanelment. That no investigation by any Central Government/State or any statutory investigating agency is pending or contemplated against the Hospital.</p>		

Signature of the Authorized Applicant
with seal

**LIST OF DOCUMENTS TO BE ENCLOSED FOR RECOGNITION OF HOSPITALS/
NURSING HOMES FOR LGBRIMH BENEFICIARIES**

1	Self-attested copy of certificate of empanelment with CGHS/ECHS/ESIC (if empanelled)
2	Self-attested Certificate that the hospital/ Nursing home is willing to work as per CGHS
3	Registration Certificate with Local Authorities
4	Registration under PNDT act & AERB
5	Self-attested copy of PAN Card
6	Bank A/c details
7	List of all Permanently employed full time Doctors along with their qualification
8	List of available specialties
9	Certificate regarding the Doctors enlisted in their enclosure are full time specialist/Medical Officers employed with their hospital
10	Certificate (Self-declaration) that no case is pending against their hospital with State Govt./Central Govt. or any other statutory body

ACCEPANCE LETTER
(To given on Health Care Organization Letter Head)

To,
Director,
LGBRIMH, Tezpur
Assam-784001

Date:.....

Sub:- Acceptance of Terms & Conditions of EOI for empanelment with
LGBRIMH, Tezpur.

Dear Sir,

1. I /We have obtained the Application document(s) for the above mentioned 'Application work' as per your advertisement.
2. I/We have certify that I/We have read the entire terms and conditions of the Application documents from Page No..... to.....(Including all documents like Annexure(s), schedule(s), etc. which form part of the contract agreement and I/We shall application hereby by the terms/conditions/clauses contained therein.
3. The corrigendum(s) issued from time to time by your department/organization too, have also been taken into consideration, while submitting this acceptance letter.
4. I/We hereby unconditionally accept the Application conditions of above mentioned Application document(s)/corrigendum(s) in its totality/entirely.
5. In case any provisions of this Application are found violated, then your department/organization shall without prejudice to any other right or remedy be at liberty to reject this Application/Application including the forfeiture of the full said earnest money deposit absolutely.
6. Also I/We have not been suspended/blacklisted by any PSU/Govt. Department/Financial Organization/Court.

Your Faithfully,

(Signature of the Applicant with Official Seal)