



## **ಕರ್ನಾಟಕ ಕಟ್ಟಡ ಮತ್ತು ಇತರ ಕಟ್ಟಡ ಕೆಲಸಗಾರರ ಕಲ್ಯಾಣ ಬೋರ್ಡ್**

**KARNATAKA BUILDING AND OTHER CONSTRUCTION  
WORKERS' WELFARE BOARD,  
Koushalya Bhavan, Bannerughatta Road Near Dairy Circle,  
Bangalore-560 029.**

**RASHTRIYA SWASTHYA BIMA YOJANA PLUS (RSBY Plus)**

**To cover Registered Building and Other Construction Workers of the Board.**

**Phone No.: 080-26644312**

**Fax No.: 22453646**

**Website address: [www.karbuildingworkerswelfare.org.in](http://www.karbuildingworkerswelfare.org.in)**

**E-mail address: [karbuildworkerswelfare@gmail.com](mailto:karbuildworkerswelfare@gmail.com)**

**\*\*\*\*\***

### **INVITATION FOR TENDER**

**Tenders are invited from Public Sector Insurance Companies, dealing with Health Insurance for the purpose of implementation of Rashtriya Swasthya Bima Yojana Plus to cover the Registered Building and Other Construction Workers in all the districts of the State of Karnataka.**

**Tender documents may be obtained from the above mentioned office during office hours or downloaded from our website [www.karbuildingworkerswelfare.org.in](http://www.karbuildingworkerswelfare.org.in). A pre-bid meeting will be held on 28-06-2010 at 11.00 am at the above mentioned address. The bidder's authorized representative (Maximum 2 from each bidder) may attend the pre-bid meeting to seek clarification on any matter pertaining to the tender documents.**

**The Bids shall reach this office on or before 12 noon on 28.07.2010. No bids would be entertained after this date & time.**

**Technical and Financial bids will be opened on 29-07-2010 at 04:00 pm in the presence of successful bidders representatives at the address mentioned above.**

**Place: Bangalore**

**Date: 14<sup>th</sup> June 2010**

**Sd/-**

**Chief Executive Officer**



GOVERNMENT OF KARNATAKA

KARNATAKA BUILDING & OTHER CONSTRUCTION WORKERS  
WELFARE BOARD, BANGALORE.

TENDER DOCUMENT

FOR

RASHTRIYA SWASTHYA BIMA YOJANA PLUS (RSBY Plus)

**To cover the Registered Building and Other Cons truction Workers**

**Tender Reference : CWB/RSBYP/CR -1/2010-11,**

**Dated 14-06-2010**

**Phone No.: 080-26644312**

**Fax No.: 22453646**

**Website address: [www.karbuildingworkerswelfare.org.in](http://www.karbuildingworkerswelfare.org.in)**

**E-mail address: [karbuildworkerswelfare@gmail.com](mailto:karbuildworkerswelfare@gmail.com)**

## INDEX

| Sl.No.   | Topics                           | Page Numbers |
|----------|----------------------------------|--------------|
| <b>1</b> | <b>Invitation for tender</b>     | <b>3</b>     |
| <b>2</b> | <b>Preview of Tender</b>         | <b>4</b>     |
| <b>3</b> | <b>Part-I - Introduction</b>     | <b>5</b>     |
| <b>4</b> | <b>Part-II - Technical Bid</b>   | <b>21</b>    |
| <b>5</b> | <b>Part-III - Annexures</b>      | <b>30</b>    |
| <b>6</b> | <b>Part – IV - Financial Bid</b> | <b>69</b>    |



GOVERNMENT OF KARNATAKA  
KARNATAKA BUILDING & OTHER CONSTRUCTION WORKERS  
WELFARE BOARD, BANGALORE-29.

PREVIEW OF TENDER

|   |  |
|---|--|
| <b>BID REFERENCE :</b><br><b>CWB/RSBYP/CR-1/2010-11</b> | <b>DATED : 14-06-2010</b>  |
| <b>PRE-BID MEETING</b>                                  | <b>28-06-2010</b>  |
| <b>LAST DATE FOR RECEIPT OF<br/>TENDER</b>              | <b>28-07-2010, before 12 Noon</b>  |
| <b>TIME AND DATE OF OPENING OF<br/>THE TENDERS</b>      | <b>29-07-2010, 04.00 PM.</b>   |
| <b>PLACE OF OPENING OF THE<br/>TENDERS</b>              | <b>KARNATAKA BUILDING AND<br/>OTHER CONSTRUCTION WORKERS<br/>WELFARE BOARD OFFICE,<br/>GROUND FLOOR, KOUSHALYA<br/>BHAVAN, BANNERUGHATTA ROAD,<br/>BANGALORE-29.</b>                           |
| <b>ADDRESS FOR COMMUNICATION</b>                        | <b>THE CHIEF EXECUTIVE OFFICER,<br/>KARNATAKA BUILDING AND<br/>OTHER CONSTRUCTION WORKERS<br/>WELFARE BOARD, GROUND<br/>FLOOR, KOUSHALYA BHAVAN,<br/>BANNERUGHATTA ROAD,<br/>BANGALORE-29.</b> |

## PART-I

### INTRODUCTION

**KARNATAKA BUILDING & OTHER CONSTRUCTION WORKERS  
WELFARE BOARD , BANGALORE**

**RASHTRIYA SWASTHYA BIMA YOJANA PLUS**

**PART-I**

**INTRODUCTION**

**The Government of Karnataka has constituted a statutory Board viz. the Karnataka Building and Other Construction Workers' Welfare Board on 15-02-2007 under the provisions of the Building and Other Construction Workers' (Regulation of Employment and Conditions of Service) Act, 1996 and Karnataka Rules, 2006. The functions of the Board are registration of the Building and Other Construction Workers working in Karnataka, providing them with social security cash benefits such as medical benefits, accident compensation, disability pension, funeral expenses, maternity benefit, assistance for the education of their children, marriage assistance, tools purchase loan, pension and housing loan. The Government of India has directed that all the State Building and Other Construction Workers ' Welfare Boards shall cover their registered building and other construction workers under the Rashtriya Swasthya Bima Yojana.**

1. Name of the medical insurance scheme :

**The name of the scheme shall be “RASHTRIYA SWASTHYA BIMA YOJANA PLUS” (In short “RSBY Plus”)**

2. Administration and Funding :

**The scheme will be administered and funded by the Karnataka Building and Other Construction Workers’ Welfare Board (In short ‘Board’).**

3. Objective :

**To improve access of Registered Building and Other Construction Workers and their family members in Karnataka to quality medical care for their treatment of diseases/ailments involving hospitalization and surgery through an identified network of health care providers.**

4. Beneficiaries :

**The scheme is intended to benefit Registered Building and Other Construction Workers (In short ‘Beneficiary’) and four dependant members of their family in all the districts of Karnataka. Districtwise strength of these registered workers as on 31.05.2010 is given below.**

| Sl. No. | Name of District | Number of Registered Building and Other Construction Workers |
|---------|------------------|--|
| 1       | Bangalore        | 19,506   |
| 2       | Bagalkot         | 3,004  |
| 3       | Belgaum          | 4,271  |
| 4       | Bellary          | 3,348  |
| 5       | Bidar            | 3,290  |
| 6       | Bijapur          | 7,804  |
| 7       | Chamarajnar      | 3,154  |
| 8       | Chitradurga      | 2,131  |
| 9       | Chikmagalur      | 1,077  |
| 10      | Davangere        | 4,858  |
| 11      | Gadag            | 1,756  |
| 12      | Gulbarga         | 3,697  |
| 13      | Haveri           | 1,036  |

|       |              |          |
|-------|--------------|----------|
| 14    | Hassan       | 2,105    |
| 15    | Hubli        | 2,758    |
| 16    | Koppal       | 2,731    |
| 17    | Karwar       | 2,831    |
| 18    | Kolar        | 2,546    |
| 19    | Mandya       | 3,269    |
| 20    | Madikeri     | 1,459    |
| 21    | Mangalore    | 7,005    |
| 22    | Mysore       | 2,629    |
| 23    | Raichur      | 2,811    |
| 24    | Shimoga      | 3,209    |
| 25    | Tumkur       | 3,347    |
| 26    | Udupi        | 3,257    |
| 27    | Ramanagar    | 2,522    |
| 28    | Chikballapur | 2,089    |
| Total |              | 1,03,500 |

The data of each of these registered beneficiaries regarding their name, address, occupation, names of nominees etc is available in the office of the Labour Officers of each district who are the beneficiary registration officers.

#### 5. Family :

Coverage under the scheme would be for all registered Beneficiary workers and their family (up to a unit of five). This would comprise the Household Head, spouse including the beneficiary dependents.

#### 6. Benefits :

- a. The scheme shall provide coverage for meeting expenses of hospitalization and surgical procedures of registered beneficiary and his/her four dependant family members up to Rs.50,000/- per family per year in any of the network hospitals. The benefit to the family will be on floater basis, i.e., the total reimbursement of Rs.50,000/- can be availed of individually or collectively by members of the family per year.
- b. Pre-existing conditions/diseases to be covered, subject to minimal exclusions.

- c. Coverage of health services relating to surgical nature can also be provided on a day care basis.**
- d. Wage loss compensation during hospitalisation – The duration of hospitalisation should be compensated.**
- e. Maternity benefit for two deliveries at the rate of Rs.6,000/- per delivery payable to registered woman beneficiary.**
- f. Provision for transport allowance to reach the hospital (actual with limit of Rs.100/- per hospitalization) subject to an annual ceiling of Rs. 1000/- shall be paid to the Building and Other Construction Worker.**
- g. Pre and post hospitalization costs up to 1 day prior to hospitalization and up to 5 days from the date of discharge from the hospital will be part of the package rates.**
- h. In case of Accidents to the registered beneficiary during the course of employment and arising out of it including an accident occurring to an employee while commuting from his residence to the place of employment for duty or from the place of employment to his residence after performing duty, shall be deemed to have arisen out of and in the course of employment if nexus between the circumstances, time and place in which the accident occurred and the employment is established, resulting in the death of the registered beneficiary or resulting in total permanent disability of the beneficiaries an amount of Rs.1,00,000/- shall be paid to the legal heirs of the deceased or to the disabled registered beneficiary as the case may be.**
- i. In the case of accident as stated above, resulting in permanent partial disability to the registered beneficiary, the compensation shall be paid in accordance to the WCA 1923.**
- j. Funeral expenses of Rs.4,000/- on the death of registered beneficiary shall be given to the deceased family.**
- k. In case of natural death of the registered beneficiary Rs.15,000/- shall be paid to the bereaved family.**

## 7. Premium Calculation :

**Lowest quote in premium at maximum claim ratio.**

## 8. Indicative list of day care treatment :

**Given the advances made in the treatment techniques, many health services, formerly requiring hospitalization, can now be treated on a day care basis. Examples of such services include:**

- i) Haemo-Dialysis**
- ii) Parenteral Chemotherapy**
- iii) Radiotherapy**
- iv) Eye Surgery**
- v) Lithotripsy (kidney stone removal)**
- vi) Tonsillectomy**
- vii) D&C**
- viii) Dental surgery following an accident**
- ix) Surgery of Hydrocele**
- x) Surgery of Prostate**
- xi) Few Gastrointestinal Surgery**
- xii) Genital Surgery**
- xiii) Surgery of Nose**
- xiv) Surgery of Throat**
- xv) Surgery of Ear**
- xvi) Surgery of Urinary System**
- xvii) Treatment of fractures/dislocation (excluding hair line fracture), Contracture releases and minor reconstructive procedures of limbs which otherwise require hospitalisation.**
- xviii) Laparoscopic therapeutic surgeries that can be done in day care**
- xix) Identified surgeries under General Anaesthesia**
- xx) Any disease/procedure mutually agreed upon.**

## 9. Eligible Health Service Providers :

**Both public (including ESI) and private health providers which provide hospitalization and/or day care services would be eligible for inclusion under the medical insurance scheme, subject to such requirements for empanelment as will be agreed between the Board and Insurers.**

## 10. Enrolment of Hospitals :

**Hospitals and other health facilities with desired infrastructure for inpatient and day care services will need to be empanelled. It is essential to have a proper system of empanelment. The process will be carried out by the Insurer. It can seek assistance from the Board.**

### Criteria for empanellement of Government hospitals:

**All Government hospitals (including Community Health Centers) and ESI hospitals can be empanelled provided they possess the facilities of Telephone/Fax, 64 KBPS connectivity. Each hospital/health service provider shall possess a Personal Computer with 2 smart card readers and a fingerprint verification machine or a stand alone machine matching the specifications given in Annexure VI.**

**The criteria for empanelling private hospitals and health facilities would be as follows:**

- i) At least 10 inpatient medical beds for primary inpatient health care. The requirement of minimum number of beds can be reduced based on available infrastructure in rural areas.**
- ii) Fully equipped with Medical and Surgical facilities. The facility should have an operational pharmacy and diagnostic services, or should be able to link with the same outside the hospital so as to provide 'cash less' service to the patient. The diagnostic service should include testing of clinical specimens, X-rays and ECG etc.**
- iii) Those facilities undertaking surgical operations should have a fully equipped Operating Theatre of its own.**
- iv) Fully qualified doctors and nursing staff shall be under its employment round the clock.**
- v) Maintain once of necessary records of the insured patient and providing them to the Insurer or his representative/Board as and when required.**
- vi) It should have registration with Income Tax Department.**

- vii) It should have telephone/Fax, 64KBPS connectivity, shall possess a Personal Computer with 2 smart card readers and a fingerprint verification machine or a stand alone machine matching the specifications given in Annexure VI.
- viii) The Hospital should agree to the cost of packages for each identified intervention/procedures as approved under the scheme. These package rates will include Bed charges (General Ward), Nursing and Boarding charges, Surgeons, Anaesthetists, Medical Practitioner, Consultants fees, Anaesthesia, Blood, Oxygen, O.T. Charges, Cost of Surgical Appliances, Medicines and Drugs, Cost of Prosthetic Devices, implants, X-Ray and Diagnostic test and medicines up to 1 day before the admission of the patient and cost of diagnostic test and medicine up to 5 days from the date of discharge from the hospital for the same ailment / surgery and transport expenses will also be the part of package. The package should cover the entire cost of treatment of the patient from date of reporting to his discharge from hospital and 5 days after discharge and any complication while in hospital, making the transaction truly cashless to the patient.
- ix) The Hospital should be in a position to provide following additional benefits to the Beneficiary.
  - a) Free OPD consultation.
  - b) Fixed discounts on diagnostic tests and medical treatment required for beneficiaries.
  - c) The Health Service Provider agrees to display their status of being a preferred provider of Rashtriya Swasthya Bima Yojana Plus at their reception/admission desks along with the display and other materials supplied by the Insurer for the ease and convenience of beneficiaries, Government and Insurer.
  - d) The Health Service Provider agrees to provide a separate help desk for extending the necessary assistance to the beneficiary and have a dedicated officer in the administration department assigned for dealing with insured patients under RSBY + PLUS.

#### 11. Agreement with Network Hospital :

The Insurance Company shall enter into an agreement with all hospitals empanelled under the Scheme. Empanelled medical

**institutions are supposed to extend medical aids to the beneficiary under the scheme. A provision will be made in the Agreement of non-compliance/default clause. Such matter will be looked into by the Board.**

**12. Payment of Premium :**

**The Board will on behalf of the beneficiaries make the payment of the premium in two equal instalments to the Insurance Company.**

**13. Payment of Premium and Registration Fee :**

**Payment of instalment will be as follows:**

- a) The registration fee of Rs. 30/- by the beneficiary to the insurance company.**
- b) The First instalment will be paid by the Board to the insurance company at the time of enrolment of a beneficiary.**
- c) The Second and final instalment will be paid by the Board, after issuance of the smart cards, mutually agreed terms.**

**14. Period of Insurance :**

**The Insurance coverage under the scheme shall be in force for a period of two years from the date of commencement of the medical Insurance policy. (hence forth referred to as policy) The period of insurance will be force from 1<sup>st</sup> January 2011 to 31<sup>st</sup> of December 2012.**

**All benefits as listed in para 6 shall commence from following month of issue of smart card.**

**15. Cashless Access to Medical Service :**

**The Insurer has to ensure that all the Beneficiaries are provided with adequate facilities so that they do not have to pay any deposits at the commencement of the treatment or at the end of treatment to the extent as the Services are covered under the RSBY Plus. This service alongwith responsibilities of the Insurer as detailed in this clause is collectively referred to as the "Cashless Access to Medical Service."**

**The services have to be provided to the beneficiary based on Smart card & fingerprint authentication only with the minimum of delay for pre authorization. Reimbursement to hospitals should be based on the electronic transaction data received from hospitals.**

**The beneficiaries shall be provided treatment free of cost for all such ailments covered under the scheme within the limits/sub-limits and sum insured, i.e., not specifically excluded under the scheme. The hospital shall be reimbursed as per the package cost specified in the tender agreed for specified packages or as mutually agreed with hospitals in case of unspecified packages.**

**i) Cashless Medical Access in case package is fixed**

**Once the identity of the beneficiary and or his family member is established by verifying the fingerprint of the patient and the smart card, the following procedure shall be followed for providing the health care facility under package rates:**

- a) It has to be seen that patient is admitted for covered procedure and package for such intervention.**
- b) Beneficiary has balance in his account.**
- c) It has to be ensured that no procedure is carried out unless provisional entry is completed on the smart card through blocking of claim amount.**
- d) At the time of discharge, the final entry shall be made on the smart card after verification of patient's fingerprint (any other enrolled family member in case of death of patient) to complete the transaction.**
- e) District Kiosk software along with the Business Continuity plan (BCP).**
- f) District Server for configuring enrollment data, collating enrollment & transaction data. The server, if set up centrally, should be online with the district kiosk such that whenever required, the functionalities at the kiosk should not be hampered due to non accessibility of the server.**
- g) System at the District kiosk to pass on transactions pertaining to other insurance companies whether are regular transactions or fall under BCP. The turn around time (TAT) for this should be defined in the MoU with Board.**

**ii) Pre-Authorization for Cashless Access to Medical Service in case no package is fixed**

**Once the identity of the beneficiary and or his family member is established by verifying the fingerprint of the patient and the smart card, the following procedure shall be followed for providing the health care facility not listed in packages:**

- a) Request for hospitalization shall be forwarded by the provider after obtaining due details from the treating doctor in the prescribed format i.e. "request for authorization letter" (RAL). The RAL needs to be faxed to the 24-hour authorization /cashless department at fax number of the insurer alongwith contact details of treating physician, as it would ease the process. The medical team of insurer would get in touch with treating physician, if necessary.
- b) The RAL should reach the authorization department of insurer within 6 hrs of admission in case of emergency or within 7 days prior to the expected date of admission, in case of planned admission.
- c) In case of failure to comply "clause b", the clarification from the treating doctor needs to be forwarded to the authorization department with the request for authorization.
- d) The RAL form should be dully filled clearly mentioning Yes or No. There should be no nil, or blanks. This will help in providing the outcome at the earliest.
- e) Insurer guarantees payment only after receipt of RAL and the necessary medical details. Only after Insurer has ascertained and negotiated the package with provider, shall issue the Authorization Letter (AL). This shall be completed within 12 hours of receiving the RAL.
- f) In case the ailment is not covered or the medical data or document are not sufficient or found to be incorrect by the medical team of authorization deptt to confirm the eligibility, in such cases the insurer can deny the authorization only after intimating the reasons to the treating doctor.
- g) Authorisation letter [AL] will mention the authorization number and the amount guaranteed as a package rate for such procedure for which package has not been fixed earlier.
- h) The guarantee of payment is given only for the necessary treatment cost of the ailment covered and mentioned in the request for Authorisation letter (RAL) for hospitalization as a package.

- i) The entry on the smart card for blocking as well as discharge would record the authorization number as well as package amount agreed upon by the hospital and insurer. Since this would not be available in the package list on the computer, it would be entered manually by the hospital.
- j) In case the balance sum available is considerably less than the Package, provider should follow their norms of deposit/running bills etc. However provider shall only charge the balance amount against the package from the beneficiary. Insurer upon receipt of the bills and documents would release the guaranteed amount over and above the limit of Rs.50,000/- cost of medical service shall be borne by the insured beneficiary.
- k) Insurer will not be liable for payments in case the information provided in the "request for authorization letter" and subsequent documents during the course of authorization, is found incorrect or not disclosed.

#### 16. Enrolment Procedure :

The enrolment of the beneficiaries will be undertaken by the Insurer, shortlisted and approved by the Board. The Insurer shall enroll the beneficiaries based on the data provided by the Board through district office and issue Smart card as per Central Government specifications through Smart Card Vendor and handover the same to the beneficiaries at enrolment station itself during the enrolment period.

The insurer shall under no circumstance make any changes in the date except for capturing the fields as defined in the Annexure VI.

Further, the enrolment process shall continue as per schedule agreed by the Board. Insurer in consultation with the Board shall chalk out the enrolment cycle up to village level by identifying enrolment stations in a manner that representative of Insurer, Board and smart card vendor can complete the task in scheduled time. The process of enrolment shall be as under:

- a) The Insurer may collect the Beneficiary data for the districts from the District Labour Officers.
- b) The Insurer will arrange for preparation of the smart card as per the Guidelines provided in Annexure VI. The software for issuing smart cards and usage of smart card services shall be the one approved by the Central Government.

- c) The premium quoted is inclusive of the cost of smart card as well.
- d) The identity card issued to the beneficiary shall be checked by the insurance representative.
- e) At the time of handing over the card, the insurer shall collect the registration fee of Rs.30/- from the beneficiary.
- f) This amount will be adjusted against the amount of premium to be paid to the insurer by the Board.
- g) The Insurer's representative shall also provide a pamphlet along with Smart Card to the beneficiary indicating the list of the networked hospitals, the availability of benefits and the procedure to access them, the names and details of the contact person/persons. To prevent damage to the smart card, a plastic jacket should be provided to keep the smart card.
- h) The beneficiary shall also be informed about the date on which the card will become operational.
- i) The beneficiary or the eligible person of the family shall be entitled for cashless treatment in designated hospitals on presentation of the Smart Card.

#### 17. Dispute Resolution :

If any dispute arises between the parties hereto during the subsistence of this Agreement or thereafter, in connection with the validity, interpretation, implementation or alleged breach of any provision of the Agreement, the parties shall refer such dispute to the respective CEO of the Board for resolution. In the event that the Chief Executive Officer is unable to resolve the dispute within sixty days of it's being referred to them, then either Party may refer the dispute for resolution to a sole arbitrator who shall be jointly appointed by both parties. However, in the event that the parties are unable to agree on the person to act as the sole arbitrator then the dispute shall be resolved by three arbitrators, one to be appointed by each party with power to the two arbitrators so appointed, to appoint a third arbitrator.

#### 18. Penalty Clause :

Failure to abide with the terms will attract penalty as is determined at the time of finalizing the contract for health insurance and smart card related services. These will be related but not limited to the following:

- ✓ Failure in following the guidelines specified in Annexure VI.
- ✓ Claim Servicing
- ✓ Grievance Redressal

19. Standardization of Formats :

**The Insurance Company shall use the standardized formats for cashless transactions, discharge summary, billing pattern and other reports in consultation with the Board.**

20. Criteria For Evaluating Bids / Proposals :

**The Technical Proposals will be evaluated by a panel of officers of the Board. Once the technical bids have been evaluated, the successful bidders only will be informed about the date of opening of financial bids. Financial bids of only those bidders will be opened who are declared successful in the Technical Bid Evaluation stage in presence of the representatives of such insurance companies.**

21. Award of Contract :

**The Board shall award the contract to the successful bidder whose Bid has been determined to be substantially responsive, lowest evaluated bid, provided further that the bidder has been determined by the Board to be qualified to perform the contract satisfactorily.**

22. Board's Right to Accept or Reject any or All Bids :

**The Board reserves the right to accept or reject any Bid or annul the Bidding process and reject all Bids at any time prior to award of contract, without thereby incurring any liability to the affected Bidder or Bidders. The Board is not bound to accept the lowest or any bid.**

Note: Incomplete technical bids and financial bids with extra attachments / remarks are liable to be disqualified.

23. Notification of Award And Signing of Agreement :

**The Notification of Award will be issued with the approval of the Tender Accepting Authority. The terms of Agreement will be discussed with the representatives of the successful insurance company and the insurer is expected to furnish a duly signed Agreement proposed by Board in duplicate within 7 days of declaration of 'award of contract', failing which the contract may be offered to the next bidder in the order of merit.**

24. Canvassing :

**Bidders are hereby warned that canvassing in any form for influencing the process of notification of award would result in disqualification of the Bidder.**

25. Signature in each page of document :

**Each paper of Bid Document must be signed by the competent authority of the Bidder. Any document / sheet not signed shall tantamount to rejection of Bid. This may be noted carefully.**

26. Submission of Proposals :

**The bidder must submit the proposal as per the details mentioned below:**

- i. **Technical proposal should be sealed in a separate envelop clearly marked in BOLD “SECTION A – TECHNICAL PROPOSAL” and “TECHNICAL PROPOSAL FOR IMPLEMENTING “RASHTRIYA SWASTHYA BIMA YOJANA Plus SCHEME” written on the top of the envelope.**
- ii. **Financial proposal should be sealed in another envelop clearly marked in BOLD “SECTION B – FINANCIAL PROPOSAL” and “FINANCIAL PROPOSAL FOR IMPLEMENTING “RASHTRIYA SWASTHYA BIMA YOJANA Plus SCHEME” written on the top of the envelope.**
- iii. **Both envelops should have the bidders Name and Address clearly written at the Left Bottom Corner of the envelope.**
- iv. **Both envelops should be put in a large cover/envelop, sealed and clearly marked in BOLD have**

**“SECTION A – TECHNICAL PROPOSAL” for “RASHTRIYA SWASTHYA BIMA YOJANA Plus Scheme”.**

**“SECTION B – FINANCIAL PROPOSAL” for “RASHTRIYA SWASTHYA BIMA YOJANA Plus Scheme”**

**The bidders Name and Address clearly written in BOLD at the Left Bottom Corner of this large envelop.**

- v. **The bids may be cancelled and not evaluated if the bidder fails to:**
- a. **Clearly mention Technical / Financial Proposal on the respective envelopes**
  - b. **To seal the envelope properly with sealing tape**
  - c. **Submit both envelopes i.e. Financial Proposal and Technical Proposal together keeping in large envelope.**
  - d. **Give complete bids in all aspects.**
  - e. **Submit financial bids in the specified Performa (Annexure-VII)**

27. Deadline for Submission Bids / Proposals :

**Complete bid documents should be received at the address mentioned below not later than 12 noon on 28.07.2010. Bids documents received later than the prescribed date and time will not be considered for evaluation.**

CHIEF EXECUTIVE OFFICER,

KARNATAKA BUILDING AND OTHER CONSTRUCTION WORKERS'  
WELFARE BOARD,

**Koushalya Bhavan, Bannerughatta Road Near Dairy Circle,  
Bangalore-560029.**

**Phone No.: 080-26644312**

**Fax No.: 22453646**

PART-II

TECHNICAL BID

## PART-II

SECTION A - TECHNICAL BIDPre-Qualification Requirements

**The Karnataka Building and Other Construction Workers' Welfare Board seeks detailed proposal from insurance companies/departments interested in implementing "Rashtriya Swasthya Bima Yojana Plus", in the State. The proposal document should include the following:**

**A) QUALIFYING CRITERIA:**

- i) Insurance company should be registered with IRDA or enabled by a Central legislation to undertake insurance related activities.**
- ii) Insurance company should have full fledged establishment with experience in conceptualizing, designing and implementing large healthcare schemes and have at least one year experience in catering to health insurance of 50,000 families/person or more under group/individuals health insurance policy in 2005-2006 or 2006-2007 or 2007-2008.** (Annexure-I)

**The qualifying requirements data shall be enclosed with the Technical Bid only. The bidders who do not qualify this criterion, will be disqualified immediately and their bids will not be considered.**

**B) AMENDMENT OF BIDDING DOCUMENTS:**

- a) At any time prior to the deadline for submission of bids, the Board may, for any reason modify the Bidding documents, by amendment.**
- b) The amendment will be notified in writing or by fax or telegram to all prospective bidders who have procured the Bidding documents. The amendments will be binding on them.**
- c) In order to afford prospective bidders reasonable time to take the amendment into account in preparing their bids, the Board may, at its discretion, extend deadline for the submission of the Bid.**

**NOTE: Oral statements made by the Bidder at any time regarding quality of service or arrangements of any other matter shall not be considered.**

C) Others:

I. Geographical area: **The scheme is proposed to be launched in 30 districts of the State of Karnataka.**

II. Infrastructure: **Details of administrative infrastructure available with the Agency in the State of Karnataka** (Annexure – II)

III. Empanelled health facilities: **List of existing empanelled health facilities within the State and outside of the State and also the provisional list of agreeable to provide health services within and adjoining districts.**

IV. List of Additional Packages for common medical and surgical interventions/ procedures: **Provisional list of common medical and surgical interventions/ procedures is attached.** (Annexure-III)

V. Package Rates: **Insurer will negotiate the rates of various medical / surgical intervention/ procedures under the scheme with the hospitals in consultation with the Board and those hospitals who agree to accept the package rates shall be empanelled. These package rates will include Bed charges (General Ward), Nursing and Boarding charges, Surgeons, Anaesthetists, Medical Practitioner, Consultants fees, Anaesthesia, Blood, Oxygen, O.T. Charges, Cost of Surgical Appliances, Medicines and Drugs, Cost of Prosthetic Devices, implants, X-Ray and other Diagnostic Tests, Food to patient etc. Expenses incurred for consultation, diagnostic test and medicines up to 1 day before the admission of the patient and cost of diagnostic test and medicine up to 5 days of the discharge from the hospital for the same ailment / surgery and transport expenses will also be the part of package. The package should cover the entire cost of treatment of the patient from date of reporting to his discharge from hospital and 5 days after discharge and any complication while in hospital, making the transaction truly cashless to the patient.**

**Insurer is supposed to provide the lowest package rates of the common procedures to be fixed with the agreed hospitals by them.** (Annexure – IV)

VI. Detailed Prospectus of the Scheme in the desired Format as Required By IRDA: **Detailed prospectus on desired Health Insurance Scheme, benefits available, exclusions, conditions, premium refund clause etc including day care coverage for procedures which can be performed as day care surgery may not require 24 hours hospitalization under the Scheme.**

VII. Minimum Exclusions :

**Common exclusions:**

- 1. Conditions that do not require hospitalization**
- 2. Congenital external diseases**
- 3. Drug and Alcohol induced illness**
- 4. Sterilization and Fertility related procedures**
- 5. Vaccination**
- 6. War, Nuclear invasion**
- 7. Suicide**
- 8. Naturopathy, Unani, Siddha, Ayurveda**

(Annexure – V)

VIII. Project Office : **Insurer shall establish a separate Project Office at convenient place for coordination with the Board at the State Capital. This office shall –**

- a) **Have a 24 hour call center with toll free help line.**
- b) **Have a data management desk and a kiosk for post issuance modification to the smart cards as described in Annexure VI.**
- c) **Provide preauthorization for such procedures which have not been predetermined.**
- d) **Have a claim settlement desk.**
- e) **Office in each selected district to coordinate with health provider/district officials.**

IX. Services Beyond Service Area: **The insurer shall have interrelated arrangements under the scheme with other Providers in other districts and States to provide the health services to the Beneficiaries in areas outside the limits of the Services Areas in case of migration. The insurer shall make these arrangements available to the Beneficiaries for the purpose.**

**The Insurer shall also enter into arrangement with other Insurance company's for transfer of claim and transaction data arising in areas beyond the service area.**

**X. Management Information Systems (MIS) Service : The insurer shall provide Management information system reports regarding the enrolment, admission, pre-authorization, claims settlement and such other information regarding the Services as required by the Board. The reports will be submitted by the insurer to the Board on a regular basis as agreed between the Parties.**

**XI. Call Center Services : The Insurer shall provide telephone services for the guidance and benefit of the beneficiaries whereby the Insured Persons shall receive guidance about various issues by dialing a State Toll free number. This service provided by the Insurer as detailed in this clause-XI is collectively referred to as the "Call Centre Service".**

**1. Call Centre Information : The Insurer shall operate a call centre for the benefit of all Insured Persons. The Call Centre shall function for 24 hours a day, 7 days a week and round the year. As a part of the Call Centre Service the Insurer shall provide the following :**

- a. Answers to queries related to Coverage and Benefits under the Policy.**
- b. Information on Insurer's office, procedures and products related to health.**
- c. General guidance on the Services.**
- d. For cash-less treatment subject to the availability of medical details required by the medical team of the Insurer.**
- e. Information on Network Providers and contact numbers.**
- f. Benefit details under the policy and the balance available with the Beneficiaries.**
- g. Claim status information.**
- h. Advising the hospital regarding the deficiencies in the documents for a full claim.**
- i. Any other relevant information/related service to the Beneficiaries.**
- j. Any of the required information available at the call centre to the Board.**
- k. Any related service to the Board.**

2. Language: **The Insurer undertakes to provide services to the Insured Persons in English and local languages.**
  3. Toll Free Number: **The Insurer will operate a state toll free number with a facility of a minimum of 5 lines. The cost of operating of the number shall be borne solely by the Insurer. The toll free numbers will be restricted only to the incoming calls of the clients only. Outward facilities from those numbers will be barred to prevent misuse.**
  4. Insurer to inform Beneficiaries: **The Insurer will intimate the state toll free number to all beneficiaries along with addresses and other telephone numbers of the Insurer's Project Office at the time of enrolment.**
- XII. Activity: **Activity wise flowchart depicting the sequence of the activities and a detailed time schedule for all activities proposed.**
  - XIII. Capacity Building : **The Insurer will arrange the workshop for the capacity building of the Board, their representatives and other stake holders in respect of specific field of insurance.**
  - XIV. Mechanism for Publicity and awareness creation: **Ways and means to be suggested.**
  - XV. Delivery of Services by Intermediaries:
 

**The Insurer will enter into service agreement(s) with one or more intermediary institutions for the purposes of ensuring effective outreach to Beneficiaries and to facilitate usage by Beneficiaries of Benefits covered under this Agreement. The Insurer will also compensate such intermediaries for their services at an appropriate rate. Complete Plan/Process is to be submitted.**
  - XVI. Business Plan: **Detailed business plan highlighting process proposed to be adopted for, delivering health services may be indicated in the following manner:**
    - a) **Mechanism for standardization of various formats used for cashless transactions, discharged summary, billing pattern, satisfaction letter from the patient etc.**

- b) **Website with information on the scheme in local language and English with functionality for claims settlement and account information access for Beneficiaries and Providers.**
- c) **MIS for claims reporting claims settlement claims paid, required by State Government/Nodal Agency on monthly basis and as and when required.**
- d) **Time-line for entire process – from beneficiary approaching the network hospital for treatment upto discharge.**
- e) **Procedure for reporting the progress to appropriate authority nominated by the State Nodal Agency at State, Division and District level.**
- f) **Business Continuity Plan in case of malfunction of Smart Card mechanism – devices or card**
- g) **Grievance redressal mechanism procedure at District and State level and also the procedures of recording the details in the system for the purpose of review.**

XVII. Guidelines for Smart Card and Eligibility Criteria of Smart Card Vendor. (Annexure – VI)

Note: Terms can be amended by the Board before entering into the contract.

Bidder is supposed to give point-wise reply of the Tender document for agreement/disagreement. Failure to adhere to this, will attract disqualification.

SECTION B – DETAILS OF TECHNICAL BID:

Name of the Insurance Company: \_\_\_\_\_

|          | Section of Technical Bid   | Comments/<br>Observation of Insurer | To be provided by   |
|----------|--|-------------------------------------|---|
| <b>1</b> | <b>Experience</b>  | <b>Annexure - I</b>                 | <b>Insurer</b>  |
| <b>2</b> | <b>Administrative Infrastructure</b>   | <b>Annexure - II</b>                | <b>Insurer</b>  |
| <b>3</b> | <b>List of common medical and surgical interventions / procedures to be provided by the Insurer to the beneficiaries and Package rates</b> | <b>Annexure –III &amp; IV</b>       | <b>Rates to be provided by Insurer</b>  |
| <b>4</b> | <b>Minimum exclusions</b>  | <b>Annexure -V</b>                  |   |
| <b>5</b> | <b>Guidelines for Smart Card and Eligibility Criteria Vendor</b>   | <b>Annexure -VI</b>                 |   |
| <b>6</b> | <b>IRDA license</b>  | -                                   | <b>Certified copy of the same shall be submitted along with tender document and original to be produced at the time of opening of the tender document.</b>  |
| <b>7</b> | <b>Detailed prospectus of the scheme in the form as required by IRDA</b>   | -                                   | <b>To be provided by the insurer along with the tender document.</b>  |
| <b>8</b> | <b>Action plan</b>   |                                     | <b>The proposed Action plan regarding the implementation of RSBY plus shall be given by the insurer along with the tender document for eg. Issue of smart card, tie up with network hospitals, capacity building, software development, publicity and awareness, back office, data management, call center etc.</b> |

NOTE: Bidder is supposed to give point-wise reply of the tender document for agreement / disagreement and attach the necessary annexure as mentioned above. Failure to adhere to this will attract disqualification.

DECLARATION BY THE BIDDER

I, \_\_\_\_\_ Designated as \_\_\_\_\_ at  
\_\_\_\_\_ of \_\_\_\_\_ Insurance  
Company hereby declare that I have read the contents of the tender  
document and hereby submit the bid in the desired format with  
respective annexure duly signed by me.

**SIGNATURE**

**Name**

**Designation**

**Date:**

PART-III

ANNEXURES

## PART-III

ANNEXURESAnnexure – IEXPERIENCE OF THE BIDDER

| Sl.<br>No. | Name of the<br>Central/State<br>Trust sponsored/<br>Other Group<br>Health Insurance<br>Scheme | State/ area<br>where<br>implemented | Number of<br>Families | Premium (in Rs.) |                  | Number of<br>years the<br>scheme had<br>been in<br>operation<br>(YEAR WISE) | Claims            |                                |
|------------|---|-------------------------------------|-----------------------|------------------|------------------|---|-------------------|--------------------------------|
|            |   |                                     |                       | Per<br>Family    | Total<br>Premium |   | Received<br>(no.) | Settled/under<br>process (Rs.) |
| 1          | 2   | 3                                   | 4                     | 5                | 6                | 7   | 8                 | 9                              |
|            |   |                                     |                       |                  |                  |   |                   |                                |
|            |   |                                     |                       |                  |                  |   |                   |                                |
|            |   |                                     |                       |                  |                  |   |                   |                                |
|            |   |                                     |                       |                  |                  |   |                   |                                |
|            |   |                                     |                       |                  |                  |   |                   |                                |
|            |   |                                     |                       |                  |                  |   |                   |                                |
|            |   |                                     |                       |                  |                  |   |                   |                                |

**SIGNATURE**

Annexure – II

## Administrative Infrastructure:

**3.1 Organogram of organization at State level – specific to State Capital under Rashtriya Swasthya Bima Yojana Plus****3.2 Organogram of organization at District level – specific to Districts selected under Rashtriya Swasthya Bima Yojana Plus**

| Location of Offices              | Number of Staff to be designated for RSBY Plus | Name & Designation of Office In-charge | Address, E-mail and Contact Number of Each Office |
|----------------------------------|--|--|---|
| 1                                | 2  | 3                                      | 4   |
| 3.1 State Level – State Capital  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
| 3.2 State Level – District level |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |
|                                  |  |  |   |

**(To be submitted at the time of agreement)**

Annexure – III & IV

LIST FOR COMMON MEDICAL AND SURGICAL  
INTERVENTIONS / PROCEDURES - FOR WHICH PACKAGE  
RATES MAY BE FIXED

These package rates will include bed charges (General ward), Nursing and boarding charges, Surgeons, Anaesthetists, Medical Practitioner, Consultants fees, Anaesthesia, Blood, Oxygen, O.T. Charges, Cost of Surgical Appliances, Medicines and Drugs, Cost of Prosthetic Devices, implants, X-Ray and Diagnostic Tests, Food to patient etc. Expenses incurred for diagnostic test and medicines upto 1 day before the admission of the patient and cost of diagnostic test and medicine upto 5 days of the discharge from the hospital for the same ailment / surgery including Transport Expenses will also be the part of package. The package should cover the entire cost of treatment of the patient from date of reporting (1 day Pre hospitalisation) to his discharge from hospital and 5 days after discharge, Transport Expenses and any complication while in hospital, making the transaction truly cashless to the patient.

Medical (Non surgical) hospitalisation procedures means Bacterial meningitis, Bronchitis- Bacterial/Viral, Chicken pox, Dengue fever, Diphtheria, Dysentery, Epilepsy, Filariasis, Food poisoning, Hepatitis, Malaria, Measles, Meningitis, Plague, Pneumonia, Septicemia, Tuberculosis (Extra pulmonary, pulmonary etc), Tetanus, Typhoid, Viral fever, Urinary tract infection, Lower respiratory tract infection and other such procedures requiring hospitalisation etc.

|  |  |
|--|--|
| <p><b>(i). NON SURGICAL(Medical) TREATMENT IN GENERAL WARD</b></p> <p><b>These package rates will include bed charges (General ward), Nursing and boarding charges, Surgeons, Anesthetists, Medical Practitioner, Consultants fees, Anesthesia, Blood, Oxygen, O.T. Charges, Medicines and Drugs, X-Ray and Diagnostic Tests, Food to patient etc. Expenses incurred for diagnostic test and medicines upto 1 day before the admission of the patient and cost of diagnostic test and medicine upto 5 days of the discharge from the hospital for the same ailment / surgery including Transport Expenses will also be the part of package. The package should cover the entire cost of treatment of the patient from date of reporting (1 day Pre</b></p> | <p><b>Maximum upto Rs.____ per day</b></p> |
|--|--|

|  |  |
|--|--|
| <p>hospitalisation) to his discharge from hospital and 5 days after discharge, Transport Expenses, food to patient and any complication while in hospital, making the transaction truly cashless to the patient.</p>   |  |
| <p>(ii) IF ADMITTED IN ICU:<br/>This includes bed charges (general ward), Nursing and boarding charges, Surgeons, Anesthetists, Medical Practitioner, Consultants fees, Anesthesia, Blood, Oxygen, O.T. Charges, Medicines and Drugs, X-Ray and Diagnostic Tests, food to patient etc. during stay in I.C.U.</p>   | <p>Maximum upto Rs.____ per day</p>                                    |
| <p>(iii) SURGICAL PROCEDURES IN GENERAL WARD (NOT SPECIFIED IN PACKAGE):<br/>This includes bed charges (General ward), Nursing and boarding charges, Surgeons, Anesthetists, Medical Practitioner, Consultants fees, Anesthesia, Blood, Oxygen, O.T. Charges, Cost of Surgical Appliances, Medicines and Drugs, Cost of Prosthetic Devices, implants, X-Ray and Diagnostic Tests, Food to patient etc. Expenses incurred for diagnostic test and medicines upto 1 day before the admission of the patient and cost of diagnostic test and medicine upto 5 days of the discharge from the hospital for the same ailment / surgery including Transport Expenses will also be the part of package. The package should cover the entire cost of treatment of the patient from date of reporting (1 day Pre hospitalisation) to his discharge from hospital and 5 days after discharge, Transport Expenses, food to patient and any complication while in hospital, making the transaction truly cashless to the patient.</p> | <p>To be negotiated with Insurer before carrying out the procedure</p> |
| <p>(iv) SURGICAL PROCEDURES IN GENERAL WARD (SPECIFIED IN PACKAGE IV):<br/>This includes bed charges (General ward), Nursing and boarding charges, Surgeons, Anaesthetists, Medical Practitioner, Consultants fees etc, Anaesthesia , Blood, Oxygen, O.T. Charges, Cost of Surgical Appliances etc, Medicines and Drugs, Cost of Prosthetic Devices, implants, X-Ray and Diagnostic Tests etc, Food to patient etc. Expenses incurred for diagnostic test and medicines upto 1 day before the admission of the patient and cost of diagnostic test and medicine upto 5 days of the discharge from the hospital for the same ailment / surgery including Transport Expenses will also be the part of package. The package should cover the entire</p>   | <p>Refer IV</p>  |

|   |  |
|---|--|
| <b>cost of treatment of the patient from date of reporting (1 day Pre hospitalisation) to his discharge from hospital and 5 days after discharge, Transport Expenses, food to patient and any complication while in hospital, making the transaction truly cashless to the patient.</b> |  |
|---|--|

|   |
|---|
| <b>00A- NON SURGICAL TREATMENT (Medical) :</b>                                    |
| <b>00B- IF ADMITTED IN ICU :</b>  |
| <b>00C- SURGICAL PROCEDURES IN GENERAL WARD (NOT SPECIFIED IN PACKAGE LIST) :</b> |

| <b>00D- SURGICAL PROCEDURES IN GENERAL WARD: LISTED IPD &amp; DAY CARE PROCEDURES</b> |                       |                    |  |             |             |
|---|-----------------------|--------------------|--|-------------|-------------|
| <b>Serial No.</b>   | <b>Procedure code</b> | <b>Serial Code</b> | <b>PROCEDURES</b>                            | <b>COST</b> | <b>DAYS</b> |
|   | <b>01D</b>            |                    | <b>DENTAL</b>                                |             |             |
| <b>1</b>  | <b>01D</b>            | <b>001</b>         | <b>Fistulectomy</b>                          |             |             |
| <b>2</b>  | <b>01D</b>            | <b>002</b>         | <b>Fixation of fracture of jaw</b>           |             |             |
| <b>3</b>  | <b>01D</b>            | <b>003</b>         | <b>Sequestrectomy</b>                        |             |             |
| <b>4</b>  | <b>01D</b>            | <b>004</b>         | <b>Tumour excision</b>                       |             |             |
|   | <b>02D</b>            |                    | <b>EAR</b>                                   |             |             |
| <b>5</b>  | <b>02D</b>            | <b>001</b>         | <b>Aural polypectomy</b>                     |             |             |
| <b>6</b>  | <b>02D</b>            | <b>002</b>         | <b>Decompression sac</b>                     |             |             |
| <b>7</b>  | <b>02D</b>            | <b>003</b>         | <b>Fenestration</b>                          |             |             |
| <b>8</b>  | <b>02D</b>            | <b>004</b>         | <b>Labyrinthectomy</b>                       |             |             |
| <b>9</b>  | <b>02D</b>            | <b>005</b>         | <b>Mastoidectomy</b>                         |             |             |
| <b>10</b>   | <b>02D</b>            | <b>006</b>         | <b>Mastoidectomy cortical module radical</b> |             |             |
| <b>11</b>   | <b>02D</b>            | <b>007</b>         | <b>Mastoidectomy With Myringoplasty</b>      |             |             |
| <b>12</b>   | <b>02D</b>            | <b>008</b>         | <b>Mastoidectomy with tympanoplasty</b>      |             |             |
| <b>13</b>   | <b>02D</b>            | <b>009</b>         | <b>Myringoplasty</b>                         |             |             |
| <b>14</b>   | <b>02D</b>            | <b>010</b>         | <b>Myringoplasty with Ossiculoplasty</b>     |             |             |
| <b>15</b>   | <b>02D</b>            | <b>011</b>         | <b>Myringotomy - Bilateral</b>               |             |             |
| <b>16</b>   | <b>02D</b>            | <b>012</b>         | <b>Myringotomy - Unilateral</b>              |             |             |
| <b>17</b>   | <b>02D</b>            | <b>013</b>         | <b>Myringotomy with Grommet - One ear</b>    |             |             |
| <b>18</b>   | <b>02D</b>            | <b>014</b>         | <b>Myringotomy with Grommet - Both ear</b>   |             |             |
| <b>19</b>   | <b>02D</b>            | <b>015</b>         | <b>Ossiculoplasty</b>                        |             |             |
| <b>20</b>   | <b>02D</b>            | <b>016</b>         | <b>Partial amputation - Pinna</b>            |             |             |
| <b>21</b>   | <b>02D</b>            | <b>017</b>         | <b>Preauricular sinus</b>                    |             |             |

|    |     |     |  |  |  |
|----|-----|-----|--|--|--|
| 22 | 02D | 018 | Stapedectomy                                   |  |  |
| 23 | 02D | 019 | Tympanoplasty                                  |  |  |
| 24 | 02D | 020 | Vidian neurectomy - Micro                      |  |  |
|    | 03D |     | NOSE   |  |  |
| 25 | 03D | 001 | Ant. Ethmoidal artery ligation                 |  |  |
| 26 | 03D | 002 | Antrostomy - Bilateral                         |  |  |
| 27 | 03D | 003 | Antrostomy - Unilateral                        |  |  |
| 28 | 03D | 004 | Caldwell - luc - Bilateral                     |  |  |
| 29 | 03D | 005 | Caldwell - luc- Unilateral                     |  |  |
| 30 | 03D | 006 | Cryosurgery                                    |  |  |
| 31 | 03D | 007 | Rhinorrhoea - Repair                           |  |  |
| 32 | 03D | 008 | Dacryocystorhinostomy (DCR)                    |  |  |
| 33 | 03D | 009 | Septoplasty + FESS                             |  |  |
| 34 | 03D | 010 | Ethmoidectomy - External                       |  |  |
| 35 | 03D | 011 | Fracture reduction nose with septal correction |  |  |
| 36 | 03D | 012 | Fracture - setting maxilla                     |  |  |
| 37 | 03D | 013 | Fracture - setting nasal bone                  |  |  |
| 38 | 03D | 014 | Functional Endoscopic Sinus (FESS)             |  |  |
| 39 | 03D | 015 | Intra Nasal Ethmoidectomy                      |  |  |
| 40 | 03D | 016 | Rhinotomy - Lateral                            |  |  |
| 41 | 03D | 017 | Nasal polypectomy - Bilateral                  |  |  |
| 42 | 03D | 018 | Nasal polypectomy - Unilateral                 |  |  |
| 43 | 03D | 019 | Turbinectomy Partial - Bilateral               |  |  |
| 44 | 03D | 020 | Turbinectomy Partial - Unilateral              |  |  |
| 45 | 03D | 021 | Radical fronto ethmo sphenodectomy             |  |  |
| 46 | 03D | 022 | Rhinoplasty                                    |  |  |
| 47 | 03D | 023 | Septoplasty                                    |  |  |
| 48 | 03D | 024 | Sinus Antroscopy                               |  |  |
| 49 | 03D | 025 | Submucos resection                             |  |  |
| 50 | 03D | 026 | Trans Antral Ethmoidectomy                     |  |  |
| 51 | 03D | 027 | Youngs operation                               |  |  |
|    | 04D |     | THROAT   |  |  |
| 52 | 04D | 001 | Adeno Tonsillectomy                            |  |  |
| 53 | 04D | 002 | Adenoidectomy                                  |  |  |
| 54 | 04D | 003 | Arytenoidectomy                                |  |  |
| 55 | 04D | 004 | Choanal atresia                                |  |  |
| 56 | 04D | 005 | Tonsillectomy + Myrinogotomy                   |  |  |
| 57 | 04D | 006 | Pharyngeal diverticulum's - Excision           |  |  |
| 58 | 04D | 007 | Laryngectomy                                   |  |  |
| 59 | 04D | 008 | Maxilla - Excision                             |  |  |

|    |     |     |  |  |  |
|----|-----|-----|--|--|--|
| 60 | 04D | 009 | Oro Antral fistula   |  |  |
| 61 | 04D | 010 | Parapharyngeal - Exploration                                     |  |  |
| 62 | 04D | 011 | Parapharyngeal Abscess - Drainage                                |  |  |
| 63 | 04D | 012 | Parapharyngeal - Tumour excision                                 |  |  |
| 64 | 04D | 013 | Pharyngoplasty   |  |  |
| 65 | 04D | 014 | Release of Tongue tie  |  |  |
| 66 | 04D | 015 | Retro pharyngeal abscess - Drainage                              |  |  |
| 67 | 04D | 016 | Styloidectomy - Both side  |  |  |
| 68 | 04D | 017 | Styloidectomy - One side   |  |  |
| 69 | 04D | 018 | Tonsillectomy + Styloidectomy                                    |  |  |
| 70 | 04D | 019 | Thyroglossal Cyst - Excision                                     |  |  |
| 71 | 04D | 020 | Thyroglossal Fistula - Excision                                  |  |  |
| 72 | 04D | 021 | Tonsillectomy - Bilateral  |  |  |
| 73 | 04D | 022 | Tonsillectomy - Unilateral                                       |  |  |
| 74 | 04D | 023 | Total Parotidectomy  |  |  |
| 75 | 04D | 024 | Uvulopharyngo Plasty   |  |  |
|    | 05D |     | GENERAL SURGERY  |  |  |
| 76 | 05D | 001 | Abdomino Perineal Resection                                      |  |  |
| 77 | 05D | 002 | Adventitious Bursae - Excision                                   |  |  |
| 78 | 05D | 003 | Anterior Resection for CA  |  |  |
| 79 | 05D | 004 | Appendicectomy   |  |  |
| 80 | 05D | 005 | Appendicular Abscess - Drainage                                  |  |  |
| 81 | 05D | 006 | Appendicular Perforation   |  |  |
| 82 | 05D | 007 | Arteriovenous (AV) Malformation of Soft Tissue Tumour - Excision |  |  |
| 83 | 05D | 008 | Axillary Lymphnode - Excision                                    |  |  |
| 84 | 05D | 009 | Bakers Cyst - Excision   |  |  |
| 85 | 05D | 010 | Bilateral Inguinal block dissection                              |  |  |
| 86 | 05D | 011 | Bleeding Ulcer - Gastrectomy & vagotomy                          |  |  |
| 87 | 05D | 012 | Bleeding Ulcer - Partial gastrectomy                             |  |  |
| 88 | 05D | 013 | Block dissection Cervical Nodes                                  |  |  |
| 89 | 05D | 014 | Branchial Fistula  |  |  |
| 90 | 05D | 015 | Breast - Excision  |  |  |
| 91 | 05D | 016 | Breast Lump - Left - Excision                                    |  |  |
| 92 | 05D | 017 | Breast Lump - Right - Excision                                   |  |  |
| 93 | 05D | 018 | Breast Mass - Excision   |  |  |
| 94 | 05D | 019 | Bronchial Cyst   |  |  |
| 95 | 05D | 020 | Bursa - Excision   |  |  |
| 96 | 05D | 021 | Burst Abdomen Obstruction  |  |  |
| 97 | 05D | 022 | Bypass - Inoperable of Pancreas                                  |  |  |
| 98 | 05D | 023 | Caecopexy  |  |  |

|     |     |     |  |  |  |
|-----|-----|-----|--|--|--|
| 99  | 05D | 024 | Carbuncle back                                     |  |  |
| 100 | 05D | 025 | Cavernostomy                                       |  |  |
| 101 | 05D | 026 | Cervial Lymphnodes - Excision                      |  |  |
| 102 | 05D | 027 | Cholecysostomy                                     |  |  |
| 103 | 05D | 028 | Cholecystectomy & exploration                      |  |  |
| 104 | 05D | 029 | Closure of Hollow Viscus Perforation               |  |  |
| 105 | 05D | 030 | Closure of Perforation                             |  |  |
| 106 | 05D | 031 | Colocystoplasty                                    |  |  |
| 107 | 05D | 032 | Coloectomy - Total                                 |  |  |
| 108 | 05D | 033 | Colostomy  |  |  |
| 109 | 05D | 034 | Commando Operation                                 |  |  |
| 110 | 05D | 035 | Corn - Large - Excision                            |  |  |
| 111 | 05D | 036 | Cyst over Scrotum - Excision                       |  |  |
| 112 | 05D | 037 | Cystectomy - Total                                 |  |  |
| 113 | 05D | 038 | Cystic Mass - Excision                             |  |  |
| 114 | 05D | 039 | Cysto Reductive Surgery                            |  |  |
| 115 | 05D | 040 | Dermoid Cyst - Large - Excision                    |  |  |
| 116 | 05D | 041 | Dermoid Cyst - Small - Excision                    |  |  |
| 117 | 05D | 042 | Distal Pancrcatectomy with Pancreatico Jejunostomy |  |  |
| 118 | 05D | 043 | Diverticulectomy                                   |  |  |
| 119 | 05D | 044 | Dorsal Slit and Reduction of Paraphimosis          |  |  |
| 120 | 05D | 045 | Drainage of Ischio Rectal Abscess                  |  |  |
| 121 | 05D | 046 | Drainage of large Abscess                          |  |  |
| 122 | 05D | 047 | Drainage of Peripherally Gastric Abscess           |  |  |
| 123 | 05D | 048 | Drainage of Psoas Abscess                          |  |  |
| 124 | 05D | 049 | Drainage of Subdiaphragmatic Abscess               |  |  |
| 125 | 05D | 050 | Drainage Pericardial Effusion                      |  |  |
| 126 | 05D | 051 | Duodenal Diverticulum                              |  |  |
| 127 | 05D | 052 | Duodenal Jejunostomy                               |  |  |
| 128 | 05D | 053 | Duodenectomy                                       |  |  |
| 129 | 05D | 054 | Dupcrytren's                                       |  |  |
| 130 | 05D | 055 | Duplication of Intestine                           |  |  |
| 131 | 05D | 056 | Epidedectomy                                       |  |  |
| 132 | 05D | 057 | Epididymal Swelling -Excision                      |  |  |
| 133 | 05D | 058 | Epidymal Cyst                                      |  |  |
| 134 | 05D | 059 | Evacuation of Scrotal Hematoma                     |  |  |
| 135 | 05D | 060 | Excision of liver Abscess                          |  |  |
| 136 | 05D | 061 | Excision Benign Tumor -Small intestine             |  |  |
| 137 | 05D | 062 | Excision Bronchial Sinus                           |  |  |

|     |     |     |  |  |  |
|-----|-----|-----|--|--|--|
| 138 | 05D | 063 | Excision Filarial Scrotum                                |  |  |
| 139 | 05D | 064 | Excision Mammary Fistula                                 |  |  |
| 140 | 05D | 065 | Excision Meckel's Diverticulum                           |  |  |
| 141 | 05D | 066 | Excision Pilonidal Sinus                                 |  |  |
| 142 | 05D | 067 | Excision Small Intestinal Fistula                        |  |  |
| 143 | 05D | 068 | Excision Submandibular Gland                             |  |  |
| 144 | 05D | 069 | Excision of Large Growth from Tongue                     |  |  |
| 145 | 05D | 070 | Excision of Large Swelling in Hand                       |  |  |
| 146 | 05D | 071 | Excision of Small Growth from Tongue                     |  |  |
| 147 | 05D | 072 | Excision of Small Swelling in Hand                       |  |  |
| 148 | 05D | 073 | Excision of Swelling in Right Cervical Region            |  |  |
| 149 | 05D | 074 | Excision of Neurofibroma                                 |  |  |
| 150 | 05D | 075 | Excision of Sinus and Curetage                           |  |  |
| 151 | 05D | 076 | Facial Decompression                                     |  |  |
| 152 | 05D | 077 | Fibro Lipoma of Right Sided Spermatic with Lord Excision |  |  |
| 153 | 05D | 078 | Fibroadenoma - Bilateral                                 |  |  |
| 154 | 05D | 079 | Fibroadenoma - Unilateral                                |  |  |
| 155 | 05D | 080 | Fibroma - Excision                                       |  |  |
| 156 | 05D | 081 | Fissurectomy   |  |  |
| 157 | 05D | 082 | Fissurectomy and Haemorrhoidectomy                       |  |  |
| 158 | 05D | 083 | Fissurectomy with Eversion of Sac - Bilateral            |  |  |
| 159 | 05D | 084 | Fissurectomy with Sphincterotomy                         |  |  |
| 160 | 05D | 085 | Fistula Repair   |  |  |
| 161 | 05D | 086 | Fistulectomy   |  |  |
| 162 | 05D | 087 | Foreign Body Removal in Deep Region                      |  |  |
| 163 | 05D | 088 | Fulguration  |  |  |
| 164 | 05D | 089 | Fundoplication   |  |  |
| 165 | 05D | 090 | G J Vagotomy   |  |  |
| 166 | 05D | 091 | Ganglion - large - Excision                              |  |  |
| 167 | 05D | 092 | Ganglion - Small - Excision                              |  |  |
| 168 | 05D | 093 | Ganglion (Dorsum of Both Wrist) - Excision               |  |  |
| 169 | 05D | 094 | Gastric Perforation                                      |  |  |
| 170 | 05D | 095 | Gastro jejunal ulcer                                     |  |  |
| 171 | 05D | 096 | Gastro jejuno Colic Fistula                              |  |  |
| 172 | 05D | 097 | Gastrojejunostomy  |  |  |
| 173 | 05D | 098 | Gastrotomy   |  |  |
| 174 | 05D | 099 | Glossectomy - Total                                      |  |  |

|     |     |     |  |  |  |
|-----|-----|-----|--|--|--|
| 175 | 05D | 100 | Graham's Operation                                 |  |  |
| 176 | 05D | 101 | Granuloma - Excision                               |  |  |
| 177 | 05D | 102 | Growth - Excision                                  |  |  |
| 178 | 05D | 103 | Haemangioma - Excision                             |  |  |
| 179 | 05D | 104 | Haemorrhage of Small Intestine                     |  |  |
| 180 | 05D | 105 | Hemi Glossectomy                                   |  |  |
| 181 | 05D | 106 | Hemi Mandibulectomy                                |  |  |
| 182 | 05D | 107 | Hemicolectomy                                      |  |  |
| 183 | 05D | 108 | Hemithyroplasty                                    |  |  |
| 184 | 05D | 109 | Hepatic Resection (lobectomy)                      |  |  |
| 185 | 05D | 110 | Hernia - Femoral                                   |  |  |
| 186 | 05D | 111 | Hernia - Hiatus                                    |  |  |
| 187 | 05D | 112 | Hernia - Spigelon                                  |  |  |
| 188 | 05D | 113 | Hernia - Umbilical                                 |  |  |
| 189 | 05D | 114 | Hernia - Ventral -<br>Lipectomy/Incisional         |  |  |
| 190 | 05D | 115 | Hernia - Epigastric                                |  |  |
| 191 | 05D | 116 | Hernia - Incisional                                |  |  |
| 192 | 05D | 117 | Hernia - Repair & release of<br>obstruction        |  |  |
| 193 | 05D | 118 | Hernioplasty                                       |  |  |
| 194 | 05D | 119 | Herniorraphy and Hydrocelectomy<br>Sac Excision    |  |  |
| 195 | 05D | 120 | Hydatid Cyst of Liver                              |  |  |
| 196 | 05D | 121 | Hydrocele - Excision - Bilateral                   |  |  |
| 197 | 05D | 122 | Hydrocele - Excision - Unilateral                  |  |  |
| 198 | 05D | 123 | Hydrocelectomy - Excision                          |  |  |
| 199 | 05D | 124 | Hydrocelectomy+Orchidectomy                        |  |  |
| 200 | 05D | 125 | Hydrocelectomy+Hernioplasty -<br>Excision          |  |  |
| 201 | 05D | 126 | Ileostomy  |  |  |
| 202 | 05D | 127 | Ileo Sigmoidostomy                                 |  |  |
| 203 | 05D | 128 | Infected Bunion Foot - Excision                    |  |  |
| 204 | 05D | 129 | Inguinal Node (bulk dissection)<br>axial           |  |  |
| 205 | 05D | 130 | Intestinal perforation                             |  |  |
| 206 | 05D | 131 | Intestinal Obstruction                             |  |  |
| 207 | 05D | 132 | Intestinal Perforation (Resection<br>Anastomosis)  |  |  |
| 208 | 05D | 133 | Intussusception                                    |  |  |
| 209 | 05D | 134 | Jejunostomy  |  |  |
| 210 | 05D | 135 | Laryngectomy & Pharyngeal<br>Diverticulum (Throat) |  |  |
| 211 | 05D | 136 | Laryngectomy with Block<br>Dissection (Throat)     |  |  |

|     |     |     |  |  |  |
|-----|-----|-----|--|--|--|
| 212 | 05D | 137 | Laryngo Fissure (Throat)                   |  |  |
| 213 | 05D | 138 | Laryngopharyngectomy (Throat)              |  |  |
| 214 | 05D | 139 | Lipoma                                     |  |  |
| 215 | 05D | 140 | Loop Colostomy Sigmoid                     |  |  |
| 216 | 05D | 141 | Lords Procedure (haemorrhoids)             |  |  |
| 217 | 05D | 142 | Lumpectomy - Excision                      |  |  |
| 218 | 05D | 143 | Mastectomy                                 |  |  |
| 219 | 05D | 144 | Mesenteric Cyst - Excision                 |  |  |
| 220 | 05D | 145 | Mesenteric Caval Anastomosis               |  |  |
| 221 | 05D | 146 | Micro-laryngoscopic Surgery                |  |  |
| 222 | 05D | 147 | Nodular Cyst                               |  |  |
| 223 | 05D | 148 | Oesophagoscopy for foreign body removal    |  |  |
| 224 | 05D | 149 | Oesophagectomy                             |  |  |
| 225 | 05D | 150 | Oesophagus Portal Hypertension             |  |  |
| 226 | 05D | 151 | Orchidectomy                               |  |  |
| 227 | 05D | 152 | Orchidectomy + Herniorrhaphy               |  |  |
| 228 | 05D | 153 | Orchidopexy                                |  |  |
| 229 | 05D | 154 | Orchidopexy with Circumsion                |  |  |
| 230 | 05D | 155 | Orchidopexy With Eversion of Sac           |  |  |
| 231 | 05D | 156 | Orchidopexy with Herniotomy                |  |  |
| 232 | 05D | 157 | Orchitis                                   |  |  |
| 233 | 05D | 158 | Pancreatico Deodeneotomy                   |  |  |
| 234 | 05D | 159 | Papilloma Rectum - Excision                |  |  |
| 235 | 05D | 160 | Anorectoplasty                             |  |  |
| 236 | 05D | 161 | Pelvic Abscess - Open Drainage             |  |  |
| 237 | 05D | 162 | Haemorrhoidectomy+ Fistulectomy            |  |  |
| 238 | 05D | 163 | Pharyngectomy & Reconstruction - Total     |  |  |
| 239 | 05D | 164 | Phytomatous Growth in the Scalp - Excision |  |  |
| 240 | 05D | 165 | Porto Caval Anastomosis                    |  |  |
| 241 | 05D | 166 | Prolapse of Rectal Mass - Excision         |  |  |
| 242 | 05D | 167 | Pyelorooplasty                             |  |  |
| 243 | 05D | 168 | Radical Mastectomy                         |  |  |
| 244 | 05D | 169 | Radical Neck Dissection - Excision         |  |  |
| 245 | 05D | 170 | Rectal Dilation                            |  |  |
| 246 | 05D | 171 | Rectal polyp                               |  |  |
| 247 | 05D | 172 | Rectopexy                                  |  |  |
| 248 | 05D | 173 | Repair of Common Bile Duct                 |  |  |
| 249 | 05D | 174 | Resection Anastomosis (Large Intestine)    |  |  |
| 250 | 05D | 175 | Resection Anastomosis (Small               |  |  |

|            |            |            |  |  |  |
|------------|------------|------------|--|--|--|
|            |            |            | <b>Intestine)</b>  |  |  |
| <b>251</b> | <b>05D</b> | <b>176</b> | <b>Retroperitoneal Tumor - Excision</b>                    |  |  |
| <b>252</b> | <b>05D</b> | <b>177</b> | <b>Haemorrhoidectomy</b>                                   |  |  |
| <b>253</b> | <b>05D</b> | <b>178</b> | <b>Salivary Gland - Excision</b>                           |  |  |
| <b>254</b> | <b>05D</b> | <b>179</b> | <b>Scrotal Swelling (Multiple) - Excision</b>              |  |  |
| <b>255</b> | <b>05D</b> | <b>180</b> | <b>Sebaceous Cyst - Excision</b>                           |  |  |
| <b>256</b> | <b>05D</b> | <b>181</b> | <b>Segmental Resection of Breast</b>                       |  |  |
| <b>257</b> | <b>05D</b> | <b>182</b> | <b>Sigmoid Diverticulum</b>                                |  |  |
| <b>258</b> | <b>05D</b> | <b>183</b> | <b>Simple closure - Peptic perforation</b>                 |  |  |
| <b>259</b> | <b>05D</b> | <b>184</b> | <b>Sinus - Excision</b>                                    |  |  |
| <b>260</b> | <b>05D</b> | <b>185</b> | <b>Soft Tissue Tumor - Excision</b>                        |  |  |
| <b>261</b> | <b>05D</b> | <b>186</b> | <b>Spindle Cell Tumor - Excision</b>                       |  |  |
| <b>262</b> | <b>05D</b> | <b>187</b> | <b>Splenectomy</b>   |  |  |
| <b>263</b> | <b>05D</b> | <b>188</b> | <b>Submandibular Lymphs - Excision</b>                     |  |  |
| <b>264</b> | <b>05D</b> | <b>189</b> | <b>Submandibular Mass Excision + Reconstruction</b>        |  |  |
| <b>265</b> | <b>05D</b> | <b>190</b> | <b>Submandibular Salivary Gland - Removal</b>              |  |  |
| <b>266</b> | <b>05D</b> | <b>191</b> | <b>Superficial Paroectomy</b>                              |  |  |
| <b>267</b> | <b>05D</b> | <b>192</b> | <b>Swelling in Rt and Lt Foot - Excision</b>               |  |  |
| <b>268</b> | <b>05D</b> | <b>193</b> | <b>Swelling Over Scapular Region</b>                       |  |  |
| <b>269</b> | <b>05D</b> | <b>194</b> | <b>Terminal Colostomy</b>                                  |  |  |
| <b>270</b> | <b>05D</b> | <b>195</b> | <b>Thyroplasty</b>   |  |  |
| <b>271</b> | <b>05D</b> | <b>196</b> | <b>Tracheal Stenosis (End to end Anastamosis) (Throat)</b> |  |  |
| <b>272</b> | <b>05D</b> | <b>197</b> | <b>Tracheoplasty (Throat)</b>                              |  |  |
| <b>273</b> | <b>05D</b> | <b>198</b> | <b>Tranverse Colostomy</b>                                 |  |  |
| <b>274</b> | <b>05D</b> | <b>199</b> | <b>Umbilical Sinus - Excision</b>                          |  |  |
| <b>275</b> | <b>05D</b> | <b>200</b> | <b>Vagotomy</b>  |  |  |
| <b>276</b> | <b>05D</b> | <b>201</b> | <b>Vagotomy &amp; Drainage</b>                             |  |  |
| <b>277</b> | <b>05D</b> | <b>202</b> | <b>Vagotomy &amp; Pyloroplasty</b>                         |  |  |
| <b>278</b> | <b>05D</b> | <b>203</b> | <b>Varicose Veins - Excision and Ligation</b>              |  |  |
| <b>279</b> | <b>05D</b> | <b>204</b> | <b>Vasco Vasostomy</b>                                     |  |  |
| <b>280</b> | <b>05D</b> | <b>205</b> | <b>Volvulus of Large Bowel</b>                             |  |  |
| <b>281</b> | <b>05D</b> | <b>206</b> | <b>Warren's Shunt</b>                                      |  |  |
|            | <b>06D</b> |            | <b>GYNAECOLOGY</b>   |  |  |
| <b>282</b> | <b>06D</b> | <b>001</b> | <b>Abdomonal open for stress incision</b>                  |  |  |
| <b>283</b> | <b>06D</b> | <b>002</b> | <b>Bartholin abscess I &amp; D</b>                         |  |  |
| <b>284</b> | <b>06D</b> | <b>003</b> | <b>Bartholin cyst removal</b>                              |  |  |
| <b>285</b> | <b>06D</b> | <b>004</b> | <b>Cervical Polypectomy</b>                                |  |  |
| <b>286</b> | <b>06D</b> | <b>005</b> | <b>Cyst - Labial</b>                                       |  |  |

|     |     |                       |   |  |  |
|-----|-----|-----------------------|---|--|--|
| 287 | 06D | 006                   | Cyst -Vaginal Enucleation                       |  |  |
| 288 | 06D | 007                   | Cystocele - Anterior repair                     |  |  |
| 289 | 06D | 008                   | D&C ( Dilatation & curettage)                   |  |  |
| 290 | 06D | 009                   | Electro Cauterisation Cryo Surgery              |  |  |
| 291 | 06D | 010                   | Fractional Curettage                            |  |  |
| 292 | 06D | 011                   | Gilliams Operation                              |  |  |
| 293 | 06D | 012                   | Haemato Colpo/Excision - Vaginal Septum         |  |  |
| 294 | 06D | 013                   | Hymenectomy & Repair of Hymen                   |  |  |
| 295 | 06D | 014                   | Hysterectomy - abdominal                        |  |  |
| 296 | 06D | 015                   | Hysterectomy - Vaginal                          |  |  |
| 297 | 06D | 016                   | Hysterectomy - Wertheims operation              |  |  |
| 298 | 06D | 017                   | Hysterotomy -Tumors removal                     |  |  |
| 299 | 06D | 018                   | Myomectomy - Abdominal                          |  |  |
| 300 | 06D | 019                   | Ovarectomy/Oophrectomy                          |  |  |
| 301 | 06D | 020                   | Ovarina Cystectomy                              |  |  |
| 302 | 06D | 021                   | Perineal Tear Repair                            |  |  |
| 303 | 06D | 022                   | Prolapse Uterus - Manchester                    |  |  |
| 304 | 06D | 023                   | Prolapse Uterus -L forts                        |  |  |
| 305 | 06D | 024                   | Retro Vaginal Fistula -Repair                   |  |  |
| 306 | 06D | 025                   | Salpingoophrectomy                              |  |  |
| 307 | 06D | 026                   | Tuboplasty                                      |  |  |
| 308 | 06D | 027                   | Vaginal Tear -Repair                            |  |  |
| 309 | 06D | 028                   | Vulval Tumors - Removal                         |  |  |
| 310 | 06D | 029                   | Vulvectomy                                      |  |  |
| 311 | 06D | 030                   | Vulvectomy - Radical                            |  |  |
|     | 07D | ENDOSCOPIC PROCEDURES |   |  |  |
| 312 | 07D | 001                   | Ablation of Endometriotic Spot                  |  |  |
| 313 | 07D | 002                   | Adhenolysis                                     |  |  |
| 314 | 07D | 003                   | Appendectomy                                    |  |  |
| 315 | 07D | 004                   | Cholecystectomy                                 |  |  |
| 316 | 07D | 005                   | Cholecystectomy and Drainage of Lever abscess   |  |  |
| 317 | 07D | 006                   | Cholecystectomy with Excision of TO Mass        |  |  |
| 318 | 07D | 007                   | Cyst Aspiration                                 |  |  |
| 319 | 07D | 008                   | Endometria to Endometria Anastomosis            |  |  |
| 320 | 07D | 009                   | Fimbriolysis                                    |  |  |
| 321 | 07D | 010                   | Hemicolectomy                                   |  |  |
| 322 | 07D | 011                   | Hysterectomy with bilateral Salpingo Operectomy |  |  |
| 323 | 07D | 012                   | Incisional Hernia - Repair                      |  |  |
| 324 | 07D | 013                   | Inguinal Hernia - Bilateral                     |  |  |

|     |     |     |   |  |  |
|-----|-----|-----|---|--|--|
| 325 | 07D | 014 | Inguinal hernia - Unilateral                    |  |  |
| 326 | 07D | 015 | Intestinal resection                            |  |  |
| 327 | 07D | 016 | Myomectomy                                      |  |  |
| 328 | 07D | 017 | Oophrectomy                                     |  |  |
| 329 | 07D | 018 | Ovarian Cystectomy                              |  |  |
| 330 | 07D | 019 | Perotomies                                      |  |  |
| 331 | 07D | 020 | Repair of Ureterocele                           |  |  |
| 332 | 07D | 021 | Salpingo Oophrectomy                            |  |  |
| 333 | 07D | 022 | Salpingostomy                                   |  |  |
| 334 | 07D | 023 | Uterine septum                                  |  |  |
| 335 | 07D | 024 | Varicocele - Bilateral                          |  |  |
| 336 | 07D | 025 | Varicocele - Unilateral                         |  |  |
|     | 08D |     | HYSTEROSCOPIC                                   |  |  |
| 337 | 08D | 001 | Ablation of Endometrium                         |  |  |
| 338 | 08D | 002 | Hysteroscopic Tubal Cannulation                 |  |  |
| 339 | 08D | 003 | Polypectomy                                     |  |  |
| 340 | 08D | 004 | Uterine Synechia - Cutting                      |  |  |
|     | 09D |     | NEUROSURGERY                                    |  |  |
| 341 | 09D | 001 | Aneurysm  |  |  |
| 342 | 09D | 002 | Anterior Encephalocele                          |  |  |
| 343 | 09D | 003 | Brachial Plexus - Repair                        |  |  |
| 344 | 09D | 004 | Burr hole                                       |  |  |
| 345 | 09D | 005 | Carotid Endarterectomy                          |  |  |
| 346 | 09D | 006 | Carpal Tunnel Release                           |  |  |
| 347 | 09D | 007 | Cerebrospinal Fluid (CSF)<br>Rhinoencephalocele |  |  |
| 348 | 09D | 008 | Cervical Ribs - Bilateral                       |  |  |
| 349 | 09D | 009 | Cervical Ribs - Unilateral                      |  |  |
| 350 | 09D | 010 | Cranio Ventral                                  |  |  |
| 351 | 09D | 011 | Cranioplasty                                    |  |  |
| 352 | 09D | 012 | Craniostenosis                                  |  |  |
| 353 | 09D | 013 | Duroplasty                                      |  |  |
| 354 | 09D | 014 | Haematoma - Brain (head injuries)               |  |  |
| 355 | 09D | 015 | Haematoma - Brain (hypertensive)                |  |  |
| 356 | 09D | 016 | Haematoma (Child irritable<br>subdural)         |  |  |
| 357 | 09D | 017 | Laminectomy with Fusion                         |  |  |
| 358 | 09D | 018 | Local Neurectomy                                |  |  |
| 359 | 09D | 019 | Lumbar Disc                                     |  |  |
| 360 | 09D | 020 | Meningocele - Anterior                          |  |  |
| 361 | 09D | 021 | Meningocele - Lumbar                            |  |  |
| 362 | 09D | 022 | Meningocele - Occipital                         |  |  |
| 363 | 09D | 023 | Microdiscectomy - Cervical                      |  |  |
| 364 | 09D | 024 | Microdiscectomy - Lumbar                        |  |  |

|     |     |     |   |  |  |
|-----|-----|-----|---|--|--|
| 365 | 09D | 025 | Neurolisis                                |  |  |
| 366 | 09D | 026 | Peripheral Nerve Surgery                  |  |  |
| 367 | 09D | 027 | Posterior Fossa - Decompression           |  |  |
| 368 | 09D | 028 | Repair & Transposition Nerve              |  |  |
| 369 | 09D | 029 | Shunt                                     |  |  |
| 370 | 09D | 030 | Skull Traction                            |  |  |
| 371 | 09D | 031 | Spina Bifida - Large - Repair             |  |  |
| 372 | 09D | 032 | Spina Bifida - Small - Repair             |  |  |
| 373 | 09D | 033 | Spine - Anterior Decompression            |  |  |
| 374 | 09D | 034 | Spine - Canal Stenosis                    |  |  |
| 375 | 09D | 035 | Spine - Decompression & Fusion            |  |  |
| 376 | 09D | 036 | Spine - Disc Cervical/Lumber              |  |  |
| 377 | 09D | 037 | Spine - Extradural Tumour                 |  |  |
| 378 | 09D | 038 | Spine - Intradural Tumour                 |  |  |
| 379 | 09D | 039 | Spine - Intramedullar Tumour              |  |  |
| 380 | 09D | 040 | Subdural aspiration                       |  |  |
| 381 | 09D | 041 | Temporal Rhizotomy                        |  |  |
| 382 | 09D | 042 | Trans Sphenoidal                          |  |  |
| 383 | 09D | 043 | Tumours - Supratentorial                  |  |  |
| 384 | 09D | 044 | Tumours Meninges - Gocussa                |  |  |
| 385 | 09D | 045 | Tumours Meninges - Posterior              |  |  |
| 386 | 09D | 046 | Vagotomy - Selective                      |  |  |
| 387 | 09D | 047 | Vagotomy with Gastrojejunostomy           |  |  |
| 388 | 09D | 048 | Vagotomy with Pyeloplasty                 |  |  |
| 389 | 09D | 049 | Vagotomy - Highly Selective               |  |  |
| 390 | 09D | 050 | Ventricular Puncture                      |  |  |
|     | 10D |     | OPHTHALMOLOGY                             |  |  |
| 391 | 10D | 001 | Abscess Drainage of Lid                   |  |  |
| 392 | 10D | 002 | Anterior Chamber Reconstruction           |  |  |
| 393 | 10D | 003 | Buckle Removal                            |  |  |
| 394 | 10D | 004 | Canaliculo Dacryocysto Rhinostomy         |  |  |
| 395 | 10D | 005 | Capsulotomy                               |  |  |
| 396 | 10D | 006 | Cataract - Bilateral                      |  |  |
| 397 | 10D | 007 | Cataract - Unilateral                     |  |  |
| 398 | 10D | 008 | Cataract + Pterygium                      |  |  |
| 399 | 10D | 009 | Corneal Grafting                          |  |  |
| 400 | 10D | 010 | Cryoretinopexy - Closed                   |  |  |
| 401 | 10D | 011 | Cryoretinopexy - Open                     |  |  |
| 402 | 10D | 012 | Cyclocryotherapy                          |  |  |
| 403 | 10D | 013 | Cyst                                      |  |  |
| 404 | 10D | 014 | Dacrocystectomy                           |  |  |
| 405 | 10D | 015 | Dacrocystectomy With Pterygium - Excision |  |  |

|            |            |            |  |  |  |
|------------|------------|------------|--|--|--|
| <b>406</b> | <b>10D</b> | <b>016</b> | <b>Endoscopic Optic Nerve Decompression</b>        |  |  |
| <b>407</b> | <b>10D</b> | <b>017</b> | <b>Endoscopic Optic Orbital Decompression</b>      |  |  |
| <b>408</b> | <b>10D</b> | <b>018</b> | <b>Enucleation</b>                                 |  |  |
| <b>409</b> | <b>10D</b> | <b>019</b> | <b>Enucleation with Implant</b>                    |  |  |
| <b>410</b> | <b>10D</b> | <b>020</b> | <b>Exentration</b>                                 |  |  |
| <b>411</b> | <b>10D</b> | <b>021</b> | <b>Ectropion Correction</b>                        |  |  |
| <b>412</b> | <b>10D</b> | <b>022</b> | <b>Glaucoma surgery (trabeculectomy)</b>           |  |  |
| <b>413</b> | <b>10D</b> | <b>023</b> | <b>Intraocular Foreign Body Removal</b>            |  |  |
| <b>414</b> | <b>10D</b> | <b>024</b> | <b>IRIS Prolapse - Repair</b>                      |  |  |
| <b>415</b> | <b>10D</b> | <b>025</b> | <b>Keratoplasty</b>                                |  |  |
| <b>416</b> | <b>10D</b> | <b>026</b> | <b>Lensectomy</b>                                  |  |  |
| <b>417</b> | <b>10D</b> | <b>027</b> | <b>Limbal Dermoid Removal</b>                      |  |  |
| <b>418</b> | <b>10D</b> | <b>028</b> | <b>Membranectomy</b>                               |  |  |
| <b>419</b> | <b>10D</b> | <b>029</b> | <b>Perforating corneo - Scleral Injury</b>         |  |  |
| <b>420</b> | <b>10D</b> | <b>030</b> | <b>Pterigium + Conjunctival Autograft</b>          |  |  |
| <b>421</b> | <b>10D</b> | <b>031</b> | <b>Pterygium</b>                                   |  |  |
| <b>422</b> | <b>10D</b> | <b>032</b> | <b>Ptosis</b>                                      |  |  |
| <b>423</b> | <b>10D</b> | <b>033</b> | <b>Radial Keratotomy</b>                           |  |  |
| <b>424</b> | <b>10D</b> | <b>034</b> | <b>Retinal Detachment Surgery</b>                  |  |  |
| <b>425</b> | <b>10D</b> | <b>035</b> | <b>Small Tumour of Lid - Excision</b>              |  |  |
| <b>426</b> | <b>10D</b> | <b>036</b> | <b>Socket Reconstruction</b>                       |  |  |
| <b>427</b> | <b>10D</b> | <b>037</b> | <b>Trabeculectomy - Right</b>                      |  |  |
| <b>428</b> | <b>10D</b> | <b>038</b> | <b>Tridectomy</b>                                  |  |  |
| <b>429</b> | <b>10D</b> | <b>039</b> | <b>Tumours of IRIS</b>                             |  |  |
| <b>430</b> | <b>10D</b> | <b>040</b> | <b>Vitrectomy</b>                                  |  |  |
| <b>431</b> | <b>10D</b> | <b>041</b> | <b>Vitrectomy + Retinal Detachment</b>             |  |  |
|            | <b>11D</b> |            | <b>ORTHOPAEDIC</b>                                 |  |  |
| <b>432</b> | <b>11D</b> | <b>001</b> | <b>Accessory bone - Excision</b>                   |  |  |
| <b>433</b> | <b>11D</b> | <b>002</b> | <b>Acromion reconstruction</b>                     |  |  |
| <b>434</b> | <b>11D</b> | <b>003</b> | <b>Ampuation - Upper Fore Arm</b>                  |  |  |
| <b>435</b> | <b>11D</b> | <b>004</b> | <b>Amputation - Index Fingure</b>                  |  |  |
| <b>436</b> | <b>11D</b> | <b>005</b> | <b>Amputation - Forearm</b>                        |  |  |
| <b>437</b> | <b>11D</b> | <b>006</b> | <b>Amputation - Wrist Axillary Node Dissection</b> |  |  |
| <b>438</b> | <b>11D</b> | <b>007</b> | <b>Amputation - 2nd and 3rd Toe</b>                |  |  |
| <b>439</b> | <b>11D</b> | <b>008</b> | <b>Amputation - 2nd Toe</b>                        |  |  |
| <b>440</b> | <b>11D</b> | <b>009</b> | <b>Amputation - 3rd and 4th Toes</b>               |  |  |
| <b>441</b> | <b>11D</b> | <b>010</b> | <b>Amputation - 4th and 5th Toes</b>               |  |  |
| <b>442</b> | <b>11D</b> | <b>011</b> | <b>Amputation - Ankle</b>                          |  |  |
| <b>443</b> | <b>11D</b> | <b>012</b> | <b>Amputation - Arm</b>                            |  |  |
| <b>444</b> | <b>11D</b> | <b>013</b> | <b>Amputation - Digits</b>                         |  |  |
| <b>445</b> | <b>11D</b> | <b>014</b> | <b>Amputation - Fifth Toe</b>                      |  |  |

|     |     |     |   |  |  |
|-----|-----|-----|---|--|--|
| 446 | 11D | 015 | Amputation - Foot                                       |  |  |
| 447 | 11D | 016 | Amputation - Forefoot                                   |  |  |
| 448 | 11D | 017 | Amputation - Great Toe                                  |  |  |
| 449 | 11D | 018 | Amputation - Leg  |  |  |
| 450 | 11D | 019 | Amputation - Part of Toe and Fixation of K Wire         |  |  |
| 451 | 11D | 020 | Amputation - Thigh                                      |  |  |
| 452 | 11D | 021 | Amputation - Wrist                                      |  |  |
| 453 | 11D | 022 | Anterior & Posterior Spine Fixation                     |  |  |
| 454 | 11D | 023 | Arthroplasty - Excision                                 |  |  |
| 455 | 11D | 024 | Arthorotomy   |  |  |
| 456 | 11D | 025 | Arthrodesis Ankle Triple                                |  |  |
| 457 | 11D | 026 | Arthroplasty of Femur head - Excision                   |  |  |
| 458 | 11D | 027 | Arthrotomy + Synelectomy                                |  |  |
| 459 | 11D | 028 | Bimalleolar Fracture Fixation                           |  |  |
| 460 | 11D | 029 | Bone Tumour and Reconstruction - Minor - Excision       |  |  |
| 461 | 11D | 030 | Bone Tumour and Reconstruction -Major - Excision        |  |  |
| 462 | 11D | 031 | Calcaneal Spur - Excision of Both                       |  |  |
| 463 | 11D | 032 | Clavicle Surgery  |  |  |
| 464 | 11D | 033 | Close Fixation - Foot Bones                             |  |  |
| 465 | 11D | 034 | Close Fixation - Hand Bones                             |  |  |
| 466 | 11D | 035 | Close Reduction - Small Joints                          |  |  |
| 467 | 11D | 036 | Closed Interlock Nailing + Bone Grafting                |  |  |
| 468 | 11D | 037 | Closed Interlocking Intermedullary                      |  |  |
| 469 | 11D | 038 | Closed Interlocking Tibia + Orif of Fracture Fixation   |  |  |
| 470 | 11D | 039 | Closed Reduction and Internal Fixation                  |  |  |
| 471 | 11D | 040 | Closed Reduction and Internal Fixation with K wire      |  |  |
| 472 | 11D | 041 | Closed Reduction and Percutaneous Screw Fixation        |  |  |
| 473 | 11D | 042 | Closed Reduction and Percutaneous Pinning               |  |  |
| 474 | 11D | 043 | Closed Reduction and Percutaneous Nailing               |  |  |
| 475 | 11D | 044 | Closed Reduction and Proceed to Posterior Stabilization |  |  |
| 476 | 11D | 045 | Debridement & Closure - Major                           |  |  |
| 477 | 11D | 046 | Debridement & Closure - Minor                           |  |  |
| 478 | 11D | 047 | Decompression and Spinal Fixation                       |  |  |
| 479 | 11D | 048 | Decompression and Stabilization with Steffiplate        |  |  |

|            |            |            |  |  |  |
|------------|------------|------------|--|--|--|
| <b>480</b> | <b>11D</b> | <b>049</b> | <b>Decompression L5 S1 Fusion with Posterior Stabilization</b> |  |  |
| <b>481</b> | <b>11D</b> | <b>050</b> | <b>Decompression of Carpal Tunnel Syndrome</b>                 |  |  |
| <b>482</b> | <b>11D</b> | <b>051</b> | <b>Decompression Posterior D12+L1</b>                          |  |  |
| <b>483</b> | <b>11D</b> | <b>052</b> | <b>Decompression Stabilization and Laminectomy</b>             |  |  |
| <b>484</b> | <b>11D</b> | <b>053</b> | <b>Dislocation - Elbow</b>                                     |  |  |
| <b>485</b> | <b>11D</b> | <b>054</b> | <b>Dislocation - Shoulder</b>                                  |  |  |
| <b>486</b> | <b>11D</b> | <b>055</b> | <b>Dislocation- Hip</b>  |  |  |
| <b>487</b> | <b>11D</b> | <b>056</b> | <b>Dislocation - Knee</b>                                      |  |  |
| <b>488</b> | <b>11D</b> | <b>057</b> | <b>Drainage of Abscess Cold</b>                                |  |  |
| <b>489</b> | <b>11D</b> | <b>058</b> | <b>Dupuytren Contracture</b>                                   |  |  |
| <b>490</b> | <b>11D</b> | <b>059</b> | <b>Epiphyseal Stimulation</b>                                  |  |  |
| <b>491</b> | <b>11D</b> | <b>060</b> | <b>Exostosis - Femur - Excision</b>                            |  |  |
| <b>492</b> | <b>11D</b> | <b>061</b> | <b>Exostosis - Fibula - Excision</b>                           |  |  |
| <b>493</b> | <b>11D</b> | <b>062</b> | <b>Exostosis - Humerus - Excision</b>                          |  |  |
| <b>494</b> | <b>11D</b> | <b>063</b> | <b>Exostosis - Patella - Excision</b>                          |  |  |
| <b>495</b> | <b>11D</b> | <b>064</b> | <b>Exostosis - Radius - Excision</b>                           |  |  |
| <b>496</b> | <b>11D</b> | <b>065</b> | <b>Exostosis - Small bones -Excision</b>                       |  |  |
| <b>497</b> | <b>11D</b> | <b>066</b> | <b>Exostosis - Tibia- Excision</b>                             |  |  |
| <b>498</b> | <b>11D</b> | <b>067</b> | <b>Exostosis - Ulna - Excision</b>                             |  |  |
| <b>499</b> | <b>11D</b> | <b>068</b> | <b>Exploration and Ulnar Repair</b>                            |  |  |
| <b>501</b> | <b>11D</b> | <b>069</b> | <b>External fixation - Long bone</b>                           |  |  |
| <b>502</b> | <b>11D</b> | <b>070</b> | <b>External fixation - Pelvis</b>                              |  |  |
| <b>503</b> | <b>11D</b> | <b>071</b> | <b>External fixation - Small bone</b>                          |  |  |
| <b>504</b> | <b>11D</b> | <b>072</b> | <b>Fasciotomy</b>  |  |  |
| <b>505</b> | <b>11D</b> | <b>073</b> | <b>Fixator with Joint Arthrolysis</b>                          |  |  |
| <b>506</b> | <b>11D</b> | <b>074</b> | <b>Fracture - Acetabulum</b>                                   |  |  |
| <b>507</b> | <b>11D</b> | <b>075</b> | <b>Fracture - Femoral neck - MUA &amp; Internal Fixation</b>   |  |  |
| <b>508</b> | <b>11D</b> | <b>076</b> | <b>Fracture - Femoral Neck Open Reduction &amp; Nailing</b>    |  |  |
| <b>509</b> | <b>11D</b> | <b>077</b> | <b>Fracture - Fibula Internal Fixation</b>                     |  |  |
| <b>510</b> | <b>11D</b> | <b>078</b> | <b>Fracture - Fibula Internal Fixation</b>                     |  |  |
| <b>511</b> | <b>11D</b> | <b>079</b> | <b>Fracture - Hip Internal Fixation</b>                        |  |  |
| <b>512</b> | <b>11D</b> | <b>080</b> | <b>Fracture - Humerus Internal Fixation</b>                    |  |  |
| <b>513</b> | <b>11D</b> | <b>081</b> | <b>Fracture - Olecranon of Ulna</b>                            |  |  |
| <b>514</b> | <b>11D</b> | <b>082</b> | <b>Fracture - Radius Internal Fixation</b>                     |  |  |
| <b>515</b> | <b>11D</b> | <b>083</b> | <b>Fracture - TIBIA Internal Fixation</b>                      |  |  |
| <b>516</b> | <b>11D</b> | <b>084</b> | <b>Fracture - Ulna Internal Fixation</b>                       |  |  |
| <b>517</b> | <b>11D</b> | <b>085</b> | <b>Fractured Fragment Excision</b>                             |  |  |
| <b>518</b> | <b>11D</b> | <b>086</b> | <b>Girdle Stone Arthroplasty</b>                               |  |  |
| <b>519</b> | <b>11D</b> | <b>087</b> | <b>Harrington Instrumentation</b>                              |  |  |
| <b>520</b> | <b>11D</b> | <b>088</b> | <b>Head Radius - Excision</b>                                  |  |  |
| <b>521</b> | <b>11D</b> | <b>089</b> | <b>High Tibial Osteotomy</b>                                   |  |  |

|     |     |     |   |  |  |
|-----|-----|-----|---|--|--|
| 522 | 11D | 090 | Hip Region Surgery                              |  |  |
| 523 | 11D | 091 | Hip Spica                                       |  |  |
| 524 | 11D | 092 | Internal Fixation Lateral Epicondyle            |  |  |
| 525 | 11D | 093 | Internal Fixation of other Small Bone           |  |  |
| 526 | 11D | 094 | Joint Reconstruction                            |  |  |
| 527 | 11D | 095 | Laminectomy                                     |  |  |
| 528 | 11D | 096 | Leg Lengthening                                 |  |  |
| 529 | 11D | 097 | Ilizarov Fixation                               |  |  |
| 530 | 11D | 098 | Multiple Tendon Repair                          |  |  |
| 531 | 11D | 099 | Nerve Repair Surgery                            |  |  |
| 532 | 11D | 100 | Nerve Transplant/Release                        |  |  |
| 533 | 11D | 101 | Neurolisis                                      |  |  |
| 534 | 11D | 102 | Open Reduction Internal Fixation (2 Small Bone) |  |  |
| 535 | 11D | 103 | Open Reduction Internal Fixation (Large Bone)   |  |  |
| 536 | 11D | 104 | Open Reduction of CDH                           |  |  |
| 537 | 11D | 105 | Open Reduction of Small Joint                   |  |  |
| 538 | 11D | 106 | Open Reduction with Phemister Grafting          |  |  |
| 539 | 11D | 107 | Osteotomy -Long Bone                            |  |  |
| 540 | 11D | 108 | Osteotomy -Small Bone                           |  |  |
| 541 | 11D | 109 | Patellectomy                                    |  |  |
| 542 | 11D | 110 | Pelvic Fracture - Fixation                      |  |  |
| 543 | 11D | 111 | Pelvic Osteotomy                                |  |  |
| 544 | 11D | 112 | Percutaneous - Fixation of Fracture             |  |  |
| 545 | 11D | 113 | Prepatellar Bursa and Repair of MCL of Knee     |  |  |
| 546 | 11D | 114 | Reconstruction of ACL/PCL                       |  |  |
| 547 | 11D | 115 | Retrocalcaneal Bursa - Excision                 |  |  |
| 548 | 11D | 116 | Sequestrectomy of Long Bones                    |  |  |
| 549 | 11D | 117 | Shoulder Jacket                                 |  |  |
| 550 | 11D | 118 | Sinus Over Sacrum Excision                      |  |  |
| 551 | 11D | 119 | Skin Grafting                                   |  |  |
| 552 | 11D | 120 | Spinal Fusion                                   |  |  |
| 553 | 11D | 121 | Synovectomy                                     |  |  |
| 554 | 11D | 122 | Synovial Cyst - Excision                        |  |  |
| 555 | 11D | 123 | Tendo Achilles Tenotomy                         |  |  |
| 556 | 11D | 124 | Tendon Grafting                                 |  |  |
| 557 | 11D | 125 | Tendon Nerve Surgery of Foot                    |  |  |
| 558 | 11D | 126 | Tendon Release                                  |  |  |
| 559 | 11D | 127 | Tenolysis                                       |  |  |
| 560 | 11D | 128 | Tenotomy  |  |  |
| 561 | 11D | 129 | Tension Band Wiring Patella                     |  |  |

|     |     |     |                                      |  |  |
|-----|-----|-----|--------------------------------------|--|--|
| 562 | 11D | 130 | Trigger Thumb                        |  |  |
| 563 | 11D | 131 | Wound Debridement                    |  |  |
|     | 12D |     | PAEDIATRIC                           |  |  |
| 564 | 12D | 001 | Abdomino Peritoneal (Exomphalos)     |  |  |
| 565 | 12D | 002 | Anal Dilatation                      |  |  |
| 566 | 12D | 003 | Anal Transposition for Ectopic Anus  |  |  |
| 567 | 12D | 004 | Chordee Correction                   |  |  |
| 568 | 12D | 005 | Closure Colostomy                    |  |  |
| 569 | 12D | 006 | Colectomy                            |  |  |
| 570 | 12D | 007 | Colon Transplant                     |  |  |
| 571 | 12D | 008 | Cystolithotomy                       |  |  |
| 572 | 12D | 009 | Esophageal Atresia (Fistula)         |  |  |
| 573 | 12D | 010 | Gastrostomy                          |  |  |
| 574 | 12D | 011 | Hernia - Diaphragmatic               |  |  |
| 575 | 12D | 012 | Hernia - Epigastric                  |  |  |
| 576 | 12D | 013 | Hernia - Umbilical                   |  |  |
| 577 | 12D | 014 | Hernia-Inguinal - Bilateral          |  |  |
| 578 | 12D | 015 | Hernia-Inguinal - Unilateral         |  |  |
| 579 | 12D | 016 | Meckel's Diverticulectomy            |  |  |
| 580 | 12D | 017 | Meniscectomy                         |  |  |
| 581 | 12D | 018 | Nephrolithotomy                      |  |  |
| 582 | 12D | 019 | Orchidopexy - Bilateral              |  |  |
| 583 | 12D | 020 | Orchidopexy - Unilateral)            |  |  |
| 584 | 12D | 021 | Pyelolithotomy                       |  |  |
| 585 | 12D | 022 | Pyeloplasty                          |  |  |
| 586 | 12D | 023 | Pyloric Stenosis (Ramsted OP)        |  |  |
| 587 | 12D | 024 | Rectal Polyp                         |  |  |
| 588 | 12D | 025 | Resection & Anastamosis of Intestine |  |  |
| 589 | 12D | 026 | Supra Pubic Drainage - Open          |  |  |
| 590 | 12D | 027 | Torsion Testis                       |  |  |
| 591 | 12D | 028 | Tracheo Esophageal Fistula           |  |  |
| 592 | 12D | 029 | Ureterotomy                          |  |  |
| 593 | 12D | 030 | Urethroplasty                        |  |  |
| 594 | 12D | 031 | Vesicostomy                          |  |  |
|     | 13D |     | ENDOCRINE                            |  |  |
| 595 | 13D | 001 | Adenoma Parathyroid - Excision       |  |  |
| 596 | 13D | 002 | Adrenal Gland Tumour - Excision      |  |  |
| 597 | 13D | 003 | Axillary lymphnode - Excision        |  |  |
| 598 | 13D | 004 | Parotid Tumour - Excision            |  |  |
| 599 | 13D | 005 | Pancreatectomy                       |  |  |
| 600 | 13D | 006 | Sphincterotomy                       |  |  |
| 601 | 13D | 007 | Thyroid Adenoma Resection            |  |  |

|            |            |            |   |  |  |
|------------|------------|------------|---|--|--|
|            |            |            | <b>Enucleation</b>  |  |  |
| <b>602</b> | <b>13D</b> | <b>008</b> | <b>Thyroidectomy - Hemi</b>                                     |  |  |
| <b>603</b> | <b>13D</b> | <b>009</b> | <b>Thyroidectomy - Partial</b>                                  |  |  |
| <b>604</b> | <b>13D</b> | <b>010</b> | <b>Thyroidectomy - Total</b>                                    |  |  |
| <b>605</b> | <b>13D</b> | <b>011</b> | <b>Total thyroidectomy &amp; block dissection</b>               |  |  |
| <b>606</b> | <b>13D</b> | <b>012</b> | <b>Total Thyroidectomy + Reconstruction</b>                     |  |  |
| <b>607</b> | <b>13D</b> | <b>013</b> | <b>Trendal Burge Ligation and Stripping</b>                     |  |  |
|            | <b>14D</b> |            | <b>UROLOGY</b>  |  |  |
| <b>608</b> | <b>14D</b> | <b>001</b> | <b>Bladder Calculi- Removal</b>                                 |  |  |
| <b>609</b> | <b>14D</b> | <b>002</b> | <b>Bladder Tumour (Fulguration)</b>                             |  |  |
| <b>610</b> | <b>14D</b> | <b>003</b> | <b>Correction of Extrophy of Bladder</b>                        |  |  |
| <b>611</b> | <b>14D</b> | <b>004</b> | <b>Cystolithotomy</b>   |  |  |
| <b>612</b> | <b>14D</b> | <b>005</b> | <b>Cysto Gastrostomy</b>  |  |  |
| <b>613</b> | <b>14D</b> | <b>006</b> | <b>Cysto Jejunostomy</b>  |  |  |
| <b>614</b> | <b>14D</b> | <b>007</b> | <b>Cystolithopexy</b>   |  |  |
| <b>615</b> | <b>14D</b> | <b>008</b> | <b>Dormia Extraction of Calculus</b>                            |  |  |
| <b>616</b> | <b>14D</b> | <b>009</b> | <b>Drainage of Perinephric Abscess</b>                          |  |  |
| <b>617</b> | <b>14D</b> | <b>010</b> | <b>Urachal Cyst</b>   |  |  |
| <b>618</b> | <b>14D</b> | <b>011</b> | <b>Excision of Urethral Carbuncle</b>                           |  |  |
| <b>619</b> | <b>14D</b> | <b>012</b> | <b>Exploration of Epididymus (Unsuccessful Vasco vasectomy)</b> |  |  |
| <b>620</b> | <b>14D</b> | <b>013</b> | <b>Hydroscapulus</b>  |  |  |
| <b>621</b> | <b>14D</b> | <b>014</b> | <b>Internal Urethrotomy</b>                                     |  |  |
| <b>622</b> | <b>14D</b> | <b>015</b> | <b>Litholapexy</b>  |  |  |
| <b>623</b> | <b>14D</b> | <b>016</b> | <b>Lithotripsy</b>  |  |  |
| <b>624</b> | <b>14D</b> | <b>017</b> | <b>Meatoplasty</b>  |  |  |
| <b>625</b> | <b>14D</b> | <b>018</b> | <b>Meatotomy</b>  |  |  |
| <b>626</b> | <b>14D</b> | <b>019</b> | <b>Neoblastoma</b>  |  |  |
| <b>627</b> | <b>14D</b> | <b>020</b> | <b>Nephrectomy - Simple</b>                                     |  |  |
| <b>628</b> | <b>14D</b> | <b>021</b> | <b>Nephrectomy - Radical</b>                                    |  |  |
| <b>629</b> | <b>14D</b> | <b>022</b> | <b>Nephro Uretrectomy</b>                                       |  |  |
| <b>630</b> | <b>14D</b> | <b>023</b> | <b>Nephrolithotomy</b>  |  |  |
| <b>631</b> | <b>14D</b> | <b>024</b> | <b>Nephropexy</b>   |  |  |
| <b>632</b> | <b>14D</b> | <b>025</b> | <b>Nephrostomy</b>  |  |  |
| <b>633</b> | <b>14D</b> | <b>026</b> | <b>Nephrourethrotomy</b>  |  |  |
| <b>634</b> | <b>14D</b> | <b>027</b> | <b>Open Resection of Bladder Neck</b>                           |  |  |
| <b>635</b> | <b>14D</b> | <b>028</b> | <b>Operation for Cyst of Kidney</b>                             |  |  |
| <b>636</b> | <b>14D</b> | <b>029</b> | <b>Operation for Double Ureter</b>                              |  |  |
| <b>637</b> | <b>14D</b> | <b>030</b> | <b>Operation for Ectopic Ureter</b>                             |  |  |
| <b>638</b> | <b>14D</b> | <b>031</b> | <b>Operation for Injury of Bladder</b>                          |  |  |
| <b>639</b> | <b>14D</b> | <b>032</b> | <b>Partial Cystectomy</b>                                       |  |  |

|     |     |     |  |  |  |
|-----|-----|-----|--|--|--|
| 640 | 14D | 033 | Partial Nephrectomy                                  |  |  |
| 641 | 14D | 034 | PCNL (Percutaneous nephro lithotomy) - Biilateral    |  |  |
| 642 | 14D | 035 | PCNL (Percutaneous nephro lithotomy) - Unilateral    |  |  |
| 643 | 14D | 036 | Post Urethral Valve                                  |  |  |
| 644 | 14D | 037 | Pyelolithotomy                                       |  |  |
| 645 | 14D | 038 | Pyeloplasty & Similar Procedures                     |  |  |
| 646 | 14D | 039 | Radical Nephrectomy                                  |  |  |
| 647 | 14D | 040 | Reduction of Paraphimosis                            |  |  |
| 648 | 14D | 041 | Reimplanation of Urethra                             |  |  |
| 649 | 14D | 042 | Reimplantation of Bladder                            |  |  |
| 650 | 14D | 043 | Reimplantation of Ureter                             |  |  |
| 651 | 14D | 044 | Repair of Uretero Vaginal Fistula                    |  |  |
| 652 | 14D | 045 | Repair of Ureterocele                                |  |  |
| 653 | 14D | 046 | Retroperitoneal Fibrosis - Renal                     |  |  |
| 654 | 14D | 047 | Retropubic Prostatectomy                             |  |  |
| 655 | 14D | 048 | Spleno Renal Anastomosis                             |  |  |
| 656 | 14D | 049 | Stricture Urethra                                    |  |  |
| 657 | 14D | 050 | Suprapubic Cystostomy - Open                         |  |  |
| 658 | 14D | 051 | Suprapubic Drainage - Closed                         |  |  |
| 659 | 14D | 052 | Torsion testis                                       |  |  |
| 660 | 14D | 053 | Trans Vesical Prostatectomy                          |  |  |
| 661 | 14D | 054 | Transurethral Fulguration                            |  |  |
| 662 | 14D | 055 | TURBT (Transurethral Resection of the Bladder Tumor) |  |  |
| 663 | 14D | 056 | TURP (Trans-Urethral Resection of Bladder)           |  |  |
|     | 14D | 057 | TURP + Circumcision                                  |  |  |
| 664 | 14D | 058 | TURP + Closure of Urinary Fistula                    |  |  |
| 665 | 14D | 059 | TURP + Cystolithopexy                                |  |  |
| 666 | 14D | 060 | TURP + Cystolithotomy                                |  |  |
| 667 | 14D | 061 | TURP + Cystolithotripsy                              |  |  |
| 668 | 14D | 062 | TURP + Fistulectomy                                  |  |  |
| 669 | 14D | 063 | TURP + Nephrectomy                                   |  |  |
| 670 | 14D | 064 | TURP + Orchidectomy                                  |  |  |
| 671 | 14D | 065 | TURP + Suprapubic Cystolithotomy                     |  |  |
| 672 | 14D | 066 | TURP + TURBT   |  |  |
| 673 | 14D | 067 | TURP + URS   |  |  |
| 674 | 14D | 068 | TURP + Vesicolithotripsy                             |  |  |
| 675 | 14D | 069 | TURP + VIU   |  |  |
| 676 | 14D | 070 | TURP + Haemorrhoidectomy                             |  |  |
| 677 | 14D | 071 | TURP + Hydrocele                                     |  |  |
| 678 | 14D | 072 | TURP + Hernioplasty                                  |  |  |

|     |     |     |   |  |  |
|-----|-----|-----|---|--|--|
| 679 | 14D | 073 | TURP with Repair of Urethra                 |  |  |
| 680 | 14D | 074 | TURP + Herniorraphy                         |  |  |
| 681 | 14D | 075 | TURP + Fissurectomy                         |  |  |
| 682 | 14D | 076 | TURP + Urethrolithotomy                     |  |  |
| 683 | 14D | 077 | TURP + Urethral dilatation                  |  |  |
| 684 | 14D | 078 | Uretero Colic Anastomosis                   |  |  |
| 685 | 14D | 079 | Ureterolithotomy                            |  |  |
| 686 | 14D | 080 | Ureteroscopic Calculi - Bilateral           |  |  |
| 687 | 14D | 081 | Ureteroscopic Calculi - Unilateral          |  |  |
| 688 | 14D | 082 | Ureteroscopy Urethroplasty                  |  |  |
| 689 | 14D | 083 | Ureteroscopy PCNL                           |  |  |
| 690 | 14D | 084 | Ureteroscopic stone Removal And DJ Stenting |  |  |
| 691 | 14D | 085 | Urethral Dilatation                         |  |  |
| 692 | 14D | 086 | Urethral Injury                             |  |  |
| 693 | 14D | 087 | Urethral Reconstuction                      |  |  |
| 694 | 14D | 088 | Ureteric Catheterization - Cystoscopy       |  |  |
| 695 | 14D | 089 | Uretrostomy (Cutanie)                       |  |  |
| 696 | 14D | 090 | URS + Stone Removal                         |  |  |
| 697 | 14D | 091 | URS Extraction of Stone Ureter - Bilateral  |  |  |
| 698 | 14D | 092 | URS Extraction of Stone Ureter - Unilateral |  |  |
| 699 | 14D | 093 | URS with DJ Stenting With ESWL              |  |  |
| 700 | 14D | 094 | URS with Endolitholopexy                    |  |  |
| 701 | 14D | 095 | URS with Lithotripsy                        |  |  |
| 702 | 14D | 096 | URS with Lithotripsy with DJ Stenting       |  |  |
| 703 | 14D | 097 | URS+Cysto+Lithotomy                         |  |  |
| 704 | 14D | 098 | V V F Repair                                |  |  |
| 705 | 14D | 099 | Hypospadias Repair and Orchiopexy           |  |  |
| 706 | 14D | 100 | Vesico Uretero Reflux - Unilateral          |  |  |
| 707 | 14D | 101 | Vesico uretero Reflux - Bilateral           |  |  |
| 709 | 14D | 102 | Vesicolithotomy                             |  |  |
| 710 | 14D | 103 | VIU (Visual Internal Urethrotomy )          |  |  |
| 711 | 14D | 104 | VIU + Cystolithopexy                        |  |  |
| 712 | 14D | 105 | VIU + Hydrocelectomy                        |  |  |
| 713 | 14D | 106 | VIU and Meatoplasty                         |  |  |
| 714 | 14D | 107 | VIU for Stricture Urethra                   |  |  |
| 715 | 14D | 108 | VIU with Cystoscopy                         |  |  |
| 716 | 14D | 109 | Y V Plasty of Bladder Neck                  |  |  |
|     | 15D |     | ONCOLOGY                                    |  |  |
| 717 | 15D | 001 | Adenoma Excision                            |  |  |

|            |            |            |   |  |  |
|------------|------------|------------|---|--|--|
| <b>718</b> | <b>15D</b> | <b>002</b> | <b>Adrenalectomy - Bilateral</b>                |  |  |
| <b>719</b> | <b>15D</b> | <b>003</b> | <b>Adrenalectomy - Unilateral</b>               |  |  |
| <b>720</b> | <b>15D</b> | <b>004</b> | <b>Carcinoma lip - Wedge excision</b>           |  |  |
| <b>721</b> | <b>15D</b> | <b>005</b> | <b>Chemotherapy - Per sitting</b>               |  |  |
| <b>722</b> | <b>15D</b> | <b>006</b> | <b>Excision Cartoid Body tumour</b>             |  |  |
| <b>723</b> | <b>15D</b> | <b>007</b> | <b>Malignant ovarian</b>                        |  |  |
| <b>724</b> | <b>15D</b> | <b>008</b> | <b>Operation for Neoblastoma</b>                |  |  |
| <b>725</b> | <b>15D</b> | <b>009</b> | <b>Partial Subtotal Gastrectomy &amp; Ulcer</b> |  |  |
| <b>726</b> | <b>15D</b> | <b>010</b> | <b>Radiotherapy - Per sitting</b>               |  |  |

Minimum Exclusions

## EXCLUSIONS: (IPD &amp; DAY CARE PROCEDURES)

The Company shall not be liable to make any payment under this policy in respect of any expenses whatsoever incurred by any Insured Person in connection with or in respect of:

- 1) Conditions that do not require hospitalization : **Condition that do not require hospitalization and can be treated under Out Patient Care. Out patient Diagnostic, Medical and Surgical procedures or treatments unless necessary for treatment of a disease covered under day care procedures will not be covered.**

**Further expenses incurred at Hospital or Nursing Home primarily for evaluation / diagnostic purposes only during the hospitalized period and expenses on vitamins and tonics etc unless forming part of treatment for injury or disease as certified by the attending physician.**

**Any dental treatment or surgery which is corrective, cosmetic or of aesthetic procedure, filling of cavity, root canal including wear and tear etc. unless arising from disease or injury and which requires hospitalisation for treatment.**

- 2) Congenital external diseases : **Congenital external diseases or defects or anomalies, Convalescence, general debility, "run down" condition or rest cure.**
- 3) Drug and Alcohol Induced illness : **Diseases / accident due to and or use, misuse or abuse of drugs / alcohol or use of intoxicating substances or such abuse or addiction etc.**
- 4) Sterilization and Fertility related procedures : **Sterility, any fertility, sub-fertility or assisted conception procedure. Hormone replacement therapy, Sex change or treatment which results from or is in any way related to sex change.**
- 5) Vaccination : **Vaccination, inoculation or change of life or cosmetic or of aesthetic treatment of any description, plastic surgery other than as may be necessitated due to an accident or as a part of any illness. Circumcision (unless necessary for treatment of a disease not excluded hereunder or as may be necessitated due to any accident),**
- 6) War, Nuclear invasion : **Injury or disease directly or indirectly caused by or arising from or attributable to War, Invasion, Act of**

**Foreign Enemy, War like operations (whether war be declared or not) or by nuclear weapons / materials.**

- 7) **Suicide : Intentional self-injury/suicide, all psychiatric and psychosomatic and related disorders**
- 8) **Naturopathy, Homeopathy, Unani, Siddha, Ayurveda: Naturopathy, Homeopathy, Unani, Siddha, Ayurveda treatment, unproven procedure or treatment, experimental or alternative medicine including acupressure, acupuncture, magnetic and such other therapies etc. Any treatment received in convalescent home, convalescent hospital, health hydro, nature care clinic or similar establishments.**

**EXCLUSIONS UNDER MATERNITY BENEFIT CLAUSE:**

The Company shall not be liable to make any payment under this policy in respect of any expenses whatsoever incurred by any Insured Person in connection with or in respect of:

- a. **Expenses incurred in connection with voluntary medical termination of pregnancy are not covered except induced by accident or other medical emergency to save the life of mother.**
- b. **Normal hospitalisation period is less than 48 hours from the time of delivery/ operations associated therewith for this benefit.**
- c. **Pre-natal expenses under this benefit; however treatment in respect of any complications requiring hospitalisation prior to delivery can be taken care under medical procedures.**

GUIDELINES FOR SMART CARD

## 1. Introduction :

**The Ministry of Labour and Employment has launched a smart card based Health Insurance scheme, 'Rashtriya Swasthya Bima Yojana' (RSBY) for approved beneficiaries in the unorganized sector. These guidelines give in brief the technical specifications of the smart card, devices & infrastructure to be used under this project. The standardization is intended to serve as a reference, providing state government agencies with guidance for implementing an interoperable smart card based cashless health insurance programme.**

**It is the Ministry's mandate and intention to operate this scheme under the PPP model thus ensuring that the best of health facilities can be provided to the approved beneficiaries of the country without causing any inconvenience to them and at a very reasonable cost for the government. While the services are envisaged by various agencies, the ownership of the Project and thereby that of complete data – whether captured or generated as well as that of Smart Cards lies with Karnataka Building and Other Construction Workers' Welfare Board, Bangalore.**

**In creating a common health insurance card across India, the goals of the smart health insurance card program are to:**

- **Allow verifiable & non repudiable identification of the health insurance beneficiary at point of transaction.**
- **Validation of available insurance cover at point of transaction without any documents**
- **Support multi vendor scenario for the scheme**
- **Allow usage of the health insurance card across states and insurance providers**
- **Develop smart card interoperability across all states in India**
- **Establish a set of mandatory requirements with optional value-added services**
- **Build in the capability to add multiple applications and migrate to advanced open platform technologies.**

## 2. Smart card :

### 2.1. Overview

**A smart card is a credit card-sized device that contains one or more integrated circuits (ICs) and also may employ one or a combination of the following machine-readable technologies in addition to the Chip - contact less radio frequency antenna, biometric information, encryption and authentication or photo identification may also be used/ added to the card depending on requirements.**

**The integrated circuit chip (ICC) embedded in the smart card can act as a microcontroller or computer. Data are stored in the chip's memory and can be accessed to complete various processing applications. The memory also contains the microcontroller chip operating system (COS), communications software, and can also contain encryption algorithms to make the application software and data unreadable & secure from tampering. When used in conjunction with the appropriate applications, smart cards can provide enhanced security and the ability to record, store, and update data.**

### 2.2. System Components

- a) Beneficiary enrolment**
- b) Smart Cards**
- c) Smart Card Devices**
- d) IT Backend**
- e) MIS**
- f) Helpline & Call centre**

## 3. Roles of Insurance Company in respect to Smart Card services.

**The insurance company would supply cards in conformity to following Specifications:**

- Supply & operation of Beneficiary Enrolment stations at the villages as specified in this document.**
- Personalization & Issuance of Smart Cards immediately after enrolment at site.**
- Despatch of Beneficiary Details to the Backed Server after issuance of cards within two days from enrolment.**

- **Ensure security of data against loss and leakage. It is expected that daily data backup would be taken. In case of Data loss in transit, it is the Insurer's responsibility to ensure reissuance of cards.**
- **Provide training to Beneficiaries on usage & features of Smart Cards at the time of enrolment.**
- **Provide training to Health service providers, Board staff & other Non Government organizations as required on Features of the Smart Card based system & Usage of Devices.**
- **Supply & Maintenance of Smart card Devices as per specifications given.**
- **Provide easily understandable User Guides & Manuals in Vernacular, English & Pictorial format with simple troubleshooting tips with every beneficiary.**
- **Provide a facility for Modification and Reissuance of Cards at the district level in case of**
  - a. Lost or damaged card**
  - b. Splitting of cards (2 cards for the family)**
  - c. Death of a family member**

**Note : Detailed plan for Maintenance of devices and Helpline should be submitted along with other tender documents.**

#### **4. Process**

##### **4.1. Pre Enrolment requirements**

- 4.1.1. Insurer shall collect the beneficiary data from the District Labour offices.**
- 4.1.2. The Insurer should make the complete data for the District available at the District server. The URN number as per specifications should be generated at this point to ensure uniqueness.**
- 4.1.3. Enrollment kits should be configured with data for the relevant villages/area as per the roster along with the master data required.**
- 4.1.4. Smart card service provider shall ensure availability of sufficient Enrolment stations and personal to man them as per the defined roster.**
- 4.1.5. The enrolment stations should be equipped with devices as per specifications below. The stations should also be equipped with the applications as per enrolment & personalization laid down by MOLE Ministry of Labour and employment, Government of India.**

**4.1.6. Smart card service provider shall together with the Insurer Company provide a roaster for enrolment camps at the defined locations.**

#### **4.2. Beneficiary Enrollment**

**4.2.1. The Personalization application should work only in presence of Field Key Officer card of the Board official.**

**4.2.2. The Insurer & Board shall carry out a campaign for spreading awareness about the enrolment activity in the defined locations to ensure availability of maximum number beneficiaries.**

**4.2.3. Age & gender of the head of the family would be checked and modified if required**

**4.2.4. Photograph of the Head of the family and the complete family is taken and two fingerprints of each of the family members to be enrolled are captured.**

#### **4.3. Personalization & Issuance of Smart cards**

**4.3.1. Based on the data received & collected, Card would be personalized, keys inserted and Card printed physically on site after completion of Beneficiary enrolment.**

**4.3.2. The card would be handed over to the beneficiary by the Insurance Representative along with a booklet providing**

- **Key features of the scheme**
- **Helpline numbers**
- **Cost in case of reissuance of card**
- **Details of Network Health service providers within the district & outside the service area**
- **All other details required for smooth usage of card**

**4.3.3. At the end of each day or completion of Enrollment & Personalization at a single location, whichever is earlier, the data so collected and generated would be transmitted to the central server. This data must reach the server within the time span defined. Data on the enrolment machine would be purged only after successful import message is received from the server.**

#### **4.4. Supply and maintenance of Smart Card Devices**

- 4.4.1. The Devices for Read & Update of Smart cards at the hospitals and district kiosk (as per specifications provided) would be procured and installed by the Insurance Company who would also be responsible for the maintenance of these devices. However, the payment for the devices at the hospitals would be hospitals that would be the owners of the devices.**
- 4.4.2. Before such installation, the Insurer company would arrange for the training on usage & troubleshooting of these devices.**
- 4.4.3. The Hospitals would also be equipped with the certified RSBYPlus Transaction application, procured by the Insurance Company. The Insurance Company should confirm that.**
- 4.4.3.1. The RSBYPlus Transaction application is as per specifications released by MOLE and certified by the competent authority as defined by MOLE.**
- 4.4.4. The Insurer shall arrange to ensure a service network in the designated areas such that the uptime agreed upon for the devices is maintained and the dispersal of Health insurance to beneficiaries is not jeopardized due to non-functioning of devices.**
- 4.4.5. The Insurer shall also arrange to set up a help line/call centre to address the queries/problems/requests of users of the devices.**

#### **4.5. Re-issuance of Lost Card**

- 4.5.1. In case a Card is reported as lost through any of the channels prescribed by the smart Card vendor/ Insurer, it should be marked as Hot Listed in the backend (Local and Central Server). The details (URD) of all Hot Listed cards must be transmitted to the connecting Devices at the next communication.**
- 4.5.2. The devices should not accept any Hot Listed cards and a Warning message flashed in case such a card comes in for transacting.**
- 4.5.3. The beneficiary will go to the District kiosk for Reissuance of Card.**
- 4.5.4. The existing data including Text details, images & transaction details shall be pulled up from the server. Based on these details a fresh card will be immediately issued to the Beneficiary family.**

- 4.5.5. The cost of the Smart Card would be paid by the beneficiary at the kiosk, as prescribed by the nodal agency in the contract.**

#### **4.6. Card Splitting**

**In case the Beneficiary wishes to split the insurance amount available between two cards to help avail the facilities at two diverse locations.**

- 4.6.1. The beneficiary will go to the District kiosk splitting of Card. The existing data including Text details, images & transaction details shall be pulled up from the server.**
- 4.6.2. The fingerprints of the head of the family shall be verified against those available in card.**
- 4.6.3. The splitting ratio should be confirmed from the beneficiary.**
- 4.6.4. The cost of the additional Smart Card would be paid by the beneficiary at the kiosk, as prescribed by Board at the time of contract.**
- 4.6.5. Based on these details a fresh card will be immediately issued to the Beneficiary family and the existing card modified. Both cards would have details of all family members.**
- 4.6.6. Fresh and modified data shall be uploaded to the Central Server as well.**

#### **4.7. Card Modification**

- 4.7.1. Card modification can only be done at the District kiosk of the same District where the original card was issued.**
- 4.7.2. In case a split card was issued in the interim, both the cards would be required at time of modification.**
- 4.7.3. Card modification during the year can only happen under the following circumstances.**
  - 4.7.3.1. Only the head of the family was present at the time of enrolment and other family members need to be enrolled to the card.**
  - 4.7.3.2. In case of death of any person enrolled on the card, another family member from the registered beneficiary to be added to the card.**
- 4.7.4. It is to be ensured that only registered beneficiaries list provided by the Board are enrolled on the card. As in the**

**case of enrolment, no modifications except to age and gender may be done.**

**4.7.5. A new photograph of the family shall be taken**

**4.7.6. Fingerprint of additional members shall be captured.**

**4.7.7. Data of family members updated on chip of card.**

**4.7.8. The existing details shall be modified in the database (Local and Central Server) and the Chip of the Card.**

#### **4.8. Key Management system (KMS)**

**The Smart Card system shall function under a central Key Management system (KMS) to be implemented by the Board for the data and card security. The KMS shall provide the following security features:**

- To prevent generation & issuance of fake Health Cards, by providing mechanisms to verify authentic cards.**
- To protect on –card data against illegal tampering.**
- To enable performance of post issuance card transactions at various locations by authorized agencies only.**

### **5. Enrollment Station**

**The enrolment stations due to the nature of work involved need to be mobile and work under rural & rugged terrain. This should be of prime consideration while selecting the hardware matching the specifications given below.**

**Insurer should ensure compatibility of Smart cards and hardware devices with application**

- § Computer With Power backup for at least 8 hours**
- § Optical Biometric Scanner for Fingerprint capture**
- § VGA Camera for Photograph capture**
- § 2 PCSC complaint Smart Card readers**
- § Smart Card Printer**
- § Data Backup facility**
- § Licensed System Software**
- § Certified Enrollment & Personalization Software as per specifications provided by MOLE.**

#### **5.1. Minimum Specifications for hardware**

##### **5.1.1 Computer**

§ Capable of supporting all devices as mentioned above

#### **5.1.2 Biometric Scanner**

- § 5v DC 500mA(Supplied via USB port)
- § Operating temperature range: 0c to 40c
- § Operating humidity range: 10% to 80%
- § Compliance: FCC Homer or Office Use, CE and C- Tick
- § 500 dpi optical fingerprint scanner (22x24mm)
- § USB 1.1 Interface
- § Drivers for the device should be available on Windows or Linux platform
- § High quality computer based fingerprint capture (enrollment)
- § Preferably have a proven capability to capture good quality fingerprints in the Indian Rural environment
- § Capable of converting fingerprint image to RBI approved ISO 19794 template.

#### **5.1.3. Camera**

- Sensor: High quality VGA
- Still Image Capture: up to 1.3 mega pixels (software enhanced) native resolution is 640x480
- Automatic adjustment for low light conditions

#### **5.1.4. Smart Card Reader**

- PCSC and ISO 7816 complaint
- Read and write all microprocessor cards with T=0 and T=1 protocols
- USB 2.0 full speed interface to PC with simple command structure

#### **5.1.5. Smart Card printer**

- Supports Colour dye sublimation and monochrome thermal transfer
- Edge to edge printing standard
- Integrated ribbon saver for monochrome printing
- Prints at least 150 cards/hour in full colour and up to 1000 cards an hour in monochrome
- Minimum Printing resolution of 300dpi

- **Compatible with Windows/Linux**
- **Automatic or manual feeder for Card Loading**
- **Compatible to Microprocessor chip personalization**

## 6. Smart Cards

### 6.1 Specifications for Smart Cards

**Card Operating System Shall comply to SCOSTA Standards ver.1.2b with latest addendum and errata. (refer web site <http://scosta.gov.in>) Health service providers. The Smart Cards to be used must have the valid SCOSTA Compliance Certificate from National Informatics Center, New Delhi (refer <http://scosta.gov.in>) Exact Smart card specifications are listed as below.**

#### 6.1.1. SCOSTA Card

- **Microprocessor based Integrated Circuit(s) card with Contacts, with minimum 32 Kbytes available EEPROM for application data.**
- **Complaint to SCOSTA 1.2b Dt.15 March 2002 with Latest addendum and errata**
- **Supply Voltage 3V nominal**
- **Communication Protocol T= 0 or T=1.**
- **Data Retention Minimum 10 years.**
- **Write cycles minimum 100000 numbers.**
- **Operating Temperature Range -25 to +55 Degree Celsius.**
- **Plastic Construction PVC or Composite with ABS with PVS overlay.**
- **Surface – Glossy.**

#### 6.1.2 Card layout

**Card layout would be as prescribed by MOLE.**

### 6.2. Card holder authentication

- **The cardholder would be authenticated based on their finger impression at the time of verification at the various centre's where the card would be accepted.**
- **The authentication is 1:1 i.e. the fingerprint captured live of the member is compared with the one stored in the smart card.**

### 6.3. Generation of Unique Relationship Number:

**A 17 digit Unique relation Number (URN) would be issued to all customers across India. The following parameters would be considered for generating the unique RN**

- |              |  |
|--------------|--|
| <b>1-5</b>   | <b>- Serial no.</b>                                |
| <b>6-7</b>   | <b>- Year of birth</b>                             |
| <b>8</b>     | <b>- Gender</b>                                    |
| <b>9-10</b>  | <b>- State</b>                                     |
| <b>11-16</b> | <b>- Location (Village code/Municipality Code)</b> |
| <b>17</b>    | <b>- Check Digit</b>                               |

**The guidelines with regard to generation of URN number as well as those relating to Card Mapping / Application, Application & Data Management and Key Management which are required for interoperability of cards PAN India will be issued separately.**

### 7. Standalone Smart Card Device (Non-PC based)

**These devices are standalone devices capable of reading & updating Smart cards based on the programmed business logic and verifying Live Fingerprints against those stored on a smart card. These devices do not required a computer for transacting.**

**The devices would be loaded with certified software as per specifications provided by the Ministry of Labour, Government of India.**

**The main features of these devices are:**

- **Reading and updating Microprocessor Smart Cards as specified for RSBY Plus**
- **Fingerprint verification as per specifications**
- **They should be programmable with inbuilt security features to secure against tampering.**
- **Memory for Data storage**
- **Capable of printing receipts without any external interface**
- **Capable of data transfer to Personal computers/server or over phone line/GPRS/CDMA/Broadband/LAN**
- **Rechargeable Batteries for portable devices and main power source for desktop device.**

### 7.1. Specifications

- **A minimum internal memory of 4 Mb**
- **At least 1 Full size smart card reader**
- **At least 1 SAM slot**
- **Back-lit graphic display**
- **Numeric Keypad with at least Function keys for Accept, Clear, Cancel and Navigation keys.**
- **Inbuilt Printer**
- **Optical biometric Verification capability. Verification time less than 10 secs, Allowing 1:1 verification in the biometric module.**
- **Optional buzzer**
- **Rechargeable Batteries with fully charged standby time of at least 200 hrs, (for portable devices), possible to make 100-150 transactions**
- **Ports required: 1 RS232, Telephone, Optional USB port, SIM Slot if GPRS enabled**
- **Inbuilt Modem**

## 8. PC based Smart Card Device

**In cases where Computers are available at the health Service Providers, additional devices would be attached to the existing PC. The computer would be loaded with the centrally prepared software for transactions and data transmission. The devices required for the system would be**

### 8.1. Optical biometric scanner for fingerprint verification

- **Thin optical sensor**
- **500 dpi @ 8bit per pixel**
- **Active area: 13mm x 20mm**
- **Interface: USB 1.1. and 2.0**
- **Operating temperature: -10°C to +50°C**
- **1:1 verification**
- **Verification time < 0.8s**
- **Identification time <1s**
- **Tuneable false acceptance rate**

### 8.2. Smart card readers

**2 Smart card readers would be required for each device, One each for Service Provider and beneficiary card, in case of split**

**card, a 3<sup>rd</sup> smart card reader should be used to ensure simultaneous updation of primary and add-on card.**

- **PCSC and ISO 7816 compliant**
- **Read and write all microprocessor cards with T=0 and T=1 protocols.**
- **USB 2.0 full speed interface to PC with simple command structure**

### **8.3. Receipt Printer**

## **9. Software for Issuing Smart Cards and usage of Smart Card Service :**

**The following software are envisaged for use in the RSBYP system**

### **9.1 District server application**

#### **9.1.1.1. For generation of URN**

#### **9.1.1.2. Configuration of Enrollment stations**

#### **9.1.1.3. Collation of Transaction data and transmission to State nodal agency as well as other Insurance companies**

### **9.2. Beneficiary enrolment**

### **9.3. Card Personalisation & Issuance**

### **9.4. Post Issuance modification to card**

### **9.5. Transaction system**

**It is the Insurer's responsibility to ensure in-time availability of these softwares. All these softwares must conform to the specifications laid down by MoLE. Any modifications to the software for ease of use by the Insurance Company can be made only after confirmation from MOLE. All software would have to be certified by competent authority as defined by MOLE.**

PART – IV

FINANCIAL BID

## PART – IV

FINANCIAL BID

**Financial costs including administrative expenses, overheads, and service charges, including smart card, that the insurance company expects for rendering the services should be a part of the premium.**

**Premium quote for a sum insured of Rs.50,000 per family (up to unit of 5) on floater basis:**

| Sl.<br>No. | PREMIUM PER FAMILY<br>WITHOUT S.T. | PREMIUM PER FAMILY<br>WITH S.T. |
|------------|------------------------------------|---------------------------------|
| <b>1</b>   | <b>Rs.</b>                         | <b>Rs.</b>                      |
| <b>2</b>   |                                    |                                 |
| <b>3</b>   |                                    |                                 |
| <b>4</b>   |                                    |                                 |
| <b>5</b>   |                                    |                                 |
| <b>6</b>   |                                    |                                 |
| <b>7</b>   |                                    |                                 |
| <b>8</b>   |                                    |                                 |
| <b>9</b>   |                                    |                                 |
| <b>10</b>  |                                    |                                 |