BPL/H/EOI/Dialysis

(EOI)

EXPRESSION OF INTEREST

Chief Medical Suprintendent, West Central Railway Bhopal on behalf of the president of India invites (EOI) EXPRESSION OF INTEREST from Stand alone Centres/Hospital for providing Dialysis Treatment to patients of the Divisional Railway Hospital/Bhopal WC.Rly .for a period of 02 years.

The interested Centre/Hospital may download the details from the website of https://wcr.indianrailways.gov.in For further queries contact office of Chief Med.Supdt.Divisional Rly Hospital Nishatpura Bhopal Telephone No.-7701092522

Time Line

- 1 Issue of (EOI) EXPRESSION OF INTEREST.-10.06.2024
- 2 Venue -CMS office Railway Hospital Nishatpura Bhopal
- 3 Last Date of submission of proposal- 28.06.2024 time-13.00 hrs
- 4 Date of Opening of the proposal-28.06.2024 time-15.30 hrs

Anglitory CMS/BPL

Terms & Condition

- 1. The rates to be charged should be as per CGHS or Lower rates in case CGHS rate is not available then AIIMS rate or any other government hospital rate shall be applicable. In case no government rate is available then reasonable rate as per mutual agreement between Railway and the centre shall be payable...
- 2. Dialysis centres /hospitals should provide facilities of investigations round the clock.
- 3. Dialysis centres/hospitals who apply for in response to this EOI will be empanelled after scrutiny.
- 4. Recognition will be for a period of Two Years.
- 5. Procedure for recognition will be as per existing railway board guidelines.
- 6. Railway beneficiaries will be referred to empanelled centre with proper referral letter . No payment will be charged from them.
- 7. Dialysis centres /hospitals that are recommended for empanelment shall also have to furnish a Performance Bank Guarantee valid for a period of 30 months i.e 06 months beyond empanelment period. deposit-Rs. Two Lakhs. 2,00,000.00/-
- 8. Empanelment Dialysis centres /hospitals will be required to provide bank detail for necessary transfer of bill amount electronically to the account.
- 9. Documents to be enclosed with EOI-
 - A. Registration with appropriate authority.
 - B.NABL/NON-NABL accreditation certificate.
- 10. Chief Medical Superintendent, Divisional Railway Hospital, Bhopal, reserves the right to accept / reject any application/ to reject all the application at anytime, without assigning any reason.
- 11. Monitoring and medical audit- Chief Medical Superintendent, Divisional Railway hospital Bhopal, reserves the right to visit the Centre/hospital at any time to ascertain their compliance with the requirement of Railway.
- 12. If any empanelled Dialysis centres /hospitals is found involved in any wrong doing or over charging etc, then the concerned Lab would be Suspended/ removed from Railway panel and would be black listed for specified period for future empanelment with Railway.
- 13. Exit from the panel.-The rates fixed by the CGHS shall continue to hold good unless revised by CGHS. In case the notified rates are not acceptable to the CGHS empanelled Dialysis centres /hospitals or for any other reason, the Lab no longer wishes to continue on the list under Railway it can apply for excusion from the Panel by giving one month notice.
- 14. Empanelled Dialysis centres /hospitals should notify one nodal officer/executive for Railway beneficiaries, who can be contacted by Railway administration in case of any requirement.
- 15. Kindly respond by given date and submit your offer on the following address CMS Office Divisional. Railway Hospital Nishatpura Bhopal Pincode-462010.
- 16. List of CGHS rates for Bhopal is enclosed.

Eligibility criteria-



A-Dialysis centres /hospitals should have minimum experience of five years in the field of handling similar works of government, departments/semi-government/private.

B- Should have all valid registration documents for compliance to all Statutory requirements ie registration with appropriate authority.

C- The Dialysis centres /hospitals should have its full fledged own unit

D- An onsite inspection may be under taken by the evaluation committee of divisional railway hospital before empanelment.

ACMS/BPL



Application for empanelment of Dialysis centres /hospitals for the patient of Divisional Railway Hospital BHOPAL/West Centre Railway.
1.Name of the Dialysis centres /hospitals -
Address
Telephone Number
Email ID
Name with details of nodal person for contact—
2.Experience of working in the MOU Format in Govt/Semi-govt./Private (Attach Details) -
3.We agree to provide services at CGHS- NABL/Non-NABL Rates as applicable to Bhopal 2023 -24
4.Whether CGHS Empanelled yes/no
5.Whether NABH/Non-NABL accredited [yes/no]
6.Whether NABL/Non-NABL accreditation and validity period
7.List of test available
[A] Qualified Nephrologist
B] Qualified Technician
C] Total No.of Dialysis unit
D] No.of Dialysis unit for infected patients
E] Round the clock services
F]Indoor facilities
G]Free Ambulance services yes/no
H] I V Fistula at CGHS RATES
I]List of staff
J]Anyother
8.We agree to provide services on bill system of payment
9.Our centre has been recognized for Dialysis by the following Govt. organization/Semi-Govt. Organization/Private Organization
10.We agree to on-site inspection for evaluation before empanelment.
11.All documents are to be signed and signed and stamped by the authorized on all pages.
We hope our organization will be considered for tie-up with Divisional Railway Hospital Bhopal W.C.Rly. for providing services to the railway beneficiaries.
Signature/ Authorized signatory
(Name)
Address Phone no.
Phone no. E mail ID

Seal/Stamp.....

CERTFICATE OF UNDERTAKING

- 1.It is certified that the particulars given in offer letter are correct & minimum eligibility criteria are satisfied.
- 2. That the Dialysis centres /hospitals shall not charge higher than the CGHS notified rates or the rates agreed to.
- 3. That any information is found to be untrue, Dialysis centres /hospitals would be liable for de-recognition by Railway. The lab will be liable to pay compensation for any financial loss caused to Railway, physical and or mental injuries caused to its beneficiaries.
- 4. That the Dialysis centres /hospitals has the capability to submit bills and medical records both in soft and hard format.
- 5. That no investigation by central GOVT/state GOVT or any statuary investigating agency is pending or contemplated against the LAB.
- 6. Agree for the terms & conditions prescribed in the application document.

(SIGNATURE OF APPLICANT OR AUTHORISED AGENT WITH SEAL)

Copies of following documents (wherever applicable) are to be submitted along with application.

- 1.Copy of legal status, place of registration & principal place of business of the Dialysis centres /hospitals .
- 2.A copy of partnership deed /memorandum and articles of association if any.
- 3.Copy of CGHS Empanelment NABH/NON-NABH.
- 4.List of investigation facilities available with the Centre.
- 5.Copy of compliance with statutory requirements including that of waste management.

(SIGNATURE OF APPLICANT OR AUTHORISED AGENT WITH SEAL)