

आर्मर्ड व्हीकल्स निगम लिमिटेड  
भारत सरकार का उद्यम  
रक्षा मंत्रालय



ARMOURED VEHICLES NIGAM LIMITED  
A GOVT. OF INDIA ENTERPRISE  
MINISTRY OF DEFENCE

CIN-U35990TN2021GOI14550

## EMPANELMENT OF HOSPITALS FOR MEDICAL TREATMENT- CORPORATE TIE UP

**Armoured Vehicles Nigam Limited (AVANI) (AVNL)** is a new Defence PSU with its headquarters at Avadi (Chennai). It has five (05) constituent production units and has around 12,000 employees. AVNL produces battle tanks i.e., T-72, T-90, MBT Arjun and Infantry Combat Vehicles, Support Vehicles (MPV, AERV etc.) and Defence mobility solutions (Stallion, LPTA etc.) for the armed forces and homeland security agencies. It is the current market leader in this segment. It is a new Government Company with Great Future.

AVNL Corporate Office is inviting the Expression of Interest for treatment of AVNL and its Units beneficiaries and their dependents from Multi-Speciality, Super-Speciality and Single Speciality Hospitals, Diagnostic Centres ready to empanel with AVNL Units situated over jurisdiction of AVNL Units/Corporate in AVADI, Chennai, Hyderabad, Secunderabad, Jabalpur, Nagpur, Bhopal, New Delhi and Mumbai.

The following category of Health Care Organizations/Diagnostics Centres situated in the above mentioned cities may download the below documents from the AVNL Website and submit duly filling all the documents with enclosure to address given in the website copy as well as soft copy (by e-mail):

### **Hospitals:**

- i) Multi-Speciality, Super-Speciality and Single Speciality Hospitals recognized/empanelled by CGHS/ECHS/ESI.
- ii) Non CGHS Multi-Speciality, Super- Speciality and Single Speciality Hospitals ready to provide services at CGHS rates.
- iii) Non CGHS Multi-Speciality, Super- Speciality and Single-Speciality Hospitals with their own rates, can extend services to AVNL on negotiated rates.

### **Diagnostic Centres:**

- i) Diagnostic Centre recognized and approved by State Government
- ii) Diagnostic Centre, approved by Public Sector Insurance Companies
- iii) Diagnostic Centre, empanelled by Public Sector Enterprises

**Note:** However Preference will be given to NABH/NABL accredited hospitals/Labs.

Please visit our website [www.avnl.co.in](http://www.avnl.co.in) for prescribed format of Application Forms (Section I & II) for Medical procedures, Day care procedures, Agreement Format and additional Terms and Conditions for Corporate tie up for Empanelment with AVNL Units.

**Last date of receipt of application 25/04/2026**

**Date : 09/04/2026**

HR Division, AVNL CO  
Email: [hr@avnl.co.in](mailto:hr@avnl.co.in)  
Tele: 044- 26843341

**Section-I**

**PRESCRIBED FORMAT OF APPLICATION FOR**

**EXPRESSION OF INTEREST (EOI) FOR MEMORANDUM OF UNDERSTANDING (MOU) OF AVNL WITH CGHS, ECHS & ESI EMPANELLED HOSPITALS/DIAGNOSTIC CENTRES FOR EMPANELMENT AT CGHS RATES / NEGOTIATED RATES IN THE JURISDICTION AVNL UNITS AT AVADI, MEDAK, JABALPUR, NEWDELHI AND AMBERNATH**

\*\*\*\*\*

1. NAME OF THE HOSPITAL / DIAGNOSTIC CENTRE WITH ADDRESS/ TELEPHONE NUMBER/ E-MAIL ID  
-----  
-----  
-----
  
2. EXPERIENCE OF WORKING IN THE MOU FORMAT IN GOVERNMENT SECTOR/CPSEs/PRIVATE SECTOR (ATTACH DETAILS)  
-----  
-----  
-----
  
3. WE AGREE TO PROVIDE THE SERVICES TO THE AVNL BENEFICIARIES IN FOLLOWING DISCIPLINES (i.e. As per Annexure-A)  
-----  
-----  
-----
  
4. FOR THOSE SERVICES/INVESTIGATIONS/TREATMENT MODALITIES, WHICH ARE NOT LISTED IN THE CGHS RATE, OUR HOSPITAL WILL PROVIDE THE SERVICES ON HOSPITAL RATES WITH % DISCOUNT, LIST OF WHICH IS ENCLOSED.  
-----  
-----  
-----
  
5. WE ALSO AGREE TO PROVIDE MEDICAL SERVICES ON BILL SYSTEM OF PAYMENT  
-----  
-----  
-----
  
6. OUR HOSPITAL OFFERS TO PROVIDE FREE AMBULANCE SERVICES FOR ALL REFERRAL PATIENTS.  
-----  
-----  
-----

7. WE HEREBY ENCLOSE A LIST OF THE FACILITIES WHICH ARE AVAILABLE WITH OUR HOSPITAL AS PER ANNEXURE \_\_\_\_\_  
-----  
-----  
-----
8. WE ENCLOSE THE HUMAN RESOURCES/SPECIALIZATIONS WHICH ARE AVAILABLE. THE INFRASTRUCTURAL FACILITIES OF OUR HOSPITAL IS ENCLOSED AS PER ANNEXURE \_\_\_\_\_  
-----  
-----  
-----
9. WE ENCLOSE COMPLETE TARIFF CHART OF OUR HOSPITAL COMPARING WITH CGHS RATE AS PER ANNEXURE-  
-----  
-----  
-----
10. OUR HOSPITAL HAS BEEN RECOGNIZED FOR TREATMENT OF THE FOLLOWING GOVERNMENT ORGANIZATIONS/SEMI-GOVERNMENT ORGANIZATION/ PRIVATE ORGANIZATION AS PER ANNEXURE \_\_\_\_\_  
-----  
-----  
-----
10. (A) THE SPECIALITY RECOGNIZED BY CGHS/ECHS/ESI HOSPITALS TO BE DECLARED AND A COPY OF MOU WITH CGHS/ECHS/ESI (IF ALL RECOGNIZED, ALL MOUs TO BE ENCLOSED.)/READY TO EMPANEL WITH CGHS RATES/HOSPITALS OWN RATES CAN EXTEND SERVICES ON NEGOTIATED RATES/DIAGNOSTIC CENTRES.  
-----  
-----  
-----
10. (B) THE LIST OF SPECIALITIES AVAILABLE, BUT NOT RECOGNIZED BY CGHS/ECHS/ESI, IS TO BE ENCLOSED.  
-----  
-----  
-----
11. WE HOPE OUR ORGANIZATION WILL BE CONSIDERED FOR MOU IN AVADI (CHENNAI), MEDAK (HYDERABAD & SECUNDERABAD), VFJ (JABALPUR), AMBERNATH (THANE & MUMBAI), NEW DELHI FOR PROVIDING SERVICES TO THE AVNL BENEFICIARIES.  
-----  
-----  
-----

12. WE AGREE TO A PERFORMANCE BANK GUARANTEE OF 10 LAKHS (RUPEES TEN LAKHS) IN CASE OF MULTI-SPECIALITY/ CANCER HOSPITALS & Rs. 2 LAKHS (RUPEES TWO LAKHS) IN CASE OF SINGLE-SPECIALITY HOSPITALS, EYE CENTRES, DENTAL CLINICS, DIAGNOSTIC CENTRES, VALID FOR A PERIOD OF 30 MONTHS i.e., SIX MONTHS BEYOND EMPANELMENT PERIOD AND ENSURE EFFICIENT SERVICE AND TO SAFEGUARD AGAINST ANY DEFAULT. (PBG FOR CHARITABLE ORGANIZATION WOULD BE 50% OF ABOVE AMOUNT.)

-----  
-----  
-----

13. WE AGREE TO ALL THE CONDITIONS MENTIONED IN THE DRAFT MOU at Annexure "B" and ADDITIONAL CONDITIONS at Annexure "C", IN THIS E.O.I

All documents are to be signed and stamped by the Authorized Signatory on all pages.

Signature\_\_\_\_\_

Authorized Signatory\_\_\_\_\_

Address\_\_\_\_\_

\_\_\_\_\_

Phone no.\_\_\_\_\_

E-mail ID.\_\_\_\_\_

SEAL STAMP\_\_\_\_\_



**PART II: BACK GROUND INFORMATION**

S NO.	Subject	Information given by Hospital	Remarks of QCI(NABH)
1.	Historical Background		
a)	Date of Establishment		
b)	Registered/Not Registered* (with State Health Authorities)		
c)	Type-Govt/Private/Corporate		
d)	Management Individual/Corporate/Trust or any other – please specify)		
e)	Recognition by other schemes- ECHS & ESI Schemes* - indicate which schemes are you linked		
2.	Total number of Beds		
3.	Nursing Care:-		
a)	Total number of Nurses		
b)	No. of para- medical staff		
4.	No. of In-house Doctors		
a)	No. of In house Specialist/Consultant		
b)	No. of visiting Specialist/Consultant (Names and qualifications) Attach separate sheet if necessary		
5.	Laboratory facilities available		
a)	Pathology		
b)	Biochemistry		
c)	Microbiology		
6.	Supportive Services:-		
a)	Boilers/Sterilizers		
b)	Ambulance (Basic Life Support System Ambulances)		
c)	Laundry		
d)	Housekeeping		
e)	Canteen		
f)	Gas Plant		
g)	Waste disposal system as per prescribed rules		
(h)	Dietary		
7.	Others (Preferably):-		
a)	Blood Bank		
b)	Pharmacy		
c)	Physiotherapy		
d)	No of Operation Theatre		
	(i) General Surgery		
	(ii)Specialized procedures		

	<b>(The specialized features for special OTs e.g. Joint Replacement, Cardio thoracic &amp; Neurosurgery should be specified)</b>	
8	Equipment available	
	(i) Monitor defibrillators	
	(ii) Nebulizers	
	(iii) Infusion pumps	
	(iv) Pulse Oximeter	
	(v) Oxygen supply (define arrangement)	
	(vi) Suction apparatus	
	(vii) Ventilator	
	(viii) Other specify	
	INTENSIVE CARE UNIT- No.of beds type of TCH	
9.	Consultants	
a)	Total number of Consultants	
b)	Number of Consultants on Permanent Roll	
c)	Number of Visiting Consultants to facility	
	<b>(Attach list of the consultants and qualifications and experience detailing whether consultant is on permanent roll or visiting)</b>	
10.	MRI	Yes/No
11.	CT/SCAN	Yes/No
12.	CARDIOLOGY	Yes/No
13.	CARDIO-THORACIC SURGERY	Yes/No
14.	NEURO SURGERY	Yes/No
15.	JOINT REPLACEMENT SURGERY	Yes/No
16.	LAPROSCOPIC SURGERY	Yes/No
17.	LITHOTRIPSY/TURP, OTHER NEPHROLOGY/UROLOGY PROCEDURES	Yes/No
18.	RENAL TRANSPLANTATION, HAEMODIALYSIS	Yes/No
19.	LIVER TRANSPLANTATION	Yes/No
20.	RADIOTHERAPY	Yes/No
21.	CLINICAL PATH	Yes/No
22.	BIOCHEMISTRY	Yes/No
23.	MICRO BIOLOGY	Yes/No
24.	OTHER (SPECIFY)	Yes/No
25.	X-RAY	Yes/No
26.	ULTRASOUND/DOPPLER VASCULAR	Yes/No
27.	MAMMOGRAPHY	Yes/No
28.	BLOOD BANK	Yes/No
29.	PHARMACY	
	(a)	In house/Contract
	(b)	Medicines available in Hospital/procured from outside
	(c)	Billing System: Computerized/Manual

## **Dental Treatment as out -patient**

The Dental treatments as out-patient treatment shall be referred to identified Dental Hospitals as per the agreement with the Hospitals for the following procedures:

- a) Extraction of tooth
- b) Filling of tooth
- c) Extraction of wisdom tooth
- d) Scaling of tooth
- e) Scaling complete
- f) Flap excision
- g) Crown Capping
- h) Root Canal treatment anterior
- i) Root Canal treatment posterior
- j) Imaginary studies (OPG)
- k) Braces
- l) Dentures
- m) Dental Implants

## **Eye procedures as outpatient treatment**

### **Diagnostic Tests:**

#### **Eye:**

- a) Pachymetry
- b) Optical Coherence Tomography
- c) Angiography
- d) Electron Retinography
- e) Ultrasound

#### **ENT:**

- a) Pure tone Audiometry
- b) Impedance Audiometry
- c) Laryngoscopy
- d) Nasal endoscopy
- e) Biopsy
- f) BERA

### **Obstetrics and Gynecology:**

- a) Pap smear
- b) Colposcopy
- c) Amniocentesis
- d) Hystero-salpingography
- e) USG
- f) Dialation and Curettage
- g) Endometrial Curettage

**Cardiology:**

- a) ECG
- b) 2D Echo/3D Echo
- c) TMT (Stress Test)
- d) Stress Thallium Test
- e) Holter monitoring
- f) Myocardial perfusion scan
- g) Cardiac MRI

**Neurology:**

- a) CT Scan (Plain/Contrast/Contrast enhanced)
- b) MRI (Plain/Contrast)
- c) MRA
- d) EEG

**Pulmonology:**

- a) PFT
- b) Imaging Studies

**Gastroenterology:**

- a) Upper GI Endoscopy with RUT/Biopsy
- b) Colonoscopy
- c) Proctoscopy, BMS
- d) Barium meal studies
- e) IVP

**Others:**

- a) Full body PET Scan,
- b) FNAC, Biopsy
- c) Routine blood investigations including Tumor Markers,
- d) Serum dry loads
- e) Hormonal assays
- f) Infective profile(immunological)
- g) X-Ray of any part of the body
- h) Ultrasound
- i) Colour Doppler study both arterial and venous system
- j) Intravenous pyelography
- k) Mammography/Mammogram test

## **Day Care Procedures:**

Following is the list of diseases/procedures covered under day care procedures wherein stay in hospitals is not required for more than 24 hours.

- a) Injection of varicose veins/Chemotherapy/Phototherapy/Radiotherapy/Injections requiring/observations for more than 6 hrs.
- b) Biopsy (Small specimen & Big specimen (Internal))
- c) Colonoscopy
- d) Dilation and Curettage (D&C), Cervical Biopsy, Endometrial Curettage
- e) Multiple suturing
- f) Hemodialysis
- g) Excision of moles/warts/nails
- h) Wound debridement/removal of foreign body
- i) Bronchoscopy
- j) Excision biopsy/Removal of Lymph node, Ganglioma Fibrous Lipoma, Sebaceous Cyst, dermal cyst
- k) Removal of foreign body by endoscopy/gastroscopy/Colonoscopy/Barium studies
- l) AV Fistula
- m) Feeding, Jejunostomy/Colostomy
- n) CT Guided Biopsy
- o) Cystoscopy
- p) Stent Removal/Implant removal
- q) Circumcision
- r) Urethral dilatation/catherisation
- s) POP/Strapping
- t) Arthroscopy-diagnostic
- u) Radiotherapy-IMRT, IGRT, SRS, SRT/Chemotherapy/Phototherapy/Scelerotherapy
- v) USG guided Liver Aspiration/ peritoneal/Pleural Effusion/Pericardial Effusion
- w) MRI Angiography
- x) Diagnostic ERCP
- y) Vasectomy/Tubectomy
- z) Coronary/Renal Angiogram
- aa) Intra Articular injection
- bb) Sleep Test/Polysomnography
- cc) Injection of Chemotherapy
- dd) CT Angiogram

## **Note:**

The above list is only illustrative in nature. However, the list will be changed from time to time based on the procedures notified as declared by the Company Medical Officer.

## **Surgical Procedures:**

- a) Implants,
- b) Stents,
- c) Pacemakers,
- d) Mesh,

- e) Implantable Cardioverter Defibrillator(ICD)
- f) Specialized Instruments,
- g) Costly Medicines,
- h) Transplant procedures etc.

**Accommodation:**

Entitlement of accommodation in Hospital would be as under:

<b>Hospitals other than Super Speciality</b>	W-1 to W-SG	Shared Room
	E-0 to E-4	Single Room
	E-5 and above	AC Single Room
<b>Super Speciality Hospitals</b>	W-1 to W-4	General Ward
	W-5 to W-SG	Shared Room
	E-0 to E-2	Shared Room
	E-3 to E-4	Single Room
	E-5 and above	AC Single Room

j) Note: Stay at intensive Critical Care Unit (CCU) wards: As per requirement on advice of Treating Doctor.

**Promotive/Preventive health Care:**

The Health profile of all employees who have attained 40 years of age shall undergo bi annual Health check-up in January and July of every calendar year. The objective of initial evaluation is to detect and evaluate Causes, Contributory factors, Risk factors, Complications, Contraindications to drugs etc. Careful history, clinical examination and required investigations can usually achieve these goals.

The following general investigations have to be conducted for the employees during promotive/preventive health check up to know the health profile of each employee for curative medical treatment if need be. Points to be covered in and Investigations to be performed etc should be clearly defined for each disease during the medical examination for preventive/Curative Health care.

- a) Medical History of the employee
- b) Physical examination
- c) Diabetes Mellitus
- d) FBS, PPBS & HBA1C
- e) Lipid Profile
- f) Serum Creatinine
- g) Blood Urea
- h) Liver Function Tests
- i) Urine analysis: Albumin, Sugar, ME
- j) Hb
- k) ECG/2 D Echo/TMT etc on as required basis
- l) Opthal/Skin/CNS/CVS/Respiratory tests/ENT on as required basis
- m) Any other tests as prescribed/required during biannual medical examination

These tests are only illustrative and not exhaustive. However, other diagnostic tests can also be suggested and carried out based on the health profile of employees.

**Procedure for In-patient treatment in Empanelled Hospitals**

- 1) Patients to be admitted through Referral Letter issued by Company Medical Officer of respective Units.
- 2) During emergencies on holidays, the patient can be treated after verifying the Family Medical Identity Card subject to the condition that the concerned employee will produce Referral Letter later.
- 3) The Company's liability is only for in-patient treatment. For out-patient treatment, the agreed tariff for consultations are to be collected directly from the patient and Company will reimburse as per CGHS/negotiated rates or actuals, whichever is less.
- 4) If one or more minor procedures form part of a major treatment procedure, then the package charges would be permissible for major procedure and minor procedure as per CGHS/negotiated rates or actual, whichever is less on the recommendation of Company Medical Officer (CMO).
- 5) The Admission Memo is given as Annexure -4. Copy of Admission Memo and Discharge Summary duly signed by the patient /employees and hospital authorities is to be enclosed with the bill to be submitted to Company Medical Officer, of respective unit as the case may be within 15 days of the discharge of the patient, along with the Claim Form (as per Annexure-5/Annexure-6 ).
- 6) In case of any procedural problems or emergencies, the CMO of respective Unit should be contacted.
- 7) At the time of discharge, the Bill and Discharge Summary (the date of admission, time and date of discharge, detailed treatment, procedures, investigation done on daily basis as well as final diagnosis etc.) should be forwarded by the Hospital to the Company for payment. In case of payment to be made to the employee, the employee shall submit his claim along with Discharge Summary and Bills.
- 8) Coronary Stents shall be permitted on the advice of the treating Cardiologist with approval from CMO.
- 9) It is essential for the empanelled hospitals to quote the Batch Number when a Coronary/Vascular Stent of any type is implanted in the case of AVNL beneficiary and also enclose a copy of relevant invoices pertaining to the procurement of the Stent by the Hospital. In addition, the outer pouch of the stent packet along with the sticker on it on which details of the stent are printed shall also be enclosed with the Medical Bill for claiming reimbursement. In case of non-empanelled hospital where the treatment was taken in an emergency, it is the responsibility of the beneficiary to obtain batch number, invoice and outer pouches of the stent(s) before the submission of the medical claim to AVNL as the case may be.
- 10) Photo copies of CT scan, MRI report to be enclosed with the bills. Original Reports are to be handed over to the employee.

- 11) A copy of Income Tax exemption if any under Rule 3(A) of IT Act need to be submitted. Copy of PAN issued by ITO may be furnished.
- 12) The Hospital should charge only CGHS/negotiated rates, for diagnostic tests to our employees and their dependents in out-patient on production of Family Medical Identity card.
- 13) If the eligible /entitled accommodation is not available, the patient should be provided the higher class of accommodation but the billing should be as per their entitlement only.
- 14) In case of emergencies, if the patient is admitted or provided the lesser class of accommodation than the entitlement, the billing should be charged accordingly till the patient is provided entitled accommodation.
- 15) Immediately, after admission of the patient, Hospital authorities should send a message/intimation to the concerned CMO.
- 16) CMO's decision in all matters of treatment, referral, admissibility of payment etc. shall be final subject to the overriding power of the Competent Authority.
- 17) In case of prolonged indisposition of an employee/dependent, such cases will be dealt on a case-to-case basis in consultation with the CMO.

## **ANNEXURE – A**

The following diseases are identified for Super Speciality treatment. Treatment for diseases other than these diseases will invariably have to be availed in the Hospitals identified for general purpose treatment.

- a) Heart Diseases viz Myocardial Infarction, Congestive Heart Failure, Rheumatic Heart Disease, Congenial Heart Diseases like ASD, VSD, Rheumatic Heart diseases like MS, MR, AS, AR etc., Cardiomyopathies etc.
- b) Angioplasty, Bypass Surgery
- c) Kidney diseases like, Renal Stones, Renal failure, Kidney Transplantation
- d) Neurology cases like Hemiplegia, Paraplegia, CVA, Neuropathy quadriplegia, vascular anomalies.
- e) Cerebral Hemorrhage, Patient in coma, Head injury, Spine Injuries, etc.
- f) Urology cases like, BPH, Prostate cancer, Urethral Injuries, Bladder Cancer etc.
- g) Gastroenterology cases like upper GI bleeding, Cholecystitis, and Liver Cancers etc.
- h) Emergency cases of major accidents with multiple injuries (Medico Legal cases)
- i) Poisoning, snake bite, cancer, Organ Transplantation (Cornea, kidney, Liver, Heart and Lung)

### **LIST OF IDENTIFIED AND NOMINATED SPECIALITIES REQUIRED FOR TIE UP**

- 1. Emergency treatment in Cardiology and Cardio-Thoracic Surgery.
- 2. Vascular Surgery.
- 3. Orthopedic, Nephrology, Urology with renal transplantation, Endocrinology.
- 4. Neuro-Surgery, Dialysis, Gastroenterology, General Surgical and medical emergencies.
- 5. Hemato-oncology, Pediatrics and Neonatology, NICU, Pediatric Surgery, Respiratory Medicine, Rheumatology/Trauma, Critical Care and other such conditions.
- 6. Neurology, Respiratory Medicine, Rheumatology.
- 7. Treatment of diseases of eye such as vitreo-retinal /Squint/ Complex Corneal Surgeries, Eye Injuries, Oculoplastic Surgeries, Ocular Malignancies and other eye conditions treatment
- 8. Specialties which are required to treat in emergent conditions, which leads to loss of life or limb.
- 9. General purpose treatment
- 10. ENT
- 11. Obstrectics /Gynecology
- 12. Dental
- 13. Eye Treatments

MEMORANDUM OF UNDERSTANDING

BETWEEN

ARMOURED VEHICLES NIGAM LIMITED (AVNL) AND \_\_\_\_\_NAME OF THE  
HOSPITAL

This agreement is made on the..... Day of..... 2026 between the GENERAL MANAGER/CO/HR, AVNL, AVADI, CHENNAI (Hereinafter called AVNL, which expression shall, unless repugnant to the context or meaning thereof, be deemed to mean and include its successors and assigns) of the First Part.

AND

----- (Name of the Hospital with address) of the Second Part. WHEREAS, the \_\_\_\_\_ Health Services is providing comprehensive medical care facilities to AVNL beneficiaries as are decided from time to time.

AND WHEREAS, \_\_\_\_\_proposes to provide treatment facilities and diagnostic facilities to the AVNL Medical Beneficiaries in the empanelled Hospitals, in AVADI/ CHENNAI/ HYDERABAD/ SECUNDERABAD/ SANGAREDDY/MUMBAI/JABALPUR/NAGPUR.

AND WHEREAS ----- (Name of the Hospital) has agreed to give treatment/diagnostic facilities (As per Annexure-1) to the AVNL AND ITS UNITS Medical Beneficiaries in the Health Care Organization at the rates offered by CGHS.

NOW, THEREFORE, IT IS HEREBY AGREED between the Parties as follows:

**Terms & Conditions for empanelment of Hospitals for Treatment & Investigations**

**1. DEFINITIONS & INTERPRETATIONS**

- 1.1 The following terms and expressions shall have the following meaning for purposes of this Agreement:
  - 1.1.1 "Agreement" shall mean this Agreement and all Schedules, supplements, appendices, appendages and modifications thereof made in accordance with the terms of this Agreement.
  - 1.1.2 "Benefit" shall mean the extent or degree of service the beneficiaries are entitled to receive as per the rules on the subject.
  - 1.1.3 "Card" shall mean (I-CARD/MIC) the Photo Identity Card bearing details of the beneficiary, issued by any competent authority AVNL AND ITS UNITS HR department only. MIC shall mean 'Medical Identity Card' issued by any competent authority of AVNL AND ITS UNITS HR department, bearing the name of the AVNL AND ITS UNITS Employee or ex- Employee and their eligible family members/dependents.

- 1.1.4 "Card Holder" shall mean a person having the (I-CARD/MIC etc.) Card (a specimen of which has been shown to the hospital and a prototype has also been provided).
- 1.1.5 "AVNL Beneficiary" shall mean a person who is eligible to comprehensive medical care by AVNL AND ITS UNITS has been issued, or whose name is included in, a Medical card issued by competent authority and has not become ineligible on any account.
- 1.1.6 "Coverage" shall mean the types of persons to be eligible as the beneficiaries subject to the terms, conditions and limitations.
- 1.1.7 "Emergency" shall mean any condition or symptom resulting from any cause, arising suddenly and if not treated at the early convenience, be detrimental to the health of the patient or will jeopardize the life / limb of the patient.
- 1.1.8 "Empanelment" shall mean authorization of the hospitals, by the AVNL for treatment/investigation purposes for a particular period.
- 1.1.9 "Hospital" shall mean the \_\_\_\_\_(Name of the Hospital) while performing under this Agreement providing medical investigation, treatment and the healthcare of human beings.
- 1.1.10 "De-recognition of Hospital" shall mean debarring the hospital on account of adopting unethical practices or fraudulent means in providing medical treatment to or not following the good industry practices of the health care for the AVNL beneficiaries after following certain procedure of inquiry.
- 1.1.11 "Party" shall mean either the AVNL or the Hospital and "Parties" shall mean both the AVNL and the Hospital.
- 1.1.12 "CGHS Package Rate"/Hospital Own package shall mean all inclusive- including lump sum cost of inpatient treatment /day care/diagnostic procedure for treatment under emergency from the time of admission to the time of discharge including (but not limited to) — (i) Registration charges, (ii) Admission Charges, (iii) Accommodation charges including patients diet, (iv) Operation charges,(v) Injection charges, (vi) Dressing charges, (vii) Doctor/Consultant visit charges, (viii) ICU/ICCU charges, (ix) Monitoring charges, (x) Transfusion charges and Blood processing charges, (xi) Pre Anesthetic checkup and Anesthesia charges,(xii) Operation theatre, (xiii) Procedural charges / surgeon's fee, (xiv) Cost of surgical disposables and all sundries used during hospitalization, (xv) Cost of medicines and consumables (xvi) Related routine and essential investigations (xvii) Physiotherapy charges etc, (xviii) Nursing care charges etc. Package rates also include two postoperative consultations.
- 1.1.13 Cost of Implants / Stents /Grafts are reimbursable in addition to package rates as per CGHS ceiling rates/negotiated rates or as per actual, whichever is lower.
- 1.1.14 In case a beneficiary demands a specific brand of Stent / Implant and gives his / her consent in writing, the difference in cost over and above the ceiling rate may be charged from the beneficiary, which is non-reimbursable / not payable by AVNL. This component will be shown distinctly in the bill for sake of transparency.

1.1.15 During In-patient treatment of the AVNL beneficiary, the hospital will not ask the beneficiary or his / her attendant to purchase separately the medicines/ sundries /equipment or accessories from outside and will provide the treatment within the package rate, fixed by the CGHS/negotiated rates which includes the cost of all the items. However, the following items are not admissible for reimbursement / Payment by AVNL:

- Toiletries
- Sanitary napkins
- Talcum powder
- Mouth fresheners
- Diet charges for patient attendant/s
- Telephone bills / Dietary / Nutritional Supplements
- Any other item as decided by AVNL

1.1.16 In cases of conservative treatment /where there is no CGHS package rate, calculation of admissible amount would be done item wise as per CGHS rates or as per AIIMS rates/Negotiated rates, if there is no CGHS rate for a particular item.

1.1.17 Package rates envisage up to a maximum duration of indoor treatment as follows:

- Upto 12 days for Specialized (Super Specialties) treatment
- Upto 7 days for other Major Surgeries
- Upto 3 days for Laparoscopic Surgeries and
- 1 day for day care/Minor (OPD) surgeries

However, if the beneficiary has to stay in the hospital for his /her recovery for a period more than the period covered in package rate, the additional bill amount may be allowed to the hospital, which shall be limited to accommodation charges as per entitlement, investigations charges at approved rates, doctors visit charges (not more than 2 visits per day by specialists/consultants) and cost of medicines for additional stay. The circumstances for such extended stay should be supported by relevant medical records and certified as such by hospital.

1.1.18 No additional charge on account of extended period of stay shall be allowed if that extension is assessed to have been necessitated due to Hospital Acquired Infection (HAI), infection as a consequence of surgical procedure / faulty investigation procedure etc. The decision of AVNL will be final in this regard.

1.1.19 The empanelled hospital cannot charge more than CGHS approved rates or rates agreed upon with AVNL, when a AVNL beneficiary is admitted under non-emergency situation. In case of any instance of overcharging the overcharged amount over and above CGHS rate (except inadmissible items and difference paid due to implant/stent of a specific brand chosen by AVNL beneficiary) shall be considered as unethical practice by the hospital and may lead to cancellation of contract.

1.1.20 AVNL has empanelled the \_\_\_\_\_hospital for AVNL beneficiary for all the specialties for which it has been granted recognition by CGHS/NABL/NABH. It shall also refer any of its beneficiaries for a treatment/procedure/investigation which is not available in-house at the local health institution of AVNL.

- 1.1.21 For any interaction with AVNL the hospital shall be interacting with the signing authority, or one of his authorized officers, of this agreement. However a superior office of the signing authority may call for any report by the hospital.
- 1.1.22 The applicable city specific CGHS rates are as per notification by the CGHS for that city or nearest city/Negotiated rates. The rates will be as per applicable rate i.e. any change upwards or downwards will be applicable from the date which is applicable in CGHS.

OR

Mutually agreed rates with AVNL (in case of Government of India / Public Sector Undertaking hospitals or Non CGHS hospitals).

**Hospital will write prescription in generic name & provide medicines for upto seven days period. This is subject to following conditions: -**

- i. Only essential medicines in generic form for continuity of treatment will be issued by the hospital.**
- ii. No nutritional supplements, tonic, cough syrup, vitamins; injections will be issued by the hospital.  
These are not allowed**
- iii. No non-drug items/ equipment's / appliances will be issued**
- iv. Total cost of such medicines issued by the hospital must not exceed Rs. 2000/- in any case**

## **2. DURATION OF AGREEMENT**

The Agreement shall remain in force for a period of 2 years from \_\_\_\_\_ to \_\_\_\_\_ or till it is modified or revoked, whichever is earlier. The Agreement may be extended annually subject to fulfillment of all the terms and conditions of this Agreement and with mutual consent of both parties.

Note: In case the hospital is de-recognized by CGHS or the recognition is not extended for any reason then, unless and until specifically allowed by AVNL, the AVNL empanelment under this agreement shall also be withdrawn.

Patients already admitted to the hospital during currency of MOU, will however, be continued to be provided treatment, which shall be paid by AVNL as per this MOU.

## **3. CONDITIONS FOR PROVIDING TREATMENT/SERVICES**

### **A. GENERAL CONDITIONS**

The Hospitals shall be empanelled for all facilities/services available in the health care organization as approved by CGHS/Non CGHS Hospitals and shall not be empanelled for selected specialties/facilities.

The Hospital shall investigate / treat the AVNL beneficiaries only for the emergency condition for which the patient has reported to them. Likewise the AVNL beneficiaries referred by the AVNL hospital shall be treated / investigated only for the condition referred. No undue / unnecessary investigation shall be done by the hospital.

It is agreed that AVNL beneficiaries shall be attended to on priority. AVNL has the right to monitor the treatment provided in the Private Hospital.

**B. ADDITIONAL PROCEDURES/INVESTIGATIONS**

The Hospital has been empanelled for treatment / investigation of the AVNL beneficiaries. For any material / additional procedure / investigation other than the emergency condition for which the authorization was initially given, would require the permission of the competent authority.

Likewise, if AVNL refers a patient, the treatment given should be confined to the condition for which the patient has been referred by the AVNL.

**C. PROCEDURE WHERE AVNL BENEFICIARY REPORTING IN EMERGENCY NEEDS TREATMENT IN A SPECIALITY(S) WHICH ARE NOT AVAILABLE IN THE HOSPITAL.**

The Hospital shall not undertake treatment of cases, reporting to them, in specialties which are not available in the hospital. But it will provide necessary treatment to stabilize the patient and transport the patient safely to nearest recognized hospital under intimation to AVNL authorities. However, in such cases the Hospital will charge as per the CGHS rates/agreed rates only for the treatment provided.

**D. CHANGES IN INFRASTRUCTURE TO BE NOTIFIED TO AVNL**

The Hospital shall immediately communicate to AVNL about any change in the infrastructure/shifting of premises of the hospital. The empanelment will be temporarily withheld in case of shifting of the hospital facility to any other location without prior permission of AVNL.

**E. ANNUAL REPORT**

The Hospital will submit an annual report regarding number of admitted AVNL beneficiaries, bills submitted to the AVNL and payment received. Similar report for the referred patients treated by the hospital may also be submitted. Annual audit report of the hospital will also be submitted along with the statement. The Hospital shall submit all the medical records in digital format.

**F. MEETINGS**

Authorized signatory / representative of the empanelled hospital shall attend the periodic meetings held by AVNL required in connection with improvement of working conditions and for redressal of grievances.

**G. INSPECTIONS**

During the visit by AVNL officials, the empanelled hospital's authorities will co-operate in carrying out the inspection.

**H. NO COMMERCIAL PUBLICITY**

The Hospital will not make any commercial publicity projecting the name of AVNL. However, the fact of empanelment under AVNL shall be displayed at the premises of the empanelled hospital indicating that the charges will be as per CGHS approved rates.

#### **4. TREATMENT IN EMERGENCY**

The following ailments may be treated as emergency which is illustrative only and not exhaustive, depending on the condition of the patient and if any charges done by CGHS will apply for AVNLs too:

- Acute Coronary Syndromes (Coronary Artery Bypass Acute graft /Percutaneous, Transluminal Coronary Angioplasty) including Myocardial Infarction, Unstable Angina, Ventricular Arrhythmias, Paroxysmal Supraventricular Tachycardia, Cardiac Tamponade, Acute Left Ventricular Failure/ Severe Congestive Cardiac Failure, Accelerated Hypertension, Complete Heart Block and stroke/ Myocardial attack, Acute Aortic Dissection.
- Acute Limb Ischemia, Rupture of Aneurysm, Medical and Surgical Shock and Peripheral Circulatory failure.
- Cerebro-Vascular attack-Stroke, sudden unconsciousness, Head injury, Respiratory failure, decompensated lung disease, Cerebro-Meningeal Infections, Convulsions, Acute Paralysis, Acute Visual loss.
- Acute abdomen pain
- Road Traffic Accidents /with injuries including fall
- Severe Hemorrhage due to any cause.
- Acute poisoning
- Acute Renal Failure
- Acute Abdomen pain in female including acute Obstetrical and Gynecological emergencies.
- Electric Shock. Any other life threatening condition.

In emergency, the hospital will not refuse admission or demand an advance payment from the AVNL beneficiary or his family member and will provide credit facilities to the patient whether the patient is a serving employee of AVNL or a dependent, on production of a valid AVNL Medical Identity Card (AMID etc.). The refusal to provide the treatment to bonafide AVNL beneficiaries in emergency cases on credit basis, without valid ground, would attract disqualification for continuation of empanelment.

The Hospital will intimate all instances of AVNL beneficiaries admitted as emergencies without prior permission to the AVNL authorities through mutually accepted means to AVNL authorities at the earliest and within 24 hours and AVNL will revert within next 24 hours, otherwise it will be treated as deemed approved. The empanelled hospital will clearly mention/ certify the emergency condition as per MOU.

If AVNL finds that patient is not suffering from emergency, in such case the hospital bill upto the stage of such determination will be paid by AVNL directly to the hospital. However, the patient can continue to avail treatment at the empanelled hospital, if so desired by paying CGHS rates or hospital rates whichever is less on the patients cost thereafter.

#### **5. (a) ENTITLEMENTS FOR VARIOUS TYPES OF WARDS COMPANY EMPLOYEES**

AVNL beneficiaries are entitled to facilities of private, semi private or general ward depending on their pay drawn in pay band/pension. These entitlements are amended from time to time and the latest order in this regards needs to be followed. The entitlement at present is as follows:-

<b>Hospitals other than Super Speciality</b>	W-1 to W-SG	Shared Room
	E-0 to E-4	Single Room
	E-5 and above	AC Single Room
<b>Super Speciality Hospitals</b>	W-1 to W-4	General Ward
	W-5 to W-SG	Shared Room
	E-0 to E-2	Shared Room
	E-3 to E-4	Single Room
	E-5 and above	AC Single Room

a) Note: Stay at Intensive Critical Care Unit (ICCU) wards: As per requirement on advice of Treating Doctor

5 (b) ENTITLEMENTS FOR VARIOUS TYPES OF WARDS FOR OFFICERS ON DEEMED DEPUTATION

Hospitals	Pre-absorption Pay levels	AVNL Grades	Room category
<b>Hospitals other than Super Speciality</b>	L-1 to L-6	W/A-1 to W/A-9/SG	Shared Room
	L-6 or higher to L-11	E0 to E-4	Single Room/Private Ward
	L-12 and above	E-5 and above	AC Single Room/Private ward
<b>Super Speciality Hospitals</b>	L-1 to L-2(>6 >9 years)	W/A-1 to W/A-4	General Ward
	L-2 (>9 years- L-6 & higher)	W/A-5 to W/A-9/SG	Shared Room/Semi Private ward
	L-6 to L-8	E-0 to E-2	Shared Room/Private ward
	L-10 to L-11	E-3 to E-4	Single Room/Private ward
	L-12 and above	E-5 and above	AC Single Room/Private ward

Sl No.	Correspondence basic pay drawn by the officer in 7 <sup>th</sup> CPC per month	Entitlement
1	Upto Rs 47,600/-	General Ward
2	Rs 47,601/- to Rs. 63,100/-	Semi Private Ward
3	Rs 63,101/- and above	Private Ward

The card will have the entitlement of the patient endorsed. For the patients referred by AVNL the entitlement of ward shall be endorsed on the referral letter itself.

- Private ward/single Room is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishings like wardrobe, dressing table, bedside table, sofa set, carpet, etc. as well as bed for attendant. The room has to be air-conditioned.
- Semi Private Ward/shared room is defined as a hospital room where two to three patients are accommodated and which has attached toilet facilities and necessary furnishings.
- General ward is defined as a hall that accommodates four to ten patients.

Treatment, in higher category of accommodation than the entitled category, is not permissible for payment by AVNL or reimbursable. If the patient or his/her attendant opts for a higher class than admissible under extent rules mentioned above (para5) as modified from time to time, the difference

in cost of treatment including room charges, procedure and treatment cost, investigations etc., would have to be borne by patients representative. A written declaration to the effect should be taken before such change is carried out and it can be collected from the patient or his/her representative directly by the hospital. This should be indicated distinctly in the bill raised in the interest of transparency.

## **6. APPROVED RATES TO BE CHARGED**

- 6.1 The empanelled hospital shall charge from the AVNL beneficiary as per the rates for a particular procedure/ package deal as prescribed by the CGHS or mutually accepted rates by AVNL (where rates are not available for CGHS or in case of Government of India undertaking hospitals or mutually accepted rates where no CGHS hospital exists) and attached as Annexure (rate list), which shall be an integral part of this Agreement. The rates notified by CGHS shall also be available on website of Ministry of Health & Family Welfare at <http://msotransparent.nic.in/cghsnew/index.asp>.
- 6.2 The package rate will be calculated as specified in the tender document. No additional charge on account of extended period of stay shall be allowed if, that extension is due to infection as a consequence of surgical procedure or due to any improper procedure and is not justified. The decision of AVNL will be final in this regard.
- 6.3 The procedure and package rates for any diagnostic investigation, surgical procedure and other medical treatment for AVNL beneficiary under this Agreement shall be as per the latest CGHS rate applicable for the city of \_\_\_\_\_ during the validity period of this Agreement. The empanelled hospital agrees that during the inpatient treatment of the AVNL beneficiary, the Hospital will not ask the beneficiary or his attendant to purchase separately the medicines / sundries/ equipment or accessories from outside and will provide the treatment within the package deal rate, fixed by the CGHS/negotiated rates which includes the cost of all the items. Appropriate action, including removal from AVNL empanelment and / or termination this Agreement, may be initiated on the basis of a complaint, medical audit or inspections carried out by AVNL teams. The hospital shall agree to charge CGHS rates to AVNL Employees /dependents on production of valid I-Card / Documentary proof, even though treatment is not sought as AVNL beneficiary.

## **7. MODE OF PAYMENT FOR TREATMENT OF BENEFICIARIES**

There shall be three classes of patients:

- i. AVNL Beneficiaries referred by AVNL Hospitals to the empanelled hospital. AVNL Beneficiaries reporting to hospital directly in emergency
- ii. AVNL beneficiary directly reporting to empanelled hospital without any emergency or referral letter and paying on their own for OPD/IPD/Investigations for which empanelled hospital shall charge CGHS rate or hospital rate, whichever is less.
- iii. AVNL beneficiaries coming under Serial No.7 (I) will be attending the hospital with referral letter from AVNLs, the bill should be submitted to the office of the concerned AVNL hospital with whom they have the MoU.

AVNL beneficiaries coming under Serial No.7 (II) above- **emergency as in para 4** treatment / procedures, the services shall be undertaken and provided on credit. No payment shall be sought from them and information sent to AVNL hospital through mutually agreed means and authorization

be sought from the concerned AVNL hospital with whom they have MoU. Situation may arise where AVNL hospital, after scrutinizing admission report submitted by empanelled hospital, find that the patient is not suffering from an emergency. In such cases, the hospital bills upto the stage of such determination (para 4) shall be paid by AVNL directly to Hospital. However, the patient can continue to avail treatment at the empanelled hospital, if so desired, paying CGHS rates or hospital rates, whichever is less on the patient's cost, thereafter.

For AVNL patients coming under Serial No. 7(III) above, empanelled hospital has to collect payment from the AVNL patient directly at the rate as decided already. That is empanelled hospitals will provide the necessary treatment in OPD or otherwise to AVNL beneficiary at the CGHS approved rates or hospital rates, whichever is less for the treatment in non-referral and non-emergency case at AVNL Medical beneficiary's own cost.

#### **8. NOTIFICATION OF NODAL OFFICERS BY HOSPITAL AND AVNL**

Empanelled Hospital shall notify concerned AVNL hospital authority about admission of AVNL beneficiarie(s) in emergency clarifying the nature of emergency as pointed out in para 4. Empanelled Hospital will mark a counter for AVNL beneficiary and also display the name and contact no of person dealing with AVNLs for that empanelled hospital as being done for CGHS beneficiary. Concerned AVNL Hospital will appoint two senior doctors for acting as Chief Coordinator and Nodal Officer respectively for empanelled hospital and for AVNL beneficiaries. From AVNL, Shri Praveen Kumar, CGM/CO&HR will be the Chief Coordinator and Shri R K Bal, GM/CO&HR will be the Nodal Officer.

#### **9. INFORMATION TO BE PROVIDED BY HOSPITALS OF EMERGENCY ADMISSIONS**

The Hospital will intimate all instances of AVNL beneficiaries admitted as emergencies without prior permission to the AVNL authorities through mutually accepted means at the earliest and within 24 hours and AVNL will revert within next 24 hours, otherwise it will be treated as deemed approved. The empaneled Hospital will clearly mention/certify the emergency condition as per MoU.

If AVNL finds that patient as not suffering from emergency, in such a case the Hospital Bill up to the stage of such determination will be paid by AVNL directly to the Hospital. However, the patient can continue to avail treatment at the empanelled hospital, if so desired by paying CGHS rates or hospital rates, whichever is less on the patient's own cost thereafter.

Treatment in no case would be delayed or denied for the reason that authorization by AVNL is not forthcoming.

#### **10. SUBMISSION OF BILLS**

Empanelled Hospital shall submit the physical bill to the concerned CMS/MD office for processing of bills. However, no claims of Empanelled Hospitals after a period of six months from the date of completion of treatment/date of discharge of AVNL beneficiaries shall be accepted by the AVNL authority.

## **11. PROCESSING OF CLAIMS**

The Hospital shall be expected to upload the bill, on the website, for a particular admission and treatment within 7 days of the discharge of the patient.

AVNL hospital shall put up a scrutinized Statement of the Bill including observations if any, within 15 days of submission of the bill by the Hospital. If the Hospital has anything to state on the scrutinized statement, then it will do so within 02 days, otherwise it will be presumed that Hospital agrees with the scrutinized Statement.

After approval by the Competent Authority, the concerned Office shall submit the bill to associate Accounts Department (within 15 working days of settlement of last query). Accounts Department will pass the bills and make the payment to the hospital within 15 working days.

**Note:** The patient may be from some AVNL unit other than the agreement signing unit but the bill shall be paid by the AVNL Unit which had empanelled the Hospital, without making any reference or debit etc. to the AVNL Unit to which beneficiary may belong.

AVNL reserves the right to make recoveries, if any, from future bills of Hospital as the case may be. AVNL hospital will examine the bill in terms of:

- (a) Appropriateness of treatment including screening of patients records to identify unnecessary admissions and unwarranted treatments.
- (b) Whether the planned treatment is shown as emergency treatment.
- (c) Whether the diagnostic, medical or surgical, procedures that were not required were conducted by hospital including unnecessary investigations.
- (d) Whether the treatment procedures have been provided as per the approved rates and the packages.
- (e) Whether procedures performed were only those for which permission had been granted or the patient was referred.
- (f) Empanelled Hospital will provide established and approved treatment protocol to AVNL beneficiaries. Therapies which are not approved or experimental in nature are not permitted.

## **12. MEDICAL AUDIT OF BILLS**

There shall be a continuous Medical Audit of the services provided by the empanelled Private Hospital by AVNL or its nominated agency.

## **13. DUTIES AND RESPONSIBILITIES OF EMPANELLED HOSPITAL**

It shall be the duty and responsibility of the empanelled Hospital at all times, to obtain, maintain and sustain the valid registration, recognition and high quality and standard of its services and healthcare and to have all statutory / mandatory licenses, permits or approvals of the concerned authorities under/ as per the governing statutes and applicable rules and regulations.

**14. NON ASSIGNMENT**

The empanelled Hospital shall not assign, in whole or in part, its obligations to perform under the MoU, except with the prior written consent of AVNL at its sole discretions and on such terms and conditions as deemed fit by the AVNL. Any such assignment shall not relieve the Hospital from any liability or obligation under this agreement.

**15. EMPANELLED HOSPITAL'S INTEGRITY AND OBLIGATIONS DURING AGREEMENT PERIOD**

The empanelled Hospital is responsible for and obliged to conduct all contracted activities in accordance with the MoU using state-of-the-art methods and economic principles and exercising all means available to achieve the performance specified in the MoU. The Hospital is obliged to act within its own authority and abide by the directives issued by the AVNL. The Hospital is responsible for managing the activities of its personnel and will hold itself responsible for their misdemeanors, negligence, misconduct or deficiency in services, if any.

**16. PERFORMANCE BANK GUARANTEE (PBG)**

Health Care Organizations that are recommended for empanelment after the initial assessment shall also have to furnish a Performance Bank Guarantee (PBG) Hospitals / Cancer units Rs.10.00 lakh, Single Speciality Hospitals — 2.00 lakh, Eye Centres- Rs. 2.00 lakh, Dental Clinics- Rs.2.00 lakh, Diagnostic Centres-Rs. 2.00 lakh valid for a period of 30 months i.e. six month beyond empanelment period to ensure efficient service and to safeguard against any default. (PBG for charitable Organizations would be 50% of above amount). If they have given the same to one AVNL Unit, then they need not give to other AVNL Units, since if one hospital is empanelled with a particular AVNL Unit then it is deemed empanelled by other AVNL Units too and other AVNL Units can simply sign the MoU with them on same term and conditions for their beneficiaries intended.

**17. FORFEITURE OF PERFORMANCE BANK GUARANTEE (PBG) AND REMOVAL FROM LIST OF EMPANELLED ORGANIZATIONS**

In case of any violation of the provisions of the MoU by the Hospital empanelled under AVNL such as:

1. Refusal of service.
2. Undertaking unnecessary procedures.
3. Prescribing unnecessary drugs/tests.
4. Over billing.
5. Reduction in infrastructure / equipment etc after the hospital / has been empanelled.
6. Non-submission of the report, habitual late submission of incorrect data in the report.
7. Refusal of credit to eligible beneficiaries and direct charging from them.
8. If not recommended by NABH/NABL /QCI at any stage.

9. Discrimination against AVNL beneficiaries' vis-à-vis general patients.

10. De-empanelment by CGHS /ECHS/ESI

The amount of PBG will be forfeited and the AVNL shall have the right to de-recognize the Hospital as the case may be. Such action could be initiated on the basis of a complaint, medical audit or inspections carried out by AVNL teams at random. The decision of AVNL will be final.

## **18. LIQUIDATED DAMAGES**

- The Hospital shall provide the services as per the requirements specified by AVNL in terms of the provisions of the MoU. In case of initial violation of the provisions of the MoU by the Hospital such as refusal of service or direct charging from the AVNL beneficiaries (and referred patients) or defective service and negligence, the amount equivalent to 15% of the amount of PBG will be charged as agreed Liquidated Damages by AVNL. However, the total amount of the PBG will be maintained intact being a revolving Guarantee.
- In case of repeated defaults by the Hospital the total amount of PBG will be forfeited and action will be taken for removing the Hospital from the empanelment of AVNL as well as termination of this MoU.
- For over-billing and unnecessary procedures, the extra amount so charged will be deducted from the pending /future bills of the Hospital and the AVNL shall have the right to issue a written warning to the hospital not to do so in future. The recurrence, if any, will lead to de-recognition from AVNL.

## **19. TERMINATION FOR DEFAULT**

AVNL may, without prejudice to any other remedy for breach of MoU, by written notice of default sent to the Hospital, terminate the MoU in whole or part.

- 19.1 If the empanelled Hospital fails to provide any or all of the services for which it has been empanelled within the period(s) specified in the Agreement or within any extension thereof if granted by AVNL pursuant to MoU or if the Health Care Organization fails to perform any other obligation(s) under the MoU.
- 19.2 If the Hospital in the judgment of the AVNL has engaged in corrupt or fraudulent practices in competing for or in executing the Agreement.
- 19.3 In case of any wrong doings specified in Memorandum of Agreement by one hospital AVNL reserves the right to remove all empanelled hospitals of that particular group from its empanelled list of Hospitals.

## **20. INDEMNITY**

The empanelled Hospital shall at all times , indemnify and keep indemnified AVNL / the Government against all actions, suits, claims and demands brought or made against it in respect of anything done or purported to be done by the Health Care Organization in execution of or in connection with the services under this Agreement and against any loss or damage to AVNL / the

Government in consequence to any action or suit being brought against the AVNL/ the Government, along with (or otherwise), Health Care Organization as a Party for anything done or purported to be done in the course of the execution of this Agreement. The Health Care Organization will at all times abide by the job safety measures and other statutory requirements prevalent in India and will keep free and indemnify the AVNL from all demands or responsibilities arising from accidents or loss of life, the cause or result of which is the Hospital negligence or misconduct.

The Hospital will pay all indemnities arising from such incidents without any extra cost to AVNL and will not hold the AVNL responsible or obligated. AVNL / the Government may at its discretion and shall always be entirely at the cost of the Health Care Organization defend such suit, either jointly with the Health Care Organization enter or singly in case the latter chooses not to defend the case.

## **21. ARBITRATION**

If any dispute or difference of any kind whatsoever (the decision whereof is not herein otherwise provided for) shall arise between the AVNL and the Hospital, upon or in relation to or in connection with or arising out of the Agreement, shall be referred to for arbitration by the CMD/AVNL who will appoint Arbitrator and give his decision on the Arbitration Award. The decision of CMD will be final and binding. The provisions of the Arbitration and Conciliation Act, 1996 shall apply to the arbitration proceedings. The venue of the arbitration proceedings shall be at the city of CMD/CMO office.

## **22. MISCELLANEOUS**

- 22.1 Nothing under this MoU shall be construed as establishing or creating between the Parties any relationship of Master and Servant or Principal and Agent between AVNL and the Hospital. The Health Care Organization shall work on perform duties under this MoU.
- 22.2 The Hospital agrees that any liability arising due to any default or negligence in not represent or hold itself out as agent of the AVNL.
- 22.3 AVNL will not be responsible in any way for any negligence or misconduct of the Hospital and its employees for any accident, injury or damage sustained or suffered by any AVNL beneficiary or any third party resulting from or by any operation conducted by and on behalf of the Hospital or in the course of its performance of the medical services, the responsibility shall be borne exclusively by the Hospital which shall alone be solely responsible for the deficiencies in rendering such services.
- 22.4 The Hospital shall notify the Government of any material change in their status and their shareholdings or that of any Guarantor in particular where such change would have an impact on the performance of obligation under the MoU.
- 22.5 The MoU can be modified or altered with mutual written consent by both the parties.
- 22.6 Should the Hospital get wound up or partnership is dissolved, AVNL shall have the right to terminate the MoU. The termination of MoU shall not relieve the Hospital or their heirs and legal representatives from the liability in respect of the services provided by the Hospital during the period when the Agreement was in force.
- 22.7 The Hospital shall bear all expenses incidental to the preparation and stamping of this MoU.

**23. OTHER SERVICES TO BE PROVIDED**

The empanelled Hospital will, on the request of AVNL, agree to provide training to AVNL medical, Para-medical and nursing staff.

**24. EXIT FROM THE PANEL**

The latest Rates fixed by the CGHS for the city of Chennai/Hyderabad/Mumbai/Jabalpur (applicable to the Units of AVNL) shall continue to hold good unless revised by CGHS. In case the notified rates are not acceptable to the empanelled Health Care Organizations, or for any other reason, the Health Care Organization no longer wishes to continue on the list under AVNL, it can apply for exclusion from the panel by giving one month notice. Patients already admitted shall continue to be treated as per agreed rates between the two parties.

**25. NOTICES**

25.1 Any notice given by one party to the other pursuant to this Agreement shall be sent to other party in writing by registered post or by facsimile and confirmed by original copy by post to the other party's address as below.

AVNL/-IN-CHARGE.....

Hospital with address:.....

25.2 A notice shall be effective when served or on the notice's effective date, whichever is later. Registered communication shall be deemed to have been served even if it returned with remarks like refused, left premises locked etc.

**26. Mutual conditions agreed upon a.....b.....**

**27. AVNL conditions**

27.1 AVNL Medical beneficiaries (serving/ dependents) under emergency condition can get admission in any AVNL empanelled Hospital without any prior referral. The empanelled hospital should not insist on referral from AVNL Hospital or demand advance in emergency conditions and the Hospital will provide cashless/credit medical facilities to patients

27.2 The emergency conditions are defined in MoU between CGHS empanelled Hospital and Government of India (CGHS Authorities) or as amended by CGHS from time to time and same will be applicable in AVNL.

27.3 The valid I-CARD/ MIC issued will be treated as identification for AVNL Medical Beneficiary. AVNL has to ensure that these cards are accepted in the empanelled hospital under the jurisdiction/empanelment.

27.4 Situation may arise where AVNL Hospital, after scrutinizing admission report submitted by empanelled Hospital, finds that the patient is not suffering from an emergency. In such cases, the Hospital Bills upto the stage of such determination shall be paid by AVNL directly to Hospital. However, the patient can continue to avail treatment at the empanelled hospital, if so desired, by paying CGHS rates or agreed rates, whichever is less on the patient's cost, thereafter.

- 27.5 The nature and appropriateness of the emergency is subject to verification, which may be verified, inspected or medically audited by the nominated authority on random basis at its own discretion.
- 27.6 The hospital will intimate all instances of patient's admitted as emergencies (without prior permission) to the AVNL authorities, at the earliest and within 24 hours and AVNL will revert with next 24 hours, otherwise it will be treated as deemed approval. The empanelled hospital will clearly mention/ certify the emergency condition as per MOU.
- 27.7 AVNL Hospital as well as empanelled Hospital will share the contract number and email address for communication for this MoU and ensure to upload on the website of AVNL as well as of the Hospital. The documents and approvals will be shared on the email to save the time and difficulties faced by the patients. The empanelled Hospital will not insist to patients to get the approval of referral/ extension from AVNL Hospital. This will be coordinated and approved on the contact number and email by the empanelled Hospital and AVNL Hospital.
- 27.8 AVNL Hospital shall refer to the empanelled Hospital for appropriate duration as per the package. In case of additional stay for treatment, same procedure will be followed as per para 27.6 & 27.7 above.
- 27.9 Also, the empanelled Hospitals will provide the necessary treatment in OPD or otherwise to valid AVNL Medical Beneficiary at the CGHS approved rates or Hospital rates, whichever is less for the treatment on non-referral and non-emergency case at AVNL Medical Beneficiary's cost.
- 27.10 The refusal to provide treatment to bonafide AVNL medical beneficiaries in emergency cases without valid ground would attract disqualification for continuation of Empanelment.

IN WITNESSES WHEREOF the parties have caused this MoU to be signed and executed on the day month and the year first above mentioned.

Signed by AVNL  
Representative  
For and on behalf of AVNL

In the Presence of (Witnesses)

- 1.
- 2.

Signed by  
For and on behalf of (Hospital)  
Duly authorized vide Resolution No.....dated.....  
Of (Name of Hospital)

In the presence of (Witnesses)

- 1.
- 2.

Additional Conditions for MOU

Terms & conditions:

1. Should be CGHS/ECHS/ ESI empanelled Hospital/Non CGHS Hospitals/Hospitals ready to extend services on negotiated rates and located AVADI (CHENNAI) / HYDERABAD / SECUNDERABAD/ SANGAREDDY/JABALPUR /MUMBAI.
2. Should provide medical care in identified specialties (Annexure –A) round the clock (24 x 7).
3. Provision of early registration, examination and admission of AVNL patients referred by AVNL Units, AVADI (CHENNAI)/HYDERABAD/SECUNDERABAD/SANGAREDDY/JABALPUR/ MUMBAI.
4. For emergency cases, admission is to be done immediately.
5. Adequate medical attention is to be provided for serious patients.
6. The Hospital(s) recognized should display prominently on the website/ notice board etc. indicating specialties for which they are recognized for MoU with AVNL Units at AVADI (CHENNAI)/HYDERABAD/SECUNDERABAD/SANGAREDDY/JABALPUR/ MUMBAI so that AVNL beneficiaries are well aware of the availability of such hospitals for referral.
7. The AVNL beneficiaries will be referred to a particular CGHS/ECHS/ESI empanelled Hospitals as his/her preference/choice.
8. The rates to be charged by CGHS/ECHS/ESI empanelled Hospitals should be as per CGHS prescribed rates/Non CGHS Hospitals/Hospitals ready to extend services on negotiated rates for the city of (\_\_\_\_\_/ nearest city, based on the classification of the Hospitals or the Hospital tariff, whichever is lower and for those items/procedures/investigations which are not covered under CGHS Rate list, the hospital should offer some discounts for the same on their hospital rates as also free ambulance services to the AVNLs.
9. The MoU will be for a period of two years and can be extended for another two years based on mutual written consent of both the parties.
10. It is accepted to treat \_\_\_\_\_ Hospital, as an empanelled hospital to provide medical advice and treatment including investigations, drugs, surgeries etc. to the AVNL employees and their dependent family members in view of the better facilities and conveniences provided in the said hospital.
11. The AVNL employees and their dependent family members referred to \_\_\_\_\_ hospital are eligible for being admitted to the category of bed as mentioned in the authorization letter of AVNL Units at AVADI (CHENNAI) / HYDERABAD / SECUNDERABAD / SANGAREDDY / JABALPUR/MUMBAI to Hospital.

12. Patients will be referred to the empanelled Hospital with a referral letter.
13. Patient should submit the medical health book identity card or his department identity card at the time of admission containing the patient's photograph, signature/LTI.
14. The bill should conform to the rate structure mutually agreed.
15. The empanelled Hospital must send the bills in duplicate directly to AVNL Units at AVADI (CHENNAI)/HYDERABAD/SECUNDERABAD/SANGAREDDY/JABALPUR /MUMBAI. The bills should be submitted for arranging payment once in a month.
16. Payment of the bills shall be made after due scrutiny and certification by AVNL Units at AVADI (CHENNAI)/HYDERABAD/SECUNDERABAD/SANGAREDDY/JABALPUR/MUMBAI within one month from the date of receipt of the bill by NEFT (electronic payment) to the hospital by Finance Manager of AVNL UNITS.
17. The schedule of rates shall form an integral part of this agreement. The rates mentioned in the schedule are inclusive of all taxes, including the service tax, duties, charges or levies which may be assessed, imposed or levied in connection with the MOU.
8. The empanelled Hospital shall treat the patients referred by AVNL in a courteous manner in accordance with the good business practices and shall extend priority admission facilities wherever possible to the AVNL employees referred by AVNL Hospital.
19. The empanelled Hospitals will have their facility covered by proper indemnity policy including error, omission and professional indemnity and agrees to keep such policies in force during the term of MOU.
20. Visit by AVNL Officials to check the documents related to patients and treatment being given to them shall be allowed by the empanelled Hospitals.
21. AVNL shall reserves the right to discuss the treatment plan with the treating Doctor.
22. The empanelled Hospital shall oversee that best medical treatment facility is extended to the AVNL beneficiaries referred by them.
23. Access to billing and medical record and indoor papers of the patients referred to them will be allowed to AVNLs as and when necessary for with the prior appointment.
24. It is necessary to take a photocopy of the identity card of the AVNL employee referred for treatment to be submitted later with the bill and to keep as a proof of the patient's treatment.
25. At the time of discharge, discharge card / original intimation, all original prescriptions and pharmacy records are to be forwarded to concerned AVNL Hospitals, with the bill. Photo copies may be given to the patients on request at their own expenses.

26. The bills are to be sent in duplicate by the hospital giving full details of treatment availed, investigations done and drugs supplied along with the serial number, type of the service and rate which are mentioned in the rate list to the patient along with the signature of the treating Doctor for the treatment done and drugs prescribed.
27. Whereas the parties hereby agree to modify the terms and conditions of the MOU if required in future with mutual consent.
28. There shall be no refusal of services, once the patient is referred to by AVNL for treatment.
29. In case of **any** court case arising due to negligence / deficiency of service by the Hospital, penalty and cost of litigation if any, awarded / ordered by any Hon'ble Court / Tribunal/Authorized Agency shall be borne by the Hospital.
30. There shall be no refusal of services, once a patient is referred to by AVNL for treatment.
31. If any dispute, difference or question arises between AVNL and Hospital/Service Provider as to the respective rights, duties and obligations of the parties hereto or as to the services or interpretations of any of the terms and conditions of the agreement as to its application(except as to any matter the decision on which expressly provided for in this MoU and also except as to any matter regarding which the service provider has given "No claim certificate" then same shall be referred to AVNL Units at AVADI( CHENNAI) / HYDERABAD/ SECUNDERABAD/ SANGAREDDY/ JABALPUR/ MUMBAI, which shall give decision within 60 days or 30 days from the date of reference. If AVNL Units at AVADI/CHENNAI/HYDERABAD/SECUNDERABAD/SANGAREDDY/JABALPUR/NAGPUR/MUMBAI fail to make a decision within 60 days, or if the service provider is aggrieved by such decision, after 60 days but within 120 days of making reference to Chief Medical Director, the service provider shall demand in writing that the disputes or differences to be referred to arbitration of sole Arbitrator who shall be Gazetted Officer of the AVNL nominated by Chairman and Managing Director (CMD). Where the arbitral award is for the payment of money, no interest shall be payable on which or any part of the money for any period till the date on which award is made. Subject to aforesaid provisions, Arbitration and Conciliation Act 1996 and the rules there under and any statutory modifications thereof shall apply to the arbitration proceedings under this clause. Penalty clause for safe guarding in case of failure of service, partly unsatisfied services have to be taken care. "Subject to said arbitration clause in the agreement the jurisdiction of Courts of AVNL Units at AVADI (CHENNAI) /HYDERABAD /SECUNDERABAD /SANGAREDDY/JABALPUR/ MUMBAI shall only be applicable.