

S.N O.	QUERIES	REPLY
1.	Clause for NABL accreditation is essential	Yes
2.	Either the services are required for Radiology & Laboratory services	Both
3.	To provide the price list for each and every investigations	List Provided – Annexure A
4.	Availability of the staff and management of the payment is not clear	Payment of Salary to presently employed manpower employed in Lab will be paid by AIIA.
5.	The minimal guarantee of the payment is not mentioned	No guarantee of minimum payment can be provided by AIIA
6.	Who will take the payment charge from the patients	For CPL charges will be collected by the successful bidder. An integrated IHMS/or software as required will have to be installed by the successful bidder for the same to facilitate and fasten the process of patient registration, entry for tests and result reporting. Proper documentation of the charges collected has to be done, which can be cross checked and verified any time by representative nominated by AIIA.
7.	As per Delhi/ central government hospitals, the lab charge is absolutely free, then who will be paying the same	In AIIA, only BPL patient is free for laboratory investigations (only on production of proper documents).
8.	Approximate total collection from radiology and laboratory services is Rs. 4 crores annually, who will be charged for it?	No change
9.	Who will collect the payment?	Refer to query 6 above
10.	What are the AMC/CMC contract for the various equipment?	List provided – Annexure B
11.	Regarding the profit sharing (12)	As per tender terms and condition
12.	Patient charges for lab investigation in OPD/IPD/Research patients	As per rate list attached (Category A) – Annexure A
13.	10% PBG is not high? Either you will able to make it 5% or not?	No Change
14.	What will happen if we charge as per the market price of patients	(a) All the OPD/IPD/other patients providing samples in CPL - AIIA will be charged as per rates of 'Category A' tests and NABL CGHS rates for other tests. For tests which are not available in AIIA / or in CGHS NABL rates -they will be charged at rates mutually agreed between the bidder and AIIA. Any change in these rates has to be brought to notice of AIIA before implementation (at least 15 days before) and should be changed by mutual agreement only. (b) For samples brought into AIIA from outside – they may be charged at rates as proposed by the successful firm and notified to AIIA in written. Profit % will have to be shared on the rates charged to the

		<p>patient.</p> <p>Any changes to be made in these rates have to be notified to AIIA 15 days prior. Any failure to do so will initiate penalty on the successful firm in terms of loss suffered to AIIA and additional minimum 10% over the same.</p>
15.	What are the financial implication of the workers' pay their PPE	The successful bidder will provide the PPE.
16.	What financial assistance can be provided by the hospital if we want to upgrade the radiology department	No Financial assistance will be provided.

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1.	As per clause no 8A the bidder request increased credibility of the lab cannot be ensured 2 years of experience, so to prepare for the participating in the NABL lab accreditation should be more than 5 years	No Change
2.	As per clause no 8C bidder request years of experience to run BMD USG and X-ray should minimum 5 years	No Change
3.	As per clause no 9, bidder request to change the annual turnover form 10 lakhs to at least 8 crores	No Change
4.	As per the clause 15A, bidder request to share the rate list developed by AIIA so that the profit sharing can be calculated	List provided – Annexure A
5.	As per clause no 24, bidder should have capacity to perform all tests proposed by AIIA, so please clarify that all tests proposed by AIIA either the bidder has to perform in house or outsource to other lab	The intention of the Tender is to make the resources and equipment available in AIIA functional. The test facilities available in AIIA have to be performed within AIIA. Other test facilities which are not available in AIIA may be outsourced to reputed NABL accredited lab at NABL CGHS rates. If CGHS NABL rates not available then at mutually agreed rates between AIIA and bidder firm. However, this has to be mentioned very clearly in the tender document. No subletting or outsourcing of tests can be done outside the tender document submitted. Any deviation from the submitted terms and conditions will lead to imposition of penalty or forfeiture of Performance Security.
6.	As per the clause no 26, all the existing equipment will be handed over the bidding firm and the	Attached – Annexure B

CMC/AMC of the equipment will be responsibility of the bidder. So it is request to clarify

A) Bidder wants to know the working condition of the equipments.

B) Either AIIA have to provide the troubleshooting history and remedial action taken by the service team per instrument wise or chronological wise

C) either AIIA have to declares the warranty of each equipment.

D) request to share the present AMC/CMC of the equipment

E) Regarding AMC/CMC charges, if the machine is purchased through tender process then it will be freeze. Then share those details.

F) Laboratory machine compatibility either open or close reagent system

G) Share the rates of reagent and consumer bills approved by AIIA for those machines

H) Keep the rates of the reagent in available machine on the high side then either the bidder is eligible to have their own option by placing alternate machine or not

in between the contract period is for 5 years if the equipment performs

E. The details are attached- Annexure B
These rates are binding to AIIA. However, the successful bidder may negotiate the rates with the equipment supplier to their suitability.

Details below -

- Beckman Coulter LH 780 - Closed
- Beckman Coulter Immunoassay Access 2 - Closed
- Meryl Autoquant 200i - open
- Meryl ELISA reader - open
- BD TB culture - Not functional till now

Attached for Proprietary items - Annexure C

It is expected to keep the existing equipment functional; the successful bidder thus may negotiate with the supplier for negotiation of rates.

If the equipment is not functioning properly in due course of time, the successful bidder may in mutual agreement to AIIA install a US FDA/CE certified new equipment at his own cost.

List attached - Annexure A (I)

The question is not clear. However, whatever parts of equipment are available will be used in the CPL/RL for the equipment as and when needed. They can't be taken out of the institute, without written permission of Competent Authority, AIIA. (J)

<p>become problematic then what should be done</p> <p>I) What are the minor equipments available in lab and radiology lab?</p> <p>J) Whether the AIIA is going to handover the hardware parts required for the diagnostic projects</p>	
<p>7. Regarding clause no 31, please complete the sentence</p>	<p>Records will be maintained by the successful bidder & countersigned by the representative nominated by Competent Authority, AIIA.</p>
<p>8. As per the clue no 33, the existing manpower for CPL/RL will to handed over to the bidder</p> <ol style="list-style-type: none"> 1. Whether the manpower plan for handing over permanent or contractual 2. What are the criteria for handover 3. Whether the given manpower will work as per requirement of the successful bidder or as per the working schedule 4. Whether manpower of AIIA leave the job till tenure contract, then whether AIIA will provide replacement of such manpower 5. How AIIA will guarantee that the handed man power will not get influenced by the private player in the local diagnostic fields 	<p><u>Reply to points of Query 8.</u></p> <ol style="list-style-type: none"> 1. Both, permanent as well as contractual. 2. Salary & Rules / regulation will be binding of AIIA. 3. They will work in hours as per prevailing hospital timings (in hours) applicable for AIIA staff (hospital). May be placed in rotation. 4. No Manpower will be provided. 5. The integrity of the employees is to be trusted for the same. However, no guarantee can be provided by AIIA.
<p>9. As per clause no 41, successful bidder have to organise CME program for faculty members and scholars twice a year, then who will bear the cost of such CME</p>	<p>Successful Bidder.</p>
<p>10. As per clause no 47, any delay or errors of reports may lead to imposition of fine on the bidding firm as decided by the committee- then the</p>	<p>TAT of the tests is as follows-</p> <ul style="list-style-type: none"> • Haematology, Biochemistry, Clinical Pathology, Serology - Next day

	<p>fine is imposing the delay on reports it is requested to define this TAT for each test. How AIIA is going to calculate the fine for delay</p>	<ul style="list-style-type: none"> • ELISA tests – After 15 days <p>Microbiology -</p> <ul style="list-style-type: none"> • Swab/Urine culture – After 24-48 hours • Blood culture – After 5 days • BACTEC MGIT 360 – After 5 days • M. tuberculosis by LJ medium – After 21 days • Fungal growth – After 24 – 48 hours • Tenia culture – After 15 days <p>Radiology Section –</p> <ul style="list-style-type: none"> • X- Ray – 24-48 hours • CT scan – 48 hours • USG – Same day • BMD – 24 hours
11.	<p>As per the clause no 49, no minimum number of tests will be there. Request: 1. since a bidder has to offer revenue share not less than 30% therefore it is requested to give a minimum guarantee of workload (samples/patients) 2. for category-b, it is mentioned that percentage of share to AIIA is 10% minimum. Then what is this 30%?</p>	<p>CPL/RL Existing workload provided - Annexure D</p> <p>No minimum guarantee of workload can be provided.</p> <p>Min. 30% - for category A</p>
12.	<p>As per clause no 50, EOI tender will be awarded for a period of 5 years and can be extended for another period of 5 years on mutually agreed on same terms. Request: request you to clarify that 10 years being a longer period, if any of the machines handed over by AIIA, stops working (not repairable) in between of contract period, in this case, whether AIIA will replace the said machine.</p>	<p>AIIA will not replace any equipment. In such case US FDA /CE certified new equipment may be installed by the vendor as per their convenience on their own cost.</p>
13.	<p>Request you to clarify the point no 52, when successful bidder is sharing revenue to AIIA. Then what is the need to deposit the amount to AIIA.</p>	<p>The amount deposited to AIIA is only the percentage/test shared to AIIA- on the basis of monthly books of accounts maintained by the successful bidder.</p>
14.	<p>As per the clause no 54, request you to clarify that-</p> <p>A) How the electricity consumption for CPL and RL will be calculated. Is there any separate meter for the same?</p> <p>B) Whether AIIA shall provide the power backup in case of power failure.</p>	<p>Separate meter will be installed.</p> <p>Power backup of AIIA can be utilised.</p>
15.	<p>As per clause no 53, the right for</p>	<p>AIIA will revise only category A list test rates as per the</p>

	revising the rates is with AIIA. Category-A is CGHS listed tests and why AIIA want to revise the CGHS approved tests. If any revisions of rates are to be done, then it can be done by mutual consensus.	request of the successful bidder. This is also applicable for those tests which are not in CGHS NABL list and are on mutually agreed rates. CGHS NABL rates revision is not in the discretion of AIIA.
16.	Request you to clarify that what is the price bid evaluation criteria? Since two categories are there, whether it will be separately calculated or clubbed together. Without knowing this crucial factor, how the bidder can quote the tender?	The bidder who will offer more profit.
17.	Request you to clarify that whether any preference shall be given to the bidder, who will be participating for both CPL & RL services.	Evaluation criteria as per terms & contract of tender clause.
18.	How AIIA will ensure that no referrals will be out for doing the tests?	All faculty, staff and students of AIIA will be informed about the test availability.
19.	As per clause no 43 &45, the bidder has to do cashless tests and it is mentioned that the amount towards these tests can be adjusted from the % of share offered to AIIA. If the value of the diagnostic investigations exceeds the amount equivalent to the monthly share to AIIA, then how the due amount to the bidder will be adjusted/ credited ?	Clause 43 and 45 - No change Clarification – Both the categories of test payment will be made separately by the successful bidder. For cashless tests, AIIA will pay to successful bidder on production of test lists on monthly basis with duly filled and forwarded lab requisitions with proper supporting documents (as BPL card copy/ Staff or student identity card etc.) only.
20.	How the cash will be credited from the patients? Whether the bidder can directly collect cash from the patients?	For CPL charges will be collected by the successful bidder. <u>An integrated IHMS/or software as required will have to be installed by the successful bidder for the same to facilitate and fasten the process of patient registration, entry for tests and result reporting.</u> Proper documentation of the charges collected has to be done, which can be cross checked and verified any time by representative nominated by AIIA.
21.	Whether bidder has to perform the tests on cashless to the patients, in case of various government schemes like Ayushman Bharat, RSBY? If so the how the bidder will get back the money? What will be the procedure for that?	AIIA is doing free tests only for BPL patients (only on production of proper documents) – which has to be followed by successful bidder. In future, other government health care schemes have to be implemented by the successful bidder only after the notification issued by Competent Authority of AIIA.
22.	Clause no 24 is about future scope of adding tests and machines where as in	Abundant extra space is available within the laboratory for utilisation.

	clause 22 states that no extra space will be provided. This is contradictory.	
23.	Clause no 46 states that laboratory in future has to take NABL accreditation. This is applicable only with clinical laboratory field.	Yes.

S. No.	QUERRY	REPLY
1.	Kindly provide us Test list and rate list of tests for Category A, which AIIA is doing in-house at their Labs.	List Provided – Annexure A
2.	Any specific test list and rates of tests which are not covered in CGHS as per point 15 (B)	Not at present. This provision is applicable for all test required in future.
3.	We are CGHS empanelled NABL lab, can't we work on CGHS NABL rates as per clause 15 (a) II?	Yes
4.	Will AIIA provide technician 24x365 days as per clause No. 23 ?	Clause not says yearly manpower for 24x365 days
5.	Presently how many man powers/technicians and pathologist are there for CPL. If any technician will be on leave who will provide technician as a replacement ?	List provided – Annexure E
6.	Total revenue of CPL per month and per year ? As 1.5 Cr is written but duration is written	Approx. cost calculated on 5 years based.
7.	Can we have current test wise test load of CPL in-house and outsource from April 19 to Dec 19 ?	List provided – Annexure D
8.	Can we take out all samples outside from CPL (AIIA) as our lab is across the road from AIIA ?	As per terms & condition of EOI
9.	Can we have list of research investigation ?	List provided – Annexure A
10.	In Delhi GST is not applicable on pathology ?	As application rules of GST, whatever may be.
11.	Can we have equipment details using by CPL ?	Yes list attached. – Annexure B
12.	Clause no 51 and 52 is contradictory with in itself as payments terms are not clear, please provide clarity.	Please refer clause no. 35 of EOI.
13.	You have already asked EMD, then please make us understand the use of clause no 65, where you are asking 10% performance security deposit of total contract value	As per Term & Conditions of contract
14.	No details is there in Annexure II for bidding	The details of Category A test list is attached –

other than AIIA test list (category A) and CGHS NON NABL test list (Category B).	Annexure A For Category B – NABL CGHS rates will apply.
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1.	Page 5, Item no 15: Rate list of Category A tests is not provided. Please provide the test list along with prescribed rates.	List provided – Annexure A
2.	Eligibility Criteria: WE suggest that it should be two bid tender system (For technical and Financial bids) which will encourage QUALITY LABS to provide you testing services. Since yours is a research institute, quality reports from technically competent and state of the art labs will enhance the quality of research in your esteemed institute. Financial bid to be opened, once technical bid is qualified.	No Change
3.	We will suggest to adopt QCBS (Quality and cost based system) criteria for this purpose, wherein 60% weightage to technical score and 40% weightage to Financial bid is suggested.	No change
4	Page 8, Item no. 54- Considering low value of monthly business, we will request authorities to bear electricity charges.	Electricity charges for radiology laboratories will be borne by AIIA. However, for Clinical Pathology laboratory (CPL) – separate meters will be installed in the three/four rooms handed over to the successful bidder. They have to pay for the electricity as per the bill readings on monthly basis to AIIA.
5	Kindly provide qualification and experience of deployed manpower for lab. Also, are they contractual or permanent staff.	List provided – Annexure E
6	Per month business value is very low- Rs 2.5 lac (approx..). This makes the venture, a loss making one. Hence, we shall request authorities to outsource these tests to our nearby lab (3-4 Km away). WE commit to provide the requisite TAT.	The equipment installed in AIIA needs to be maintained functional. Outsourcing is allowed only for test facilities not available in AIIA, which have to be documented very clearly in the tender document itself regarding the Name and address of outsourcing Laboratory and tests outsourced. The prices of test outsourced will be as per either category A test or CGHS NABL rates (for those tests not being done in AIIA but present in CGHS NABL rates) or on mutually agreeable rates. The bidders have to share the rates for the tests performed by them but not mentioned in the above two categories to AIIA.
7	Payment: Will patient pay directly to lab (as	Payment will be collected by the successful bidder

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	per agreed rates) or the institute will reimburse the lab.	in AIIA directly from the patient.
8	Last date of bid EOI submission to be extended by another 15 days.	Accepted

S. No.	QUERRY	Reply
01	As per rule 170(i) of General Finance Rules 2017 as amended vide Govt. of India Min of Finance Memorandum No. F 2012/2014-ppd (pt) dt. 25 July 17 MSME and Start-ups are exempted from paying Earnest Money Deposit (EMD) and documents fee. This may be included in tender.	The Bidder should submit document fee & EMD exempted certificate issued by the Department of Micro, Small & Medium enterprises MSME)
02	As per rule 170 (i) of General Finance Rules 2017 as amended vide Govt. of India Min of Finance Memorandum No. F. 2012/2014-PPD(Pt.) dt. 25 July 17 MSME and Start-up are exempted from paying Earnest Money Deposit (EMD) and document fee. This may be included in tender.	The Bidder should submit document fee & EMD exempted certificate issued by the Department of Micro, Small & Medium enterprises MSME)
03	1) The eligibility criteria does not indicate about consortium. Please confirm whether consortium is allowed ? 2) As per Govt. of India Min of Finance Dept. of Expenditure Procurement Policy Decision Memorandum No. F. 2012/2014PPD (Pt.) dt. 25 July 16 and rules 173 (i) of General Finance Rules 2017 the condition of Prior Turnover & prior experience may be relaxed for STARTUPS & MSME. Therefore, this may be included in tender.	1) No change 2) No change
04	Kindly share AIIA rate list and number of investigations for radiology & pathology.	Attached list – Annexure A Attached List – Annexure D
05	As per Government guidelines kindly add EPF & ESI.	No change
06	Kindly share list of equipment	Attached list – Annexure B

07	Kindly share list of equipment which need to be installed.	Any equipment required as per further need may be installed by the vendor.
08	<p>As per current Government Guidelines- Ministry of Micro, Small and Medium Enterprises as per MSMED Act 2006, the award of contract shall be made as follows:</p> <p>Award shall be given to L1 bidder if Li bidder is a MSME.</p> <p>(a) In case L1 bidder is not a MSME, then all the MSME vender (s) who have quoted within the range of L1+15%, shall be given the opportunity in order of their ranking (starting with the lowest quoted MSME bidder and so on) to bring down its price to match with L1 bidder. Award of contract shall be placed on the price quoted by L1 bidder.</p> <p>(b) In addition provision of mandatory procurement from MSME to the tune of 25% and special provision of 3% to MSME owned by women should be included in tender.</p>	No change
09	<p>1) As per Govt. of India Min of Finance Dept. of Expenditure Procurement Policy Decision Memorandum No. F. 2012/2014-PPD (Pt.) dt. 25 July 16 and rule 173(i) of General Finance Rules</p> <p>2017 the condition of Prior Turnover & Prior experience may be relaxed for STARTUPS & MSME. Hence condition of NABL accreditation for clinical pathology may be relaxed for MSME and Start-ups.</p>	No change
10	Please note that the revenue for radiology will be low and the expense including radiologist salary will be huge, we therefore request you to kindly remove the clause that CMC/AMC of radiology equipment will be responsibility of bidder so that this project becomes viable for radiology potential bidders.	<p>Accepted.</p> <p>As per the discussion with competent authority the clause of AMC/CMC of radiology equipment for the successful bidder is removed.</p>
11	Kindly share list of existing manpower which will be handed over to successful bidder.	Attached – Annexure E

12	Please note that the revenue for radiology will be low and the expense including radiology salary will be huge, we therefore request you to kindly remove the clause that cost of electricity including air conditioning will be charges by AIIA so that this project becomes viable for radiology potential bidder.	Accepted as per discussion and approval of Competent Authority for Radiology section.
13	For radiology we request you to kindly remove the clause that profit sharing offered for category A tests to AIIA should be minimum 30% and for category B tests should be minimum 10% so that the project becomes viable. Profit share figure should be left to the bidders.	<p>For radiology section – As per the approval of Competent Authority, AIIA -in place of profit sharing, the tele-radiology charges have to be quoted for -X- Ray and CT scan.</p> <p>For this, the required setup for sharing of films will have to be done/installed by the successful bidder.</p> <p>For USG – It has been decided that the bidder will arrange for the Radiologist and <u>charge AIIA with cost per USG</u> from the rates charged by AIIA from the patient, as the charge for Radiologist. For USG the consumables and the CMC will be borne by AIIA, initially. After one year the terms and conditions of the USG tender may be reviewed by both the parties for any change of terms and conditions.</p> <p>For radiology, the charges will be collected by AIIA from the patient as per the billing policy and AIIA will pay for the teleradiology charges and USG charges to the successful bidder on monthly basis, as per the documented records.</p> <p>Discrepancy, if any in above payments may be represented to Competent Authority, AIIA with proper documents for settlement.</p>

LIST of Annexures

- Annexure A – Price list of investigations done in AIIA – CPL and RL
- Annexure B – List of equipment and AMC/CMC details – CPL and RL
- Annexure C – Proprietary item Rate list – CPL
- Annexure D – previous work load – CPL and RL
- Annexure E –Existing permanent and contractual Manpower – CPL and RL