Expression of Interest (EOI)

For Empanelment of Hospitals for Providing Kidney, Liver, and Hematopoietic Stem Cell Transplantation (HSCT) Services at CGHS Rates Under the National Rare Disease Policy, 2021

1. Background

The Ministry of Health and Family Welfare, Government of India, has implemented the National Rare Disease Policy, 2021, with the aim to provide accessible and affordable care to patients suffering from rare diseases, including those requiring organ and bone marrow transplantation.

In line with this policy, the COE (MAMC & Associate LNH), Dept of Medical Genetics, MAMC, New Delhi, invites Expression of Interest (EOI) from eligible and qualified hospitals for empanelment to provide Kidney, liver, and Hematopoietic Stem Cell Transplantation (HSCT) services as per approved CGHS/State Government package rates.

2. Objective

To empanel eligible hospitals as per pre-determined criteria for the provision of specialized transplant services (kidney, liver, and bone marrow) for patients identified by Centre of excellence (COE) and supported under the National Rare Disease Policy 2021.

3. Financial support

Financial support for the treatment of patients with rare diseases requiring bone marrow, liver, or kidney transplants will be provided by the Ministry of Health and Family Welfare, Government of India (As per Annexure I). This support is offered under the National Policy on Rare Diseases, 2021, and will be disbursed through the COE (MAMC & Associate LNH), Dept of Medical Genetics, MAMC, New Delhi

4. Scope of Services

Empanelled hospitals shall:

- Provide kidney and/or liver and/or bone marrow transplantation services.
- Charge as per pre-approved package rates at different stages of procedure (as per the attached file of rate list at Annexure I).
- Ensure pre and post-transplantation are as per standard medical protocols.
- Maintain proper documentation and reporting of all treatments and out comes.
- Coordinate with the designated nodal centres and authorities under the policy frame work.
- Encourage and support the concerned COE for capacity building for transplant services.

5. Medico-legal aspects

- Any medico-legal liability, arising out of such services, shall be the sole responsibility of the
 concerned hospital and shall be dealt with, by the concerned empanelled hospital. Services
 must be provided by the hospitals, duly in consonance with the terms and conditions of the
 agreement.
- It shall be the duty and responsibility of the hospital at all times to obtain, maintain and sustain the valid registration, high quality standard of its services and healthcare and further to have all the statutory/mandatory licenses, permits and approvals of the concerned authorities as per the existing law.

6. Eligibility Criteria

Interested hospitals must meet **ALL** of the following criteria:

- The hospital must be empanelled either with respective state government, or with CGHS, and must hold valid registration along with the necessary approvals.
- Accreditation by NABH(preferred).
- The hospital must be comprehensively equipped to provide quality paediatric and/or adult transplant services, including adequate infrastructure, trained human resources, appropriate equipment, and full compliance with statutory and medico-legal requirements.
- The hospital must be legally authorized and/or licensed to perform organ and/or bone marrow transplants in accordance with applicable national laws.
- A dedicated transplant team with certified specialists is mandatory.
- The applicant hospital's BMT unit should have been operational for at least 5 years as of the date of application.
- The hospital must have performed a minimum of 150 paediatric transplants overall in the last 3 years, including at least 50 allogeneic hematopoietic cell transplants(HCTs) for non-malignant conditions, of which at least 25 must have been for Rare Diseases.
- The hospital must also have performed a minimum of 30 liver transplants and at least 50 renal transplants within the last 3 years.
- The hospital must have a demonstrable track record of conducting organ and/or bone marrow transplants over the last 3 years, with documented evidence of as per above mentioned numbers for different organs.

Note: In case the number of transplants falls short, the expert committee may exercise discretion.

7. Empanelment

- Hospital should be willing to accept approved rates for transplant procedures and related care
 ((i.e. cost of procedure, hospitalization, medicines and other consumables etc.). Hospital shall
 not charge more than pre-approved rate/rates, at any cost and no money shall be charged from
 the family of the patient. Diet Charge for the patient and the attendant is inclusive in the
 package and no extra money would be provided for that purpose
- The empanelled hospital shall honour permission letter issued by the competent authority and carry out the procedure/ provide treatment/ investigations, services required in the permission letter. These shall be provided on cashless basis. The hospital should not use money from any other government or non-government schemes except NATIONAL RARE DISEASE POLICY -2021
- Patient will be referred with a proper referral form, signed by the competent authority.
- Direct admission without referral forms should not be entertained.
- At no point during the treatment will the hospital ask the attendants or the beneficiary to
 procure or provide the medicines/consumables/other logistics/equipment or accessories from
 outside and will provide the treatment within the package rates.
- The empaneled centre will investigate/treat the beneficiary patient only for the condition for which they are referred and for any other additional procedure planned, a separate permission will be required. In case of any unforeseen emergencies while admitted for the approved procedure, necessary life saving measure are to be taken and concerned authorities may be informed subsequently with justification.
- These patients must be entertained on priority basis and can't be denied treatment on the pretext of non-availability of beds, failing which, treatment may be arranged from other hospital and extra expenditure incurred on treatment of the patient will be recovered from empaneled hospital against incoming/ pending bills/ security money. Refusal either in writing or verbal communication, will form the basis of deduction.
- After receiving the permission letter, the hospital has to perform the procedure within the
 prescribed period of time, one month positively and in case of critical cases, as early as
 possible as per the requirement of treatment protocol.
- Empaneled centre shall provide the services totally in consonance with the terms & conditions incorporated in the agreement. In case of violation of the provisions of the agreement by the empaneled centre there will be forfeiture of payment of the incoming/pending bills. For over billing and for unnecessary procedures, the extra amount so charged will be deducted from the bills and the Centre of excellence (COE) reserves the exclusive right to terminate/discontinue the contract at any point of time.

The Institution will be de-empaneled:-

If the Hospital fails to provide any or all of the services for which it has been recognized during the period(s) specified in the Agreement, or during any extension period thereof, if granted by the COE, pursuant to the conditions of Agreement

Or

If the Hospital is found to be engaging in corrupt or fraudulent practices in competing for or in executing the Agreement.

Or

If the Hospital is found to be involved in or associated with any unethical illegal or unlawful activities, then in that eventuality, the Agreement would be summarily suspended by the concerned COE, without issuance of any notice and subsequently the Competent Authority may terminate the Agreement, after issuing a Show cause notice to that effect and after duly considering the reply, if any, received within 10 days of the receipt of the show cause notice. Terms and conditions could be modified, at sole discretion, of the Competent Authority of COE.

8. Application Process

Interested hospitals must submit the following documents:

- 1. Cover letter expressing interest.
- 2. Details of the hospital including ownership, accreditation, transplant licenses, and infrastructure.
- 3. List of transplant services provided, along with the number of transplants conducted annually (for the past 3 years) as per eligibility criteria mentioned above
- 4. Declaration of willingness to abide by pre-approved rates.
- 5. Copy of proof of empanelment for any government/non-government (if anye.g.CGHS, state health schemes, insurance panels, etc.).

9. General Conditions

- The institute reserves the right to accept or reject any or all EOIs without assigning any reason
- This is not a tender or Request for Proposal (RFP); it is an invitation for EOI only.
- Empanelment under this EOI does not guarantee allocation of patients or funding.
- Interested hospital must submit their interest along with essential document as mentioned above at point 6 within 14 days of expression of EOI.
- Roles & responsibilities and other aspects of the engagement will be guided by separate agreements/ MoUs.

Enclosures:

 Annexure I: Government approved CGHS/DGHS/State Govt Rate List for various Transplantation Services (Attached)

For more details, contact

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Last date for receipt of letters of expression of interest: within 14 days of publication of this advertisement.

Annexure I: List of Government Rates CGHS/other State Government schemes

Organ/Typeof Transplant	Pre- Transplant Cost (₹)	Transplant Cost (₹)	Post- Transplant Follow-Up(₹)	Additional Costs (₹)	Total Estimated Cost (₹)			
Liver Transplant (LiveDonor-)	2,50,000/- (Evaluation)	11,50,000/-	Included in package [@]	Excludes certain drugs, blood products	14,00,000/-			
Liver Transplant (Cadaveric-)	N/A	11,00,000/-	Included in package [@]	Excludes certain drugs, blood products	11,00,000/-			
Bone marrow transplantation								
Matched Sibling	50,000/-	10,50, 000/-	1,00,000/-	nil	12,00,000/-			
Matched Unrelated	50,000/-	12,50,000/-	2,00,000/-	8,00,000 (Registry Charges)	23,00,000/-			
Haplo-identical (without TCR alpha/beta depletion)	1,50,000/-	15,00,000/-	2,00,000/-	Nil	18,50,000/-			
Haplo-identical (with TCR alpha/beta and CD45RA Depletion)	1,50,000/-	15,00,000/-	2,00,000/-	12,50,000/- (Depletion kits)	31,00,000/-			
Renal Transplant CGHS(2023update)and DELHI AROGYA KOSH** DGEHS								
Renal transplant	Induction cost**-39,526/- Intervention for acute rejection**- 107,797/-	Rs 84,000/- to4,46,200/-	1.4 lakhs 12 month spost- transplant**		Variable and may range from 3-8 lakhs			

Break up of Renal Transplant rates

Organ/Type of Transplant	Pre-Transplant Cost (₹)	Transplant Cost (₹)	Post-Transplant Follow-Up (₹)	Additional Costs (₹)	Total Estimated Cost (₹)
Related Donor Transplant		200,000/- (Non- NABH)/ 230,000/- (NABH) 215,595/- **	Immunosuppressant therapy included Rest investigations-variable	Nil	Variable and may range from3-8 lakhs
Spousal/Unrelated Donor Transplant	Donor Nephrectomy (open):28,750/- (Non-NABH) / 33,063/-(NABH) Donor Nephrectomy (Lap)46,000/- (Non-NABH) / 52,900/- (NABH) Pre-Transplant Tests: Varies Based on Specific tests.	300,000/- (Non- NABH) / 345,000/- (NABH)		Nil	
ABO Incompatible Transplant		490,000/- (Non- NABH) / 563,500/- (NABH)		Nil	
Swap Transplantation		388,000/- (Non- NABH)/ 446,200/- (NABH)		Nil	
Cadaver Transplantation		83,300/- (Non- NABH)/ 95,795/- (NABH)		Nil	