

CORRIGENDUM

REQUEST FOR PROPOSAL FOR SELECTION OF MANAGED SERVICE PROVIDER FOR

BIHAR STATE HEALTH SYSTEM DIGITIZATION



Tender Reference Number: BMSIC/MSPBSHSD/22-01

15 February 2022

Tender Issuing Authority
Bihar Medical Services & Infrastructure Corporation (BMSICL)
4th Floor, Bihar State Building Construction Corporation Limited, Hospital
Road, Shastri Nagar, Patna-800023, Bihar, India
Email: md-bmsicl-bih@nic.in

Suggested Changes in the RFP as per the Queries received

	Main Clause	Original Clause	Revised Clause
1.	Main Clause 3.1. Hospital Information Management System (HIMS) — Core Application and Modules	HIMS core application caters to below functional modules to achieve the key objective of maintaining the health data across multiple public health facilities in the state: 1. Registration Management 2. Appointment Management 3. Billing Management 4. Doctor Desk (General Electronic Medical Record [EMR]) / OPD Management 5. IPD Management 6. Laboratory 7. Radiology 8. Inventory Management 9. OT Management 10. Pharmacy Management 11. Nursing Desk 12. Casualty/Emergency 13. Medico-Legal Case / Report (MLC / MLR) 14. Queue Management System 15. MIS Reports 16. Quality Management	HIMS core application should cater to the below functional modules to achieve the key objective of maintaining the health data across multiple public health facilities in the State: 1. Registration Management 2. Appointment Management 3. Billing Management 4. Doctor Desk (General Electronic Medical Record [EMR]) / OPD Management 5. IPD Management 6. Laboratory 7. Radiology 8. Inventory Management 9. OT Management 10. Pharmacy Management 11. Nursing Desk 12. Casualty/Emergency 13. Medico-Legal Case / Report (MLC / MLR) 14. Queue Management System 15. MIS Reports 16. Quality Management System 17. Housekeeping, Linen and Laundry 18. Diet Management 19. Store management 20. Roster Management 21. Leave Management
		System 17. Housekeeping, Linen and Laundry 18. Diet Management	

	Main Clause	Original Clause	Revised Clause
2.	3.2. Enterprise Resource planning	MSP is responsible to implement a full-fledged ERP at institutional level for all health facilities in State.	MSP is only responsible to integrate with the existing state ERP applications.
3.	3.10. Ayushman Bharat Digital Mission (ABDM) Roll- out	MSP will be responsible for successful roll-out and adoption of ABDM in State	MSP will be responsible to support ABDM roll-out, population of registries will not be part of the scope for MSP. MSP will be responsible to integrate the proposed solution to ABDM (specially ABHA app)
4.	Clause 3.5 Page 33 Integrations	The proposed solution needs to integrate with existing state applications and solution to track and monitor beneficiaries under other program. Integration with other State-based health programs is also envisaged and should be taken up by MSP.	The current list of application to be integrated is attached in annexure 1. Any additional application to be integrated shall be considered by MSP as and when informed by GoB.
5.	3.1.19 Technical Specification 7. PACS	7. PACS	PACS will not be in the scope of work for the MSP
6.	Section 4 (g) Page 40 Schedule of services	g) Data migration from existing (legacy) applications to the proposed (new) applications.	As per RFP, MSP will be responsible for application integration to legacy applications (wherever needed). SHS will facilitate and support API availability from legacy applications, wherever possible. No legacy data migration activity is required.
7.	3.12. Training & Capacity Building	Training (including Technical training, Functional training etc.) of end-users is essential for ensuring that the implementation actually put to use and drive adoption sustainably	The current staffing numbers are attached in Annexure-2. The numbers could vary +/- 20% of the total numbers.
8.	8.1.7.a	Document Management System (DMS)	The OCR feature should be available for use as and when required

	Main Clause	Original Clause	Revised Clause
		• OCR	
9.	8.1.7. a	Multilingual	Only English and Hindi
10.	Project Experience – TQ- 3	The bidder or consortium members have experience in Government Advisory cum Supervision & Monitoring related engagement involving mobilization of minimum of 100 team members on ground and providing state-wide implementation support in Infrastructure / Development sector projects in any Government / State Government / PSUs in last five years (from FY 2016-21) I. If project cost is more than INR 200 Cr. (maximum up to 03 projects) — Max.03 Mark II. Additional 01 marks if the project is executed in health domain sector involving deployment of more than 200 personals at the State/Dist./Block level for the any organization of central or State or PSUs	Bidder's Experience: The bidder or consortium members have experience in Government Advisory / IT / ICT / Supervision & Monitoring related engagement involving mobilization of minimum of 100 team members on ground and providing state-wide implementation support in Infrastructure / Development sector projects in any Government / State Government / PSUs in last five years (from FY 2016-21) I. If project cost* is more than INR 200 Cr. (maximum up to 03 projects) – 03 Marks II. Additional 01 marks if the project is executed in health domain sector involving deployment of more than 200 personals at the State/Dist./Block level for the any organization of central or State or PSUs III. Additional 01 mark if the project is executed in State of Bihar *The project cost means overall cost of the project.

	Main Clause	Original Clause	Revised Clause
		III. Additional 01 mark if the project is executed in State of Bihar	
11.	Project Experience – TQ- 5	Other Relevant Certification: The bidder (in case of Consortium, any member can fulfil) shall have a certification pertaining to ISO 9001:2000, ISO 27001:2013, ISO 20000 -1 :2018 I. Any one certification mentioned from	Other Relevant Certification: The bidder (in case of Consortium, any member can fulfil) shall have a certification pertaining to ISO 9001:2000, ISO 27001:2013, ISO 20000 -1 :2018 I. 1 (One) Mark each for each certificate produced (Max up to 3)
		above: 01 mark In case of all certifications available – 03 marks	
12.	Project Experience – Documentary evidence & Location of Project Execution		 I. All the Project mentioned PQ and TQ should have been executed in India Only. II. Additional clause for Documentary Evidence: Endorsement from Authorised Signatory of company clearly stating Project Value, Scope of Work and Status of the Project will be valid. III. A certificate from the Statutory Auditor/CA of the Bidder stating the project details vis a vis the criteria stated in the RFP stating value of the Project is mandatory.
13.	Force Majeure – 15.7	Sub Clause - 15.7.1.1. For the purpose of this contract, 'Force Majeure' means an event which is beyond the reasonable	Sub Clause - 15.7.1.1. For the purpose of this contract, 'Force Majeure' means an event which is beyond the reasonable control of the party, is not foreseeable, is unavoidable, and makes a party's performance of its obligations hereunder impossible or so

	Main Clause	Original Clause	Revised Clause
		control of the party, is not foreseeable, is unavoidable, and makes a party's performance of its obligations hereunder impossible or so impractical as reasonably to be considered impossible under the circumstances, and subject to those requirements. Examples include, but are not limited to, pandemic/epidemic, war riots, civil disorder, earthquake, fire, explosion storm, flood or other adverse	impractical as reasonably to be considered impossible under the circumstances, and subject to those requirements. Examples include, but are not limited to, war riots, civil disorder, earthquake, fire, explosion storm, flood or other adverse
14.	Timelines and Payment Schedule	Implementation period – 70% Operation & Maintenance – 60% (Typo error)	Implementation period – 70% Operation & Maintenance – 30%
15.	Format for Self- declaration of Technical Capability	In accordance with eligibility requirements of this tender process, we <name bidding="" firm="" of="" the="">> wish to declare that we have an experience of implementing following solution in Digital Health Domain</name>	Please refer Annexure-3
16.	Annexure-IV: Project Details Certificate by Chartered Accountant /Statutory Auditor	Table for audited statement	Please refer annexure 4

	Main Clause	Original Clause	Revis	ed Clause		
17.	Suspension and Termination- 14.3 (By the client)	ii) Shall request the MSP to remedy the failure within a period not exceeding 45 calendar days after receipt by the MSP of the notice of suspension	ii) Shall request the MSP to remedy the failure within period not exceeding 30 calendar days after receipt of notice of suspension The client may terminate this contract in case of the occurrence of any of the events specified in paragraph through (d) of this clause occurs. In this case, the client give at least 30 calendar days written notice of terminate to the MSP for events referred to in (a) to (d).			
		The client may terminate this contract in case of the occurrence of any of the events specified in paragraphs (a) through (d) of this clause occurs. In this case, the client shall give at least 45 calendar days written notice of termination to the MSP for events referred to in (a) to (d). 14.3.2.1.1.d) If, as the result of Force Majeure, the MSP is unable to perform a material				
18.	Number of days to	portion of the services for a period of not less than 90 calendar days.	SI No	Payment Description	Maximum number of days to release	
	release payment		1	70% of the payment on submission of invoices	payment 7	
			2	Remaining 30% of the payment (Signoff from the competent authority/Authorized signatory)	30	

	Main Clause	Original Clause	Revised Clause
			In case of delayed payment to MSP as per the stipulated timeline in the RFP and corrigendum, MSP will be eligible to be paid interest as per government admissible rates.
19.	Timelines and Payment	Timelines for deliverables	If the delay in timeline for deliverables is due to delay in response from authorities, then the timeline should be extended by the number of days difference between request submission date and action taken by authority date.
20.	16. Timelines and Payment Schedule	Escrow Account and payments	Payment to MSP (in case of consortium to lead partner) shall be done directly through Escrow Account.
21.	9.14 Financial proposal	9.14.3. The Financial Proposal should include all the GST/Service Tax, other Taxes, Duties, Cess, etc.	The Financial Proposal should exclude all the GST/Service Tax.
22.	Annexure- VIII: Financial Bid	Financial Bid Format	Refer Annexure 5

Annexure-1

List of Applications (Tentative)

Maternal & Child	Services	Finance/Payment
RCH Portal	PM Dialysis	PFMS
Anmol	e-Raktkosh	CFMS
SNCU	104 Emergency Services	ASHWIN
Immunization	Ambulance Service	Tally
e-VIN	e-Sanjeevani	Supply Chain
Adolescent	PMJAY	e-Upkaran/EMMS
RBSK Bihar	HR	e-Aushadhi (DVDMS)
Disease Specific	Bihar Government HRMS	MIS
NCD	Office Management	HMIS
IHIP	e-Office	Kala Azar MIS
		DHIS2

Annexure-2

Human Resource Numbers in Health Systems in Bihar

There are approximately 30,000 institutional users in category of Doctors, nurses, administrative staff, Data entry operators etc.

Additionally, there are ASHAs and ANMs across all the districts.

Annexure-3

Format for Self-declaration on Technical Capability

	[To be submitted on Bidd	der's Company Letterhead]	Date:
To,			
The Managing I BMSICL Patna, Bihar	Director		
Sub: Self Cer	tification for Technical Capability		
Dear Sir,			
Bidding firm>>_	with eligibility requirements of the wish to declare that the light that the ligh	t we have an experience of	implementing following
Sr. No.	Project Name	Modules	Client Details Along with Contact Details and Email
		Yours faithfully,	
		Signature of th	e authorized signatory
		Name	
		Designation	
		Address	
		Phone	
		Email	
Note: - To be pr	ovided by Bidder or any member o	f Consortium (in case of Co	nsortium

Annexure - 4

Project Details Certificate by Chartered Accountant / Statutory Auditor

[To be submitted on letterhead of Statutory Auditor/ CA]

TO WHOM IT MAY CONCERN

Order Date	Project Name	Domain/ Services	Total contract value (INR)	Revenue/Payme received (INR)
	ces as disclosed by th		out projects in the abov nts produced before us	
For				
M/s				
Chartered Acc	ountants			
Signature				
Name of Chart	ered Accountant / St	atutory Auditor		
Membership N	lo. /			
Seal/ Stamp				
Date				
Date				

Annexure 5

Financial Bid Format

(To be submitted online only on e-Tender portal- http://eproc.bihar.gov.in. Submission of the hardcopy of financial bid may lead to disqualification of the Bidder.)

Below format is just for reference

Date:

S.No	Particulars	Cost (In Rs.)	Applicable	Taxes (in %)	Total
			Taxes (in Rs.)		Amount
					(in Rs.)
1	Design, Development,				
	Customization, Configuration,				
	Integration, Training,				
	Implementation and				
	Maintenance of Bihar State				
	Health System Digitization for a				
	period of 5 years (2 year of				
	Implementation + 3 Years				
	O&M). Also provide financial				
	break up by scope of activities.				
Total					

^{**}BMSICL/SHS may consider utilizing the services of bidder/MSP to implement/accommodate any change request that are not part of the scope of this RFP on the person-month utilization concept. Further, the person-month (300 Person Month) bundle rate should be quoted by the MSP (which will be negotiable) as a separate component and not part of the main financial bid to be evaluated.

The price quoted above is inclusive of all types of costs, expenses and any other financial cost or implication.

The price quoted above is exclusive of all types of GST/ service tax. to be paid separately at actuals at the time of invoicing.

We hereby agree to abide by all the terms and conditions laid down in the tender documents.

