

# Corrigendum-1

Tender Document No.: NIHFW/CHI/IHIP/Tender/2017

## Development and Implementation of Integrated Health Information Platform (IHIP)

24<sup>th</sup> January 2017

**This Corrigendum shall now be a part of Tender issued on 03.01.2017 by Centre for Health Informatics.**

1. The Last Date and Time for bid submission is extended till **6<sup>th</sup> February, 2017 up to 3:00 PM**
2. The Earnest Money Deposit (EMD) in Page no.8, section 1.1 “Fact Sheet” & Page no. 16 section 3.4.3 is changed to an amount of **Rs. 1.0 Crore** from current amount of 25 Lakhs. The EMD from Nationalized and **Scheduled Commercial Banks** will be accepted.
3. Page 22, section 4.1, “Pre-Qualification Criteria”, Clause no 3, Turnover from HIE Implementation is replaced with following table:

S. No.	Prequalification Criteria	Proof Required
<b>3</b>	<p><b><u>Turnover from HIE Implementation</u></b></p> <p>In case of Sole bidder, the bidder should also have a minimum INR 10 crore turnover from Health Information Exchange business (Only Software Components) in the last five financial years ending 31<sup>st</sup> March 2016 (as per the published Income Statement).</p> <p>In case of Consortium, at least one consortium member should have INR 10 Crore turnover in the last 5 financial years ending 31<sup>st</sup> March 2016(in Health Information Exchange business (Only Software Components)).</p>	<ul style="list-style-type: none"> <li>• Audited financial statements (reflecting overall turnover)/ annual report containing financial statement for the last Five financial years</li> <li><b>Or</b></li> <li>• A certificate duly certified by the statutory auditor/CA of the bidder clearly mentioning the total turnover of the bidder supported by work order/client certificate As per Annexure-1, <b>Form – 4(a)</b> enclosed</li> </ul> <p><b>Note: In case turnover in foreign currency, the value should be shown in INR as per the conversion rate prevailing at the time of award of respective works.</b></p>

4. Page 24, section 4.1, “Pre-Qualification Criteria”, Clause no 10 is replaced with following table:

S. No.	Prequalification Criteria	Proof Required
<b>10</b>	Lead Bidder should have a CMMI Certification with minimum Level 3.	Copy of the valid certificate from authorized certification agency

5. In page no. 35, section 6.2.1 “Electronic Health Record” is replaced with **“Health Information Systems (HIS)”**
6. In page no. 36, section 6.2.1 following point has been added:

*“9. Medical insurance module interface: This module will facilitate to obtain relevant medical data of the insured patients from IHIP to different medical insurance companies.”*

7. In Page no. 36, section 6.2.2 “Health Information Exchange” the phases are replaced with the following phases<sup>1</sup>:
- a **Phase-1, Part (A)**
    - Two State
    - Two Central Government Hospitals
  - b **Phase-1, Part (B)**
    - One State
    - Three Central Government Hospitals
  - c **Phase-2**
    - Four States/UT
    - Two Central Government Hospitals
    - One Large corporate Chain of Hospitals
    - e-Hospital-NIC
  - d **Phase-3**
    - Three States HIS/EHR
    - ESI-HIS
    - CGHS-HIS
    - Two public health systems (MCTS, Nikshay) which hold clinical data.
    - HIS developed by CDAC Noida
    - Design, Development of EHR and implementation in five tertiary care hospitals

The bidder is required to integrate these currently functional systems with the HIE. However ***provision of data entry into these systems is not part of the scope*** of the work of IHIP.

8. The Data Centre, DR along with necessary compute infrastructure will be provided by the CHI based on the requirements assessed by the Successful Bidder.
9. Delay in achieving milestones- Appropriate time credit will be given to the successful bidder for delays attributed to the government/client.
10. Successful bidder will have to build following registries under IHIP
  - a. Patient Registry and MPI – To be developed afresh
  - b. Provider Registry – To be developed afresh
  - c. Facility Registry- Existing NIN portal (nin.nhp.gov.in) to be further developed, enhanced and integrated. NIN Portal will be integrated with **Six legacy systems** which hold records of healthcare facilities i.e. HMIS Web Portal, MCTS, IDSP, Nikshay, Rohini, Clinical Establishment Registration System. Source code, data of NIN would be shared with the bidder.
11. For Section 6.2.4, “Portal”. Additional Point “The portal should be built responsive to web design where the layout changes based on size and capabilities of the device (such as Mobile Phone, Laptop, Tablet etc.)”
12. In page no. 59, the table given under section 7 “**Deliverables, Milestones and Timelines**” is replaced with the following table:  
The timeline will start from the date of Lol or work order and is considered as ‘T’

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<sup>1</sup> See Annexure-2 for details of the Systems to be integrated with HIE under IHIP

S.No.	Deliverable	Time Lines (Weeks)
<b>Mile Stone -1 (Project Preparation)</b>		
1.	Project Plan and Inception reports	T+1
2.	Project Goals & Objectives document	
3.	Project Organization, Standards and committee	
4.	Implementation Strategy Document	
5.	Project Charter	
6.	Kick-off presentation document	
7.	Project Preparation Sign-off Document	
8.	Detailed Project Work Plan/ Inception Report for Design, Development & Implementation of solution including Phased implementation	
<b>Milestone-2 (Study of Government Processes/ Systems and Preparation of Control Specification Document for IHIP)</b>		
9.	Organization Structure –Document	T+4
10.	Gap Assessment Report	
11.	FRSM Document	
12.	SRS Document	
13.	Risk and Contingency Planning documents	
14.	Test server & Development server Installation Document	
15.	Hardware sizing specification and other documentations.	
16.	Delivery of any External Software	
<b>Milestone-3 (Designing and Development of IHIP)</b>		
17.	User interface designs;	T+8
18.	Presentation of POC (Proof of Concept)	
19.	Customization / Development of IHIP	
20.	Customization / Development of Web Portals	
21.	Designing of Registry Services	
22.	Weekly Progress Report	
23.	Review of completed activities	
24.	TRSM Documents	
25.	Identifying & Resolving of any problems or issues	
26.	Test server & Development server Installation Document	
27.	And any other document, as may be necessary.	
<b>Milestone-4 (UAT and Testing)</b>		
28.	Test plans, Test scenarios,	T+12
29.	Comprehensive set of UAT Test Cases and sample test data	

30.	Performance Benchmarking sign off	
31.	All testing Document	
32.	Production server Installation Document	
33.	Issue Log & Resolution Document	
34.	UAT Acceptance and Security Review Certificate & Security Audit from CERT-IN or its empaneled agency	
35.	User and Technical Documentation	
36.	Functional & Technical Specifications for customizations	
37.	Training Material	
<b>Milestone-5 (Acceptance Testing and Go-Live) of Phase-1, Part (A)</b>		T+16
38.	Implementation of HIE, Portal, Consent Management, Registries	
39.	Integration with 2 state and 2 hospitals	
40.	Implementation of Security architecture & services	
41.	Functional Testing & GIGW Certification of the Web Portals and Applications developed from STQC	
42.	Obtaining Acceptance Testing and Achieving Go-Live for Phase-1	
<b>Milestone-6 Implementation of Phase-1, Part (B)</b>		
43	Integration with 1 state and 3 hospitals	
44	Obtaining Acceptance Testing and Achieving Go-Live for Phase-1	
<b>Milestone-7 Implementation of Phase-2</b>		
44.	Integration with Provider and states	
45.	Obtaining Acceptance Testing and Achieving Go-Live for Phase-2	
<b>Milestone-8 Implementation of Phase-3</b>		T+52
46.	Integration with Provider and states	
47.	Design, Development & Deployment of HIS on the IHIP	
48.	Obtaining Acceptance Testing and Achieving Go-Live for Phase-3	
<b>Milestone-8 (Hosting Services and Operation and Maintenance) after completion of Phase-4</b>		Onwards till the completion of Project

**Successful Bidder has to submit Daily/Weekly/Monthly Progress Report of the Project to CHI/MoHFW**

13. In page no. 61, the table given under section 8.1.1 “Implementation Phase Payments” is replaced with the following table: The disbursement details of 80% of implementation payment (on scale of 100%) will be as per the below table:-

S.No.	Milestones (As per Section 7)	Payment %	Time Lines (Weeks)
1	Milestone-1	No Payment	T+1
2	Milestone-2	10% of Implementation Phase	T+4
3	Milestone-3	10% of Implementation Phase	T+8

4	Milestone-4	20% of Implementation Phase	T+12
5	Milestone-5	20% of Implementation Phase	T+16
6	Milestone-6	10% of Implementation Phase Payment	T+19
7	Milestone-7	10% of Implementation Phase	T+35
8	Milestone-8	20% of Implementation Phase	T+52

14. In page no. 86, Annexure-1, Form-4: Annual Turnover is replaced with the following form:  
**Form – 4: Annual Turnover of the bidder (of each member in case of consortium) for item no. 2 of Pre-qualification criteria. Separate Certificate required from each consortium member.**

We hereby certify that annual average turnover of M/s\_\_\_\_\_ (name of the bidder) for the last three Financial years (Last FY ending would be 31<sup>st</sup> March, 2016 or closing year before 31<sup>st</sup> March, 2016 would be considered) is as given below:

Annual turnover from design, development and deployment of software services for the last 3 Financial Years in Indian Rupees (in Crores)			
Year (2013-2014)	Year (2014-2015)	Year (2015-2016)	Average

(Signature of Statutory Auditor/CA)  
Name of Statutory Auditor/CA:  
Name of Statutory Auditor/CA Firm:  
Seal

**Proof to be submitted along with Certificate:**

Abstracts of Audited financial statements (reflecting overall turnover)/ annual report containing financial statement for the last three financial years

**Or**

A certificate duly certified by the statutory auditor/CA of the bidder clearly mentioning the average annual turnover of the bidder/ consortium

**Note: In case turnover in foreign currency, the value should be shown in INR as per the conversion rate prevailing at the time of award of respective works.**

15. In page no. 90, Annexure-1, Form-10: Manufacturers'/Producers' Authorization Form is replaced with the following form:

**Form 10: Manufacturers'/Producers' Authorization Form**

(This form has to be provided by the OEMs of the products proposed)

Ref. No.

Date:

To:

Project Director,  
Centre for Health Informatics,  
National Institute of Health and Family Welfare,  
Ministry of Health & Family Welfare, Govt. of India,  
Baba Gang Nath Marg, Munirka,  
New Delhi – 110067.

Dear Sir,

Ref: NIHFW/CHI/IHIP/Tender/2017

We, who are official manufacturers / producers of \_\_\_\_\_ [*insert type of goods manufactured*], having factories / development facilities at (*Insert address of factory / facility*), do hereby authorize M/s \_\_\_\_\_ (*Insert Name and address of Agency*) to submit a bid the purpose of which is to provide the following Goods, manufactured by us (*insert name and or brief description of the Goods*), and to subsequently negotiate and sign the Contract.

We hereby extend our full guarantee and warranty for the Solution, Products and services offered by the above firm against this Bid Invitation.

We duly authorize the said firm to act on our behalf in fulfilling all installations, Technical support and maintenance obligations required by the contract.

Yours faithfully,

(Name: [*insert complete name(s) of authorized representative(s) of the Manufacturer*])

Title: [*insert title*]

Duly authorized to sign this Authorization on behalf of: [*insert complete name of Bidder*]

**Note:** This letter of authority should be on the letterhead of the manufacturer and should be signed by a person competent and having the power of attorney to bind the manufacturer. The Bidder should include this certificate in its Bid.



## Annexure-1

**Form – 4(a): Annual Turnover of the bidder (of each member in case of consortium) for item no. 3 of Pre-qualification criteria [From HIE Implementation (Separate Certificate required from each of the consortium partner)].**

We hereby certify that the total annual turnover of M/s \_\_\_\_\_ (name of the bidder) for the last five financial years (Last FY ending would be 31<sup>st</sup> March, 2016 or closing year before 31<sup>st</sup> March, 2016 would be considered) is as given below:

**Annual turnover from Health Information Exchange business (Only Software Components) for the last Five Financial Years in Indian Rupees (in Crores)**

<b>FY(2011-12)</b>	<b>FY (2012-13)</b>	<b>FY (2013-14)</b>	<b>FY (2014-15)</b>	<b>FY (2015-16)</b>	<b>Total</b>

(Signature of Statutory Auditor/CA)

Name of Statutory Auditor/CA:

Name of Statutory Auditor/CA Firm:

Seal

### **Proof to be submitted along with Certificate:**

Abstracts of Audited financial statements (reflecting overall turnover)/ annual report containing financial statement for the last five financial years

**Or**

A certificate duly certified by the statutory auditor/CA of the bidder clearly mentioning the total turnover of the bidder for the last five financial years supported by work order/client certificate

**Note: In case turnover in foreign currency, the value should be shown in INR as per the conversion rate prevailing at the time of award of respective works.**

**Annexure-2 List of Hospitals in each State/IT system to be integrated with the HIE under IHIP\***

SN	System/State	Total Hospital/Sites using HIS/EHR	Architecture
1.	Haryana	Total 55 hospitals, <b>System Live in 24 hospitals</b>	Centralized
2.	Kerala	Total 742 hospital (Including CHC&PHC) will be connected in first phase in Seven Districts. Pilot Phase- <b>System live in 12 hospitals</b> ; 2 under implementation.	Centralized
3.	Tamil Nadu	<b>Live in 246 secondary care hospitals &amp; 31 District Hospital</b> ; Under implementation in 22 Medical Colleges & 25 Secondary care hospitals attached with medical colleges.	Centralized
4.	Gujarat	<b>System Live in 33 Hospitals</b> (District Hospitals & Medical Colleges)	Centralized
5.	Telangana	<b>Live in 3 Hospitals</b> ; State-wide roll- out proposed in following – 1000+ facilities (7 Dist. 31 Area Hospital, 107 CHC, 683 PHC, UPHC 193. MC Hospitals-18)	Centralized
6.	Chandigarh	(ehospital NIC) <b>Live in 1 Hospital</b> ; under progress in 3 hospitals	Centralized
7.	Himachal Pradesh	<b>Live in 20 District Hospitals &amp; 2 PHCs</b> ,	De-centralized
8.	Rajasthan	C-DAC System (Arogya Online) <b>Live in 47 Hospitals (25 District Hospital and 22 Medical College hospitals).</b> Under Progress in 10 hospitals	Centralized
9.	Andhra Pradesh	C-DAC System –Under implementation in 3 hospitals	Centralized
10.	Punjab	Nil	
11.	eSushrut (C-DAC)	<b>Live in 60 hospitals</b> (47 in Rajasthan, 3 in Andhra Pradesh, 1 in Delhi and 3 in Telangana) – All these states are C-DAC implementation.	Centralized
12.	eHospital NIC	<b>Live in 39 hospitals</b> ; under implementation in 100 hospitals	Centralized
13.	CGHS	<b>Live in 362 Clinics</b>	Centralized
14.	ESI	<b>Live in 156 hospitals &amp; 1400 dispensaries</b> ,	Centralized

15.	Central Govt. Hospitals	7 [(AIIMS-Delhi, Bhopal, Raipur, Jodhpur); PGI Chandigarh; JIPMER, Pondicherry; RML Delhi]	
16.	MCTS (RCH Portal)	Pan India	Centralized
17.	Nikshay	Pan India	Centralized
18.	Corporate Tertiary Hospital Chain	Yet to be finalized	

**\* Number of hospitals in centralized systems may increase during the process of IHIP implementation.**