

Letter No. : JTDS/91/2020/368A

Ranchi/Date : 10/8/2020

इच्छा की अभिव्यक्ति

झारखण्ड ट्राईबल डेवलपमेंट सोसाईटी में कार्यरत कर्मियों का Group Medical Policy 2020-21 हेतु निजी/सरकारी प्रतिष्ठान से इच्छा की अभिव्यक्ति आमंत्रित की जाती है। इच्छुक फर्म/संस्थान दिनांक 18.08.2020 के संध्या 05:00 बजे तक अपनी श्रेष्ठतम प्रस्ताव के साथ E-mail (spd.jtlds@gmail.com) के माध्यम से JTDS, राँची, कार्यालय को भेज सकते हैं। झारखण्ड ट्राईबल डेवलपमेंट सोसाईटी में संभावित कर्मियों की संख्या 100 है। ज्ञात हो कि कर्मियों के परिवार के अन्य सदस्य (पति/पत्नी एवं दो बच्चे) को भी पॉलिसी में शामिल करना अनिवार्य होगा।

नोट: झारखण्ड ट्राईबल डेवलपमेंट सोसाईटी में कार्यरत कर्मियों / आश्रितों की विस्तृत जानकारी हेतु www.jtlds.jharkhand.com पर देखा जा सकता है।

(राज्य परियोजना निदेशक)



SNo.	Name of Employee	Age	Name of Spouse	Relation	Age	Name of Children (1st)	Relation	Age	Name of Children (2nd)	Relation	Age
1	Emp 1	57	Dependent 1	WIFE	47	Dependent 2	SON	17	Dependent 3	SON	14
2	Emp 2	41	Dependent 1	HUSBAND	41	Dependent 2	DAUGHTER	16	Dependent 3	SON	5
3	Emp 3	42	Dependent 1	WIFE	41	NO	NO	0	NO	NA	0
4	Emp 4	26	NO	NA	0	NO	NA	0	NO	NA	0
5	Emp 5	47	Dependent 1	WIFE	42	NO	NA	17	NO	NA	0
6	Emp 6	30	NO	NA	0	NO	NA	0	NO	NA	0
7	Emp 7	52	Dependent 1	HUSBAND	42	NO	NA	12	NO	NA	0
8	Emp 8	42	Dependent 1	Wife	35	NO	NA	9	Dependent 3	son	4
9	Emp 9	45	Dependent 1	Wife	40	NO	NA	20	Dependent 3	Daughter	16
10	Emp 10	41	Dependent 1	Wife	31	NO	NA	5	NO	NA	0
11	Emp 11	39	Dependent 1	Wife	29	NO	NA	4	NO	NA	0
12	Emp 12	41	Dependent 1	Wife	37	NO	NA	0	NO	NA	0
13	Emp 13	53	Dependent 1	Wife	42	NO	NA	16	Dependent 3	Son	10
14	Emp 14	26	Dependent 1	Wife	35	NO	NA	10	Dependent 3	Son	8
15	Emp 15	33	Dependent 1	Husband	38	NO	NA	0	NO	NA	0
16	Emp 16	45	Dependent 1	Wife	46	NO	NA	7	NO	NA	0
17	Emp 17	49	Dependent 1	Wife	40	NO	NA	7	NO	NA	0
18	Emp 18	30	NO	NA	0	NO	NA	0	NO	NA	0
19	Emp 19	43	Dependent 1	WIFE	35	NO	NA	8	NO	NA	0
20	Emp 20	51	Dependent 1	WIFE	54	NO	NA	21	Dependent 3	SON	16
21	Emp 21	29	NO	NA	0	NO	NA	0	NO	NA	0
22	Emp 22	28	NO	NA	0	NO	NA	0	NO	NA	0
23	Emp 23	43	Dependent 1	WIFE	32	NO	NA	1	NO	NA	0
24	Emp 24	41	NO	NA	0	NO	NA	0	NO	NA	0
25	Emp 25	48	Dependent 1	Husband	50	NO	NA	24	Dependent 3	Son	32
26	Emp 26	32	NO	NA	0	NO	NA	0	NO	NA	0
27	Emp 27	27	NO	NA	0	NO	NA	0	NO	NA	0
28	Emp 28	40	Dependent 1	Husband	47	Dependent 2	Son	14	NO	NA	0
29	Emp 29	28	Dependent 1	WIFE	22	Dependent 2	son	1	NO	NA	0
30	Emp 30	42	Dependent 1	Wife	33	Dependent 2	Son	6	NO	NA	0
31	Emp 31	45	Dependent 1	WIFE	38	Dependent 2	DAUGHTER	12	Dependent 3	Daughter	8
32	Emp 32	42	Dependent 1	WIFE	37	Dependent 2	SON	6	NO	NA	0
33	Emp 33	34	NO	NA	0	NO	NA	0	NO	NA	0
34	Emp 34	29	NO	NA	0	NO	NA	0	NO	NA	0
35	Emp 35	37	NO	NA	0	NO	NA	0	NO	NA	0
36	Emp 36	29	NO	NA	0	NO	NA	0	NO	NA	0
37	Emp 37	55	Dependent 1	Wife	48	Dependent 2	Son	22	Dependent 3	Son	19
38	Emp 38	29	Dependent 1	Wife	25	NO	N/A	0	NO	NA	0
39	Emp 39	32	Dependent 1	Wife	27	Dependent 2	Daughter	4	Dependent 3	SON	2
40	Emp 40	32	Dependent 1	Wife	30	NO	N/A	0	NO	NA	0
41	Emp 41	39	Dependent 1	Wife	40	Dependent 2	DAUGHTER	9	Dependent 3	Daughter	4
42	Emp 42	31	NO	NA	0	NO	NA	0	NO	NA	0
43	Emp 43	45	Dependent 1	WIFE	42	Dependent 2	DAUGHTER	11	Dependent 3	SON	5
44	Emp 44	49	Dependent 1	WIFE	48	Dependent 2	DAUGHTER	16	NO	NA	0
45	Emp 45	37	Dependent 1	WIFE	28	Dependent 2	SON	2	NO	NA	0
46	Emp 46	35	Dependent 1	WIFE	32	Dependent 2	SON	4	NO	NA	0
47	Emp 47	33	Dependent 1	WIFE	20	Dependent 2	SON	1	NO	NA	0
48	Emp 48	31	Dependent 1	WIFE	28	NO	...	0	NO	NA	0
49	Emp 49	49	Dependent 1	WIFE	41	Dependent 2	DAUGHTER	13	NO	NA	0
50	Emp 50	37	Dependent 1	WIFE	33	NO	...	0	NO	NA	0
51	Emp 51	34	NO	NA	0	NO	NA	0	NO	NA	0
52	Emp 52	40	Dependent 1	Wife	36	Dependent 2	Son	7	NO	NA	0

53	Emp 53	38	NO	NA	0	NO	NA	0	NO	NA	0
54	Emp 54	37	Dependent 1	Wife	34	Dependent 2	Daughter	6	NO	NA	0
55	Emp 55	37	Dependent 1	Wife	37	NO		0	NO	NA	0
56	Emp 56	35	Dependent 1	Wife	26	Dependent 2	Daughter	1	NO	NA	0
57	Emp 57	31	NO	NA	0	NO	NA	0	NO	NA	0
58	Emp 58	0	Dependent 1	Wife	36	Dependent 2	Son	13	Dependent 3	Daughter	2
59	Emp 59	45	Dependent 1	WIFE	43	Dependent 2	SON	13	Dependent 3	Daughter	11
60	Emp 60	34	Dependent 1	WIFE	33	Dependent 2	SON	1	NO	NA	0
61	Emp 61	29	NO	NA	0	NO	NA	0	NO	NA	0
62	Emp 62	32	NO	NA	0	NO	NA	0	NO	NA	0
63	Emp 63	42	Dependent 1	WIFE	37	Dependent 2	SON	12	Dependent 3	Daughter	9
64	Emp 64	45	Dependent 1	WIFE	30	Dependent 2	SON	8	Dependent 3	SON	6
65	Emp 65	52	Dependent 1	Wife	44	Dependent 2	Daughter	23	Dependent 3	Son	19
66	Emp 66	39	Dependent 1	Wife	31	Dependent 2	Son	10	NO	NA	0
67	Emp 67	50	Dependent 1	Wife	37	Dependent 2	Son	15	Dependent 3	Son	12
68	Emp 68	31	Dependent 1	Wife	22	Dependent 2	Son	2	NO	NA	0
69	Emp 69	35	Dependent 1	Husband	35	Dependent 2	Son	3	NO	NA	0
70	Emp 70	33	Dependent 1	Husband	36	NO	NA	0	NO	NA	0
71	Emp 71	42	Dependent 1	WIFE	38	Dependent 2	SON	9	Dependent 3	SON	6
72	Emp 72	50	Dependent 1	WIFE	45	Dependent 2	DAUGHTER	17	Dependent 3	SON	12
73	Emp 73	37	Dependent 1	HUSBAND	42	Dependent 2	SON	9	NO	NA	0
74	Emp 74	40	Dependent 1	MOTHER	76	NO	NA	0	NO	NA	0
75	Emp 75	36	Dependent 1	WIFE	29	Dependent 2	DAUGHTER	1	NO	NA	0
76	Emp 76	47	Dependent 1	WIFE	34	Dependent 2	DAUGHTER	15	Dependent 3	Daughter	12
77	Emp 77	49	Dependent 1	Husband	48	Dependent 2	Daughter	16	Dependent 3	Son	5
78	Emp 78	47	Dependent 1	Wife	45	Dependent 2	Son	15	Dependent 3	Son	9
79	Emp 79	42	NO	NA	0	NO	NA	0	NO	NA	0
80	Emp 80	30	NO	NA	0	NO	NA	0	NO	NA	0
81	Emp 81	45	Dependent 1	Wife	44	Dependent 2	Son	13	NO	NA	0
82	Emp 82	25	NO	NA	0	NO	NA	0	NO	NA	0
83	Emp 83	48	Dependent 1	Wife	46	Dependent 2	Daughter	19	Dependent 3	Son	16
84	Emp 84	36	Dependent 1	Wife	28	Dependent 2	Daughter	5	Dependent 3	Son	1
85	Emp 85	45	Dependent 1	Wife	41	Dependent 2	Daughter	13	Dependent 3	Daughter	5
86	Emp 86	48	Dependent 1	Husband	50	Dependent 2	Son	18	Dependent 3	Son	15
87	Emp 87	55	Dependent 1	Wife	50	Dependent 2	Daughter	19	Dependent 3	Son	8
88	Emp 88	38	Dependent 1	wife	35	NO	NA	0	NO	NA	0
89	Emp 89	51	Dependent 1	Wife	32	NO	NA	0	NO	NA	0
90	Emp 90	54	Dependent 1	Wife	47	Dependent 2	Daughter	22	Dependent 3	Son	22
91	Emp 91	38	Dependent 1	Wife	20	Dependent 2	Son	2	NO	NA	0
92	Emp 92	45	Dependent 1	Wife	30	Dependent 2	Daughter	6	Dependent 3	Daughter	1
93	Emp 93	45	Dependent 1	Wife	38	Dependent 2	Daughter	21	Dependent 3	Son	18
94	Emp 94	52	Dependent 1	Husband	56	Dependent 2	Daughter	27	Dependent 3	Son	21
95	Emp 95	46	Dependent 1	Wife	41	Dependent 2	Son	6	Dependent 3	Son	9
96	Emp 96	45	Dependent 1	Wife	35	Dependent 2	Son	11	Dependent 3	Son	8
97	Emp 97	48	Dependent 1	Wife	40	Dependent 2	Son	11	NO	NA	0
98	Emp 98	33	NO	NA	0	NO	NA	0	NO	NA	0
99	Emp 99	30	NO	NA	0	NO	NA	0	NO	NA	0
100	Emp 100	34	Dependent 1	Mother	65	NO	NA	0	NO	NA	0

ANNEXURE FOR MEDICLAIM POLICY COVERAGE REQUIREMENTS:

COVERAGE DETAILS

Particulars	Nature of Coverage
Type of Cover	Floater
Family Definition	Self+ Spouse+ 2 Children (Max)
Sum Insured	Rs. 500000 per employee

POLICY FEATURES REQUIRED (PREFERRED)

1. Corporate Floater for Employee, Spouse and Maximum 2 Children.
2. Maternity Cover
3. Infant cover from date of delivery.
4. Ambulance Cover.
5. Pre and Post hospitalization Cover.
6. Domiciliary and Daycare Expense Cover.
7. Fee of medical practitioner and specialist.
8. Room rent and nursing charges.
9. Family transportation benefit.
10. AYUSH Policy Cover.
11. Pre existing diseases cover from day one.
12. Annual Health Check Up.
13. OPD Benefit (Up to Rs. 10000)
14. Donor Expenses.
15. Annual Health Check Up
16. Other additional benefits if any.