Sr. No	No. (tend	Clause (tender Ref)	Description in the Tender (tender Ref)	Query	NIA Response
1	9	13. SCOPE OF WORK:	i. Fraud, Waste, and Abuse (FWA) Monitoring Solution: The proposed software solution should be able to perform ETL (Extract, Transform, Load) functions on provided health insurance claims data, including both metadata.......	Does the system need to send the fraud triggers to TPA realtime or only a queue will be created for NIA	Yes, the system needs to send real time alerts to TPAs as well as New India
2	10	13. SCOPE OF WORK:	ii. Unified Intake Frontend: The bidder should provide a Unified front end which will enable claims intake from various channels like emails, TPA front end, inward of physical documents, FTP documents, NHCX intake,......	Please clarify the scenarios of claim intake through various channels like email and whatsapp. As per the process understanding all claims are processed by TPA's and is intimated to NIACL only through API.	Bidder has to develop/provide Unified Intake Frontend to NIACL. Presently all claims are recived and processed by TPAs. The structured, semistructured and unstructured data to be received now through API for inwarding at this front desk. At present only TPA channel, NHCX through TPA channel would be required. However, the system should be capable of claim intake through other channels as specified in the said clause if in future NIA decides to have claim processing done at its end.
3	10	13. SCOPE OF WORK:	iii. Data Lake (Storage and Processing platform): Creation of Data Lake on a Meity approved Private cloud platform for ingesting structured, semi-structured and unstructured data from various sources (various Third-Party Administrators through API integration, NIACL ODS for policy/other requisite data).....	In the first paragraph of point 13 page 9 it says that setup has to be done in on premise private cloud while point 13 iii mentions Meity approved private cloud. Please clarify if we need to use NIACL data center or any Meity approved private cloud Should we include the cost of licenses like database, visualization tool like tableau in the commercial How many users are expected to have access to analytical data Can we consider AWS private cloud What is the RTO and RPO expected Should OCR be home grown or can be integrated to solutions provided by google and amazon	1. On-premises Private Cloud 2. all necessary licenses are to be procurred by the vendor 3. No of NIA users approximately 100 (concurrent users-50) 4. AWS outpost can be considered 5. Expected RTO - 4 hours, RPO- Next Business day 6.NIACL is open for either, provided accuracy, data integrity and protection is ensured.
4	12	13. SCOPE OF WORK:	ix. Policyholder/Insured Onboarding and Underwriting Decision Support:	Please elaborate on the use case of policy onboarding. Do we need to provide a FWA solution for issuance of policy and which line of business that is group or retail. What is the expected process flow from lead to issuance.	In Core insurance System, Policy underwritng is done in the undwerwiting module. It is planned to corellate the Claims data with the policy, members of the policy so as to have insight about the claims trends pertaining to a particular person, entity, location, intermediary, hospitals etc. This will help policy underwiting decision making
5	12	13. SCOPE OF WORK:	x. Hospital Master Maintenance and Blacklisting:	For hospital master will NIACL provide data or we need to consume data from TPA's	Bidder has to consume TPA data and NIA will provide their own network data as well
6	13	13. SCOPE OF WORK:	xi. Digitized Contracts with Hospitals: The vendor shall also digitize and store the digitized Contracts for all the paneled Hospitals (PPN) of NIACL	Apart from GIPSA – PPN tariff does the NIACL plan to sign other tariff with hospitals directly or we need to consider the tariff signed by TPA's Do we need to deploy any resource onsite	Need to consider tariffs provided by NIACL and TPAs-ongoing process
7	16	Clause 16.2	16.2) Delay in integration - In case bidder is not able to complete required integrations within the stipulated period of 6 calendar Months from the date of order, a penalty of Rs. 1,00,000/- per day subject to a maximum of Rs 1,00,00,000/- shall be imposed. The amount will be recovered by forfeiting the Performance bank guarantee. Penalty is not applicable for the reasons attributable to the NIACL or force Majeure	For the penalty of delay in integration what happens if delay is from TPA	Please adhere to the said RFP Clause

8	34	Annexure 1 - 3	The Bidder/ Proposed technology partner/OEM Partner shall have successfully executed at least one Project of minimum value INR 2 Crs related to supply and implementation of Fraud, Waste and Abuse control/monitoring solution and other related modules in last Five (5) years in India.	Kindly amend the clause as per our below request: The clause mention OEM partner while the section is only for SI/Prime bidder. Considering the size of the project and features we recommend that the SI/Prime bidder should have executed atleast one project of INR 5 Cr or equivalent for a health insurer/TPA for health claims/ Govt health schemes/hospitals. Reason: Since the project is for FWA in health claims it is important that the solution is trained on domain specific triggers and knowledge.	Please adhere to the said RFP Clause
9	35	Annexure 1 - 4	The Bidder/ Proposed technology partner/OEM Partner shall have successfully executed at least one Project of minimum value INR 2 Crs related to supply and implementation of Fraud, Waste and Abuse control/monitoring solution and other related modules in last Five (5) years in India.	Considering the size of the project and features we recommend that the SI/Prime bidder should have executed atleast one project of INR 5 Cr or equivalent for a health insurer/TPA for health claims/ Govt health schemes/hospitals Reason: The experience of handling high volume health claims is critical considering the size of the project and number of transactions	Please adhere to the said RFP Clause
10	35	Annexure 1 - 4	The Bidder/ Proposed technology partner shall have successfully executed at least one Project of minimum value INR 1.5 Crs project related to supply and implementation of Fraud, Waste and Abuse control/monitoring solution and other related modules in last Five (5) years in India.	Considering the size of the project and features we recommend that the SI/Prime bidder should have executed atleast one project of INR 2 Cr or equivalent for a health insurer/TPA for health claims/ Govt health schemes/hospitals Reason: The experience of handling high volume health claims is critical considering the size of the project and number of transactions	Please adhere to the said RFP Clause
11	35	Annexure 1 – 5	The Bidder shall have successfully executed at least one Project of minimum value INR 5 Crs on Infrastructure Development / Data Centre/ Cloud Hosting / IT Network Setup Project with State Govt/ Central Govt/ PSU/ BFSI in last Five (5) years in India.	As the project is specific to health insurance claims we suggest to 1. Include the experience of setting up infrastructure for health insurance/TPA/Govt schemes/hospitals 2. The minimum value should of the project should at least be INR 10 Cr Reason: We recommend the changes as a lot of PII and PHI data will be generated as per of the project and assessment is being done realtime thus experience of handing volume and security needs to be considered in both eligibility and scoring	Please adhere to the said RFP Clause
12	35	Annexure 1 – 7	The SI/Prime Bidder and OEM should not have been disqualified/blacklisted/de-panelled and the product quoted is not disqualified/blacklisted/de-panelled by any Central/State Government Department/Public Sector Banks/Financial Institutions in India including NIACL during the last three years starting from June, 2022 till last date of submission of this tender	The blacklisting condition should be applicable for MSME and OEM as well. Reason: Blacklisting is a general clause and should be applicable to all participants	The blacklisting condition will be applicable to all

13	25	Point 4 – Marking scheme - 2	The Bidder/ Proposed technology partner/OEM Partner shall have successfully executed the project related to supply and implementation of Fraud, Waste and Abuse control/monitoring solution and other related modules in last Five (5) years in India. The Marks will be allocated as per the following. Maximum 3 projects will be considered for marking: Project of minimum value: INR 5 Crs.- 5 marks each Project of minimum value: INR 3 Crs.- 3 marks each Project of minimum value: INR 2 Crs.- 2 marks each Additional 5 marks if all 3 projects are specific to Health Insurer/ TPA experience, 1.5 marks if 2 projects are specific to Health insurer/TPA , 0.75 mark extra if 1 project is specific to Health insurer or TPA	Considering the size of the project we recommend that related experience of implementation with health insurer/TPA/ Govt health schemes should be given higher scores Reason: The project is domain specific and hence the related experience should be given priority	A bonus of 5 marks is already considered for related experience of implementation with TPA/Insurer. Please adhere to the said RFP Clause
14	25	Point 4 – Marking scheme - 3	The Bidder shall have successfully executed Infrastructure Development / Data Centre/ Cloud Hosting / IT Network Setup Project with State Govt/ Central Govt/ PSU/ BFSI in last Five (5) years in India. The Marks will be allocated as per the following for maximum two projects: Project each of minimum value: INR 10 Crs and above.- 5 marks Project each of minimum value: INR 7 Crs and above.- 3 marks Project each of minimum value: INR 5 Crs and above.- 2 marks	Considering the scale of the project experience of large scale implementation is a must and hence we recommend to increase the threshold of 5 marks to 20 Cr Reason: Considering the nature and purpose of the project we should consider large scale implementation experience as volume is high and data is confidential.	Please adhere to the said RFP Clause
15	25	Point 4 – Marking scheme - 4	The Bidder shall have following Certifications valid at the time of submission of bid: 1. ISO 9001 for quality management or equivalent - 2.5 marks 2. ISO 20000 for IT Service Management or equivalent certification - 2.5 marks 3. ISO 27001 for Information Security Management System or Equivalent certification. – 2.5 marks 4. CMMI Level 3 Certificate or higher - CMMI Level 3 Certificate – 1 mark CMMI Level 4 Certificate – 2 marks CMMI Level 5 Certificate – 2.5 marks	As the complete implementation is related to software and process quality is critical also because it involves confidential data we recommend to increase the score of CMMI. The ISO 9001 is a basic certification. Reason: This is a software based implementation and impacts critical process of health insurance claims. Also considering the new regulations of IRDAI timelines of response and payment processing need to be of primary concern	Please adhere to the said RFP Clause

16	26	Point 4 – Eligibility Criteria for OEM - 1	For OEMs not registered as MSME/Startup: Average annual turnover as mentioned below for the bidder over the last three (3) Financial Years i.e. for FY 2022-23, 2023- 24, 2024-25. Marks shall be allotted as given below: 1. >INR 15 Cr.= 10 marks 2. > INR 12.5 cr. Up to 15 Cr = 8 marks 3. > INR 10 cr.to 12.5 Cr.= 6 marks 4. >7.5 CR up to 10 CR = 4 marks 5. >5 CR up to 7.5 CR = 2 marks For OEMs registered as MSME/Startup: Average annual turnover as mentioned below for the bidder over the last three (3) Financial Years i.e. for FY 2022-23, 2023- 24, 2024-25. Marks shall be allotted as given below: 1. >INR 13 Cr.= 10 marks 2. > INR 10.5 cr. Up to 13 Cr = 8 marks 3. > INR 8 cr.to 10.5 Cr.= 6 marks 4. >5.5 CR up to 8 CR = 4 marks 5. >3 CR up to 5.5 CR = 2 marks	There is no advantage given to MSME, we suggest to decrease the annual turnover criteria to 3 Cr	Please adhere to the said RFP Clause
17	26	Point 4 – Eligibility Criteria for OEM – 2	For OEMs not registered as MSME/Startup: Should have minimum one order in favour of OEM for Health Claim Fraud Analytics solution, from either Insurance Companies / Central Govt. departments/ State Govt. departments/ Urban Local Bodies / PSUs/Private Enterprise, all in India with an order value of INR 2 Crores and above for Insurance Fraud Analytics in last five years from the date of submission of the RFP. The Marks will be allocated as per the following. Maximum 4 projects will be considered for marking: Project of minimum value: INR 5 Crs.- 2.5 marks each Project of minimum value: INR 3 Crs.- 2 marks each Project of minimum value: INR 2 Crs.- 1 marks each For OEMs registered as MSME/Startup: Should have minimum one order in favor of OEM for Health Claim Fraud Analytics solution, from either Insurance Companies / Central Govt. departments/ State Govt. departments/ Urban Local Bodies / PSUs/Private Enterprise, all in India with an order value of INR 1.5 Crores and above for Insurance Fraud Analytics in last five years from the date of submission of the RFP. The Marks will be allocated as per the following. Maximum 4 projects will be considered for marking: Project of minimum value: INR 4.5 Crs.- 2.5 marks each Project of minimum value: INR 2.5 Crs.- 2 marks each Project of minimum value: INR 1.5 Crs.- 1 marks each	There is no advantage given to MSME, we suggest to increase the project value of non MSME to INR 15 Cr	Please adhere to the said RFP Clause

18		General: Eligibility criteria and scoring		We recommend to add clause for NHCX compliant and certification done to be added for prime bidder/ OEM either for themselves or any of the implementation done. Reason: As the system is expected to consume claims from NHCX we recommend to add the criteria so that new development is not required and reduces implementation timelines	Please adhere to the said RFP Clause
19		Solution feature - General		The RFP does not consider the number of claims on which solution is trained and experience of running the solution on volume. We recommend adding the same in eligibility criteria and scoring, The solution should be trained using at least 1 Mn health claims. Reason: As the required solution is AI/ML based and hence training of algorithm is a critical component and this will also be required to reduce implementation timelines and get better results in initial phase of implementation.	Please adhere to the said RFP Clause
20	9	Section 13 – Scope of Work	Integration with existing Insurance Software Solution of NIACL	Kindly specify the name and technical details of the existing core insurance platform to help assess integration effort.	Our Core Insurance Solution is TCS Bancs. More technical details will be shared with the successful bidder
21	9	Section 13 – Scope of Work	Scope of Work related to claims volume	Please share monthly and yearly claim volumes, segmented into cashless and reimbursement claims, to help in defining system capacity and estimating cost.	The claims volume for last 3 years has been provided as per Annxure-XIV. The cashless to reimbursement ration is 64:36
22	10	Clause (ii) – Unified Intake Frontend	a Unified front end which will enable claims intake from various channels like emails, WhatsApp, NHCX, FTP, etc.	Please clarify whether these intake channels (e.g., WhatsApp, NHCX, FTP) are already operational at NIACL, or if the bidder is expected to develop, configure, and integrate them as part of the proposed solution. If existing, will you share technical documentation or integration specs with vendor?	Bidder has to develop/provide Unified Intake Frontend to NIACL. Presently all claims are recived and processed by TPAs. The structured, semistructured and unstructured data to be received now through API for inwarding at this front desk. At present only TPA channel, NHCX through TPA channel would be required. However, the system should be capable of claim intake through other channels as specified in the said clause if in future NIA decides to have claim processing done at its end.
23	10	Clause (ib) – Rules Engine	A customizable rules engine to adapt to evolving fraud detection needs.	Kindly confirm whether the bidder is expected to provide and maintain this rules engine as part of the proposed solution.	Yes
24	11	Clause (iv) – New Data Models	New Data Models	Requesting clarification on what constitutes "new data models" in this context. Are these to be developed afresh or modified from existing templates?	These will need to be developed afresh or modified from existing templats on an as-needed basis, as it is challenging to anticipate everything at the outset.
25	11	Clause (iv) – New Data Models	Data models relevant to the general insurance industry	Please confirm if the requirement is focused only on Health Insurance data models or if it extends across other lines of business (LOBs) under General Insurance.	The requirment is focused on Health Insurance Data Models
26	11	Clause (vi) – Image Forensic Solution	Checking de-duplication of claim-related documents	Kindly clarify whether de-duplication checks are expected to be performed only on incoming claims or also on historical claim records. If historical data is to be analysed, will access to past claim documents be provided?	The de-duplication is to be provided on the incoming claims vis-à-vis historical data. Historical claims data shall be provided by NIACL

27	12	Clause (ix) – Policyholder Onboarding	System should facilitate policyholder onboarding and risk scoring	Please share details of existing systems or APIs that provide policy/member-level data which can be consumed by the underwriting/risk scoring module.	In the Core Insurance System, policy underwriting is carried out within the Underwriting module. There are plans to integrate claims data with policy and member information to gain insights into claims trends related to specific individuals, entities, locations, intermediaries, hospitals, and other relevant factors. These insights will be made accessible within the Underwriting module to support more informed and data-driven underwriting decisions.
28	12	Clause (x) – Hospital Master Maintenance	Hospital Master Maintenance and Blacklisting	Kindly clarify if NIACL intends to continue maintaining the Hospital Master Record (HMR) internally or if this responsibility will fully transition to the vendor. If the latter, what is the expected process for onboarding and managing new hospitals going forward?	At present we donot have any digitzed Hospital Master Record (HMR) system. We want vendor to create Hospital Master Record with a facility to extend it to NIACL team to add, delete, modify, flag the hospital records
29	13	Clause (xv) – User Privilege Management System	Role-based access controls for users	Please provide estimated user volumes (approx. number of users by role) expected to access the platform to help with sizing and access control design.	Approximately 100 users at present
30	14	Clause 14 – Specific Terms & Conditions	Overall solution scope and ownership	While our solution covers the entire scope outlined in the RFP, kindly confirm whether NIACL plans to award the entire project to a single vendor or split it across multiple vendors. If multiple vendors are expected, please indicate how the scope will be divided.	We expect single vendor to take ownership of the solution, In case system intergrator is not the OEM them SI may quote on behalf of OEM and other serivce provider to provide a complete, end to end solution. New India will not deal with various vendors, it will deal only with prime bidder.
31	24	Section II / Clause 4 - Marking Scheme for technical evaluation	SI / Prime Bidder criteria under Technical Evaluation	As an MSME-registered bidder, is there any consideration or additional marking provision under Section A for MSMEs, similar to those mentioned under OEM criteria in Section B?	Please adhere to the said RFP Clause

32		Limitation of liability	NIA/HEALTH/2025-26/FWA	In line with the principles of commercial contracting, DXC believes it to be essential that the Contract stipulates a mechanism to allocate risk in reasonable proportion to the benefits likely to be derived thereunder. The prices quoted for the Services by DXC are based on the reasonable expectation of such allocation of risk whereby while the Customer gets the benefit of pricing, DXC expects to allocate some of the risks by placing a limit to its overall liability. That said, DXC agrees to carve certain liabilities out of the limitations proposed. Therefore, DXC intends to include a provision to cap its maximum liability under the Contract as follows: As there is no limitation of liability language in the RFP Bidder request to add below clause newly: In no event will Bidder's liabilities to NIACL, in the aggregate, regardless of the form of action, whether in contract, tort, negligence, strict liability or by statute or otherwise, for any and all claims related to or arising under this contract, exceed an amount equal to the charges paid or payable by NIACL under a contract during the twelve (12) months before the date of the last event which NIACL alleges gave rise to liability. This clause does not limit Bidder's liability for breach of contract in relation to: (a) losses that may not be excluded or limited according to applicable law, (b) an IP indemnity, (c) death or bodily injury caused by Bidder's negligence, (d) damage to tangible personal property and buildings (which for clarity does not include software programs or NIACL data in whatever media they are stored), (e) acts of fraud, (f) unauthorised use of confidential information or IP, and	The bidders are requested to regularly visit GEM portal /NIACL's official website for addendum if any on this

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33.		Limitation of liability	NIA/HEALTH/2025-26/FWA	*As per the prevailing contracting practices, duly established by various courts, globally, DXC believes that the liabilities of the parties under a Contract must be with respect to losses that are direct and could be foreseen as against encompassing losses that do not flow directly from a breach of contract, but rather are a secondary or indirect consequence and loss. While DXC is not averse to taking on certain liabilities concerning direct losses as stated in the Contract, exposure to potentially huge and unpriced lost profit risks for both the parties sounds unreasonable in the backdrop of benefits to be derived out of the Contract.* *Therefore, DXC proposes a clause in the Contract to exclude both parties' liabilities for indirect/consequential losses in the following manner:* *Neither party shall be liable to the other party for lost revenues or profits, loss of anticipated savings, loss of goodwill, downtime costs, business interruption, diminished business value nor for any indirect, exemplary, punitive, special or consequential losses, even if such party has been advised of the possibility thereof.*	The bidders are requested to regularly visit GEM portal /NIACL's official website for addendum if any on this

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34		Intellectual Property Rights	NIA/HEALTH/2025-26/FWA	As there is no provision for IP protection clause for DXC and Third-Party IP Bidder request to include new clause: (a) All pre-existing "Intellectual Property Rights" or "IP" (means all materials, copyrights, patents, trademarks, know-how, methodologies, processes, techniques, tools, forms, templates, IP rights are invaluable assets for any organisation, and likewise, DXC attaches immense value to its IP, which are critical for its ability to render services to its customers. While DXC uses the IP it owns for the providing services to its customers, DXC intends to continue to own such IP together with any modifications, enhancements or other derivatives works based on DXC IP. Therefore, DXC wishes to incorporate the following provision in the Contract: software, inventions, discoveries, service marks, design rights, trade secrets (whether registered or unregistered) and all other similar intellectual proprietary rights) shall belong to the Party or third party that owned such rights. All modifications, enhancements and derivative works on such pre-existing "Intellectual Property Rights" shall belong to the Party or third party that owned such pre-existing Intellectual Property Rights. (Hereinafter referred to as "Pre-Existing IP") (b) All IP developed, or created, or customized by Bidder, its affiliates and subcontractors, in connection with the Agreement, including deliverables developed for the Bank and/or jointly with Bank shall be owned by Bidder except for "Pre-Existing IP" of a party. Bidder grants to Bank a limited, non-exclusive, non-transferable, worldwide, royalty free license to use such IPs solely for Bank's internal business purposes during the term of the contract	The bidders are requested to regularly visit GEM portal /NIACL's official website for addendum if any on this
35	13	SCOPE OF WORK:	Configuration and maintenance of analytical dashboard for monitoring of health portfolio.	How many dashboards, Reports and Analytical model will be created as part of the solution and the complexity level for these.	An indicative list for configuration and maintenance of analytical dashboard is given in SOW, point no. xiv. This is not an exhaustive list. The same will be discussed with successful bidder.
36	13	SCOPE OF WORK:	with a processing capacity of at least 2000 claims per hour	What is the expected size of the Data Lake and how many source systems needs to be considered to bring in the data. Some more information including: How many source systems providing real time data including number of compute cores providing the data.	Appropriate sizing of the data lake is to be done by the bidder based on the details given in Annxure XIV and SOW of the RFP. The data may be sourced from around 20-25 sources.(majorly 17 TPA, NIA ODS, IIB, NHCX etc)
37	13	SCOPE OF WORK, Pt# C	The solution Provider shall ensure deployment, management and maintenance of various security components/features/solutions in the proposed identified cloud infrastructure including Network security, Data Security, Application security, Endpoint/Host level security, Vulnerability Management, Centralized log monitoring for all the environments (	Does the bidder needs to procure and implement all the security features or some of these are already with NIACL which needs to be extended to this platform.	Bidder has to procure additional features other than available at NIACL/ on prem with pvt cloud features. The same will be discussed with successful bidder.

38	13	SCOPE OF WORK, Pt# E	The Solution provider should ensure Independent External Audits to be conducted as per the regulatory requirements. and should facilitate in closure of the audit points.	Does the bidder needs to get the platform audited periodically from external party and then resolve the audit points	IT security audit as per the NIACL guidelines. The same will be shared with successful bidder
39	13	SCOPE OF WORK, Pt# XV	User Privilege Management System:	Does NIAL already has a user privelege management system like MS AD or any other IAM solution which needs to be integrated or bidder needs to bring his own.	It is to be restricted within the solution. No of user approximately 100
40	13	SCOPE OF WORK, Pt# xvii	Training	Any specified number of days of training or it has to be mutually agreed upon	It will be mutually decided with the successful bidder
41	25	TECHNICAL BID EVALUATION	Pt#2 Experience Criteria - Solution Implementation Experience	Will NIACL allow out of India experience as well or this implementation should have been done within India only	Experiecne for implementation done within India only will be considered
42				What is exiting data warehouse / lake or reporting platform.	NIACL doesnot have any Datawarehouse at Present. Oracle Online Data Storage is used as a reporting platform
43				What is expected data size, fair idea of the same per use case.	Claims and Policy data size parameter for sizing are provided as per annexure 14. Bidders to consider these data points and SOW for doing the data size for use case.
44				Has NIA done any pilot or POC with any specific solution provider (s) if yes, pls share details.	This query is not relevant.
45				is Qualification criteria applicable for all OEMs or any specific OEM in given consortium of Vendor.	The Qualification criteria will be applicable to all OEMs
46	13	Clause 13 – Scope of Work	AI/ML based FWA solution with real-time claim tagging	Please share the expected number of concurrent users during peak and non-peak hours.	No of maximum concurrent users approximately 50
47	13	Clause 13 – Scope of Work	Unified Intake Frontend through multiple channels	Kindly confirm expected API TPS (transactions per second) for integration with TPAs.	2000 claims per hour as mentioned in RFP.
48	13	Clause 13 – Scope of Work	API integration with TPAs	What are the peak user load expectations for the solution?	Bidders to anticipate based on Claim/policy data point and SOW provided in RFP
49	13	Clause 13 – Scope of Work	Data Lake ingestion via APIs	Please clarify whether API authentication will be token-based or mutual TLS.	It will be token based
50	13	Clause 13 – Scope of Work	Claims intake from WhatsApp, FTP, email	Will NIACL provide access to their current APIs or are vendors expected to build from scratch?	Current APIs are only for structured data. New APIs to receive structured and unstructured data will have to be created from scratch.
51	13	Clause 13 – Scope of Work	Claims ingestion from TPA frontends	Please provide expected number of APIs to be consumed and exposed.	The data may be sourced from around 20-25 sources.(majorly 17 TPA, NIA ODS, IIB, NHCX etc).
52	13	Clause 13 – Scope of Work	Data Lake creation on MeitY-approved private cloud	Please confirm volume of data to be migrated from existing systems in TB.	Claims and Policy data size parameter for sizing are provided as per annexure 14
53	13	Clause 13 – Scope of Work	Integration with NIACL Core Insurance System	Will NIACL provide sample datasets for initial data migration testing?	It will be shared with successful bidder
54	13	Clause 13 – Scope of Work	Unified frontend for claim intake	What is the retention period for the data to be maintained in the new system?	We anticipate 3 years will suffice. However it will be mutually decided with successful bidder.
55	13	Clause 13 – Scope of Work	RFP requires processing structured and unstructured data	Is historical data available in digital format or will physical scanning be required?	Yes structured and unstructured data is in digital format
56	13	Clause 13 – Scope of Work	OCR-based document digitization	What is the average number of documents per claim? Who will bear the Cost of OCR	No of document ranges from 25-40, the bidder has to be bear cost of OCR
57	13	Clause 13 – Scope of Work	Document deduplication and similarity check	Please share image/document volume expected per day.	Bidder to anticipate appropritely based claims per hour data provided in RFP and no. of document per claims provided in query reply.
58	13	Clause 13 – Scope of Work	Integration with NIACL's Core Insurance Software	Kindly confirm the RPO (Recovery Point Objective) for the solution.	30 minutes
59	13	Clause 13 – Scope of Work	Solution must comply with DPDP Act	Kindly confirm the RTO (Recovery Time Objective) required for the system.	0
60	13	Clause 13 – Scope of Work	DR drills to be conducted every 6 months	Will DR site be provided by NIACL or should bidder propose one?	If on premises, DR site will be provided by NIA. Infrastructure will be the responsibility of the bidder

61	13	Clause 13 – Scope of Work	Cloud subscription to be in NIACL's name	Will NIACL support with CSP (Cloud Service Provider) onboarding formalities?	Bidder has to complete all onboarding formalities.
62	13	Clause 13 – Scope of Work	Bidder to configure real-time alerts and dashboards	Is there a preferred BI/visualization tool to be integrated with the solution?	We have no specific preference, the tool should be robust and easy to use.
63	13	Clause 13 – Scope of Work	Self-service reporting expected	What is the expected number of concurrent dashboard viewers?	Approximately 100 number. NIA may decide to extend this number on need basis
64	13	Clause 13 – Scope of Work	OCR and NLP to be used for document processing	Will handwriting datasets be provided for OCR training?	unstructured data for last 3 years will be provied for AI/ML purpose. The same may be utilized
65	13	Clause 13 – Scope of Work	AI-based treatment protocol comparison	Will NIACL provide access to standard treatment protocols and audit rules?	This has to be as per industry standard
66	13	Clause 13 – Scope of Work	Integration with hospital blacklisting module	Will hospital master data be provided in structured format?	It is mostly in unstructured format.
67	13	Clause 13 – Scope of Work	Clinical image ingestion required	Is there a need for DICOM or HL7 support in imaging APIs?	FHIR (Fast Healthcare Interoperability Resources) is our requirement. DICOM or HL may please be ignored
68	13	Clause 13 – Scope of Work	Frontend facility for tele-investigation	Will NIACL provide UI templates for tele-investigation input forms?	The same will be decided mutually with successful bidder
69	13	Clause 13 – Scope of Work	Solution to provide audit interface for doctors	Is there an approximate number of concurrent medical auditors accessing the system?	Approximately 50 number. NIA may decide to extend this number on need basis
70	13	Clause 13 – Scope of Work	Integration with external systems	Is there any API gateway preference (e.g. Payment Gateway)?	At present there is no requirement of Payment Gateway
71	13	Clause 13 – Scope of Work	NLP required for clinical journey analysis	Is multilingual OCR/NLP required or only English and Hindi?	Multilingual
72	13	Clause 13 – Scope of Work	Auto classification and extraction of documents	Will documents be pre-labeled for AI/ML training?	Yes
73	13	Clause 13 – Scope of Work	Scalable cloud-based infrastructure expected	Please clarify expected daily, weekly, and monthly claim volumes.	Claims and Policy data size parameter for sizing are provided as per annexure 14
74	13	Clause 13 – Scope of Work	Real-time alerting and tagging based on risk score	Please confirm acceptable latency for real-time tagging of suspicious claims.	As per Industry Standard /to be mutually decided with the successful bidder based on the IRDAI TAT (1 hour for pre-auth an 3 hours for final discharge) and the claim processing requirement per hour given in the RFP
75	13	Clause 13 – Scope of Work	Data lake as middleware layer between TPAs and NIACL	Please confirm if legacy TPA systems support API-based push or pull.	Push

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76	25	4. TECHNICAL BID EVALUATION	Experience Criteria - Solution Implementation Experience The Bidder/ Proposed technology partner/OEM Partner shall have successfully executed the project related to supply and implementation of Fraud, Waste and Abuse control/monitoring solution and other related modules in last Five (5) years in India. The Marks will be allocated as per the following. Maximum 3 projects will be considered for marking: Project of minimum value: INR 5 Crs.- 5 marks each Project of minimum value: INR 3 Crs.- 3 marks each Project of minimum value: INR 2 Crs.- 2 marks each � Additional 5 marks if all 3 projects are specific to Health Insurer/ TPA experience, 1.5 marks if 2 projects are specific to Health insurer/TPA , 0.75 mark extra if 1 project is specific to Health insurer or TPA 20 Purchase Order Or Work Order Or Contract Copy	Kindly Amend the clause as below :- Experience Criteria - Solution Implementation Experience The Bidder/ Proposed technology partner/OEM Partner shall have successfully executed the project related to supply and implementation of Fraud, Waste and Abuse control/monitoring solution /software Developement for Government , PSU /Central / State and other related modules in last Five (5) years in India. The Marks will be allocated as per the following. Maximum 3 projects will be considered for marking: Project of minimum value: INR 5 Crs.- 5 marks each Project of minimum value: INR 3 Crs.- 3 marks each Project of minimum value: INR 2 Crs.- 2 marks each Additional 5 marks if all 3 projects are specific to Health Insurer/ TPA experience, 1.5 marks if 2 projects are specific to Health insurer/TPA , 0.75 mark extra if 1 project is specific to Health insurer or TPA 20 Purchase Order Or Work Order Or Contract Copy	Please adhere to the said RFP Clause
77	4	1. Introduction	The tool should also provide exhaustive analytical dashboards to monitor the overall data and drill down details of any identified transactions or entity. The tagging of claims should be at real time with a minimum capacity of up to 2000 claims per hour.	will only the flagging of claim is required without review as post model flagging audit is also recommended, kindly suggest?	The post model flagging audit would be preferred.
78	4	1. Introduction	The tool should also provide exhaustive analytical dashboards to monitor the overall data and drill down details of any identified transactions or entity. The tagging of claims should be at real time with a minimum capacity of up to 2000 claims per hour.	Who will consume the output of the tagged claim? As in what would be the flow post tagging of the claim by the AI/ML based rule engine?	NIA as well as respective TPA
79	4	1. Introduction	At NIACL all health insurance claims are processed by TPAs using the claim processing software solution of their own. The data flows to NIACL through web-services in four stages i.e. claims intimation, modification/enhancement, claim upload for payment and rejections/ UTR.	At what stage of claim NIACL wants this AI/ML Based solution to be applied? Will it be applies before TPA/Parallel to TPA/Post TPA?	Parallel to TPA during processing stage and post settlement independent of TPA

80	4	2.4 Invitation to Bid	The purpose of NIACL behind this RFP is to seek a detailed technical and commercial proposal for procurement of the solution desired in this document. The proposed solution must integrate with NIACL's existing infrastructure seamlessly.	Can you please give clarity on what existing IT infrastructure do NIACL have in terms of whether NIACL have centralized database? How and where documents are stored? Is it over NAS/Cloud?	NIA has its web-based insurance software solution consisting of various modules such as underwriting, Claims, account, HR etc. It has its centralized data base on private cloud (co-lo site)
81	9	13. Scope of Work	The scope of the work would include the supply, installation, configuration, customization, integration, deployment on Private cloud (On premise) and maintenance of an end to end AI/ML enabled Fraud, Waste and Abuse Control solution for the Health Insurance Claims which is scalable in nature and must integrate with the existing Insurance Software Solution of NIACL.	Kindly clarify the existing architecture of NIACL's current insurance software solution (including technology stack, database engine, image repository type, and access protocols). Will the bidder be provided access to staging/production environments or APIs for integration?	APIs for integration
82	10	i.Fraud, Waste, and Abuse (FWA) Monitoring Solution	The tool should be able to deliver real-time claim tagging for various outlier based on the use-cases, scenarios, industry standard triggers for Health claim adjudication, validation for policy terms and condition pertaining to the claim processing, with a processing capacity of at least 2000 claims per hour and provide analytical dashboards that offer comprehensive insights, including drill-down capabilities for identified suspicious transactions.	Who will procure the dashboards? Do NIACL have any existing dashboard?	vendor has to provide dashboard, NIACL doesnot have any dashboard for this purpoe.
83	10	ii.Unified Intake Frontend	The bidder should provide a Unified front end which will enable claims intake from various channels like emails, TPA front end, inward of physical documents, FTP documents, NHCX intake, WhatsApp channel and other channels as deemed necessary for servicing customers where they are. This enables immediate claims data, documents and images intake from TPAs as well enables future onboarding of claims directly. The intake process should be AI/ML driven with auto classification and auto extraction of information.	Kindly clarify the expected authentication or input protocols for each channel (e.g., email server access, WhatsApp Business API, FTP credentials, NHCX integration specs). Will NIACL provide access/configuration support for these external systems (e.g., shared inboxes, FTP folders, WhatsApp numbers)? Additionally, please confirm if the bidder is expected to provision and host this unified frontend, and whether the AI/ML pipeline should run at ingestion or post-ingestion stage.	Presently all claims are recived and processed by TPAs. The structured, semistructured and unstructured data to be received now through API for inwarding at this front desk. The system should be capable of claim intake through other specified channel in case in future NIA decides to have claim processing done through this system by adding up claim adjudication system. the bidder has to provide and host hte unified frontend. AI/ML pipeline should run during proessing and post processing of claims
84	10	iii.Data Lake (Storage and Processing platform)	Creation of Data Lake on a Meity approved Private cloud platform for ingesting structured, semi-structured and un-structured data from various sources (various Third-Party Administrators through API integration, NIACL ODS for policy/other requisite data) viz. simple data, printed and Scanned hospital documents, x-ray, films, prescriptions, bills, invoices, KYC documents, stickers, logs, metadata etc.	where the documents and data is getting stored currently?	Presently the digital records of the documents get stored at the sites of TPA

85	12	Vii.Clinical journey extraction	The primary goal of this system is to automatically extract comprehensive timelines of patient clinical experiences from various data sources using advanced large language models (LLMs) and vision-language models (VLMs). This would involve processing unstructured clinical notes, medical images, and potentially other forms of patient data to reconstruct the sequence of diagnoses, treatments, and outcomes.	Kindly confirm whether NIACL will provide access to historical clinical notes, diagnosis/treatment records, and imaging data required to train and fine-tune the LLM/VLM models for accurate patient journey extraction. Additionally, please specify if NIACL will provide standard treatment protocols for comparative analysis or if the bidder is expected to source or develop these protocols independently.	NIACL will provide 3 years historical data related to historical clinical notes, diagnosis/treatment records, and imaging data required to train and fine-tune the LLM/VLM models for accurate patient journey extraction. The standard treatmetn protocal has to be as per industry standard.
86	12	Handling Structured and Unstructured Formats:	It must be capable of processing both structured documents (e.g., invoices) and unstructured documents (e.g., handwritten notes), enabling the extraction of relevant information from a variety of formats.	While it is understood that a mix of structured and unstructured documents will be provided, please specify the relative proportion or volume expected across formats (e.g., % of handwritten notes vs. invoices) to optimize processing strategies accordingly.	Please follow industry standard
87	12	Handwriting Recognition	The solution should support handwriting recognition, a key feature for health-related documents (e.g., prescriptions, doctor's notes), ensuring accurate data extraction from non-standard, handwritten text.	please clarify how model performance for handwriting recognition will be evaluated — e.g., character-level accuracy, field-level accuracy, or end-to-end extraction accuracy.	character level accuracy
88	12	Hospital Master Maintenance and Blacklisting	The system should facilitate the maintenance of Hospital Master Records, ensuring that each hospital's status whether part of the Preferred Provider Network (PPN), Third-Party Network (TPN), or a non-network hospital—is accurately tracked and updated.	Kindly confirm whether NIACL will provide an existing hospital master register (including current PPN/TPN statuses and blacklist/watchlist flags) as a baseline, or if the bidder is expected to build this from scratch.	NIA will only provide the details/information of existing PPN/TPN, the master will have to be created by the bidder from scratch
89	13	Drug Data Repository Maintenance and Pharmacy Leakage Prevention	The vendor must provide/create and maintain the drug data repository. The vendor should ensure that the drug data repository is continuously updated in accordance with industry standards, including critical details such as pricing, manufacturing brand, the ailment for which it is primarily prescribed and other relevant information. This information shall be used by FWA Solution to identify and avoid the pharmacy leakages if any. Additionally, solution should also be able to applicability of a medicine for a particular ailment, its dosage, prices etc. through machine learning of the solution. In addition, system should allow flagging of high-cost drugs and their utilization.	Is Ailment and medicine prescribed are stored in some database or is it expected to be picked from documents?	It is not stored in any database. It is expected to be picked up from document

90	17	RIGHT TO AUDIT	NIACL shall also have the right to conduct, either itself or through another agency as it may deem fit, an audit to monitor the performance/security controls by the Bidder of its obligations/functions in accordance with the standards committed to or required by NIACL and the Bidder undertakes to cooperate with and provide to NIACL or any other agency appointed by NIACL, all documents and other details as may be required by them for this purpose. Any deviations or contravention identified as a result of such audit/assessment would need to be rectified by the Bidder failing which NIACL may, without prejudice to any other rights that it may have, issue a notice of default	We cannot grant open-ended audit rights to the client as we are required to maintain confidentiality for all our clients, not just one. In this regard, we request the following safeguard to be appended to the clause "Notwithstanding the above any audit conducted shall be restricted to the physical files in relation to this Agreement only and shall be subject to NIACL agreeing to maintain confidentiality of these documents. No access to Selected Agency's systems or hands on or intrusive testing will be permitted. Any third parties employed to conduct such audit shall not be a competitor of Selected Agency and shall agree to confidentiality obligations with Selected Agency"	Please adhere to the said RFP Clause
91	19	SERVICE LEVEL AGREEMENT (SLA) & PENALTY	The successful bidder shall also sign a Service Level Agreement (SLA) with the NIACL to ensure the up-time of 99.50% on quarterly basis which shall be calculated as accessibility to the FWA Solution and other associated components implemented by the bidder as part of the RFP requirement.	please confirm whether scheduled maintenance windows are excluded from uptime calculations and if any penalties are excluded for maintainance.	The scheduled maintainance shall be excluded from the uptime calculation
92	21	AGREEMENT	The successful bidders shall enter into a detailed Agreement with the Company. The contract period for providing Integration & Implementation of Web & Mobile Applications and related services will be for a period of Three Years from the date of Agreement. SLA mentioned in the RFP will cover performance and availability of the solution deployed for Integration & Implementation of portals/apps and related services	Is mobile application expected? If Yes, what would be it's purpose, who will be using it? What would be the traffic rate? Whether it would be for android or IOS or both?	The agreement will be restricted to the scope of work of this RFP. We shall issue a corrigendum to rectify this
93	36	Technical Bid Format	The proposed solution platform must be cloud-agnostic and must support all major public cloud and private cloud ecosystems namely but not exhaustive AWS, GCP, Azure, etc.	since the RFP already states that the bidder must procure the infrastructure, and that it must be deployed on a MeitY-approved private cloud, the "cloud-agnostic" clause seems contradictory, can you please clarify the need of cloud agnostic platform?	We agree to remove cloud agnostic clause
94	37	19. Technical Bid Format	The proposed solution shall facilitate data profiling based on dynamic, user defined validation rules and support identification of user defined 'events' to trigger alerts (through email reports) to users.	Kindly confirm whether NIACL will provide access to their existing email infrastructure (SMTP/Exchange servers) for triggering alerts from the proposed solution, or if the bidder is expected to provision and configure a separate mailing system. Additionally, please clarify if there are any domain whitelisting, encryption, or compliance requirements (e.g., DKIM, SPF, DMARC) for sending automated emails to NIACL users or external stakeholders.	To be shared with successful bidder
95	37	25. Technical Bid Format	The proposed solution shall have the capability to correct mistakes in spellings, inconsistencies, casings, and abbreviations	where spellings need to be corrected ?	While ingesting the Data

96	32	CONTRACT EXPIRY/TERMINATION	Any product related details and information like digital product library ratings, infographics, documents etc., shall be the Intellectual property of NIACL	Kindly clarify whether the clause on intellectual property applies only to components, configurations, documentation, and deliverables developed specifically for NIACL under this engagement. In case the bidder uses any pre-developed or existing proprietary components, frameworks, models, or platforms as part of the solution, we request confirmation that the underlying IPR of such reusable components shall remain with the bidder, and only the outputs or configuration specific to NIACL shall be transferred.	We agree with the suggestions
97	24	technical evaluation	Average annual turnover as mentioned below for the bidder over the last three (3) Financial Years i.e. for FY 2022-23, 2023- 24, 2024-25. Marks shall be allotted as given below: 1: >INR 120 Cr.= 10 marks 2. > INR 110 cr. Up to 120 Cr = 8 marks 3. > INR 90 cr.to 110 Cr.= 6 marks 4. >70 CR up.to 90 CR = 4 marks 5. >50 CR up to 70 CR = 2 marks	Average annual turnover as mentioned below for the bidder over the last three (3) Financial Years i.e. for FY 2022-23, 2023- 24, 2024-25. Marks shall be allotted as given below: 1. >INR 100 Cr.= 10 marks 2. > INR 90 cr. Up to 100 Cr = 8 marks 3. > INR 70 cr.to 90 Cr.= 6 marks 4. >50 CR up to 70 CR = 4 marks	Please adhere to the said RFP Clause
98	25	technical evaluation	The Bidder shall have following Certifications valid at the time of submission of bid: 4. CMMI Level 3 Certificate or higher - CMMI Level 3 Certificate – 1 mark CMMI Level 4 Certificate – 2 marks CMMI Level 5 Certificate – 2.5 marks	The Bidder shall have following Certifications valid at the time of submission of bid: 4. CMMI Level 3 Certificate or higher - CMMI Level 3/ 4 Certificate – 2 mark CMMI Level 5 Certificate – 2.5 marks	Please adhere to the said RFP Clause
99	1	Bid Document	Bid End Date/Time	We kindly request an extension of the bid submission deadline by two weeks.	Please refere Addendum-2 regarding extension
100	4	Introduction	The data flows to NIACL through web-services in four stages i.e. claims intimation, modification/enhancement, claim upload for payment and rejections/ UTR	At what stage all claim documents are received by NIA from TPAs ?,Are all claim documents centrally and digitally stored with claim number tagging ?What is the average claim value (ACS)?	As of now it is stored with respective TPAs in digitized format and physical formats with unique claim no tagging. TPA received all document after discharge.
101	10	Scope of work	Unified Intake Frontend	Are physical claim documents received by NIA /TPA scanned and digitally stored centrally with claim number identification ? If yes, at what stage of claim lifecycle such physical claim documents digitised ?	TPAs scan and digitally store the claims documents. It is received after discharge
102	10	Scope of work	It should support seamless integration with New India's existing Core applications or other systems	Please provide a list of claims processing / management and investigation softwares being used by NIA currently	NIA has its web-based insurance software solution consisting of various modules such as underwriting, Claims , account, HR etc . It has its centralized data base on private cloud (co-lo site)
103	13	Scope of work	The tool should be able to deliver real-time claim tagging for various outlier based on the use-cases, scenarios, industry standard triggers for Health claim adjudication, validation for policy terms and condition pertaining to the claim processing, with a processing capacity of at least 2000 claims per hour	Are there any deviations/relaxation in the process for cashless claims or reimbursement claims?What is the current average volume of daily claims that NIA is processing ?What is the current rate/ratio of claims investigated out of total claims received?	Please refer Annxure-XIV. The ratio Cashless to reimbursment is 64:36
104	9	Scope of work	The bidder should provide a Unified front end which will enable claims intake from various channels like emails, TPA front end, inward of physical documents, FTP documents, NHCX intake, WhatsApp channel and other channels as deemed necessary for servicing customers where they are	How can physical documents be converted into digital format?Are claim documents received by NIA /TPA over whatsapp stored centrally with claim number identification ? If yes, at what stage of claim lifecycle such claim documents digitised and stored currently ?	Presently all claims are received and processed by TPAs post discharge of the claimant. The structured, semistructured and unstructured data to be received now through API for inwarding at this front desk. The system should be capable of claim intake through other specified channel in case in future NIA decides to have claim processing done through this system by adding up claim adjudication system. the bidder has to provide and host hte unified frontend. AI/ML pipeline should run during proessing and post processing of claims

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105	10	Scope of work	Creation of Data Lake on a Meity approved Private cloud platform for ingesting structured, semi-structured and un-structured data from various sources	More Clarification required on the requirement ?Cloud space would be procured by the client?	The cloud space is to be procured by the bidder
106	11	Scope of work	Data lake should have an integrated Document Management and Document Processing System to intake, store and process the documents as well as clinical images/other relevant file/images received as part of claims.	Is NIA using a claims management and document management system currently which can be leveraged or integrated or It intends to implement a new document management system for claims management process ?	The bidder has to provide document management solution
107	11	Scope of work	The solution Provider shall ensure deployment, management and maintenance of various security components/features/solutions in the proposed identified cloud infrastructure, including but not limited to Network security, Data Security, Application security, Endpoint/Host level security, Vulnerability Management, Centralized log monitoring for all the environments (Development, Testing, Data Centre and Disaster Recovery) etc	Will the Bidder be directly responsible for monitoring the claims flagged by the AI/ML system?	NIA/TPA will be responsible for monitoring the claims. The analysis of the flagged claims would be maintained by Bidder.
108	11	Scope of work	The Solution provider should ensure Independent External Audits to be conducted as per the regulatory requirements and should facilitate in closure of the audit points.	Which type of external audit is being referred here ? Is it security audit or something else ?	IT Security Audit
109	11	New Data Models	The vendor should provide comprehensive data models relevant to the general insurance industry, both in India and globally.	Is it right to assume that it is fraud risk data model being refferred here and not overall general insurance data model	Comprehensive data model specific to Health Insurance Data models
110	11	Scope of work	The Solution Provider should follow and comply with all the regulatory/statutory circulars/Master directions applicable to the company like IRDAI, MeITY, CERT, RBI, SEBI, Ministry circulars, DPDP, IT Outsourcing (RBI Master Circular), NIACL IT Security Policy etc. as applicable.	Are we required to submit our reports to a regulatory authority?	It means the bidder will provide the solution complying all the regulatory /Statutory circulars /Master document applicable as stated in the para referred.
111	11	Scope of work	The Solution provider should ensure Independent External Audits to be conducted as per the regulatory requirements and should facilitate in closure of the audit points.	Which type of external audit is being referred here ? Is it security audit or something else ?	IT Security Audit
112	12	Scope of work	Policyholder/Insured Onboarding and Underwriting Decision Support	Is customer policy underwriting validation support capability also expected as part of the solution ?	In Core insurance System, Policy underwritng is done in the undwerwiting module. It is planned to corellate the Claims data with the policy, members of the policy so as to have insight about the claims trends pertaining to a particular person, entity, location, intermediary, hospitals etc. This will help policy underwriting decision making
113	12	Scope of work	Hospital Master Maintenance and Blacklisting	Hospital networking module is entirely separate from claim model and requires extra effort other than main purpose of this RFP	It is not part of claim module and needs to be created At present we donot have any digitzed Hospital Master Record (HMR) system. We want vendor to create Hospital Master Record with a facility to extend it to NIACL team to add, delete, modify, flag the hospital records
114	13	Scope of work	Digitized Contracts with Hospitals	Hospital contracting module and ratelist updation is entirely separate from claim model and requires extra effort other than main purpose of this RFP,How are the existing NIA contracts with hospitals currently available and maintained in i.e. scanned / PDF / Digital format / physical document and are these available in a central repository ?	The PPN expansion is a continual process. We expect bidder to digitized the existing as well as to be added in future contracts, schedule of charges etc so that it becomes part of validation processes. It is either available in scanned or PDF format

115	13	Scope of work(xiv-k)	The bidder should be able to configure various alerts and dashboards, regulatory and compliance reports/MIS as may be required by NIACL	Is there a sample available for the regulatory report, or will bidders be exempt from participating in any regulatory audits?	The NIACL needs to submit various reports related to claims data as part of IRDAI filing or other compliance reports required by regulatory bodies,NIACL expects bidders configure and get the reports from the solution. The formats will be provided to successful bidder.
116	14	SPECIFIC TERMS & CONDITIONS14.2	No data will be shared with any third party or for any publications etc., unless written permission has been obtained from the Competent Authority in NIACL.	How should we share data with the Third Party Administrator (TPA) processing claims? Is a separate Non Disclosure Agreement (NDA) or a tripartite agreement necessary?	NIA will authorize bidder to share data with the panelled TPAs or other Third parties as and when required.
117	14	Scope of work	Audit of Claim: The FWA Solution should provide an Auditing interface for the Doctors from New India /Internal Auditors /Statutory Auditor to do the audit of the claims by accessing the information and relevant documents through an authorized access by the administrator. In addition, it should be able to integrate the investigation details and report from TPA investigation	Is bidder expected to conduct manual investigations or audits based on system-generated alerts?	If deep dive is required into a specific claim based on alerts or otherwise, Doctors from New India /Internal Auditors /Statutory Auditor to do the audit of the claims by accessing the information and relevant documents through an authorized access by the administrator. There should be provision for providing comment in relaion with audit such conducted.
118	14	Scope of work	Audit of Claim: The FWA Solution should provide an Auditing interface for the Doctors from New India /Internal Auditors /Statutory Auditor to do the audit of the claims by accessing the information and relevant documents through an authorized access by the administrator. In addition, it should be able to integrate the investigation details and report from TPA investigation	Does NIACL require the creation of a dedicated Project Management Unit (PMU) comprising functional and technical experts to support the project?	PMU is not required. Acess for audit funcionality would be required wherein the auditor/investigator should be able to access the information and relevant document and put his remarks if any.
119	14	Scope of work	It should support seamless integration with New India's existing Core applications or other systems as needed and include a customizable rules engine to adapt to evolving fraud detection needs. The solution must also ensure data security and compliance with relevant regulations. Also if in case, in future, NIACL decides to move/changes its Core Insurance Software to a cloud platform / or any other existing platform, the software solution proposed for the FWA should be able to integrate with the same seamlessly	Will Bidder be involved in defining business rules and triggers for fraud detection?	Yes, the bidder will be involved business rules and triggers for fraud detection
120	14	Scope of work	The proposed solution should enable officers to identify areas of scrutiny and further questioning during the pre-audit preparation through desk audit	Is bidder be responsible for maintaining audit trails or investigation summaries?	Yes
121	14	Scope of work	Audit of Claim: The FWA Solution should provide an Auditing interface for the Doctors from New India /Internal Auditors /Statutory Auditor to do the audit of the claims by accessing the information and relevant documents through an authorized access by the administrator. In addition, it should be able to integrate the investigation details and report from TPA investigation	Will Bidder interact with TPAs, hospitals, or other third-party entities during investigations?	The bidder will not be required to interact with TPA, hospital or other third party entities. They may be required to make additional information available from the system on need basis
122	16	IMPLEMENTATION AND INTEGRATION 16.2	Delay in integration - In case bidder is not able to complete required integrations within the stipulated period of 6 calendar Months from the date of order, a penalty of Rs. 1,00,000/- per day subject to a maximum of Rs 1,00,00,000/- shall be imposed. The amount will be recovered by forfeiting the Performance bank guarantee.	Are there any deviation or relaxation of deployement time provided ?	Please adhere to the said RFP Clause

123	17	19. RIGHT TO AUDIT	NIACL shall also have the right to conduct, either itself or through another agency as it may deem fit, an audit to monitor the performance/security controls by the Bidder of its obligations/functions in accordance with the standards committed to or required by NIACL and the Bidder undertakes to cooperate with and provide to NIACL or any other agency appointed by NIACL.	We have concerns about an audit being conducted by a third party, especially since the solution is deployed on your premises. Could you clarify what our role would be in such an audit?	IT system of the software would be required to be conducted as required by regulations
124	37	Annex II, point # 25 & 26	Safe string encode / decode capabilities	Can you please explain the objective behind the functionality	It is required to ensure the secured transmission of data.
125	37	Annexure II , No36	The proposed solution shall support correction logic for Indian names, addresses, phone numbers, other identification proof documents and demographic details . The solution should have the ability to identify gender of individuals using the INDIA specific vocabularies	Could you please confirm if the language used will be limited to Hindi and English only?	Multilingual
126	39	Annex II, point # 60-63, 65	The solution should provide for model selection based on either the training, validation (default) or test data using several criteria such as profit or loss, AIC, SBC, average square error, misclassification rate, ROC, Gini, or KS (KolmogorovSmirnov)	What is the purpose of this model selection capability to the end user ? Models are pre-trained and selected while deploying the solution. Is that not sufficient ?	Models needs to be trained NIA health claims data. However the detailed use cases to be discussed with successful bidder.
127	40	Annexure II , No92	The proposed solution shall support ad-hoc querying of the data	Are we looking for search applicability in existing data only?	In existing data plus other availalbe data
128	41	Annexure II , No111	The proposed solution should provide built in features to apply an appropriate disposition of the alert - such as closing, suppressing, moving to another queue (such as high or low priority), linking to a different object, and sending the alert information to an external system after a decision is reached about how to handle the alert	Are we looking for the alert management like solution	We require the Alert functionality, as per the RFP.
129	42	Annexure II , No115	The proposed solution should enable the investigator to Prioritize alerts, , Visualize alerts in different views to gain context., Enhance alerts by adding entities and integrating and connecting data., Escalate by routing alerts or changing their priorities, Create manual alerts., Manage multiple alert domains., Designate an alert to prompt a deeper investigation through its alerts and event management capabilities	More Clarification required on the requirement ?	The requirement is clear and self-explanatory.
130	43	Annexure II , No125	The proposed solution should come in with in-built feature of workspace for interactive intelligence analysis, which will provide an investigator work area that enables the investigator to gather objects of interest - such as entities and alerts, to the investigation from the data repository.	More Clarification required on the requirement ?	The requirement is clear and self-explanatory.
131	43	Annexure II , No132	Administrators should be able to configure the following, based on the relationship or entity data: line color, style, and weight icon, node color, node border color, node shape, node border width, node scale, additional label, and indicator icon, all through Graphical User Interface	Is the team looking for a GUI-based drag-and-drop functionality?	NIACL is looking for a simple and configurable GUI .
132	44	Annexure II , No142	The proposed solution should allow additional links and entities which are external to the network data, to be added to the network	More Clarification required on the requirement ?	The solution should be capable for adding entities external to the netwok such IIB, NHA etc
133	44	Annexure II , No146	The proposed solution should provide the ability for administrators to monitor and administer workflows. This includes the ability to:	Is this workflow working like drag and drop functionality?	The requirement is clear and self-explanatory.

134	45	Annexure II (174)	The proposed solution should enable officers to identify areas of scrutiny and further questioning during the pre-audit preparation through desk audit	Will Bidder be involved in supporting internal or external audits related to fraud detection and claim processing?	No direct involvement, but support for addional information for scrutiny would be required
135	49	Annex II, point # 234	Ability to integrate with GIC (General Insurance Council), LIC (Life Insurance Council) & IIB to identify claims with multiple insurance companies for same accident or injury to receive multiple payouts	NIA shall be responsible to get approvals for integrating data from these sources . Pls confirm	NIACL shall facilitate if the APIs are exposed by these entities
136	62	Term	Obligations to survive for a period of 3 years from the date of expiry or termination of contract.	We request to reduce the survival period of confidentiality obligations to one year post expiry or termination.	Please adhere to the said RFP Clause
137	15	Clause 15	NIACL may, at any time, terminate the contract by giving written notice to the Bidder, without any compensation to the Bidder	To uphold the principles of natural justice, we request to notify us and give us a rectification period of at least 30 days, prior to invoking this clause.	This is for termination for insolvency
138	19	Clause 29(II)	If the bidder fails to maintain guaranteed up-time of 99.50% on quarterly basis, NIACL shall impose a penalty. If the up-time is below 97%, the NIACL shall have full right to terminate the contract under this RFP.	To uphold the principles of natural justice, we request to notify us and give us a rectification period of at least 30 days, prior to invoking this clause.	Please adhere to the said RFP Clause
139	32	Clause 7	If at any point of time, the services of vendor are found to be non-satisfactory the contract will be terminated.	To uphold the principles of natural justice, we request to notify us and give us a rectification period of at least 30 days, prior to invoking this clause.	Please read the complete termination claue
140	19	Clause 29.	Penalties for SLA breach capped at more than 5%	We request client to cap the liquidated damages/penalties cumulatively to 5% of the total contract value.	Please adhere to the said RFP Clause
141	18	Clause 25.2	Penalties for SLA breach capped at more than 5%	We request client to cap the liquidated damages/penalties cumulatively to 5% of the total contract value.	Please adhere to the said RFP Clause
142	No	Limitation of Liability	No clause in RFP	We are requested to add the language like "Purchaser/Client agrees that Consultants total liability for all claims connected with the services or this agreement (including but not limited to negligence), whether in contract, tort, statute, indemnities or otherwise, is limited to one time the professional fees paid / payable for the services. Purchaser/Client agrees that Consultant will not be liable for (i) loss or corruption of data from your systems, (ii) loss of profit, goodwill, business opportunity, anticipated savings or benefits or (iii) indirect or consequential loss."	The bidders are requested to regularly visit GEM portal /NIACL's official website for addendum if any on this
143	10	Point no.13(iii) and page no 10	Creation of Data Lake on a Meity approved Private cloud platform for ingesting structured, semi-structured and un structured data from various sources	The RFP mentions a 'MeitY-approved Private Cloud Platform.' Please clarify if a Virtual Private Network in Public CSPs (such as a VPN in Azure or a VPC in AWS) will qualify under this requirement?	NIACL is looking for On-premises Private Cloud
144	10	Point no.13(iii-a) and page no 10	Data lake should have an integrated Document Management and Document Processing System to intake, store and process the documents as well as clinical images/other relevant file/images received as part of claims.	Document management & Document Processing System includes capabilities such as e.g., version control, access management, workflows, and managing document life cycle. A Data Lake is primarily designed to host all forms of data including unstructured data for analysis purposes. Typically, Data Lake and Document management requirements are exclusive to each other. Could you please clarify if the requirement pertains only to the storage of unstructured documents and images, or does it also include document management capabilities?	NIACL is looking for a Document Management and Document processing system to intake, store and proess the documents, files, images etc related to claim

145	11	Point no.13(vi) and page no 11	Image forensic solution:The bidder shall provide a readily integrated or modular to be ready to integrate with the proposed solution for checking de-duplication of the documents related to the claims along with possible similarity check not limited to date.	What is the expected daily or monthly volume of documents to be ingested and checked for de-duplication (e.g., number of documents per day)?	Please refer claim processing requirement of 2000 claims per hour.
146				What is the average file size or range of file sizes for the documents to be processed? What is the total size of Image Data | Document Data | Other Unstructured Data?	Plese refer annexure XIV and SOW for reference
147				What is the expected concurrency i.e., how many parallel document ingestion or similarity-check operations may happen at peak load?	Refer no of claim per hour requried and average no. of document per claim for the purpose
148				Is there a requirement for near real-time processing of documents, or is batch-based (e.g., hourly, nightly) processing acceptable? For building Image models on-prem it will require GPU's. In private cloud GPU will have to be available dedicated for NIA which will make it very expensive. Is it okay deploy the solution on a Private VPN on Public Cloud where GPU can be utilized on-demand thus making it cost optimized ?	Real or near real time processing would be required for cashless claims and batch processing or reimbursement claims/other requirement
149				Is there an expectation to process historical/backlog documents as part of the initial rollout? If yes, what is the estimated size of that archive?	We plan to store last 3 years claims structured and unstructured data for machine learning. The same may also be used for similarity check for new claims going forward
150	10	Point no.13(iii) and page no 10	Consumption layer	The assumption is that all data consumption from the Data Lake willl be driven through a unified data and analytics consumption platform. In that regard, please elaborate the number of downstream systems	NIACL's claim module in Core Insurance system, TPA systems
151	10	Point no.13(iii) and page no 10	Data volumes - One time load	Could you please provide details on volume of data to be ingested as one - time load for real-time data, structured, unstructured, semi structured data & marketing data. Could you also provide volume of data involved, the no. of years of data that is in scope for one time load.	We plan to go ahead with 3 years historical policy as well as claims data. Sizing parameters as per Annexure- XIV
152	10	Point no.13(iii) and page no 10	Data volumes - Incremental Load	Could you provide more details on volume of data to be ingested as incremental load (daily) for real - time data, structured, unstructured, semi structured data & marketing data	Daily we may expect 25k to 30k claims. Its highest on Monday or on the day after consequent holidays in the range of 75k-80k
153	39	Point 64 and page no 39	Multiple sources	As there are multiple source systems in NIA, could you please specify the list of source data connectors required to connect to data sources?	The data may be sourced from around 20-25 sources.(majorly 17 TPA, NIA ODS, IIB, NHCX etc).
154	10	Point no.13(iii) and page no 10	Storage	Please specify the composition of structured, semi-structured data & unstructured data in percentage terms if available.	to be provided to the successful bidder
155	10	Point no.13(iii) and page no 10	Storage	Please confirm the expected data growth on yearly basis	Refer Annexure -XIV
156	10	Point no.13(iii) and page no 10	Storage	Please specify the size of data to be used for Hot/Cold/Warm data footprints	to be provided to the successful bidder
157	10	Point no.13(iii) and page no 10	Storage	Could you please specify the estimated average volume of data expected to be used for analytics at a given point in time?	Please assume as per Standard industry average
158	10	Point no.13(iii) and page no 10	Storage	Could you please specify the estimated average volume of data expected to be used for advanced analytics at a given point in time?	Please assume as per Standard industry average

159	10	Point no.13(iii) and page no 10	Storage	Could you please specify the estimated average volume of data expected to be used for report/dashboard at a given point in time?	Please assume as per Standard industry average
160	10	Point no.13(iii) and page no 10	Storage	Could you please specify the estimated average volume of data expected to be used for model development at a given point in time?	Please assume as per Standard industry average
161	56	Annexure VI and Page no 56	Infrastructure - Enviornment	Production, DR and UAT any other enviornment?	Production, DR and UAT environement. Bidder may also suggest as part of their proposed solution
162	56	Annexure VI and Page no 56	Infrastructure - Enviornment	As DR is required can we get the RTO/RPO requirement?	Bidder may suggest in line with their proposed infrastructure solution
163	13	Point no.13(xv) and page no 13	User Roles and concurrency	Could you please specify the different types of users who will interact with the AI/ML based solution (e.g., advanced analytics, power users, model developers, API clients)?	Please refer RFP (to be decided in consultation with successful bidder)
164				What are the expected workloads and interaction patterns for each user group?	Please refer RFP (to be decided in consultation with successful bidder)
165				How many concurrent users are expected for each user type during: Peak usage and Average usage	Please refer RFP (to be decided in consultation with successful bidder)
166	11	Point no.13(iv) and page no 10	New Data Models:The vendor should provide comprehensive data models relevant to the general insurance industry, both in India and globally.	We understand that the Data layer will require an industry prebuilt data model with KPI's for insurance that will help accelerate the implementation and go-to-market for consumption of insights. Please provide you clarification on the same.	We agree to go as per Industry pre-build data model for Insurance. However there may be need for new data model due to change in regulatory guidelines or any other changes, the bidder has to take care of the same.
167	10	Point no.13(iv) and page no 10	Unified Intake Frontend	Could you please clarify the priority order or expected volume of claims intake from each channel (e.g., email vs WhatsApp vs physical documents) to help scope channel integration efforts?	Presently all claims are recived and processed by TPAs. The structured, semistructured and unstructured data to be received now through API for inwarding at this front desk. This is primarily recived by TPA on their portal from Hospitals and some through email. WhatsApp and Physical doc is forward looking and the system should be capable of claim intake through these channeld in case in future NIA decides to have claim processing done through this system by adding up claim adjudication system.
168			Unified Intake Frontend	Are there existing APIs or systems in place for each intake channel (such as TPAs or NHCX), or will the bidder be responsible for developing connectors/adapters from scratch?	The existing APIs are only for structured data through TPA channel. However the requirment is there to receive structured as well as unstructured data, the API may be required to develop from scrach by the bidders. NHCX feed is taken by TPA as of now as the claims are processed through TPAs.
169			Unified Intake Frontend	Pls elaborate on the document types and formats (PDF, images, scanned forms) are expected for intake?	Dischage Summary, Consultation Papers, lab reports, xray films, MRI/CT Scan, USG, Phramacy bils etc. These can be PDF/images/scanned docs.
170			Deployment, configuration and commissioning	Can you please confirm whether NIACL will provide access to historical claims data (structured and unstructured) for model training and validation? If yes, please specify the expected volume and data types.	Yes, Historical claims data (structured and unstructured) for 3 years is to be placed in data lake. The details are as per Annexure -XIV
171			Deployment, configuration and commissioning	Could you please clarify the expected latency for "real-time alerts"?.	Pre-processing, and during processing has to align with the TAT for pre-authorization within 1 hour and discharge approval within 3 hours. Keeping this in mind bidder should suggest based on industry standard practises.

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172	9	Scope of Work -Point 13 (i) – "Detailed Scope of Work" (Scope of Work.pdf)	Claim Processed	What are the approximate proportions of health claims processed as cashless vs. reimbursement? For cashless claims, on average, how many times are documents submitted/updated before the claim is fully adjudicated and paid? (e.g., multiple document uploads, interim approvals, final submission) On average, how many pages or documents are typically associated with a single health claim file (for both cashless and reimbursement claims)? Are the documents submitted in a single batch or through multiple stages during the lifecycle of a claim (especially for cashless)?	The proporion of Casheless to Reimbursment claim is tentatively 64:36. The document pages per claim ranges from 25-40. Not always documents are submitted in single batch, it is submitted multiple stages
173	10	Point 13(ii)	Unified Intake Frontend	The RFP mentions that the solution should support intake and processing of data/documents across various channels, including but not limited to email, TPA front-end, physical document inward, FTP, NHCX, WhatsApp, and any other customer servicing channels deemed necessary. To ensure proper scalability and channel-specific integration planning, we request clarification on the following: What is the current number of active intake channels being used by NIACL (e.g., how many TPA front-ends, email inboxes, FTP endpoints, WhatsApp accounts, etc.)? Are there any projected additions or expansions of these channels during the course of the project? Please share approximate volumes per channel, if available, or expected capacity requirements to help us size ingestion components accordingly.	As of now the only channel will be applicable is TPA channel. In case in future, NIA decides to start processing the claim in this solution system by allowing TPAs to do claim adjudication on this solution system, then the other channels as specified would be required. The system should be capable to support it.
174	12	Point13 ix	Policyholder / Insured Onboarding and Unerwriting Decision Support	The RFP states that the system should facilitate comprehensive policyholder onboarding, capture policy- and member-level details, track claim trends linked to underwriting parameters, and support risk-based triaging for underwriting decisions. We request clarification on the following: Is the proposed solution expected to support health policy underwriting workflows in addition to FWA monitoring? If yes, please elaborate on the specific underwriting use cases that the system is expected to enable (e.g., risk scoring, triaging, data enrichment for underwriting, decision support). Will this module need to integrate with existing underwriting platforms or workflows, or is it expected to function as a standalone decision-support interface?	In Core insurance System, Policy underwritng is done in the undwerwiting module. It is planned to corellate the Claims data with the policy, members of the policy so as to have insight about the claims trends pertaining to a particular person, entity, location, intermediary, hospitals etc. This will help policy underwiting decision making

175	12 & 13	Point 13 x & xi	Hospital Master & Digitised contracts	The RFP outlines requirements for maintaining a comprehensive Hospital Master, including real-time tracking of status (PPN, TPN, non-network), blacklisting/watch-listing, scoring/rating of hospitals, and integration with third-party-maintained hospital registries. Additionally, the solution must support digitization and storage of contracts and schedule of charges for paneled hospitals. To design and scale this functionality accurately, we request clarification on the following: What is the current number of hospitals in NIACL's network across PPN, TPN, and non-network categories? What is the estimated growth rate or future expansion plan for hospital onboarding over the next 3–5 years? Are there existing systems or registries currently in use for hospital scoring, blacklisting, or contract management that the proposed solution needs to integrate with? Will the vendor be expected to digitize historical hospital contracts, or only maintain new ones going forward? Are there specific formats or standards required for digitizing and storing schedule of charges/package details, and how frequently are these expected to change?	The current network (PPN + TPA network)is around 25000 + Non-Network : Data not available The vendor is expected to digitize all existing as well future contracts. There are standard formats available for SOC and Procedures
176	13	Point 13 xii	Drug data repository.	The RFP specifies that the vendor must provide or maintain a drug data repository, updated in accordance with industry standards, including attributes like pricing, brand, ailment applicability, dosage, and more. This data is to be used for identifying pharmacy leakages and enabling the system to flag high-cost drugs and validate medical appropriateness using machine learning. To understand integration scope and feasibility, we seek clarification on the following: Does NIACL currently have access to any existing drug database or plugins/APIs (e.g., standard drug registries, pricing databases, or pharmaceutical directories) that can be leveraged for this repository? If not, is the vendor expected to procure or license third-party drug datasets, or build and maintain this repository entirely from scratch? Will NIACL facilitate access to industry-recognized references (such as NLEM, CDSCO, or private pharma data providers), or should the bidder arrange these independently? Are there any preferred standards or coding classifications (e.g., ATC, RxNorm, HSN codes) that must be used in maintaining the repository?	NIA at present do not currntly have access to any drug databases. The bidder is expected to acquire the data and maintain the repository by the modes to do so availble in the industry.

177	14	point 13 xvii	training	The RFP mentions that the bidder is expected to conduct functional and technical training for NIACL personnel, covering solution navigation, alert analysis, and dashboard customization, along with training material and evaluation support. To estimate effort and plan logistics effectively, we request clarification on the following: What is the approximate number of participants expected to undergo training (separately for Health and IT departments)? How many training sessions are expected to be conducted, and at what frequency (e.g., one-time at go-live, periodic refreshers, or ongoing for new users)? Will the training be conducted on-premise, virtually, or in a hybrid mode? If on-premise, please share the locations where sessions are likely to be held. Are there any expectations around multilingual delivery or role-specific training tracks (e.g., IT administrators vs. business users)? Should the bidder factor in train-the-trainer sessions as part of the training plan?	NIA shall mutually decide on the training frequency with successful bidder..
178	16	Point 16 i & ii	Project Timeline and Penalty Clause	As per the RFP, the bidder is expected to complete the delivery, configuration, customization, integration, UAT, rollout, and training within 6 months of PO issuance, with a penalty of ₹1,00,000 per day (capped at ₹1 crore) for delays in integration. Considering the solution has multiple dependencies on NIACL inputs and integrations (e.g., system access, TPA coordination, existing data availability, channel readiness, claim samples, API endpoints, etc.), we request the following clarifications: Kindly confirm that the 6-month implementation timeline will be calculated based on mutual readiness and availability of NIACL dependencies, including access to required systems, infrastructure, and data. Please confirm that penalties will not be imposed in cases of delay caused due to factors attributable to NIACL, including delay in approvals, test data, system credentials, infrastructure provisioning, or third-party coordination. We request that the final project plan and timeline be mutually agreed upon post-Purchase Order, factoring in dependency sign-offs and readiness checkpoints to ensure fair accountability.	There will be penalties only for the delays attributable to bidder.

179.	10	Para 13 (No.) ii	Unified Intake Frontend: The bidder should provide a Unified front end which will enable claims intake from various channels like emails, whatsapp and other channels as deemed necessary for servicing customers where they are.	1. Does the asked system open to expose the source or API? 2. Can you clarify the specific APIs or protocols required for integration with external platforms like IRDAI, IIB, and UIDAI? 3. Could you please specify which social media channels are expected to be included in the integration scope? As for integration both the source along with Target should comply for integration.	This refers to the capability of the tool to integrate with different channels if required in future. Presently intake channel would be TPA only and NHCX through TPA channel only
180	10	Para 13 (No.) iii	Data Lake (Storage and Processing platform): Creation of Data Lake on a Meity approved Private cloud platform for ingesting structured, semi-structured and un-structured data from various sources (various Third-Party Administrators through API integration, NIACL ODS for policy/other requisite data) viz simple data, printed and Scanned hospital documents, x-ray, films, prescriptions, bills, invoices, KYC documents, stickers, logs, metadata etc.	Since the historical/Legacy data of processed claims should not be impacting the new claim processing process. 1. Does historical data movement to data lake should be consider in support phase? 2. Are any third-party forensic tools approved or preferred, or should the bidder propose proprietary or open-source tools?	Last 3 years historical data movement to Data lake will be there. After the completion of 1 year of go live, oldest 1 year data may be removed from the data lake. So only 3 years data will be available every year
181	12	Para 13 vii	Clinical journey extraction: The primary goal of this system is to automatically extract comprehensive timelines of patient clinical experiences from various data sources using advanced large language models (LLMs) and vision-language models (VLMs). This would involve processing unstructured clinical notes, medical images, and potentially other forms of patient data to reconstruct the sequence of diagnoses, treatments, and outcomes.	1. What volume and variety of historical data will be made available to train, fine-tune, or validate the bidder's pre-built AI/ML models? 2. Should models be trained solely on NIACL's internal data, or can public datasets be leveraged for model accuracy improvement? 3. What labeled datasets, if any, will NIACL provide to train fraud detection and clinical journey extraction models?	1. 3 years historical claims data 2. NIACL Data primarily, in addition to this the data from other relevant sources like IIB , NHA etc 3. Discharge card, consultation paper, MRI/CT Scan/USG, Pharmacy bills, KYC document
182	12	Para 13 viii	OCR: Optical Character Recognition (OCR) for digitizing health insurance documents such as invoices, prescriptions, and handwritten notes. The OCR should support handwriting recognition, adaptive learning, and extraction of critical data	Since the response of OCR functionality depends on quality document. 1. What percentage of document are hand-written? 2. Does the OCR solution need to support multilingual text recognition, especially for regional languages in India? 3. What accuracy level is expected (in %) for structured vs. unstructured data extraction using OCR and handwriting recognition?	Bidder to assume based on industry standards

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183	13	para 13 xii	Drug Data Repository Maintenance and Pharmacy Leakage Prevention: The vendor must provide/create and maintain the drug data repository. The vendor should ensure that the drug data repository is continuously updated in accordance with industry standards, including critical details such as pricing, manufacturing brand, the ailment for which it is primarily prescribed and other relevant information. This information shall be used by FWA Solution to identify and avoid the pharmacy leakages if any. Additionally, solution should also be able to applicability of a medicine for a particular ailment, its dosage, prices etc. through machine learning of the solution. In addition, system should allow flagging of high-cost drugs and their utilization	1. What kind of medical ontologies or standard treatment protocols should be referred to for deviation analysis (e.g., STGs, SNOMED CT, ICD-11, Ayushman Bharat protocols)? 2. Should the clinical audit system also include decision support or only flag deviations? 3. Will integration with third-party hospital registers and pharmacy databases be facilitated by NIACL?	1. As per industry standard 2. only flags 3. For third party hospitals regsiter NIA will facilitate, Pharmacy databases to be taken care by bidder
184		OEM Engagement during implementation	Quality and best practice of Proposed OEM is implemenated.	In order to ensure the continuous governacne and support of OEM, how NAI is ensuring that OEM remained engaged during implemeantion and support of project?	Bidder has to ensure support from OEM throughout the currency of the contract. The responsibilty lies with Prime Bidder/SI
185		Please advise on the number of Users as per below			to be decided in consultation with successful bidder
186		- Claim Fraud Scenerio Designer (Decision Architect)			to be decided in consultation with successful bidder
187		- Data Engineers			to be decided in consultation with successful bidder
188		- BI Developers			to be decided in consultation with successful bidder
189		- Desktop / Power Investigators			to be decided in consultation with successful bidder
190		- MIS & Report Viewers			to be decided in consultation with successful bidder
191	9	para 13 i	Fraud, Waste, and Abuse (FWA) Monitoring Solution	1.How many beneficiaries are involved annually?	Please refer Annexure XIV
192				2.What is the total number of policies covered annually?	Please refer Annexure XIV
193				3.What is the total number of applications received or processed annually?	Please refer Annexure XIV
194				4.What is the number of supporting documents submitted with claims? Structured documents (e.g., PDFs): Structured documents (e.g., PDFs): Count per claim? Average file size (in MB)? Unstructured documents (e.g., scanned images, photos): Count per claim? Average file size (in MB)?	Bidders to consider industry standard in addtion to data provided in Annexure XIV
195				5.What is the total number of policies covered annually?	Please refer Annexure XIV
196				6.How many hospitals are part of the network or data ecosystem?	25000+ (PPN and TPA Network)
197				7.What is the count of ICD codes and test procedures typically handled?	total ICD codes around 80,000, frequenty used 5000, Test procedure as per industry standard

198				8.How many associates are involved, including Third Party Administrators (TPAs)?	20-25 including TPAs
199				9.How many doctors are part of the process or system?	No of approx users already mentioned above
200				10.What is the number of branches operating in Rajasthan (or other relevant locations)?	Not relevant
201				11.What is the total number of employees or processors involved in operations?	No of approx users already mentioned above
202				12.What is the total number of transactions processed annually (including renewals and payments)?	Please refer Annexure XIV
203				13.How many unique bank accounts are involved (for, payout, refund, or beneficiary validation purposes)?	To be informed to the successful bidder
204	Page 18	Payment Terms	Payment Milestone	As product subscription fee is due in advance, request NIA to consider payment of Software Fee in Advance.	Please adhere to the said RFP Clause
205	Page 36	Data Management Data Quality	DeDupe and House Holding	Is it required to have India specific Quality Knowledge Base for building these algorithms specific for India, with supporting india reference cases for the same.	It is prefered to have India specific Quality knowledge base. However relevant and applicable knowledge base from other territories are appreciated
206	Page 10	Point no.13(iv) and page no 10	Deployment, configuration and commissioning	What is the average number of transaction rows processed per day in batch mode?	To be informed to the successful bidder
207				What is the average daily input data size in batch mode?	To be informed to the successful bidder
208				What is the expected job run time for daily processing in batch mode?	To be informed to the successful bidder
209				How many total requests (transactions per seconds (TPS)) for real time use case?	To be informed to the successful bidder
210				What is a size of each request (in KBs) for real time use case?	To be informed to the successful bidder
211				What is the expected average latency (in milliseconds) for real time use case?	Please refer RFP for per hour claim processing data
212				How many models will be stored in the Model Repository?	To be decided in consultation with successful bidder
213				Will the total input data be stored in a database or on a local disk drive (e.g., NFS, block storage)?	To be stored in datalake
214				If the input data is stored locally, what is the total data size that will be retained in the Model Repository?	To be decided in consultation with successful bidder
215				What is the typical size of model score code files stored in the repository?	To be decided in consultation with successful bidder
216	8, 11, 5	Clause 24.3, 11(d), DPDP compliance	Clause 24.3, 11(d), DPDP compliance	Are there provisions for cost adjustments due to changes in regulatory requirements (DPDP Act amendments, IRDAI guidelines) during the contract period?	to be discussed with successful bidder and to be provisioned accordingly
217	18-19,	Commercial Bid (Sec II)	TCO evaluation, Annexure-VI	Can the pricing structure include different commercial models (per-transaction, per-user, hybrid) rather than fixed annual pricing to align with usage patterns?	Please adhere to the RFP clauses on pricing model
218	9-14, 56	Scope of Work	Clause 13(iii), cloud platform procurement	Will NIACL provide any infrastructure components (servers, storage, network) or is the vendor expected to provide complete infrastructure including hardware?	The vendor has to provide complete infrastructure including hardware
219	18, 4, 36	Data Management & Ownership	Clause 22, 23, DPDP compliance.	What are the data retention policies and archival requirements for claims data, policy information, and audit logs?	To be discuss with successful bidder

220	-16, 18-	Implementation & Integration	Clause 16, payment milestones	Can the solution implementation be structured in phases, starting with basic FWA monitoring and progressively adding advanced features?	Please adhere to the RFP clauses on this
221	1, 19	Invitation to Bid	Pre-bid meeting, queries process	Is it possible to arrange a pre-bid site visit to understand the current infrastructure and operational workflows?	Please refer RFP for operational workflow
222	page 10	Sec9, 13 Scope of Work	page 9 - "The scope of the work would include the supply, installation, configuration, customization, integration, deployment on Private cloud (On premise)" Page 13- "The cloud platform subscripton should be procured by the bidder in the name of NIACL"	There are two conflicting statements . One says it is an On Premise Solution, the other says the cloud . Please clarify what does is mean to buy a cloud platform subscription	We are looking for on premise private cloud
223	Page 10	Sec 13 Scope of work	"It should support seamless integration with New India's existing Core applications or other systems as needed"	1. Please provide the list of all the applications to be integrated 2. What are technology platforms of these core applications 3. We expect the Source system owners will extract the data from the system and provide it in the format agreed for integration and processing with ETL. Please confirm 4. How many of the core applications will provide data in the the form of APIs 5. Please provide the frequency of data provisioining from these systems	1. TCS Bancs and ODS and other external application as mentioned in RFP 2. To be discussed with successful bidder 3. TPA, IIB, NHCX etc 4. Please refer point 1 above 5. To be discussed with successfuld bidder
224	Page 10	Sec 13 Scope of work	"Unified Intake Frontend"	Does this mean the expectation is to build a single portal with all the necessary functionlites indicated	Yes
225	Page 10	Sec 13 Scope of work	"ingesting structured, semi-structured and un-structured data from various sources"	The unstructured data does not include audio and video files. Please confirm. Also please clarify if it is required to process these audio/video files and extract information from these files?	No, it will not include Audio and Video files, No it is not required to process audio /Video filesto extract data
226	Page 10	Sec 13 Scope of work	"Data lake should have an integrated Document Management and Document Processing System to intake, store and process the documents as well as clinical images/other relevant file/images received as part of claims."	Is the solution expected to provide a separate tool/technology for Document management system. Please confirm	functionality is required as stated. Bidders to decide if it can be achieved without separate tool
227	Page 12	Sec 13 Scope of work	"Optical Character Recognition (OCR) solution should be a readily integrate-able"	The understanding is that OCR solution will be provided by NIACL and that SI need not procure and OCR Solution. The scope is only required to intergrate the solution with OCR. Please confirm	OCR will have to be procured by Prime Bidder /SI. NIA will not provide it. All solution requested and the required componets are to be procured by prime bidders/SI
228	Page 12	Policyholder/Insured Onboarding and Underwriting Decision Support	"The triaging process for policy underwriting may be driven by a risk score"	Please confirm if the expectation is to build / provide an Triaging application (similar to case management application) with workflows inbuilt with different roles	In Core insurance System, Policy underwritng is done in the undwerwiting module. It is planned to corellate the Claims data with the policy, members of the policy so as to have insight about the claims trends pertaining to a particular person, entity, location, intermediary, hospitals etc. This will help policy underwiting decision making
229	Page 13	"Hospital Master Maintenance and Blacklisting'	"the bidder must ensure that records of blacklisted or red-flagged hospitals are consistently updated and maintained in real-time to prevent fraudulent claims and mitigate risks."	Please provide details how this real time data is expected. Is it via API or Data streaming ? which our solution has to consider for integration solution	It will be a batch process basis
230	Page 13	Digitized Contracts with Hospitals	"The vendor shall also digitize and store the digitized Contracts for all the paneled Hospitals (PPN) of NIACL (existing as well as paneled in future)."	What is the volume of contracts existing that requires to be digitized.	The data will be shared will successful bidder. However bidder may consider that there are 25000+ network hospital (PPN +TPA network)

231	Page 13	Drug Data Repository Maintenance and Pharmacy Leakage Prevention	"The vendor must provide/create and maintain the drug data repository"	Is this drug data repository already available with NIACL or should the SI vendor purchase extrenally which will involve additional cost? If already available what is the volume of data in GB/TB of this data base that requires to be maintained	NIA at present do not curntly have access to any drug databases. The bidder is expected to acquire the data and maintain the repository by the modes to do so availble in the industry. The cost ot be included in TCO
232	Page 13	Section Xiii	"The vendor should be able to provide both custom dashboards and generic dashboards tailored to the general insurance industry in India"	Is there a list of total number of dashboards, detail, reports, MIS reports that requires to be developed as part of the solution. This will help us for estimation of effort purposes	The indicative list is provided in RFP. The actual MIS requirement based on the then guidelines will be discussed and finalized with successful bidder.
233	Page 56	Annexure-VI	Infrastructure Cost (Private Cloud Platform) Production, DR and UAT environment	The Development and Test environment cost is not included in this line item. Please modifiy this clause to include Development and Test environment as well. Also indicate the % sizing on Production required for these non prod environment sizing.	Development and Test environment cost is to be included in this line item. Bidder to consider Industry standard for sizing of UAT
234				As part of the Data Lake solution, the SI is required to provide the following with licenses . Please confirm 1. ETL tool for Ingestion of Structured and unstructured data 2. Real time ingestion using streaming/event based 3. Data lake with Raw, Cleansed and Curated layers 4. AI/ML tool for Text mining, entity extraction from documents/images, 5. Business Intellignece tool for Dashboarding and MIS Reporting	Yes, Bidder is required to provide licenses for the mentioned list
235	Page34	Annexure-I	The Bidder/ Proposed technology partner/OEM Partner shall have successfully executed at least one Project of minimum value INR 2 Crs related to supply and implementation of Fraud, Waste and Abuse control/monitoring solution and other related modules in last Five (5) years in India	Please confrim if we can submit the experience of project of AI ML based Fraud monitoring solution done for the Indian Life insurance company or Governement of india(Income tax) projects related to Fraud monitoring can be also considered in the eligbility criteria.	Please adhere to RFP Clauses
236	Page 13	Scope of Work	Fraud, Waste, and Abuse (FWA) Monitoring Solution: The proposed software solution should be able to perform ETL (Extract, Transform, Load) functions on provided health insurance claims data, including both metadata and documents, to analyze and assess the likelihood of claims or entities, being involved in fraud, waste, or P a g e 10 | 75 abuse. The tool should be able to deliver real-time claim tagging for various outlier based on the use-cases, scenarios, industry standard triggers for Health claim adjudication, validation for policy terms and condition pertaining to the claim processing, with a processing capacity of at least 2000 claims per hour and provide analytical dashboards that offer comprehensive insights, including drill-down capabilities for identified suspicious transactions.	As per the SOW specification; Is there any prefence is on the ready COTS Product or Custom solution can also be considered fulfilling the requirments	New India has no prefered ready COTS products. NIACL is open provided the stated requirements and timelines for the project are met .
237	Page 10	Scope of Work	Data Lake (Storage and Processing platform	What is exiting data warehouse / lake or reporting platform	NIACL does not have any Data Lake at present
238	Page 10	Scope of Work	Data Lake (Storage and Processing platform	What is expected data size, fair idea of the same per use case	Bidder to make assumption based on the parameter given in Annexure -XIV and industry standards
239	Page 34	Scope of Work	Eligibility (Pre-Qualification) Criteria for SI/Prime Bidder/OEM	is Qualification criteria applicable for all OEMs or any specific OEM in given consortium of Vendor.	Please adhere to the said RFP Clause

240	Page48	INTEGRATION REQUIREMENTS	Integration with external portals including but not limited to IRDAI, IIB, GI Council, Geo tagging, National Health Authority's NHCX, ROHINI, NABH, NABL, UIDAI, negative databases, Central Fraud Registry, upcoming Central Suspect Registry, Open Government Data Platform, etc.	Please mention the method of integration expected by NIACL with respect to these external data sources. Will this be through 1. API based integration 2. Conventional File based extract with FTP to the NIACL landing server 3. Any other 4. Is the integration only one way i.e, only consumption from these external sources or two way also providing data back from NIACL system. 5. If there are any cost involved , the understanding is that NIACL will provision for those cost, pls confirm Please provide more details to plan for the correct solution component to enable integration. Also make a mention if there are any real time stream based integration expected with these platform	The solution at present is rquired to integrate with TPAs through APIs to be created by bidders for receiving structured and unstructured data. The soluion should be capable to integrate with listed services/portals if they expose their APIs.
241	Page 49	INTEGRATION REQUIREMENTS	Integration with Including but not limited to NIACL's existing paneled TPAs and provider's Network	Please mention the method of integration expected by NIACL with respect to these external data sources. Will this be through 1. API based integration 2. Conventional File based extract with FTP to the NIACL landing server 3. Any other 4. Is the integration only one way i.e, only consumption from these external sources or two way also providing data back from NIACL system. 5. If there are any cost involved ,like API /Data subscription cost, the understanding is that NIACL will provision for those cost, pls confirm Please provide more details to plan for the correct solution component to enable integration. Also make a mention if there are any real time stream based integration expected with these platform	API based integrtion, The integration may be both ways. All costs to be borne by bidder. Expectation would be to for real time stream based integrtion
242	Page 49	INTEGRATION REQUIREMENTS	Integration with third party solutions including but not limited to IDFY, IDMERIT, etc	Please mention the method of integration expected by NIACL with respect to these external data sources. Will this be through 1. API based integration 2. Conventional File based extract with FTP to the NIACL landing server 3. Any other 4. Is the integration only one way i.e, only consumption from these external sources or two way also providing data back from NIACL system. 5. If there are any cost involved ,like API /Data subscription cost, the understanding is that NIACL will provision for those cost, pls confirm Please provide more details to plan for the correct solution component to enable integration. Also make a mention if there are any real time stream based integration expected with these platform	WE may drop this requirement

243	Page 49	INTEGRATION REQUIREMENTS	Ability to integrate with social media platforms	The undestanding is that NIACL will procure the necessary social media API subscription for integration purposes. Please confirm. Please provide the complete list of all the social media intended to be integrated Eg., Facebook, X, Youtube etc.,	WE may drop this requirement
244	Page 49	INTEGRATION REQUIREMENTS	Ability to integrate with GIC (General Insurance Council) / LIC (Life Insurance Council) & IIB to identify claims with multiple insurance companies for same accident or injury to receive multiple payouts	Please mention the method of integration expected by NIACL with respect to these external data sources. Will this be through 1. API based integration 2. Conventional File based extract with FTP to the NIACL landing server 3. Any other 4. Is the integration only one way i.e, only consumption from these external sources or two way also providing data back from NIACL system. 5. If there are any cost involved ,like API /Data subscription cost, the understanding is that NIACL will provision for those cost, pls confirm Please provide more details to plan for the correct solution component to enable integration. Also make a mention if there are any real time stream based integration expected with these platform	The solution at present is rquired to integrate with TPAs through APIs to be created by bidders for receiving structured and unstructured data. The soluion should be capable to integrate with listed services/portals if they expose their APIs.
245		Scope of Work		Does the solution need to be on private cloud to be hosted in India, or can it be on on-premises servers hosted in NIA data-center?	NIA may provide Co-lo space for on-premise private cloud
246		Scope of Work		Can custom build solutions be proposed or is NIA necessarily looking for a COTS solution. Can a different implementation timeline be proposed for custom-build option?	New India is open to COTS as well as Custom build solution provided requirement is fullfiled within the given timelines
247		Scope of Work		What is the expected latency and number of concurrent users of the real-time solution?	The bidder should keep in mind the requirement of processing 2000 claims per hour, IRDAI's TAT requirement (1 hour for pre-auth and 3 hours for final authorization). The number of concurrent user are as specified in other query response.
248		Scope of Work		Can a break-up of volumetrics be provided for the 2000 transactions? How many documents per transaction, how many film images requiring similarity de-duplication, how many images requiring OCR extraction, and the associated file sizes	Currently we are not in possessio of this bifurcation. Bidder to use industry insight if any
249		Scope of Work		Can NIA provide historical structured and unstructured data for training\fine-tuning models?	Yes, Historical claims data (structured and unstructured) for 3 years is to be provided by NIACK to be placed in data lake. The details are as per Annexure -XIV
250		Scope of Work		For film image de-duplication use cases, can some volumetrics be provided around how many potential combinations of matches need to be run for each incoming image? Does NIA have a database of images against which the incoming images can be matched?	NIACL will provide 3 years historical data related to historical discharge summary, diagnostic reports, clinical notes, xray/MRI/CT Scan etc. At present there is no database of images with NIA. The structure, unstructured data from NIACL's panelled TPA will have to be fetched at Datalake through API integration. The same is to be used forde-duplication use cases. No of possible combination will have to developed by bidder as per industry standard

251		Scope of Work		Is the film image de-duplication exercise also expected to be completed in real-time? What is the expected latency and concurrency for this activity alone?	Film image de-deuplication is expected to be real time. The bidder should keep in mind the requirement of processing 2000 claims per hour, IRDAI's TAT requirement (1 hour for pre-auth and 3 hours for final authorization).
252		Scope of Work		Are there any real-time Network Analytics use cases? Kindly list the same and please provide expected latency and concurrency	The bidder will have to work on this as per industry standards
253		Scope of Work		For the Network Analytics, are Graph Data Science use cases in scope, or is the scope limited to visualization alone?	Please adhere to technical/functional requirement as specified in RFP
254		Scope of Work		Does Geospatial data need to be incorporated in the Visualization solution?	This may be required for some of the use-cases. The bidder to follow Standard Industry Practices
255		Scope of Work		Implementation timeline of 6 months is very short for a project of this scope, can this be extended?	Please adhere to RFP Clauses
256		Scope of Work		Is there a preferred technology stack for the solution?	NIACL has no preferred technology stack for the solution provided the requirment as stated in RFP are fully met and support services available throughout the currency are available. Bidder shall be responsible for perfect working of the solution hence the solution stack must be chosen judiciously.
257	Page 9	Scope of Work	United Intake Frontend	Should the front end consume from multiple data sources like email, API, TPA, FTP, extract and display in the united front end	As of now the only channel will be applicable is TPA channel. In case in future, NIA decides to start processing the claim in this solution system by allowing TPAs to do claim adjudication on this solution system, then the other channels as specified would be required. The system should be capable to support it.
258	Page 9	Scope of Work	United Intake Frontend	Will the front end consumed by internal users of NIA only	Yes
259	Page 9	Scope of Work	United Intake Frontend	can you eloborate on 'enables future onboarding of claims directly' - will this front end exposed to end consumers for submitting claim including documents	As of now the only channel will be applicable is TPA channel. In case in future, NIA decides to start processing the claim in this solution system by allowing TPAs to do claim adjudication on this solution system, then the other channels as specified would be required. The system should be capable to support it.
260	Page 10	Scope of Work	Data Lake (Storage and Processing platform)	Is the integrated Document Management and Document Processing System then need to feed to NIA organization document management system for storage	The Document management system to be proivided by the bidder shall cater to Health Claim documents only
261	Page 10	Scope of Work	Data Lake (Storage and Processing platform)	Is there a time frame for how long the documents to be hosted in the document management system	To be discussed with successful bidder
262	Page 10	Scope of Work	Data Lake (Storage and Processing platform)	What is the expected volume of data per month (structured, semi-structured, unstructured)	please refer Annxure XIV for details of Annual Data
263	Page 12	Scope of Work	Policyholder/Insured Onboarding and Underwriting Decision Support	Should the system facilitate policy holder/insured onboarding automatically once policy has been issued or they need to be onboarded once claim is triggered	It refers to following : In Core insurance System, Policy underwritng is done in the undwerwiting module. It is planned to corellate the Claims data with the policy, members of the policy so as to have insight about
264	Page 12	Scope of Work	Policyholder/Insured Onboarding and Underwriting Decision Support	Is the expectation to integrate with NIA core policy adminstration system to get the policy holder/insured information	
265	Page 12	Scope of Work	Policyholder/Insured Onboarding and Underwriting Decision Support	Is the user interface to be different the united intake front end. Is the user interface expected to have feature of underwriting workbench	

266	Page 12	Scope of Work	Hospital Master Maintenance and Blacklisting	Is the fraud solution expected to create score and rating for hospital based on model output	At present NIACL donot have in Hospital Master Record (HMR) system. We want vendor to create Hospital Master with a facility extented to NIACL to add, delete, modify, flagging the records
267	Page 13	Scope of Work	Drug Data Repository Maintenance and Pharmacy Leakage Prevention	Is the solution expected to integrate with drug manufacturer to update the information	Bidder shall be information for mantaining and updating drug master
268	Page 13	Scope of Work	Dashboard & Reporting	Who are the target audience for dashboards	NIA internal user at Head Office and RO
269	Page 13	Scope of Work	Dashboard & Reporting	What specific KPIS are mandatory be tracked. Have they been defined?	Sample KPI as given in the referrred section. However NIA will decide mutually with successful bidder
270	Page 9	Scope of Work	The scope of the work would include the supply, installation, configuration, customization, integration, deployment on Private cloud (On premise) and maintenance of an end to end AI/ML enabled Fraud, Waste and Abuse Control solution for the Health Insurance Claims which is scalable in nature and must integrate with the existing Insurance Software Solution of NIACL.	Does the solution need to be on private cloud to be hosted in India, or can it be on on-premises servers hosted in NIA data-center?	The private cloud to be hosted in India only. NIA may provide Co-lo space in their data centres
271	Page 9	Scope of Work		Can custom build solutions be proposed or is NIA necessarily looking for a COTS solution. Can a different implementation timeline be proposed for custom-build option?	Timelines as stated in RFP. NIACL is open for both the options provided our requirements are met
272		Scope of Work		What is the expected latency and number of concurrent users of the real-time solution?	The bidder should keep in mind the requirement of processing 2000 claims per hour, IRDAI's TAT requirement (1 hour for pre-auth and 3 hours for final authorization). The number of concurrent user are as specified in other query response.
273	Page 10	Scope of Work		Can a break-up of volumetrics be provided for the 2000 transactions? How many documents per transaction, how many film images requiring similarity de-duplication, how many images requiring OCR extraction, and the associated file sizes	Please assume as per Standard industry average
274		Scope of Work		Can NIA provide historical structured and unstructured data for training\fine-tuning models?	NIA plan to provide 3 years historical data as per Annexure-XIV. The same will haave to be fetch to data lake from the TPAs as part of this solution.
275	Page 11	Scope of Work	Image forensic solution	For film image de-duplication use cases, can some volumetrics be provided around how many potential combinations of matches need to be run for each incoming image? Does NIA have a database of images against which the incoming images can be matched?	NIACL will provide 3 years historical data related to historical discharge summary, diagnostic reports, clinical notes, xray/MRI/CT Scan etc. At present there is no database of images with NIA. The structure, unstructured data from NIACL's panelled TPA will have to be fetched at Datalake through API integration. The same is to be used forde-duplication use cases. No of possible combination will have to developed by bidder as per industry standard
276	Page 11	Scope of Work	Image forensic solution.	Is the film image de-duplication exercise also expected to be completed in real-time? What is the expected latency and concurrency for this activity alone?	Film image de-deuplication is expected to be real time. The bidder should keep in mind the requirement of processing 2000 claims per hour, IRDAI's TAT requirement (1 hour for pre-auth and 3 hours for final authorization).
277	Page 33	Scope of Work	The proposed solution should have in-built features for Entity analytics through Entity resolution, Network analytics and visualization, Network link expansion, Network node decorator and enrichment	Are there any real-time Network Analytics use cases? Kindly list the same and please provide expected latency and concurrency	The bidder will have to work on this as per industry standards
278	Page 33	Scope of Work	The proposed solution should have in-built features for Entity analytics through Entity resolution, Network analytics and visualization, Network link expansion, Network node decorator and enrichment	Can some elboration be provided regarding the data sources that need to be integrated with or provisioned for Network Analytics	Please adhere to technical/functional requirement as specified in RFP

279		Implementation Timeline		Do you have any timelines for Implementation of this solution, apart from the 3 years of support.	The project is for 3 years extendable to 2 more years
280		Support & Maintenance		Do you have any ITSM tool that you are using	Bidder will have to provide/create one
281		Support & Maintenance		We assume helpdesk team will be managed by customer and SI partner has no role	SI will have to provide support and resolution to issued raised /incident management in relation with proposed solftware solution
282	Page 26	Elignility Criteria For OEM	The proposed OEM Insurance claim fraud, waste and abuse solution should be offered as a single integrated solution with all components (end to end data management, data quality, decisioning, advanced analytics, alerting and investigation, monitoring, and visualization capabilities). The complete solution from a single OEM will be preferred	There will be few services which needs to be factored thru one or more OEMs. Therefore we would like to request to consider multiple OEMs for the services covergage in this comphrensive scope of work	Prime bidder may be quoting the Complete solution and NIACL will not deal with different OEM, Prime bidder/SI has to deal with all OEM for support throughout the currency of contract
283	Page 1	RFP Dates	Last date of submission of RFP-10th July	In the view of the comprehensive scope of work and mandotry documents we would like to request 3 weeks of extension from the submission deadline(10th July) to of RFP response.	Please refer Addendum 2 for information
284	23	PART B – TECHNICAL BID (OFFLINE	Original DD/Bankers' Cheque towards tender document fees.	What is amount for the Demand Draft and it should be in the name of The New India Assurance Company Ltd?	The Tender fees is waived
285	No.9 &	Clause # 12 ELIGIBLE BIDDERS & Annexure I-Eligibility (Pre-Qualification) Criteria for SI/Prime Bidder/OEM	Pt.No. 2 Annual Turnover for the OEM-Registered under Indian Companies Act 1956 or Indian Companies Act 2013 or Limited Liability Partnership Act 2008. AND operating in India for at least last 3 years as on date of tender submission AND Average annual turnover more than 5 crores for the bidder over the last three (3) Financial Years i.e. for FY 2022-23, 2023-24, 2024-25- Average annual turnover more than 3 crores for the bidder over the last three (3) Financial Years i.e. for FY 2022-23, 2023-24, 2024-25	Is this Qualification criteria applicable for all OEMs or any of one of the OEMs or Prime Bidder in given consortium of Bidding Partners. Please clarify.	Please adhere to RFP Clauses
286	No.9 &	Clause # 12 ELIGIBLE BIDDERS & Annexure I-Eligibility (Pre-Qualification) Criteria for SI/Prime Bidder/OEM	Pt.No.4 The Bidder/ Proposed technology partner/OEM Partner shall have successfully executed at least one Project of minimum value INR 2 Crs related to supply and implementation of Fraud, Waste and Abuse control/monitoring solution and other related modules in last Five (5) years in India. The Bidder/ Proposed technology partner shall have successfully executed at least one Project of minimum value INR 1.5 Crs project related to supply and implementation of Fraud, Waste and Abuse control/monitoring solution and other related modules in last Five (5) years in India.	Is this Qualification criteria applicable for all OEMs or any of one of the OEMs or Prime Bidder in given consortium of Bidding Partners. Please clarify.	Please adhere to RFP Clauses
287	No.9 &	Clause # 12 ELIGIBLE BIDDERS & Annexure I-Eligibility (Pre-Qualification) Criteria for SI/Prime Bidder/OEM	Pt.No. 8 Deployment capability for SI/Prime Bidder and OEM The proposed Insurance fraud analytics solution should provide deployment options both on-premises and cloud and be cloud vendor agnostic to deploy on any MeitY approved cloud infrastructure.	Is this Qualification criteria applicable for all OEMs or any of one of the OEMs or Prime Bidder in given consortium of Bidding Partners. Please clarify.	Please adhere to RFP Clauses
288	No.9 &	Clause # 12 ELIGIBLE BIDDERS & Annexure I-Eligibility (Pre-Qualification) Criteria for SI/Prime Bidder/OEM	Pt.No. 9 Criteria for OEM The proposed OEM Insurance claim fraud, waste and abuse solution should be offered as a single integrated solution with all components (end to end data management, data quality, decisioning, advanced analytics, alerting and investigation, monitoring, and visualization capabilities). The complete solution from a single OEM will be preferred.	Is this Qualification criteria applicable for all OEMs or any of one of the OEMs or Prime Bidder in given consortium of Bidding Partners. Please clarify.	Please adhere to RFP Clauses

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289	No.9 &	Clause # 12 ELIGIBLE BIDDERS & Annexure I- Eligibility (Pre-Qualification) Criteria for SI/Prime Bidder/OEM	Pt.No. 10 Criteria for OEMThe AI-ML based Insurance Claim fraud Analytics Solution provider OEM should have an existing capability and infrastructure to provide technical support through a track system within India.	Is this Qualification criteria applicable for all OEMs or any of one of the OEMs or Prime Bidder in given consortium of Bidding Partners. Please clarify.	Please adhere to RFP Clauses
290	No.10 &	Clause # 13. SCOPE OF WORK	Pt.No. iii. Data Lake (Storage and Processing platform) Data Lake (Storage and Processing platform): Creation of Data Lake on a Meity approved Private cloud platform for ingesting structured, semi-structured and unstructured data from various sources	Does NIA already have an exiting data warehouse / lake or reporting platform, if yes please share relevant details	NIA does not have Dataware house/lake at present. Oracle ODS is the reporting platform
291	g. No. 7	Annexure -XIV Parameters for Infrastructure Sizing	Annexure -XIV Parameters for Infrastructure Sizing	What is expected over all data size, please share a fair idea of the same per use case.	Bidder to make assumption based on the parameter given in Annexure -XIV and industry standards
292	General	General	General	Has NIA done any pilot or POC with any specific solution provider (s) if yes, pls share details.	Not relevant
293	16	Section 16.1 – Implementation and Integration	The delivery...to be completed within a period not exceeding 6 months of issuance of Purchase Order.	Given the wide scope of implementation (AI/ML modeling, OCR, data lake, dashboards, etc.), can this timeline be extended to 9 months considering potential dependency on NIACL/internal approvals and third-party integrations?	Whether to extend project timeline.. To decide
294	13	Clause xii – Drug Data Repository Maintenance	The vendor must create and maintain the drug data repository...	Will NIACL provide an initial master drug database to begin with, or is the bidder expected to create the repository from scratch using public/commercial data sources?	Bidder will have to create the drug master from scratch
295	11	Clause iii – Data Lake	The cloud platform subscription should be procured by the bidder in the name of NIACL.	Can NIACL clarify which MeitY-approved cloud providers are acceptable (e.g., NIC, CDAC, or any empanelled private players)?	We are looking for on premise private cloud
296	11	Clause iii – Data Lake	The cloud platform subscription should be procured by the bidder in the name of NIACL.	Approximately how many tables to include in datalake ?	Bidders to decide appropriately based on SOW and given technical and functioal requirement
297	10	Clause ii – Unified Intake Frontend	Claims intake from emails, TPA front end, FTP, WhatsApp...	Will NIACL facilitate API-level access from TPAs and WhatsApp Business accounts, or is the bidder expected to arrange setup and permissions for all these sources?	The bidder is expected to create APIs for receiiving data from TPA, NIA will facilitate the permissions from all these sources
298	13	Clause xiii – Dashboards	System should support self-service reporting and data visualization.	How many dashboards / Reports we should estimate for ?	To be decided in consultation with successful bidder
299	13	Clause xiii – Dashboards	System should support self-service reporting and data visualization.	Can NIACL specify the preferred BI tool (e.g., Power BI, Tableau, Qlik) to ensure compatibility with existing analytics infrastructure?	NIACL has no preferred prefernce provided the requirment as stated in RFP are fully met and support services available throughout the currency are available. Bidder shall be responsible for perfect working of the solution
300	18	Clause 24 – Purchase Price	Prices payable...shall be firm.	Should the quoted price include 5-year cloud subscription (3+2 years) or only 3 years with options for future renewals at the same rate?	Commercial bid table states it clerly, it rquires price for 4 and 5 th year as well
301	12	Clause v – Rule Engine	Engine to apply common rules and AI/ML models...	Will NIACL share industry-standard trigger rules to bootstrap the initial rule engine?	We have shared indiacative triiggers in RFP, the same will be decided in consulation with successful bidder as per industry practice
302	17	Clause 20 – Cyber Security	The vendor shall address VAPT findings as per severity...	Will NIACL appoint a CERT-In auditor or should the bidder engage one independently?	NIA shall appoint
303	13	Clause viii – OCR for Document Processing	Extract key fields from invoices, bills, handwritten notes...	What is the expected volume for OCR. Monthly?	Will be discussed with successful bidder
304	13	Clause viii – OCR for Document Processing	Extract key fields from invoices, bills, handwritten notes...	Please confirm supported languages for OCR—does it need to include regional scripts (e.g., Hindi, Marathi)?	Yes
305	14	Clause xv – User Management	Provide role-based access to dashboards and tools.	Does NIACL have an existing IAM platform the system must integrate with?	The roles to be defined within the solution only.. No AD /IAM will be extended for Role management
306	19	Clause 29 – SLA & Penalty	Penalty will be levied in case of non-compliance to SLA...	Is there a provision to limit SLA penalties to a defined percentage of overall contract value?	To be disccused with successful bidder

307	9	Clause i – End-to-End Tagging	Tagging of claims through 4 stages using AI/ML scoring.	Will NIACL share historical claims data required to build and validate the scoring model?	NIACL will provide 3 years historical data related to historical discharge summary, diagnostic reports, clinical notes, xray/MRI/CT Scan etc. At present there is no database of images with NIA. The structure, unstructured data from NIACL's panelled TPA will have to be fetched at Datalake through API integration. The same is to be used forde-duplication use cases. No of possible combination will have to developed by bidder as per industry standard
308	12	Clause vi – Image Forensics	Detect image tampering, duplicates, scanned documents.	Will NIACL provide access to historical document images to train the image forensic engine?	NIACL will provide 3 years historical data related to historical discharge summary, diagnostic reports, clinical notes, xray/MRI/CT Scan etc. At present there is no database of images with NIA. The structure, unstructured data from NIACL's panelled TPA will have to be fetched at Datalake through API integration. The same is to be used forde-duplication use cases. No of possible combination will have to developed by bidder as per industry standard
309	17	Clause 22 – Data Residency	All data must reside in India.	Can DR environment be hosted in a different zone but still within Indian geography?	Yes, DR has to be in different seismic zone within Indian Geogrpahy
310	11	Clause iii.c – Security Framework	Implement SIEM, WAF, DLP, EDR, etc.	Are licenses for security tools (SIEM, EDR, WAF) to be procured by bidder or provided by NIACL?	NIA may provide Co-lo space for on-premise private cloud
311	15	Clause 16.2 – Implementation Delay Penalty	Delay beyond 6 months attracts penalty of ₹1 lakh/day.	Can this penalty be capped to 5% of total contract value for fairness?	Looking at the volume of the project and cost and statke involved, penalty stated is reasonable
312	28	Annexure XIII – Common Triggers	Illustrative list of industry standard triggers.	Can NIACL share the detailed list of triggers prior to submission for accurate scoping?	Indicative list is provided. The tool should have capability to configure new triggers, modify /update triggers
313	24	Clause 4 – Technical Evaluation Criteria	20 marks assigned for presentation/demonstration.	Will NIACL share specific demo evaluation rubric ahead of the presentation?	Please refer RFP clauses for the marking criteria for presentation /demostration
314	29	Clause 7 – Final Evaluation and RA	Reverse auction shall be conducted after technical evaluation.	What is the starting price logic or reserve price determination method for RA?	Lowest commercial bid price may be treated as the starting price for RA. NIA may also give Starting price for RA at its discetion
315	13	Clause xi – Integration with External Databases	Integrate with government and commercial databases...	Will NIACL facilitate access to required third-party APIs (e.g., IIB, e-Hospital)?	NIA will facilitate for the integration. However API building has to be taken care by Bidder
316	34	Annexure 1 - Pre-qualification	Annual Turnover for OEM	Request you to waive off this requirment for Startups/MSME as per central govt practice to promote startups. Most of the AI startups will not mee the criterion and may limit participation	Please refer RFP clause
317	34	Annexure 1 - Pre-qualification	Experience criteria for SI	Request you to remove FWA solution experience criteria for SI and it should be correctly applied to OEM	Please adhere to RFP Clauses
318	12	Clinical Journey Extraction	Based on LLMs/VLMs	Are there any restrictions or preferences regarding the use of commercial LLMs like OpenAI?	The bidder should follow the best practices. NIACL shall not be responsible for any indemnification out of use of the same
319	18	Data Ownership	Data resides with NIACL	Can bidder use anonymized data for product improvement and model training purposes?	The bidder should follow the best practices. NIACL shall not be responsible for any indemnification out of use of the same
320	16	Implementation Timeline	Delivery to be completed within 6 months	Is there a phased rollout plan expected (e.g., TPA-wise or region-wise)?	Please adhere to RFP Clauses, The details rollout plan will be discussed with successful bidder
321	17	Information Security & BCP	VAPT required twice per year	Will NIACL engage its own auditor for VAPT, or should the bidder engage a CERT-IN empaneled agency?	NIA will engage its own auditor
322	13	Integration with Core & TPAs	Integration with TPAs and Core Insurance Application	What are the technologies, API standards, and authentication protocols used by existing TPA systems?	To be disccused with successful bidder
323	13	Future Migration Support	Solution should integrate with any future platform	Will NIACL provide early intimation and architecture details to support cloud migration readiness?	Bidder to propose the best fit architecture for the SOW and technical and functional requirement given in the RFP
324	14	Software Architecture	Scalable and integrable design required	Does NIACL prefer a microservices-based architecture, event-driven, or monolithic approach?	To check with IT aplication Team

325	13	Third-Party System Access	Integration with hospital master, drug data, etc.	Will NIACL facilitate access/agreements to third-party registries (e.g., hospital or drug DBs)?	Bidder has to manage for drug data, NIA will facilitate for Hospital data
326	18	Data Residency	Data must reside in India	Are all environments (dev, test, prod, DR) required to reside within India and be isolated?	within India and be isolated
327	13	Reporting Requirements	Custom and generic dashboards	Will NIACL provide UI design guidelines, brand theming preferences, or wireframes?	to be mutually decided with successful bidder
328	No.9 &	Clause # 12 ELIGIBLE BIDDERS & Annexure I- Eligibility (Pre-Qualification) Criteria for SI/Prime Bidder/OEM	Pt.No. 2 Annual Turnover for the OEM-Registered under Indian Companies Act 1956 or Indian Companies Act 2013 or Limited Liability Partnership Act 2008. AND operating in India for at least last 3 years as on date of tender submission AND Average annual turnover more than 5 crores for the bidder over the last three (3) Financial Years i.e. for FY 2022-23, 2023-24, 2024-25- Average annual turnover more than 3 crores for the bidder over the last three (3) Financial Years i.e. for FY 2022-23, 2023-24, 2024-25	Is this Qualification criteria applicable for all OEMs or any of one of the OEMs or Prime Bidder in given consortium of Bidding Partners. Please clarify.	Please refer RFP clause
329	No.9 &	Clause # 12 ELIGIBLE BIDDERS & Annexure I- Eligibility (Pre-Qualification) Criteria for SI/Prime Bidder/OEM	Pt.No.4 The Bidder/ Proposed technology partner/OEM Partner shall have successfully executed at least one Project of minimum value INR 2 Crs related to supply and implementation of Fraud, Waste and Abuse control/monitoring solution and other related modules in last Five (5) years in India. The Bidder/ Proposed technology partner shall have successfully executed at least one Project of minimum value INR 1.5 Crs project related to supply and implementation of Fraud, Waste and Abuse control/monitoring solution and other related modules in last Five (5) years in India.	Is this Qualification criteria applicable for all OEMs or any of one of the OEMs or Prime Bidder in given consortium of Bidding Partners. Please clarify.	Please adhere to RFP Clauses
330	No.9 &	Clause # 12 ELIGIBLE BIDDERS & Annexure I- Eligibility (Pre-Qualification) Criteria for SI/Prime Bidder/OEM	Pt.No. 8 Deployment capability for SI/Prime Bidder and OEM The proposed Insurance fraud analytics solution should provide deployment options both on-premises and cloud and be cloud vendor agnostic to deploy on any MeitY approved cloud infrastructure.	Is this Qualification criteria applicable for all OEMs or any of one of the OEMs or Prime Bidder in given consortium of Bidding Partners. Please clarify.	Please adhere to RFP Clauses
331	No.9 &	Clause # 12 ELIGIBLE BIDDERS & Annexure I- Eligibility (Pre-Qualification) Criteria for SI/Prime Bidder/OEM	Pt.No. 9 Criteria for OEM The proposed OEM Insurance claim fraud, waste and abuse solution should be offered as a single integrated solution with all components (end to end data management, data quality, decisioning, advanced analytics, alerting and investigation, monitoring; and visualization capabilities). The complete solution from a single OEM will be preferred.	Is this Qualification criteria applicable for all OEMs or any of one of the OEMs or Prime Bidder in given consortium of Bidding Partners. Please clarify.	Please adhere to RFP Clauses
332	No.9 &	Clause # 12 ELIGIBLE BIDDERS & Annexure I- Eligibility (Pre-Qualification) Criteria for SI/Prime Bidder/OEM	Pt.No. 10 Criteria for OEMThe AI-ML based Insurance Claim fraud Analytics Solution provider OEM should have an existing capability and infrastructure to provide technical support through a track system within India.	Is this Qualification criteria applicable for all OEMs or any of one of the OEMs or Prime Bidder in given consortium of Bidding Partners. Please clarify.	Please adhere to RFP Clauses
333	No.10 &	Clause # 13. SCOPE OF WORK	Pt.No. iii. Data Lake (Storage and Processing platform) Data Lake (Storage and Processing platform): Creation of Data Lake on a Meity approved Private cloud platform for ingesting structured, semi-structured and unstructured data from various sources	Does NIA already have an exiting data warehouse / lake or reporting platform, if yes please share relevant details	NIA does not have Dataware house/lake at present. Oracle ODS is the reporting platform
334	g. No. 7	Annexure -XIV Parameters for Infrastructure Sizing	Annexure -XIV Parameters for Infrastructure Sizing	What is expected over all data size, please share a fair idea of the same per use case.	Please refer Annexure XIV and SOW for the same
335	General	General	General	Has NIA done any pilot or POC with any specific solution provider (s) if yes, pls share details.	Not relevant

336	9	11.1	The successful bidder will have to furnish a Security Deposit/Performance bank guarantee (PBG), an amount equal to 5% (Five percent) of final contract value for proper	Does the bidder need to submit the security deposit amount during the bidding stage?	Please adhere to the said RFP Clause
337	10	13.i.b	It should support seamless integration with New India's existing Core applications or other systems as needed	From how many systems the data extraction would be done? Can you provide data flow diagram for the systems from data extraction and consumption point of view?	The data may be sourced from around 20-25 sources.(majorly 17 TPA, NIA ODS, IIB, NHCX etc).
338	10	13.ii	Unified Intake Frontend	Will it be a custom developed solution for the frontend? Should the bidder come up with a architecture?	bidder to propose the solution
339	10	13.iii	Data Lake creation	Does this data lake will only for the health claims management or the provision to be made for the entire ecosystem for NIA?	It is for only Health Claims Management, but should be scalable to accommodate other health related application in future if required
340	10	13.iii.a	Data lake should have an integrated Document Management and Document Processing System to intake, store and process the documents	Does NIACL currently having a DMS and the integration would be required or a new DMS procurement to be done?	Bidder will have to provide/create one
341	11	13.vi	proposed solution for checking de-duplication of the documents related to the claims along with possible similarity check not limited to date	Does NIACL currently have an OCR solution or the bidder is required to propose required solution for the image analytics?	NIACL does not have any OCR solution at present. The bidder has to provide the required solution
342	12	13.ix	Policyholder/Insured Onboarding and Underwriting Decision Support:	Is the requirement related to providing the necessary pro-active flag for determining fraud probability during underwriting stage? Or the bidder is supposed to build an end to end new business UW workflow?	the requirement is related to providing the necessary pro-active flag for determining fraud probability during underwriting stage. Please refer response to similar queries for more details
343	13	13.xii	Drug Data Repository Maintenance and Pharmacy Leakage Prevention:	Does NIACL already have the database related to drug data repository and continuous monitoring and upgrade is being done?	Bidder will have to create and maintain the drug master from scratch
344	16	16.2	Delay in integration and penalty	How the delay will be measured? If there is a delay from requirement finalization from NIA side, then bidder would not be liable to the penalties	Please adhere to the said RFP Clause
345	18	25.a	Implementation schedule	The SOW provides a hypercare requirement of 3 months post production. Will there be a separate contract for maintenance and support which is not in scope? Please confirm	Maintenance and support are part of the SOW as per RFP
346	26	3	The proposed Insurance fraud analytics solution should provide deployment on private cloud (on-premise) on any MeitY approved cloud infrastructure	Should the bidder arrange for the private cloud setup or NIACL has the cloud?	Bidder should arrange for the Private Cloud Setup and other related requirements, as per RFP
347	30	3	PRICE (COMMERCIAL) BID EVALUATION	Can the clause be change to QCBS or L1 for the bidding?	Please adhere to the said RFP Clause.
348	31	Generic	Extension of 2 weeks for bid submission	Can we get an extension of 2 weeks for submission of bids?	Please refer Addendum 2 for information
349	25	Marking scheme for technical evaluation	The Bidder shall have successfully executed at least one Project of minimum value INR 5 Crs on Infrastructure Development / Data Centre/ Cloud Hosting / IT Network Setup Project with State Govt/ Central Govt/ PSU/ BFSI in last Five (5) years in India.	Does it include experience of the OEM partner as well or just the bidder? Does the experience include only private cloud deployment?	Please adhere to the said RFP Clause

350	Generic	Generic	NA	On perusal of the RFP, we have observed that there is no mention of our liability under this engagement. Hence, team to suggest the inclusion of the following: "In accordance with standard industry practice, our aggregate liability under this RFP and in connection with the services shall be for direct damages only and shall, in all circumstances and events, be limited to one time the fees paid to us under the engagement. We shall not be liable for any indirect or consequential losses."	The bidders are requested to regularly visit GEM portal /NIACL's official website for addendum if any on this
351	17	19	Right to Audit	Any audit shall be subject to the following: (i) the audit shall be restricted to the engagement and shall be conducted with prior reasonable notice (ii) NIACL or its authorized representatives shall execute a Non-Disclosure Agreement before such audit which shall govern the conduct of the audit and any results thereof; (iii) the auditors or the representatives of NIACL for the audit shall not be the Bidder's competitors; (iv) the audit shall not be conducted more than once in a calendar year and twice in entirety; and (v) any findings during the audit, shall be shared with the Bidder and be discussed and agreed mutually between NIACL and the Bidder for its closure.	Please adhere to the said RFP Clause
352	24	1. Annual Turnover	Average annual turnover as mentioned below for the bidder over the last three (3) Financial Years i.e. for FY 2022-23, 2023- 24, 2024-25. Marks shall be allotted as given below:	Can we provide audited financial for FY21-22,FY22-23 and FY23-24? Financial Report for FY24-25 is not audited and provisional certificate is not available	For Financial year 2024-25, the unaudited figures signed by Compnay secreatry adn director will be accepted
353	25	4. Certification	The Bidder shall have following Certifications valid at the time of submission of bid: 1. ISO 9001 for quality management or equivalent - 2.5 marks 2. ISO 20000 for IT Service Management or equivalent certification - 2.5 marks 3. ISO 27001 for Information Security Management System or Equivalent certification. – 2.5 marks 4. CMMI Level 3 Certificate or higher - CMMI Level 3 Certificate – 1 mark CMMI Level 4 Certificate – 2 marks CMMI Level 5 Certificate – 2.5 marks	Can we submit certificate received for KPMG and associated entities?	As per RFP this is applicable for SI
354	34	Annexure I - Pre-qualification	Annual Turnover for OEM	Request you to waive off this requirment for Startups/MSME as per central govt practice to promote startups. Most of the AI startups will not mee the criterion and may limit participation	Please adhere to RFP Clauses
355	34	Annexure I - Pre-qualification	Experience criteria for SI	Request you to remove FWA solution experience criteria for SI and it should be correctly applied to OEM	Please adhere to RFP Clauses
356	12	Clinical Journey Extraction	Based on LLMs/VLMs	Are there any restrictions or preferences regarding the use of commercial LLMs like OpenAI?	The bidder should follow the best practices. NIACL shall not be responsible for any indemnification out of use of the same
357	18	Data Ownership	Data resides with NIACL	Can bidder use anonymized data for product improvement and model training purposes?	The bidder should follow the best practices. NIACL shall not be responsible for any indemnification out of use of the same
358	16	Implementation Timeline	Delivery to be completed within 6 months	Is there a phased rollout plan expected (e.g., TPA-wise or region-wise)?	Please adhere to RFP Clauses, The details rollout plan will be discussed with successful bidder

359	17	Information Security & BCP	VAPT required twice per year	Will NIACL engage its own auditor for VAPT, or should the bidder engage a CERT-IN empaneled agency?	NIA will engage its own auditor
360	13	Integration with Core & TPAs	Integration with TPAs and Core Insurance Application	What are the technologies, API standards, and authentication protocols used by existing TPA systems?	To be discussed with successful bidder
361	13	Future Migration Support	Solution should integrate with any future platform	Will NIACL provide early intimation and architecture details to support cloud migration readiness?	Bidder to propose the best fit architecture for the SOW and technical and functional requirement given in the RFP
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365	13	Reporting Requirements	Custom and generic dashboards	Will NIACL provide UI design guidelines, brand theming preferences, or wireframes?	To be decided in consultation with successful bidder

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