पावर ग्रिड कोर्पोरशन ऑफ इंडिया लिबिटेड



Power Grid Corporation of India Limited सूचना का अधिकार अभिनियम 2005 के अंतर्गत केन्द्रीय लोक सूचना अधिकारी Central Public Information Officer under the RTI Act, 2005 केन्द्रीय कार्यालय, 'सौदामिनी', प्लाट नं.2, सैक्टर-29, गुडगांब, हरियाणा-122001



Corporate Centre, 'Saudamini', Plot No. 2, Sector-29, Gurgaon, Haryana-122001

CIN: L40101DL1989GOI038121

दिनांक: 6 September, 2022

PGCIL/R/E/22/00274

SHRI PURSHOTTAM AGGARWAL, A-161 A BLOCK SECTOR-1 DWARKA, NEAR ELECTION OFFICE, NEW DELHI - 110075

विषय: सूचना का अधिकार अधिनियम, 2005 के तहत जानकारी।

महोदय / महोदया,

कृपया आर.टी.आई. अधिनियम, 2005 के तहत दिनांक 8 August, 2022 को प्राप्त अपने आर.टी.आई. अनुरोध का संदर्भ लें ।

उपरोक्त पत्र में वांछित जानकारी अनुलग्नक-। में संलग्न है।

यदि आप केंद्रीय लोक सूचना अधिकारी के उत्तर से संतुष्ट न हों तो, केंद्रीय लोक सूचना अधिकारी के उत्तर की प्राप्ति के 30 दिनों के भीतर पहले अपील प्राधिकारी के सम्मुख अपील की जा सकती है। आर.टी.आई अधिनियम, 2005 के तहत केंद्रीय कार्यालय, गुड़गांव में अपील प्राधिकारी का विवरण निम्नानुसार है:

श्री बी.अनंत शर्मा कार्यपालक निदेशक (सी. एस.) एवं अपील प्राधिकारी केंद्रीय कार्यालय, पावर ग्रिड कॉर्पोरेशन ऑफ इंडिया लिमिटेड, सौदामिनी, प्लॉट नंबर-2, सेक्टर-29, गुड़गांव-122001, हरियाणा। ईमेल आईडी: appellate.cc@powergrid.co.in फोन नंबर: 0124-2571994

धन्यवाद.

भवद्यय, कि भवद्यय, कि

वरिष्ठ महाप्रबंधक (कें.आयोजना) एवं केंद्रीय लोक सूचना अधिकारी

Email ID: cpio.cc@powergrid.co.in

Sub: Reply to RTI Request of Shri Purshottam Aggarwal, Dwarka, New Delhi

SI. No.	Information sought:	Reply:
	Dear Sir / Mam Can you please provide the Answer to below questions with reference to the advertisement number CC/02/2022	
1.	Can you please let us know that if a candidate leaves the organisation due to some personal issues before the bond period so in that case whether he has to first pay the amount of service bond (INR 5,00,000) and only then he can leave the organisation?	If a candidate leaves the organisation due to some personal issues before the bond period, in that case, he has to pay the amount of service bond as applicable.
2.	Can you please let me know if a candidate gets another job in central government after joining the power grid (a Central government owned organisation) so in that case whether the Bond is transferable? since as per the notification issued by Government of India bonds are transferrable if employee shift the job within the same government (e.g., Central govt. to central Govt.). Attaching the relevant Notification for your reference as well.	As per POWERGRID Rules, transfer of Service Agreement Bond is allowed in case of those Trainees/employees who had applied for other Government jobs in Central/State, PSUs (Central/State), Quasi-Government Organisations, prior to joining POWERGRID and desire to resign from POWERGRID to join such organisations subject to the condition that the new organisation takes from him a fresh bond binding him to serve them for the balance of the original bond period; in case he fails to serve the new department/organisation etc. or leaves it before completion of the original bond period for a job where exemption from bond obligation is not available, the proportionate bond money should be realised from the individual and refunded to the first organisation with whom he originally executed the bond.
3.	Can you please share list of locations where Candidate selected in AOT Finance can be posted?	Candidates selected as AOT (Finance) can be posted across any establishment of POWERGRID across India, as per the requirement.
4.	Can you please share the medical policy for the employees and their dependents?	POWERGRID Medical Attendance and Treatment Rules which are enclosed herewith at ANNEXURE-II.
5.	Can you please share the list of medical tests to be conducted for selected candidate in the AOT Finance and how these are being conducted as Inhouse or by outside?	Pre-Employment Medical Tests of selected candidates is conducted by POWERGRID in our empanelled hospitals as per Standards for Medical Fitness and Pre-Employment Medical format available at our weblink: https://www.powergrid.in/health





MEDICAL ATTENDANCE AND TREATMENT RULES

1.0 Scope

- 1.1 The POWERGRID Medical Attendance Rules apply to all regular employees, Trainees, Apprentices (other than Apprentices under the Act), and their families, Deputationists from Government Departments and other organisations are entitled to such additional medical attendance and treatment as is provided in their parent departments and is specified in the terms and conditions of their deputation. Apprentices (under the act) and casual employees (not their families) are entitled only to emergency treatment for injuries sustained during and in the course of their duty or training, as the case may be.
- 1.2 Temporary/Work-charged/daily-rated employees, with over one year of service, will be given free indoor and outdoor treatment in the Company's Hospital for themselves and their families.
- 1.3 Diet charges as per rules will be recovered from the employees in case of indoor treatment of the employees and their families.

2.0 **Definitions**

2.1 "Authorized Medical Attendant" (AMA) means the Doctor appointed by the Company who is its own employee or one who is authorised under these Rules to attend on the employees of the Company.

Until such time an Authorised Medical Attendant is appointed or where there is no provision for such an appointment in a place where company's Sub-station/establishment may be located, the controlling officer of the employee concerned will exercise the powers of the Authorised Medical Attendant.

- 2.2 "Specialist" under the Allopathic system of medicine means the following:
 - i) MBBS with PG Diploma from a recognised Indian University.
 - ii) MBBS with PG Degree from a recognised Indian University (i.e. MS/MD etc.);
 - iii) MBBS with DM/MCH (after MS/MD which are super speciality qualification); and
 - iv) MBBS with UK qualifications as per Medical Council of India's list of recognized qualifications i.e. MRCP/FRCS/MRCOG etc. (appended as Annexure-1).

2.3 "Government Hospital" includes;

- a military hospital
- a hospital maintained by a local authority
- any other Hospital with which Central/State Government has arrangements for treatment of Government Servants.

Note:

Hospitals run by Railway Administration and other Public Undertakings may be covered under the definition of Government Hospitals. Thus, medical expenses incurred in connection with treatment taken at such hospitals can be reimbursed to the employees under these Rules.

2.4 **"Employee"** means whole-time employee of POWERGRID including Deputationists, Trainees, Apprentices (other than Apprentices under the Act) and casual employees on daily rates.

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2.5 "Family" means self, spouse (only one), two surviving children including legally adopted children (below 25 years) and parents subject to members being dependent on the employee. The restriction regarding numbers of children shall not apply in respect of existing employees (as on respective date of 1997 pay revision order) who were availing the facility of Medical Attendance & Treatment for existing numbers of children. However, the restriction of age i.e. 25 years shall apply to all the children except in case of unmarried daughter where the age limit shall be 30 years. Further, the restriction of 25 years of age for dependent children will not be applicable for physically handicapped or mentally retarded children dependent on the employee.1

Note:

- A parent will be considered as wholly dependent on an employee only if the monthly income
 of the parent or the combined monthly income of both parents (if both parents are alive)
 does not exceed ¹Rupees Six Thousand. However, the amount of pension drawn by the
 parents shall be ignored while computing the above limit of Rupees six thousand.
- 2. The medical benefits to the spouse/ dependent children/ dependent parents of an employee are admissible irrespective of their place of stay in India
- <Deleted vide Circular No. 516 dated 09.11,2021>
- 4. For determining the dependency of family members other than parents, the same criteria shall be adopted as is followed by the Central Government for this purpose. In other words, sons/unmarried daughters of the employee who are employed otherwise than on part time/daily rated/casual basis shall be regarded as gainfully employed and accordingly not entitled to medical facilities. Even in the case of above family members who are in part time/daily rated/ casual employment, these facilities shall be admissible only if they are otherwise dependent on the employee and their monthly income from such employment is not more than Rupees Six Thousand.
- 5. The divorced daughter of an employee may be considered to be dependent upon the employee concerned and eligible for medical facilities, if her income from employment and or maintenance allowance granted to her by the Court and payable to her by her erstwhile husband, if any, does not exceed Rs. 1,000/- per month. Decree of divorce from a Court of competent jurisdiction shall be considered as sufficient proof of legal divorce.
- 6. Female employees shall have the option to declare their parents-in-law as family members, in lieu of their parents. The condition of dependency, as existing for the parents shall apply. Option exercised by a female employee in this regard may be changed only once during the entire service period.
- 7. 3If both spouses are working in POWERGRID, both of them are allowed to declare their respective parents as dependents to claim medical facilities under the POWERGRID Medical Attendance & Treatment Rules, subject to the condition that the dependent parents of both the spouses are residing in the same premises with the employees, and fulfilment of other terms & conditions as prescribed in these Rules.

¹ Cir No. 304/2012 dated 26.09.2012

² Cir 516/2021 dated 09.11.2021

³ IOM dated 16th Oct. 2019



- 8. The parents of a deceased employee shall continue to be treated as dependant of widow of the deceased employee who has got employment in POWERGRID on compassionate grounds. Consequently, the parents of the widow of the deceased employee will not be treated as dependant.
- 9. The medical facility will be admissible to the childless employees belonging to Muslims and Christian community in respect of one child only provided the employee has been given the legal guardianship of the child by the competent Court of Law subject to restriction of age as defined above.
- 2.6 "Medical Attendance" means attendance in hospital or at the residence of the employee including such pathological, bacteriological, radiological or other methods of examination for the purpose of diagnosis as are available at the Company's hospital or failing that, in any Govt./Notified Hospital/Laboratory or in any private Hospital/ Laboratory and are considered necessary by the A.M.A. and such consultation with a specialist or other Medical Officer/Sr. Medical Officer in-charge certifies to be necessary to such extent and in such manner, within India as the specialist or Medical Officer, may in consultation with CMO/Sr. MO in-charge determine. If the tests are conducted in private hospitals/laboratories, the reimbursement of such expenditure will be made up to the limit of what would have been admissible had the tests been carried out in a Government Hospital/Laboratory. For this purpose, the rates prevalent in the nearest Govt./Notified Hospital will be taken as the criterion. In all matters of doubt, the opinion of the Chief Medical Officer or M.O. in-charge of the Company's hospital will be final.
- 2.7 "Pay" for purposes of these Rules will be the amount drawn monthly by an employee as pay which has been sanctioned for the post held by him. It will also include special pay, personal pay or such other emoluments e.g. non-practising allowance for Medical Officers specially classified under the rules as "Pay". In the case of Trainees and Apprentices, pay would mean the actual stipend drawn.
- 2.8 **"Patient"** means POWERGRID employee or a member of his family to whom these Rules apply and such others as are provided for in these Rules and who requires medical attention.
- 2.9 **"Treatment"** means the use of all medical and surgical facilities essential for the recovery or for prevention of deterioration in the condition of the patient.

Note 1: Confinement

In the case of female employee and families of male employees, treatment includes confinement at the hospital of the Company or notified hospital or at a Government hospital/Maternity Centre as well as pre-natal and post-natal treatment or in any private hospital subject to the condition that the reimbursement of charges for confinement at private hospital is limited to what would have been admissible had the confinement been carried out at notified/Govt. hospital.

Note 2: Dental Treatment

Dental treatment can be obtained from any Dental Surgeon. Charges for supply of denture, cleaning, polishing of teeth, filling of teeth with gold, Orthodontia treatment on account of cosmetics will not, however, be admissible. In other cases, however, for orthodontia treatment,

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reimbursement will be made on the merits of each case subject to the approval of General Manager on the advice of Authorised Medical Attendant. Consultation charges for treatment received from Dental Surgeons and the charges for various types of dental treatments are as per Batra hospital rates. The reimbursement for dental treatment charges shall be restricted to the specified percentage of rates depending upon classification of cities (100%, 80% & 60% for A, B1 & B2 and unclassified cities).

Note 3: Eye-sight testing

Employees and their families may have their eye-sight tested for glasses once in every three years on the recommendations of the A.M.A. at a Government hospital/Notified hospital, if no such arrangements exist at Company's hospital and if any fees are incurred for this purpose, the same will be reimbursed. The condition of three years may be relaxed on the advice of AMA. The above concession does not include the provision of spectacles at the cost of the Company.

Note 4: Treatment for immunizing and prophylactic purposes

Reimbursement of charges incurred on treatment of the employees and their families for immunizing and prophylactic purposes in a Government/Notified hospital will be permitted only in the case of communicable diseases viz. (1) Cholera (2) Typhoid group of fevers (TAB) (3) Plague (4) Diphtheria (5) Whooping cough (6) Tetanus (7) Polio (8) Haemoplilus Iufluenzae b Bacteria (Hib) subject to ceiling of Rs.500/- or rate of empanel hospital and (9) Hepatitis A and Typhoid subject to ceiling of rate of empanel hospital in the location subject to ceiling of Rs. 900/- for Hepatitis A, Rs.250/- for Typhin VI single dose & Rs.150/- for Tyvax VI single dose or actuals, whichever is less (10) Hepatitis B subject to ceiling of Rs. 350/- per child per dose and Rs. 580/- per adult per dose or rate of empanel hospital of the location or actuals, whichever is less.

⁴ Cost of vaccination against COVID-19 shall be reimbursable for employees and their dependent family members. POWERGRID medical beneficiaries shall be reimbursed actual cost of DCGI approved COVID-19 vaccine for dosage as recommended by the respective vaccine manufacturer/ approved by Govt., subject to submission of vaccination certificate and invoice for vaccination charges paid.

Note 5: Vaccinations inoculations etc.

The cost of vaccinations, inoculations and injections taken by the employee, his family and servants for prophylactic and immunizing purposes to secure health certificates under international travel regulations before commencement of such travel will be reimbursed by the Company, provided the journey is undertaken at the cost of the Company.

Note 6: Treatment of Diabetes

The cost of Human Insulin and Gluco-strips limited to 30 strips per month shall be reimbursed on prescription by the treating Doctor. The prescription shall be valid for one month. In case of further requirement of insulin and gluco-strips, fresh prescription of the treating doctor shall be required.

⁴ Circular No. 509/2021 dated 07.07.2021



Note 7: Implantation of Pace Maker

⁵ Reimbursement of the cost of the following implants shall be allowed as per-actual cost. However, the claim for cost of implants shall have to be supported with original bills/ vouchers from the supplier/ manufacturer along with the hospital bills.

S.No	Type of implants
1.	Pacemaker (single chamber)
2.	Pacemaker (Dual chamber)
3.	Other cardiac implant
4.	Drug Eluting Stent
5.	Bare metal stent (non DES)

Note 8: Reimbursements of Supply Items/Accessories

Reimbursement of items like Urobag, Ringer Lactate, Venfloan No. 18, B.T. Set, T.V. Drip set, Disposable Syringes etc. prescribed by the Attending Doctor/Physician and which are essential for the recovery and prevention of deterioration in the condition of the patient may be regulated and reimbursed in consultation with the AMA.

Note 9: Reimbursement of expenses on purchase of Artificial limbs/appliances

Expenses incurred by an employee towards purchase/replacement/repair/adjustment of artificial appliances for Self and/or dependent family member(s) may be reimbursed on the recommendations of and in consultation with the AMA, only for such items as included at Annexure-II. Reimbursement of expenses incurred on items mentioned in the Annexure-II may be regulated in accordance with the rates charged by All India Institute of Medical Sciences or the Local Municipal Hospital at the places where the employee is undergoing treatment.

Note 10: Reimbursement of expenses incurred towards removal of Kidney stones by Lithotripsy

Reimbursement of medical expenses incurred by the employees towards removal of Kidney stones by Lithotripsy shall be limited to the rates charged by All India Institute of Medical Sciences, New Delhi. Charges towards accommodation, investigations, medicines etc. shall be limited to the entitlement of the employee concerned.

Note 11: ⁶Reimbursement of expenses incurred towards Intra Ocular Lens (IOL)

Expenses incurred towards Intra Ocular Lens (IOL) required for Cataract operation of the eye in case of MICS package shall be allowed upto ceiling limit of Rs.16500/- per lens and in case of Phaco package upto Rs. 11000/- per lens subject to actual.

Note 12: Expenses for Physiotherapy Treatment

⁷Reimbursement of Physiotherapy treatment availed from non-empanelled hospitals/ registered private physiotherapy practitioner.

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⁵ IOM dated 26.06.2012

⁶ Circular dated 09.07.2019

⁷ Circular No.429/2018 dated 10.01.2019





Reimbursement of expenditure incurred towards Physiotherapy treatment availed from nonempanelled hospital/ registered private physiotherapy practitioner shall be restricted to rates of Holy Family Hospital, New Delhi or the claimed amount whichever is lower, subject to following conditions:

- (i) Treatment has been prescribed by registered orthopaedic practitioner.
- (ii) Treatment shall be permissible for maximum period of 02 weeks. In the event of treatment exceeding the specified period, then such cases shall be referred to Medical Relaxation Committee who after examination of case shall put-up its recommendations to Competent Authority whose decision shall be final and binding.
- (iii) Reimbursement shall be restricted depending upon classification of cities i.e 100% of Holy Family Hospital Rates in case the treatment availed in X class cities, 80% of Holy Family Hospital Rates in case the treatment availed in Y class cities & 60% of Holy Family Hospital Rates in case the treatment availed in Z class cities.

Note: Reimbursement for physiotherapy treatment availed at residence shall not be permissible. However, in special circumstances such as accident victim etc. where the patient is unable to travel, reimbursement of expenditure incurred towards physiotherapy therapy shall be allowed with the approval of Medical Relaxation Committee.

In case of physiotherapy treatment availed from empanelled hospital, the treatment shall be permissible for maximum period of 01 month. Any extension beyond 01 month shall entail same procedure as mentioned in a) (ii) above.

Note 13: Expenses for treatment of Sterility and Infertility

All employees and their family members will be eligible for reimbursement of expenditure incurred for treatment of sterlity and infertility subject to the condition that the treatment is undergone from Government/Notified Hospitals. Any treatment taken from private hospitals/RMPs will not be reimbursed.

5Note 14: Radiological investigations (like PER/CT/PETMRI), Endoscopy, ERCP, Lithotripsy, Laser Treatment (Non-cosmetic), Cataract, Thallium Scan, Colour Doppler, Oxygen Therapy, Radiation, Chemotherapy, Dialysis taken in day care, shall be treated as indoor treatment and procedure laid down for indoor treatment shall be applicable.

⁹ Note 15: Reimbursement of expenditure incurred toward Robotic Surgery.

Reimbursement of expenditure incurred towards robotic surgery shall be allowed in cases of renai and prostate cancer. In all other cases, relaxation shall only be provided on case-to-case basis after review by the Medical Relaxation Committee.

¹⁰Note 16: Reimbursement of Hearing Aid

Serving employees and their dependent family members shall be eligible for reimbursement for cost of Hearing Aid, subject to a monetary ceiling of Rs. 60,000/- or 90% of the cost of device (inclusive of taxes, if any), whichever is lower, per ear. Cost of hearing aid shall be reimbursed once in five years per ear, only on prescription from an ENT Specialist from an

⁸ Cir No. 375/2017 dated 06.03.2017

⁹ Circular No.429/2018 dated 10.01.2019

¹⁰ Circular No. 524/2022 dated 25.01.2022



empanelled or government hospital, on the basis of an audiogram report, recommendation of the Medical Committee and approval of the Competent Authority.

No reimbursement shall be made by the Company towards cost of cell/ battery for the hearing aid. Further, after 05 years/ separation of the employee, the cost of hearing aid shall be written off without any recovery from the employee. Expenditure towards hearing aid shall be treated as medical expenditure and the device shall not be treated as an asset in the name of the employee.

3.0 Treatment at the Dispensary /Hospital of the Company

All employees and their families are entitled to free medical attendance and treatment in POWERGRID dispensary/hospital. In the case of severe illness, Company's ambulance van can be utilised at the discretion of the A.M.A. for bringing the patient to the dispensary/hospital. Patients will not ordinarily be treated at their residence except in the case of acute disease or when the A.M.A. considers movement of the patient is injurious to his recovery. Patients requiring hospitalisation will be admitted to the Company's hospital and will be entitled to the following facilities at Company's expenses:

- a) Use of all medical and surgical facilities available at the hospital:
- b) The employment of such pathological, bacteriological, radiological or other methods as are considered necessary by the A.M.A.;
- Supply of such medicines, vaccines, sera or other therapeutic substances as are ordinarily available in the hospital. Cost of medicines etc. prescribed by the A.M.A. but not available at the hospital will be reimbursed;
- d) Such consultations with a specialist as the A.M.A. may consider necessary;
- e) Such accommodation and such nursing as are ordinary provided at the hospital to the patients.
- 3.1 Rates for the cost of diet to be charged will be published from time to time by the Company/Head of the Sub-station.

4.0 Treatment as Indoor Patients at Govt./Notified Hospitals

- 4.1 Where a Company hospitals does not exist at the station of duty of the employee or arrangements for the requisite treatment do not exist at the Company's Hospital and A.M.A. of the Company refers the case for admission to another hospital, or the employee is residing at a distance of more than 5 kilometers from the Company's hospital, the employee and his family members who require hospitalisation, can be admitted to the nearest Government/Notified hospital, subject to the availability of accommodation.
- 4.2 While under treatment in such hospitals, the employee will be entitled at Company's expense to the facilities mentioned at Rule-3 above, including accommodation as suited to his status.

The provisions regarding accommodation and treatment charges in Notified hospitals shall be as per the notification(s) issued by the company from time to time. If the medical Superintendent of the hospital certifies that accommodation suited to the status of the

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employee was not available and his admission to hospital could not be delayed without danger, accommodation of a higher class may be allotted but, if such higher accommodation is allotted only at the request of the employee he will himself have to pay the additional expense.

- 4.3 Charges for any special nursing will also have to be paid for by the employee(s) unless it is especially directed by the A.M.A. or the Medical Superintendent of the hospital.
- 4.4 Ambulance charges for admission to the Government/Notified hospital, if recommended by A.M.A. will be reimbursed. Company's transport should normally be utilised.

5.0 Treatment from Private Medical Practitioners

- 5.1 Where there is no A.M.A of the Company at the station of duty of the employee or the employee is not residing in the township or is on leave or on tour at another station, he and his family members may receive medical attendance and treatment from private registered medical practitioners of their choice at their residence or at the residence of the Doctor or at the latter's consulting room.
- 5.2 Consultation fees charged by the Doctor will be reimbursed subject to the ceilings mentioned at Annexure-III.
- 5.3 Rates/Charges reimbursable in respect of stitches/dressing to employees (including their families) will be as mentioned at Annexure-III.
- 5.4 The term "Registered Private Medical Practitioner" does not include practitioners of the Ayurvedic, Unani and Homeopathic system of medicine. It, however, includes a Government Doctor authorised to engage in private practice.
- 5.5 The above concession of medical attendance and treatment by private registered medical practitioners does not include:
- i) Treatment in connection with the testing of eye-sight for glasses.
- ii) Dental treatment, treatment for sterility, mental and veneral diseases.
- iii) Cases where hospitalisation was necessary, expenses in respect of the first consultation/treatment only will be reimbursed.

6.0 Reimbursement of Medical Expenses and the procedure thereof

6.1 The cost of medicines which are required and recommended by A.M.A. or a Registered Private Medical Practitioner, as the case may be, will be reimbursed on submission of a claim as hereinafter prescribed.

Medicines can be obtained from any chemist/druggist on the prescribed prescription by the doctors and reimbursement claimed. Cost of such medicines listed and inadmissible by the Ministry of Heath and so notified by them from time to time shall not be reimbursed except with the specific approval of the AMA. Wherever convenient, medicines should be procured from the Super Bazaars situated in the various localities, especially in the case of chronic

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patients. No medicine will be supplied by the doctors from their clinic to the patients. However, in emergent cases where administering of any medicine is essential in the interest of the ailment of the patient, the sample can be supplied by the doctor.

Normally the medicines will not be prescribed for more than three days at a time. In case the medicines have to be supplied for more than 3 days, the reasons have to be recorded.

- 6.2 The cost of the following medicines is not reimbursable:
- a) Medicines which are of food value;
- b) Medicines in the nature of toiletries; and
- Medicines, which are of a prophylactic nature, except to the extent specifically provided for in these rules.

Note:

Where cheaper substitutes of equal therapeutic value are available, the less expensive one should be used as far as possible. The list of medicines not reimbursable is available with the Finance & Accounts Department.

- 6.3 All pathological, bacteriological, radiological and other tests should be conducted at the Company's hospital/dispensary or at Government/Notified hospitals or institutions. Any charges payable will be reimbursed as per Annexure-III.
- 6.4 Refund of hospital charges will be made if the patient is admitted to a Government/ Notified hospital and not otherwise. In other cases, reimbursement shall be made as specified in Annexure III.
- 6.5 All payments of medical expenses should be made by the employee in the first instance. Claims for refund of medical expenses should subsequently be submitted on prescribed form accompanied with an essentiality certificate from the A.M.A. and bills, cash receipt and cash memos (unless issued by Government hospitals) should be duly stamped, wherever necessary.

The claims on receipt, should be checked with reference to the rules and countersigned for the admissible amount by the Controlling Officer of the employee as specified under the Delegation of Powers before being forwarded to the Accounts Department for final check and payment. Necessary forms shall be prescribed by the General Manager/Project Administrator/Head of the Sub-station.

¹¹ Alternatively, in case of indoor treatment in a notified hospital, the employee may obtain an authorization letter/ permission slip from the concerned HR on the basis of advice for hospitalization by the AMA/ Doctor in empaneled hospital indicating the type of disease/ treatment for which indoor treatment is essential. The employee, at the time of discharge, shall be required to countersign the discharge slip, bills raised by the hospital and the authorization letter/ permission slip.

¹¹ IOM No. 189 dated 12.12.2003



- 6.6 12The employee shall need to claim reimbursement for medical expenses through ESS. In the respective ESS application, the employee shall enter the details related to relevant bills/ payment vouchers (bill no. / bill date etc.). The employee shall also upload all the relevant documents, i.e. relevant bill, prescriptions from a registered medical practitioner, receipt for consultation charges, bills for the cost of medicine/ pathological test charges/ injection administration fees, etc.
 - No hard copy of the said documents needs to be submitted.
- 6.7 The claim shall be routed to the Finance establishment after being forwarded by the Competent Authority, as per the DoP. The dealing finance officer shall scrutinize the documents and make necessary deductions, if any, before finally approving the claim for release of payment.
 - Claims for reimbursement of medical expenses should be submitted within three months of the date of the completion of the treatment.
- 6.8 In case of delay in submission of claim beyond 3 months but within one year from the date of completion of the treatment, the Competent Authority, as per the DoP, may approve reimbursement of such delayed claims if s/he is satisfied that the delay in submission of the claims is for reasons beyond the employee's control. Thereafter, the claim shall become time-barred and shall not be entertained.
 - In case of relaxation, the approval of Competent Authority is also required to be ticked off ($\sqrt{}$) in the check-box made available in ESS for this purpose.
- 6.9 The employee shall retain original copies of the relevant documents, j.e. prescriptions, medical bills, etc., uploaded along with the claim during a financial year till the 30th September of the next FY for verification on random basis by the Internal Audit Team. Apart from this verification, Statutory/ Govt. Auditors/ other such agency may call any bill for verification.
- 6.10 In case the employee fails to produce the original documents within a period of 07 working days (excluding absence on account of leave/ tour etc.), an amount equal to twice the amount paid against the bills not produced shall be recovered from the ensuing salary, after informing the HoD of the concerned employee, without any further notice. In case false claim is submitted, the Company reserves the right to deduct/ adjust the penalty amount (twice the amount paid against the false claim) from any dues payable to the employee and the employee shall be liable for any disciplinary action as deemed fit.
- 7.0 Medical Treatment in respect of families of employees in special circumstances
- 7.1 The families of employees who are deputed/posted by the Company abroad for training or any other purposes will continue to be entitled for free medical attendance and treatment at the cost of the Company in terms of these Rules, if they do not accompany the employee abroad, irrespective of the place they may be residing at, in India.
- 7.2 < Deleted vide Circular No. 516/2021 dated 09.11.2021>
- 7.3 < Deleted vide Circular No. 516/2021 dated 09.11.2021>

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¹² Circular No. 453 dated 29.07.2019



8.0 Travelling Allowance

Employees and their families will be entitled to payment of travelling allowance in terms of T.A. Rules of the Company when directed by the A.M.A. for medical attendance or treatment to another M.O./Specialist or hospital outside the station at which the employees is posted but within the District. T.A. for one attendant/escort will also be allowed if it is certified by the A.M.A. that it is unsafe for the patient to travel unattended. In case of reference made to M.O./Specialist or hospital outside the District, specific prior sanction of the General Manager/Project Administrator/ Head of the station should be obtained by the A.M.A. before referring the cases to Medical Officers/ Specialists and hospitals/sanitarium situated outside the district, such as may be Often necessary in the case of special diseases e.g. T.B., Polio, Cancer, Mental diseases etc. Failing this, the T.A. claims and claims for reimbursement of medical expenses will not be accepted.

Note:

Executive Director of the Region or Chief General Manager (I/C) of the Region delegated power of an Executive Director can by a notification, which can be modified, if needed from time to time, allow treatment in neighbouring district hospital doing away with requirement of case to case approval, subject to following:

- i) Hospital(s) falling in neighbouring district is nearer in distance than hospital(s) in the same district.
- ii) Facility of such hospital(s) in neighbouring district is being availed by company's employees.
- iii) On reference being made by the A.M.A. for treatment as already prescribed.
- iv) Restricting to specified sub-station/group head quarter/office from where hospital(s) of neighbouring district is nearer.

Note: Spouse/ dependent family members staying away from the place of posting of the employee shall be excluded from coverage under Clause 8.0. <incorporated vide Circular No. 516/2021 dated 09.11,2021>

9.0 Grant of advances for medical attendance and treatment

9.1 For treatment of employees and their entitled family members as in-patients in hospitals, medical advance limited to Rs.10,000/- may be granted to the employees borne on the regular establishment of the company including trainees recruited under Company's own training schemes. The advance can be drawn for one illness/hospitalization and in more than one installment also, subject to the ceiling of Rs.10,000/- at any one time.

Provided, however, where the expenditure is likely to be more than the ceiling amount, of Rs.10,000/- second or subsequent advance can be granted to the employee concerned on submission of a part-bill against the earlier advance drawn by him subject to the aforesaid ceiling.

9.2 The actual amount of advance to be granted shall be decided keeping in view the recommendations of the AMA as regards the nature of disease, likely duration of



hospitalisation and anticipated expenditure thereon vis-a-vis the amount reimbursable for the illness/hospitalisation as per the entitlement of the employee concerned.

- 9.3 In the event of emergency, an ad-hoc medical advance limited to one month's Basic Pay + D.A. of the employee concerned, or Rs. 10,000/- whichever is less, may be granted where inpatient hospital treatment is required. This is admissible without recommendation of Authorised Medical Attendant only in respect of remote locations where AMA is not available. This is not admissible where notified hospitals exist.
- 9.4 The amount of advance granted shall be adjusted against the medical reimbursement claims submitted by the employee for reimbursement of the expenditure as admissible under the rules; and the balance, if any, will be recovered from the pay/other dues of the employee concerned. In case of failure to present the reimbursement claim/ adjustment bill within the period of three months from the date of discharge from hospital, the entire amount of advance will be recovered in one instalment.
- 9.5 ¹³In case of death of an employee who has outstanding medical advance, the same shall be expensed and adjusted without any need for supporting documents.
- 9.5 An employee who is desirous of availing this facility of medical advance shall apply in the prescribed form at Annexure-IV. However, in case an employee's condition is such that he is unable to make the application personally and receive the payment, another employee of the company may present the application for advance on his behalf, depending upon the facts and circumstances of the case and at the discretion of the Management. The advance will be booked in the name of the applicant (employee concerned or some other employee on his behalf, as the case may be) and it shall be the responsibility of the applicant to arrange for adjustment of the advance within the stipulated period.

The authority for sanctioning the advance shall be the employee's Head of the Department.

10.0 Reimbursement of medical incurred in emergencies

Refund of medical expenses in relaxation of these Rules may be allowed as per the Delegation of Powers.

- 11.0 Medical treatment to Outsiders at Dispensaries/ Hospitals of the Company.
- 11.1 Outsider means any person who is not an employee of the Company or a member of the employee's family as defined in these rules. This term will include relatives and servants of the employees, contractors, and their workmen in the premises of the Company, employees of the bank, police, post office, schools, cooperative stores, clubs, etc.

For treatment of the above categories of outsiders, the following rules shall apply:

- 11.2 Contractor's Workmen
- a) According to the Workmen's Compensation Act, in the case of a workmen who sustains personal injury by accident arising out of and in the course of employment whilst engaged by contractors for the purposes of carrying out trade or business of the Company, the liability of

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¹³ Circular No. 506/2021 dated 26.05.2021





the Company to compensate the Workman or his dependents, where such liability exists, is the same as in the case of the Company's servants, except that the compensation so paid may be recovered by the Company from the contractor by whom the workman was directly engaged.

- b) It is the responsibility of the contractor, and not of the Company to provide medical aid for his labour. But where due to non-availability of any other doctor in the vicinity, medical aid has to be provided by the Company's Medical Officer, the contractor should submit through the Company's Officer for whom he is working, a written requisition in duplicate stating that he is agreeable to bear the charges for such aid. The Company's Officer will forward one copy of the requisition to the Accounts Officer with a covering letter giving Work order No. and date. He should also certify in all final bills of contractors whether he has countersigned any medical requisition or not. If so, he should furnish full details of such requisitions. The Medical Officer will maintain a record, in duplicate, by carbon process, of all contractors' labour who are either treated in the company hospital or given first aid at the Company hospital and sent on to other hospital. Separate statements should be made out for each contractor and duplicate copies of statements should be sent every month to the Accounts Officer (works) so that the latter can effect recoveries from the Contractors' bills.
- 11.3 Employees of Police, Excise, Postal, Banks, Telephone/Telegraph departments etc., will be entitled to such out-patient treatment on such terms and conditions as are mutually agreed upon between the department and the head of the Sub-station concerned. The facilities to be extended and the charges to be levied under this agreement shall be clearly spelt out. For indoor treatment, charges shall be as given in para 11.5.
- 11.4 Dependents and relatives of the employees; employees of the school, Community Centers, Canteens, Clubs etc. Charges for out-patients facilities to be extended by the Company shall be on the basis of the monthly payment to be decided upon by the Head of the Sub-station. Charges for indoor treatment will be as indicated in para 11.5.
- 11.5 Charges to be recovered for operation on out-siders will be as notified by the Management from time to time.

12.0 Medical certificates and private practice

The Company's Medical Officers will not issue any certificate other than what they are required to do under the company's rules or in the Company's interest. The only exception will be that they may issue certificates for life insurance policies and accept payment for them subject to the relevant rules, but this should not interfere with their work under the Company.

The rate of charges for other cases may be fixed by the Company from time to time, and will be available with the C.M.O.

In the preceding paragraphs, wherever a doctor is permitted to retain a part of the fees, specific mention about it has been made. In all other cases, the fees will be entirely credited to the Company.

13.0 Interpretation

If there be any doubt regarding interpretation or application of these Rules, it should be referred to the Chairman, POWERGRID and his decision in the matter will be final.

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14.0 Diet charges

The Diet Charges per day to be levied in the Company's hospital from the employees, who get in-patient treatment for self and their families in the Company hospital, will be as notified from time to time. Recovery will be made through deduction from the salary.

15.0 Checklist for medical refund claim

Before forwarding the medical bills to the Finance & Account Department, it should be seen that:

- a) The claim is submitted within three months from the date of completion of treatment.
- b) The number of medical claims to be preferred by an employee may not exceed two in a calendar month.
- c) The bill is signed by the employee.
- d) The certificate is signed by the Private Medical Practitioner with his qualification and Registration Number.
- e) The receipt given by the Doctor is stamped wherever necessary.
- f) The certificate granted by the Doctor contains name of disease and period of treatment, date of consultation and dates of administration of injection and the nature of injection such as intravenous or intramuscular, as also the name of patient to whom essentiality certificate is issued.
- g) If professional charges for administration of injection are claimed, medicine being supplied from doctor's dispensary; the name, quantity, cost of medicines are also to be furnished in the essentiality certificate. If the injection/medicine is supplied free of cost, the same is specifically certified as such by the private medical practitioner.
- h) The claim for cost of medicines is supported by cash bills from the shops and prescription of the Private Medical Practitioner.
- i) Details of laboratory tests and X-rays are furnished along with the receipts for admitting the corresponding rates in Government/Notified Hospitals.
- j) In the case of employees living in the township, if the treatment is undergone in other than Company's hospital, the employee should be on leave (other than casual leave).
- k) Claims are not admitted when treatment for dental/sterlity/mental/veneral diseases is undergone with the private registered medical practitioner.

16.0 Medical treatment to temporary / work charged / daily rated employees

16.1 Medical identity card to temporary/workcharged/daily rated employees with more than one year's service will be issued by the HR Department indicating their rate of pay and identity/token number in lieu of staff number for the purpose of maintaining records in the hospital.

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- 16.2 The temporary/work-charged/daily-rated employees will apply to the HR Deptt. in the prescribed from for identity cards for treatment of their families, including dependent parents. The applications received through the departmental officers, will be checked for correctness of service particulars and identity cards issued directly to the employees.
- 16.3 As and when they are discharged from service, their identity taken along with the Medical attendance card will be collected by the concerned officers and sent to the HR Deptt. The controlling officers will inform the Chief Medical Officer immediately after their discharge, under intimation to the HR Department.
- 16.4 With regard to the diet-charges, the daily rate will be converted as monthly salary by multiplying it by 25. The diet-charges notified for regular employees in different pay slabs will be made applicable to this category also after ascertaining the monthly salary of the temporary employee, as indicated above.

17.0 Rules for ambulance service at hospitals

- 17.1 Ambulance service will be provided free of charge to cases eligible for free treatment requiring admission as in-patients only.
- 17.2 Dangerously or seriously ill cases will be given priority for providing ambulance facilities. Employees are requested to indicate, wherever feasible, the nature of illness and its seriousness when requests for ambulance are made. Requests for ambulance will be complied with subject to availability and/or prior bookings and seriousness of cases.
- 17.3 The ambulance will be used only over motorable roads. The use of the ambulance will be normally limited to a radius of 20 kilometers from the Company's hospital.
- 17.4 In case of patients eligible for free treatment other than those requiring admission as inpatients, ambulance service may be provided free of charge if in the opinion of the attending doctor, it is necessary to transport the patient by an ambulance on medical grounds, such as inability to walk on account of fracture in the leg or blindness or very old age or mental illness etc.
- 17.5 If, after arrival at the hospital, the doctor finds that the use of the ambulance was not warranted on any of the grounds mentioned in paras 17.1 and 17.4 above, the ambulance charges will be recovered from the employee.
- 17.6 Ambulance service will not be made available for dropping patients at their homes or at other places after out-patient treatment. They will be required to make their own arrangements for returning from the hospital. However, in exceptional cases, non ambulant patients will be permitted the use of ambulance under instructions from the Chief Medical Officer or the Medical Superintendent or one of the Medical Officers, in the absence of any one of them, this discretion will be used by the attending doctor.
- 17.7 Ambulance service will be provided free of charge to drop the discharged in-patients at their residence within a distance of 20 kilometers, if in the opinion of the doctor of not less than the rank of Medical Officer, the ambulance service is necessary in that case. If the residence is beyond these limits but within 30 kilometers, Chief Medical Officer's permission will be required.



- 17.8 Requests for ambulance to bring paying cases (ERNE cases) who are residing within the township will be complied with, subject to availability of the ambulance. In other cases, the employees will have to make their own arrangements. The only exception will be cases arising out of accidents for which the Chief Medical Officer's approval will be required. After arrival at the Hospital, if it is found that incorrect or misleading information has been furnished, in addition to recovering the ambulance charge, disciplinary action may also be taken against the employee.
- 17.9 Use of ambulance for medico-legal cases connected with employees or their dependent eligible for free treatment will be charged for, except when in the opinion of the attending doctor, it is necessary to transport the patient by ambulance on medical grounds.
- 17.10 In cases of accidents while on duty, ambulance will be provided free of charge.
- 17.11 The user of the ambulance will ensure that:
 - a) For in-coming cases, the Doctor or the Nurse of the Maternity Ward or the Casualty, certifies the use of the ambulance as free or paid, and
 - b) For out-going cases an ambulance slip issued by the doctor treating the case should be obtained and presented to the casualty nurse.
- 17.12 When a patient eligible for free treatment is referred to the Government Headquarters Hospital, ambulance will be provided only if a doctor of not less than the rank of a Medical Officer certifies that it is not safe for the patient to travel by any other transport.
- 17.13 All cases brought by ambulance should present themselves at the casualty room and not at the out-patient department (except in cases of confinement where the patient will be taken directly to the Maternity Ward) and then directed to the Medical Officer in the out-patient department after registering their names in the ambulance register.
 - Likewise, all patients to be dropped should present themselves at the casualty room with the necessary authorisation of the Medical Officer for registration before getting into the ambulance. In all paying cases, the Casualty Nurse of the Receptionist/Nurse will record "TO PAY" in the Ambulance Register and in the Ambulance Trip Sheet.
- 17.14 The charges for ambulance trip will be as fixed by the Management from time to time.
- 17.15 The ambulance will be used for transporting dead bodies.
- 17.16 Any matter regarding the use of the ambulance not covered by these Rules will be referred to the General Manager.
- 18.0 Employees sent abroad for training / short-term assignment.

 Medical facilities appropriate to the status of the employee(s) will be provided subject to the clearance by Reserve Bank of India/Government for Foreign Exchange.



ANNEXURE-I

INDIAN MEDICAL COUNCIL ACT, 1956 THE SECOND SCHEDULE

Recognised Medical qualifications granted by Medical Institutions outside India (Sec. 12)

Country	Title	Nature of Qualifications	Abbreviations
UNITED KINGDOM	M.B., Ch.B	Bachelor of Medicine &	U. Birm
University of Birmingham		Bachelor of Surgery	
	M.D	Doctor of Medicine	
	Ch.M.	Master of Surgery	
University of Bristol	M.B.,	Bachelor of Medicine &	U. Brist
	Ch.B	Bachelor of Surgery]
	M.D	Doctor of Medicine	
	Ch. M.	Master of Surgery	
University of Cambridge	M.B. Chir	Bachelor of Medicine	U. Camb.
	M.D.	Doctor of Medicine	
	M. Chir	Master of Surgery	
University of Durham	M.B.B.S	Bachelor of Medicine &	U. Durh
		Bachelor of Surgery	
	M.D.	Doctor of Medicine	
	M.S	Master of Surgery	
University of Leeds	M.B.,	Bachelor of Medicine &	U. Leeds
	Ch.B.	Bachelor of Surgery	
	M.D.	Doctor of Medicine Master	
	Ch.M.	of Surgery	
University of Liverpool	M.B.,	U.L. Pool	
	Ch.B	Bachelor of Surgery	
	M.D	Doctor of Medicine Master	
	Ch.M	of Surgery	
	M.Ch. Orth.	Master of Orthopaedic	
		Surgery	
University of London	M.B.B.S.	Bachelor of Medicine &	U. Lond.
		Bachelor of Surgery	
University of London	M.D.	Doctor of Medicine	
	M.S.	Master of Surgery	
University of Manchester	M.B. Ch.B.	Bachelor of Medicine &	U. Manc.
		Bachelor of Surgery	
	M.D	Doctor of Medicine	U.Manc.
	Ch.M.	Master of Surgery	
University of Oxford	M.B.,	Bachelor of Medicine &	U. Oxford
•	B.Ch	Bachelor of Surgery	
	D.M.	Doctor of Medicine	1
	M.Ch.	Master of Surgery	
University of Sheffield	M.B.,	Bachelor of Medicine &	U. Shaff.
•	B.Ch.	Bachelor of Surgery	
	M.D.	Doctor of Medicine	
University of Wales	M.B.,	Bachelor of Medicine &	U. Wales
,	B.Ch	Bachelor of Surgery	

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Country	Title	Nature of Qualifications	Abbreviations
	M.D	Doctor of Medicine	
	M. Ch	Master of Surgery	
University of Aberdeen	M.B.,	Bachelor of Medicine &	U. Aberd.
,	Ch.B.	Bachelor of Surgery	
	M.D	Doctor of Medicine	
	Ch.M.	Master of Surgery	
University of Edinburgh	M.B.,	Bachelor of Medicine &	U.Edin
	Ch.B.	Bachelor of Surgery	
	M,D	Doctor of Medicine	1
	Ch.M.	Master of Surgery	
	Dip. Psych.	Diploma in Psychology	1
	D.P.M	Diploma in Psychological	
	D.1 .1V1	Medicine	
University of Glasgow	M.B.,	Bachelor of Medicine &	U. Glasg.
	Ch.B.	Bachelor of Surgery	_
	M.D.	Doctor of Medicine	
	Ch.M.	Master of Surgery	
University Andrews	St. M.B.,	Bachelor of Medicine &	U.St.
•	Ch.B	Bachelor of Surgery	
	M.D.	Doctor of Medicine	1
	Ch.M.	Master of Surgery	
Queen's University of	M.B.B.Ch.	Bachelor of Medicine &	U.Belf.
Belfast		Bachelor of Surgery	
	M.D.	Doctor of Medicine	1
	M.Ch.	Master of Surgery	
	M.A.O	Master of Obstetrics	
Royal College of	L.R.C.P.	Licentiate	R.C.P. Lond.
Physicians of London	M.R.C.P.	Member	
,	F.R.C.P.	Fellow	
Royal College of	M.R.C.S	Member	R.C.S. Eng.
Surgeons of England	F.R.C.S	Fellow	Molo. Eng.
g	F.F.A.R.C.S	Fellow	
		(Faculty of Anaesthesia)	
		Provided that this	
		qualification has been	
		awarded after qualifying	
		at an examination.	
Society of Apothecaries	L.M.S.S.A.	Licentiate in Medicine and	S.A. Lond.
		of London Surgery	377 1101
	L.S.A.	Licentiate	1
Royal College of	L.R.C.P.	Licentiate	R.C.P. Edin.
Physicians	M.R.C.P.	Member	I STORE LOUIS
	F.R.C.P	Fellow	-
Royal College of	L.R.C.S	Licentiate	R.C.S. Edin,
Surgeons of Edinburgh	F.R.C.S.	Fellow	it.O.O. Edill,
Royal College of	L.R.C.P.S.	Licentiate	R.C.P.S. Glasg
	M.R.C.P.	Member	I K.C.I .S. Glusg
Physicians and Surgeons			
Physicians and Surgeons of Glasgow	F.R.C.P.	Fellow	

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Country	Title	Nature of Qualifications	Abbreviations				
	F.R.C.P.S.	Fellow					
University of New Castle-	M.B.,	Bachelor of Medicine &	U.Ncle.				
Upon-Tyne	Ch,B.	Bachelor of Surgery					
University of Castel	M.D.	Doctor of Medicine	U.Ncle.				
Upon-Tyne	Ch.M.	Master of Surgery					
University of Dundee	M.B.,	Bachelor of Medicine &	U. Dundee				
	Ch.B.	Bachelor of Surgery					
	M.D.	Doctor of Medicine					
	Ch.M.	Master of Surgery					
Royal College of Physicians of United Kingdom	M.R.C.P.	Member	R.C.P., U.K.				
Royal College of Obste- tricians and Gynaecologists, London	M.R.C.O.G.	Member	R.C.D.G. Lond.				
Royal College of Pathologists London	MR.C. F.R.C.	Member Fellow (Lon.)	R.C.P. (Lond.)				
Royal College of Physicians and Surgeons, London	D.O.M.S	Diploma in Opthalmology Medicine and Surgery	R.C.P. & S. (Lond.)				
London	D.O. O.P.M.	Diploma in Opthalmology Diploma in Psychological Medicine					
Royal College of Psychratrist London	M.R.C Psyon	Member	R.C. Psych. (Lond.)				

Provided that the qualification has been awarded after qualifying at an examination.

The above qualifications granted in United Kingdom shall be recognised medicine qualifications when granted on or before 11th Nov. 1978.



ANNEXURE-II

LIST OF ARTIFICIAL APPLIANCES

- 1. Unilateral long leg brace without hip joint
- 2. Hip joint with pelvic band
- Spinal brace
- 4. Unilateral short leg brace
- 5. Shoe or Boot Protective or aiding to paralysed or weak legs.
- 6. Bilateral hip joint with pelvic band/weak leg.
- 7. Bilateral long leg brace without hip joint.
- 8. Bilateral short leg brace
- 9. Lumbo-sacral or Spinal support or back Support
- 10. Taylors brace
- 11. Milwaukee brace
- 12. Mermaid splint
- Posterior slab
- 14. Cervical brace four post
- 15. Rigid Cervical Collar with head extension
- 16. Cervical Collar
- 17. Dynamic splint (Aluminium)
- 18. Cock-up splint plain (Aluminium)
- 19. Cock-up splint (plastic) or long opponens
- 20. Turn Buckle splint
- 21. Nuckle bender splint
- 22. Anterior knee Guard splint
- 23. Densis brown splint
- 24. Congential Talipus Equino Varus/Valgus splint
- 25. Short Opponens, P.V.C. (Plastic)
- 26. Knee Cage
- 27. Long Opponens with M.P. ft. bar and finger
- 28. Extension (plastic) Dynamic
- *29. Boot with C and E heel and arch support
- 30. C and E heel
- 31. Arch support
- 32. M.T. Pad

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- 33. M.T.E. Raising 1"
- 34. T. Strap
- 35. Sponge heel
- 36. Wedge 1/8"
- 37. Universal Raising 1"
- 38. Foot drop splint
- 39. Below Knee prosthetics (P.T.S. type Prosthetics)
- 40. Aluminium adjustable above knee right splint
- 41. Plastic shoulder abduetion splint
- 42. Plaster of paris or Gypsona cast
- 43. Modified shoes
- 44. Below Elbow Prosthetics
- 45. Hooks
- 46. Cosmetic hand
- 47. Splint for C.D.H.
- 48. Splint for Elbow
- 49. Above Elbow and below elbow Prosthetics
- 50. Above Elbow and below elbow Orthotics
- 51. Corset
- 52. Wheel chair
- 53. Protective shoes with microcellular rubber without nails often with additional gadgets like adjustable springs and rockets.
- 54. Crutches
- 55. Walking iron with plaster casts
- 56. Calipers
- 57. Braces
- 58. Artificial limbs
- 59. Illestomy kit
 - ¹⁴ Reimbursement of the cost of the following implants shall be allowed as per actual cost. However, the claim for cost of implants shall have to be supported with original bills/ vouchers from the supplier/ manufacturer along with the hospital bills.

S.No	Type of implants
1.	Total Knee joint
2.	Total Hip joint

¹⁴ IOM dated 26.06.2012

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ANNEXURE-III

SCHEDULE OF CHARGES ADMISSIBLE FOR TREATMENT

1. OUTPATIENT TREATMENT

SI. No.	Item	Provision	Present charges
1.	Consultation (Specialist) Allopathy/Dental	Holy Family Rates for private Consultation, per consultation	Rs. 900
2.	Consultation (Specialists) Ayurvedic/Homeo	Holy Family Rates for private Consultation, per consultation	Rs. 400
3.	Consultation (General) Allopathy/Dental	50% of Holy Family Rates for Private Consultation, per consultation	Rs. 450
4.	Consultation (General) Ayurvedic/Homeo	50% of Holy Family Rates for Private consultation, per consultation	Rs. 200
5.	Domicialiary visits (Specialist)	Two times the normal rates for reimbursement	Rs. 1800
6.	Domicialiary visits (General)	Two times the normal rates for Reimbursement	Rs. 900
7.	Injection Fees, Dressing Charges etc.	As per rate of Holy Family Hospital, New Delhi.	W-100-00
8.	Dental treatment	As per rate of Batra Hospital, New Delhi	

Note:

- a) For visit between 10 PM & 6 AM, the charges will be 1 & 1/2 times the normal charges.
- b) A certificate from the concerned A.M.P. will also be required to the effect the domicillary visit was essential in the interest of health of the patient.
- c) For outpatient treatment obtained in Notified hospital (s), the consultation charges as charged by that hospital(s) concerned shall be reimbursed.
- d) Consultation (under ayurveda and homeo systems) with a doctor having graduation is treated as 'General' whereas with a doctor having post-graduate qualification is treated as 'Specialist'.
- e) The above rates are linked to the location, and will be restricted to 80% and 60% of the rates in respect of B1 & B2 class, and unclassified cities, respectively.
- f) In case medicines are supplied by the doctor himself under Ayurvedic or Homeo system of medicine, the reimbursement will be restricted to ¹⁵Rs. 25/- per day for the period of treatment which will not exceed 30 days at one time.

¹⁵ IOM dated 26.06.2012

2. ACCOMMODATION CHARGES FOR IN-PATIENT TREATMENT

a) For Delhi based employees

i) Notified Hospital:

If treatment is taken in a notified hospital, reimbursement of actual accommodation charges will be limited to the entitlement (linked to Grades) of employees in that hospital. The categorisation will be as follows:

Category-I	W0-W4	
Category-II	W5-W7	
Category-III	W8-W11	•
	\$1-\$4, \$G	
	E2-E4	
Category-IV	E4-E5	
Category-V	E5-E7	·
Category-VI	E8 and above	

ii) Non-notified Hospital:

If treatment is taken in a non-notified hospital, reimbursement of actual accommodation charges will be limited to the rates of Holy Family Hospital as applicable to categories as given below:

Grade	Accommodation Type
W0-W4	Non-subsidised Bed
W5-W7	-do-
W8-W11	Semi Pvt. Room
\$1-\$4	-do-
SG	-do-
E2-E3	-do-
E4 & above	Private Room

b) For employees posted at places other than Delhi

Hospital will be notified by the concerned Region at various places viz. places where Regional HQs/Offices. TL establishment etc., are located with the approval of Executive Director based on requirements. On such notification, reimbursement of expenditure shall be regulated as under:

i) For Notified Hospital

Actual accommodation charges limited to entitlement linked to Grades of the employees in that notified on the category as at Sl. No. 2 (a) (i).

ii) For Non-notified Hospital

If treatment is taken in a non-notified hospital, reimbursement of actual accommodation charges will be limited to ceiling of any of the notified hospitals of the concerned places approved as Benchmark hospital of the area or specified percentage of rates admissible for Delhi based employees for treatment taken in non-notified hospital, whichever is lower.

iii) Where no hospitals are notified

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Reimbursement of actual accommodation charges limited to specified percentage of rates admissible to Delhi based employees in non-notified hospitals (i.e. as at SI. No. 2 (a) (ii) above), as follows:

Classification of Cities*	Percentage
'A' Class	100%
'B1' & 'B2' Class	80%
Unclassified	60%

(* Classification of cities will be the same as followed for payment of CCA.) List of classification of cities enclosed at Annexure-V)

Note:

Payment for higher type of accommodation may be made to empanel hospital for indoor treatment, when entitled accommodation is not available subject to the following

- a) Certificate of non-availability of entitled accommodation is obtained from the hospital.
- b) Certificate describing the nature of emergency is obtained from the treating Doctor/Medical superintendent.
- c) The empanel hospitals may be requested to see that entitled accommodation is available to our employee and necessary certificate regarding emergency and nonavailability may be sent along with bill as and when occasion arises.

3. MEDICAL TREATMENT CHARGES

a) For Delhi based employees

Notified Hospital

If treatment is taken in a notified hospital, reimbursement of actual treatment charges limited to the rates charged by notified hospitals for the treatment in question and will be related to the entitled accommodation charges.

Non-notified Hospital

If treatment is taken in a non-notified hospital, reimbursement of actual treatment charges limited to the entitlement of the employee in the Holy family Hospital.

- b) For employees posted at places other than Delhi
- 1) For places where hospitals are notified (as at Sl. No. 2 (b) above):
- a) If treatment is taken in a notified hospital, reimbursement of actual treatment charges limited to the rates charged by notified hospitals for the treatment in question and will be related to the entitled accommodation charges.
- b) If treatment is taken in a non-notified hospital, reimbursement of actual treatment charges limited to the entitlement of the employee in the Holy Family Hospital.
- For places where hospitals are not notified

 Reimbursement of actual treatment charges limited to specified percentage of rates
 admissible to Delhi based employees in the Holy Family Hospital; based on entitlement, as
 follows:

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Classification of Cities*	Percentage**
'A' Class	100%
'B1' & 'B2' Class	80%
Unclassified	60%

- Classification of cities will be the same as followed for payment of CCA
- ** Medical Attendance for specialists & operation charges.

Note: In case treatment is not available in Holy Family rate list, the rate list of AIIMS may be taken. If the rates are not available in AIIMS also, lowest rates of local empanel hospital may be allowed.

[Applicable in respect of Sl. No. 3(a)(ii), 3(b)(i)(b) & 3(b)(ii)].



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Annexure-V List of "A-1", "A", "B-1" and "B-2" class cities where Compensatory (city) Allowance was admissible.

Name of State/UT	Class of cities				
,	A-1	Α	B-1	B-2	
Andhra Pradesh	Hyderabad (UA)		Vijayawada (UA)	Guntur	
			Visakhapatnam(U A)	Warangal (UA)	
Assam				Guwahati (UA)	
Bihar			Patna (UA)		
Chandigarh				Chandigarh	
Chhatisgarh				Durg-Bhilai	
				Nagar (UA)	
				Raipur (UA)	
Delhi	Delhi (UA)				
Gujarat		Ahmadabad(UA)	Rajkot(UA)	Bhavnagar(UA)	
		Surat (UA)	Vadodara(UA)	Jamnagar(UA)	
Haryana		, ,	Faridabad		
Jammu &				Jammu (UA)	
Kashmir				, ,	
				Srinagar (UA)	
Jharkhand			Dhanbad (UA)	Ranchi(UA)	
			Jamshedpur(UA)		
Karnataka	Bangalore (UA)			Belgaum(UA)	
				Hubli-Dharward	
				Mangalore(UA)	
				Mysore (UA)	
Kerala			Kochi (UA)	Kozhikode (UA)	
				Thiruvananthapuram(UA)	
Madhya Pradesh			Bhopal (UA)	Gwalior (UA)	
			Indore (UA)		
			Jabalpur(UA)		
Maharashtra	Greater Mumbai (UA)	Nagpur(UA)	Nashik (UA)	Amravati	
		Pune(UA)		Aurangabad (UA)	
				Bhiwandi(UA)	
				Kolhapur(UA)	
				Solapur	
Orissa				Bhubaneshwar(UA)	
				Cuttack(UA)	
Pondicherry				Pondicherry (UA)	
Punjab			Amritsar(UA)	Jalandhar(UA)	

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Name of State/UT	Class of cities				
	A-1	A	B-1	B-2	
			Ludhiana		
Rajasthan		Jaipur		Bikaner	
				Jodhpur	
				Kota	
Tamilnadu	Chennai(U A)		Coimbatore(UA)	Salem(UA)	
			Madurai(UA)	Tiruchirappalli(UA)	
				Tiruppur(UA)	
Uttaranchal				Dehradun(UA)	
Uttar Pradesh		Kanpur(UA)	Agra(UA)	Aligarh	
		Lucknow(UA)	Allahabad(UA)	Bareilly(UA)	
			Meerut (UA)	Ghazibad	
			Varanasi (UA)	Gorakhpur	
				Moradabad	
West Bengal	Kolkota (UA)		Asansol(UA)		

- (i) OM No.2 (4)-E.II (B),/65 dated 5.11.1974 CCA at Delhi rates in Faridabad complex.
- (ii) OM No.11023/9/E.II (B)/78 dated 26.5.1979, CCA at Delhi rates in Ghazibad Municipal area.
- (iii) OM No.21011/20/89-E.II (B)/Vol-II dated 31.1.1990, CCA at Delhi rates in Noida.
- (iv) OM No.11013/1/87-E.li (B)/ dated 12.10.1987, CCA at Jallandhar rates in Jallandhar cantonment.
- (v) OM No.11023/1/86-E.II / dated 9.12.1986, CCA at Delhi rates in Gurgaon.
- (vi) OM No.2(54)-E.II (B)/73 / dated 29.8.1979, CCA at B-2 rates in Ajmer, Alwaye, Durgapur, Goa and Rourkela.