

## MEDICAL FACILITIES TO THE CENTRAL GOVERNMENT EMPLOYEES (INCLUDING CGHS)

27.1 The Central Government servants are entitled to medical facilities under the Central Services (Medical Attendance) Rules, 1944, the salient features of which are given hereunder:

27.2 These Rules are applicable to all government servants other than (i) those in Railway Service, and (ii) those of non-gazetted rank stationed in or passing through Kolkata, whose conditions of service are prescribed by rules made or deemed to have been made by the Central Government, when they are on duty, leave or foreign service in India or when under suspension. Following medical facilities are available under these rules:

*In India only -*

1. Avitaminosis and Hypovitaminosis.
2. Correction of squint (eye). Testing of eye sight for glasses of the employees once in three years.
3. Disease(s) causing general debility and secondary anaemia.
4. Treatment for immunizing and prophylactic purposes in the case of communicable diseases only.
5. Venereal diseases and Delirium Tremens.
6. Treatment of sterility and operation for sterilization.
7. Medical termination of pregnancy performed at government hospital/recognised institutions etc.
8. Confinement including at residence if attended by Child Welfare and Maternity Centres staff ; prenatal and post - natal treatment.
9. Blood and blood transfusion charges.
10. Dental treatment (only in government hospitals, private recognised hospitals) - Surgical operations needed for removal of Odontomes and impacted wisdom - tooth, Treatment of gum boils, Extraction, Scaling and gum treatment including pyorrhoea and Gingivitis, Filling of teeth , Root canal treatment etc.
11. Anti-rabic treatment.
12. Cost of Hepatitis Vaccine B & C.

Following treatment can be availed *outside India* also -

- a) Cardio vascular Surgery.
- b) Kidney and other organ Transplant.
- c) Joint replacement and surgery.

- d) Bone-marrow transplant.
- e) Certain types of medical and oncological disorder, such as Leukaemia and neoplastic conditions.
- f) Micro vascular and neuro surgery.
- g) Treatment with laser which obviates the need of open surgery.
- h) Treatment with Argon, Krypton and Yag Laser in Ophthalmic cases.
- i) Extra corporeal stone disintegration by ultrasonic shock waves.

27.3 A government servant desirous of availing medical treatment outside India may make an application in the prescribed form through his Department/Ministry to the Standing Committee established under this rule. On receipt of such application, the Standing Committee, if after due consideration it is satisfied that the patient can be treated only outside India, may issue a certificate to the concerned Department/Ministry conveying its approval of the application and the concerned Department/Ministry shall, on the strength of that certificate incur necessary expenditure in getting the government servant concerned or the member of his family treated in accordance with the procedure laid down by the Committee (Rules 8 & 11).

27.4 For getting medical treatment by the Central Government servant and his family members in India, the following Hospitals/Institutions are recognised:

1. All State Government hospitals including those maintained by Local Bodies.
2. All hospitals, primary health centres, maternity and child welfare centres and dispensaries recognised by State Governments for treatment of their employees and/or members of their families.
3. All hospitals/dispensaries attached to Public Sector Undertakings/Projects/Port Trusts.
4. Cantonment hospitals in cantonment areas where there are no government hospitals, for treatment of government servants and their family members residing in those areas and also in the adjoining areas outside cantonment limits.
5. All railway hospitals.
6. Pay Clinics in Bihar, Punjab, Haryana, Uttar Pradesh, Madhya Pradesh, Rajasthan and Chandigarh.
7. Private hospitals in particular stations notified by the Government of India from time to time (Rule 2).

- 27.5 In addition to the above, Head of Department as specified in SR 2(10) is empowered to appoint Medical Officers under the employment of the Central/State Governments and Union Territories, as also Medical Officers not in government employment i.e. Private Registered Medical Practitioners as Authorised Medical Attendants.
- 27.6 Private Medical Practitioners are appointed as AMAs where adequate number of government doctors in various systems of medicines are not available or when their services are not available within a radius of five kilometres or because of the remoteness of the area (Rule 2). The AMA so appointed, will be bound by the terms and conditions prescribed by the government from time to time under these rules. If the condition of the patient so requires, the AMA can send the patient to the nearest specialist or other medical officer or summon them to attend the patient (Rule 5).
- 27.7 The treatment at the consulting room of the AMA is limited to ten days with a maximum of four consultations and normally ten injections. The limit of four consultations within 10 days is applicable for attendance with a Specialist/other Medical Officer and will count from the date from which the Specialist/other Medical Officer is consulted. Consultation on the 10th day of treatment is permissible, if no medicine is prescribed on that consultation.
- 27.8 Cases of medical treatment requiring hospitalization are referred to government/ recognised hospital. If hospitalization is not considered necessary but treatment is expected to be prolonged, the patient should be referred to OPD of government / recognised hospital.
- 27.9 When a patient consults the same AMA in regard to the super imposition of another disease during the course of treatment of one disease, it is regarded as a fresh consultation and will be charged at full rates as prescribed by the government from time to time. To justify a fresh claim for the recurrence of the same disease for a second time, there should be a reasonable gap between the closing of the first spell and the recurrence of the second spell. A separate claim is to be preferred in respect of each spell of illness and or an entirely new disease (GID (21) in Rule 2).
- 27.10 The claim for reimbursement should be received within 3 months from the date of last treatment. However, subject to certain conditions, the Department may condone the delay. (GIDs (9) and (10) Section-1).
- 27.11 The government servant and their family members may receive treatment for all diseases for which treatment is provided under the rules in a government/recognised hospital outside the district/state but within India, provided :

- (i) Necessary and suitable facilities for treatment are not available in a government or recognised hospital at the district or state headquarters or within the district or state where one falls ill and
- (ii) The treatment outside the district/state is recommended by the Authorised Medical Attendant and countersigned by the Chief Medical Officer of the district if the treatment is undertaken outside the district or by the Chief Administrative Medical Officer of the state if it is to be undertaken outside the state. (G.I.D.(4) under Rule 6).

27.12 **Travelling Allowance for medical treatment and attendance**

The government employees and their family members are entitled to undertake journeys to take appropriate medical attendance and treatment, if it is certified by the AMA/Specialist/Medical Officer attached to the hospital to whom the patient was referred, that the journey was unavoidably necessary to obtain the treatment. The patient ( government servant or his family member ) and attendant also ( wherever recommended) will be entitled to TA plus DA for the period of journey undertaken by rail, road, sea and air. No DA will be admissible for halt. The government servant is eligible for reimbursement of the travelling expenses of the donor of a kidney to him or to a member of his family for the journeys made in connection with the transplantation.

27.13 **Central Government Health Scheme(CGHS)**

The medical facilities under the Central Government Health Scheme are available to all the employees paid from the civil estimates and their family members residing in the area covered by the scheme. An employee can opt out of the scheme and avail of the medical facilities provided by the employer of his spouse. If an employee or a member of his family covered under the Scheme falls ill at a place not covered under CGHS, the treatment shall be admissible under CS(MA) Rules<sup>1[1]</sup>.

27.14 The medical facilities to the Central Government employees and their dependent family members are provided under the Central Government Health Scheme in the following cities:

Ahmedabad	Ghaziabad	Meerut	Allahabad
Gurgaon	Mumbai	Bangalore	Guwahati
Nagpur	Bhubaneshwar	Hyderabad	Noida
Kolkata	Jaipur	Patna	Chennai
Jabalpur	Pune	Kanpur	Ranchi
Delhi/New Delhi	Faridabad	Lucknow	Thiruvananthapuram

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<sup>1[1]</sup> OM No.S.1101/6/92-CGHS Desk-CGHS(P) dated 4.8.94.

27.15 **Definition of Family:** ‘ Family’ means employee’s

- (i) Husband/Wife including more than one wife and also judicially separated wife.
- (ii) Parents and Stepmother. In the case of adoption, only the adoptive and not the real parents. If the adoptive father has more than one wife, the first wife only.

A female employee has a choice to include either her parents or her parents-in-law; option exercised can be changed only once during service.

- (iii) Children including legally adopted children, stepchildren and children taken as wards subject to the following conditions :

Son -Till he starts earning, irrespective of age limit.

Daughter -Till she starts earning or gets married, whichever is earlier, irrespective of age-limit.

Son suffering from Permanent disability of any kind (physical or mental) -No age -limit.

- (iv) Widowed daughters and dependent divorced/separated daughters.
- (v) Sisters including widowed sisters.
- (vi) Minor borthers and dependent brothers.

27.15.1 But the above persons should reside with the government servants and their income from all sources should not be more than Rs.1500/- per month<sup>2[2]</sup>.

27.16 **Contribution**

A compulsory monthly contribution is charged from all the entitled classes of government servants on the basis of rates fixed by the government from time to time. The present rates of contribution are as under:

<b>Pay</b>	<b>Rate of monthly contribution (Rs.)</b>
Up to Rs.3000/-	15/-
Rs.3001 to 6000/-	40/-
Rs.6001 to 10000/-	70/-
Rs.10001 to 15000/-	100/-
Rs.15001/- and above	150/-

27.16.1 When both husband and wife are Central Government servants covered by the scheme, the contribution will be recovered from only one of them whose pay is higher<sup>3[3]</sup>.

27.16.2 An employee transferred to another CGHS station or one who goes to serve abroad leaving his family at the old station may continue to pay the contribution and his family can avail the facilities at the old station for that duration<sup>4[4]</sup>.

27.17 **Facilities available under the Scheme**<sup>5[5]</sup>

- i) Medical attendance including consultation with the AMA at a CGHS Dispensary.
- ii) X-Ray, Laboratory and other diagnostic facilities at CGHS Laboratories or other laboratories of CGHS wing of Hospitals/Private Hospitals recognised by CGHS.
- iii) Hospital services in the CGHS wing of Hospitals/Referral/Private Hospitals recognised by the CGHS.
- iv) Nursing Home facilities for those having a basic pay above Rs. 12000/-.
- v) Special treatment for diseases like TB, Cancer, Kidney Transplant and By-pass Surgery and facilities for Dental treatment (for few diseases).
- vi) Ante natal/confinement/post natal care facilities.
- vii) Specialist consultation in selected centres/poly clinics/hospitals etc.
- viii) Intra - ocular lens implantation/treatment and cost of spectacles after cataract operation.
- ix) Post-operative treatment relating to Neurosurgery, Cardiac Diseases, Cancer, Kidney transplantation and hip/knee replacement surgery in the same institutions/hospitals where the surgery was earlier carried out with prior permission of CGHS.
- x) Medicines prescribed during OPD treatment are provided by the CGHS dispensary concerned. No reimbursement is allowed for such medicines purchased from outside.
- xi) The scale of hospital accommodation is prescribed as under:

Basic Pay	Private Hospitals recognised by CGHS	AIIMS N.Delhi	Government/Municipal hospitals
Upto Rs.7500	General Ward	General Ward	...
7500 and above	...	...	Nursing Home facilities
7501 to 10500	Semi-private Ward	General Ward	-do-

<sup>3[3]</sup>OM No.S-11011/6/98-CHS(P)dated 27.5.1998.

<sup>4[4]</sup>OM No.S-12015/1/85-CGHS(P) dated 8.7.85 and amended from time to time.

<sup>5[5]</sup>OM NO.S-11022/1/98-CGHS (P) dated 4.9.1998.

10501 to 13499	Private Ward	Private Ward	-do-
13500 and above	-do	Deluxe Ward	-do-

27.18 **Procedure for reference to Referral/Recognised Hospitals under CGHS**

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The beneficiaries will have the option to avail specialised treatment at CGHS recognised hospitals of his/her choice if the specialist of the CGHS dispensary or government hospital recommends the patient for such specialised treatment.

27.18.1 After the specialist advises a procedure in writing, the permission letter for taking such treatment in a CGHS recognised private/referral hospital of the choice of the employee in the same city, would be given by the parent department/office<sup>6[6]</sup>.

27.18.2 In case the beneficiary, inspite of the facility being available in the city still chooses to get treatment in another city, permission of the CGHS authorities of the city would have to be obtained. In such cases, no TA/DA will be paid by the government<sup>7[7]</sup>.

27.18.3 The government servant is allowed to take treatment from referral/recognised hospitals under CGHS in emergency. However, the term 'emergency' will be decided by the Additional Director, CGHS concerned whether the case is/was of real 'Emergency' before reimbursement is made by the parent department on the basis of rates fixed by the CGHS from time to time.

27.18.4 Ex post facto permission for treatment in government referral hospitals like PGI Chandigarh etc. can be given by the parent department<sup>8[8]</sup>.

27.19 **Medical Advance -**

The medical advance to the serving government servant for self treatment or treatment of the dependents on receipt of estimate from the treating doctor of a government/recognised hospital is available subject to the following conditions:

- i) Rs.10,000/- or the amount recommended by the doctor, whichever is less for indoor treatment in hospital and for OPD treatment in case of TB/Cancer.

<sup>6[6]</sup>OM No.S-11011/6/96-CGHS(P) dated 11.6.1997

<sup>7[7]</sup>OM No.S-11011/6/96-CGHS(P) dated 11.7.97

<sup>8[8]</sup>OM No.S-12020/4/97-CGHS(P) dated 4.7.1999

- ii) In case of major illness like by-pass surgery, kidney transplant etc., the advance may be limited to 90% of the package deal wherever it exists or the amount demanded by the hospital concerned<sup>9[9]</sup>.
- iii) The advance is paid directly to the hospital concerned on receipt of an estimate.
- iv) For settlement of advance, the employee concerned may be required to submit the adjustment bills within a period of one month from the date of his discharge from the hospital. In case the entire advance has not been utilised for the treatment of the patient, the head of office concerned will correspond with the hospital for refund of the unutilised balance of medical advance<sup>10[10]</sup>.

## 27.20 **Settlement of Claim -**

The government servant is required to prefer claim/bill within 3 months, from the date of discharge from the hospital. If the claim gets time barred, relaxation of delay is allowed by the department depending on the circumstances of delay.

27.20.1 The claim should have the following documents completed:

- a) Claim Form Med. '97' and Essentiality Certificate 'A' for Outdoor treatment and 'B' for Indoor treatment.
- b) All original bills verified by the treating doctor with his stamp.
- c) Photocopy of CGHS Token Card.
- d) Discharge Slip of the Hospital in case of Indoor Treatment.
- e) A detailed list of all medicines, laboratory tests, investigations, number of doctors visits etc.
- f) Self explanatory letter from the beneficiary explaining the emergency circumstances in case of emergency.
- g) Legal heir certificate in case of death of the card holder.

27.20.2 Based on the rates fixed by the CGHS, the admissible amount is worked out by the department. If the rates claimed by the concerned are less than the rates fixed by the government, the actual amount is reimbursed. In case CGHS rates are not available for a particular item, the reimbursement is allowed on the basis of rate list of AIIMS. Incidentally, where AIIMS rates are also not available, the actual amount paid by the patient is reimbursed. Items mentioned in the list of inadmissible items under CS(MA) Rules are not reimbursable. Special Nursing Charges are to be reimbursed as fixed by the Ministry of Health from time to time<sup>11[11]</sup>.

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<sup>9[9]</sup> OM No.S.12025/1/96-CGS(P) dated.13.5.1997

<sup>10[10]</sup>OM No.S.12015/3/93-CGHS(P) dated 30.12.1993

<sup>11[11]</sup>OM NO. S-11012/1/91-CGHS(P) (Vol.I) dated 18.3.1992

27.20.3 In normal cases, AO(A)/AO(E)/SsP upto the amount of Rs. 1000/-, DIsG upto the amount of Rs. 5000/- and JDs upto the amount of Rs. 10000/- are empowered to accord sanction for reimbursement. In other cases claims are submitted to DCBI through JDs concerned for consideration.

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