



केंद्रीय विद्यालय संगठन Kendriya Vidyalaya Sangathan
18, संस्थानिक क्षेत्र/ 18, Institutional Area
शहीद जीत सिंह मार्ग/ Shaheed Jeet Singh Marg
नई दिल्ली-16/ New Delhi - 16

F.No.110239/51/Cir./2015/KVS (Budget)/1111 - 1118 Dated: 26.08.2015

The following orders issued by Government of India are uploaded on the KVS Website for information and necessary action.

1. G.I., Dept. of Per. & Trg., O.M.No.F.No.1-11020/1/2014-Estt. (AL), dated 28-4-2015, clarification regarding Children Education Allowance/OTA/Honorarium/Leave.
2. G.I. M.H., O.M.No.S.14025/10/2002/MS, dated 26-05-2015 regarding revision of rate and guideline for reimbursement of expenses on purchase of Hearing AIDS under CS (MA) Rules, 1944 and CGHS.
3. G.I.M.H., O.M.No.S.14025/19/2015-MS, dated 27-5-2015 regarding revision of time-limit for submission of final claims for reimbursement of medical expenses under CS (MA) Rules, 1944.
4. G.I.M.H., O.M.No.2-2/2014-CGHS (HQ)/PPTY/CGHS (P), dated 2-6-2015 regarding issue of medicines under CGHS - clarification thereof.
5. G.I.M.H., O.M.No.S.14025/09/2013-MS, dated 3-6-2015 regarding stoppage of Fixed Medical Allowance (FMA) being paid to the Central Government employees working in the interior/remote areas and their governance under CS(MA) Rules, 1944.
6. G.I.M.H., O.M.No.S.14021/16/2014-MS, dated 9-6-2015 regarding recognition of Pawana Hospital, Somatane Phata, Tal-Maval, Distt.Pune(Maharashtra), for treatment of Central Government employees under CS(MA) Rules, 1944.
7. G.I., M.H., O.M.No.S.14021/08/2014-MS, dated 11-6-2015 regarding recognition of Lakshmi Hospital, Diwan's Road, Ernakulam, Kerala, for treatment of Central Government employees under CS(MA) Rules, 1944.
8. G.I., Dept. of Per. & Trg., O.M.No.F.No.25012/1/2015-Estt.(A-IV), dated 19-5-2015 regarding request for Voluntary Retirement from persons suffering from disability - Supreme Court Order in Bhagwan Dass and another v. Punjab State Electricity Board.
9. G.I., Dept. of Pen. & P.W., O.M.No.F.No.42/10/2014-P&PW (G), dated 26-5-2015 regarding grant of Dearness Relief to CPF beneficiaries in receipt of ex-gratia payment with effect from 1-1-2015.
10. G.I.M.F., O.M.No.CPAO/Tech./Amdt.-Sch.Book/2015-16/308, dated 4-6-2015 regarding self-certification by the Family Pensioner.

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11.G.I., Dept. of Per. & Trg., O.M.No.Z-20025/9/2014-Estt. (AL),
dated 20-5-2015 regarding inclusion of Aadhaar (Unique
Identification) number in Service Book of Government servants.

Copies of the aforesaid orders may now be got downloaded from
the KVS Website for office record.


(S.Muthusivam)
Asstt. Commissioner (Fin.)
Tel. 011-26523070

Distribution:

1. The Deputy.Commissioner, KVS, All ROs.
2. The Finance Officer, KVS, All ROs.
3. All Officers/Section at KVS (HQ.).
4. Principal, KV, Kathmandu, Moscow/Tehran.
5. The General.Secretary, All Recognized Associations.
- 6.The Director, ZIET Gwalior, Mumbai, Mysore, Chandigarh &
Bhubaneswar.
- ✓7.The Deputy Commissioner, (EDP), KVS (HQ.) with the request to
upload the above circulars on the KVS Web site.
8. RTI Cell KVS (HQ.)
9. Guard file.

Clarification regarding CEA / OTA / Honorarium / Leave

Sl. No.	Question	Answer
Children Education Allowance		
1.	Whether reimbursement of Children Education Allowance is admissible for the:	
(a)	Nursery / LKG / UKG as there is no provision of recognition of these classes in most of the States / UTs;	Reimbursement is permissible only if the child is studying in a recognized educational institution.
(b)	Third child, if either of the first two children is disabled to the extent that he/she cannot go to school;	Reimbursement is allowed to only the two eldest surviving children of the Government servant except when the 2nd child birth results in multiple births or the 3rd child is born due to failure of sterilization operation.
(c)	The children borne out of second marriage or the children of second wife / husband in addition to children from first marriage;	Reimbursement is allowed to only the two eldest surviving children of the Government servant.
(d)	Entitlement of number of Note Books.	Reimbursement is permissible for any number of note books as may be prescribed by the recognized educational institution.

OTA / NDA

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| 2. The reasons for not enhancing rates of OTA / NDA. | The Fifth and the Sixth Central Pay Commission did not recommend enhancement of rates of OTA / NDA. |
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Honorarium / Fee

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| 3. Whether honorarium is payable to the Chairperson / Members of the DPC and also such other Departmental Committees, viz., Committee on Sexual Harassments at work place, etc.? | In terms of the provisions of FR 46 (b), the Central Government may grant or permit a Government servant to receive an honorarium as remuneration for work performed which is occasional or intermittent in character and either so laborious or of such special merit as to justify a special reward. Except when special reasons, which should be recorded in writing, exist for a departure from this provision, sanction to the grant or acceptance of an honorarium should not be given unless the work has been undertaken with the prior consent of the Central Government and its account has been settled in advance.

Guidelines for payment of Honorarium under FR 46 (b) have already been laid down <i>inter alia</i> vide this Department's OM No. 17011/9/85-Estt. (AL), dated 23-12-1985 and |
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Sl. No.	Question	Answer
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O.M. No. 17020/1/91- Estt. (AL), dated 18-11-1991 (~~Sl. No. 139 of Swamy's Annual, 1991~~). It has also been clarified that no honorarium should be granted for temporary increases in work.

4. Whether retention of "Fee" for delivering lectures in Government / private bodies is permissible?

As per Para. 6 of DoP&T's O.M. No. 16013/1/79-Estt.(AL), dated the 11th February, 1980, payments received by Government servants as income from books, articles, papers and lectures on literary, cultural, artistic, technological and scientific subjects including management sciences; will not be subject to crediting one-third of the amount to the general revenues.

Establishment (Leave) Section

5. Whether male Government servant, who is single parent, can be allowed Child Care Leave?

No. CCL can be granted to female employees only.

6. Whether Bond on Study Leave can be transferred from Central Government to State Government?

No. Bond executed by the Government servant while proceeding on study leave cannot be transferred on his/her appointment in State Government / PSU / Autonomous bodies.

7. What is the limit of leave encashment while availing LTC by dependants or spouse within the same block year?

The Government servants governed by the CCS (Leave) Rules, 1972 and entitled to avail LTC may encash earned leave up to 10 days at the time of availing both types of LTCs., i.e., 'Hometown' and 'Anywhere in India'. However, when the one and the same LTC is being availed of by the Government servant and his family members separately in a block year, encashment of leave would be restricted to one occasion only.

G.I., M.H., O.M.No.S.14025/10/2002/MS, dated 26-5-2015

Revision of rate and guideline for reimbursement of expenses on purchase of Hearing AIDS under CS (MA) Rules, 1944 and CGHS

With reference to the above-mentioned subject, the undersigned is directed to refer to the Office Memorandum of even number, dated 21-3-2012, 17-11-2006 and 28-10-2002 and O.M.No.S.14025/36/93/MS, dated 26-3-1994 and 17-8-1999 and to state that on the basis of recommendation of an Expert Committee, it has been decided to revise the rates and guidelines for hearing aids to be reimbursed under CS (MA) Rules, 1944 and CGHS.

2. The revised ceiling rates fixed for various types of hearing-aids (for one ear) are as under :—

Body worn / Pocket type	₹	3,000
Analogue BTE	₹	7,000
Digital BTE	₹	15,000
Digital ITC / CIC	₹	20,000

The cost of hearing aids shall include all taxes including VAT and shall carry 3 year warranty. The cost of Analogue BTE / Digital BTE / ITC / CIC type hearing aid shall also include the cost of hearing mould.

3. Beneficiaries covered under CS (MA) Rules / CGHS shall be eligible to obtain hearing aid as per the following guidelines:—

- (i) Patients / Beneficiaries should be properly referred to CGHS / Government hospital ENT specialist from the parent CGHS wellness centre (A computerized referral printout should be made, wherever computerization has been done).
- (ii) It would be mandatory to carry CGHS Beneficiary's ID card (in original) whenever the CGHS beneficiaries visit the CGHS / Government ENT specialist for consultation and Audiometric test.
- (iii) The ENT specialist of CGHS / Government hospital shall then recommend a hearing aid on basis of Audiometric and Audiological assessment, specifying the type of hearing aid most suited for the Beneficiary. The 'Audiogram report' shall be authenticated by the ENT Specialist / Consultant of the CGHS / Government hospital.

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4. The permission to procure hearing aid shall be granted by the **ADDITIONAL DIRECTOR (Zonal) of CGHS-ZONAL OFFICE** in case of CGHS pensioner beneficiaries, and by the **HEAD OF DEPARTMENT / OFFICE** in case of serving employees and CGHS beneficiaries of Autonomous bodies on the basis of Recommendation of a CGHS / Government ENT specialist, and an 'undertaking' that the beneficiary has not been reimbursed the cost of hearing-aid in the preceding five years.

5. Reimbursement claim shall be submitted to **CGHS ZONAL OFFICE** through the **CMO-Incharge** of the concerned dispensary by CGHS Pensioner beneficiaries in the prescribed medical reimbursement claim or along with the following documents :—

- (a) Referral letter from parent CGHS Wellness Centre (computerized slip where computerization is done already).
- (b) Copy of 'prescription' of ENT Consultant (CGHS / Government Hospital) with the 'Audiogram' report duly authenticated by the treating ENT Consultant (CGHS / Government).
- (c) Copy of CGHS Card.
- (d) Bill / Receipt (in original) carrying details of the hearing - aid seller i.e. **NAME, QUALIFICATION, AND RCI/MCI REGISTRATION NUMBER** of the hearing-aid seller.
- (e) The 'permission letter' to purchase hearing-aid (in original).
- (f) Empty Box / boxes or the Carton(s) with the label showing details of the hearing-aid supplied.

In case of the other beneficiaries, the medical claim shall be submitted to the concerned **Ministry / Department / Office**. Reimbursement shall be limited to the ceiling rate or actual cost of the hearing-aid, whichever is less.

6. Records of permissions granted for procurement of hearing-aids shall be maintained by CGHS in respect of pensioner CGHS beneficiaries and by the concerned **Ministry / Department / Office** in respect of other beneficiaries.

7. Replacement of hearing-aid may be permitted after 5 years on the basis of condemnation certificate issued by a technical expert and on approval of CGHS / Government ENT Surgeon. Maintenance and repair will be the responsibility of the beneficiary.

8. These orders shall supersede all the earlier orders issued on the subject:

9. The revised rates and guidelines shall come into force from the date of issue and shall be valid for a period of two years or till further revision, whichever is earlier.

10. This issues with the approval of **Integrated Finance Division** of **Ministry of Health and Family Welfare**.

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G.I., M.H., O.M.No.S.14025/19/2015-MS, dated 27-5-2015

Revision of time-limit for submission of final claims for reimbursement of medical expenses under CS (MA)Rules, 1944

The undersigned is directed to refer to O.M.No.F.29-40/68-MA; dated 15-10-1968 in which it was laid down that submission of final claims for reimbursement of medical expenses of Central Government servants in respect of a particular spell of illness should ordinarily be preferred within 3 months from the date of completion of treatment.

2. A representation was received from National Council (Staff Side) to extend the time-limit for submission of such medical bills from 3 months to 6 months. The matter was examined in the Ministry and it has been decided that the period of 3 months for submission of medical claims be revised to 6 months. Henceforth, only the cases in which the bills are submitted after 6 months from the date of completion of medical treatment/discharge of the patient from the hospital are required to be taken up for condonation. The power of condonation of such delays and other terms and conditions would be same as enumerated in the O.M.No.S.14025/8/99-MS, dated 25-5-1999.

This issue with the approval of the Competent Authority.

G.I., M.H., O.M.No.2-2/2014-CGHS
(HQ)/PPTY/CGHS (P),
dated 2-6-2015

Issue of medicines under CGHS – Clarification thereof

With reference to the above-mentioned subject, the undersigned is directed to draw attention to O.M.No.2-2/2014/CGHS (HQ)/PPTY/CGHS (P), dated the 13th March, 2015 and to state that, in response to representations received from different stake-holders of CGHS, it is clarified that the cases, which were processed and decided earlier on the basis of OM, dated 1-10-2014 should not be reopened.

2. The Office Memorandum of even number, dated 13-3-2015 will be effective prospectively, i.e. from the date of issue.

3. This issues with the approval of the Competent Authority.

G.I., M.H., O.M.No.S.14025/09/2013-MS,
dated 03-6-2015

Stoppage of Fixed Medical Allowance(FMA) being paid to the
Central Government employees working in the interior/remote areas
and their governance under CS(MA)Rules, 1944

Reference is invited to O.M.No.S.14020/1/88-MS,dated 17-7-1990 in which Fixed Medical Allowance to the tune of Rs.25 per month was granted to employee working in the interior/remote areas where no Authorized Medical Attendant was available within a radius of 5 kms, which was subsequently revised to the tune of Rs.100 per month vide O.M.F.No.14025/33/98-MS, dated 18-1-1999.

2. On receiving a proposal from Ministry of Defence on the issue of medical reimbursement to employees who are in receipt of Fixed Medical Allowance, the matter was examined in the Ministry in consultation with Department of Expenditure and Department of Personnel and Training.

3. It has now been decided to stop the above-mentioned Fixed Medical Allowance. Henceforth, the Central Government employees residing in interior / remote areas will be governed by the extant rules as laid down under CS (MA) Rules, 1944.

4. This O.M. will be effective from the date of issue. After issuance of this OM, the above-mentioned O.Ms i.e. O.M. No. S. 14020/1/88-MS, dated 17-7-1990 and O.M. F. No. 14025/33/98-MS, dated 18-1-1999, stand withdrawn.

5. This issues with the concurrence of the Department of Personnel and Training and Department of Expenditure.

GI., M.H., O.M. No. S. 14021/16/2014-MS, dated 9-6-2015

Recognition of Pawana Hospital, Somatane Phata, Tal-Maval, Distt. Pune (Maharashtra), for treatment of Central Government employees under CS (MA) Rules, 1944

The undersigned is directed to say that the proposal received for recognition of Pawana Hospital, Somatane Phata, Tal-Maval, Distt-Pune (Maharashtra), for treatment of Central Government employees and their family members under CS (MA) Rules, 1944 has been examined in this Ministry and found to be in order. It has been decided to recognize Pawana Hospital, Somatane Phata, Tal-Maval, Distt-Pune (Maharashtra), under Central Services (Medical Attendance) Rules, 1944.

2. The Schedule of charges for the treatment of Central Government employees and the members of their family under the CS (MA) Rules, 1944, will be the rates fixed for CGHS, Pune. The approved rates are available on the website of CGHS (<http://msotransparent.nic.in/cghsnew/index.asp>) and may be downloaded / printed.

3. The undersigned is further directed to clarify as under:—

(a) "Package Rate" shall mean and include lump sum cost of in-patient treatment / day care / diagnostic procedure for which a CS (MA) beneficiary has been permitted by the Competent Authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to)— (i) Registration charges, (ii) Admission charges, (iii) Accommodation charges including patient's diet, (iv) Operation charges, (v) Injection charges, (vi) Dressing charges, (vii) Doctor / consultant visit charges, (viii) ICU / ICCU charges, (ix) Monitoring charges, (x) Transfusion charges, (xi) Anaesthesia charges, (xii) Operation theatre charges, (xiii) Procedural charges / Surgeon's fee, (xiv) Cost of surgical disposables and all sundries used during hospitalization, (xv) Cost of medicines, (xvi) Related routine and essential investigations, (xvii) Physiotherapy charges, etc. (xviii) Nursing care and charges for its services.

(b) Cost of Implants is reimbursable in addition to package rates as per CGHS ceiling rates for implants.

(c) Treatment charges for new born baby are separately reimbursable in addition to delivery charges for mother.

(d) Pawana Hospital, Somatane Phata, Tal-Maval, Distt-Pune (Maharashtra) shall not charge more than the package rates fixed for CGHS, Pune.

(e) Expenses on toiletries, cosmetics, telephone bills, etc., are not reimbursable and are not included in package rates.

4. Package rates envisage duration of indoor treatment as follows:—

- Up to 12 days : for Specialized (Super Specialities) treatment
- Up to 7 days : for other Major Surgeries
- Up to 3 days : for Laparoscopic surgeries / normal Deliveries
- 1 day : for day care / Minor (OPD) surgeries.

No additional charge on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure or due to any improper procedure and is not justified.

In case, there are no CGHS prescribed rates for any test / procedure, then AIIMS rates are applicable. If there are no AIIMS rates, then reimbursement is to be arrived at by calculating admissible amount item-wise (e.g. room rent, investigations, cost of medicines, procedure charges, etc.) as per approved rates / actually, in case of investigations.

5. (a) CS (MA) beneficiaries are entitled to facilities of private, semi-private or general ward depending on their basic pay. The entitlement is as follows:—

Sl. No.	Pay drawn in pay band	Ward Entitlement
1.	Up to ₹ 13,950	General Ward
2.	₹ 13,960 to 19,530	Semi-Private Ward
3.	₹ 19,540 and above	Private Ward

(b) The package rates given in rate list of CGHS are for semi-private ward.

(c) The package rates prescribed are for semi-private ward. If the beneficiary is entitled for general ward, there will be a decrease of 10% in the rates; for private ward entitlement there will be an increase of 15%. However, the rates shall be same for investigation irrespective of entitlement, whether the patient is admitted or not and the test, *per se*, does not require admission.

6. The hospital shall charge from the beneficiary as per the CGHS prescribed rates or its own rate list, whichever is lower. The hospital shall charge CGHS Non-NABH Pune rates.

7. (a) The maximum room rent admissible for different categories would be:

General ward	₹ 1,000 per day
Semi-private ward	₹ 2,000 per day
Private ward	₹ 3,000 per day
Day care (6 to 8 Hrs.)	₹ 500 (same for all categories)

(b) Room rent mentioned above at (a) above is applicable only for treatment procedures for which there is no CGHS prescribed package rate.

Room rent will include charges for occupation of bed, diet for the patient, charges for water and electricity supply, linen charges, nursing charges and routine upkeeping.

(c) During the treatment in ICCU / ICU, no separate room rent will be admissible.

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(d) Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishings like wardrobe, dressing table, bed-side table, sofa set, etc. as well as a bed for attendant. The room has to be air-conditioned.

(e) Semi Private ward is defined as a hospital room where two to three patients are accommodated and which has attached toilet facilities and necessary furnishings.

(f) General ward is defined as hall that accommodates four to ten patients.

(g) Normally the treatment in higher category of accommodation than the entitled category is not permissible. However, in case of an emergency when the entitled category accommodation is not available, admission in the immediate higher category may be allowed till the entitled category accommodation becomes available. However, if a particular hospital does not have the ward as per entitlement of beneficiary, then the hospital can only bill as per entitlement of the beneficiary even though the treatment was given in higher type of ward.

If, on the request of the beneficiary, treatment is provided in a higher category of ward, then the expenditure over and above entitlement will have to be borne by the beneficiary.

8. In case of non-emergencies, the beneficiary shall have the option of availing specific treatment / investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure / test), after the specific treatment / investigation has been advised by Authorized Medical Attendant and on production of valid ID card and permission letter from his/her concerned Ministry / Department.

9. The hospital shall honour permission letter issued by Competent Authority and provide treatment / investigation facilities as specified in the permission letter.

10. The hospital shall also provide treatment / investigation facilities to the CGHS beneficiaries and their eligible dependent family members at its own rates or rates approved under CS (MA) Rules, whichever is lower. The hospital shall provide treatment to pensioner CGHS beneficiaries after authentication through verification of valid CGHS Cards.

11. However, pensioner CGHS beneficiaries would make payment for the medical treatment at approved rates as mentioned above and submit the medical reimbursement claim to the Additional Director, CGHS through the CMO in charge of the CGHS Wellness Centre, where the CGHS Card of the beneficiary is registered.

12. In case of emergencies, the beneficiary shall have the option of availing specific treatment / investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that

treatment procedure / test), on production of valid ID card, issued by Competent Authority.

13. During the in-patient treatment of the CS (MA) beneficiary, the hospital will not ask the beneficiary or his attendant to purchase separately the medicines / sundries / equipment or accessories from outside and will provide the treatment within the package rate, fixed by the CGHS which includes the cost of all the items.

14. In case of treatment taken in emergency in any non-recognized private hospitals, reimbursement shall be considered by Competent Authority at CGHS prescribed package / rates only.

15. If one or more minor procedures form part of a major treatment procedure, then package charges would be permissible for major procedure and only 50% of charges for minor procedure.

16. Further, the Pawana Hospital, Somatane Phata, Tal-Maval, Distt-Pune (Maharashtra) shall undertake the pre-investigations / diagnostic tests / consultations / examinations as a service provider for conducting the Annual Medical Examination of the Civil Services, Group 'A' Officers of above 40 years of age as per the prescribed protocol for Annual Medical Examination, as per Annexure (*not printed*).

17. The hospital will not charge the Central Government employees who come for Annual Medical Examination more than ₹ 2,000 for conducting the prescribed medical examinations of the male officers and ₹ 2,200 for female officers, who come to the hospital with the requisite permission letter from their Department / Ministry concerned. The above rates for Annual Medical Examination are valid until such time when the above rates are revised by the Central by the Government.

18. Any legal liability arising out of such services shall be the sole responsibility and shall be dealt with by the concerned empanelled hospital. Services will be provided by the Hospital as per the terms given above.

19. Ministry of Health and Family Welfare reserves the right to withdraw / cancel the above recognition without assigning any reason.

20. The order takes effect from the date of issue of the O.M.

21. The authorities of Pawana Hospital, Somatane Phata, Tal-Maval, Distt-Pune (Maharashtra) will have to enter into an agreement with the Government of India to the effect that the hospital will charge from the Central Government employees at the rates fixed by the Government and they will have to sign a Memorandum of Understanding (MoU) within a period of 3 months from the date of issue of the above-mentioned OM failing which the hospital will be derecognized (Two original copies of MoU duly signed by the hospital to be sent for acceptance). Subject to above, the hospital can start treating Central Government employees covered under CS (MA) Rules, 1944.

22. A communication in acceptance of the Para. 21 above may be sent to the undersigned in a week from the receipt of this Office Memorandum.

**Recognition of Lakshmi Hospital, Diwan's Road, Ernakulam, Kerala,
for treatment of Central Government employees under
CS (MA) Rules, 1944**

The undersigned is directed to say that the proposal received for recognition of Lakshmi Hospital, Diwan's Road, Ernakulam, Kerala, for treatment of Central Government Employees and their family members under CS (MA) Rules, 1944 has been examined in this Ministry and found to be in order. It has been decided to recognize Lakshmi Hospital, Diwan's Road, Ernakulam, Kerala, under Central Services (Medical Attendance) Rules, 1944.

2. The Schedule of charges for the treatment of Central Government employees and the members of their family under the CS (MA) Rules, 1944, will be the rates fixed for CGHS non-NABH Thiruvananthapuram rates. The approved rates are available on the website of CGHS (<http://msotransparent.nic.in/cghsnew/index.asp>) and may be downloaded / printed.

3. The undersigned is further directed to clarify as under:—

(a) "Package Rate" shall mean and include lumpsum cost of in-patient treatment / day care / diagnostic procedure for which a CS (MA) beneficiary has been permitted by the Competent Authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to)— (i) Registration charges, (ii) Admission charges, (iii) Accommodation charges including patient's diet, (iv) Operation charges, (v) Injection charges, (vi) Dressing charges, (vii) Doctor / consultant visit charges, (viii) ICU / ICCU charges, (ix) Monitoring charges, (x) Transfusion charges, (xi) Anaesthesia charges, (xii) Operation theatre charges, (xiii) Procedural charges / Surgeon's fee, (xiv) Cost of surgical disposables and all sundries used during hospitalization, (xv) Cost of medicines, (xvi) Related routine and essential investigations, (xvii) Physiotherapy charges, etc. (xviii) Nursing care and charges for its services.

(b) Cost of Implants is reimbursable in addition to package rates as per CGHS ceiling rates for implants.

(c) Treatment charges for new born baby are separately reimbursable in addition to delivery charges for mother.

(d) Lakshmi Hospital, Diwan's Road, Ernakulam, Kerala shall not charge more than the package rates fixed for CGHS non-NABH Thiruvananthapuram rates.

(e) Expenses on toiletries, cosmetics, telephone bills etc., are not reimbursable and are not included in package rates.

4. Package rates envisage duration of indoor treatment as follows:—

- Up to 12 days : for Specialized (Super Specialities) treatment
- Up to 7 days : for other Major Surgeries
- Up to 3 days : for Laparoscopic surgeries / normal Deliveries
- 1 day : for day care / Minor (OPD) surgeries.

No additional charge on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure or due to any improper procedure and is not justified.

In case, there are no CGHS prescribed rates for any test / procedure, then AIIMS rates are applicable. If there are no AIIMS rates, then reimbursement is to be arrived at by calculating admissible amount item-wise (e.g. room rent, investigations, cost of medicines, procedure charges, etc.) as per approved rates / actually, in case of investigations.

5. (a) CS (MA) beneficiaries are entitled to facilities of private, semi-private or general ward depending on their basic pay. The entitlement is as follows:—

Sl. No.	Pay drawn in pay band	Ward Entitlement
1.	Up to ₹ 13,950	General Ward
2.	₹ 13,960 to 19,530	Semi-Private Ward
3.	₹ 19,540 and above	Private Ward

(b) The package rates given in rate list of CGHS are for semi-private ward.

(c) The package rates prescribed are for semi-private ward. If the beneficiary is entitled for general ward there will be a decrease of 10% in the rates; for private ward entitlement there will be an increase of 15%. However, the rates shall be same for investigation irrespective of entitlement, whether the patient is admitted or not and the test, *per se*, does not require admission.

6. The hospital shall charge from the beneficiary as per the CGHS prescribed rates or its own rate list, whichever is lower. The hospital shall charge CGHS Non-NABH, Thiruvananthapuram rates.

7. (a) The maximum room rent admissible for different categories would be:—

General ward	₹ 1,000 per day
Semi-private ward	₹ 2,000 per day
Private ward	₹ 3,000 per day
Day care (6 to 8 Hrs.)	₹ 500 (same for all categories)

(b) Room rent mentioned above at (a) above is applicable only for treatment procedures for which there is no CGHS prescribed package rate.

Room rent will include charges for occupation of bed, diet for the patient, charges for water and electricity supply, linen charges, nursing charges and routine upkeeping.

(c) During the treatment in ICCU / ICU, no separate room rent will be admissible.

(d) Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishings like wardrobe, dressing table, bed-side table, sofa set, etc., as well as a bed for attendant. The room has to be air-conditioned.

(e) Semi Private ward is defined as a hospital room where two to three patients are accommodated and which has attached toilet facilities and necessary furnishings.

(f) General ward is defined as hall that accommodates four to ten patients.

(g) Normally the treatment in higher category of accommodation than the entitled category is not permissible. However, in case of an emergency when the entitled category accommodation is not available, admission in the immediate higher category may be allowed till the entitled category accommodation becomes available. However, if a particular hospital does not have the ward as per entitlement of beneficiary, then the hospital can only bill as per entitlement of the beneficiary even though the treatment was given in higher type of ward.

If, on the request of the beneficiary, treatment is provided in a higher category of ward, then the expenditure over and above entitlement will have to be borne by the beneficiary.

...specific treatment / investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure / test), after the specific treatment / investigation has been advised by Authorized Medical Attendant and on production of valid ID card and permission letter from his/her concerned Ministry / Department.

9. The hospital shall honour permission letter issued by Competent Authority and provide treatment / investigation facilities as specified in the permission letter.

10. The hospital shall also provide treatment / investigation facilities to the CGHS beneficiaries and their eligible dependent family members at its own rates or rates approved under CS (MA) Rules, whichever is lower. The hospital shall provide treatment to pensioner CGHS beneficiaries after authentication through verification of valid CGHS Cards.

11. However, pensioner CGHS beneficiaries would make payment for the medical treatment at approved rates as mentioned above and submit the medical reimbursement claim to the Additional Director, CGHS through the CMO in charge of the CGHS Wellness Centre, where the CGHS Card of the beneficiary is registered.

12. In case of emergencies, the beneficiary shall have the option of availing specific treatment / investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure / test), on production of valid ID card, issued by Competent Authority.

13. During the in-patient treatment of the CS (MA) beneficiary, the hospital will not ask the beneficiary or his attendant to purchase separately the medicines / sundries / equipment or accessories from outside and will provide the treatment within the package rate, fixed by the CGHS which includes the cost of all the items.

14. In case of treatment taken in emergency in any non-recognized private hospitals, reimbursement shall be considered by Competent Authority at CGHS prescribed package / rates only.

15. If one or more minor procedures form part of a major treatment procedure, then package charges would be permissible for major procedure and only 50% of charges for minor procedure.

16. Further, Lakshmi Hospital, Diwan's Road, Ernakulam, Kerala, shall undertake the pre-investigations / diagnostic tests / consultations / examinations as a service provider for conducting the Annual Medical Examination of the Civil Services Group 'A' Officers of above 40 years of age as per the prescribed protocol for Annual Medical Examination, as per Annexure (not received — not printed).

17. The hospital will not charge the Central Government employees for Annual Medical Examination more than ₹ 2,000 for conducting the prescribed medical examinations of the male officers and ₹ 2,200 for female officers, who come to the hospital with the requisite permission letter from their Department / Ministry concerned. The above rates for Annual Medical Examination are valid until such time when the above rates are revised by the Central by the Government.

18. Any legal liability arising out of such services shall be the sole responsibility and shall be dealt with by the concerned empanelled hospital. Services will be provided by the Hospital as per the terms given above.

19. Ministry of Health and Family Welfare reserves the right to withdraw / cancel the above recognition without assigning any reason.

20. The order takes effect from the date of issue of the O.M.

21. The authorities of Lakshmi Hospital, Diwan's Road, Ernakulam, Kerala, will have to enter into an agreement with the Government of India to the effect that the Hospital will charge from the Central Government employees at the rates fixed by the Government and they will have to sign a Memorandum of Understanding (MoU) within a period of 3 months from the date of issue of the above-mentioned OM failing which the hospital will be derecognized (Two original copies of MoU duly signed by the hospital to be sent for acceptance). Subject to above, the hospital can start treating Central Government employees covered under CS (MA) Rules, 1944.

22. A communication in acceptance of the Para. 21 above may be sent to the undersigned in a week from the receipt of this Office Memorandum.

**Request for Voluntary Retirement from persons suffering
from disability – Supreme Court Order in Bhagwan Dass
and another v. Punjab State Electricity Board**

The undersigned is directed say that vide Department of Personnel and Training's O.M.No.18017/1/2014-Estt.(L), dated the 25th February, 2015, certain clarifications regarding treatment of leave and absence of disabled Government servants have been issued.

2. Instances have come to notice where Government servants apply for voluntary retirement under various provisions like Rules 38, Rule 48 and 48-A of CCS (Pension) Rules, 1972 or Rule 56 of the Fundamental Rule on account of hardships faced by them due to a disability, as they are unaware of the protection provided by the Section 47 of the *Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 (PwD Act)*. Section 47 of the PwD Act, 1995 is reproduced below for reference:—

“Non-discrimination in Government Employment—(1) No establishment shall dispense with, or reduce in rank, an employee who acquires a disability during his service.

Provided that, if an employee, after acquiring disability is not suitable for the post he was holding, could be shifted to some other post with the same pay scale and service benefits;

Provided further that if it is not possible to adjust the employee against any post, he may be kept on a supernumerary post or a suitable post is available or he attains the age of superannuation, whichever is earlier.

No promotion shall be denied to a person merely on the ground of his disability;

Provided that the appropriate Government may, having regard to the type of work carried on in any establishment, by notification and subject to such conditions, if any, as may be specified in such notification, exempt any establishment from the provisions of this section”.

3. The issue had come up in *Bhagwan Dass and another v. Punjab State Electricity Board* [(2008) 1 SCC 579]; decided by the Hon'ble Supreme Court where the employee who had during his service suffered from blindness, had applied for voluntary retirement. The Hon'ble

Supreme Court has observed that the Petitioner was not aware of any protection that the law afforded him and apparently believed that the blindness would cause him to lose his job, which was the source of livelihood of his family. In those circumstances, it was the duty of the superior officers to explain to him the correct legal position and to tell him about his legal rights.

4. Keeping in view the provisions of the Section 47 of the PwD Act, 1995 and the above-mentioned judgment, it has been decided that whenever a Government servant seeks voluntary retirement citing medical grounds, when the said notice has been submitted due to a disability, the administrative authorities shall examine as to whether the case is covered under Section 47 of PwD Act, 1995. In case the provisions are applicable, the Government servant shall be advised that he/she has the option of continuing in service with the same pay scale and service benefits.

5. In case a disabled Government servant reconsiders his decision and withdraws the notice for voluntary retirement, his case shall be dealt with under the provisions of the Section 47 read with the Department of Personnel and Training OM, dated the 25th February, 2015, mentioned above. If however, in spite of being so advised, such Government servant still wishes to take voluntary retirement, the request may be processed as per the applicable rule.

6. All the Ministries and Departments are requested to keep the above in view while processing cases of requests for Voluntary Retirement from disabled Government servants.

G.I., Dept. of Pen. & P.W. O.M.No.F.No.42/10/2014-P&PW(G),
dated 26-5-2015

Grant of Dearness Relief to CPF beneficiaries in receipt of ex gratia
payment with effect from 1-1-2015

In continuation of this Department's O.M.No.42/10/2014-P&PW (G), dated the 20th October, 2014, the President is pleased to grant the Dearness Relief at the rate of Fifth Central Pay Commission with effect from 1-1-2015 to the following:

(i) The surviving CPF beneficiaries who have retired from service between the period 18-11-1960 to 31-12-1985 and are in receipt of *ex gratia* @ ₹ 600 p.m. with effect from 1-11-1997 under this Department's O.M. No. 45/52/97-P&PW (E), dated 16-12-1997 and revised to ₹ 3,000, ₹ 1,000, ₹ 750 and ₹ 650 for Groups 'A', 'B', 'C' and 'D' respectively with effect from 4th June, 2013 *vide* O.M. No. 1/10/2012-P&PW (E), dated the 27th June, 2013 are entitled to Dearness Relief @ 223% with effect from 1-1-2015.

(ii) The following categories of CPF beneficiaries who are in receipt of *ex gratia* payment in terms of this Department's O.M. No. 45/52/97-P&PW (E), dated 16-12-1997 are entitled to DR @ 215% with effect from 1-1-2015.

(a) The widows and dependent children of the deceased CPF beneficiary who had retired from service prior to 1-1-1986 or who had died while in service prior to 1-1-1986 and are in receipt of *ex gratia* payment of ₹ 605 p.m. and revised to ₹ 645 with effect from 4-6-2013 *vide* O.M. No. 1/10/2012-P&PW (E), dated the 27th June, 2013.

(b) Central Government employees who had retired on CPF benefits before 18-11-1960 and are in receipt of *ex gratia* payment of ₹ 654, ₹ 659, ₹ 703 and ₹ 965.

2. Payment of DR involving a fraction of a rupee shall be rounded off to the next higher rupee. In their application to the Indian Audit and Accounts Department, these orders issue in consultation with the C&AG.

3. This issues with the concurrence of Ministry of Finance, Department of Expenditure *vide* their O.M. No. 1(4)/EV/2004, dated 25-5-2015.

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*G.I., M.F., O.M. No. CPAO/Tech./Amdt.-Sch. Book/2015-16/308,
dated 4-6-2015*

Self-certification by the Family Pensioner

Amendment to the Scheme for Payment of Pensions to Central
Government Civil Pensioners by Authorized Banks (Fourth Edition,
3rd December, 2004)

Correction Slip 23

**Annexure-XXVI (See Paras. 25.1 and 25.2 of Page-22) gets
replaced / substituted as under:—**

SELF-CERTIFICATION BY THE FAMILY PENSIONER ITSELF

I hereby declare that I have not got re-married and I undertake to
report such any event promptly to the Pension Disbursing Authority / Bank.

(Applicable only for widow recipient of family pension and to be
furnished only once)

Or

I hereby declare that I am not married / I have not got married during
the last six months. (To be submitted by widowers every six months in
May and November)

Or

I hereby declare that I am not married / I have not got married during
last one year. (To be submitted by unmarried / widowed / divorced daughter
once in a year in November)

Signature

Name of the Pensioner

P.P.O. No.

Place:

Date:

G.I., Dept. of Per. & Trg., O.M.No.Z-20025/9/2014-Estt. (AL),
dated 20-5-2015

Inclusion of Aadhaar(Uniqkue Identification) number
in service Book of Government servants

The undersigned is directed to refer to Department of Personnel and Training's O.M. of even number, dated the 3rd November,2014, on the subject mentioned above, where all Ministries/Departments were requested to ensure that the service books of all employees have an entry of the employees' Aadhaar number.

2. All Ministries/Departments of the Government of India are requested to intimate action taken in this regard and also the number of employees whose service books have been seeded with their respective Aadhaar number.