



सत्यमेव जयते

अखिल भारतीय आयुर्विज्ञान संस्थान , बिलासपुर
हिमाचल प्रदेश -१७४०३७
All India Institute of Medical Sciences, Bilaspur
Himachal Pradesh-174037
e-mail: - establishment.b1@aiimsbilaspur.edu.in
01978-292575



AIIMS-BLS(B)(12)/23- 4677

.11.. Oct., 2024

CIRCULAR

This is in continuation to the circular even no. 3847 dated 10.09.2024 regarding implementation of the Employee Health Scheme (EHS) at our institute, effective from 1st October 2024. In continuation of the said circular, following instructions are issued for smooth implementation of the scheme.


2. Eligible employees are required to submit the revised application form to the establishment section through proper channel as specified at Appendix A and the application should be complete in all respects. Incomplete application will not be processed.

- Copy of the institute's ID card (self-attested)
- Copy of family member's PAN Card/Aadhar Card/Voter ID card/Driving License/Passport for date of birth (self-attested)
- Copy of payslip, duly attested by the Accounts Section, indicating subscription deduction
- Self-attested copy of disability certificate of the family member (if applicable)

3. It is intimated that the no dues certificate form has also been amended accordingly, to ensure the surrender of EHS cards by an outgoing employee. The same will be uploaded on the Institute's website and be applicable from now onwards.

4. It is also clarified that family members of residents (academic/non-academic) will not be covered under the EHS. Therefore, they must not apply for them.

5. This is issued with the approval of competent authority.


Deputy Director (Administration)
AIIMS Bilaspur, H.P.

Copy To: -

- (i) PA to ED for information of Executive Director.
- (ii) PA to MS for information of Medical Superintendent.
- (iii) PA to Dean (Academic/Research/Examination) for information of Dean (Academic/Research/Examination).
- (iv) All the faculty members/non-faculty staff/Residents for information and compliance.
- (v) Faculty I/c for uploading on the website please.

APPLICATION FOR ENROLLMENT IN EMPLOYEE HEALTH SCHEME (EHS)*(Please write in readable writing)*

1. Name of Applicant

First Name	Middle Name	Last Name

2. Employee Code:

3. Category: Please tick () whichever is appropriate.

a) Employee Type: Regular/Adhoc/Temporary/Deputation

b) Resident: Senior Resident/Junior Resident

4. Designation:

5. Name of Department:

6. Pay Level of the post: 7. Blood Group:

8. Group of the Post:

9. Office Address:

.....

10. Residential Address:

..... Pin Code

11. Permanent Address:

..... Pin Code

12. Mobile Number:

13. Emergency Contact Number:

14. Email ID:

15. Date of Birth:

16. Date of Joining:

17. Date of Superannuation:

(in case of in-service employees)

18. Date of completion of tenure:

(in case of Residents)

19. Details of dependents (including self)

S. No.	Name of Family member & Dependent	Relationship with the employee	Date of Birth	Gender	Marital Status	Mobile No./ Email Id	Blood Group	Validity
1.								
2.								
3.								
4.								
5.								

"I hereby undertake that the income of the claimed to be dependents, detailed in the above table, do not exceed ₹9000/- per month from all sources. This information is true and correct. I will be liable for disciplinary action to provide false information."

Date:

Signature:

Name:

Designation:

Employees Code:

Documents to be Enclosed by the applicant:

- Copy of institute's ID card (self-attested).
- Copy of family member's PAN Card/Aadhar Card/Voter ID card/Driving License/Passport for date of birth (self-attested).
- Copy of payslip, duly attested by Accounts Section, indicating deduction of the subscription.
- Self-attested copy of disability certificate issued by Competent authority (in case of son aged 25 and above).

(Admin Part)

The facts are verified from the office record and found to be correct.

Dealing Assistant
(Sign. With Name)

Administrative Authority
AIIMS, Bilaspur, H.P.

Annexure – A

Sr No	Name of the principal beneficiary	Designation	Name of the beneficiary	Category	Date of Birth	Entitled ward	Blood Group	Date Valid up to

**Regular*

Deputation - D

Family member

Pensioner

Senior Resident

Junior Resident

Annexure – B

Sr No	Employee Code of principal beneficiary	Name of the beneficiary	Category*	Date of Birth	Entitled ward	Blood Group	Date Valid up to	Card No	Date of Issue	Receiving Signature

- * In Service
- Deputation
- Family member
- Pensioner
- Residents

FRONT

Logo	AIIMS BILASPUR		
Photo	Name Card No Category Entitled Ward		
	Date of issue: Valid upto	Signature of issuing authority	

BACK

Logo	AIIMS BILASPUR		
Mobile No. Blood Group Employee Code of Principal beneficiary			
Instructions			



ALL INDIA INSTITUTE OF MEDICAL SCIENCES, BILASPUR

**EMPLOYEES HEALTH SCHEME
(EHS)**

**PROCEDURE & GUIDELINES FOR EMPLOYEES
HEALTH SCHEME (EHS)**

EMPLOYEES HEALTH SCHEME (EHS)

1. Background

The clause 34 of All India Institute of Medical Sciences Regulations, 2019 speaks about medical facilities for employees which inter alia provides as under: -

- (a) The employees of the Institute including deputations and members of their families shall be entitled to medical aid as admissible under the All-India Institute of Medical Sciences Staff Health Scheme. They shall also pay such contribution as are required under that Scheme.
- (b) In the case of retired employees of the Institute and their family members as well as those employees and their family members who avail medical facilities in places other than the place of the Institute, the Central Services (Medical Attendance) Rules 1944 as amended from time to time, shall apply. In case of any difficulty, the re-imburement of medical expenses incurred in such cases be done as per applicable rates of Central Government Health Scheme (CGHS).

All India Institute of Medical Sciences, Bilaspur was under developing stage with limited services available and IPD services were started w.e.f. 05-10-2022 with inauguration of the institute by Hon'ble Prime Minister of India. There was no Hospital in the near vicinity of AIIMS, Bilaspur covered under Central Government Health Scheme (CGHS). The recruitment of the staff was started during the year 2020 and 1st batch of faculty joined institute during November, 2020 and Nursing Officer joined the institute during October, 2021 and in order to provide medical facility to the staff of the institute, the matter was placed before 1st SFC held on dated 14-02-2022 vide agenda No. SFC-01/04/d to provide health services facilities to the staff, residents, tutors and demonstrators of the institute till the operationalization of the services in the institute at par with Central Services (Medical Attendance) Rules 1944 and CGHS rates. The agenda was approved by the SFC and Governing Body of the institute. The institute framed SOP for reimbursement of medical claims of the institute who were taking treatment outside in absence of OPD/IPD services in the institute. Now, the most of the Departments are functional and it is imperative to implement the Employees Health Scheme for the employees/ retirees/ family pensioners of the institute.

37

2. Purpose: -

The purpose of this document is to prescribe procedures and guidelines for **Employee Health Scheme (EHS)** of AIIMS Bilaspur. This scheme is subscription based and all the eligible employees/ retirees/ family pensioners shall be required to pay such contribution as may be prescribed from time to time under this scheme.

3. Definitions

- a) **"Executive Director"** shall mean the Executive Director of AIIMS, Bilaspur.
- b) **"Medical Superintendent"** shall mean the Medical Superintendent of AIIMS, Bilaspur
- c) **"Medical Attendance"** means consultation with the Authorized Medical Attendant/ Consultant.
- d) **"Medical Treatment"** means the use of all medical and surgical facilities available at the AIIMS, Bilaspur or a government Hospital or CGHS empaneled Hospital or recognized Private Hospital in which the employees of the institute are treated and includes
 - i) the employment of such pathological, bacteriological, radiological or other methods as are considered necessary by the authorized medical attendant.
 - ii) the supply of such medicines, vaccines, sera or other therapeutic substance as are ordinarily available in the Hospital;
 - iii) the supply of such medicines, vaccine, sera or other therapeutic substances not ordinarily so available as the authorized medical attendant may certify in writing to be essential for the recovery or for the prevention of serious deterioration in the conditions of the employees/ retirees.
 - iv) such accommodation as is ordinarily provided in the hospital and is suited to his status and entitlement.
 - v) such nursing as is ordinarily provided to in-patients by the hospitals;
 - vi) Specialist consultation but does not include diet or provision at the request of the employee or accommodation superior to that prescribed under this scheme.
- e) **"Authorized Medical Attendant" (AMA)** means a Medical Officer or a Specialist of AIIMS Bilaspur treating the patient.

- f) "**Specialist**" means Specialist Doctor employed at AIIMS Bilaspur and does not include any intern, Junior Resident or Senior Resident.
- g) "**Patients**" means employees/ retirees of the AIIMS, Bilaspur to whom these Rules shall apply and who has fallen ill.

4. Beneficiaries and Eligibility criteria

- a) The scheme shall apply to all regular employees of the Institute including permanent and temporary and their dependent family members.
- b) The employees who are on deputation from other Government Departments or Public Sector Undertakings etc., on giving an option to be governed by these rules during the period of deputation instead of the rules enforced in their parent organization on joining the duty.
- c) This scheme shall also apply to the retirees and family pensioners, the employees of the institute who will retire from this institute after attaining the age of superannuation and their dependent family members or employees who died while in service or after retirement, their family members/ dependents can avail the facility under this scheme.
- d) It shall not be applicable to employees appointed on contractual basis or outsourced employees.
- d) Residents employed under Residency scheme of Government of India-
- i) Senior Residents (Academic and Non-Academic) are treated as temporary government servant and can avail the scheme for self and dependents during the period of employment on payment of monthly contribution.
- ii) Junior Residents employed/ recruited under Residency scheme can avail this facility on payment of monthly contribution and Junior Residents, if employed on contractual basis can also avail this facility on payment of monthly contribution.

5. Family and Dependents

- a) The term 'family shall mean an AIIMS Bilaspur employee's wife or husband, as the case may be, and parents, sisters, widowed sisters, widowed daughters, brothers, children. Stepchildren divorced separated daughters and stepmother

wholly dependent upon the Government servant and are normally residing with the Government servant.

- b) A member of the family is treated as dependent only if his/her income from all sources including pension is not more than Rs.9,000/- per month. This ceiling of Rs 9,000/ p.m. is subject to revision as may be notified by the Government of India from time to time and that such revision shall be effective from the date notified by the Government.
- c) A female employee has a choice to include either her dependent parents or her dependent parents in law(s): option exercise can be changed only once during service.
- d) Age-limits of dependent son/daughter for the purpose of availing medical facilities is as d indicated below-

i.	Son	Till he starts earning or attains the age of 25 years or gets married, whichever is earlier.
ii.	Daughter	Till she starts earning or gets married, irrespective of the age limit, whichever is earlier.
iii.	Son suffering from any permanent disability of any kind (physical or mental)	Irrespective of age-limit
iv.	Dependent divorced/ abandoned or separated from their husband/ widowed daughters and dependent unmarried/ divorced/ abandoned or separated from their husband/widowed sisters	Irrespective of age-limit
v.	Minor brother(s)	Up to the age of becoming a major

6. Contribution to the Scheme

- i) The rates of monthly contributions for availing EHS facility based on the pay levels with the corresponding 7th Central Pay Commission shall be as under:

37

Sr.	Corresponding levels in the Pay Matrix as per seventh CPC	Contribution (Rupees per month)
1	Level-1 to 5	250
2	Level-6	450
3	Level 7 to 11	650
4	Level 12 and above	1000

- ii) The rates of monthly contributions for availing EHS facility are based on the CGHS rates as notified by Ministry of Health & Family Welfare (EHS Section) vide OM No. S.11011/11/2016 CGHS(P)/EHS dated 09th January, 2017 upon revision of pay scales as per 7th CPC. These rates are subject to further revision as decision of the Government and AIIMS authorities.
- iii) The monthly contributions of EHS facility will be deducted from the salary of the employees (in service) from their monthly salary.
- iv) In cases where the pay of a Government employee is revised from a retrospective dated, resulting in change of amount of EHS contribution payable, contribution at the higher slab rate shall be recovered only from the date of issue of the order.
- v) The pensioners have the option to get their EHS pensioner card made by either making EHS contribution on an annual basis (twelve months) or by making contribution for 10 (ten) years {120 (one hundred twenty) months} for getting EHS card with life-time validity.
- vi) Contribution to be made by pensioners/ family pensioners would be the amount that they were subscribing at the time of their retirement or at the time of death of the Government servant.
- vii) Pensioners / family pensioners who wish to contribute to the EHS on an annual basis and wish to continue to avail EHS benefits will have to contribute at the prevailing rates up to the time of contribution needed to cover a period of a total of ten years from the time pensioner EHS card was issued for the first time to them.
- viii) The rates of contribution for the remaining period would be with reference to the level of pay that he / she would have drawn in the post held by him / her

37

(at the time of his / her retirement / death) had he / she continued to be in service now but for his / her retirement/ death; and

- (ix) Any pensioner / family pensioner who is entitled to avail EHS facility has not so far got his / her pensioner EHS card made, the rate of contribution in such cases will be with reference to the level of pay that he / she would have drawn in the post held by him / her (at the time of his / her retirement / death) had he / she continued to be in service now but for his/ her retirement / death.

7. Admission to the Scheme

Eligible employee shall fill in the Application form attached as **Appendix 'A'** for enrolling in the scheme and submit it with all supporting documents for verification by concerned administrative/ Establishment Department for further processing and issue of EHS cards to the employees/ Pensioners/ Family Pensioners as the case may be.

8. Issue of EHS card

- a). After verification, EHS cards will be issued for each employee/ beneficiary by the administration branch of the institute. The modalities for issue of EHS card will be finalized in consultation with Accounts Department.
- b). The EHS card can be used by the beneficiary to avail the medical facilities available at AIIMS Bilaspur as per entitlement including OPD consultation, IPD facility, laboratory and radiological investigations etc. on cashless basis/free of charge.

MEDICAL ENTITLEMENT

9. Treatment at AIIMS Bilaspur

a) OPD Treatment

- i) Beneficiaries can directly avail OPD services for necessary examination/consultation of Authorized Medical Attendant (AMA) in specialist OPD of AIIMS Bilaspur. Prescription from treating doctor (Faculty/ Senior Resident) is required to claim the reimbursement. Prescription by JRs are not acceptable unless endorsed by SR/ Faculty.
- ii) In case spouse and dependent family members of the employees are residing at a distant place other than the head quarter of the employee, such family members may take treatment in any central/ state government hospital or

CGHS empaneled hospitals subject to fulfillment of other conditions prescribed under CS(MA) Rules, 1944 and CGHS instructions subject to the condition that the claim will be restricted to CGHS rates of the area.

ii) Investigations and Treatment Procedures

- a. Based on the advice of the specialist concerned (Treating Doctor i/c Senior Resident), diagnostic tests and treatment procedures available at the institute (in-house) will be done free of charge on the basis of EHS card.
- b. The Officer/ Official responsible for conducting investigation/ diagnostic tests will not demand payment slip for EHS beneficiaries and conduct the tests on the basis of the requisition slip duly signed by the treating Doctor and EHS Card.
- c. In case the investigation/ diagnostic tests are not available in the institute then a "Non-Availability Certificate" is to be obtained from the authorized officer of the lab concerned and thereafter prescribed tests can be conducted from Hind Lab or any other diagnostic Centre.
- d. Format of 'Non-Availability Certificate' is attached as **Appendix 'B-1'**.
- e. The Hind Lab will charge the approved rates (CGHS) as per MoU. The reimbursement of tests conducted outside the Hospital at the recommendation of the treating Doctor will be restricted to CGHS rates.
- f. The concerned EHS beneficiary will make payment and can claim the amount of diagnostic tests in the bill for medical reimbursement.

iii) Purchase of prescribed medicine

- a. Medicines prescribed in the OPD shall be procured by the beneficiaries from the Institute's authorized pharmacy **after it is made operational and till then prescribed medicines can be purchased from any private pharmacy/ market on payment by the beneficiary.**
- b. In case the medicines are not available at institute's authorised pharmacy then a Certificate' is to be obtained from the authorized pharmacy and thereafter prescribed medicine can be purchased from any other

pharmacy/ market (Requirement of Non-availability is required after in-house pharmacy is made operational).

c. Format of 'Non-Availability Certificate' is attached as **Appendix 'B-2'**.

d. While submitting the bill for medical reimbursement, the invoice is to be submitted along with the 'Non-Availability Certificate' for reimbursement under EHS scheme of AIIMS Bilaspur (**Non-availability certificate is required only after the in-house pharmacy is made functional**).

b) IPD Treatment

i) **Treatment:** - The treatment of EHS covered in-patients will be cashless and all the medicines, consumables and diagnostic tests as defined in para (9) under "Treatment" will be provided/ used on cashless basis.

ii) Ward Entitlement

The type of accommodation in hospital shall depend upon the status of the employees corresponding his pay in the pay matrix, The entitlement of wards in case of hospitalization shall be as under:

Pay slab for determining the entitlement of accommodation in AIIMS, Bilaspur

S No	Corresponding Basic pay drawn by the employee in 7th CPC	Ward entitlement at AIIMS Bilaspur
1	Up to Rs 63,100/-	General Ward
2	Rs. 63,101/- to Rs. 80,900/-	Semi-Private/General
3	Rs. 80,901/- and above	Deluxe/ Private Ward

The beneficiary will make the payment of bed charges/ Special ward and will seek reimbursement.

iii) Procurement of Drugs/Consumables for EHS In-patients

a) The drugs/ medicines/ consumables etc. available in the IPD will be used first of all and thereafter, requisition form (indent) will be sent to Central Store/ Authorized Vendor/ Local Vendor (LP).

b) A drug requisition form (indent) of inpatient EHS beneficiary (**Appendix- C**) shall be initiated by the consultant Specialist /Senior Resident/ Nursing

Officer in charge and sent along with indent book to the concerned central store or the authorised Vendor M/s Amrit Pharmacy or Local Vendor (LP) for further processing and issue of drugs/consumable.

- c) Store officer/store keeper will arrange and issue these items preferably from the Central Store or arranging through authorised Pharmacy M/s Amrit Pharmacy/ Local Vendor (LP) of the institute.
 - d) M/s Amrit Pharmacy/ Authorised Pharmacy will generate bills and send it to the Nursing Officer along with drugs/ medicines etc. at agreed rates with landing price and other authorised Local Vendors (LP) will also generate bills at agreed/ approved rates.
 - e) The Suppliers will issue bills on case-to-case basis which will be verified by the Consulting Specialist /Senior Resident and countersigned by the faculty who will record a certificate with regard to the quantity, quality and brand of the medicines/ consumables.
 - f) The Nursing Officer (in charge) of the ward will submit the endorsed bills to Accounts Department through Medical Superintendent for payment to Vendors.
 - g) Similar procedure will be followed for procurement of implants etc. which will be supplied by the authorised vendors at approved/ agreed rates as per MoU.
 - h) In case any drug/consumable is not arranged through these sources, **only such items will be bought by patients/ attendants and seek reimbursement.** Store keeper will make endorsement on requisition form that such items that couldn't be arranged through Central Store/ Amrit Pharmacy or authorised Vendor/ Local Vendor (LP).
- iv) Investigations and Treatment Procedures**
- a. Based on the advice of the specialist concerned, diagnostic tests and treatment procedures available at the institute (in-house) will be done free of charge on the basis of EHS card as per requisition slip duly signed by the AMA as per **Annexure- "D"**.

37

- b. The Officer/ Official responsible for conducting investigation/ diagnostic tests will not demand payment slip for EHS beneficiaries and conduct the tests on the basis of the requisition slip duly signed by the treating Doctor and EHS Card.
- c. In case the investigation/ diagnostic tests are not available in the institute then a **“Non- Availability Certificate”** is to be obtained from the Lab Department or Treating physician (AMA) and thereafter prescribed tests can be conducted from Hind Lab or any other diagnostic Centre.
- d. Format of 'Non-Availability Certificate' is attached as **Appendix 'B-1'**.
- e. The Hind Lab will charge the approved rates (CGHS) as per MoU. The reimbursement of tests conducted outside the Hospital at the recommendation of the treating Doctor will be restricted to CGHS rates.
- f. The concerned EHS beneficiary will make payment and can claim this amount in the bill for medical reimbursement.

10. Treatment at places other than AIIMS Bilaspur

In the case of employees of the Institute and their family members avails medical facilities in places other than the place of the Institute, the Central Services (Medical Attendance) Rules, 1944 as amended from time to time, shall apply. Treatment outside AIIMS, Bilaspur is permitted under following situations only: -

- a) Faculty not available at AIIMS, Bilaspur.
- b) In case spouse and dependent family members of the employees are residing at a distant place other than the head quarter of the employee, such family members may take treatment in any central/ state government hospital or CGHS empanelled hospitals or any private hospital subject to fulfilment of other conditions prescribed under CS(MA) Rules, 1944 and CGHS instructions subject to the condition that the claim will be restricted to CGHS rates of the area.
- c) The employee/ family while away from station develops an illness requiring treatment then and there, he/ she can take treatment in any central/ state government hospital or CGHS empanelled hospitals or any private hospital in case of emergency subject to the condition that the claim shall be restricted to CGHS rates.

- d) In case of referral by the Specialist either due to non- availability of particular facility at the institute or due to serious or special nature of illness

A. Referral to other hospitals:

If the authorized medical attendant at AIIMS Bilaspur is of the opinion that the case of a patient requires medical attendance/treatment in some other hospital, either due to non- availability of particular facility at the institute or due to serious or special nature of illness, he may with the approval of the Medical Superintendent (which shall be obtained beforehand unless the delay involved entails danger to the health of the patient) refer the patient to higher institute or **the nearest government/CGHS empaneled private hospital as the case may be** where the particular facility is available for consultation/further management.

B. Travelling allowance

Where a patient is referred to other hospital from AIIMS, Bilaspur, he shall, on production of a certificate in writing by the authorized medical attendant in this behalf, be entitled to travelling allowance for the journey to and from the referred hospital.

C. Purchase of prescribed medicine

- i) If an employee attends a government hospital/CGHS empaneled private hospital as an outdoor patient after being referred by the AMA from AIIMS, Bilaspur and gets the prescription for medicines, the same can be purchased from any pharmacy/ market till the in-house pharmacy is made functional and thereafter the same will preferably be purchased from authorized pharmacy at AIIMS Bilaspur (if available at authorized pharmacy) except in case of emergency.
- ii) The EHS beneficiary employee may get the medicines from the market. Further if medicines are not available in authorized pharmacy the purchase from market is admissible after obtaining 'Non- Availability Certificate' from authorized pharmacist.

D. Investigations

Test/investigation advised at referred hospital should preferably be done at AIIMS Bilaspur, if available and feasible. In case, referral hospital is located at outstation and it is not feasible or facility is not available at AIIMS Bilaspur then the

27

test/investigation can be availed at referred Hospital/ private hospitals laboratories/imaging centers empaneled under CGHS/CS(MA) Rules. The reimbursement of expense incurred will be as per CGHS rates applicable to the nearest CGHS city or actuals whichever is lower.

E. Treatment Procedures

In case of elective planned medical treatment procedure, the EHS beneficiary can avail medical treatment at the referred hospital. They will be allowed reimbursement as per CGHS rates applicable to the nearest CGHS city or actuals whichever is lower.

F. Prior permission for unlisted Investigations, treatment and Procedures

EHS beneficiaries are required to seek prior permission of competent authority for undergoing Investigations for treatment Procedure not listed in CGHS to claim reimbursement. Ex-post facto sanction can be granted only in exceptional extremely deserving case i.e. in case of emergency or urgent test.

Documents required to be submitted for permission are:

- i) Request letter to give permission, from employee clearly mentioning the name of the unlisted Investigations/ treatment/Procedure and the name of the empaneled hospital where he intends to avail the facility.
- ii) Authorized Medical attendant/ Government specialist advise clearly mentioning said investigations/treatment/procedure. Vague advice like advised surgery without mentioning the actual procedure is not acceptable.
- iii) One estimate from empaneled hospital where patient intends to take treatment.
- iv) Other relevant medical documents in support of beneficiary illness.

11. Special cases/ situations when referral by Authorized medical attendant is not required.

A beneficiary while out of station with official intimation, in the event of illness/trauma, can avail medical facility including specialist consultation, test/investigations, indoor medical care and treatment procedures in the outstation city in any government/private CGHS empaneled hospital without

37

referral from AMA. Reimbursement in such cases would be made as per CGHS rates or actuals whichever is lower.

12. Treatment in Emergency

- i) In emergent conditions beneficiary can go to any of the government/private empaneled hospital near to residence or place of illness directly without being formally referred from AIIMS, Bilaspur.
- ii) Treatment in private hospitals not empaneled under the scheme near the place of illness/trauma in medically emergent conditions will also be admissible, subject to ceiling CGHS rates applicable as per entitlement, when treatment is necessitated in such hospitals being situated near the place of illness/ trauma and when no other empaneled/government facility is available nearby or due to circumstances beyond control of the beneficiary.
- iii) The genuineness of the emergent condition shall be evaluated on case-to-case basis. Merely getting admitted through emergency, without any justifiable emergent condition, shall not make beneficiary entitled for the benefit. The Executive Director, AIIMS, Bilaspur can grant permission in such cases for reimbursement on case-to-case subject to his satisfaction as per conditions stipulated in CS(MA) Rules ,1944.

13. Medical Reimbursement claim (MRC)

a) Application for Medical Claims

- i) Employee are required to submit application for claiming refund of medical expenses incurred in connection with medical attendance and/or treatment in Medical 97 form (**Appendix E**). Separate form should be used for each patient.
- ii) It is mandatory to attach self-attested copies of employee ID-card and EHS card of patient with claim reimbursement form.
- iii) All invoice bills should be self-certified and duly supported by duly dated, signed & stamped prescriptions, non-availability certificate, cash memos, essentiality certificate and other relevant documents.
- iv) Copy of referral to be attached if medical attendance/treatment is availed in hospital other than AIIMS Bilaspur
- v) Copy of discharge summary should always be attached in case of IPD treatment.

vi) All the supporting documents should be signed (with official stamp) by the Authorized Medical attendant of the case.

b) Essentiality certificate

- i) Essentiality certificate duly filled is to be submitted along with Medical 97 form.
- ii) Certificate A- in the case of patients who are not admitted to hospital for treatment.
- iii) Certificate B- in the case of patients who are admitted to Hospital for treatment.

c) Checklist for MRC

Checklist for documents to be submitted with MRC form for reimbursement of medical claim is as per **(Appendix 'F')**.

d) Medical Reimbursement Claim in case original papers have been lost

Employee is required to submit following documents in case original papers have been lost-

- (a) Photocopies of claim paper
- (b) Affidavit on stamp paper- Draft for Affidavit is attached as **Appendix "G"**.

e) Medical Reimbursement Claim in case of death of beneficiary.

Following documents are required to be submitted for claiming refund of medical expenses.

- (a) Affidavit on Stamp Paper for claiming medical reimbursement as per **Appendix H**.
- (b) No objection certificate from legal heirs of the beneficiaries as per **Appendix 'I'**.
- (c) Death Certificate.

f) Time-limit for submission of Medical Reimbursement claim (MRC)

- i) Submission of claim for reimbursement of medical expenses of employees in respect of a particular spell of illness should ordinarily be preferred within three months from the date of completion of treatment.
- ii) Condonation of the delay in submission of medical bills shall be considered by the Competent authority on the merit of each case.

14. **Accounting Procedure: -**

- i) A separate fund shall be maintained for this scheme for which a dedicated saving bank account shall be opened in Nationalized Bank to deposit the

37

- contributions received from employees/ retirees/ family pensioners under EHS scheme.
- ii) All withdrawals and reimbursements from the account for all EHS related matters shall be done by approved banking instrument (cheque/ draft/ bank /order/ RTGS etc.) only and cash payments are not allowed.
 - iii) In case of EHS in-patients (IPD), the cost of diagnostic charges conducted through Hind Lab and cost of medicines, drugs, consumables and implants etc. purchased through direct indent to authorized pharmacy {(authorized Pharmacy or Local Vendor (LP)} will be paid out of this account by the Accounts Department.
 - iv) The reimbursement of medical claims in respect of OPD treatment, referral cases, treatment taken by the employee/ his family members at out station, retirees/ family pensioners and their family dependents and diagnostic tests conducted from outside at the advice of consultant will be paid out of this fund.
 - iv) The Accounts Section shall maintain books of account for this fund. The bank account opening shall be as per the general applicable rules in this matter.
 - v) The Accounts Section will reconcile all the receipts/ payments received out of this fund.
 - vi) The cost of diagnostic charges conducted through Hind Lab and cost of medicines, drugs and consumables will be paid out of this account.
14. In case of shortage of amount under this fund for reimbursement of medical claims of the EHS beneficiaries, the excess expenditure will be met out of the GIA- General with the permission of Executive Director.
15. Where any doubt arises as to the interpretation of provisions of this scheme, provisions of the Central Services (Medical Attendance) Rules 1944 and Central Government Health Scheme, as amended from time to time, shall apply and decision of Executive Director & CEO shall be final.


**Executive Director,
AIIMS, Bilaspur HP**

APPLICATION FOR ENROLLMENT IN EMPLOYEE HEALTH SCHEME (EHS).

(Please tick () which is applicable and strike out of (X) whichever not applicable)

1. Name of applicant

2. Employee Code

3. Category: Please tick () whichever is appropriate

a. Regular Employee Regular/ Adhoc/Temporary/ Contract/
Deputation

b. Resident: Senior Resident/ Junior Resident

4. Post held/Designation:

5. Name of Department

6. Pay Level of the post

7. Group of the Post

8. Blood Group

9. Office Address

10. Residential Address

11. Permanent Address

12. Mobile Number

13. Emergency Contact Number

14. E-mail Address

15. Date of Birth

16. Date of joining

17. Date of superannuation

(in case of in-service employees)

18. Date of completion of tenure

(in case of Residents)

19. Details of dependents (including self)

SN	Name of family member & dependent	Relationship with the employee	Date of birth	Gender	Marital status	Mobile Number/ Email id	Blood Group	Validity
1.								
2.								
3.								
4.								
5.								
6.								

Date:-

Signature

Name:

Designation

Employees Code

The facts are verified from the office record and found to be correct.

**Administrative Authority,
AIIMS, Bilaspur HP**

Non-Availability Certificate

This is to certify that following laboratory test(s)/ diagnostic investigations prescribed by Dr. _____ of Department _____ is / are not available at AIIMS, Bilaspur on _____ (date).

Detail of Tests:-

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

Signature of Authorized Laboratory.

Date:

Appendix-C

**(ONLY FOR EHS BENEFICIARIES IN-PATIENTS)
INDENT FORM
(Amrit Pharmacy/ PMJAK/Empanelled Chemists (LP))**

Patient Name: _____ Age/Sex: _____

Patient's AIIMS UHID: _____ Date of Admission: _____

Name of Ward: _____ Name of Insurance Scheme: _____

Package ID: _____ Package/Pre- authorization cost: _____

Amount exhausted: _____ Balance Amount: _____

Please supply the following Medicines/drugs/consumables as per prescription slip: -

Sr. No.	Name of Medicines/Consumables	Brand Name	Quantity	Remarks, if any
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

(Signature)
Name of Nursing Officer: _____

(Signature)
Name of Doctor: _____

(Note Amrit Pharmacy will indicate landing price and record requisite certificates as per check list)

Appendix-D

(ONLY FOR EHS BENEFICIARIES IN-PATIENTS)
MRI SCAN/ USG SCAN/ MRI REQUISITION FORM

Patient Name: _____ Age/Sex: _____

Patient's AIIMS UHID : _____ Date of Admission: _____

Name of Ward: _____ Name of Employee: _____

Employees Code _____ EHS Card Number: _____

Name Of Treating Doctor: _____

Any history Allergy/Asthma/DM/HTN/ Renal Disease/Cardiac Disease/
Surgery (Yes/No)
Any Chemotherapy/ Radiotherapy received (Yes/No)

Clinical History/ Any Chemotherapy/ Radiotherapy received	
Provisional Diagnosis	
Previous Scans (USG/ CT/ MRI) (Yes/No) If yes, give brief detail	
Examination required/ Area of interest (Please specify non- contrast/ contrast MRI)	

Clinician Signature

(With name & seal)

For Department of Radio-diagnosis

Appointment date		Amount	
Time		Bill No.	

FORM OF APPLICATION FROM MEDICAL CLAIMS

To

Sir,

Kindly arrange to reimburse medical bills of Rs. _____ which was prescribed by Dr. _____ of Department _____. The amount may be credited to my bank account.

Name of the Employee	
Employee Code	
Designation	
Date of Joining	
Department	
Contact Number	
Essentiality Certificate (Tick whichever is applicable)	
Copy of referral by Govt. Specialist (Applicable in case treatment taken outside AIIMS, Bilaspur)	
Copy of Discharge Summary	

Note: -

1. Copies of employee ID-card and FOC card of patient is mandatory to attach along with claim reimbursement form.
2. Please mark page number on each page and all invoice bills should be self-certified.

Dated _____

Signature of AIIMS Employee

f) That I referred the patient to Dr. _____ for Specialist consultation and that the necessary approval for the _____ (name of Chief Administrative Officer of the State) a required under rule was obtained.

Dated _____

Signature of the Medical

Officer

PART-B

That the patient has been under treatment at _____ hospital and that the service of the special nurses for which as expenditure of Rs _____ was incurred, vide bills and receipts attached, were essential for the recovery / preventions of serious deterioration in the condition of the patient.

Dated _____

Signature of the Medical

Officer

COUNTERSIGNED

I certify that the payment has been under treatment at the _____ hospital and the facilities provider were the minimum which were essential for the patient's treatment.

Dated _____

Medical Superintendent
Hospital _____

(FOR OFFICE USE)

Sanctioned & Passes for Rs. _____ (Rupees _____
_____ only).

Signature of DDO

Countersignature of Controlling Officers

CHECKLIAT FOR REIMBURSEMENT OF MEDICAL CLAIMS

1. Full Name of AIIMS Employee
(Block Letter)
2. Status
(Govt. servant/Pension/Other)
3. The following documents are sub-mitted (Please tick the relevant column)
 - (a) Medical 97 Form : Yes/No
 - (b) Photocopy of Identity card : Yes/No
 - (c) No of Original Bills
 - (d) Copy of Discharge Summary : Yes/No
 - (e) Copy of referral by specialist : Yes/No
 - (f) whether the hospital has given break-up for lab investigation: Yes/No
 - (g) Original papers have been lost the following documents are submitted:
 - i. Photocopies of claim papers : Yes/No
 - ii. Affidavit on stamp paper : Yes/No
 - (h) In case of death of Employee, the Following documents are submitted:
 - i. Affidavit on stamp paper by Claimant: Yes/No
 - ii. No Objection from other legal heirs on stamp papers : Yes/No
 - iii. Copy of death certificate : Yes/No

Dated:

Signature of AIIMS Employee

INSTRUCTIONS

Definition of Family:

- (1) Husband/Wife* (*First wife only)
- (2) Dependent Parents/Step Mother (in case of adoption, only adoptive & not real parents)
- (3) If adoptive father has more than one wife, the first wife only.
- (4) A female employee has a choice to include either her dependent parents or her dependent parents-in law, option exercise can be changed only once during service.
- (5) Children including legally adopted children, step children and children taken as wards subject to the following conditions:

(i)	Son	Till he starts earning or attains the age of 25 years or get married, whichever is earlier.
(ii)	Daughter	Till she starts earning or gets married, irrespective of the age limit, whichever is earlier.
(iii)	Son suffering from any permanent disability of any kind (physical or mental)	Irrespective of age-limit
(iv)	Dependent divorced/ abandoned or separated from their husband/ widowed daughters and dependent unmarried/ divorced/ abandoned or separated from their husband widowed sisters.	Irrespective of age-limit
(v)	Minor botner(s)	Up to the age of becoming a major

For the purpose of availing EHS. facility for disabled sons above 25 years, please attach a copy of the certificate of disability issued by the competent authority.

'Disability' will be AS DEFINED IN SECTION 2(1) OF 'THE PERSONS WITH DISABILITIES (EQUAL OPPORTUNITIES, PROTECTION OF RIGHTS AND FULL PARTICIPATION) ACT, 1995 (NO: 1 OF 1996)' WHICH IS REPRODUCED BELOW:

"(1)" DISABILITY MEANS

- (I) BLINDNESS
- (II) LOW VISION
- (III) LEPROCY CURED
- (IV) HEARING IMPAIRMENT
- (V) LOCOMOTOTR DISABILITY
- (VI) MENTAL RETARDA TION
- (VII) MENTAL ILLNESS

Dependency:

Members of family (other than spouse) whose income is less than Rs.9000/- + DR per month are treated as dependents and are normally residing with E.H.S. beneficiary.

The Following Documents are to be enclosed:

- (I) **Proof of Residence/Stay of dependents-** (copy of Ration Card/Aadhar card/Election C-Passport/Identity Card issued by college/ School/ University/ Bana pass book etc...
- (II) **Proof of age of son**
- (III) **Attested Copy of Disability certificate issued by Competent Authority (in case of dependent son aged 25 and above)**

Appendix- G

Draft for Affidavit in case original papers/ Bills are lost

I _____ husband/ wife/ son/
daughter of late _____ and resident of
_____ have lost/
misplaced the original paper or the same are not traceable. I hereby
given an undertaking that I have not received any payment against the
original bills/ claim papers from any source and that if the original
papers are traced. I shall not shake claim against original bills in future
and that in the event, I receive any cheque against the original bills in
future. I shall return the same to Competent Authority.

Deponent

Attested by Notary Public.

Appendix- H

Draft for Affidavit on Stamp Paper for claiming medical reimbursement "IN CASE OF DEATH OF A EHS BENEFICIARY".

I _____ husband/ wife/ son/
daughter of late _____ and resident of _____
_____ hereby
submit the medical reimbursement claim papers pertaining to
treatment of my husband/ wife/ mother Late Shri/ Smt. _____
who has expired on _____ (copy of death certificate and
legal heir certificate is enclosed).

Late Shri/ Smt. _____ has left behind the following
other legal heir, none of whom have any objection if the entire
reimbursement amount is paid to me.

No Objection certificate signed by other legal heirs on Stamp paper is
enclosed.

Deponent

Attested by Notary Public.

Appendix- I

Draft for "No Objection Certificate" of reimbursement "IN CASE OF DEATH OF A EHS BENEFICIARY".

We,

- (i) _____ son/daughter of _____
- (ii) _____ son/ daughter of _____
- (iii) _____ son/ daughter of _____
- (iv) _____ son/ daughter of _____
- (v) _____ son/ daughter of _____
- (vi) _____ son/ daughter of _____

Being the legal heirs of Late Shri/ Smt. _____ have no objection if the entire amount reimbursable pertaining to the treatment of late Shri/ Smt. _____ is paid to Shri/ Smt. _____.

i) Signature

Name:

Address:

ii) Signature

Name:

Address:

iii) Signature

Name:

Address:

iv) Signature

Signature

Name:

Address:

v) Signature

Name:

Address:

vi)

Name:

Address:

Attested by Notary Public.