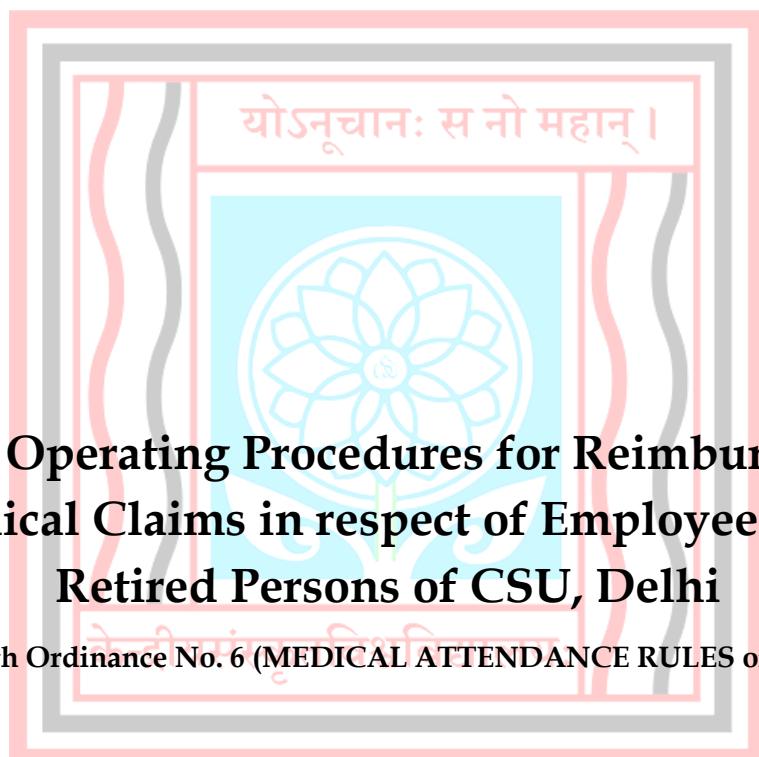


CENTRAL SANSKRIT UNIVERSITY

(Established by an Act of Parliament)

New Delhi-110058



**Standard Operating Procedures for Reimbursement of
Medical Claims in respect of Employees and
Retired Persons of CSU, Delhi**

[To be Read with Ordinance No. 6 (MEDICAL ATTENDANCE RULES of the University)]

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1. Purpose

This SOP is outlined to streamline and regulate the process of medical reimbursement claims for employees and retired persons of Central Sanskrit University (CSU), Delhi and to be considered as a guided document while settling the claims of Medical Reimbursement of Employees and Retired Persons of the University. However, the reimbursement of bills shall be done strictly in accordance with Medical Attendance Rules of Central Sanskrit University, Delhi and CS (MA) Rules, 1944.

2. Concession for Families: -

- As per Sub-Clause 2.2 of Medical Attendance Rules of Central Sanskrit University, "Family" means spouse, dependent parents and children etc., as prescribed in the CS (MA) Rules from time to time. On a broader perspective, the term 'Family' as per CS (MA) Rules, 1944 shall mean a Government Servant's wife or husband, as the case may be, and parents or parents-in-law, sisters, widowed sisters, widowed daughters, minor brothers, children, stepchildren, divorced/ separated daughters and stepmother wholly dependent upon the Government Servant and are normally residing with the Government servant.
- The Age Limit of dependent family members are as follows: -

Son	Till he starts earning or attains the age of 25 years or gets married, whichever is earlier.
Daughter	Till she starts earning or get married, irrespective of age limit whichever is earlier
Son suffering from any permanent disability* of any kind (physical or mental)	Irrespective of age limit
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
Minor Brother(s)	Up to the age of becoming a major
Permanently disabled dependent brother	Irrespective of age limit

**Disability means blindness, low vision, leprosy-cured, hearing impairment, locomotor disability, mental retardation, mental illness.*

- The term 'children' will include children adopted legally. It will also include children taken as wards by the Government servant under the "Guardians and Wards Act, 1890", provided such a ward lives with the Government servant and is treated as a members of the family and provided the government servant through a special will, has given such a ward the same status as that of a natural born child.
- The term 'wife' includes more than one wife i.e. more than one wife of an employee can be registered under the scheme if the marriages are not in contravention of: -
 - Central Civil Services (Conduct) Rules, 1964.
 - Administrative Orders issued by the Ministry of Home Affairs vide their O.M. No. 290/59-Estt dated 16.10.1954.
 - The legislation restricting plural marriages.

- A judicially separated wife of a Central Government Servant (whether she is receiving maintenance allowance or not) would be entitled to the medical concession admissible under the relevant medical attendance rules.
- **When spouse is employed in Central/ State Government/PSU/Autonomous Bodies:-** The husband or wife of the Government servant, as the case may be, employed in a Central/ State Govt./PSU/ Autonomous Bodies/ Defence/ Railway Services/ Corporation/ Bodies wholly or partly finances by Central or State Government and private organizations, which provide medical services would be entitled to choose either the facilities under the Medical Attendance Rules of Central Sanskrit University or the medical facilities provided by the organization in which he/she is employed. For this purpose, they should furnish to their respective authorities a joint declaration as to who will prefer the claim for reimbursement of medical expenses incurred on the medical attendance and treatment in respect of wife/ husband and the children. This declaration shall remain in force till such time as it is revised on the express request in writing by both the husband and the wife, e.g., in the event of promotion, transfer, resignation, etc., of either of the two.

3. Dependency and Income Criteria: -

- Government servant will be given the choice to include either parents or parent-in-law, for the purpose of availing of the benefits of the medical concessions under the CS (MA) Rules subject to the conditions of dependency and residence stipulated.
- Every government employee should immediately after marriage give a declaration as to whether he/she should like to include parents or parents-in-law for the purpose of availing of the benefits of medical concessions under reimbursement scheme. **He/She can change her option only once during the entire period of his/her service.** Even after marriage to other government servants, the government servants would be free to choose either his/her parents or parents-in-law as "family" for purposes of availing of medical benefits under CS (MA) Rules.
- The income limit for dependency for the purpose of providing medical attendance facility is **Rs. 9000/- plus the amount of Dearness Relief as on the date of consideration.** For reckoning the income of the parent, the pension originally sanctioned should be taken into account for determining the entitlement and coverage and not the pension after commutation.

4. Procedure for Appointment of Authorized Medical Attendant (AMA) and Empanelment of Hospitals

- As per Sub-Clause 2.3 of Clause 2 of Ordinance No. 6 [Medical Attendance Rules] of Central Sanskrit University, "**Authorized Medical Attendant (A.M.A.)" means any qualified and registered medical practitioner possessing recognized medical qualification not below M.B.B.S. in Allopathic system or its equivalent in Homeopathic and Indian system of medicines and approved by the Competent Authority of Central Sanskrit University.**"
- As per Sub-Clause 5.1 of Clause 5 of Ordinance No. 6 [Medical Attendance Rules] of Central Sanskrit University, "**the Hospitals, Diagnostic Centers other than any recognized Hospital as defined under CSMA Rules, for the purpose of reimbursement of medical expenses for hospitalization will be as approved by the Vice Chancellor of Central Sanskrit University from time to time. For this purpose, the Standing Committees will be constituted at the Campus level and Headquarters level.**

- Since the employees of the University usually reside in different parts/localities of the cities where the HQ Office and Campuses are located, the University shall prepare a panel of AMAs and Hospitals/ Diagnostic Centers in such a way that all the employees/retired personnel and their dependents avail themselves of the medical facilities.
 - **At HQ Level:** - AMAs/Hospitals & Diagnostic Centers shall be appointed/empaneled in such a manner that all the employees and retired personnel residing in 11-districts of Delhi and adjoining NCR areas are covered.
 - **At Campus Level:** - Campuses will also adopt the procedure for empanelment of AMAs, Hospitals & Diagnostic Centers, so that all employees and retired personnel residing in the city where the campuses are located get the benefits of medical facilities.
- While preparing the panel of AMAs, the list of AMAs approved & published by Central Government Employee Welfare Coordination Committee of the respective States/ UTs and/or similar HEIs following the CS (MA) Rules, may also be referred in.
- In case sufficient AMAs are not available for employees and retired personnel at a particular location, the University may invite applications from such employees & retired personnel for nomination and preparing a panel of AMAs. Apart from that, the employees & retired personnel may also submit request for empanelment of AMAs as per rules.
- Standing Medical Committee at Campus level shall examine the question of inclusion/deletion of the Hospitals, Diagnostic Centers and appointment of authorized Medical Attendants and shall make recommendations to the Central Standing Medical Committee. **(As per Clause 5 of Ordinance No. 6 [Medical Attendance Rules] of Central Sanskrit University).** The External Expert of the Standing Medical Committee (at both HQ and Campus levels) should preferably be a retired or in-service Government Medical Doctor. In addition to the above, the Hon'ble Vice-Chancellor will nominate 01 Campus Director and 01 Dean as Special Invitee members.
- The Appointment of Authorized Medical Attendant (AMA) and Empanelment of Hospitals/ Diagnostic Centers shall be done in accordance with Medical Attendance Rules of the University / CS (MA) Rules, 1944.
- **Appointment of 2nd AMA:** - A Government employee, if he so desired, may opt for second authorized medical attendant particularly in respect of disease pertaining to women and children. He may also be given an option to change his authorized medical attendant if he considers it necessary, but at no time can he have more than two authorized medical attendants and his medical claim bills have to be in regard to the medical attention received from those two authorized medical attendants.
- **No AMAs from RMPs owning private nursing homes:** - As a normal practice, registered medical practitioners (RMP) who have their own private nursing homes/ hospitals should not be included in the panel.

5. Procedure for Boarding the Beneficiaries under Medical Attendance Rules of the University: -

- As per Clause No. 1.2 of Medical Attendance Rules [Ordinance No. 6] of Central Sanskrit University, these rules (i.e. Medical Attendance Rules of Central Sanskrit University) shall apply to the employees, persons appointed on deputation/ contract basis against permanent/tenure posts and retired persons of the University. Retired persons will include those retired under the GPF/ NPS Scheme.
- The University will issue a Notification with respect to implementation of these rules along with different formats viz. Option Form, Application form for availing Medical Facility and issuance of Medical Card, Instructions and Guidelines for beneficiaries and campus etc.
- The University will circulate the Option form, Application form for issue of Medical ID Card (Separate for In-service and Retired Employees) with declaration of dependent family member details along-with definition of 'family' as contained under the CS (MA) Rules 1944.
- The admission to the Medical Attendance Rules of CSU shall be on payment of contribution which will be on the basis of pay being drawn by employees and it should be at par with the rates being charged by CGHS by the Central Government Employees. (Clause 3 of Medical Attendance Rules of CSU may be referred). **These subscription rates will be subject to revision by the Govt. of India from time to time.**
- Retired personnel who want to avail medical facilities under these rules can make contribution either on yearly basis or one time (10 years) contribution for whole life validity. The annual contribution by retired personnel shall be renewed every year before the expiry of the validity period. However, any delay due to unavoidable circumstances may be condoned for a maximum period of two months from the date of expiry of the previous period.
- Retired employees who wish to avail medical facilities from CSU may either pay an annual contribution or make a one-time payment for lifetime validity. The medical contribution should be deposited in CSU's Headquarters Office account:-

Account Number:	STATE BANK OF INDIA
10469781338	Delhi Cantt, New Delhi - 110046 IFSC: SBIN0000733

- After making the payment, retirees must inform the Headquarters Office either by e-mail or in person, alongwith proof of payment.
- The annual contribution by retired personnel shall be renewed every year before the expiry of the validity period. However, any delay due to unavoidable circumstances may be condoned for a maximum period of two months from the date of expiry of the previous period.
- The University will identify the depository for collection of Medical Contribution offered by the concerned beneficiaries at CSU, HQ Office and their Campuses.

6. Issuance of Medical Identity Cards

- The Medical Identity Cards for In-Service Employees shall be issued by the Administration Section of the Headquarters Office or the respective Campuses, as the case may be. However, upon inclusion of the service for issuance of Medical Identity Cards on the Samarth Portal, the Administration Section at the Headquarters Office or the respective Campuses (as applicable) shall issue the Medical Identity Cards to in-service employees through the Samarth Portal.
- The Medical Identity Cards of Retired Personnel shall be issued by the HQ Office or Campuses (as the case maybe) after submission of requisite Option Form (Form-3) and Application Form for Issue of Medical ID Card (Form-4) in the respective HQ Office or Campuses (as the case maybe).
- The Medical ID Card shall be issued only after verification of relevant forms (in prescribed proforma) and information by the Administration Section of concerned Office (HQ or Campus, as the case maybe).
- **For In-service Employee:** - The Medical Identity Cards will include Employee's Name, Unique Identity Card Number, Photo, Entitlement of Ward in Hospital, Blood Group, details of dependent family members with photos, Date of validity of card etc.
- **For Retired Persons:** - The Medical Identity Cards will include Retired Employee's Name, Unique Identity Card Number, Photo, Entitlement of Ward in Hospital, Blood Group, details of dependent family members with photos, date of validity of card (as per the amount of contribution).
- The retired persons may collect their Medical ID Cards from the HQ Office or Concerned Campus. However, the University may send the Medical ID Card of those retired persons (especially super senior citizens) by speed post, who are living far or in a remote location.
- The validity of Medical Identity Cards shall be as follows: -
 - **In-Service Employees:** Valid for 5 years.
 - **Retired Personnel:** Valid for 1 year or lifetime, depending on their contributions as per the University's Medical Attendance Rules.

7. Guidelines for Settlement and Reimbursement of Medical Claims: -

(a) Settlement of OPD/ IPD/ Prolonged/ Special Disease Medical Claims: -

- OPD medical bills up-to Rs. 30,000/- (except the prolonged cases) shall be settled at Campus Level itself. However, all OPD Medical Claims exceeding Rs. 30,000/- per employee per annum (at the Campus level) must be forwarded to the HQ Office for approval.
- All In-patient (IPD) Claims will be settled as per the Delegation of Financial Power Rule of CSU, Delhi.

- The prior approval for availing treatment under the prolonged category shall be granted by the Hon'ble Vice-Chancellor, CSU, Delhi. The medical reimbursement claims for prolonged disease will be settled at Campus level and HQ Level (as the case may be).
- It is the responsibility of concerned Dealing Hands and Section Officer of the Campus to ensure that the IPD/ Prolonged/ Special Disease Medical Claims are in prescribed proforma and has been thoroughly checked with proper documentation and checklist as circulated along with the SOPs.
- Medical Claims in proforma other than the prescribed one and without proper documentation & checklist shall be returned to the campus. **The HQ Office or Campus shall not be responsible for delays in processing of bills on account of deficient papers submitted by the beneficiary, if any are found after submission of claims.**

(b) Timelines for settlement of Medical Claims: -

- The timeline for settlement of normal medical claims is within **30 days** from the date of submission of medical claims papers at the campuses or HQ Office. Further, as regards to normal medical claims forwarded to HQ office, the timeline for settlement of such medical claims is within **30 days** from the date of receipt at HQ office. Every effort will be made to avoid delays at any stage.
- Proper calculation sheet must be prepared in the file, so that the same could be shared with the beneficiaries, if there are requests for reasons for the deductions.
- In case medical claims require opinion of specialists, the total time will be **45 days** from the date of receipt of medical claims at the Office.
- In case some deficiencies persist in documentation, the office shall inform the beneficiary through e-mail/telephone to submit requisite documents.
- **The medical claims of the beneficiaries suffering with life threatening diseases, aged 80 Years and above, shall be processed on priority out of turn.**
- Each Campus must submit quarterly data detailing the medical bill reimbursements (OPD, IPD, and Prolonged) for each employee to the HQ Office.
- All medical reimbursement claims shall be subject to strict audit scrutiny by a team of officials from the HQ Office or as appointed by the Competent Authority.
- As a part of audit, the HQ Office may direct the campuses to submit the medical claims (settled at Campus Level itself) of any employee(s) on random basis, which shall be binding upon all the campuses.

(c) Establishment of a Separate Medical Cell: -

- The implementation of Medical Attendance Rules to the In-Service and Retired Employees and settlement of medical claims will entail additional workload in HQ Office and Campuses. For timely and proper settlement of medical claims, a separate Medical Cell may be established in the HQ Office with a designated e-mail id.
- At HQ Level, all the work pertaining to the Medical Cell shall be monitored by the Assistant Director/ Section Officer with two staff members (One L.D.C/U.D.C/Assistant and One Office Assistant/ DEO).

- The University may engage a retired government servant at the level of Section Officer or above, as Consultant on fixed remuneration who is retired from CGHS/ Central Government Office/Department and is well versed in handling the matters related to Medical Claim Settlement.
- At campus level, the Medical Cell shall be headed by the Section Officer with one staff member (One L.D.C/U.D.C/Assistant or One Office Assistant/ DEO).

(d) A dedicated section titled '**Medical Services**' will be created on the main website and on the websites of all campuses. This section will provide comprehensive information on the Medical Attendance Rules of CSU, including SOPs, instructions, brief guidelines, prescribed formats, and a list of empaneled AMAs, hospitals, and diagnostic centers and other relevant documents.

Treatment by Authorized Medical Attendant (AMA): -

- Reimbursement of Consultation, Injection Fees, etc., shall be done strictly as per approved rates contained in CS (MA) Rules, 1944.
- Reimbursement of Laboratory Test, Investigations, Radiology Test etc., should be carried out only in recognized hospitals/ diagnostic centers as defined in CS (MA) Rules or in hospitals/ diagnostic centers approved by the University.
- There should be reasonable gap between the closing of the first spell of illness from one disease and recurrence of the same disease for a second time to justify a fresh claim in respect of medical attendance at the consulting room of AMA/ resident of patient. In case, however, where the patient has had to continue medical attendance for a second spell for an entirely new disease other than the one treated earlier, soon after the first spell, the second spell should be treated as a fresh one. A separate claim should be referred to for such a spell.
- The controlling authority may use their discretion to determine whether a case of medical attendance is a fresh one or continuous, normally on the basis of prescriptions, etc., and the essentiality certificate issued by the authorized medical attendant. However, in cases of doubt, they are free to see the advice of the Government Doctor/ District Medical Officer or the Director of Health Services of the State in the matter.
- The cash memos for purchase of medicines must be countersigned by the AMA prescribing the medicines and the Essentiality Certificate [Certificate-A] (Form-6) must contain the name of all the medicines prescribed and the amount incurred on the purchase of each medicine.
- Production of original prescription by the claimants along with the claim papers may be insisted upon by the controlling authority, if considered necessary by them in order to enable them to verify the prescribed ceilings on the number of consultations/ visits etc., as per CS (MA) Rules and in order to satisfy themselves about the genuineness of claims.

(e) Treatment at Recognized/ Approved Hospital: -

- Treatment should be taken at all State Government/Central Government hospital or approved Hospital as defined under CS (MA) Rules or at Hospital approved by the University.
- Reimbursement of Consultation, Injection Fees, etc., shall be done strictly as per approved rates contained in CS (MA) Rules, 1944.

- In case of OPD treatment taken at recognized hospital, the essentiality certificate/ counter signature/verification by treating doctor is not necessary (as per the instructions contained in Ministry of Health and Family Welfare OM No. H.11022/01/2014-MS dated 15.07.2014) (**copy enclosed**). However, essentiality certificate would be required when the treatment is taken from an AMA on OPD basis.

(f) Indoor Hospital Treatment: -

- The Central Sanskrit University employees and retired persons shall be entitled to medical facilities in: -
 - All State/Central government hospitals
 - Any hospital under CGHS/ CS (MA) Rules
 - Any hospital approved by the University
- However, for treatment in hospital approved by the University, the reimbursement would be subject to limits of admissible charges/ package rates approved by the Govt. of India from time to time for CGHS beneficiaries.
- **In case of Indoor Hospital Treatment, the reimbursement shall be subject to production of following documents: -**
 - Discharge Summary (Copy or in original)
 - Original Bill of Hospitalization with clear details of Name of Patient, Date of Admission, Date of Discharge, Bifurcation of expenditure incurred on various medical facilities viz. Room Rent, Laboratory, Medicines, Procedures, Surgery etc.,
 - Essentiality Certificate [**Certificate-B**] (**Form-7**) duly signed by Treating Doctor/ Medical Superintendent/Concerned Officer-In charge of the hospital.
 - Invoice (in original) needed in case of implants/devices specifying batch number and specifications of the device/implant.
 - Cash Receipt/ Cash Memo (in original) issued by the Hospital/ Chemist/ Diagnostic Centre
- In case of Indoor Hospital Treatment in which below surgeries (but not limited to) are performed, the reimbursement shall be subject to production of following additional documents: -

(1) In case of Cataract Surgery with Intra Ocular Lens (IOL) Claims:

- Original Sticker of IOL with batch number of IOL, duly signed and stamped by the surgeon of treating hospital
- Discharge summary/ prescription to mention the Type of IOL (Hydrophobic Foldable/ Hydrophilic Acrylic/ Scleral Fixated/ PMMA (AC/PC) used
- Type of Cataract surgery done
- Reimbursement of LASIK Surgery and INTACS Rings is not recommended. However, therapeutic and bandage contact lenses for Keratoconus of Cornea Ulcers can be considered on case-to-case basis.

(2) For Cardiovascular Stent: -

- Outer pouch of the stent with sticker on it with batch no and other detail.
- Invoice of the stent from the private empanelled hospital with batch number and details of stent.
- Certificate from empanelled hospital that they have not charged the beneficiary more than rate at which stent has been procured by the hospital.
- Angiography report

(3) For pacemaker, combo device, defibrillator, Rotablator etc.,

- Copy of terms of warranty.
- Sticker of device having batch number
- ECG and Holter Report.
- ECHO Cardiography report.
- In case of replacement, copy of warranty of earlier device to be submitted.

(4) For Knee and Hip Implants:

- Cost knee implants component wise along with brand name, name of manufacturer/ importer/ batch number/ specifications and other details, if any to be mentioned in the final bill/ invoice.
- **Prior permission from the Competent Authority is necessary in such case.**

(g) Treatment under Prolonged Category: -

(1) Cases requiring hospitalization and cases of prolonged treatment not requiring hospitalization: Cases of medical treatment requiring hospitalization will normally be referred to a Government/ Recognized/ University Empaneled hospital by the AMA for admission.

(2) If hospitalization is not considered necessary but treatment is expected to be prolonged requiring either more than four consultations/ visits within a period of ten days from the date commencement of treatment, or more than a course of fifteen injections, as the case may be, either separately or concurrently, a patient should be referred to the OPD of a Govt./ Recognized/ University empaneled hospital by the AMA at the earliest, unless reference to a specialist is considered necessary.

(3) In cases where a patient is so referred to a Government/ Recognized/ University Empaneled Hospital for treatment by the AMA, the Medical Authorities of the hospital concerned may treat the patient at the OPD. Charges, if any, levied at the OPD according to the rules of the hospital concerned, will be reimbursed (restricting to CS (MA)/ CGHS rates). The Medical Officer In-charge of the case at the OPD will be regarded as the AMA, who would, inter alia, advise hospitalization in cases where it is required.

(4) A case of 'prolonged treatment' not requiring hospitalization may be defined as a case of single and continuous spell of illness which required either more than four consultation/ visits within a period of ten days from the date of commencement of treatment, or more than a course of fifteen injections, as the case may be, either separately or concurrently.

(5) Prolonged medical attendance and treatment should thus be obtained only at the OPD of a Govt./ Recognized Hospital, either direct from the very beginning or on the advice of the AMA from the date he so advises in accordance with **(2) to (4) above.**

(6) In cases where reference is made by the AMA to the OPD, the AMA should make a mention to that effect in the essentiality certificate giving the date of such reference. Two Essentiality Certificates will be required in such cases, one pertaining to medical attendance treatment at the consulting room of the AMA and other in respect of treatment at the OPD from the Medical Officer In-Charge of the case at the hospital.

(7) The reimbursement in above categories of treatment shall be done in accordance with Clause No. 4.1 of Ordinance No. 6 [Medical Attendance Rules] of Central Sanskrit University and CS (MA) Rules 1944.

(8) It is mandatory to submit the Essentiality Certificate (**Certificate-A**) [**Form-6**] along with Reimbursement Claims of Treatment under Prolonged Category/ requiring Specialist Consultation.

- It is also mandatory to submit the Lab Reports/Radiology Reports along with the prescriptions. Additionally, the claimant must provide a certificate from the treating doctor certifying that the treatment falls under the "prolonged treatment" category/ requires life-long medications (as the case may be). **Such certificate shall require to be renewed on annual basis.**

(h) Treatment for Special Diseases: -

- Reimbursement of claims shall be restricted to only those diseases or medical conditions classified as "Special Disease" under the CS (MA) Rules/CGHS Rules. As per CS (MA) Rules, treatment of medical conditions under the following categories falls under the 'Special Diseases': -
 - **Cancer**
 - **Diabetes**
 - **Mental Diseases**
 - **Poliomyelitis, Cerebral Palsy and Spastics**
 - **Tubercular Disease**
 - **Leprosy**
 - **Thalassaemia Major**
 - **Hepatitis 'C' &'D'**
- It is also mandatory to submit the Lab Reports/Radiology Reports along with the prescriptions. Additionally, the claimant must provide a certificate from the treating doctor certifying that the treatment falls under the "Special Disease" category/ requires life-long medications (as the case may be). **Such certificate shall require to be renewed on annual basis.**

- It is mandatory to submit the Essentiality Certificate (**Certificate-A**) [Form-6] along with Reimbursement Claims of Treatment under Special Disease Category.

(i) Treatment under Emergency Conditions

- In case of emergency where the reference from the A.M.A. is not possible, the medical Consultation may be obtained in any of the Government Hospitals/approved Hospital/ Nearest Hospital nearest to the emergency. However, a certificate to the effect of emergency will have to be obtained from the treating physician/ Officer In-Charge of concerned Hospital such immediately thereafter and in any case during the course of such treatment.
- The reimbursement in such emergency cases shall be done as per approved rates contained in the CS (MA) Rules/ CGHS/AIIMS Rates as revised from time to time.

(j) Dental Treatment: -

Treatment of dental problems may be availed in any private hospital recognized under CGHS/ CS (MA) / University Empaneled Hospitals. The reimbursement of expenditure incurred will be made for only those dental problems which are covered under prevailing CS(MA)/ CGHS Rules.

(k) Confinement, pre-natal and post-natal treatment: - A Government servant's wife is entitled to receive medical attendance and treatment for confinement also in a recognized hospital. Reimbursement of the expenditure incurred on pre-natal and post-natal treatment of the wife of a government servant will be allowed in the same way as treatment for any other disease. [The term 'pre-natal' and 'post-natal' treatment means treatment received by the wife of government servant before and after childbirth for physiological or other disability attributable to child-birth]

(l) Reimbursement of In-Vitro Fertilization (IVF) Treatment: -

- The Reimbursement of IVF Treatment shall be done strictly in accordance with the Ministry of Health and Family Welfare OM No. Z.15025/5/2011-CGHS III/ CGHS (P) dated 22.11.2011 (copy enclosed).

(m) Treatment for Occupational Therapy, Speech Therapy and Applied Behavior Analysis (BA) based therapy in individuals with autism spectrum disorder (ASD)/ Non-Autistic person children with ADHD and specific learning disabilities: -

- The reimbursement shall be done in accordance with the instructions contained in Ministry of Health & Family Welfare OM No. S.11030/86/2022-EHS dated 01.05.2023 (copy enclosed).

8. Reimbursement of Medicines: -

- Medicine should be issued up to **03-months** in case of beneficiaries undergoing treatment for chronic illness. In case of beneficiaries visiting a foreign country, medicines up to **06-months** are issued in respect of chronic illnesses, based on valid prescription and documentary support of visit to a foreign country as per Rules.

- Reimbursement of OPD Medicines may be considered in case of following post operative treatment: -
 - Post operative cases of major cardiac surgery/ cardiology
 - Oncology cases
 - Post Operative Organ Transplant cases
 - Post operative joint replacement cases
 - Post Operative Major Neurological/ Neurology cases.
- In above 5-post operative treatment cases, the reimbursement will be permissible only if the initial treatment has been taken with prior permission of Competent Authority in a Government/ CGHS/ CS (MA) Recognized/ University Empaneled Hospital. The reimbursement will be allowed for an initial period of six months from the date of discharge from the hospital and in case further extension is required, fresh recommendations from a government specialist will have to be obtained for further continuation of treatment.

9. Reimbursement of Nebulizer: -

- The ceiling with regard to the purchase of nebulizer is Rs. 3000/- or actual cost, whichever is less.
- Permission for use of Nebulizer/ Ex-Post facto approval may be given only on the advice of the Senior Physician or above or Medical Specialist of equivalent rank of a government hospital.
- Replacement may be permitted only after completion of average life of 05-years. No request for provision of another nebulizer may be entertained within 5-years from the date of initial purchase.

10. Test/ Investigations at Private Hospitals/ Diagnostic Labs/ Imaging Centers empaneled by University/CGHS/CS (MA) Rules: -

- In case of beneficiaries availing tests/ investigations at private hospitals/ diagnostic labs/ imaging centers empaneled under University/CGHS/CS (MA) Rules on the recommendation of their concerned AMAs, the medical prescription issued by an AMA/Government Specialist prescribing diagnostic tests/ investigations shall be treated as valid for a single use within a period of two weeks from the date of prescription. However, the medical prescription shall remain valid beyond two weeks for undertaking diagnostic tests/ investigations, if specifically prescribed by AMA/ Government Specialist, about the date or period by which the prescribed test is to be conducted for a routine check-up or follow up treatment. The medical prescription would require revalidation or issued of a fresh prescription from the prescribing AMA/ Government Specialist for getting the prescribed test done after expiry of the validity period of two weeks or as prescribed by the AMA/ Government Specialist, as the case may be.

11. Treatment outside India: - No reimbursement shall be admissible for any medical treatment taken abroad under these facilities. However, in cases of deputation/official duties assigned by the Competent Authority, medical bills shall be reimbursed in accordance with CGHS/CS (MA) Rules, subject to prior approval of the Competent Authority.

12. Indian and Homoeopathic System of Medicine: -

(a) Appointment of Authorized Medical Attendant (AMA): -

- As per Sub-Clause 2.3 of Medical Attendance Rules of Central Sanskrit University, "Authorized Medical Attendant (A.M.A.)" means any qualified and registered medical practitioner possessing recognized medical qualification not below M.B.B.S. in Allopathic system or its **equivalent in Homeopathic and Indian system of medicines** and approved by the Competent Authority of this University.
- The University may appoint even a private registered medical practitioner as an Authorized Medical Attendant in respect of any or all class of its employees. While appointing the private registered medical practitioner, following general principles as laid down in CS (MA) Rules should be followed: -
 - The private registered medical practitioner when appointed as AMA would have to adhere strictly to the provisions of rules and orders issued from time to time in Indian System of medicine and Homoeopathy under CS (MA) Rules.
 - The reimbursement of medicines admissible will be allowed only in accordance with the CS (MA) Rules, 1944.
- The reimbursement to essential expenditure under Indian and Homeopathic System of Medicine shall be done for a maximum of four consultations at an interval of 10 days and to restrict the total duration to forty days at OPD level. The referral to the hospitals can be done by the AMA after this duration only.
- The beneficiaries under the Medical Attendance Rules of the University shall purchase only licensed ASU&H Medicine (in case of AYUSH Treatment)/ drugs prescribed by their AMA from the nearest sources available.
- The concerned office (HQ Office or Campus as the case may be) should ensure the authenticity of the medical claims submitted.

(b) IPD Treatment in Indian, Unani and Homeopathic System of Medicine (AYUSH): -

- Prior authorization/permission is required for availing IPD Treatment at empaneled AYUSH Hospitals/ Centers empaneled by university or as defined under CGHS/ CS (MA) Rules.
- The authorization/permission is to be issued by the concerned office (HQ or Campus as the case may be).
- The duration of IPD treatment should not exceed **34 days for Ayurveda and 28 days for Yoga and Naturopathy**.
- The package rates for IPD treatment under the Indian and Homeopathic System of Medicine in empaneled AYUSH Hospitals/ Centers empaneled by university or as defined under CGHS/ CS (MA) Rules includes all charges pertaining to a particular treatment/ procedure including registration charges, admission charges, accommodation charges, cost of medicine, Panch Karma Charges, Labour Room Charges, charges for Kshar sutra operation/ procedure charges, doctor/ consultant visit charges, monitoring charges, operation theatre charges, procedural charges/ surgeon's fee, cost of disposable surgical charges and cost of all sundries used during hospitalization related to routine investigations, physiotherapy charges, etc., from the time of admission to till discharge. This also is inclusive of all sub-procedures and related procedures to complete the treatment.

- No additional charges on account of extended period shall be allowed if that extension is due to any improperly conducted procedure.
- Reimbursement for treatment/ procedure in IPD Treatment under the Indian and Homeopathic System of Medicine shall be done strictly in accordance with the prescribed package rates contained in CGHS/ CS (MA) Rules.
- For the treatment availed by the beneficiary from empaneled AYUSH hospital of university or as defined under CGHS/ CS (MA) Rules from outside the city where he is residing, no T.A. & D.A. will be reimbursed, provided that the treatments is available in the city of residence.

13. Medical Advance, its Disbursement and Adjustment: -

- Medical Advance will be admissible to Serving Employees (Permanent and Temporary), persons appointed on deputation/ contract basis against permanent/ tenure posts and Retired Persons, irrespective of pay limit.
- An advance may be paid for in-patient treatment in a recognized hospital and for treatment of TB, Cancer, Acute Myeloid Leukemia and Chronic Active Hepatitis 'B', 'C' & 'D' at the consulting room of Medical Officer, at the residence of Government servant or as an Outpatient.
- An advance may also be paid for purchase/ replacement, repair and adjustment of admissible artificial appliances.
- Application of advance should be accompanied by necessary certificate from the Medical Officer/ Specialist indicating the duration of treatment and the anticipated cost thereof, under the rules.
- For temporary officials, surety from permanent government servant is required.
- Amount of Advance for Indoor Treatment is **90% of approved CGHS Package rates**, irrespective of major/ minor treatment, on receipt of a certificate from the treating physician of Govt./ Recognized hospital. For outdoor treatment, advance is limited to **90% of the total estimate expenditure**, if total estimate of expenditure including test/ investigation is more than Rs. 10,000/-.
- In case of treatment procedures for which there are no prescribed CGHS Package rates, the admissible advance amount is calculated item-wise at CGHS rates. Item(s) for which there are no CGHS rates, AIIMS rates shall be considered. **If there are no CGHS/ AIIMS rates, actual estimate for the procedure shall be considered. The hospital shall provide item-wise break-up of the estimate to facilitate processing of the requests for medical advance.** Accordingly, 90% of the admissible rates arrived would be considered for grant of medical advance.
- The advance may be paid in one or more instalments for the same illness or injury, subject to the limit prescribed. There is no limit for the number of advances payable to an official with reference to himself and to each member of his family and for each case of illness.
- Advance paid to the official is to be adjusted against the relevant claim and balance, if any, recovered from pay in four instalments. In case of prolonged treatment, reimbursement may continue to be allowed on the basis of necessary certificate in this regard, the advance being adjusted in the final claim.
- Advance is to be released within 10-days of receipt of the request for advance.

- When advance is paid directly to the hospital, **the employee should submit the adjustment bills for final settlement within one month from the date of his discharge from the hospital.** The Head of Office will correspond directly with the hospital for refund of the unutilized balance, if any.
- In case of serious illness, accidents where the official is unable to apply, the advance may be sanctioned on an application in writing made on his behalf by his wife or other legal heir.

14. Payment / Reimbursement of medical expenses from two sources viz. from the Insurance Companies and from the University: -

- The reimbursement shall be done in accordance with instruction contained in Ministry of Health & Family Welfare OM No. S.11011/4/2003-CGHS (P) dated 19.02.2009 (copy enclosed).

15. Travelling Allowance for Medical Attendance and/or treatment: -

- The reimbursement of travelling allowance and sanction of advance of TA for medical attendance and/or treatment under the Medical Attendance Rules of Central Sanskrit University shall be made in accordance with the provisions contained in CS (MA) Rules.

16. Reimbursement of Ambulance Charges: -

- The beneficiaries will be entitled to reimbursement of charges paid for an ambulance used for their conveyance subject to following conditions: -
 - If it is certified in writing by the medical authorities mentioned under Medical Attendance Rules of Central Sanskrit University or as defined in CS (MA) Rules that conveyance of the patient by any other means of conveyance would definitely endanger the life of the patient or grossly aggravate the condition of his/ her health.
 - If the ambulance is used to convey a patient to a place of treatment or to convey a patient from one hospital to another for purposes of certain medical examinations, etc.
 - If the ambulance used belonged to government or local fund, or a social service organization such as the Red Cross Society, etc.,
 - If the ambulance is used within the same city- Municipal or Corporation area, Military Station and Cantonment Board area, etc.,

17. Submission of various Annexures/ Checklists required to be mandatory filled and submitted by the Campuses of CSU, Delhi while forwarding the medical claims to HQ Office for settlement and reimbursement: -

- All the campuses of the University while forwarding the Medical Claims pertaining to IPD/ Hospitalization, Prolonged Illness/ Special Disease are mandatorily required to fill and attach the following annexures/ checklists with the medical claims of the employees/ retired persons: -

Annexure No.	Type of Annexure
Annexure-A	Checklist for reimbursement of medical claims for Inpatient Treatment/ Hospitalization/ Hospitalization under emergency condition

Annexure-B	Checklist for reimbursement of medical claims for Prolonged/ Special Disease Treatment
Annexure-C	Detailed Calculation Sheet

- The above annexures/checklist shall be filled and countersigned by the Campus Director.
- The medical reimbursement claims not supported by the above annexures/checklist will not be considered and returned for re-submission. For timely settlement of bills at HQ Level, responsibility of Dealing Hands and Section Officer may be fixed at Campus Level.

18. Abuse of Medical Reimbursement Facilities/ Fraudulent Claims: -

- Medical reimbursement bills of the individuals will be subject to the strict scrutiny or audit, if required.
- In case of doubtful claims, inquiry will be conducted through the vigilance section/department of the university.
- Some of the areas of misuse of Medical Facility are: -
 - **Seeking membership of ineligible dependents**
 - **Not intimating change of status of dependents due to marriage/ employment/ improved financial status**
 - **Seeking membership on fraudulent or tampered documents which subsequently get detected.**
 - **Availing treatment facility either from AMAs or in approved hospital for unauthorized individuals in the name of dependents.**
 - **Preferring bogus or inflated claims for re-imbursement with intention to defraud.**
- In case if it is found that Medical Reimbursement Bills containing Prescription, Investigation Reports, Cash Memos, Medicine Bills etc., are forged in nature, it will be treated as financial fraud and criminal offence. In such cases, Penal/ Disciplinary action will be taken as per CCS (Conduct) Rules/ CCS (CCA) Rules/CCS (Pension) Rules.
- Further, in cases where the beneficiary is found guilty by the duly constituted Committee, medical benefits shall be suspended for a period of two to three years, as the case may be. In instances of repeated offences, medical benefits shall be permanently withdrawn and disciplinary action shall be initiated as per the CCS (CCA) Rules. Additionally, a half-yearly or yearly audit shall be conducted by an internal or external committee/agency to ensure financial transparency and compliance.

19. Maintenance of Sub-Register in respect of individual beneficiary claiming reimbursement under the Medical Attendance Rules of the University:-

- The concerned Medical Cell (HQ office & Campuses) dealing with the settlement of Medical Reimbursement Claims of the beneficiaries under the Medical Attendance Rules of Central Sanskrit University is mandatorily required to maintain the Sub-Register in the following prescribed format:-

Reimbursement of Medical Charges

Sl. No.	Name of the Patient	Relationship with the Employees/ Retired Person	Name of the disease	Name of the Doctor	Consultation Fee	Injection Fee	Total
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

Period of Claim	Name of the Chemist	Cost of Medicines Purchased	Amount Passed for Payment	Progressive Total	Pathological Charges	Remarks
(9)	(10)	(11)	(12)	(13)	(14)	(15)

Note:

- (1) In all other matters not specified in the Medical Attendance Rules of University and this SOP, the provisions of Central Services (Medical Attendance) Rules and rules governing CGHS beneficiaries as amended from time to time and the instructions/orders issued there-under shall apply mutandis to the employees and retired persons of Central Sanskrit University except those which have been specifically excluded under these Rules.
- (2) The Medical Attendance Rules (Ordinance No. 6) of the University, as amended from time to time, shall be automatically applicable to all employees, persons appointed on deputation/contract basis against permanent/tenure posts, and retired personnel of the Central Sanskrit University, with effect from the date of Gazette Notification. Deduction of the monthly contribution shall be made from the salary of the employee at the rates prescribed in Clause 3 of Ordinance No. 6 (Medical Attendance Rules). Reimbursement of medical claims under the Medical Attendance Rules to retired personnel shall be subject to payment of contribution either on an annual basis or as a one-time contribution for ten years, which shall confer validity for the entire lifetime.
- (3) The above Standard Operating Procedures (SOPs) for Medical Attendance Rules of Central Sanskrit University, Delhi are guidelines to ensure uniformity, transparency, and compliance in availing of medical facilities by beneficiaries. While Medical Attendance Rules of Central Sanskrit University, Dehi set the "what" and "why" of medical entitlements, SOPs define the "how" of their implementation. Together, they ensure a cohesive system where policies are both well-defined and practically executable.
