



TEA BOARD INDIA

(Under Ministry of Commerce & Industry, Deptt. of Commerce, Govt. of India)
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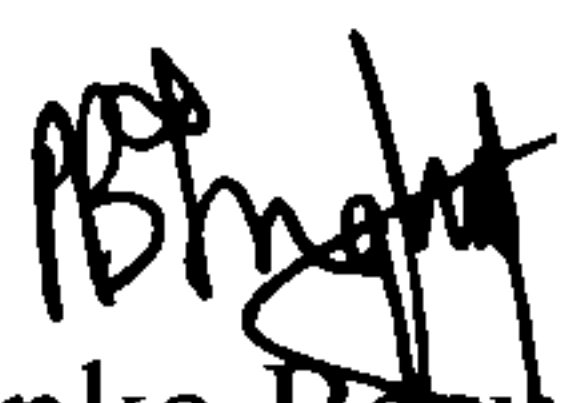
Office Order No. 01/2017

In partial modification of Office Order No.23/2016 dated 15th December 2016, it has been decided that the Medical Attendance and Treatment of the Officers and Employees of the Board and their families will be regulated as per the provisions laid down in the Central Services (Medical Attendance) Rules 1944 as amended from time to time.

The major guiding principles for Medical Attendance, Treatment and Reimbursement as provided for in the CSMA Rules, is enclosed herewith as Annexure for reference of all concerned.

This issues with the approval of the Competent Authority.

Enclo: Annexure.


(Priyanka Basu Ingty)
Secretary

Ref.File No. 22/Med/Estt/90/P-III

Annexure

1. The officers and employees of Tea Board and their families can avail treatment in the following hospitals.

a. All State Govt. Hospitals

b. All hospitals recognized by State Govt./CGHS/CSMA rules

c. All hospitals fully funded by either Central Govt./State Govt.

This is subject to the condition that they will be reimbursed medical expenditure @rates fixed by CSMA Rules or the actual expenditure incurred, whichever is less

2. Only Doctors from the panel drawn up by the Central Govt. Employees Welfare Coordination Committees and nominated by the Board would be recognized as AMA.

3. Under certain circumstances for specialized treatment for heart, kidney etc. reimbursement @CGHS beneficiaries allowed and this would be regulated on a package deal basis. The permission should be taken from CA of the Board.

4. As per provisions of CSMA rules, medical attendance includes attendance at a hospital i.e. at the outpatient department of the hospital. Hence, it follows that medical attendance from the very beginning may also be received by patients at the outpatient department of the Govt. hospital/dispensary directly without prior approval of AMA.

5. Cases of medical treatment requiring hospitalization will normally be referred to Govt./Govt. recognized hospitals by the AMA for admission unless reference to a specialist is considered necessary. It has further been clarified that employees will be allowed to receive treatment as inpatient for himself or members of family without consulting AMA in a hospital where he is ordinarily entitled to receive treatment under rules i.e. hospital to which he would be admitted had he consulted his AMA.

6. For the employees of the Board who have been referred for treatment in Govt hospitals, if he desires to obtain treatment in a private hospital recognized under CGHS/CSMA rules, he may seek permission of C.A. for indoor treatment on the basis of medical prescription issued by the concerned AMA.

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7. In case of tie up with hospitals which are either recognized by the Central Govt. under CGHS/CSMA/State Govt. and reimbursements will be as provided for under CSMA rules or CGHS rates in case of major illness like bypass surgery, kidney disorder etc involving packages. Additional expenditure incurred over and above the said CSMA rate or CGHS rate for major illness will have to be borne by the employee concerned.

8. The part time medical attendant whose services have presently been made available to the employees of H.O. will be continued for the benefit of the employees. No employee will be allowed to avail services of Private CGHS/CSMA recognized hospital or tie up hospital without the express referral by the AMA or Govt. hospital and without due approval of CA as provided under CSMA rules.

9. In emergent cases involving accidents, serious nature of disease *regular emergency case* etc. the employees can take treatment in private hospital in case Govt/Recognized hospital is not available nearer than the private hospital. The controlling authority of the Board will examine the merits of the case whether it was case of real emergency necessitating admission in a private institution and can take medical opinion. *Necessary Certificate from the concerned Hospital certifying the emergency may be obtained.*

10. As far as medical advance is concerned, CA of the Board may sanction medical advance up to Rs. 10,000/- or the amount recommended whichever is less for indoor treatment for diseases where duration of treatment is 3 months or less. In case of major illness like bypass surgery, kidney diseases etc advances will be limited to 90% of the package deal wherever it exists or according to the estimates submitted by the Govt./Govt. recognized private hospital whichever is less and balance payable on final adjustment. In case of TB where duration of treatment is more than 3 months, advances will be limited to 80% of the estimated cost of the treatment or Rs. 36,000/- whichever is less. Advances will be paid directly to the hospitals concerned on receipt of an estimate and adjustment bills are to be submitted by the employees within time period of 1 month from the date of discharge from the hospital.

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11. The bills for medical claims should be submitted within 3 months and CA of the Board may condone the delay as provided for under the CSMA rules, on the merit of each case. However, the condonation of the delay will not be considered as a routine matter. All reimbursements should be restricted to the rates specified under CSMA rules and as already mentioned only in case of major illness, reimbursement of specialized treatment regulated on a package deal basis can be made as per CGHS rate.

12. As far as ward facility is concerned, the same will be regulated as follows:

Up to GP of Rs. 4800	General ward
GP of Rs. 5400 and GP of Rs. 6600 with less than two years of service	Semi private ward
GP of Rs. 6600 with 2 years of service and above	Private ward

13. The declaration regarding income and residence of the parents and their dependents should be furnished by employees once in the beginning of every calendar year.

14. As far as reimbursement of expenditure for immunization is concerned, the matter will be regulated under Govt. of India's decision no. 5 below rule 6 of CSMA rules.

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