

DELHI LEGISLATIVE ASSEMBLY

BULLETIN PART-II

(General information relating to legislative and other matters)

Monday, January 23, 1995/Magha 3, 1916 (Saka)

No.148

CLAIM OF REIMBURSEMENT CHARGES

Kind attention of the Hon'ble Members is invited to the Members of Legislative Assembly of the National Capital Territory of Delhi (Salaries, Allowances and Pension) Order, 1993 under which they are entitled free of charge to accommodation in hospitals maintained by the Govt. and also to medical treatment in accordance with the Medical Attendance Rules, as amended from time to time, as applicable to Group 'A' Officers of the highest grade of the administration of Delhi.

Relevant extracts from the Medical Attendance Rules are reproduced below for kind information :

"Rule 3(1). A government servant shall be entitled, free of charge, to medical attendance by the authorised medical attendant.

(2). Where a Government servant is entitled under sub-rule(1), free of charge, to receive medical attendance, any amount paid by him on account of such medical attendance shall, on production of a certificate in writing by the authorised medical attendant in this behalf, be reimbursed to him by the Central Govt :

Provided that the controlling officer shall reject any claim if he is not satisfied with its genuineness on facts and circumstances of each case, after giving an opportunity to the Claimant of being heard in the matter. While doing so, the controlling officer shall communicate to the Claimant the reasons, in brief, for rejecting the claim and the claimant may submit an appeal to the Central Government within a period of forty-five days of the date of receipt of the order rejecting the claim.

A copy of the certificate for claiming reimbursement of medical expenses is enclosed.

Cash Memos and Essentiality Certificate to be Countersigned

Cash memos for purchase of medicines must be countersigned by the Doctor prescribing the medicines.



Duplicate cash memos in case of loss :-

Only serially numbered cash memos with particulars of suppliers printed on it should be accepted. In case of loss of original cash memos by an official, "duplicate" cash memos submitted by him may be accepted provided the circumstances leading to the losses of the original are fully and satisfactorily explained and the "duplicate" cash memos are duly countersigned by the authorised medical attendant.

Time-limit for medical claims  
Bills to be preferred within three months :

It has been decided that final claims for reimbursement of medical expenses of Central Government servants in respect of a particular spell of illness should ordinarily be preferred within three months from the date of completion of treatment as shown in the last Essentiality Certificate issued by the Authorised Medical Attendant/Medical Officer concerned. The Controlling authorities shall also be empowered not to entertain a medical claim not preferred by a Central Govt. servant within three months of the completion of the treatment where they are not satisfied with the reasons put forth by the Government servant for late submission of the medical claim or where the claim prima facie incomplete.

Normally the Controlling Officers should reject any claim presented after three months unless they are satisfied with the reasons for delay which are to be recorded and can be examined in audit.

(G.I., MH. No.F.29-40/68-MA dt. the 15th October, 1968 and dt. 28th December, 1970).

The time-limit of three months for the presentation of medical claim should be strictly adhered to and a reimbursement claim which is not supported by a regular voucher/cash memo should not be allowed.

(G.I., MH No. S.14023(1)/B/74-C dated 21st August, 1974).

Reimbursement of medical charges  
Reimbursement of charges for clinical tests paid to private practitioners/institutions.

(12) Reimbursement of charges for various treatment/examinations taken in private recognised hospitals under CS(MA) Rules, 1944. The Ministry of Health and Family Welfare have been receiving references from various Ministries/Departments regarding the regulation of claims on account of charges of various treatment/examinations undertaken in private hospitals recognised or otherwise under the CS(MA) Rules with reference to charges of Government hospitals for which comparative charges are not available due to the non-availability of such facilities.

2. It has not been decided by this Ministry that the claims for reimbursement of charges of treatment/examinations, etc. for



which corresponding rates are not available in the nearest Government hospitals for regulating such claims may be reimbursed without referring them to this Ministry/ Directorate General of Health Services by the concerned Ministries/Departments by (a) restricting such claims to the rate of Government hospitals in the concerned State, and (b) where such rates/facilities are not available in the concerned State full reimbursement of such charges may be made, provided the Directorate of Health Services of the concerned State certifies to that effect.

(G.I., Min. of Health and Family Welfare, O.M. No. S.14021/5/88-MS, dated the 17th October, 1988).

Declaration of Family/dependents

3. The Hon'ble Members are required to furnish the details of their family/dependent members such as name of the person age Relationship, service occupation, if any, in respect of whom they wish to claim medical reimbursement once every year.

Form claiming reimbursement of medical expenses :

A copy of the form of application for medical claims to be submitted alongwith the Essentiality Certificate, is enclosed.

The above rules are only illustrative to enable the Hon'ble Members to claim their medical charges incurred by them for treatment and each and every case is to be dealt with in the light of the Central Services(Medical Attendance) Rules.