

MEDICAL REIMBURSEMENT POLICY FOR THE STATE GOVT. EMPLOYEES

General Conditions:

- Full reimbursement of charges in all government hospitals.
- Full reimbursement charges in all government medical colleges in country (A Certificate from Medical Superintendent/CS is required stating the colleges is run by the State (Government.)
- Full reimbursement for the treatment taken in an emergency in unapproved hospitals will be allowed equal to PGI, Chandigarh rates with the approval of Administrative Department.
- Head of the department in consultation with concerned Civil Surgeon is competent to certify an emergency.
- The reimbursement of the expenditure incurred on the purchase of medicines for a period of 7 days after discharge from the hospital is fully reimbursable.
- Each and every medical bill is to be presented on proper Performa duly filled in and signed by the claimant. The bill may also be countersigned by the Civil Surgeon/Medical Superintendent.
- The expenditure for the treatment taken in the branches of the approved hospitals shall not be reimbursable.
- The amount of bill is to be calculated as per Package rates fixed by Health Department and PGI Chandigarh rates. If rates are not available, PGI Rohtak rates may be seen. Even after consulting the above rates any rate is not available then AIIMS Delhi rates may be seen. After that the case may be referred to Director General Health Services, Haryana for any clarification regarding rates.
- Medical reimbursement bill is to be presented within 12 months after the completion of treatment but in case of death of the patient/claimant, this limit is extendable by the Health Department.
- TA is admissible only once if patient is referred to other place (outside state) by Civil Surgeon for special treatment along with attendant.
- No TA is admissible for repeated follow ups in OPD.
- Emergency knows no law and no precedents- When human life is at stake (Shakuntala Vs. State of Haryana)
- All pensioners of Haryana Govt. are eligible for treatment as in case of Govt. employees. An affidavit before retirement is given stating the permanent place of settlement after retirement (which can be changed at later stage also). The pensioners will submit their medical

reimbursement claims to their heads of officers at the place of permanent settlement. An Identity Card is to be issued to the pensioner by the Head of Office.

- Vide letter No. 237-4HBW-64/8589 dated 16.03.1964 delivery case is treated as disease and the expenditure on prenatal and postnatal treatment is reimbursable.
- All IAS Officers are entitled for reimbursement of their outdoor medical claims also.
- Ex-post facto sanction-Medical reimbursement claim submitted after 12 months of the completion of treatment shall be referred to Health Department to accord Ex-post facto sanction.
- Cost of CAT Scan is reimbursable for indoor patient only.
- The false drawl of the medical reimbursement bills tantamount to dismissal of the claimant.
- Employee/Pensioner will produce identity card of the department to the hospital in order to establish his identity.

1. Medical Advance

Sr. No.	Name of office	Powers for Medical Advance (w.e.f. 19.09.2016)
1	Head of office	3,00,000/-
2	Head of Department	7,00,000/-
3	Administrative Department	Full Powers

Advance will be allowed percentage of estimated cost of treatment provided by the hospital from where treatment is to be taken.

Govt. Hospital - 90%

Approval Hospital - 75% [Estimate on non packaged rates, PGI Chandigarh + 75% balance amount]

- 50% [Estimate on non packaged rates/PGI Chandigarh rates]

- [Estimate on non packaged rates notified by State Government]

Conditions for grant of Advance for treatment in hospital

- I. Is granted for approved hospitals only (For unapproved hospitals the case may be sent to the Finance Department)
- II. Is granted only after submission of Estimated cost duly signed by the Doctor/Medical Officer and countersigned by the Medical Superintendent,

- III. Is granted to only regular employees (Adhoc/contractual employees are not allowed any kind of advance)
- IV. Is granted to Pensioners/Temporary Employees only with sureties of two permanent /one regular employee. An Affidavit in this regard has also to be taken.
- V. Utilization certificate must be submitted by the employee or pensioner within three months of the sanction of advance for treatment failing which penal interest shall be charged. If amount of advance is misused interest will be charged by the Department.

2. **Fixing of Package and implants Rates. [H.D. letter dated 21.05.2015]**

- Health Department notified package rates for 152 procedures and empanelled hospitals will charge accordingly.
- Full reimbursement will be made to the employees/pensioners on their treatment in empanelled hospital as these hospitals will charge as per fixed package/implant rates.
- The hospital will issue separate bill by for the period of over stay in the hospital due to any complication occurred during treatment. This will be reimbursement as per rates applicable to the hospital i.e. PGI Chandigarh rates + 75% of balance amount of PGI Chandigarh rates.
- Hospital will provide valid accreditation certificate otherwise it will be considered as non-NABH/non-JCI for the purpose of charging lump-sum packaged rates from the patient.

3. **General Conditions**

Employees/Pensioners/Family pensioners should check the list of private hospital empanelled by State Government as list is subject to change from time to time.

2/354/07-IHBIII Dt. 08/01/2008 (Health Department) for the purpose of Medical Reimbursement the term

Family includes

- Wife
- Husband
- Legitimate Children
- Step Children
- Legally adopted children
- Parents
- Widowed daughter
- Sisters wholly dependent on him/her.

- Note: (i) The income of dependants should not exceed Rs. 3500/- per month.
- (ii) Physical & Financial dependence of parents/Mother-in-law & Father-in-law is must.
- (iii) Women employees can opt either her parents/Mother-in-law & Father-in-law. It should be informed in time to the authorities.
- (iv) A joint affidavit by the spouse of the State Govt. can be given for claiming the reimbursement of the bill from one of the office. In this case the limit of income does not apply.

Enhancement of powers for sanctioning of Medical Reimbursement.

Health department letter no. 2/24/2013-1HBIII dated 19.09.16

	15/03/10	25/8/14	19/9/16
Head of Office	50,000/-	1,00,000/-	3,00,000/-
Head of Department	1,00,000/-	5,00,000/-	7,00,000/-
Administrative Deptt.	Full powers	Full powers	Full powers

List of chronic diseases (No.2/640/2005-1HBIII dated 8-6-2005)

1. CAD (Coronary artery disease)
2. Chronic Heart Disease
3. Chronic Respiratory Disease/COPD/ILD/Cystitis Fibrosis
4. Chronic Renal Failure
5. Rheumatoid Arthritis Osteoarthritis
6. Brain Tumor and Malignancy of Different Organs
7. Paraplegia/Quadriplegia/Hemiplegic
8. Epilepsy
9. Multiple Sclerosis/myasthenia gravis
10. Ulcerative Colitis/crohn's disease, coeliac disease
11. Cirrhosis of liver, chronic Hepatitis B&C
12. Thalassemia
13. Psoriasis'
14. Aids
15. Diabetes Mellitus Sclero derma
16. Organ transplant
17. Glaucoma
18. Connective Tissue Disorders, Hegnar's granulomatosis, SLE & Polyarthritis, Nodosse.

- Room heater charges
- Attendant room rent and diet charges
- Vitamins/Tonics (reimbursable if certified by the doctor)

Reimbursement of Denture: (Once in life time)

- Partial Denture
 - One to four teeth Rs. 200/-
 - Five to Ten Rs. 400/-
 - More than ten Rs. 600/-
- Half Denture Rs. 1000/-
- Full Denture Rs. 2000/-
- Knee replacement & intraocular lens are reimbursement once in life time.
- Hearing-aids up to Rs. 3000/- is reimbursable. (After five years it can be replaced if declared condemned by technical expert)

Room Rent/Charges H.D. letter no. 2/56/2014-HB-III dated 21.05.15

Sr. no.	Category	Pay (Basic pay+ Grade pay)	Non-NABH/Non JCI Rates (Per day)	NABH Rates	JCI Rates
1	General Ward	Up to Rs. 19,530/-	Rs. 1,000/-	Rs. 1,150/-	Rs. 1,300/-
2	Private Ward	Rs. 19,530/- to 25,110/-	Rs. 2000/-	Rs. 2,300/-	Rs. 2,600/-
		Rs. 25,120/- and above	Rs. 3000/-	Rs. 3,450/-	Rs. 3,900/-

- Day care charges – up to Rs. 500/-
- Semi Private Ward will be treated as General Ward for the purpose of room rent.

FD U.O.No.5/7/2005-1B&C dated 20.12.2012

The medical reimbursement claims in which treatment is taken from any reputed/specialized Hospital outside the approved list of hospitals are disposed of at the level of Administrative Department subject to the following conditions.

1. Due permission/approval of the appropriate authority in the Administrative Department may be obtained before incurring such expenditure.

W.E.F. 28/05/2003

Reimbursement Amount for Chronic Disease treatment

Indoor as well as outdoor expenditure is reimbursable

- Review of Chronic disease after 2 years from Medical Board.
- Change of option for Chronic disease can be done by the employee after getting chronic disease certificate from the concerned Civil Surgeon at any time.
- Outdoor treatment which is follow up of indoor treatment is reimbursable.
- In the past employee who has opted for chronic disease treatment, the fixed medical allowance was stopped and expenditure for other diseases was also not allowed but vide letter No. 2/157/2022-1HBIII dated 21/04/2008 an amount of Rs. 1500/- per annum is reimbursable for outdoor treatment of other than chronic diseases of their dependants.
- The date for fixed medical allowance can be changed any time during the year.

Reimbursable items:-

- Medicines
- Consumables
- Rubber items
- Cotton/Bandage (Except POP Bandage)
- Disposable Syringe/needles/ven flow
- Ambulance charges (only for transfer of patient to hospital at Govt. rates)
- All kinds of IV sets/Medical Cannula

Non-reimbursable items

- Admission fee
- Telephone charges
- Consultation/Doctor visiting charges
- Eu.D. Cologne
- Toilet Soap
- Toothpaste Brush
- Telcum Powder
- Mineral water
- Deluxe/Single room

2. There is adequate budget provision.
3. The recommendation of Health Department would imply only the grant of the Emergency Certificate by the Civil Surgeon/Chief Medical Officer. There would be no requirement of further clarification/approval from the Health Department (Health Branch of Secretariat) and the medical bills would be reimbursed accordingly.

The condition No. 3 in the previous letter i.e. the verification/recommendation of the Government in the Health Department should be obtained is replaced as above.