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CENTRAL ADMINISTRATIVE TRIBUNAL
PRINCIPAL BENCH, NEW DELHI

OA NO. 2877/2002

This the 1st day of August, 2003

HON'BLE SH. KULDIP SINGH, MEMBER (J)

R.C.Saxena,
Messenger,
S/o late Sh. V.R.Saxena,
Military Hospital, Agra Cantt.

R/o 35-A/25, Jagan Pur Bhatta,
Dayal Bagh, Agra (U.P.).

(By Advocate: Sh. D.N.Sharma)

Versus

1. Union of India through
The Secretary to the Govt. of India
Ministry of Defence,
South Block,
New Delhi.
2. The Director General of Medical Services (Army),
(DGMS-3 (B), Adjutant General's Branch,
New Delhi-110001.
3. The Commandant,
Military Hospital,
Agra Cantt.

(By Advocate: Mrs. P.K.Gupta)

ORDER (ORAL)

By Sh. Kuldip Singh, Member (J)

This is an OA filed by applicant under Section 19 of the AT Act whereby applicant has claimed medical reimbursement for the treatment taken by the wife of the applicant.

2. Facts as alleged by the applicant are that the applicant is a civilian employee in permanent post as Messenger at the Military Hospital, Agra Cantt. He is eligible for medical treatment for self and family members under the provisions of CCS (Medical Attendance) Rules, 1944. Applicant's wife was admitted in the hospital from 12.10.2001 to 18.10.2001. Applicant is stated to have spent sum of Rs.8,396/- and some medicines etc. but the bills have not yet been paid. Applicant also alleges that even the Chief Medical Officer

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report had confirmed that the applicant's wife was a indoor patient and essentiality certificate has also been issue in all respects which is complete and proper and the attendant Surgeon has also confirmed that the medicines prescribed are essential for recovery of the patient. It is further stated that the medicines were prescribed by Surgeon but were given to the patient through attending nurses. Despite that fact applicant has been denied the bills for the medicines.


3. Respondents are contesting the OA. Respondents in their reply stated that the medical bills dduring verification appeared to be doubtful since the supplier of the medicines failed to produce adequate documents connected with the bills. Thereafter all the medical bills alongwith the relevant papers are forwarded to Chief Medical Officer for his verification report on 26.12.2001 who returned his report with the remark that the bills are doubtful. The bills were then forwarded to Area Accounts Officer who returned the bills for being countersigned by the Chief Medical Officer. So the bills were again sent to Chief Medical Officer who expressed his inability to countersign the bills.

4. Thus, it is submitted that since the bills are doubtful, the amount has not yet been paid. However, it is admitted that applicant's wife has been admitted to the Military Hospital and the medicines prescribed have also been administered by the nursing staff attending the patient. In view of these circumstances, when the patient had been admitted to the hospital and all the medicines were administered to the patient in the hospital by the attending nurses, so it seems improper on the Chief Medical Officer to express doubt over the bills submitted by the applicant. Rather Chief Medical Officer should have verified the bills by

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looking into the record maintained by the hospital itself and there also it could be verified whether the medicines in question were administered to the patient or not. The reason given by the respondents expressing doubt over the genuineness of the bills does not appear to be correct. It appears that respondents are denying the reimbursement to the applicant only on sham pretext.

5. Accordingly, I allow the OA and direct the respondents to make the payment of the bills to the applicant. This should be done within a period of 3 months from the date of receipt of a copy of this order.


(KULDIP SINGH)
Member (J)

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