

CENTRAL ADMINISTRATIVE TRIBUNAL  
GUWAHATI BENCH  
GUWAHATI -5

(DESTRUCTION OF RECORD RULES, 1990)

INDEX

O.A./TA/ NO. 264.2009-2009

R.A./CP/NO..... 2015

E.P./M.P./NO..... 2015

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*Biju*  
17/7/2015  
SECTION OFFICER (JUDL.)

*01/07/2015*  
*16.7.2015*

FORM NO. 4  
(See Rule 42)  
CENTRAL ADMINISTRATIVE TRIBUNAL  
GUWAHATI BENCH:  
ORDERSHEET

264

1. ORIGINAL APPLICATION No : 264/2009

2. Transfer Application No : /2009 in O.A. No.-----

3. Misc. Petition No : /2009 in O.A. No.-----

4. Contempt Petition No : /2009 in O.A. No.-----

5. Review Application No : /2009 in O.A. No.-----

6. Execution Petition No : /2009 in O.A. No.-----

Applicant (S) : *Shri J. P. Rathore*

Respondent (S) : *Union of India or any Person*

Advocate for the : *In Person*  
(Applicant (S))

Advocate for the : *C.G.S.C*  
(Respondent (S))

Notes of the Registry	Date	Order of the Tribunal
<p>1. Application is on file is filed/C.F. for : S. O. dated 14.12.09 No. 395 429246</p> <p>Dated: 14.12.09</p> <p><i>N. Jummo</i> 15-12-09 By. Registrar <i>15/12/09</i></p>	21.12.2009  <i>/PB/</i>	<p>Heard for both sides. For the reasons recorded separately O.A. stands disposed of. No costs.</p> <p><i>(Signature)</i> (Madan Kumar Chaturvedi) Member (A)</p>

15.12.09  
2 (Two) Copies of Application  
with envelops received for  
service notices to the Respondent  
Copy served. The Applicant  
will appear in person.  
Application at Flap 'A', he  
has submitted an application  
with a prayer to list the  
O.A. No. 264/09 before the  
Bench with an exception  
to Hon'ble Mr. M. K. Gupta,  
Judicial Member, Applications  
at flap 'B' before the Bench for  
Leave before the Bench for  
grant of order.  
*15/12/09*

*Section Officer (S).*  
*15/12/09*

23/12/09

Judgement / Final orders dt 21/12/09

Send to the D/Section  
for issuing the all the  
respondents by post and  
Send to Advocate both  
the parties

case no - 12,974 & 12,975

dated 23-12-09

Enclosed with the document

Decree, order and view order extension

return date

Enclosed with the document

dated 23-12-09

CENTRAL ADMINISTRATIVE TRIBUNAL  
GUWAHATI BENCH, GUWAHATI:

O.A. No. 264 of 2009

Date of Decision : 21.12.2009

Shri J.P.Rathore  
.....

Applicant/s

Applicant in person  
.....

Advocates for the  
Applicant/s

- Versus -

U.O.I. & Ors.  
.....

Respondent/s

None appears for Respondents  
.....

Advocate for the  
Respondents

CORAM :

HON'BLE MR.MADAN KUMAR CHATURVEDI, MEMBER (A)

1. Whether reporters of local newspapers may be allowed to see the Judgment ?
2. Whether to be referred to the Reporter or not ?
3. Whether their Lordships wish to see the fair copy of the Judgment ?

Yes/No

Yes/No

Yes/No

Judgment delivered by

MEMBER (A)

*Chaturvedi*

## CENTRAL ADMINISTRATIVE TRIBUNAL, GUWAHATI BENCH

Original Application No.264 of 2009

Date of Order: This the 21<sup>st</sup> Day of December 2009

## HON'BLE MR. MADAN KUMAR CHATURVEDI, ADMINISTRATIVE MEMBER

**Applicant in person**

## -Versus-

1. Union of India represented by  
Secretary to Govt. of India,  
Ministry of Finance  
Department of Economic Affairs (Banking Division)  
3<sup>rd</sup> Floor, Jeevan Deep Building  
Parliament Street, New Delhi-110001.
2. Presiding Officer  
Debts Recovery Tribunal III  
Sanskrit Bhawan, DB Gupta Road  
Jhandewalan, New Delhi-110055 ... Respondents.

By Advocate: None for the Respondents

## **ORDE (CORAL)**

**(Madan Kumar Chaturvedi, Member(A):**

By this O.A., Applicant makes a request to issue necessary directions to the Respondents for the payment of his medical claim of Rs.4259/-.

2. Applicant appeared in person. It was submitted that while functioning as Recovery Officer in DRT Delhi, the Applicant had submitted 19 medical reimbursement claims in the office of DRT III Delhi on different dates. Out of these 19 claims, Applicant did receive payments in respect of 13 claims only. Six claims totaling to Rs. 4259/- were

stated to be pending till this date. It was prayed that necessary directions be issued and Respondents be asked to make the payment without any further delay.

3. I have examined the details appended along with the O.A. As per the prescription of Section 20 of the Administrative Tribunal Act, 1985 Tribunal shall not admit an application unless it is satisfied that the applicant had availed of all the remedies available to him under the relevant service rules as to redressal of grievances. Admittedly, this was not done. As such the O.A. is premature. Accordingly, it is dismissed. Liberty is hereby granted to the Applicant to avail the remedies available to him under the relevant service Rules.

4. O.A. stands disposed of accordingly. No costs.

*Noticed*  
(MADAN KUMAR CHATURVEDI)  
ADMINISTRATIVE MEMBER

1m

## CENTRAL ADMINISTRATIVE TRIBUNAL, GUWAHATI BENCH

Original Application No.264 of 2009

Date of Order: This the 21<sup>st</sup> Day of December 2009

## HON'BLE MR. MADAN KUMAR CHATURVEDI, ADMINISTRATIVE MEMBER

Shri J.P.Rathore,  
Deputy Registrar(U.S.)  
Central Administrative Tribunal,  
Guwahati Bench, Rajgarh Road,  
Bhagagarh, Guwahati-781005 ... Applicant

**Applicant in person**

## -Versus-

1. Union of India represented by  
Secretary to Govt. of India,  
Ministry of Finance  
Department of Economic Affairs (Banking Division)  
3<sup>rd</sup> Floor, Jeevan Deep Building  
Parliament Street, New Delhi-110001.
2. Presiding Officer  
Debts Recovery Tribunal III  
Sanskrit Bhawan, DB Gupta Road  
Jhandewalan, New Delhi-110055 ... Respondents.

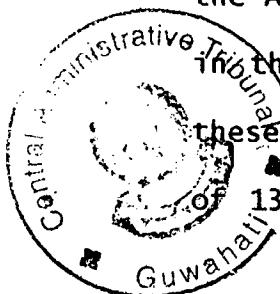
By Advocate: None for the Respondents

## ORDE (CORAL)

(Madan Kumar Chaturvedi, Member(A):

By this O.A., Applicant makes a request to issue necessary directions to the Respondents for the payment of his medical claim of Rs.4259/-.

2. Applicant appeared in person. It was submitted that while functioning as Recovery Officer in DRT Delhi, the Applicant had submitted 19 medical reimbursement claims in the office of DRT III Delhi on different dates. Out of these 19 claims, Applicant did receive payments in respect of 13 claims only. Six claims totaling to Rs. 4259/- were



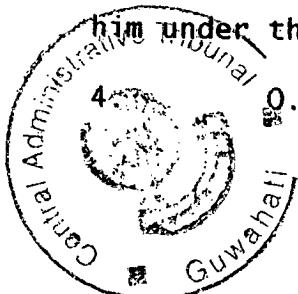
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O.A. stands disposed of accordingly. No costs.

Sd/-

M.K. Chaturvedi  
Member (A)



TRUE CO  
प्रतिलिपि

अनुभाग अधिकारी  
Section Officer (Jud)

Central Administrative Tribunal  
गुवाहाटी न्यायपाल  
Guwahati Bench  
गुवाहाटी/Guwahati

A

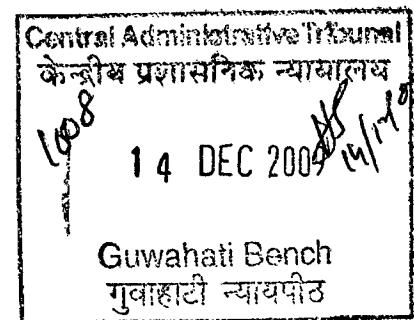
**BEFORE THE CENTRAL ADMINISTRATIVE TRIBUNAL  
GUWAHATI BENCH, GUWAHATI**

Original Application No. .... 264 / 2009

Filed by  
Subeet  
Applicant

**J.P. Rathore – V/s – U.O.I. & others**

**Index**



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*Subeet*  
Signature of the applicant

**BEFORE THE CENTRAL ADMINISTRATIVE TRIBUNAL  
GUWAHATI BENCH, GUWAHATI**

**ORIGINAL APPLICATION NO. 264/2009**

**J.P. RATHORE – V/S – U.O.I. & OTHERS**

Central Administrative Tribunal  
केन्द्रीय प्रशासनिक न्यायालय

14 DEC 2009

**SYNOPSIS OF THE CASE**

Guwahati Bench  
গুৱাহাটী ন্যায়পৌঠ

The applicant was appointed as Deputy Registrar, Central Administrative Tribunal by an order dated 27<sup>th</sup> September, 2002 (copy placed at Annexure A-1). The applicant was appointed as Recovery Officer, Debts Recovery Tribunal III Delhi on deputation basis vide order dated 27<sup>th</sup> February, 2004 (Annexure A-2). The applicant was repatriated from DRT III Delhi vide order dated 9-11-2004 (Annexure A-3)

While functioning as Recovery officer in DRT Delhi, the applicant had submitted 19 medical reimbursement claims in the office of DRT III Delhi on different dates as mentioned in Annexure A-4. These claims should have been processed and paid within a week or two or latest within a month of submitting the same in the office as all the claims are of Govt. Hospitals prescribed by Govt. doctors only which are clearly admissible under Rules. But these were not processed and paid in time. The applicant requested the office of R-2 in the month of February 2005 to pay the pending claims but only 13 claims out of 19 claims have been paid to the applicant in the month of August, 2005 (Rs. 7469) October, 2005 (Rs. 3855) keeping 6 claims worth Rs. 4259 pending which have not been paid till date.

It is pertinent to mention here that all these six pending claims are of Govt. Hospitals only in respect of the same patients, same ailments, prescribed by the same Govt. doctors of the same Govt. Hospital causing discrimination by R-2 himself which is non-est in the eyes of law.

That the Respondent No. 2 in order to cause unwarranted harassment to the applicant and with an intention to make delay, referred the matter to the Directorate General CGHS, New Delhi, which was returned by them with the remarks that the same was not required to be referred to then because that did not require any special sanction or clarification. This information I got under RTI Act.

All the six medical claims, mentioned at sl. No. 2,3,6,11,13 and 16 of Annexure A-4 are still kept pending by R-2 arbitrarily till date. No show-cause notice or any order has ever been served upon the applicant till date. Hence this O.A. before Hon'ble Tribunal.

  
Signature of the Applicant

**BEFORE THE CENTRAL ADMINISTRATIVE TRIBUNAL  
GUWAHATI BENCH, GUWAHATI**

**ORIGINAL APPLICATION NO. 264/2009**

**J.P. RATHORE – V/S – U.O.I. & OTHERS**

Central Administrative Tribunal  
केन्द्रीय प्रशासनिक न्यायालय

14 DEC 2009

Guwahati Bench  
गुवाहाटी न्यायपीठ

**DATES OF EVENTS**

01-04-2001	Applicant was appointed as Deputy Registrar, Central Administrative Tribunal vide Annexure A-1.
03-02-2004	Applicant was appointed as Recovery officer DRT III Delhi on deputation basis vide Annexure A-2.
09-11-2004	Applicant was repatriated from DRT III Delhi vide Annexure A-3.
16-04-2004 to 09-11-2004	Applicant submitted 19 medical reimbursement claims in the office of DRT III Delhi, all of Govt. Hospitals prescribed by Govt. doctors.
February, 2005	Applicant requested office of DRT III Delhi to process and pay the pending medical claims. Applicant requested the office of DRAT New Delhi also in the matter.
August, 2005	Medical claims for Rs. 7469 paid by R-2 through demand draft.
October, 2005	Medical claims for Rs. 3855 paid by R-2 through demand draft.

Remaining six medical claims for Rs. 4259/- mentioned at sl. No. 2,3,6,11,13 and 16 of Annexure A-4 in respect of the same patients for the same ailments, prescribed by the same Govt. doctors of the same Govt. Hospital have been arbitrarily kept pending till date by R-2 to cause unwarranted harassment to the applicant. No Show-cause notice or any order has ever been served upon to the applicant. Hence this OA.

  
Signature of the Applicant

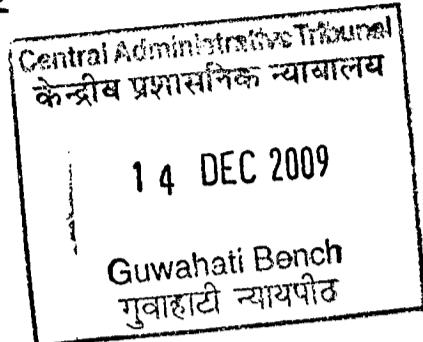
**BEFORE THE CENTRAL ADMINISTRATIVE TRIBUNAL  
GUWAHATI BENCH, GUWAHATI**

**ORIGINAL APPLICATION NO. 264/2009**

**BETWEEN**

**Shri J.P. Rathore Deputy Registrar (U.S)  
Central Administrative Tribunal  
Guwahati Bench, Rajgarh Road,  
Bhangagarh, Guwahati-781005**

..... **Applicant**



**AND**

**(1) Union of India represented by  
Secretary to Govt. of India  
Ministry of Finance  
Department of Economic Affairs (Banking Division)  
3<sup>rd</sup> Floor, Jeevan Deep Building  
Parliament Street, New Delhi-110001**

**(2) Presiding Officer  
Debts Recovery Tribunal III  
Sanskriti Bhawan, DB Gupta Road  
Jhandewalan, New Delhi-110055**

..... **Respondents**

**PARTICULARS OR ORDER AGAINST WHICH THIS APPLICATION IS MADE**

The applicant by way of this application has challenged / assailed the action of the respondents in with holding the payment of 6 medical -reimbursement bills of the applicant out of nineteen bills submitted in the office of respondent no. 2 in the year 2004. No any order has ever been communicated to the applicant in the matter.

**2. JURISDICTION:**

The applicant further declares that the subject matter of the case is within the jurisdiction of the Administrative Tribunal.

**3. LIMITATION:**

The applicant declares that the instant application has been filed within the limitation period prescribed under Section 21 of the Administrative Tribunal's Act, 1985.

**4. FACTS OF THE CASE:**

4.1. That the applicant is a citizen of India and as such he is entitled to all the rights, privileges and protections guaranteed under the Constitution of India and the laws framed there-under.

*Contd.....*

4.2. That the applicant was appointed as Deputy Registrar in the Central Administrative Tribunal by the President of India vide Govt. of India Ministry of Personnel, P.G.& Pension, Department of Personnel & Training New Delhi order no. A-12013/4/2002- AT dated 27<sup>th</sup> September 2002, a copy which is annexed herewith as Annexure A -1

4.3. That the applicant was appointed as Recovery officer in DRT III Delhi on deputation basis w.e.f. 3-2-2004 F/N vide Govt. of India, Ministry of Finance Department of Economic Affairs, Banking Division order No. 15/9/03-DRT III dated 27<sup>th</sup> February, 2004 a copy of which is annexed herewith as Annexure-A-2.

4.4. That the applicant was repatriated from DRT III Delhi w.e.f. 9-11-2004 A/N vide DRT III Delhi office order no. 1/1/2003-DRT III-2419 dated 9-11-2004, a copy of which is placed herewith as Annexure -A-3.

4.5. That the applicant while functioning as Recovery Officer DRT III Delhi had submitted medical -reimbursement claims on different dates in respect of his wife and son, as mentioned in Annexure-A-4. All these medical claims are of Govt. Hospitals prescribed by the Govt. doctors only. It is pertinent to mention here all these bills in respect of my son have been prescribed by Govt. doctor, Dr. Sanjay Jain, Associate Professor (Psychiatry), SMS Medical College & Hospital, Jaipur, which is the biggest Govt. Hospital in Rajasthan. My son is a psychiatric patient, suffering from the mental disease, 'Schizophrenia' for the last about nine years.

4.6. That as per practice and procedure adopted, the medical reimbursement claim are passel and paid within a week or two from the date these are submitted in the office or latest say within one month. After this it is a continuing wrong every moment and a fresh period of limitation shall begin to run every moment of the time during which the wrong continues.

4.7. That respondent no. 2 kept all these claims pending and did not care to pay these in time. These were perhaps processed only when the applicant requested the office of R-2 in the month of February, 2005 to process and pay the pending claims at the earliest. I had requested the office of DRAT New Delhi also to issue necessary instructions to R-2 to do the needful but perhaps no action was taken by R-2 in the matter. All this correspondence is not being annexed to OA to avoid the OA becoming voluminous and it is not necessary also.

4.8. That to the utter surprise, Respondent No. 2, passed and paid 13 bills out of 19 bills (Annexure-4) in the month of August, 2005 (Rs. 7469) and October, 2005 (Rs. 3855), keeping 6 claims for Rs. 4259 pending which have not been paid till date. All these six claims serial 2,3,6,11,13 and 16 of Annexure A-4 are of Govt. Hospital only in respect of the same patients, same ailments, prescribed by the same Govt. doctors of the same Govt. Hospitals. Thus respondent No. 2 has caused discrimination himself in the matter which is non-est in the eyes of law.

4.9. That the respondent No. 2 instead making payment to remaining six genuine medical claims of the applicant, referred these to the Directorate General, CGHS

क. गुवाहाटी विधायक न्यायालय  
Guwahati Bench  
मुख्यमंत्री व्यापारिता

14 DEC 2009

*Deb*

Contd....

14 DEC 2009

Guwahati Bench  
গুৱাহাটী ন্যায়পীঠ

New Delhi in order to cause delay and unwarranted harassment to the applicant. It was not at all required and was totally a futile exercise because the Directorate General CGHS returned the proposal with the remarks that the reimbursement cases which require clarification or need special sanction only be referred to them through the Joint Secretary of the concerned department. All this correspondence is not being annexed with the OA to avoid the OA becoming voluminous.

4.10. That the applicant had asked certain information under RTI Act from the office of Respondent No. 2 asking the specific provisions of Rules under which the claims of the applicant have not been admitted and are kept pending but the office of Respondent No. 2 failed to inform such specific rules in response to my various RTI Applications. All this correspondence is not being annexed with the OA to avoid OA becoming voluminous.

4.11. That the state Govt. of Rajasthan has fixed the rates of consultation fee for consulting Govt. doctors at their residence vide Account Rules 2004, a copy of the same is annexed herewith as Annexure-A-5. The O.P.D. numbers of Govt. Hospital are available on each prescription slip whether towards consultation at the residence of the Govt. doctor or in the Govt. Hospital. Number of consultations have been verified by the treating Govt. doctor under the signatures and seal of the Govt. Hospital. The rates of consultation fee have also been fixed vide Govt. of India, Ministry of Health OM No. S. 14025/10/2001 -MS dated 31<sup>st</sup> December 2002, a copy of which is annexed herewith as Annexure -A-6.

4.12. That as pointed out in para 4.11 above the OPD numbers of Govt. Hospital are available on each prescription slip, hence it was Govt. Hospital treatment and the Govt. doctors / specialists can prescribe medicines for longer periods keeping in view the gravity of disease. Since my son is a psychiatric / mental patient, the treating Govt. doctor has prescribed medicines for longer periods. In this connection Ministry of Health OM No. F-6-397/49-Med II dated 31<sup>st</sup> March, 1950 (copy placed as Annexure-A-7) may be referred wherein the 'fresh consultation' and 'subsequent consultation' has been clearly defined and clarified.

4.13. That the applicant was not issued any CGHS card by respondent no. 2 and hence his claims are to be dealt with as per provisions of CS (Medical Attendance) Rules.

4.14. That no show-cause notice was issued to the applicant by R-2 before taking a decision to reject / disallow the claims, if done so because no order has been served to the applicant in this regard.

4.15. That according to GIMH OM NO.S.14025/7/2000-MS dated. 28<sup>th</sup> March, 2000 (copy placed as Annexure-A-8) Central Govt. employees and members of their families may take treatment from any Hospital recognized under CGHS/State Government.

*Shelb*

Contd.....

5. **GROUNDS OF THE APPLICATION:**

5.1 Because it is a fact that all the six pending medical claims with R-2 are of Govt. Hospital, prescribed by Govt. doctors hence all these claims are clearly / undoubtedly admissible under Rules.

5.2 Because it is a fact that Respondent No 2 has erred in law in passing and paying 13 medical claims of the same patients in respect of the same ailments prescribed by the same Govt. doctors of the same Govt. Hospital and then keeping six medical claims pending which are also of the same patients, in respect of the same ailments, prescribed by the same Govt. doctors of the same Govt. Hospital. Hence the respondent no 2 have caused discrimination themselves which is non-est in the eyes of law.

5.3 Because its is a fact that the respondent no. 2 did not issue any show-cause notice to the applicant before rejecting / disallowing these claims, if done so, which action is totally unjust, unfair and non-est in the eyes of law, as the same has been passed without giving an opportunity of hearing to the applicant which is against the principles of natural justice i.e. audi-alterim-partem, which says that a person can not be condemned unheard.

5.4 Because it is a fact that in emergent cases even the medical claims of private hospitals are also admissible under Rules then how the medical claims of Govt. Hospitals can be inadmissible. Hon'ble Rajasthan High Court in the case V.D. Saxena –V/s –State, have held that, 'denial of reimbursement on technical grounds is nothing but arbitrary unreasonable and unjust. Emergency sees no rules'. Hon'ble Rajasthan High Court in the case, 'Raghunath Prasad Sharma –V/S-state have observed, "Health and medical Assistance is part and parcel of right to life and liberty and it is the fundamental duty of the state to provide such facilities to its citizen." It is time and again emphasized by the Hon'ble Supreme Court that saving of a life is of a paramount importance to the persons rather to wait for the reference by standing in a queue.

In a number of cases Hon'ble CAT Benches have not only allowed the full reimbursement of Govt. Hospital treatment, but also the treatment at private Hospitals in emergent case.

5.5 Because it is a fact that the applicant had consulted the Govt. doctor at his residence and had paid the consultation fee as prescribed by the Govt. and as claimed by the applicant.

5.6 Because it is a fact that the respondent have failed to reimburse the medical clams of the applicant in time say maximum within one month from the date of submitting the same, and are still pending even after the lapse of the period of five years, it is a continuing wrong every moment and a fresh period of limitation shall begin to run every moment of the time during which the wrong continues.

Contd.....

14 DEC 2009

Guwahati Bench  
গুৱাহাটী ন্যায়পীঠ**6. DETAILS OF REMEDIES EXHAUSTED:**

The applicant declares that he has availed all the departmental remedies as available to him under the facts and circumstances of the case and also as per the service Rules.

**7. MATTER NOT PREVIOUSLY FILED OR PENDING BEFORE ANY OTHER COURS:**

The applicant further declares that no other application, writ petition or suit regarding the subject matter of the instant application is filed before any other court, authority, any other Bench of the Hon'ble Tribunal nor any such application, writ petition or suit is pending before any of them.

**8. RELIEF SOUGHT FOR :**

This Hon'ble Tribunal may be pleased:

- (i) To direct the respondents to pay all the six medical reimbursement claims of the applicant amounting to Rs. 4259/- at the earliest along with the penal interest for the last five years during which these genuine claims have been kept illegally pending with them.
- (ii) To award the cost of litigation for the failure on the part of the respondents to keep the genuine medical claims pending for nearly five years.
- (iii) To pass such other and further order which the Hon'ble Tribunal may deem fit and proper in the interest of justice.

**9. INTERIM RELIEF SOUGHT FOR:**

NIL

**10. N.A.****11. Particulars of the Postal Order:**

I.P.O. No. : 39 G 429246  
 Date of IPO : 14-12-2009  
 Amount of I.P.O : Rs. 50/-  
 Issuing Post Office : Guwahati  
 Payable at Guwahati.

**12. Enclosures:**

As per Index  
 Place : Guwahati  
 Date : 14-12-2009

  
 Signature of the Applicant
**VERIFICATION**

I, J.P. Rathore S/o Late Sri Bhawani Prasad Rathore, aged bout 59 years do hereby verify that the contents of Para 1 to 4 and 6 to 12 of the above O.A. are true and correct to my personal knowledge and the contents of para 5 being legal based on legal advice received are believed to be true. I have not suppressed any material fact.

Date: 14-12-2009

Place : Guwahati

  
 Signature of the Applicant

Annexure A-1

(6)

No.A-12013/4/2002-AT  
 Bharat Sarkar/Government of India  
 Karmik, Lok Shikayat Tatha Pension Mantralay  
 Ministry of Personnel, Public Grievances and Pensions  
 Karmik aur Prashikshan Vibhag  
 Department of Personnel and Training

Central Administrative Tribunal  
 केन्द्रीय प्रशासनिक न्यायालय

14 DEC 2009

Guwahati Bench  
 गुवाहाटी न्यायपीठ

New Delhi, the 27<sup>th</sup> September, 2002

ORDER

The President is pleased to appoint the following 12 Section Officers/ Coun Officers/Private Secretaries to the post of Deputy Registrar on promotion against the year-wise select panels in the Central Administrative Tribunal in the order of merit from the dates indicated against each of them:-

Sl.No.	Name	Panel year	Effective Date of promotion
1.	Smt. Manjula Murlidharan	1996	01.01.1996
2.	Shri P.Ulganathan	1996	01.05.1996
3.	Smt Padma T.	2000	01.04.2000
4.	Shri A.Taiā Rao	2000	01.04.2000
5.	Shri Anil Srivastava	2000	01.04.2000
6.	Shri R.K. Mishra	2000	01.04.2000
7.	Shri Prem Singh (SC)*	2000	01.04.2000
8.	Shri J.P. Rathore	2001	01.04.2001
9.	Shri S.K. Ghosh	2001	01.04.2001
10.	Shri R.K. Jain	2001	01.04.2001
11.	Shri S.A. Deshpande	2001	01.04.2001
12.	Shri B.R. Dogra	2001	01.04.2001

\* To be adjusted against point No.15 earmarked for SC in the reservation roster.

2. The promotions shall be on notional basis and no monetary benefits will accrue due to promotion from a retrospective date in a particular panel year. The monetary benefit shall be admissible only from the date they take over the charge of the post of Deputy Registrar. These promotions are subject to outcome of the O.A.No.2581/2000 filed by Shri R.K. Jain in the Principal Bench of the Central Administrative Tribunal assailing the seniority list of SO/CO/PS issued on 04.04.2000 or any other case pending in any tribunal/court of law.

B.S.A. (B.S.A. Padmanabha)  
 Under Secretary to the Govt. of India  
 Tel No 30941142

Certified by  
 Shreya

146.9

Rec'd 21.10.2009

11/10/2009

11/10/2009

11/10/2009

11/10/2009

11/10/2009

Central Administrative  
केन्द्रीय प्रशासनिक न्यायालय

14 DEC 2009

Guwahati Bench  
গুৱাহাটী ন্যায়পাঠ

TO BE PUBLISHED IN PART I, SECTION 2 OF THE GAZETTE OF INDIA.

F.No. 15/9/03 -DRT  
Government of India  
Ministry of Finance  
Department of Economic Affairs  
Banking Division

New Delhi, dated the 27<sup>th</sup> February, 2004.

NOTIFICATION

The President is pleased to appoint Sh. J.P. Rathore, Deputy Registrar, Central Administrative Tribunal to the post of Recovery Officer in the office of Debts Recovery Tribunal-III, Delhi on deputation basis in the pay scale of Rs. 10,000-15,200 w.e.f. 32.2004(FN) till such time the post is filled up as per the procedure on deputation basis or the vacation of the stay by the High Court of Rajasthan at Jodhpur, whichever is earlier.

(M.K. MALHOTRA)

Under Secretary to the Govt. of India.

एम. के. मालहोत्रा  
M.K. Malhotra

मंत्रीपालकार्यालय  
Ministry of Finance

(वित्त एवं वित्तीय विभाग)  
(Finance & Financial Sector Division)

नई दिल्ली, New Delhi

The Manager  
Govt. of India Press  
Faridabad-121001  
HARYANA.

No. 15/9/03-DRT

New Delhi, dated the 27 February, 2004.

Pay & Accounts Officer, ERIS & Banking, AGCR Building, New Delhi.  
Residing Officer, DRT-III, Delhi.  
Sh. Anil Srivastava, Deputy Registrar(E), CAT, Principal Bench, Copernicus  
Marg, New Delhi.  
Sh. J.P. Rathore, Recovery Officer, DRT-III, Delhi.

Cost of <sup>fixed to be</sup> <sup>fixed</sup> <sup>fixed</sup>  
Sheth

See  
A  
21/3/04

F.No. 1/1/2003-DRT-III - 24/4  
 Debts Recovery Tribunal-III, Delhi  
 Sanskriti Bhawan, D.B. Gupta Road  
 Jhundewalan

New Delhi, the 9<sup>th</sup> November, 2004.

OFFICE ORDER

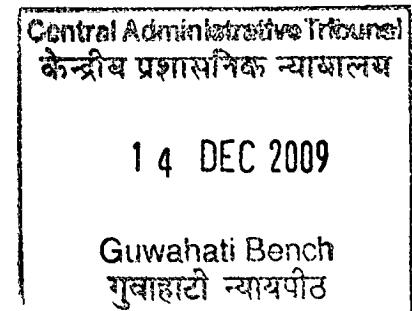
In pursuance of the Ministry of Finance, Banking Division's letter No. 1549/2003-DRT, dated 9/11/2004 Shri J.P.Rathore, Recovery Officer of this Tribunal stands relieved of his duties w.e.f. 9.11.2004(A/N) with the direction to report to the Registrar, Principal Bench, CAT, New Delhi.

*Atto. Gumber*  
9.11.04

(MEENA V. GOMBER)  
PRESIDING OFFICER

To

✓ Shri J.P.Rathore  
Recovery Officer

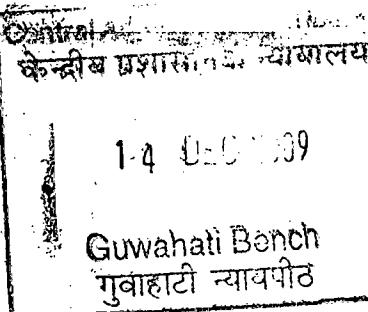


Copy to :

1. Registrar, DRAT, Delhi.
2. Registrar, Principal Bench, CAT, New Delhi
3. Pay & Accounts Officer (Banking Division), AGCR Bldg., New Delhi-110002.
4. Under Secretary (DRT), 3<sup>rd</sup> Floor, Jeevan Deep Bldg., Parliament Street, New Delhi-110001.
5. The Accounts Assistant, DRT-III, Delhi.
6. Service Book of the Individual concerned.

*Sd/-*  
(DEV DUTT)  
ASSISTANT REGISTRAR

*Certified to be true  
G. M. D.*



Annexure A-4

(9)

ANNEXURE - A - 4

Details of Medical Bills Submitted in DRT - III Delhi'

<u>Date of submission</u>	<u>Name of Patient &amp; Relationship</u>	<u>Amount claimed</u>
① 16.04.2004	Smt. Krishna Rathore, Wife	Rs. 1766.00 120/-
② 18.05.2004	Shailendra Singh Rathore, Son	Rs. 1103.50 X
③ 18.05.2004	Smt. Krishna Rathore, Wife	Rs. 786.56 X
④ 15.06.2004	Smt. Krishna Rathore, Wife	Rs. 1664.35 1664/-
⑤ - do -	Self	Rs. 454.31 454/-
⑥ - do -	Shailendra Singh Rathore, son	Rs. 649.90 X
⑦ - do -	Smt. Krishna Rathore, Wife	Rs. 528.75 528.75
⑧ 13.07.2004	Smt. Krishna Rathore, Wife	Rs. 1498.51 1498/-
⑨ 13.07.2004	Shailendra Singh Rathore, Son	Rs. 2848.78 2329/-
⑩ 13.07.2004	Smt. Krishna Rathore, Wife	Rs. 683.78 683.78
⑪ 28.07.2004	Shailendra Singh Rathore, Son	Rs. 607.75 X
⑫ - do -	Smt. Krishna Rathore, Wife	Rs. 1432.00 1432/-
⑬ 04.08.2004	Shailendra Singh Rathore, Son	Rs. 549.55 X
⑭ 10.08.2004	Smt. Krishna Rathore, Wife	Rs. 439.00 439/-
⑮ 10.08.2004	Smt. Krishna Rathore, Wife	Rs. 610.75 611/-
⑯ 12.10.2004	Shailendra Singh Rathore, Son	Rs. 561.60 X
⑰ 09.11.2004	Smt. Krishna Rathore, Wife	Rs. 114.50 115/-
⑱		Rs. 183.00 183/-
⑲		Rs. 177.60 178/-

Total - Rs.16660.00

*Subroto*

*Subroto*  
(J.P. Rathore)  
Ex Recovery Officer  
DRT III Delhi  
Now Deputy Registrar, CAT  
Guwahati Bench

## લેઝવા જિયમ જનની ૨૦૦૪

પ્ર. ૧. એ સંપેદન (એ. ૧૭૩(૩૧) પૂર્ણાંચ/સેરા/પ્રારિણ/ ૧૨૮/૨૭.૨.૧૯૬)

૨. વિકિતસા પ્રાણાં ક્ર. દેશે કી શતિંદ્રી - રાજીવાન રો - વાપાં કે ઉદ્યકાલા લે અભ્યાય મેં વિધિની હૈ।

૩. ગુજરાત મેડિકલ ઇસ્ટીલ્યૂન દિલ્હી રાય્ય વાનારિયોને કે ઇલાજ દેશું પ્રાધિકૃત વિભાગ કે ગાદેશ ક્ર. એ. ૧૨(૧૨) એ. ડી/ નિયમ/૩૨/આર.એસ.આર. ૧૪/૧૦ દિનાંક ૧૭.૭.૨૦૦૦

૩૦. એ.આર.એ. ટેસ્ટ વસ્ટ્રેસ વૈલિયમ ટેસ્ટ નિઝી સંસ્થાન મેં પેન્ડિકાલ બોર્ડ (કમ સે કાગ તીન ચિંતિંગ કાક) દ્વારા જારી પરાપર પર્ચી કે આપા પાર કરાને પર નિઝી સંસ્થાન મેં હોને વાલે વ્યાય કા પુર્ણારણ પ્રશાસારિક વિભાગ કે માલ્યાગ ને પ્રવાણ પ્રસ્તુત દેશે પર વિભાગ વી સ્વીકૃતિ સે વ્યાય કે ૬:૬ કી રીતા તાર સીકૃત હોણા।

(એ. ૬(૪)વિભાગ/૧૧ દિ. ૩.૧.૨૦૦૧ એં ૫.૪.૨૦૦૩)

૩૧. રાજ. આવાનાન બોર્ડ, આર.સી.ડી. એફ. એં રાજ. વિભાગ કે કાર્યિયોનો કે નિઝી ચિકિત્સાલય મેં ઇલાજ કરવાને પર દવા કી એ.એ.સી. દેશે દેશું શાખાએ અધિકૃત।

(આ.દિ. ૨.૩.૨૦૦૨, લેલા નિયમ અધીલ, ૦૨, પૃ. ૧૯)

૩૨. રાજીવાન ચિકિત્સાલય કે વાનિષ્ટ વિશેપદ્ર (પેડિશિન) / સાધારણ આચાર્ય (કાર્ડિઓલોજી) અધ્યક્ષ દ્વારા ઉચ્ચ રાતર કે સમ્બંધિત ચિકિત્સાક/એસીરિએસ્પ્રોફેન્યા/પ્રોફેસર અધ્યક્ષ વિભાગથા વે; પામર્શ પર એન્જિયોગ્રામી જાંત્ર ગોયલ અસ્થાન, જોધ્ફાં મેં વાયે જાને પર રાજ્ય કાર્મચારીયોનો કે આપા પુર્ણારણ માટે માનમિંહ ચિકિત્સાલય મેં એન્જિયોગ્રામી કી વિધાપિત વિભાગ (ધર્મગાન દર ૧૦૦૦ રૂ.) થા વાર વિશે વ્યાય કી ગઈ રાશા કા ૫૦%, જો ભી કામ હો, કા પુર્ણારણ વિભાગ કી રાહમતિ સે ચિકિત્સા પરિચના નિયમો મેં શિશ્યિતતા પ્રદાન કરતે હુદે અનુશીલ હોણા। (એ. ૬(૪)વિભાગ/૧૧ દિ. ૮.૭.૨૦૦૩)

૩૩. જિલા પુલ્યાનગરોનો કો છોડુકર ગાય સામાનો પર વિશ્રાત મેડિકેશર રિલીફ સોસાયટી જે કે અધાર્થ હા ખાંડ અધિકારી/ તહસીલ હાર હોણા।

(એ. ૧૦(૨૦)એમ્સ/પુપ-૧/૧૯૫/૨ દિનાંક ૨૫.૧૧.૨૦૦૨)

૩૪ ગરીબ કો ચિકિત્સાનું કે ઘર દ્વારાને કા શાલ્ક દિનમાં

દિનમાં	રાત માં
ખ. અ.	૨૫
ચ. ચિ. અ.	૩૫
લા. સિંગ્હાન	૩૫
ચુક્કાકાલેણ	૩૫
ફોડર	૪૦
વ. વિશેપદ્ર	૪૦
પ્રોફેસર/પિન્ડિલાલ	૫૦

(આદેશ દિ. ૧૧.૯.૧૯૯૬)

૬૯

લેઝવા જિયમ, જનની, ૨૦૦૪

૨૦૦૪ લેઝવા જિયમ

Certified to be true  
Signature

Central Administration Tribunal  
કેન્દ્રીબ પ્રશાસનિક ન્યાયાલય

14 DEC 2009

Guwahati Bench  
ગুৱাহাটী ন্যায়পীঠ

(c) A Lady Assistant Surgeon, Grade II, is not available in the hospital/dispensary for consultations in respect of female diseases.

3. In relaxation of the Rules and Orders on the subject, it has been decided that in such cases, medical attendance/treatment may be obtained from an Assistant Surgeon, Grade I or a Medical Officer of equivalent rank will be treated as AMA for the purpose.

[ G.I., M.H., O.M. No. F. 28-3/60-H. I, dated the 18th June, 1960. ]

**NOTE.**— Central Government servants falling under this category should normally receive medical attendance/treatment from such hospitals/ dispensaries in the station to which a Medical Officer of the rank of Assistant Surgeon, Grade II, is attached irrespective of the distance of such hospitals/ dispensaries from the residence of these Central Government servants.

[ G.I., M.H., O.M. No. F. 29-3/68-MA, dated the 5th September, 1968. ]

(6) **No treatment from AMA while he is on regular leave.**— A doubt has been raised as to whether it would be permissible for a Government servant who has been receiving treatment from his AMA to consult the AMA when the latter is on regular leave, but available at the station where the Government servant falls ill. It is clarified that whenever an AMA is on long leave, officiating arrangements are made. Hence, the question of consulting the AMA on regular leave, whether or not available at the station, does not arise.

[ G.I., M.H., O.M. No. F. 29-68/69-MA, dated the 13th November, 1973. ]

(7) **Where no Authorized Medical Attendant has been appointed in a suburban area.**— It has been decided that where no authorized medical attendant has been appointed in a suburban area, the Government servant would be free to consult an AMA employed in a Government hospital in the adjoining city. But in places where authorized medical attendants have been appointed by the competent authority, the Government servant should consult him and if in the opinion of the AMA the Government servant or his family, requires specialist service which could only be provided in the adjoining city, he may consult such a specialist in a Government/recognized hospital on a reference being made by the authorized medical attendant.

It has been decided that cases requiring consultation with a specialist should be referred by the AMA to the specialist concerned expeditiously so that there is no delay in the proper treatment becoming available.

[ G.I., O.M. No. S. 14012/1/74-MC., dated the 25th February, 1976. ]

(8) **When a Medical Officer can be his own AMA?**— It has been decided that Medical Officer under the employ of a Department and declared as AMA for its staff and their families stationed at a particular

14 DEC 2003

Government of India

place can be treated as AMA for himself and his family members only in such stations where there is one and only one AMA.

[ G.I., M.H., O.M. No. 14025/24/74/MC., dated the 4th August, 1975. ]

(9) **Payment of fixed medical allowance to staff working in the interior where AMA not available.**— It has been decided that quantum of medical allowance of Rs.100 (one hundred only) per month per employee working in the interior where no Authorized Medical Attendant is available within a radius of 5 km, may be granted on the condition—

- the Head of the Department should obtain a certificate from an appropriate District Authority that there is no State Government/Local Body Hospital/Dispensary available within a radius of 5 km and also there is no qualified private medical practitioner available and, if available, he is not willing to be appointed as Authorized Medical Attendant.
- the position will be reviewed every three years and a fresh certificate is to be obtained by the Head of the Department.

These orders are applicable to the staff of C & AG also.

[ G.I., M.H., O.M. No. S-14020/1/88-MS, dated the 17th July, 1990 and dated the 28th September, 1991 and O.M. No. S. 14025/33/98-MS, dated the 18th January, 1999. ]

(10) **Consultation/Visiting/Injection fees.**— (a) **State/UT Medical Officers appointed as AMAs.**— The consultation/visiting/injection fees of different categories of Medical Officers of various States and Union Territories under CS (MA) Rules, 1944, have been revised *vide* this Ministry's O.M. No. S. 14011/1/76-MC (MS), dated the 22nd June, 1983 and in respect of the States of Madhya Pradesh, Assam, Rajasthan, Tripura, Mizoram and Uttar Pradesh were further revised *vide* O.M. No. S. 14025/8/89-MS, dated 29-1-1991 and 21-3-1991 (*not printed*). Further, the consultation/visiting/injection fees of private medical practitioners appointed as Authorized Medical Attendants presently are regulated as provided in Para. 4 of Section 6 of this Compilation (i.e., Special Rules to Calcutta) which has been prescribed in 1960. There were several representations to revise the consultation/visiting/injection fees of Authorized Medical Attendants specially due to the rise in the standard of living and escalation of the cost.

2. It has now been decided to revise the consultation/visiting/injection fees of Authorized Medical Attendants under CS (MA) Rules, 1944, as under—

(a) **Medical Officers under the employ of the Government appointed as Authorized Medical Attendants.**

As per the schedule of rates approved by the State Governments/UT Administrations in force from time to time in the concerned States/UTs.

(b) Private medical practitioners appointed as Authorized Medical Attendants.

As per the schedule of rates approved by the concerned State Governments, UT Administrations in respect of Asstt. Surgeon Gr. I/II or equivalent.

*The current approved schedule of rates to be obtained from the various State Governments/UT Administrations.*

3. In some States and Union Territories, the State Governments have not prescribed any fees to the Medical Officers under them since private practice by Government Doctors have been banned by them. In such cases, the Medical Officers appointed and acting as Authorized Medical Attendants are not eligible to charge any fees unless it has been specifically been provided by the Government.

As regards private medical practitioners appointed as Authorized Medical Attendants in such States/Union Territories where the Government have not prescribed any fees to its Medical Officers appointed as Authorized Medical Attendants, the matter is under consideration and necessary orders in this regard will be issued in due course as soon as a decision is taken.

[G.I., M.H. & F.W., O.M. No. S. 14025/18/91-MS, dated 18-9-1991.]

(b) *Private Medical Practitioners appointed as AMAs.*—It has been decided to revise the consultation/visiting/injection fees of private medical practitioners appointed as Authorized Medical Attendants in respect of such States/Union Territories, where the Government have not prescribed any fees for their Medical Officers appointed as Authorized Medical Attendants as per their qualification as under—

	I Medical Postgraduates/ Specialists	II Medical Licentiates and Medical Graduates (MBBS or equivalent)
	Rs.	Rs.
(i) Consultation fees—		
First consultation	50	35
Subsequent consultation	30	20
(ii) Visiting fees—		
Day	50	40
Night	60	50
(iii) Injection fees—		
Intra-muscular/subcutaneous	10	10
Intravenous	20	20

These orders are also applicable to persons coming under Special Rules to Calcutta and takes effect from 31st December, 2002.

In areas where CGHS facilities exist, the rates of such consulting fees, etc., would be at par with the CGHS rates of station concerned.

[G.I., M.H., O.M. No. S-14025/10/2001-MS, dated the 31st December, 2002.]

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(11) **Hospitals recognized by the State Governments/CGHS/CS (MA) Rules, 1944.**—The issue for grant of permission for treatment of Central Government employees and the members of their family in any of the hospitals recognized by the State Government/CGHS Rules/CS (MA) Rules, 1944, had been under consideration of the Government for some time past. It has now been decided that the Central Government employees and the members of their families may be permitted to avail of medical facilities in any of the Central Government, State Governments hospitals and the hospitals recognized by the State Government/CGHS Rules/CS (MA) Rules, 1944, as well as the hospitals fully funded by either Central Government or the State Government subject to the condition that they will be reimbursed the medical expenditure at the rates fixed by the Government under the CGHS Rules/CS (MA) Rules, 1944 or the actual expenditure incurred, whichever is less. In other words, the permission can be granted by the Head of the Ministry/Department/Office to the Central Government employees/members of their families to obtain medical services from any of the private hospitals recognized under CGHS in the 18 CGHS covered cities also.

2. If the treatment for a particular disease/procedure is available in the same city where the Government servant is employed, he may be permitted to avail of the medical services in any other city of his choice but in such cases, he will not be eligible for sanction of T.A./D.A. In case the treatment for a particular disease/procedure is not available at the same station, the beneficiary will be eligible for sanction of T.A. of his entitled class for taking treatment in a different city.

3. These orders will be effective from the date of issue.

4. This issues with the concurrence of Finance Division *vide* their Dy. No. 757/2000-JS & FA (H), dated 16-2-2000.

[G.I., M.H., O.M. F. No. S. 14025/7/2000-MS, dated the 28th March, 2000.]

(12) **Maternity and Child Welfare Centres.**—In amplification of the orders contained in G.I., M.H., O.M. No. F. 13-76/52-LSG (M), dated the 20th January, 1953, it has been decided that Maternity and Child Welfare Centres having arrangements for inpatient also which is recognized by State Governments for medical attendance and/or treatment of their employees and/or members of their families should also be regarded as included in the term "Government Hospital" as defined in relevant Medical Attendance Rules.

[G.I., M.H., O.M. No. F. 13-76/52-LSG (M), dated the 9th December, 1953, as modified by O.M. No. F. 8 (V)-122/55-H. II, dated the 18th November, 1955 and Corrigendum of even number, dated the 27th January, 1956.]

(13) **Cantonment General Hospitals.**—It has been decided that in Cantonment areas where there are no Government hospitals as defined in the Rules, Central Government servants and their families residing in those areas and also in the adjoining areas outside Cantonment limits may receive medical attendance and treatment at the Cantonment Hospitals, the Medical

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servants and members of their families under Rule 2 (d) of the CS (MA) Rules, 1944.

[ Min. of H. & F.W., O.M. No. S. 14021/6/86-MS, dated the 22nd September, 1986. ]

(20) 'Consulting Room'.— It has been decided that the term 'Consulting Room' may also include the consulting room maintained by the authorized medical attendants at places other than the hospital or their residence.

[ G.I., M.H., O.M. No. S. 14013/9/74-MC, dated the 14th October, 1974. ]

(21) Fresh or subsequent consultation and super-imposition of another disease clarified.— A question has arisen whether a particular consultation with a Doctor after the first consultation should be treated as 'fresh' consultation or a 'subsequent' consultation. It has been decided that the following criteria should be applied for the purpose:—

- (i) every consultation after the first in respect of the same illness of the same patient, should be treated as "subsequent consultation" and charged for at the prescribed lower rates, irrespective of the interval between the two consultations, provided that the patient has been under the treatment of the same Doctor;
- (ii) where the illness is chronic, consultation after the first, during the same course of treatment should be regarded as a "subsequent consultation";
- (iii) where a patient after being cured of a particular illness develops a 'fresh' illness and consults the same Doctor that consultation should be regarded as a "fresh consultation" and may be charged for at full rates; and
- (iv) where a patient consults the same Doctor in regard to the super-imposition of another disease during the course of treatment of one disease, that consultation should be regarded as "fresh consultation" and charged for at full rates.

[ G.I., M.H., O.M. No. F. 6-397/49-M. II, dated the 31st March, 1950. ]

NOTE.— If at the time of consultation the Medical Officer consulted also administers injections, he will be entitled to charge fees both for the consultation and for the injection at the prescribed rates. However, if at a later stage the Medical Officer administers injections prescribed at the previous consultation, fees should be charged for injections only.

(22) Simultaneous treatment in two or more systems of medicine.— Instances have come to notice where persons covered under the CS (MA) Rules, have received treatment simultaneously in more than one system of medicine. It has been decided that treatment for the same ailment should not be taken simultaneously in more than one system of medicine under the CS (MA) Rules, 1944. There is, however, no objection to treatment being received simultaneously in different systems of medicine for different ailments. If, however, such treatment is being taken for other diseases, this

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(13)

should be done with the knowledge of the attending Doctors of the other systems concerned.

[ G.I., M.H., O.M. No. S. 14025/74/79-MS, dated the 28th May, 1980. ]

(23) Reimbursement of charges for clinical tests paid to private practitioners/institutions.— It has been provided *vide* Note (7) Rule (2) (e) of CS (MA) Rules, 1944, for reimbursement of the charges paid to private practitioners/institutions for undertaking skiagrams, electric therapy, bacteriological or pathological examinations, etc., on the advice of the Medical Officers owing to non-availability of the facility at Government hospital, the prior consent of the Director of Health Services in the case of Delhi State (Chief Administrative Medical Officer in the case of other States) has to be obtained.

2. After duly considering the representations to the effect that at present there are a number of laboratory tests which are not provided in local Government hospitals and that in order to reduce the work-load of the Director of Health Services on account of countersigning the medical claims in the matter, it has now been decided that in such cases where the charges for such examinations do not exceed Rs. 500 a certificate from the Medical Officer in charge of the case in the hospital that such facilities are not available in the Government hospital will be sufficient and that in cases where the charges for such examinations are likely to exceed Rs. 500 the prior approval of the Medical Superintendent of the Hospital/District Medical Officer should be obtained.

[ G.I., M.H., O.M. No. S. 14025/35/90-MS, dated the 27th February, 1991. ]

(24) Reimbursement of cost of blood and blood transfusion charges.— Blood transfusion charges paid to a Government institution or any other local organization recognized by the State Government for the supply of blood to patients in hospital are refundable under the rules. Even where such institutions or organizations do not exist or blood of the type required for a Government servant is not available with them, there should be no objection to the purchase of blood plasma from a chemist or to obtaining blood from a private donor and the cost thereof reimbursed to Government servants provided the authorized medical attendant has certified to the effect that the supply of blood required was not available from the local Government institution or a recognized organization and that the price paid for the blood was reasonable.

The Government servant should purchase blood only when he could not get or replace the blood from a relative donor for himself or for his dependants during any such need and this should be duly certified by the treating Doctor, an authorized medical attendant.

[ G.I., M.H., O.M. No. 4241-LSG (M)/52, dated the 12th September, 1952 and O.M. No. S. 14025/43/86-MS, dated the 26th August, 1986. ]

outside the district or by the Chief Administrative Medical Officer of the State if it is to be undertaken outside the State.

[ G.I., M.H., O.M. No. F. 33-4/59-H. I., dated the 18th/29th July, 1960. ]

1. For airlifting of the patient in emergent cases, requirement of certificate from the Chief Administrative Medical Officer is waived, *see* Appendix-VII.

2. For orders relating to admissibility of Travelling Allowance to and from the place of treatment for the journeys made by the patient, *see* orders in Appendix-VII.

(5) **Treatment for Immunizing and Prophylactic purposes.**— It has been decided that charges incurred on account of treatment for Immunizing and Prophylactic purposes should be refundable to Central Government servants in respect of treatment for themselves or members of their families in the case of communicable diseases only, viz., (1) Cholera, (2) Typhoid group of fevers (TAB), (3) Plague, (4) Diphtheria, (5) Whooping Cough, (6) Tetanus and (7) Poliomyelitis under the following conditions:—

(a) Treatment may be received from the authorized medical attendant at his consulting room/residence of the patient, or at the Outpatients Department of a Government/recognized hospital/dispensary direct, provided the local authorities such as the Municipalities, Local Boards, etc., have no arrangements for providing such treatment free of charge and a certificate to this effect is endorsed by the authorized medical attendant on the claim for the reimbursement of such expenses.

(b) Reimbursement of cost of prophylactic and immunizing agents specified above may be allowed while treatment for prophylactic and immunization is received from sources as at (a) above. Fees for consultations paid to the authorized medical attendants for such consultations will also be reimbursable.

(c) Normally the injections prescribed for such immunizing and prophylactic purposes should be got administered at the Outpatients Department of a Government/recognized hospital without payment of any injection fees. In cases where facilities for administration of such injections are not available at the OPD of a Government/recognized hospital and a certificate is given to this effect, such injections may be got administered from the authorized medical attendant at his consulting room or at the residence of the patient on payment of prescribed fees.

2. These orders are also applicable to the Central Government employees and members of their families stationed in or passing through Calcutta.

[ G.I., M.H., O.M. No. F. 10/78/64-H. (M.A.), dated the 15th December, 1965. ]

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(6) **Government employees/members of their families may take treatment from any hospital recognized under CGHS / State Government.**— The issue for grant of permission for treatment of Central Government employees and the members of their family in any of the hospitals recognized by the State Government / CGHS Rules / CS (MA) Rules, 1944, had been under consideration of the Government for some time past. It has now been decided that the Central Government employees and the members of their families may be permitted to avail of medical facilities in any of the Central Government, State Government Hospitals and the hospitals recognized by the State Government / CGHS Rules / CS (MA) Rules, 1944, as well as the hospitals fully funded by either Central Government or the State Government subject to the condition that they will be reimbursed the medical expenditure at the rates fixed by the Government under the CGHS Rules / CS (MA) Rules, 1944 or the actual expenditure incurred, whichever is less. In other words, the permission can be granted by the Head of the Ministry / Department / Office to the Central Government employees / members of their families to obtain medical services from any of the private hospitals recognized under CGHS in the 18 CGHS covered cities also.

2. If the treatment for a particular disease / procedure is available in the same city where the Government servant is employed, he may be permitted to avail of the medical services in any other city of his choice but in such cases, he will not be eligible for sanction of TA/DA. In case the treatment for a particular disease / procedure is not available at the same station, the beneficiary will be eligible for sanction of TA of his entitled class for taking treatment in a different city.

3. These orders will be effective from the date of issue.

4. This issues with the concurrence of Finance Division *vide* their Dy. No. 757/2000-JS & FA(H), dated 16-2-2000.

[ G.I., M.H., O.M. No. S. 14025/7/2000-MS, dated the 28th March, 2000. ]

(7) **Vaccination for Hepatitis B reimbursable.**— I am directed to invite a reference to your Office Letter No. OE-II/Audit/Med./Guard File IV/1997-98 D. 280, dated 9-2-1998 on the subject cited above and to state that cost of Hepatitis Vaccine B & C can be reimbursed, as it is covered under the provisions of definition "Treatment" in terms of Rule 2 (h) (ii) and (iii) of CS (MA) Rules.

[ C.A.G. Letter No. 119-NGE (ENTT)/8-98 I, dated 3-3-1998 addressed to the Accountant General (Audit), Rajasthan, Jaipur-302 005. ]

(8) **Payment / Reimbursement of medical expenses to the Central Government pensioners from two sources viz., from the Insurance Companies and the CGHS.**— The undersigned is directed to refer to Department of Health's O.M. of even number, dated 8-1-2004 (*Copy reproduced below*) on the subject mentioned and to state that the provisions contained in the said O.M. would also be applicable to the serving Central Government employees covered under the Central Government Health Scheme (CGHS) and the Central Services (Medical Attendance) Rules, 1944.