CONTRIBUTORY HEALTH SERVICES SCHEME (CHSS)
(Revised with effect from February 1, 1998)

अनुशक्ति भवन, छत्रपति शिवाजी महाराज मार्ग, मुंबई-400 039.
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Sub : Contributory Health Services Scheme in the Department of Atomic Energy.

The Contributory Health Services Scheme which is presently in operation in Mumbai was introduced vide this Department's OM No. 32/(5)/69-Adm. dated April 21, 1975. Another Scheme incorporating therein all the amendments issued from time to time to the above Scheme subsequently and also streamlining the various procedures thereunder was notified vide this Department's OM No. 22/27/84/CHSS/IR&W/27 dated February 16, 1994, to be effective from 1.4.1994 onwards. However, this had to be suspended later and the same was further reviewed. The President is accordingly pleased to sanction a revised Contributory Health Services Scheme incorporating therein liberalisation in various fields as also the required changes after the recent pay revision, as given in the Appendix. The new Scheme will come into effect from 1.2.1998. Pending cases will be settled under the old rates and those already decided shall not be re-opened. The expenditure involved will be debitable to the Sub-head "00104-Health Scheme - 03 Bhalla Atomic Research Centre", subordinate to the Major Head "3401-Atomic Energy Research" for which the corresponding grant number for the year 1997-98 is 88-Atomic Energy.

Although the Scheme framed as above is particularly meant for Mumbai, the same is extended mutatis mutandis to other places where the CHSS is in operation presently, i.e. Tarapur, Indore, Kota, Talcher, Manuguru, Kalpakkam and Chennai. This would mean that while all the ground rules and basic features of the Mumbai Scheme will be applicable to all these places, the special conditions and distinctive set up at each place as existing now would continue. In these places, as in the case of Mumbai CHSS, in addition to the DAE employees, the Scheme will cover the staff of NPCIL, TIFR, TMC and AEEB and also the employees of other organisations, if any, for whom the Scheme has been specifically extended from time to time. The CHSS at various places will be administered by the following authorities:

a) Tarapur - Station Director, TAPS
b) Indore - Director, CAT
c) Kota - Station Director, RAPS
d) Talchar/Manuguru - Chief Executive, HWB
e) Kalpakkam/Chennai - Director, IGCAR

(M. Venugopal) Assistant
Staff Relations Officer

1) Director, BARC
2) Director, CAT
3) Director IGCAR
4) Chief Executive, HWB
5) Station Director, RAPS
6) Station Director, TAPS
Copy to:

BARC

i) Controller,  
ii) Head, Accounts Division and IFA  
iii) Head, Medical Division

CAI

i) Chief Medical Officer  
ii) Chief Administrative and Accounts Officer

IGCAR

i) Joint Controller (F&A)  
ii) Chief Administrative Officer  
iii) Chief Medical Superintendent

GSO

i) Chief Administrative Officer

HWB

i) IFA, Mumbai  
ii) Director, (F & A), Mumbai  
iii) General Manager, Kota/Talcher/Manuguru

NPCIL

i) Chairman-cum-Managing Director, Mumbai  
ii) Executive Director, (Finance), Mumbai  
iii) Director (Personnel), Mumbai  
iv) Dy. General Manager, (IR), Belapur  
v) Station Director, MAFS

Copy to:

1) All Heads of the Units in Mumbai  
2) Registrar, TIFR  
3) Chief Administrative Officer, TMC  
4) Secretary, AEES  
5) Director, (Southern Region), AMD, Bangalore
APPENDIX

CONTRIBUTORY HEALTH SERVICE SCHEME (CHSS)

1.0 SCOPE AND APPLICATION:

1.1 This Scheme shall be confined to Brihan Mumbai/Navi Mumbai and shall be applicable to those mentioned in Clause 2 below.

1.2 Employees of the Department of Atomic Energy (hereinafter referred to as the Department) who are staying outside the limits of Brihan Mumbai and have been exempted from the Scheme prior to issue of these orders shall not be readmitted to the Scheme unless they shift their residence to Brihan Mumbai. Similarly, an employee, who has been resident in Brihan Mumbai but shifts his/her residence outside the limits of Brihan Mumbai may opt out of the Scheme consequent upon which he/she will cease to be a member of the Scheme with effect from the date of receipt of such intimation by the Medical Division, BARC. Contribution towards the Scheme will not be recoverable from him from the succeeding month. A new entrant to the service of the Department with Headquarters at Mumbai who stays outside Brihan Mumbai will be given choice to opt out of the Scheme. The option once exercised shall be final and he/she will not be allowed to rejoin the Scheme unless he/she shifts his residence to Brihan Mumbai.

1.3 Beneficiaries of the Scheme shall not be entitled to claim reimbursement under Central Services (Medical Attendance) Rules, 1944, for treatment availed of under the modern systems of medicine while in Mumbai.

2.0 ELIGIBILITY:

2.1 The Scheme shall be admissible to:

2.1.1 The Members of the Atomic Energy Commission who may wish to avail of the facilities under the Scheme and members of their families (whether stationed at Mumbai or not).

2.1.2 The employees of the Department working on regular, work-charged or on fixed term basis in the constituent units of DAE and whose place of work is situated in Brihan Mumbai including Navi Mumbai and members of their families residence with them.

Note: The Scheme may be extended at the discretion of the Department to the staff paid from contingencies who are stationed at Mumbai.
2.1.3 Emeritus Scientists stationed at Mumbai and members of their families residing with them.

2.1.4 (a) Employees of the Department temporarily transferred to other organisations at Mumbai under the administrative control/responsibility of the Department and members of their families residing with them provided they pay contribution to the Scheme and are not beneficiaries of any other Health Scheme. Specific orders will, however, have to be issued by the Department in each case.

(b) Employees of the Department while on deputation or foreign service to Government Departments/Undertakings at Mumbai and members of their families residing with them, provided they pay contribution to the Scheme and are not beneficiaries of any other health Scheme. An option shall be exercised by the Government servant concerned for availing of the CHSS facilities. Specific orders will, however, have to be issued by the Department in each case.

2.1.5 The employees of the Department having headquarters elsewhere than in Mumbai who visit Mumbai on tour/training/leave and members of their families will be entitled to the concession of OPD treatment only. Only in a medical emergency they may be hospitalised in the BARC Hospital.

2.1.6 Members of the family of an employee registered under the Scheme who is transferred in public interest, temporarily or otherwise, outside Mumbai but within units under the administrative control of DAE provided they continue to reside in Mumbai and provided further the employee continues to pay the contribution at the same rate as before.

2.1.7 (a) The spouse of a deceased employee and other family members of the deceased employee registered under the CHS Scheme may continue to avail of the benefits, provided the deceased employee had completed a minimum of one year's service in the Department and the spouse pays the contribution last paid by the deceased employee and provided further, the spouse and other members of the family are otherwise eligible for the continued registration under the Scheme. The scale of pay of the post last held by the employee will be the basis for determining the entitlement in terms of Annexure-I.

(b) The family of a deceased employee may avail of the benefits of the Scheme for the whole of the month in which the employee died as well as the succeeding calendar month without payment of contribution for the said succeeding month.
2.1.8 (a) Visiting Scientists/Professors/Fellows of IAEA stationed at Mumbai and paid by the Department under bilateral or IAEA Fellowship Scheme and whose term is more than three months and members of their families residing with them on payment of contribution at the rate applicable to those as indicated in para 13.2 (a) below.

(b) Visiting Scientists/Professors/Fellows stationed at Mumbai and paid by the Department under the bilateral or IAEA Fellowship Scheme whose term is less than three months duration are eligible for emergency treatment for themselves and their family members, on payment of the amount indicated in para 13.2 (a) below. However, the liability for provision of medical attention would be limited to Rs.25,000/= as in the case of other visiting Scientists & Fellows. Cost of treatment in excess of this, if any, will have to be borne by the individual or the agency sponsoring him.

(c) Visiting Scientists/Professors/Fellows stationed at Mumbai and paid by the Department under the bilateral or IAEA Fellowship Scheme are to be medically examined before commencement of their work.

2.1.9 Experts (other than those who are employees/retired employees of the Department) and employees of other Organisations (hereinafter referred to as "Experts") deputed to Mumbai in the interest of work of the Department in accordance with the international collaboration agreement and their wives/children may be specifically admitted to the Scheme at the discretion of Director, BARC, subject to such conditions as may be prescribed. Subject to contractual provisions, if any, the rate of recovery will be the average per capita expenditure of the Scheme.

2.1.10 Retired employees of the Department who opt for the benefits of the Scheme and members of their families as defined under the Scheme, subject to the following conditions:

(i) Employees should have put in a minimum of five years service in the Department before his/her retirement.

(ii) Employees should pay the contribution in advance for a minimum period of one calendar year and the contribution shall be with reference to the pay drawn by him/her prior to retirement/invalidation. Employees may also have an option to pay one time contribution for ten years to be eligible for life long registration. The option to join the Scheme any time after the retirement will be available to the employees subject to the payment of one time contribution for life long registration as indicated or arrears of contribution from the date of retirement.
(iii) Employees who are retiring voluntarily will be eligible for continuing registration under the Scheme provided they pay an enhanced contribution at the rate of three times the normal rate of contribution. However, Director, BARC, may relax the condition regarding payment of enhanced contribution in deserving cases such as voluntary retirement taken on domestic compulsion, ill-health, etc.

(iv) In the case of the retiring employees the coverage will be limited to the employee and spouse only.

(v) Retired employees, irrespective of whether they are permanently settled down or not at a place where CHSS facilities are not available can come to Mumbai for treatment. They can also have an option for claiming reimbursement following the pattern of CS (MA) Rules only for the in-door medical treatment availed of by them and their family provided he/she was a member of CHSS at the time of retirement. Such reimbursement shall be allowed only for the treatment availed of through the following -

(a) Government hospitals and medical institutions of the local authorities such as District Hospitals, Medical colleges, Municipal Hospitals, etc.

(b) Private Hospitals as recognised by the Ministry of Health & Family Welfare, New Delhi;

(c) Hospitals recognised under CGHS;

(d) Hospitals recognised by the DAE for treatment under CHSS/CS (MA) Rules.

(e) Hospitals recognised by the concerned State Governments, other Central Government Departments and Public Sector Undertakings under the control of DAE.

(vi) Those employees retired from places where CHSS is not available and settled down in a place where CHSS is available may also become members of the Scheme.

(vii) If lifelong registration is not done, it is obligatory on the part of the retired employees to revalidate the registration every year after filling in a declaration form to the effect that they do not avail of medical facilities from any other sources.

(viii) The scale of pay of the post held by the employee prior to retirement in the Department will be the basis for determining entitlement for hospitalisation (Annexure - I).
(ix) The benefits of the Scheme will continue to be made available to the members of the families of the retired employees who are covered by the definition of "Family" under Clause 4 even after their death subject to payment of appropriate contribution and fulfillment of other conditions. The provisions for claiming refund as indicated at 2.1.10 (iv) shall be admissible to the categories of family members indicated herein and at clause 2.1.7.

(x) The retired employee should be a citizen of India.

2.1.11 Employees registered under the Scheme on their superannuation or invalidation and members of their families registered under the Scheme may avail of the benefits under the Scheme during the succeeding calendar month without payment of further contribution.

2.1.12 Advisers appointed by the Department will be eligible to avail of CHSS facilities at their option, which should be exercised within one month of appointment, on the same scale as admissible to a retired employee.

2.1.13 TRAINEES:

(a) Trainees admitted to the Training School at BARC and other stipendiary trainees stationed at Mumbai.

(b) Trainees stationed at Mumbai sponsored by International Agencies and accepted by BARC or other Units of the Department.

NOTE: The benefits of the Scheme will be admissible only to the trainees and not to their families. The trainees admitted to the Training School at BARC and the trainees sponsored by International Agencies and accepted by BARC or the other Units of the Department shall be treated as belonging to Category "C" (Annexure I). Other trainees who are eventually to be absorbed as Tradesman/Scientific Assistant on successful completion of their training shall be treated as belonging to Category "B". Stipend received by the trainees will be treated as pay for the purpose of recovery of contribution.

2.1.14 Honorary/Part-time medical staff appointed for the Scheme (not their families) may join the Scheme at their option which shall be exercised within one month of appointment. Contributions shall be recovered from them at the maximum prescribed rates without reference to the honorarium payable. Their entitlement will be as per Category "D" (Annexure I). Once an option is exercised to opt out, it shall be treated as final during the term of their engagement in the Department.
The staff of the Department of Atomic Energy Education Society and schools set up by the Department on terms and conditions separately notified.

The employees of such Organisations under the administrative control/responsibility of the Department as may be admitted at the discretion of the Department on such terms and conditions as may be prescribed.

NOTE: No servant shall be registered under the Scheme and the registration already existing in this regard will remain cancelled.

Notwithstanding any other provision, benefits of the Scheme can be made available to any person at any worksite in Mumbai in an acute medical emergency or in the case of an accident occurring at the premises of the Department or its units in Mumbai at the discretion of the Head, Medical Division, BARC. The expenses incurred in this connection will be recovered from the person or agency concerned.

TREATMENT OUTSIDE BRIHAN MUMBAI:

While at a place other than Brihan Mumbai, an employee of the Department or a member of his/her family shall be eligible for Medical Attendance/Treatment from any Registered Private Medical practitioner whose qualifications are recognised under the Indian Medical Council Act, 1956. The entitlement will be regulated under CS(MA) Rules, 1944.

In the case of continuation of CHSS treatment already in progress, the cost of medicines bought on prescription from the CHSS doctors for the period of treatment prescribed may be reimbursed in full in accordance with the procedure to be notified by the Medical Division, BARC.

DEFINITION OF FAMILY:

Family for the purpose of the Scheme shall mean:

(a) Employee's wife or husband, as the case may be.

(b) Children, step-children or legally adopted children up to 25 years of age, restricted to two. Children beyond the age of 18 years and up to 25 years will be eligible for continuation under the Scheme provided they are not gainfully employed. However, in case of any hardship, in individual cases for justifiable reasons a relaxation shall be made by the Department on the basis of recommendation of the Head of the Unit in the matter of upper age limit.
Explanation: In the case of existing employees, the above restriction regarding children/step-children exceeding two in number not being eligible for coverage under CHSS will be given effect to 10 months after the commencement of this Scheme i.e., with effect from 01-02-1998. However, in the case of such of those employees who may have more than two children/step-children registered under the Scheme on 01-02-1998, the position as obtaining on that date will be frozen and they will not be allowed to register any more of their children/step-children. Further, in the case of existing children already registered under the Scheme, status-quo will continue subject to the age restrictions prescribed above.

In the case of new employees this restriction will be given effect to immediately.

(c) Mentally retarded/physically handicapped children shall be eligible for the benefits till such a time they are dependent on prime beneficiaries, provided that the disability exceeds 40%.

(d) Parents of the prime beneficiary who are wholly dependent on the prime beneficiary and permanently residing with the prime beneficiary and further provided the monthly income of both the parents from all sources does not exceed Rs 1500/=

NOTE:

A. WIFE: More than one wife of an employee can be registered under the Scheme if the marriages are not in contravention of:

(a) Central Civil Services (Conduct) Rules, 1964.

(b) Administrative Orders issued by the Ministry of Home Affairs vide their O.M.No.290/59-Estt, dated 16th October, 1954.

(c) The legislation restricting plural marriages.

B. CHILDREN:

(a) Married, divorced or otherwise legally separated and widowed daughters, even though dependent on the employee, are not eligible for medical benefits under the Scheme.

(b) The following will not be considered as gainful employment:

   (i) Part-time employment if the same is certified to be so by the employer concerned and the monthly income does not exceed Rs.1500/=
(ii) Literary, artistic, cultural or similar pursuits the income from which does not attract Income Tax.

(iii) Academic/University stipends, scholarships and freeships.

C. PARENTS:

Parents will be regarded as wholly dependent on the employee if they normally reside with him/her, and if their (of both parents) total monthly recurring income does not exceed the pay of the employee and is not more than Rs.1500/- from all sources. The admission of parents to the Scheme is also subject to the following conditions:

(i) The term "permanently residing with the employee" means that the parents shall not be away from the residence of the employee for more than 90 days in a calendar year.


Prior to the request for registration on each occasion the parents should have actually resided with the employee for a minimum period of 30 days. The condition may, however, be waived by the Head, Medical Division, BARC, in the case of parents who had earlier been registered under the Scheme provided the employee concerned himself/herself has been on leave/temporary transfer/tour etc. duly approved, when the parents were also out of Mumbai.

Parents should reside with the employee in the same residence where the employee resides. If parents of an employee move out of Mumbai continuously for more than 60 days CHSS shall be notified by the employee for suspension/cessation of the facilities.

For the purpose of computing the income of the parents the following may be adopted:

Lumpsum non-recurring income e.g. Contributory Provident Fund benefits, Government of India Prize Bonds, Gratuity/Committed Gratuity, Insurance benefits, etc. should not be regarded as income for the purpose of these rules.

Recurring incomes from sources such as houses, land holdings, fixed deposits etc. should, however, be taken into account for the purpose of assessing the income.
Explanation:

Parents of a married female employee would also be entitled to the benefits of the Scheme if they continue to be wholly dependent and permanently reside with the female employee after her marriage. She will, however, have a choice (the option once exercised shall be final) to include either her parents or her parents-in-law for availing of the benefits under the Scheme, subject to the conditions of dependency, residence, etc. being satisfied.

4.2

No person who is receiving or is eligible to receive medical aid/facility/cash subsidy, cash allowance or reimbursement for medical care from any source other than this Scheme, such as for example the Railways/CGHS/Commercial Organisations/Public Sector Undertakings/State Governments etc. shall be admitted to the Scheme without the explicit permission and subject to such restrictions as may be imposed by the Head, Medical Division, BARC and subject to production of a certificate from the employer of the spouse stating that the medical benefits from them have been withdrawn. All employees should declare at the beginning of each calendar year or as soon as possible thereafter about the eligibility or otherwise of the members of their family for medical assistance from other sources.

NOTE: Retired employees including those who had retired voluntarily or voluntarily retiring employees receiving medical allowance under the recommendations of the V Central Pay Commission shall not be admitted to the Scheme without the explicit permission and subject to such restrictions as may be imposed by Director, BARC.

4.2.1

A declaration in the prescribed form regarding income and residence of parents as also regarding residence and dependence of eligible children should be furnished by the employee at the time of initial registration and at the beginning of every calendar year thereafter for continuation of the CHSS facilities.

4.2.2

It shall be the responsibility of the employee concerned to notify the Medical Division, BARC, as soon as any member of the family becomes ineligible for the benefits of the Scheme and to surrender the cards.

4.2.3

In case any information in respect of any member furnished by the employee is found to be incorrect, the member's name will be canceled from the Scheme forthwith; the entire cost on the treatment rendered to the beneficiary so far shall be recovered from the employee, and in addition, the employee will render himself/herself liable to disciplinary proceedings.
5.0 DETAILS OF THE SCHEME

5.1 The dispensaries and clinics of the Scheme, their working hours, the procedures for registration at these centers etc. shall be notified by Medical Division, BARC from time to time.

5.2 The beneficiaries of the Scheme shall be entitled to free medical attendance and treatment at the medical centres. Medical Officers of CHSS may also visit patients at their residences and provide medical attendance and treatment when considered necessary.

6.0 HOSPITALISATION

6.1 Hospitalisation facilities are provided at the BARC Hospital. However, if a vacant bed is not available and if the seriousness of the disease or other medical considerations warrant immediate admission of the patient to any other hospital, the patient may be admitted in any of the hospitals/nursing homes approved by Director, BARC. The charges levied by these hospitals/nursing homes shall be borne by the Scheme in accordance with the scale set out in Annexure I.

Note: Hospitalisation facilities for psychiatric patients are not provided in BARC Hospital. However such facilities could be availed of from other recognised hospitals under the Scheme.

6.2 All the facilities for the proper medical treatment and diet shall be provided free of charge at the BARC Hospital. Payment to the recognised hospitals/nursing homes on account of treatment of beneficiaries will be made by BARC directly on receipt of bills from the hospitals/nursing homes concerned. Recovery of inadmissible charges, if any, will be made from the employee.

6.3 If after obtaining a reference from CHSS, a beneficiary admits himself/herself on his/her own initiative to an accommodation higher than his/her normal entitlement, the entire bill of the nursing home/hospital shall be first paid by the employee who may claim reimbursement from CHSS for that portion of the bill which would fall within his/her normal entitlement for accommodation as well as other allied charges. Head, Medical Division, BARC may, for special reasons to be recorded in writing, approve reimbursement in excess of the normal entitlement.

6.4 The conditions for engaging special nurses/wardboys etc. in exceptional medical circumstances shall be separately notified by the Head, Medical Division, BARC.

6.5 Treatment for purely aesthetic reasons will not be covered under the Scheme.
6.6 New modalities of treatment which are considered as economical to meet the needs of the Scheme can be introduced with the approval of the Director, BARC.

6.7 When a patient does not leave the hospital after being discharged by the treating doctor, the entire cost of stay and allied services availed of by the patient from the date of discharge to the patient's actual leaving the hospital, shall be recovered from the employee (prime beneficiary).

7.0 PATHOLOGICAL, X-RAYS ETC. EXAMINATION FOR DIAGNOSIS

7.1 The examinations shall be conducted free of charge on the advice of the Medical Officer. Head, Pathology/Radiology, BARC Hospital may refer cases to panel hospitals/consultants wherever considered necessary. Payment to the panel hospitals/consultants in this respect shall be made directly by BARC.

8.0 SPECIALIST CONSULTATION AND TREATMENT

8.1 Director, BARC will appoint from time to time a panel of Specialists/Consultants within Brihan Mumbai both for reference at their consulting rooms and for visiting the BARC Hospital for treatment of various diseases and ailments and for surgical operations under the Scheme. Referrals to these specialists shall be issued by the In-charges of the various units attached to the BARC Hospital and/or on the basis of procedure prescribed by Head, Medical Division, BARC.

In exceptional medical circumstances hospitalisation or consultation/treatment within the country but outside Brihan Mumbai may also be authorised. Reimbursement in such cases shall be decided on merits.

8.2 The rates of fees payable to the Specialists shall be prescribed by Director, BARC.

8.3 Testing of vision, treatment of eye-diseases and full dental-care will be provided free of cost. Provision of goggles, etc. is not within the purview of the Scheme. Artificial hearing-aids will be made available to the employee or any one of his family members on a one-time basis, on the recommendations of ENT specialist of BARC Hospital and on the basis of audiogram given to him/her, identifying the degree and nature of deafness. Payment will be made directly to the manufacturer identified by BARC Hospital. Reimbursement can be made only if the referral note is counter-signed by the ENT Specialist of BARC Hospital and duly approved by the Head Medical Division, BARC.

8.4 Artificial dentures will be provided, where required, on payment at the rates specified in Annexure II.
8.5 Employees whose pay does not exceed Rs.7000/= p.m. and members of their families will be eligible for reimbursement for purchase of spectacles from registered opticians upto Rs.100/= only. Replacements shall be at the cost of the employee concerned.

8.5.1 Contact lens will not be provided nor will its purchase be subsidised under the Scheme.

9.0 SPECIAL FACILITIES FOR TREATMENT OF ACUTE OR CHRONIC DISEASES

9.1. The employees of the Department and members of their families suffering from diseases like Tuberculosis, Cancer, Poliomyelitis and communicable diseases will receive treatment from the Medical Officer of CHSS and approved consultants. If the authorised Medical Officer considers that the patient requires treatment in a specialized hospital/institution for such diseases, he will refer him/her to the hospital/institution recognized for this purpose. A list of such specialized hospitals/institutions will be notified by the Head, Medical Division, BARC. The charges incurred at these hospitals/institutions and fees charged by the Specialists for consultation, X-rays and other investigations shall be paid, directly by BARC on receipt of bills from the hospitals/institutions or specialties concerned.

9.2. Reputed hospitals/institutions in the country outside Mumbai may also be recognised by the Head, Medical Division, BARC for specialized treatment. The cost of treatment in these hospitals/institutions as considered reasonable by the Head, Medical Division, BARC will be borne by the Scheme. Reimbursement of claims in regard to recognised hospitals/institutions shall be in accordance with the schedule of rates approved for these hospitals/institutions and will be subject to the ceiling in this regard fixed by Director, BARC. Beneficiaries including retired employees who are referred to hospitals/institutions outside Brihan Mumbai will be entitled to travelling allowance including daily allowance on the same scales as prescribed under the Central Services (Medical Attendance) Rules, 1944 for the particular categories of employees. The travelling allowance and daily allowance will also be admissible to an Attendant accompanying the patient as recommended by the attending Doctor.

10.0 MATERNITY BENEFITS

10.1 These benefits will be admissible only to the wife of an employee or to a female employee.
BARC Hospital has a maternity ward in which eligible beneficiaries can be admitted for confinement. Subject to the provisions of para 10.3 below, the expenditure on confinement will be borne by the Scheme. The eligible beneficiaries will also have the option to make their own arrangements for confinement and claim reimbursement as laid down in the following paragraphs.

The reimbursement will be allowed on production of a medical certificate and bill from the Nursing Home/Hospital about the occurrence of birth/still birth. The Municipal birth certificate may also have to be produced, if necessary, for verification. Reimbursement shall be allowed only if the confinement takes place in a Maternity Home/Hospital managed by a doctor whose qualifications are recognised by the Indian Medical Council Act, 1956 or in a Government or Municipal or Cantonment Hospital.

No confinement charges will be reimbursable nor will the free maternity benefits at the BARC Hospital be available, even in a medical emergency, if the employee at the time of confinement has two or more living children.

An amount of Rs.750/- or actual cost whichever is less will be admissible for meeting confinement expenses at places (including outside Mumbai) other than BARC Hospital.

Notes:

(1) In-patient care at the time of confinement will be covered by the amount mentioned in para 10.4 above. The term confinement for the purpose includes live births, still births and abortions.

(2) For determining the entitlement under para 10.4 the number of living children at the time of confinement shall be taken into account.

(3) In determining the number of living children, the children of both the parents will be taken into account. For example, an employee who has two living children by an earlier marriage will not be eligible for reimbursement of confinement expenses for his second wife.

If the parents have less than two children ante-natal/post-natal care will be provided to the beneficiaries as under:

(i) Free treatment at the dispensaries as well as at the OPD of the Hospital.

(ii) Free in-patient care at the BARC Hospital.
(iii) Expenses towards ante-natal, post-natal treatment taken elsewhere in emergency either in OPD or as inpatient will be reimbursable up to a maximum of Rs.1000/- in addition to that admissible under clause 10.4 subject to certification by Staff Gynaecologist BARC Hospital.

10.6 If the parents have more than two living children the beneficiary will not be eligible for ante-natal, post-natal treatment or confinement benefits under the Scheme, except in a medical emergency to be certified by the Staff Gynaecologist.

10.7 In the case of a domiciliary confinement supervised by a doctor (having qualifications recognised by the I.M.C. Act, 1956), a maximum of 50% of the amount mentioned in para 10.4 or actual charges supported by bills whichever is less will be payable. In such cases an appropriate certificate from the attending doctor should be produced by the employee. The beneficiary will also be eligible to draw such drugs as are available from the Scheme if the confinement takes place at Mumbai.

10.8 Admission for false pain which does not result in delivery will be treated as ante-natal care.

10.9 Pre-natal registration at the CHSS dispensary is compulsory, for all the beneficiaries for the purpose of claiming reimbursement for maternity care. If this is not done, no claim for reimbursement of expenses will be entertained.

10.10 If a medical emergency arises at the time of confinement either for the mother or for the infant involving operative delivery or surgical operations on the infant or in cases of puerperal sterilization, actual expenses restricted to panel hospital charges may be reimbursed in addition to the amount admissible vide para 10.4 above provided the Head, Medical Division, BARC, is satisfied that (a) the expenditure was actually incurred, was necessary and (b) it was reasonable. The decision of the Head, Medical Division, BARC, shall be final in regard to the amount admissible. In case a puerperal sterilization in a Govt./Municipal/Cantonment Hospital, the claim shall be regulated under CS(MA) Rules, 1944.

11.0 FAMILY PLANNING

11.1 Supply of contraceptives and procedures for family planning including sterilization will be available free of charge.
ARRANGEMENTS FOR THE STORAGE AND ISSUE OF MEDICINES ETC

12.1 The Hospital Stores of BARC shall build up and maintain its stock of medicines by raising indents on the Directorate of Purchase and Stores. The Medical Officers-in-charge of Dispensaries set up under the Scheme will normally obtain the requirements from the Hospital Stores. Medicines will be issued free of cost to the beneficiaries on the authority of prescription from the Medical Officers of the Scheme.

12.2 Medical Officers may in emergency order medicines directly from the approved agencies, subject to such conditions as may be prescribed by the Head, Medical Division, BARC from time to time.

12.3 The beneficiaries will be eligible to receive free only such medicines as prescribed by the Medical Officers of the Scheme, Panel Consultants or Doctors of hospital/nursing home affiliated to the Scheme. The Head, Medical Division, BARC will have full power to prescribe at the cost of the Scheme any medicines, which in his/her opinion is necessary to safeguard the health of the patient or will be conducive to the therapy or mitigation of the disease. A pharmacopoeia shall be notified by the Medical Division, BARC from time to time.

13.0 CONTRIBUTION RECOVERABLE UNDER THE SCHEME

13.1 Payment of contribution towards the Scheme is compulsory for all the employees under the control of the Department with Headquarters at Mumbai and who have opted to join the Scheme. The entitlement of beneficiaries registered under the Scheme will be with reference to the pay of the prime beneficiary in all cases.

13.2 For the purpose of medical service provided under the Scheme, a monthly contribution shall be recovered. Contribution shall be recoverable at the following rates with effect from 01-02-1998.

<table>
<thead>
<tr>
<th>Category of beneficiaries</th>
<th>Rate of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Members of AEC and their family</td>
<td>Rs.200/= p.m.</td>
</tr>
<tr>
<td>b) Visiting Scientists/ Fellows/Professors and their family</td>
<td>Rs.200/= p.m.</td>
</tr>
<tr>
<td>c) A post carrying a pay or a scale of pay with a maximum of not less than Rs.18000.</td>
<td>Rs.200/= p.m.</td>
</tr>
</tbody>
</table>
### Category of beneficiaries

<table>
<thead>
<tr>
<th>Description</th>
<th>Rate of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>d) A post carrying a pay or a scale of pay with a maximum of not less than Rs.12000 but less than Rs.18000.</td>
<td>Rs.150/= p.m.</td>
</tr>
<tr>
<td>e) A post carrying a pay or a scale of pay with a maximum of not less than Rs.9000 but less than Rs.12000.</td>
<td>Rs.100/= p.m.</td>
</tr>
<tr>
<td>f) A post carrying a pay or a scale of pay with a maximum of over Rs.4000 but less than Rs.9000.</td>
<td>Rs.55/= p.m.</td>
</tr>
<tr>
<td>g) A post carrying a pay or a scale of pay the maximum of which is not more than Rs.4000.</td>
<td>Rs.35/= p.m.</td>
</tr>
<tr>
<td>h) All trainees</td>
<td>Rs.100/= p.m.</td>
</tr>
</tbody>
</table>

**Note:**

1. The contribution will be increased at the rate of 10% of the existing rate, once in two years.
2. In the case of persons retiring voluntarily the enhanced contribution at the rates as indicated at 2.1.10 (iii) will be applicable.

### 13.3

For the purpose of recovery of the monthly Contribution "Pay" shall mean pay as defined in F.R.9(21)(a).

### 13.4

The contributions shall be recovered on the basis of the pay of the employee on the first day of each calendar month. In the case of persons newly appointed or transferred to Mumbai after the first day of the month, the contribution shall be based on their pay on transfer/appointment in Mumbai and will be recoverable in full for the entire month.

### 13.5

In the case of an employee transferred to Mumbai from a station where there is no CHSS, no recovery shall be made for the month if he joins after the 15th of the month, however if he joins prior to the 15th of the month, full recovery for the month shall be effected at Mumbai. This will also apply in the case of an employee on his first appointment in Mumbai. However, medical benefits will be made available from the date the employee joins at Mumbai.
13.6 The benefits of the Scheme will not be available to any employee appointed in various units of the Department at Mumbai on a purely temporary basis for short term. Contributions will not be recovered in such cases.

13.7 In cases where both the husband and wife are employees of the Department, the payment of contribution will be regulated as under:

a) The contributions shall be recovered from only one of them (wife or husband) whose pay is higher. The husband and wife shall send a joint declaration to the Accounts Division, BARC giving relevant details in this regard.

b) The persons from whose pay-bill the contribution is recovered shall be regarded as the prime beneficiary, and will be eligible to register his/her parents.

c) In cases where the pay of the husband and wife is equal, the contribution shall be recovered from the husband who will be eligible to register his parents. If the wife wishes to register her parents, who are otherwise eligible a separate contribution shall be payable by her on the basis of her pay.

d) If the wife is paying the contribution and the husband wishes to register his parents, who are otherwise eligible, he will have to pay an additional contribution based on his pay.

e) In case where the husband or wife draw higher pay alternately every few months, the entire contribution shall be recovered from the husband who shall be regarded as the prime-beneficiary and will be eligible to register his parents even if his pay is lower during certain months.

13.8 The facilities of the Scheme will be available to the person who is proceeding on any kind of leave including EOL and the contribution shall be recovered based on the pay drawn by him/her before proceeding on such leave. However, the Appointing Authority will have the right to stop the facilities in the case of employees remaining absent unauthorisedly.

13.9 An employee who proceeds on deputation or on deputation-cum-special leave or on any kind of study leave, may exercise an option to avail of the benefits of the Scheme for his/her family. The option, shall be exercised before the employee proceeds on leave/deputation and shall be treated as final.
In the case of families of employees who are only temporarily transferred outside Mumbai or within Mumbai but outside the Department who are eligible for the benefits of the Scheme, the contribution shall be recovered on the basis of the pay drawn immediately prior to such transfer.

In the case of employees under suspension, the contribution shall be recovered on the basis of the subsistence allowance. If the employee is however, subsequently allowed to draw pay for the period of suspension, the difference between the contribution recovered on the basis of the subsistence allowance and the contribution payable on the basis of the pay ultimately drawn shall also be recovered. If the subsistence allowance is withdrawn, the availability of CHSS facilities will be suspended as long as the suspension continues. For the purpose of determining entitlement under the Scheme, the pay that he would have drawn but for his suspension should be taken into account.

OTHER FACILITIES

An employee or a member of his family may be authorised by the Medical officers of the Scheme to have injections administered by a medical practitioner registered under the Indian Medical Council Act, 1956 either at the dispensary of the practitioner concerned or at the employee’s residence. The cost of injections where the vials have not been supplied by the Scheme and charges for administering the injections (including visit charges) will be borne by the Scheme in accordance with the schedule to be notified by the Medical Division, BARC. Professional charges for dressing etc., by private medical practitioners either at the dispensary of the practitioners or at the residence of the employee will be reimbursable provided the nature of the case warrants such treatment and prior approval of the concerned Medical Officer of the Scheme has been obtained. The scale of reimbursement of these facilities, which will be allowed only in exceptional circumstances and the conditions subject to which such reimbursement may be allowed, will be notified by the Medical Division, BARC.

The Scheme may arrange to provide facilities such as speech therapy, child psychiatric care and medical social care free of cost to the beneficiaries and may recognise institutions for this purpose where these facilities can be availed of.

Artificial appliances for diseases like polio, TB or for protheses or in cases requiring surgical operations may be supplied free of cost under the Scheme. Replacement if justified may also be allowed.
However, in the case of replacements 50% charges will be recovered from those getting pay above Rs.9650/= p.m. (those getting Rs.9650/= p.m. and less will be allowed replacement free of cost). Firms/Institutions may be recognised for the supply of these appliances.

14.4 Ambulance attached to the BARC Hospital will be provided free of charge for bringing any beneficiary for emergency treatment or any invalid patient to the Hospital/Consultants and back. BARC Hospital Ambulance service will be available for non-ambulatory discharged patients only as certified by the in-charge of the concerned unit. In case BARC Hospital ambulance service is not available, the reasonable charges towards transportation by private ambulance arranged by the employee, will be reimbursed.

14.5 No travelling allowance shall be payable for any medical attendance or treatment in Brihan Mumbai.

14.6 Charges not exceeding Rs.200/- for hiring 'hearse' for a deceased beneficiary of the Scheme may be reimbursed to the employee in category 'A' and 'B' (vide Annexure I) only.

15.0 REIMBURSEMENT OF EXPENSES INCURRED IN A MEDICAL EMERGENCY IN BRIHAN MUMBAI

15.1 In medical emergencies all the beneficiaries under the Scheme may receive, as a concessional measure, medical attendance and treatment from any private medical practitioner or hospital in Mumbai and the reimbursement for such expenditure will be limited as detailed in the succeeding paragraphs.

15.2 For the purpose of this Scheme, the term "emergency" shall mean a situation or contingency when but for the immediate medical aid sought there would have been, on the basis of the medical and attendant considerations, a serious danger or hazard or severe or deleterious consequence to the health of the patient. The accessibility/availability or otherwise of the facilities under the Scheme in the context of the severity of medical emergency/ailment at the time of emergency will also be taken into consideration. The opinion of the Head, Medical Division shall be final as to what constitutes an emergency treatment, notwithstanding any medical certificate to the contrary produced from a private doctor or hospital.

15.3 The Medical Division, BARC shall determine whether a claim should be reimbursed or not and also the extent to which the reimbursement should be allowed from the point of view of medical necessity etc., e.g. (a) whether it was a case of medical emergency.
(b) whether the intimation regarding emergency was given as required; (c) whether the items included in the claim were medically necessary and (d) whether the charges/prices are reasonable.

15.4 The employees/beneficiary concerned should report the emergency treatment availed of either for himself/herself or for the members of his/her family registered under the Scheme as early as possible and in any case within 4 days from the date of the commencement of the treatment to the Medical Officer of the Dispensary where the employee is registered. The employee should thereafter act on the directions if any given to him/her by the medical officer failing which no reimbursement will be allowed. In exceptional circumstances, the above condition may be waived or delay in reporting conditioned by the Head, Medical Division, BARC.

15.5 The reimbursable amount for outdoor and domiciliary treatment shall be restricted to Rs.1500/= and for in-patient treatment the reimbursable amount shall be at the actuals restricted to Rs.5000/=. However, in deserving cases Director, BARC, may authorise reimbursement of charges over and above those indicated above in suitable cases.

15.5.1 In-patient treatment exceeding 15 days is not ordinarily permissible unless relaxed as a special case by Head, Medical Division for reasons to be recorded in writing.

15.6 The expenditure incurred on emergency medical treatment/attendance will be reimbursed to the extent admissible in terms of charges etc. prescribed under the Scheme. In cases where charges for the purpose of reimbursement have not been prescribed, such amount as is considered reasonable will be reimbursed. Claims for reimbursement should be supported by appropriate receipts and other documents.

15.7 If there are reasons to disbelieve the genuineness of a claim even though supported by appropriate documents, the claim should be forwarded with a report to the Head of the Office concerned in which the employee is working for necessary investigation.

15.8 The term "Private Doctor" for the purpose of the Scheme shall mean a doctor having at least a qualification recognised by the Indian Medical Council Act, 1956. Reimbursement of any expenditure under this Scheme shall be allowed only if the attendance/treatment has been availed of from such doctors.

15.9 A claim for reimbursement shall be preferred within 30 days from the date of commencement of treatment. This limit may be relaxed to 90 days by the Head, Medical Division, BARC in special circumstance, beyond the control of the claimant.
15.10 Where there are difficulties in verifying to the full satisfaction the exact nature of emergency or the details of treatment, only a sum not exceeding Rs.10/ per day will be payable for OPD/domiciliary treatment and a sum not exceeding Rs.20/ per day for inpatient treatment (subject to overall limits laid down in para 15.5).

15.11 OUTPATIENT TREATMENT

15.11.1 The rates reimbursable for out-patient for consultation including; visits, professional service charges, injections etc. shall be at the actuals restricted to what is indicated in para 15.5.

15.11.2 Out-patient treatment or domiciliary treatment for more than seven days is not generally permissible under the emergency Scheme.

15.12 IN-PATIENT TREATMENT: The rates reimbursable for inpatient treatment relating to 15.5.1 towards stay charges, treatment, surgery and for various investigative facilities consultation, etc. will be restricted to charges indicated in para 15.5.

Note: If a beneficiary desires to transfer himself/herself to an approved Hospital after initial admission to a non-approved Hospital, this will be arranged by the Medical Division, BARC if it is feasible from the medical and other angles. All expenses incurred prior to such transfer shall be regulated as detailed under 15.5 and 15.5.1.

15.13 Claim for confinement, ante-natal/post-natal treatment/ abortion/termination of pregnancy, will not be regulated under the Emergency Scheme.

15.13.1 The cost of toiletry items are not reimbursable.

15.13.2 The claims for reimbursement for indoor/outdoor inpatient domiciliary treatment should be supported by a certificate from the concerned doctor/hospital to the effect that the treatment/facility provided were the minimum which were essential for the patient's treatment.

15.14 The provisions contained in paras 15.1 to 15.13.1 above will be applicable mutatis mutandis to beneficiaries residing outside Brihan Mumbai in respect of treatment availed of by them from Private Medical Practitioners or through a hospital in a medical emergency outside Brihan Mumbai where they may be residing.
16.0 IMPRESTS

16.1 Director, BARC may sanction any amount considered reasonable to deposit in the empanelled Hospital where it is insisted upon to facilitate admission of the beneficiaries in these hospitals. The Head, Accounts Division, BARC will keep a watch over the deposits for withdrawal when such hospitals are de-recognised and intimated by Medical Division, BARC.

16.2 Director, BARC may sanction any reasonable amount as permanent advance to the Head, Medical Division, BARC for meeting the expenditure on consumable etc. for the Hospital.

17.0 MISCELLANEOUS PROVISIONS

17.1 The Scheme shall be administered by the Department through the Director, BARC who shall exercise the necessary administrative and cognate financial powers within the scope of the Scheme as approved by the Department. He shall also exercise the powers of Head of the Department for this purpose. He may redelegate his administrative and financial powers in regard to the Scheme to officers under him to the extent considered necessary.

17.2 Director, BARC is empowered to admit any legitimate expenditure upto Rs.2500/- in each case relating to the Scheme which is not covered by the detailed provisions, provided such expenditure is, in his opinion, in consonance with the general objectives of the Scheme.

17.3 Director, BARC may withdraw temporarily or permanently the benefits of the Scheme in the following cases :-

(a) When there are reasons to believe that there is no reasonable prospect of the employee resuming duty after a spell of absence;

(b) When the contribution is not being paid by the prime beneficiary in time;

(c) In the case of misuse of the benefits of the Scheme either by the employee or a member of his/her family;

(d) In such other cases where such a step is considered necessary.

17.3.1 Before taking action as mentioned above, the prime beneficiary concerned shall be given a chance, wherever possible, to explain his/her position.
17.4 A sum of Rs. 5/- per card will be recovered for issue of duplicate CHSS Identity Card in case the CHSS Identity Card is lost (including non-surrender of cards on discontinuance of membership) misplaced/mutilated as the case may be. The Director, BARC, may, for good and sufficient reasons, waive any recovery on this account.

17.5 In case where it is found that a beneficiary registered under the Scheme is not eligible to be so registered or is not eligible for any particular benefit under the Scheme, Director, BARC, is empowered to decide upon the amount of recoveries in each case and the date from which such recovery should be effected. The waiving of the recovery will be subject to the general financial powers delegated to Director, BARC.

17.6 The Department can make consequential changes in the various provisions of the Scheme in the light of modifications by the Government of the general rules governing the medical attendance and treatment of Central Government employees.

18.0 RELATIVES

18.1 The employees are not ordinarily permitted to register their dependent relatives. Notwithstanding what has been stated above, in extraordinary cases Director, BARC may allow an employee to register under the Scheme, one of his relatives, who is entirely dependent upon and residing with him/her on payment of an additional contribution, at a rate equal to the average per capita expenditure (without any element of subsidy) borne by the Scheme in the preceding year. This additional contribution would be payable for a minimum period of one year, even when benefits are availed of for a period shorter than this. Further, before the request for registration in this regard is entertained, the relative must have actually been staying with the employee concerned for a minimum of 60 days. Benefits of the Scheme will be allowed to relatives on the same scale as admissible to members of family.

The term relative for the above purpose would be restricted to brothers and unmarried and widowed sisters and such near relatives only.

19.0 TRANSITORY PROVISIONS

19.1 With the commencement of this Scheme DAE O.M. No.32(5)/69-Adm. dated April 21, 1975 or any modifications thereof, or any orders concerning CHSS previously issued in so far as they are inconsistent with the provisions of this Scheme shall stand repealed. Such repeal shall not, however, affect the previous operation of the provision of the said DAE Office Memorandum or modification thereof or of orders issued or any action taken thereunder.
19.2 Director, BARC or an officer nominated by him may issue appropriate instructions for proper implementation of the Scheme. Such instructions may also permit continuance of inpatient treatment for a period not exceeding 30 days from the commencement of this Scheme to individual beneficiaries already registered under the previous Scheme, who are no longer eligible for the benefits under this Scheme.
### ANNEXURE I

### Entitlement of hospitalisation including diet under the CHSS

<table>
<thead>
<tr>
<th>Sl.No.</th>
<th>Category</th>
<th>Classification of staff</th>
<th>Type of accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>A</td>
<td>Rs.4590/= or below</td>
<td>General ward</td>
</tr>
<tr>
<td>2</td>
<td>B</td>
<td>More than Rs.4590/= but below Rs.8000/=</td>
<td>Room with four beds</td>
</tr>
<tr>
<td>3</td>
<td>C</td>
<td>Rs.8000 to Rs.11500/=</td>
<td>Room with two beds</td>
</tr>
<tr>
<td>4</td>
<td>D</td>
<td>Rs.11501/= and above</td>
<td>Semi-Private Ward</td>
</tr>
</tbody>
</table>

The entitlement detailed as above have been indicated only as a matter of illustration based on the facilities available in majority of the hospitals recognised under the Scheme. Since different hospitals have different rates for similar type of accommodation/services, the entitlement with reference to a specified hospital will be regulated based on the available type of accommodation appropriate to the classification and facilities and also keeping in view the nature of the disease. In emergencies and where the nature of the case justifies it, a patient may be admitted by a Medical Officer to a ward or room above his/her entitlement at charges in excess of the rates mentioned above for a period not exceeding 15 days. Such cases shall be referred to Head, Medical Division, BARC by the Medical Officer of CHSS within 48 hours of admission of the patients to hospital/nursing homes. Head, Medical Division, BARC may, at his discretion, permit continued stay of the beneficiary in the accommodation to which he has been admitted for a period of one month; with the concurrence of Director, BARC, the stay may be extended to two months.

Persons admitted to the Scheme who are required to pay subscription at the maximum rate shall be treated as belonging to Category ‘D’.

The Entitlement for retired employees will be the same as on the date of their retirement.

Ex-post-facto approval may be given by the Head, Medical Division, BARC to the admission and treatment of a beneficiary to any class above the prescribed entitlement in special circumstances and/or on medical grounds.

...26
An Authorized Medical Officer may direct a beneficiary to re-transfer himself/herself from a higher class to which the beneficiary is admitted to a class of normal entitlement when admission to a higher room/ward is not justified on medical grounds or when accommodation in the entitled class is available during in-patient treatment.

In the case of a child under the age of 12 admitted to a nursing home/hospital, extra daily bed charges for the stay of an adult member of the family to look after the child is permissible. Only 50% of the actual extra bed charges incurred is admissible. The duration of the adult's stay shall not exceed 7 days during the entire period of stay of the patient. With the prior approval of the Medical Officer notified for the purpose by the Medical Division, the duration of such stay may be extended upto 30 days. No charges for boarding, tea, snacks etc., for the adult who stays with the child will be permissible.
### CONCESSIONAL RATES CHARGEABLE FOR ARTIFICIAL DENTURES
SUPPLIED UNDER THE CONTRIBUTORY HEALTH SERVICE SCHEME
OF THE DEPARTMENT OF ATOMIC ENERGY.

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Type of dentures</th>
<th>Up to Rs.4590 p.m.</th>
<th>Between Rs.4591 p.m. to Rs.8000 p.m.</th>
<th>Between Rs.8001 p.m. to Rs.11500 p.m.</th>
<th>Over Rs.11501 p.m.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Full dentures (artificial set of teeth, upper and lower)</td>
<td>100</td>
<td>200</td>
<td>300</td>
<td>400</td>
</tr>
<tr>
<td>2</td>
<td>Full dentures (artificial set of teeth upper)</td>
<td>50</td>
<td>100</td>
<td>200</td>
<td>300</td>
</tr>
<tr>
<td>3</td>
<td>Partial dentures one tooth</td>
<td>10</td>
<td>20</td>
<td>30</td>
<td>40</td>
</tr>
<tr>
<td>4</td>
<td>Partial dentures additional teeth</td>
<td>5</td>
<td>10</td>
<td>20</td>
<td>30</td>
</tr>
</tbody>
</table>