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ALL INDIA SERVICES (MEDICAL ATTENDANCE) RULES, 1954

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ALL INDIA SERVICES (MEDICAL ATTENDANCE) RULES, 1954

In exercise of the powers conferred by sub-section (1) of Sec. 3 of the All India Services Act, 1951 (LXI of 1951), the Central Government, after consultation with the Government of the States concerned, hereby makes the following rules, namely:-

1. Short title and application :-

- (1) These rules may be called the All India Services (Medical Attendance) Rules, 1954.
- [(2) They shall apply to members of the Service while they are on duty or on leave or under suspension, within India.]

GOVERNMENT OF INDIAS DECISIONS: 2. The Government of India have decided that members of families in India of All India Services Officers serving in connection with the affairs of the Union proceeding ex-India on deputation or leave, including study leave and deputation-cum-special leave under the various training and fellowship schemes may ail themselves of the medical facilities as admissible under these Rules. If the family members left behind in India are resident in an area covered by the Contributory Health Service Scheme, the grant of medical facilities to them under the Scheme will be conditional on the Government servant concerned paying the prescribed contributions. 12.2. The State Governments may extend these concessions to members of the Service serving in connection with the affairs of the State. 2 3. All India Services officers whose headquarters are elsewhere than in Delhi/New Delhi and who visit Delhi/New Delhi on leave or on tour shall get medical facilities not under the Contributory Health Service Scheme but under the All India Services (Medical Attendance) Rules, 1954. The authorised medical attendants for these officers will be the medical officers designated as such by the Delhi Administration for their employees.

- [C.I., M.H.A. letter No.7/10/60-AIS(III), dated 30th July, 1960.]
- 2. [G.I., M.H.A. letter No.7/25/61-AIS(III), dated 29th November, 1962.]

2. Definitions :-

In these rules, unless the context otherwise requires-

 1 [(a) "authorised medical attendant" means the principal medical officer appointed by the Government to attend its officers in the station or district 2 [where the member of the Service falls ill] and includes a medical officer who, in rank, is equal or immediately junior to such principal medical officer 3 [and who is attached to any hospital or dispensary] in the station where such principal medical officer is posted: Provided that if there is no principal medical officer appointed by the Government for the station at which or the

district in which the member of the Service falls ill, the principal medical officer shall be officer appointed by the Government of the State in which the station or district is situated;]

- (b) "Contributory Health Service Scheme" means any approved scheme of free medical attendance and treatment of servants of the Government and the members of their family in return for such monthly contribution by every servant of the Government as may, from time to time, be determined by the Government.
- 4[(c) "Family" means-
- (i) the wife, or husband, of a member of the Service; and
- (ii) the parents, children and step-children of such member wholly dependent upon that member;]

 5 [Explanation I.-For the purposes of this clause the parents shall be regarded as wholly dependent upon the member of the Service if they ordinarily reside with the said member and their total monthly income does not exceed 6 [Rs. 350].

Explanation II.-For the purposes of this clause step-parents shall not be treated as parents.]

- **7**[Explanation III.-In the case of a member of the Service, whose personal law recognises adoption as a mode of filiation and who has been adopted, the adoptive parents, and not the real parents, shall be treated as parents;]
- (d) "Government" means in the case of a member of the Service serving in connection with the affairs of the Union, the Central Government, and in the case of a member of the Service serving in connection with the affairs of a State, the Government of that State

- : Provided that a member of the Service serving in connection with the affairs of a State falls ill in some other State, the Government of that other State shall be deemed to be the Government for the purpose of Cl. (a);
- (e) "Government hospital" includes a military hospital, any railway hospital notified in this behalf by the Central Government a hospital maintained by a local authority and any other hospital with which arrangements have been made by the Government for the treatment of its officers;
- (f) "Medical attendance" means attendance in a Government hospital or at the residence of a member of the Service or at the consulting room maintained by the authorised medical attendant by arrangement with him and includes:
- (i) such pathological, bacteriological, radiological or other methods of examination for the purposes of diagnosis as are available in any Government hospital or laboratory ${}^{8}[* * *]$ and are considered necessary by the authorised medical attendant, and
- (ii) such consultation with any other medical officer or specialist in the service of (the Central Government or any State Government) as the authorised medical attendant certifies to oe necessary to such extent and in such manner as the medical officer or the specialist may, in consultation with the authorised medical attendant, determine;
- ${f 9}$ [(g) "Member of the Service" means a member of an All India Service as defined in Sec. 2 of the All India Services Act, 1951 (61 of 1951);]
- (h) "Nurse" means a qualified nurse holding a certificate or a diploma recognised by the Chief Administrative Medical Officer of the State or a registered nurse in a State in which there is statutory provision for the registration of nurses;

- (i) "Patient" means a member of the Service who requires medical attendance and treatment;
- (j) "State" means the State in which a member of the Service falls ill;
- (k) "Treatment" means the use of all medical and surgical facilities available at the Government hospital in which a patient is treated, and includes-
- (i) the employment of such pathological, bacteriological, radiological or any other methods as are considered necessary by the authorised medical attendant;
- **10**(ii) Dental treatment including extraction of teeth, scaling and gum treatment, filling of teeth (other than cost of denture) and root canal treatment;
- **11**[Explanation (* * *)
- **12**[(iii) the supply of such medicines, vaccines, sera or other therapeutic substances as are ordinarily available in Government hospitals in the State but excluding-
- (a) such preparations which are not medicines but are primarily used as food, tonic, toilet or disinfectant, and
- (b) such expensive drugs, tonics, laxatives and other elegant and proprietary preparations (for which drugs of equal therapeutic value are available) as may be 13 notified by the Central Government;]
- (iv) the supply of such medicines, vaccines, sera or other therapeutic substances not ordinarily so available as the authorised

medical attendant may certify in writing to be essential for the recovery or for the prevention of serious deterioration in the condition of the patient;

- (v) such accommodation as is ordinarily provided in the hospital to which patient is admitted and is suited to his status;
- (vi) the services of such nurses as are ordinarily employed by the hospital to which the patient is admitted;
- (vii) such special nursing as the authorised medical attendant may certify in writing to be essential for the recovery or for the prevention of serious deterioration in the condition of the patient having regard to the nature of the disease; and
- (viii) the medical attendance described in sub-clause (ii) of Cl. (f); but does not include diet, or provision at the request of the patient of accommodation superior to that described in sub-clause (v).]

GOVERNMENT OF INDIAS DECISIONS: 1. Theovt. of India have held that under this Rule 2(a)- (i) The authorised medical attendant of a member of the Service is determined with reference to the place where he falls ill and not where he takes treatment, etc. (ii) Treatment for stones in kidney can be taken at the place where the stones are first noticed or at the place where the trouble suddenly occurs. (iii) (1) Reimbursement of medical expenses will be admissible if the member of the All India Service or his wife goes outside the ordinary place of her/his duty/residence for the purpose of confinement. (2) In order to ensure genuineness of the claims relating to cases of confinement at a place other than the ordinary place of duty/residence, it would be desirable to obtain a declaration from the member of the Service of her/his intention of going herself or sending out his wife to a particular station for the purpose. [G.I. MHA letter No. 7/18/82-AIS (III), dated 5th April, 1963 read with DP and AR letter No. 11023/7/77-AIS (III), dated 10th October, 1977.] 2. Under Rule 2(a), it is not binding that only Class I Medical Officers working in a particular place should be

declared as Authorised Medical Attendants. The phrase "Principal Medical Officer" used therein refers to the Principal Medical Officer" in charge of each independent Hospital/Dispensary in that place. Under the provisions of General Clauses Act, 1897, the words in the singular shall include the plural and vice-versa. Accordingly, "Principal Medical Officer" means "Principal Medical Officers." 3. Under Cl. (a) read with Cl. (d) the State Governments are themselves competent to appoint any Government doctor working in any place in the State as Principal Medical Officer to act as an Authorised Medical Attendant for All India Services Officers, 4. The Government of India have held that the practice followed in the case of Central Civil Services employees according to which "Honorary Medical Officers* outside the hospital precults are treated just like private medical practitioners is not applicable to All India Services Officers serving in connection with the affairs of the State. Under Rule 2(a) read with Rule 2(d), the State Governments are competent to declare "Hony. Medical Officers" as Authorised Medical Attendants for purposes of medical attendance of the members of the Service and the members of their families. 5. The Government of India have held that sub-rule (2)(c)(ii) stipulate, that the children (including step children) are included in the family, provided they arc wholly dependent on the member of the Service. The fact of marriage, divorce, widow-hood, or the age of the child is not relevant. If the circumstances of the case so the officer certifies that the widowed/divorced and daughter is wholly dependent on the member of the Service and the controlling authority is satisfied, claim for reimbursement of the medical expenditure is admissible. 6. The Government of India held that the schedule of fee prescribed in the Central Services (Medical Attendance) Rules, 1944, is also applicable to All India Services Officers serving in connection with the affairs of the Union under rule 2(a) of the All India Services (Conditions of Service-Residuary Matters) Rules, 1960. So far as the All India Services Officers serving in connection with the affairs of the States are concerned it is for the State Government to prescribe under Rule 2(d) read with Rule 2(a), fees for medical attendance and treatment to be rendered by the Authorised Medical Attendants to such officers. If no specific rates of fees are prescribed by the State Government for such officers, the rates of fees etc. prescribed for Class I officers of the State concerned will apply in respect of A.I.S. Officers serving in connection with affairs of the State under rule 2(6) of the All India Services (Conditions of Service-Residuary

Matters) Rules, 1960. If the State Government have not prescribed the rates of fees etc. for Class I officers of the State they may be issue of suitable orders adopt the rates of fees etc. for Central Services in respect of All India Services Officers serving in connection with affairs of the State. 7. The Government of India have held that the member of family of the member of the Service is entitled to medical attendance and treatment in the State in which he or she falls ill though the State may not be State of allotment of the member of the Service. The facility will be subject to the provisions of the M.A. Rules. Such cases could be covered straight away by the proviso to Rule 2(d) read with Rule 7(1)(a) or Rule 4 and Rule 7(1)(a) of these rules and no special sanction of State Government to cover such cases under Rule 14 or otherwise would be necessary. 8.2. As far as possible, Indian Police Service officers should avail themselves of the facilities provided at the Police Hospital/Dispensaries. If, in any particular case, any facility which is not available in a Police Hospital/Dispensary, is essentially required, the same may be had at the nearest Government recognised hospital on the advice of the appropriate authorised medical attendant under the provisions of these Rules. In such cases, the medical officer in charge of the Police Hospital/Dispensary should certify that the necessary facilities required for the treatment are not available in the Police Hospital/Dispensary. 9. The Government of Indias decision (8) above enables Indian Police Service officers to receive, as far as possible, treatment from Police Hospitals/Dispensaries, as that is considered more convenient for them. It is not to be interpreted as meaning that Indian Police Service officers must necessarily consult police medical officers in the first instance and receive treatment only in Police Hospital/Dispensaries. They are entitled to receive treatment, if they so desire, from the authorised medical attendants under this rule without first consulting the police medical officers. The certificate referred to in the concluding sentence of the said decision is necessary in a case where the patient has started receiving medical attendance/treatment from the Medical Officer of the Police Hospital/Dispensary or at the Police Hospital/Dispensary and needs further facilities which are not available there and have to be obtained elsewhere. 10. The Government of India have decided that, under this rule, it is for the State Government to declare any hospital other than a Railway Hospital as a recognised hospital for the treatment of members of the Service serving in connection with the affairs of the State. 11.

Under Rule 2(e) the Railway Hospitals situated at the following places have been notified as Government hospital- 12. The hospitals recognised by the Government of India for the treatment of Central Government servants and their families at Calcutta under the Central Services (Medical Attendance) Rules, 1944, are to be as recognised hospitals under clause (e) for the treatment of members of the Service serving in connection with the affairs of. the Union and their family members. 13. Under Clause (e), the State Governments are competent to recognise Unani or Ayurvedic Hospitals for the purpose of treatment of All India Services Officers serving in connection with the affairs of the State. 14. Under Rule 2(f), Rule 3 and Rule 2(k)(iv), medical attendance includes medical attendance in the consulting room maintained by the authorised medical attendant. Any fee for consultation in consulting room and the cost of medicines prescribed in consulting room will be reimbursable, 15. The Govt, of India have held that the State Civil Service/State Police Service officers appointed to the I.A.S./I.P.S. on probation become members of the All India Service from the date of their appointment and are from that date subject to the various Rules and Regulations framed under the All India Services Act, 1951 (LXI of 1951). 16. Members of the Service, on appointment to Public Service Commissions, shall be governed in all respects by the rules regulating the conditions of service of of Public Service Commissions framed President/Governors. Such regulations may, however, be amended to inlude any facilities that may be available to the members of All India Service., 17. Under Rule 2(i) read with Rule 4, the word patient includes a member of the family of the member of Service, for the purposes of benefits admissible under the A.I.S. (Medical Attendance) Rules, 1954, except when treatment is taken in a nongovernment hospital or by a non-Government specialist. -18. Under Rule 2(k)(ii), dental treatment, even when it is obtained at a Government hospital under the advice of the authorised medical attendant, is not permissible unless the diagnosis of the physiological or other disability from which a member of the Service is suffering indicates that teeth are the real source of disturbance. It does not include sealing of teeth or free supply of artificial dentures, or treatment from the private Dentist, or outside the hospital even on the advice of the authorised medical attendant. 19. A member of the Service is entitled to reimbursement of cost of the medicine prescribed by the Authorised Medical Attendant if given by him as required under Rule 2(k)(iv). 20. Electricity and

furniture are regarded as part of accommodation referred to in clause (k)(v). Members of the Service may, therefore, be allowed reimbursement of electric and furniture charges, if they are otherwise entitled to reimbursement of charges on account of accommodation. 21. Under Rule 2(k)(v), the All India Services part of their treatment entitled to such officers are, as a accommodation as is ordinarily provided in the hospital to which the patient, is admitted and is suited to his status. If the Authorised Medical Attendant is satisfied that any particular hospital does not provide suitable accommodation he can refer the case to some other hospital having suitable accommodation under Rule 7(c). 22. The term special nursing referred to in clause (k)(vii) relates both to private nurses and the nurses provided by the hospital for this purpose; and reimbursement of charges on this account is to be allowed as laid down in the proviso to Rule 7(2) whether the treatment is taken at the hospital or at the residence, if the claim is supported by a certificate of the authorised medical attendant as provided under clause (k)(vii). 23. The State Governments have been requested to issue instructions to the Hospitals, etc. under their control, that in the case of an All India Services officer belonging to one State, falling ill in another State, he should be treated at par with the officers serving in connection with the affairs of the latter State in the matter of charging fees, etc. 26. It has been decided that, for the purpose of reimbursement under the A I S (Medical Attendance) Rules, 1954, sons and unmarried daughters, who are employed otherwise than on a part-time basis shall not be treated as wholly dependent on the members of the All India Service.

GOVERNMENT OF INDIAS **INSTRUCTIONS** The llowing instructions may be observed for the purposes of deciding cases of reimbursement of medical expenses due to the revised definition of the term family: (a) (1) The term family does not include any other dependent relations such as brother, sister, widowed sister, etc. (2) The term children will includes children adopted legally, (3) The term wife includes more than one wife. (6) The husband or wife of the Government servant, as the case may be, if employed in a Service other than the All India Service which provides medical facilities of its own would be entitled to choose the medical facilities either of the All India Service (Medical Attendance) Rules, 1954, or of the Service in which he/she is employed. (c) In a case where

both husband and wife are All India Services officers they as well as the eligible dependents may be allowed to avail of the medical concessions according to his/her status under the All India Services (Medical Attendance) Rules, 1954. For this purpose, they should to their respective administrative authorities a joint declaration as to who will prefer the claim for reimbursement of expenses incurred for the medical attendance and treatment in respect of wife/husband and the children. The above declaration shall be submitted in duplicate and a copy of each shall be recorded in the personal file of each of them in their respective offices. A copy of such joint declaration should also be forwarded to the Accountant General concerned. This declaration shall remain in force till such time as it is revised on the express request in writing by both the husband and the wife. In the absence of such a joint declaration, the medical concessions shall be availed of by the wife and the children according to the status of the husband.

- 1. Amended by M.H.A. Notification No.6/4/59-A.I.S.(III), dated 19th August, 1958 i.e. G.S.R. 983, dated 29th August, 1959.
- 2. Subs. by M.H.A. Notification No.6/3/58-A.I.S.(III), dated 21st March, 1958 i.e. G.S.R. 182, dated 29th March, 1958 for the words "to which the member of the service is posted".
- 3. Subs. by M.H.A. Notification No. 7/18/64-A.I.S. (III), dated 24th May, 1967 i.e. G.S.R. 824, dated 3rd June, 1967.
- 4. Subs. by M.H.A. Notification No.7/13/60-A.I.S. (III), dated 3rd October, 1961 ie. G.S.R. 1245, dated 14th October, 1961.
- 5. Added by M.H.A. Notification No.7/12/62-A.I.S. (III), dated 3rd June, 1968 i.e. G.S.R. 290, dated 17th February, 1968.
- 6. Subs. by Notification No. 11023/10/81-A.I.S. (III), dated 8th October, 1982 i.e. G.S.R. 591(E), dated 8th October, 1962.
- 7. Ins. by D.P. Notification No. 8/4/71-A.I.S. (III), dated 18th March, 1972 ie. G.S.R. 419 dated 8th April, 1972.
- 8. The words in the State" omitted by MHA Notification No. 13/15/57-AIS (III), dated 15th March, 1960 i.e.G.S.R. No. 322, dated 19th March, 1960.
- 9. Subs. by Notification No. 8/22/66/-AIS(III), dated 19th October, 1966.
- 10. Subs. by Notification No. 11023/19/77-AIS (III), dated 18th

- July, 1981 i.e. GSR 706 dated 1st August, 1981.
- 11. Omitted Subs. by Notification No. 11023/19/77-AIS (III), dated 18th July, 1981 i.e. GSR 706 dated 1st August, 1981.
- 12. Subs. by D.P.A.R. Notification No. 4/11/73-AIS (III), dated 11th July, 1974 i.e. GSR No. 776, dated 27th July, 1974.
- 13. Circulated to State Governments vide letter No. 4/11/73-AIS (III), dated 6th August, 1974 and 26th September, 1974 and notified vide Notification No. 4/11/73-AIS (III), dated 27th September, 1975 i.e. GSR No. 2501, dated 18th October, 1975.

3. Medical Attendance by Authorised medical attendant :-

- (1) A member of the Service shall be entitled to free of charge to medical attendance by the authorised medical attendant.
- (2) Where a member of the Service is entitled under sub-rule (1), free of charge to medical attendance any amount paid by him on account of such medical attendance shall, on production of a certificate in writing by the authorised medical attendant in this behalf, be reimbursed to the member of the Service by the Government: [Provided that the Government shall reject any claim if it is not satisfied with its genuineness on facts and circumstances of each case, after giving an opportunity to the claimant of being heard in the matter, while doing so, the Government shall communicate to him the reasons, in brief, rejecting the claim; and the claimant may submit an appeal to the Central Government within a period of forty-five days of the date of communication of the order rejecting this claim.]

GOVERNMENT OF INDIAS DECISIONS: Unden is rule, the Government of India have not prescribed any ceiling limits on consultation etc. with authorised medical attendants in respect of members of the Service serving in connection with the affairs of the Union. It is however for the State Government to prescribe such limits if they consider necessary for members of the Service serving in connection with the affairs of State. 2. The Government of India have held that Rule 3, Rule 4 and Rule 7 provide for free medical treatment and attendance to the members of the Service and the

members of their families without restriction. In view of this it is not permissible to invoke rule 2 of the A.I.S. (Conditions of Service-Residuary Matters) Rules, 1960, and restrict the number of consultations and injections, (including injectibles) under the orders issued by the Ministry of Health in their O.M. No. F. 28-12-66/hl. dated the 6th March, 1962, in respect of the members of the Central Service Class I.

<u>4.</u> Medical Attendance and treatment of families of members or the Services :-

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- (1) The members of the family of a member of the Service shall be entitled at Government cost to medical attendance and treatment at a Government hospital or at the residence or at the consulting room maintained by the authorised medical
- (2) Medical attendance and treatment referred to in sub-rule (1), shall include confinement in a hospital and pre-natal and post-natal treatment of the wife of a member of the Service.

GOVERNMENT OF INDIAS DECISIONS: 1.1. Auestion arose whether an officer was entitled to reimbursement of expenses incurred on the treatment of his wife or delivery even though she was treated at a place outside the State of his posting. 1.2. According to Rule 7(1)(a) read with Rule 4, an officer and members of his family are entitled to medical attendance and treatment at any place where they fall ill irrespective of the consideration whether that place is within or outside the State in which the officer is posted. The officer is therefore, entitled to reimbursement of the expenses, if it is otherwise admissible. 2. It will not be inconsistent with this rule, if an officer is permitted to have medical attendance and treatment of the members of his family at any Government hospital at a station other than that in which his authorised medical attendant is attached. In such cases, it would only be necessary that the medical officer of the other hospital is also declared by the State Government as authorised medical attendant under Rule 2(a). 3. Confinement in a hospital on account of abortion is to be treated as confinement on account of child birth under sub-rule (3) and as such reimbursement of medical charges is admissible in connection with the treatment of the wife of a member of the service on that account. 4.2. Rule 2(k) read with this rule cannot be interpreted to mean that an authorised medical attendant cannot prescribe medicines at any place other than at a Government hospital or his consulting room, if he chooses to do so. There should, therefore, be no objection to the reimbursement of the expenses. rule 7(1)(c). The members of the service themselves are, however, entitled to treatment in any hospital private or Government outside the State under the abovementioned proviso. 5.2. In accordance with the provisions of sub-rule (1), the provisions of Rule 14 are also applicable to the members of the family of an All India Service officer, rule 7(3), travelling allowance will be admissible to the attendant accompanying a member of the family of an All India Service officer also provided that such patient travels to consult a specialist in a Government Hospital only. 6.2. The travelling allowance admissible to the attendant accompanying the patient will be the actual single railway fare of the appropriate class by which the patient travels to by a lower class by which the attendant actually travels for the rail journey and actual cost of transit not exceeding the travelling allowance admissible to the member concerned for the journey by road. 7. Under sub-rule (1), a member of the Service is entitled to claim reimbursement of medical charges incurred by him for medical attendance and treatment given to the member of his family at the place of their ordinary residence which is different from his headquarters. The presence of the member of the service at such a place either on leave or on duty is not necessary. 8. The Government of India have held that no limit has been prescribed for the amount up to which the controlling officer can allow reimbursement either under the All India Services (Medical Attendance) Rules, 1954, or under the Central Services (Medical Attendance) Rules, 1944. However, sanction of the Government will be necessary if the claim is admitted in term of Rule 14(4).

5. Travelling Allowances :-

(1) When the place at which a patient falls ill is not the

headquarters of the authorised medical attendant,-

- (a) the patient shall be entitled to travelling allowance for journey to and from such headquarters; or
- (b) if, the patient is too ill to travel, the authorised medical attendant shall be entitled to travelling allowance for the journey to and from the place where the patient is:
- (2) An application for travelling allowance under sub-rule (1) shall be accompanied by a certificate in writing by the authorised medical attendant staling that medical attendance was necessary and, if the application is under Cl. (b) of that sub-rule, that the patient was too ill to travel.

<u>6.</u> Medical attendance by person other than authorised medical attendant :-

- (1) If the authorised medical attendant is of the opinion that the case of a patient is of such a serious or special nature as to require medical attendance by some person other than himself he may, with the approval of the Chief Administrative Medical Officer of the State (which shall be obtained beforehand unless the delay involved entails danger to the health of the-patient)-
- (a) send the patient to the nearest specialist or other medical officer [* * *] as provided for in clause (f) of Rule 2, by whom, in his opinion, medical attendance is required for the patient; or
- (b) if the patient is too ill to travel, summon such specialist or other medical officer to attend upon the patient.
- (2) Where a patient is sent to a specialist or other medical officer

under CI. (a) of sub-rule (1), he shall on production of a certificate in writing by the authorised medical attendant in this behalf, be entitled to travelling allowance for the journey to and from the headquarters of the specialist or other medical officer.

(3) A specialist or other medical officer summoned under CI. (b) of sub-rule (1) shall, on production of a certificate in writing by the authorised medical attendant in this behalf, be entitled to travelling allowance for the journey to and from the place where the patient is.

GOVERNMENT OF INDIAS DECISIONS: 1. Undehis rule, it is immaterial whether the approval of the Chief Administrative Medical Officer is obtained by the member of the Service or the authorised medical attendant so long as the Chief Administrative Medical Officer is satisfied that treatment other than by an authorised medical attendant is necessary the member of the service may obtain such permission on the suggestion of the authorised medical attendant or the Chief Administrative Medical Officer may give such permission after consultation with the authorised medical attendant. 2.2. The State Governments may, however, at their discretion, permit officers in deserving cases to have treatment outside their State or other diseases where the medical authorities are of opinion that there is immediate danger to life and that treatment outside the State is absolutely necessary. 3. Members of the Service can get medical treatment from doctors other than their authorised medical attendants (including doctors equal or immediately junior to the authorised medical attendants in the same hospital) only on the prior advice of their authorised medical attendants, who will further get the approval of the Chief Administrative Medical Officer of the State. The State Government can, however, allow the All India Service officers and the members of their families to get medical treatment from any Government doctor stationed in the place where they are serving, if they declare principal medical officers of all separate hospitals to be the authorised medical attendants for them under Rule 2(a) read with Rule 2(b). 4. The Government of India have held that the provisions of Rule 6(1) are also applicable to a member of family of the member of Service and he/she may be entitled to treatment by a specialist provided the specialist is Government specialist.

7. Hospital at which treatment may be received and reimbursement therefor:

- (1) Every member of the Service shall be entitled free of charge, to treatment-
- (a) in such Government hospital in the station or district where he falls ill as can in the opinion of the authorised medical attendant, provide the necessary and suitable treatment; or
- (b) if there is no such hospital as is referred to in Cl. (a) in such hospital other than a Government hospital in that station or district as may, in the opinion of the authorised medical attendant, provide the necessary and suitable treatment; or
- (c) if there is no such hospital as is referred to in Cl. (a) and (b) in such hospital in the State as may, in the opinion of the authorised medical attendant, provide the necessary and suitable treatment:
- (2) Where a member of the service is entitled under sub-rule (1), free of charge, to treatment in a hospital, any amount paid by him on account of such treatment shall, on production of a certificate in writing by the authorised medical attendant in this behalf, be reimbursed to the member of the Service by the Government: Provided that where special nursing forms a part of such treatment, the amount to be reimbursed in respect of such special nursing shall be limited to the amount which is in excess of 25 per cent of the pay of the member of the Service for the period of special nursing: [Provided that the Government shall reject any claim if it is not satisfied with its genuineness on facts and circumstances of each case, after giving an opportunity to the claimant of being heard in the matter; while doing so, the Government shall communicate to him the reasons, in brief, rejecting the claim, and the claimant may submit an appeal to the Central Government

within a period of forty-five days of the date of communication of the order rejecting his claim.]

[(3) If the patient has to proceed to a station other than at which he falls ill for the purpose of treatment under sub-rule (1), he shall, on production of a certificate in writing from the authorised medical attendant in this behalf, be entitled to travelling allowance for the journey to and from the place at which such treatment is received. Such travelling allowance shall also be admissible for an attendant, if the authorised

GOVERNMENT OF INDIAS DECISIONS: The terhpay" occurring in the proviso to sub-rule (2) means the actual pay, which a member of the Service is drawing at the time he falls ill, and in the case of a member who is on leave, it means the pay last drawn by him immediately before proceeding on leave.

8. Treatment at residence :-

- (1) If the authorised medical attendant is of opinion that owing to the absence or remoteness of a suitable hospital or to the severity of the illness a member of the Service cannot be given treatment as provided in sub-rule (1) of Rule 7, he may reiceive treatment at his residence.
- (2) Where a member of the Service is receiving treatment at his residence under sub-rule (1) he shall be entitled to receive towards the cost of the treatment incurred by him a sum equivalent to the cost of such treatment as he would have been entitled to receive free of charge, under these rules if he had not been treated at his residence.
- (3) A claim for any amount admissible under sub-rule (2) shall be accompanied by a certificate in writing by the authorised medical attendant, staling-

- (a) his reason for the opinion referred to in sub-rule (1);
- (b) the amount of the cost of similar treatment referred to in subrule (2).

GOVERNMENT OF INDIAS DECISIONS: 1. Underule 2(k)(v), treatment is defined to include such accommodation as is ordinarily provided in the hospital to which the patient is admitted and is suited to his status. If, therefore, the authorised medical attendant is of the view that suitable facilities consistent with the status of the member of the Service are not available at the Government hospital, he could, under sub-rule (1), allow the member of the Service, to receive medical treatment at his residence. 2.2. It is not practicable to prescribe any absolute definition of remoteness in respect of any particular hospital merely with reference to its location, i.e., physical distance. A hospital may be at a considerable distance from the residence of a patient; but the condition of the patient may be such that he could safely be asked to get treatment in that hospital. On the other hand, there may be a patient whose condition is such that he may not be able to attend the same hospital or even a hospital, which is nearer, but may have to be given treatment at his residence. Thus a hospital, which is not remote, for one case may have to be considered as remote for certain other cases. That is why, in this, as in a number of other matters under these rules, complete discretion has been vested in the authorised medical attendant. He is trusted to decide each case on its merits after taking into consideration the location of the hospital, the condition of the patient and the severity of illness. Any certificate issued by him may, therefore, be accepted by audit authorities without question. 3. Under Rule 8 read with Rule 4, the family of a member of the Service is entitled to receive treatment at their residence only if certificates prescribed in sub-rule (3) of the Rules arc furnished by the Authorised Medical Attendant. 4.2. However, if an Authorised Medical Attendant, of his own free will, examine a patient at his/her residence and prescribes medicines, there is no objection if the State Government reimbursement of the cost of the medicines.

9. Charges for services other than medical attendance to be paid :-

- (1) Any charge for services rendered in connection with, but not included in, medical attendance on, or treatment of, a patient entitled, free of charge, to medical attendance or treatment under these rules, shall be determined by the authorised medical attendant and paid by the patient.
- (2) If any question arises as to whether any service is included in medical attendance or treatment, it shall be referred to the Government whose decision thereon shall be final.

GOVERNMENT OF INDIAS DECISIONS: It have decided that the fees paid to compounders for administering injections and to nurses for attending to a member of the Service/members of the family of the member of the Service at their residence, are not admissible.

<u>10.</u> Countersignature of certificate for reimbursement of travelling allowances :-

The Government may by general or special order direct that any certificate required by these rules to be given by the authorised medical attendant and the controlling officer for the purpose of travelling allowance of a patient shall be countersigned by the Chief Administrative Medical Officer of the State.

11. Transfer to foreign service :-

No member of the Service shall be transferred to foreign service unless the foreign employer undertakes to afford to him, so far as may be, privileges not. inferior to those to which he would be entitled under these rules if he had been employed in the service of the Government: Provided that this rule shall not apply in the case of a transfer of a member of the Service at his own request or when the member of the Service makes a specific request in writing that the provisions of this rule need not apply in his case.

11A. Deputation to Government Organisations having separate Medical Attendance Rules :-

[A member of the Service deputed to serve under a Government Organisation having a separate set of rules for the grant of medical facilities to its employees may, at his option, elect to be governed by the rules of that organisation during the period of such deputation.

Explanation.- The expression "Government Organisation" in this rule includes Railways or other similar Organisation whose expenditure is debitable to the Consolidated Fund of India or of the State.

12. Injuries due to civil disturbances :-

- (1) A member of the Service serving in a disturbed area shall be deemed as being on duty continuously and any injury received by him as a result of the disturbances shall be deemed as having been received in the course of such duty, unless the facts of the case give a clear indication to the contrary.
- (2) When a member of the Service receives any injury while on duty in connection with the disturbance, he shall be entitled to medical attendance and treatment specified in clauses (f) and (k) of Rule 2 free of charge.
- (3) A member of the Service on leave in a disturbed area is also entitled to the concessions outlined in sub-rule (2) above, if it is established that he was attacked and injured because of his being a Government servant.

12A. Application of the Contributory Health Service Scheme

[Notwithstanding anything contained in these rules, they shall not apply to a member of the Service during any period in which he is on deputation to the Central Government at a station, where the Contributory Health Service Scheme is in operation, and the said scheme, as for the time being in force, shall apply to such member during the said period, as it applies to Central Government Servants, Class I.]

13. Interpretation :-

[If any question arises as to the interpretation of these rules, the Central Government shall decide the same.]

14. Saving :-

Noting in these rules shall be deemed to-

- (i) entitle a member of the Service to reimbursement of any cost incurred in respect of medical services obtained by him, or to travelling allowance for any journey performed by him otherwise than as expressly provided in these rules, or
- [(i-a) entitle a member of the Service to reimbursement of any cost incurred in respect of-
- (a) such preparations which are not medicines but are primarily used as food, tonic, toilet or disinfectant, and
- (b) such expensive drugs, tonics, laxatives and other elegant and proprietary preparations (for which drugs of equal therapeutic value are available) as may be notified by the Central Government.
- (ii) prevent the Government from granting to a member of the Service, or to a member of the family of a member of the Service any concession relating to medical treatment or attendance or travelling allowance for any journey performed by him which is not authorised by these rules.]

as far as the member of the Service is concerned, is that he is not entitled to reimbursement of any cost otherwise than as expressly provided in these rules. But, so far as the Government is concerned, its inherent power to grant, in suitable and deserving cases, any concession relating to medical treatment or attendance not authorised by the rules is expressly saved by clause (ii). The expression not authorised must be construed to mean not sanctioned or not justified by these Rules. 2. Clause (ii) can be invoked by the State Government for granting to a member of the Service reimbursement of expenditure incurred by him for the treatment of a member of his family in a hospital other than a Government hospital outside the State provided very exceptional circumstances justify such action. Rule 1(2), In such cases, however, the Government of India do not, as a matter of principal, accept any liability, though, in very special cases, they make payment equivalent to what proper treatment would have cost in India itself. 3.2. The powers under clause (ii), can be exercised by the State Government without any limitations. Rule 13 of these rules does not control the action of the State Government in such cases. It is also not necessary for them to consult the Central Government in this regard. Rule 14, the State Government can under Rule 14 of the Rules ibid permit reimbursement of the cost of medical treatment and attendance taken abroad in a Rule 1(2). In such cases however, the Government of India do not, as a matter of principle, accept any liability, though in very special cases, they make payment equivalent to what proper treatment would have cost in India itself. 4.2. The question of reimbursement of expenses over treatment abroad for Central Government employees has been reconsidered and the Government of India have now decided that in future no reimbursement should be made to any person for medical treatment secured outside India. Pending cases should be decided on this principle, subject to any specific commitments already made by the Government being honoured. 4.3. The above decision applies to all the Central Government servants, the All India Services Officers serving at the Centre, and the employees of Public Sector undertakings under the Government of India. 4.4. The State Governments have been requested to consider adopting the same policy in respect of the members of All India Services working in connection with the affairs of the State as well as the State Government employees. 5.3. The State Governments have been requested to consider adopting the same policy in respect of the members of All India Services working in connection with the affairs of the State as well as the State Government employees. 6. The Government of India have held that executive instructions giving general additional concessions in the matter of medical treatment and attendance to the members of the All India Service outside the scope of the All India Services (Medical Attendances) Rules, 1954, can be issued by the State Government not under Rule 14(ii) of the said Rules, but under the residuary powers resting with the State Governments in respect of officers serving in connection with the affairs of the States. 7. The Govt. of India have held that ordinarily a member of the service is expected to receive treatment from the Authorised Medical Attendant which term includes the principal medical officer appointed by the Government to attend its officers, a medical officer equal in rank or immediately junior to such principal officer and attached to the same hospital or dispensary. In exceptional cases, however, re-imbursement of the cost of medical treatment incurred on the advice of the private practitioner can be re-imbursed by the State Government by invoking Rule 14(ii), if the State Governments arc satisfied of the existence of special circumstances in which treatment could not be had through the Authorised Medical Attendant and the refusal to re-imbursement such cost, is likely to cause undue hardship to the officer. In so far as Central Government employees are concerned, their cases are regulated in terms of Ministry of Finance O.M. No. 2192-EV(5)/62, dated the 17th April, 1963. Central Services (Medical Attendance) Rules, 1944. However sanction of the Government will be necessary if the claim is admitted in terms of 14(ii). 8.2. The State Governments arc the competent authority to regulate such procedural matters. Rule 14(ii)- (i) The State Governments are themselves competent to grant to an All India Services officer serving in connection with the affairs of the State any concession relating to medical attendance or treatment which is not authorised under the A.I.S. (Medical Attendance) Rules, 1954. The State Government can, therefore, grant Nursing Home facilities to a member of the Service serving in connection with the affairs of the State under this rule. (ii) It is to open to the State Government to allow re imbursement of expenses when treatment has been taken from a doctor other than the Authorised Medical Attendant in cases of emergencies due to the non-existence any Government/recognised hospital within a reasonable distance from the place where the patient fell ill.

EXECUITAE INSTRUCTIONS/ORDERS 122060 DITIE GOVERNMENT OF INDIA UNDER THE ALL INDIA **SERVICES** (MEDICAL ATTENDANCE) RULES, 1954 1. Claims for reimbursement medical expenses-Procedure for drawal of-The application and the various certificates prescribed for the Central Government servants under the Central Services Attendance) Rules, 1944, as amended by the Ministry of Health from time to time, shall, with necessary modifications, be used for claiming refund of medical expenses incurred in connection with medical attendance and/or treatment of members of the All India Services and their families. r.123 of the General Financial Rules and S.124 of the General Financial Rules, Volume I, respectively. If a special sanction is accorded for reimbursement of any charges in relaxation of the rules, that unction should be deemed to be operative from the date of its issue and the period of six months/one year will count from that date. (2) If the State Governments have no objection, the same procedure and time limit may also be prescribed in the case of All India Services Offices preferring claims under the All India Services (Medical Attendance) Rules, 1954. (See Annexure I). 4. Concessions regarding treatment of tuberculosis or leprosy.- In exercise of the powers conferred under cl. (ii) of Rule 14, the administrative Ministry in respect of All India Services officers working in connection with the affairs of the Union, and the State Governments, in respect of officers working in connection with the affairs of the States, may reimburse expenses incurred by the officers in the following cases:- (i) Post treatment check up.- A member of the Service who has suffered from tuberculosis or leprosy and who has obtained treatment in accordance with the relevant rules and orders, will be entitled to reimbursement of fee for obtaining the certificate of fitness for return to duty. If he is required to undergo post-treatment checkup with a specialist, he will also be entitled to reimbursement of fees for medical examinations during such periodical check-up as as travelling allowance from his place of duty to the headquarters of the specialist and back. Post-treatment follow-up should, however, be done T.B. by а recognised specialist/Institution, stationed at or nearest to the place of the ex-T. B. patient. The specialist, if necessary, may call for the complete records of the ex-patient from the institution where he was treated originally. (ii) Ambulance charges.- Reimbursement of ambulance charges will also be allowed even if the ambulance used belonged to a social service organisation such as the Red Cross Society. (vii)

all Hospital charges will in the first instance be paid by officers direct to hospital authorities. Officers will subsequently claim refund from Government to the extent admissible under the rules. NOTE.-The per capita cost indicated in sub-para (i) above is calculated by dividing the total expenditure of medical services by the total number of employees in service in that year on all Indian Railways. It is, therefore, liable for variation from year to year. (2) The Government of Bombay may extend the above concession to All India Services Officers serving in connection with the affairs of the State in exercise of the powers vested in them by Rule 2(d) and Rule 14(ii). (2) The Government of Bombay may extend the above concessions to All India Services Officers serving in connection with the affairs of the State in exercise of the powers vested in them by Rule 2(d) and Rule 14(ii). Central Services (Medical Attendance) Rules, 1944, should be extended to members of the All India Services serving in connection with the affairs of the Union. The State Government may extend these concessions to members of the All India Services serving in connection with the affairs of the also. Tuberculosis (i) Consultation.- If a Government specialist in tuberculosis diseases is not available, consultation on the advice of the authorised medical attendant with a specialist in T.B. discases recognised as such by the State Administrative Medical Officer concerned will be admissible. Where the authorised medical attendant proposes to advise a member to consult a specialist in T.B. diseases, the approval of the Chief Administrative Medical Officer of the State concerned shall be obtained. The specialist consulted should, as far as possible, be a medical officer equal in status to the authorised medical attendant and if such a specialist is in Government service, he should charge fees at the following rates: - All India Services (Travelling Allowance) Rules, 1954. If the authorised medical attendant certifies in writing that it is unsafe for the patient to travel unattended and that an attendant is necessary to accompany him to the place of consultation/treatment, the attendant accompanying the patient will be entitled to actual single railway fare, both ways, of the appropriate class, in which the patient is entitled to travel or of a lower class, by which the attendant actually travels. Journeys by air or by Air-Conditioned accommodation on trains are not permissible. The outward journey should be deemed to have commenced from the headquarters of the member of the Service or from the place, from which the patient actually travels, whichever is nearer to the place of consultation/treatment. Likewise, the return journey will be

deemed to have ended at the headquarters or at the place, at which the patient actually travels, whichever is nearer. For the road portion of the journey, the attendant will be allowed the actual cost of transit not exceeding the travelling allowance admissible to the member of the Service concerned: (iii) The concessions mentioned in (i) and (ii) above will also be admissible to the members of the family of a member of the Service provided the treatment for such diseases is taken in a Government Mental Hospital. \\\\ \Appendix I Appendix IV List of Hospitalsrecognised for the Treatment of Members of the All India Services suffering from Mental \ \ \ \ \ \Diseases ANDHRA PRADESH MentaHospital, Eragadda, Hyderabad Dn. Mental Hospital, Waltair. ASSAM. . .. Mental Hospital, Tezpur. BIHAR Indian Mental Hospital, Ranchi Hospital for Mental Diseases, Ranchi. BOMBAY N.M. Mental Hospital, Ratnagiri. Central Hospital, Thana. Mental Hospital, Yeravada, Poona. Mental Hospital, Ahmedabad. Mental Hospital, Baroda. Mental Hospital, Bhavnagar. Mental Hospital, Nagpur. Mental Hospital, Kutch. KERALA Mental Hospital, Kozhikode. Mental Hospital, Trivandrum. MADHAYAPRADESH . \ Mental Hospital, Gwalior. Mental Hospital, Indore. MADRAS Government Mental Hospital, Madras. MYSORE Mental Hospital, Bangalore. Mental Hospital, Dharwar. PUNJAB Mental Hospital, Amritsar. RAJASTHAN Mental Hospital, Jaipur. Mental Hospital, Jodhpur. UTTAR PRADESH . . MentalHospital, Banaras. Mental Hospital, Bareilly. Mental Hospital, Agra. WEST BENGAL . . Mental Observation Ward, Bhowanipur. Instructions have been issued by M/o Finance vide OM No.F.49(15)-EV/59, dated 21st May, 1959 and 21(2)-EV(B)/62, dated 17th April, 1963 regarding reimbursement of medical expenses incurred by the Central Government servants and the All India Services Officers serving in connection with the affairs of the Union, on having medical emergent circumstances from sources attendance/treatment in other than those from whom it is permissible" under the relevant Medical Attendance Rules. The State Government may adopt these orders in respect of All India Services Officers serving in connection with the affairs of State delegating the powers of allowing the State Government The medical attendance and treatment will include the cost of all facilities mentioned in CIs. (f) and (k) of Rule 2 including cost of medicines, fees for administration of injections and visiting fees, charged by the Medical Officers and Private Practitioners who are not authorised Medical Attendants of the officers in question. At present all cases where Central Government servants and members

of their families receive medical Attendance/treatment in emergent circumstances from sources other than those from whom it is permissible under the relevant Medical Attendance Rules, are to the Ministries of Finance/Health reimbursement of the Medical expenses by special sanction. Such cases are referred to the Ministries of Finance/Health irrespective of the amount involved. In the past it has been noticed that in the majority of such cases medical attendance and/or treatment were received either from Railway/Military/Factoty/Local Board (District and Municipal Boards, Local Funds and Panchayats) hospitals or from doctors attached thereto, or from private practitioners, due to the non-existence of any Government/recognised hospital within a reasonable distance from the place where the patient fell ill. With a view to cutting out delays in the settlement of such cases caused by frequent references to the Ministries of Finance and Health, the President pleased to delegate has been powers Ministries/Heads of Departments to allow refund of expenses upto a maximum limit of Rs. 50/- in each case where they are satisfied that although refund is not permissible under the strict application of the various Medical Attendance Rules, the circumstances of the case warranted medical attendance/treatment being had from hospitals and doctors mentioned above, in the absence of Government/recognised hospital or doctor within a reasonable distance from the place where the patient fell ill. The reasonableness of the distance may be determined with reference to the nature and severity of the ailment in each case. Further, refunds as above may be allowed only to the extent admissible under the relevant Medical Attendance Rules and subject to the general spirit of those Rules being observed. Doubtful cases should continue to be referred to the Ministries of Finance/Health. 11. In their application to persons serving in the Indian Audit and Accounts Department, these orders issue after consultation withthe Comptroller and Auditor General of India. I am directed to refer to the Ministry of Home Affairs letter No. 8/8/66-AIS (III), dated the 14th July, 1966 and to forward herewith a copy of a Ministry of Finance O.M. No. F. 26(10)-EV(B)/74 dated the 16th July, 1974. It is requested that the State Government may adopt the orders contained therein in respect of members of the All India Services working under them. 3. In their application to the persons serving in the Indian Audit and Accounts Department, these orders issue after consultation with Comptroller and Auditor General of India. 5. These orders also apply to the members of the All India Services serving in connection with the affairs of the Union and who are beneficiaries of the Central Government Health Scheme. 2. In case the amounts mentioned at (i) and (ii) above are exceed, the matter be decided by the cadre authority (e.g. Appointment department, Department of Personnel etc.), in consultation with the Health Department of the State Government concerned. (This disposes Government of Rajasthan letter No. 3/8/(I)/Apptts. (A)-1/68, dated the 10th March, 1976). 2. It has been decided that the orders contained in the Ministry of Finance O.M. No. F. 23(5)-EV(B)/77, dated 18th September, 1978 may be adopted in respect of member of All India Services and the powers of reimbursement of the Cost of replacement of diseased Heart Valves may be delegated to the Heads of Department of the State Government. The initial supply of the heart valves will, however, in all cases be made only on the recommendation of the Department of Health of the State concerned. Wherever the supply is approved by the Department of Health of the State concerned, the administrative authority would make payment direct to the supplying agency and not direct to the member of the All India Service, concerned. These orders also apply to the members of the Ail India Services serving in connection with the affairs of the Union and who are beneficiaries of the Central Government Health Scheme. 5. Hindi version of this O.M. is enclosed. Rule 2, the State Governments are competent to recognise Unani or Ayurvedic Hospitals for the purpose of treatment of All India Services Officers serving in connection with the affairs of, the State. The Government of India (Ministry of health and Family Planning) have issued orders/instructions regarding the procedure to be followed regarding medical treating under Indian of Medicine and Homoeopathy in respect of Central Government servants vide their O.M. No. 29-16/71-MA, dated 14th September, 1972 (copy enclosed). 2. It has been decided that the provisions contained in the Deptt. of Healths O.M. referred to in para 1 above may also be adopted in respect of the members of All India Services. 3. The authorised Medical Attendant in respect of members of the AIS will have the same meaning as mentioned in para 2(i)(a) of the Ministry of Health and Family Planning O.M. No. 29-16/71-MA, dated 14th September 1972, referred to in para I above, and also under Rule 2(a). I am to request that the contents of this letter may be brought to the notice of the members of the service working under the State Government. Central Services (Medical Attendance) Rules, 1944 and orders (1964 edition). It was clarified under para 2 that under the Medical Attendance Rules,

modern system of medicine only is recognised and other systems of medicines such as Ayurvedia, Unani or Homoeopathy amount covered by these rules, and that Ayurvedic etc., hospitals are not recognised for the purpose of aforesaid orders even though some of the State Governments have recognised such hospitals for the treatment of their own employees. This decision was based on the Government according to which Allopathic (Modern) scientific should continue to be the basis for the medicine development of the National Health Services in the country. The abovementioned policy decision has recently modification according to which the Union and State Governments have been directed that Allopathic, Indian and Homoeopathic Systems of medicine should contribute towards the development of the National Health Services in the country. 2. The question of giving effect to the aforesaid revised policy decision in so far as medical attendance and treatment of Central Government servants and members of their families under the provisions of the Central Attendance) Rules (Medical have been under the consideration of the Government for some time past. It has now been decided as follows :- (i) Authorised medical attendant for the purposes of these orders within the meaning of Rule 2, will means: (a) In respect of a Government servant who belongs to a Central Service Class I, or whose pay is not less than Rs. 500 per mensem, officers belonging to Ayurveda, Unani, Siddha and Homoeopathic Medical Services of the State or Central Government qualified medical officer, appointed Government, to attend its officers in the district; (b) In respect of a Government servant not belonging to a Central Service Class I whose pay is less than Rs. 500 per mensem, but more than Rs. 150 per mensem, a Class II Gazetted Officer of the Department of Indian Medicine or Homoeopathy of a State or Central Government, Medical Officer, appointed other qualified or Government to attend its officers in the station; (c) In respect of servant, the physicians-in-charge other Government any aided, Municipal and Government, Government Panchayati Dispensaries of Ayurveda, Siddha, Unani and Homoeopathic systems of medicine and/or any other qualified medical officer, similarly appointed. N.B.: The term qualified would mean in the case of Ayurveda, Unani and Siddha, persons possessing recognised medical qualifications as included in the II, III and Medicines Central Council Act, 1970. As far as Homoeopathy is concerned, it would include the recognised medical qualifications as notified in

the II Schedule of the Homoeopathy Central Council Bill, 1971. (ii) Rates of fees for purposes of reimbursement. (a) Class I Officers belonging to Ayurveda, Unani, Siddha and Homoeopathic Medical Services of the State or Central Government or any other medical officers of equivalent status appointed by the Government.... Rs. 16. (b) Class II Officers of the Departments of Indian Medicine and Homoeopathy of a State or Central Government or any other medical officer of an equivalent status appointed by the Government...... Rs. 3. (c) Others...... Rs. 3: Provided that in respect of medical officers of State Governments who are not allowed to receive any payment, no fees would be reimbursible. NOTE:- The fees prescribed in Cl. (a) and (b) above will be payable for consultation at the consulting room of the authorised medical attendant or at the residence of the patient. (iii) List of admissible medicines for purposes of reimbursement: Ayurveda, Siddha, Unani and Homoeopathy. The list of medicines in these systems approved for purposes of reimbursement with indication maximum prices against each medicine is given in Annexure I. Is this Annexure, lists of medicines have been drawn up in three categories viz. (a) Costly medicines and treatment panchakarma therapy which may be prescribed only by Class I officers or by a doctor of equivalent rank, (b) General medicines which may be prescribed by all authorised medical attendants, and (c) Restricted medicines which may be deemed to be medical tonics having curative properties which may be prescribed only by a Class I and Class II Officers or by a doctor of equivalent rank. The cost of medicines will be reimbursed on the basis of the prices indicated in the catalogues of the pharmacies concerned. The cost of medicines indicated in Annexure I will however, be applicable in the case of medicines manufactured by private practitioners, who may be nominated as authorised medical attendants for the purpose of these rules. 3. Lists of approved Pharmacies/Druggists Ayurveda, Unani, Siddha and Homoeopathy.- Central Government servants should purchase Ayurvedic/Unani/Siddha/Homoeopathic medicines prescribed by their Authorised Medical Attendances from the pharmacies or concerns or their authorised dealers indicated in the list attached to Annexure II. 4. With a view to ensure that the incidence of expenditure on medical reimbursement in the Indian systems of medicine and Homoeopathy does not tend to be unduly heavy it has further been decided that all claims pertaining to restricted and costly medicines and cost on therapy panchakarma preferred by the Central Government employees in

these systems should be required to be countersigned by the State Directors/Officers-in-charge of Indian Systems of Medicine or Homoeopathy Department of the State/Administration or Central Government concerned. In cases where no Indian systems of Medicine or Homoeopathy department exist, such claims may be countersigned by the Directors of Health Services of the State by any other of Indian or Systems Medicine/Homoeopathy Branch in the Ministry of Health and Family Planning (Department of Health) as may be authorised for the In other cases, the Controlling authorities will be empowered to dispose of claims as provided in the Central Services (Medical Attendance) Rules in accordance with these orders. 5. These orders will take effect from the 15th October, 1972. These orders are also applicable to Central Government servants and members of their families stationed in or passing through Calcutta. 6. In so far as persons serving in the Indian Audit and Accounts Department are concerned, these orders have been issued after consultation with the Comptroller and Auditor General of India. ANNEXURE I 10. The Government of Indiahave decided to extend the provisions contained in the Ministry of Helath and Family Welfare O.M. No. 14025/31/79-MS, dated 26th September, 1980 (copy reproduced below) regarding reimbursement of the cost of artificial appliances to the members of the All India Service serving in connection with the affairs of the Union, The State Government have been requested to adopt these orders in respect of the members of the All India Services, serving in connection with the affairs of the States. Central Services (Medical Attendance) Rules, 1944, by the Ministries/Heads of Department in consultation with the Department of Health. The question of rationalisation and streamlining of the existing procedure involved reimbursement of the expenses incurred on artificial appliances, its replacement, repair and adjustment has been under consideration of the Government of India. The question of drawing up a list of such artificial appliances whose cost would be reimbursable to those covered under the Central Services (Medical Attendance) Rules, 1944, has also been under consideration of the Government of India and it has now decided as under: - (1) The list of artificial appliances whose cost would be reimbursable to the Government officials and the entitled members of their families covered under the Central Services (Medical Attendance) Rules, 1944 is enclosed. (2) "The expenses incurred on the purchase, replacement, repair and adjustment of these appliances may be reimbursed to the

Government employee when these are certified essential by a specialist in the concerned speciality in the hospitals recognised under the Central Services (Medical Attendance) Rules, 1944. The repairs and adjustments where necessitated under the advice of the medical specialist should be got done by he Rehabilitation Department of the Medical colleges and hospitals, Artificial Limb Centre, Pune and such other centre and organisations recognised for this purpose by the Central or State Government. Where, however, under the advice of the Medical specialist the artificial appliance is to be repaired/adjusted, it has to be ensured that the cost of repairs/adjustment of appliance is less than the cost of replacement thereof. 2. It has also been decided Government to delegate power to all Ministries/Heads Department to allow reimbursement of expenses incurred on the procurement/adjustment/repairs of these appliances subject to the condition that these have been done when they are certified as essential by a specialist in the Government/recognised hospitals under the Central Services (Medical Attendance) Rules, 1944 and have been purchased/repaired from the Rehabilitation Department of the Medical Colleges and Hospitals, Artificial Limb Centre, Pune and such other centres and organisations recognised for the purpose by the Central or State Governments. 3. These orders will, however, not be applicable to the Artificial appliances which are covered under the specific orders of the Government of India e.g. Heart Pace Maker and replacement of its pulse generator and cost of replacement of diseased Heart Valves vide Ministry of Finance O.M. No. 22(3) EV(B)76, dated 18-6-76, O.M. No. 22,(3)-EV(B)/77 18-9-78 and Ministry of Health F.W. and No. 14025/58/78-MS, dated 18-8-1978 (copies enclosed). 4. These orders have been issued in consultation with the D.P. and A.R. LIST O FARTIFICIAL APPLIANCES ANNEXED TO MEMO. 14025/31/79-MS DATED THE \ \ \ \ \26TH SEPTEMBER,1980 \ \ \ \ \Artificial Appliances Sl. No. 1. Unilateral long leg brace without hip joint. 2. Hip joint with pelvic band. 3. Spinal Brace. 4. Unilateral Short leg brace. 5. Shoe or Boot-Protective or aiding to paralysed or weak leg. 6. Bilateral hip joint with pelvic band/weak leg. 7. Bilateral long leg Brace without hip joint 8. Bilateral short leg Brace. 9. Lumbe-sacral or spinal support or Back support. 10. Taylors Brace. 11. Milwaukee Brace. 12. Mesmaid Splint. Posterior slab. 14. Cervical Brace Four post. 15. Bigid Cervical Collar with head extension. 16. Cervical Collar. 17. Dynamic Splint (Aluminium). 18. Cock-up Splint (plain Aluminium). 19. Cock-up

Splint (Plastic) or long apponents. 20. Turn Buckle Splint. 21. Nuckle bender Splint. 22. Anterior Knee Guard Splint. 23. Denis Brown Splint. 24. Congenital Talipus Equino Varos/Valgus Splint. 25. Short Opponens P.V.C. (Plastic). 26. Knee Cage. 27. Long Opponens with M.P. Fl. bar and finger. 28. Extension (Plastic) Dynamic. 29. Boot with C and E heel and arch support. 30. C and E heel. 31. Arch Support. 32. M.T. pad. 33. M.T.E. Raising. 34. T. Strap. 35. Sponte heel. 36. Wedge 1/8". 37. Universal raising 1". 38. Foot drop Splint. 39. Below Knee prosthetics (P.T.B. type Prosthetics). 40. A.K. Prosthetics. 41. Aluminium adjustable above knew right splint. 42. Plastic shoulder abduction splint. 43. Plaster of Paris or Gypsona cast. 44. Modified Shoes. 45. Below Elbow Prosthesis. 46. Hooks. 47. Cosmetic Hand. 48. Splint for C.D.H. 49. Splint for Elbow. 50. Above Elbow and Below elbow Prosthetics. 51. Corset. 52. Wheel Chair. 53. Protective shoes with microchllular rubber without nail of ten with additional gadgets like adjustable springs and rockers. 54. Crutches. 55. Walking iron with Plaster Caste. 56. Calipers. 57. Braces. 58. Artificial limbs. Central Services (Medical Attendance) Rules, 1944. The reimbursement cost of artificial appliances should be allowed only when these are certified as essential by a specialist in the concerned speciality in the hospitals and these are purchased from Rehabilitation department of Medical College/Hospitals, Artificial Limbs Centre, Pune and such other centres and organisations recognised for the purpose. 2.1n so persons serving in the Indian Audit and Accounts Departments are concerned, these orders have been issued after consultation with the Comptroller and Auditor General of India. 3. This issues with concurrence of the Ministry of Finance vide their U.O. No. 3520/EV(B) 78, dated the 3rd July, 1978 and will take effect from the date of issue of this memorandum. In supersession of all previous orders on the subject, the Central Govt. have issued orders to the effect that the list of medicines included in schedule I and II appended to Central Services (Medical Attendance) Rule, 1944, as amended from time to time, shall be the list of medicines not reimbursable to a member of the All India Service or a member of his/her family under the All India Services (Medical Attendence) Rules, 1954.