



केन्द्रीय विद्यालय संगठन/ Kendriya Vidyalaya Sangathan
18, संस्थानिक क्षेत्र/ 18, Institutional Area
शहीद जीत सिंह मार्ग/ Shaheed Jeet Singh Marg
नई दिल्ली-16/ New Delhi - 16

फ.स.110239/51/2017/बजट /केवीएस(मुख्यालय) /616

दिनांक: 25.09.17

The following orders issued by Government of India are uploaded on the KVS Website for information and necessary action.

1. G.I., M.F., O.M. No. F.No.26/2/2016-PPD, Dated 25-7-2017 regarding amendment to the Rule 152 of General Financial Rule, 2017.
2. G.I., M.F., O.M. No. F.No. 20/2/2014/PPD (Pt.), Dated 25-7-2017 regarding Amendment to the Rule 170 (i) of General Financial Rule, 2017.
3. G.I., M.U.D., O.M. No. 18011/2/2015-Pol. III, Dated 19-7-2017 regarding Revision of flat rate of licence fee for General Pool Residential Accommodation (GPRA) throughout the country
4. G.I., M.H. & F.W., O.M. No. S. 14021/22/2016-EHS, Dated 21-6-2017 regarding Recognition of Rainbow Children's Hospital, Vijayawada for treatment of Central Government employees under CS (MA) Rules,1944.
5. G.I., M.H. & F.W., O.M. No. S. 14021/24/2016- EHS , Dated 3-7-2017 regarding Recognition of Ozone Multispecialty Hospital and Critical Care Center,Akola,Maharashtra for treatment of Central Government employees under CS(MA) Rules,1944
6. G.I., M.H. & F.W., O.M. No. Z-16025/98/2017-CHGS-III, Dated 11-7-2017 Guidelines for special provisions to CGHS Beneficiaries aged 80 years and above.
7. G.I., M.H. & F.W., O.M. No. S. 14021/20/2017-EHS, Dated 13-7-2017 regarding Recognition of Singla Nursing and Eye Hospital, Kotkapura, Faridkot (Punjab) for treatment of Central Government Employees under CS (MA) Rules, 1944 .
8. G.I., M.H. & F.W., O.M. No. S. 14021/06/2017-EHS, Dated 19-7-2017 regarding Recognition of Bhandari Hospital and Research Centre, Indore for treatment of Central Government employees under CS (MA) Rules, 1944.
9. G.I., M.H. & F.W., O.M. No.S. 14021/08/2017-EHS, Dated 27-7-2017 regarding Recognition of Dr. Shah's Unique Smile and Vision Care Clinic, Thane for treatment of Central Government employees under CS (MA) Rules,1944.

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10. G.I., M.H. & F.W., O.M. No. S. 14021/32/2017-EHS Dated 27-7-2017 regarding Recognition of Ratan Jyoti Netralaya, Gwalior for treatment of Central Government employees under CS (MA) Rules, 1944.
11. G.I., M.H. & F.W., O.M. No. S.14021/13/2010-EHS, Dated 27-7-2017 regarding Recognition of Kochar's Hospital, Jalgaon, Maharashtra for treatment of Central Government employees under CS (MA) Rules, 1944
12. G.I., Addl. Dir., CGHS, Kanpur, O.M. No. 3-2/2014-15/CGHS/KNP/7601-17 Dated 28-7-2017 regarding Suspension of empanelment of M/s. Krishna Super Speciality Hospital, 363 Harrisganj, near Tatmil Chauraha, Kanpur from the list of Hospitals empanelled under CGHS, Kanpur. (Sl.172 Page No.43)
13. G.I., M.H. & F.W., O.M. No. S. 14021/33/2014-EHS, Dated 1-8-2017 regarding Recognition of Sundaram Arulrhapj Hospitals, Tuticorin for treatment of Central Government employees under CS (MA) Rules, 1944.
14. G.I., PFRDA. Notfn. No. PFRDA/12/RGL/139/8, Dated 10-8-2017 regarding Pension Fund Regulatory and Development Authority (Exits and Withdrawals under the National Pension System) (First Amendment) Regulations, 2017 (Sl.No.176, Page No.50)
15. G.I., Dept. of Per. & Trg., O.M. No. 13/02/2017-Estt. (Pay-I), Dated 27-7-2017 regarding Availability of option for fixation of pay on promotion from the Date of Next Increment (DNI) in the lower post and method of fixation of pay from DNI, if opted for, in context of CCS (RP) Rules, 2016
16. G.I., Dept. of Per. & Trg., O.M. No. F.No.12/3/2017- Estt. (pay-I), Dated 28-7-2017 regarding Guidelines for fixation of pay of candidate working in Public Sector Undertakings, etc., recommended for appointment by the Commission by method of recruitment by selection.
17. G.I., M.F., O.M. No. 1-6/2016-IC, Dated 3-8-2017 regarding Recommendations of the Seventh Central Pay Commission (CPC)-Bunching of stages in the revised pay structure under Central Civil Services (Revised Pay) Rules, 2016
18. G.I., Dept. of Pen. & P&W., O.M. No. 1/13/09-P&PW (E), Dated 19-7-2017 regarding Eligibility of divorced daughters for grant of family pension – Clarification.
19. G.I., Dept. of pen. & P.W., O.M. NO. 1/27/2011-P & PW (E), Dated 1-8-2017 regarding Simplification of pension procedure-
(i) Handing over of PPO to the retiring employee by the Head of Office before retirement and
(ii) Submission of undertaking by retiring Government servant along with pension papers.
20. G.I., Dept. of Per & Trg., O.M. No. 31011/5/2014-Estt. (A.IV), Dated 21-8-2017 regarding Procedure for booking of air-tickets on LTC – Clarification.

21. G.I., M.U.D., Notfn. No. F. NO. 12035/11/2014- Pol. II (Vol.III) dated 1-8-2017 regarding Corrigendum.
22. G.I., M.F. Dept. of expenditure OM No.7(2)/EV/2016 Dated 6th September,2017 regarding Central Government Employees Group Insurance scheme - 1980 - tables of Benefits for the savings fund for the period from 01.07.2017 to 30.09.2017.

एस. मुथुशिवम
25/8/17

(एस मुथुशिवम)

उपायुक्त (वित्त)

011-26523070

प्रतिलिपि :

1. उपायुक्त, के. वी. एस. , सभी क्षेत्रीय कार्यालय।
2. वित्त अधिकारी , के. वी. एस. , सभी क्षेत्रीय कार्यालय।
3. सभी अधिकारी / अनुभाग , के. वी. एस. (मु.)।
4. प्राचार्य , के. वी. काठमांडू , मास्को एवं तेहरान ।
5. महासचिव , सभी मान्य संघ ।
6. निदेशक , जीट ग्वालियर , मुंबई , मैसूर , चंडीगढ़ एवं भूबनेश्वर।
7. उपायुक्त, ई डी पी , के वी एस (मु .) को इस निवेदन के साथ की पत्र को
8. के वी एस (मु.) की वेबसाइट के शीर्ष "सूचना पट(Announcements) " के अंतर्गत अपलोड करें ।
9. आर टी आई , के वी एस (मु .)।

G.I., M.F., O.M. No. F. No. 26/2/2016-PPD, dated 25-7-2017

Amendment to the Rule 152 of General Financial Rules, 2017

The undersigned is directed to invite attention to the provisions of Rule 152 of GFRs, 2017 which *inter alia* states that as per the Compulsory Enlistment Scheme of the Department of Expenditure, Ministry of Finance, it is compulsory for Indian agents, who desire to quote directly on behalf of their foreign principals, to get themselves enlisted with the Central Purchase Organization (eg. DGS&D). However, such enlistment is not equivalent to registration of suppliers as mentioned under Rule 150.

2. This department has received reference from Directorate General of Supplies and Disposals (DGS&D) to decentralize the activities of enlistment of Indian agent under Compulsory Enlistment Scheme as DGS&D is winding up by 31-10-2017. Hence, it is decided in consultation with major procuring Ministries/Departments that the existing provision of Rule 152 at Chapter 6 of General Financial Rule, 2017 which deals with "Procurement of Goods and Services" shall be *substituted* by the provision indicated as under

"Rule 152: Enlistment of Indian Agents: Ministries/Departments if they so require, may enlist Indian agents who desire to quote directly on behalf of their foreign principals."

3. This OM is also available on our website <http://doe.gov.in> -> Notification -> Circular --> Procurement Policy OM.

G.I., M.F., O.M. No. F.No. 20/2/2014-PPD (Pt.),
dated 25-7-2017

Amendment to the Rule 170 (i) of General Financial Rules, 2017

The reference of Department of Industrial Policy and Promotion (DIPP) to exempt Start-ups from submitting Earnest Money Deposit (EMD) has been considered and it has been decided to revise the Rule 170 (i) of GFRs, 2017 regarding 'Bid Security' as under:—

“Revised Rule 170 (i): To safeguard against a bidder's withdrawing or altering its bid during the bid validity period in the case of advertised or limited tender enquiry, Bid Security (also known as Earnest Money) is to be obtained from the bidders except Micro and Small Enterprises (MSEs) as defined in MSE Procurement Policy issued by Department of Micro, Small and Medium Enterprises (MSME) or are registered with the Central Purchase Organization or the concerned Ministry or Department or **Start-ups as recognized by Department of Industrial Policy and Promotion (DIPP)**. The bidders should be asked to furnish bid security along with their bids. Amount of bid security should ordinarily range between two per cent to five per cent of the estimated value of the goods to be procured. The amount of bid security should be determined accordingly by the Ministry or Department and indicated in the bidding documents. The bid security may be accepted in the form of Account Payee Demand Draft, Fixed Deposit Receipt, Banker's Cheque or Bank Guarantee from any of the Commercial Banks or payment online in an acceptable form, safeguarding the purchaser's interest in all respects. The bid security is normally to remain valid for a period of forty-five days beyond the final bid validity period.”

2. This OM is also available on our website <http://doc.gov.in> -> Notification -> Circular --> Procurement Policy OM.

Revision of flat rate of licence fee for General Pool Residential Accommodation (GPRA) throughout the country

In terms of the provisions of the Rule 74 of the Central Government General Pool Residential Accommodation Rules, 2017 (Sl. No. 157 of *Swamysnews*, August, 2017), the Government has decided to revise the flat rates of licence fee recoverable for the residential accommodation available in General Pool and also in Departmental Pools of Ministries/Departments of the Government of India throughout the country (except in respect of sub-standard/unclassified accommodation of Ministry of Defence, accommodation for service personnel of the Ministry of Defence and accommodation under the control of Ministry of Railways), as shown in the Annexure.

2. The revised rates of licence fee would be effective from 1st July, 2017. All Ministries/Departments are requested to take action to recover the revised licence fee in accordance with these orders in respect of accommodation under their control all over the country.

3. This issues with the concurrence of Integrated Finance Wing of the Ministry of Urban Development vide Note, dated 6-7-2017.

ANNEXURE

Revised flat rates of licence fee applicable for General Pool Residential Accommodation (GPRA) throughout the country with effect from 1-7-2017

Sl. No.	Type of Accommodation	Range of living Area in Sq. mtr.	Existing flat rates of Licence fee as per 2013 revision	Licence fee after merger of various areas in a type of accommodation as per % of accommodation rounded to ₹ 10
1.	I	Up to 30	115	150
2.	I	Up to 30	135	
3.	II	26.5 to 40	245	310
4.	II	41 to 50	310	
5.	III	46 to 55	370	470
6.	III	56 to 65	450	
7.	IV	59 to 75	500	640
8.	IV	76 to 91.5	625	
9.	IV (Special)	59 to 75	500	680
10.	IV (Special)	76 to 91.5	625	
11.	VA	Up to 106	875	1,190
12.	VA	Beyond 106	1,065	
13.	VB	Beyond 106	1,065	1,270
14.	VI A	Up to 159.5	1,305	1,560
15.	VI B	Beyond 159.5	1,565	1,870
16.	VII	189.5 to 224.5	1,835	2,190
17.	VIII	243 to 350	2,630	3,920
18.	VIII	350.5 to 522	3,875	

Revised flat rates of licence fee applicable for General Pool Residential Accommodation (GPRA) throughout the country with effect from 1-7-2017

For Servant Quarters and Garages

Sl. No.	Particulars	Existing rates (p.m.)	Revised rates (p.m.) rounded to ₹ 10
1.	Servant Quarters	₹ 60	₹ 70
2.	Garages	₹ 35	₹ 40

For categories of Suite, Living Area and proposed flat rates of licence fee for Hostel Accommodation

Sl. No.	Category of Suite	Living Area (Sq. mtr.)	Existing rates	Revised Rates rounded to ₹ 10 (p.m.)
1.	Single Room (without Kitchen)	21.5 to 30	₹ 335	₹ 400
	Single Room (with Kitchen)	30.5 to 39.5	₹ 475	₹ 560
2.	Double Room	47.5 to 60	₹ 650	₹ 770

CGHS/122/2016-EHS, dated 21-6-2017

**Recognition of Rainbow Children's Hospital, Vijayawada
for treatment of Central Government employees under
CS (MA) Rules, 1944**

The undersigned is directed to say that the proposal received for recognition of Rainbow Children's Hospital, Vijayawada for treatment of Central Government employees and their family members under Central Services (Medical Attendance) Rules, 1944 has been examined in this Ministry and found to be in order. It has been decided to grant recognition to the Rainbow Children's Hospital, Vijayawada under CS (MA) Rules, 1944.

2. The Schedule of charges for the treatment of Central Government employees and the members of their family under the CS (MA) Rules, 1944, will be the rates fixed for CGHS NABH, Hyderabad rates. The approved rates are available on the website of CGHS (<http://msotransparent.nic.in/cghsnew/index.asp>) and may be downloaded/printed.

3. The undersigned is further directed to clarify as under:—

(a) "Package Rate" shall mean and include lumpsum cost of in-patient treatment/day care/diagnostic procedure for which a CS (MA) beneficiary has been permitted by the Competent Authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to) — (i) Registration charges, (ii) Admission charges, (iii) Accommodation charges including patient's diet, (iv) Operation charges, (v) Injection charges, (vi) Dressing charges, (vii) Doctor/Consultant visit charges, (viii) ICU/ICCU charges, (ix) Monitoring charges, (x) Transfusion charges, (xi) Anaesthesia charges, (xii) Operation theatre charges, (xiii) Procedural charges/Surgeon's fee, (xiv) Cost of surgical disposables and all sundries used during hospitalization, (xv) Cost of medicines, (xvi) Related routine and essential investigations, (xvii) Physiotherapy charges, etc., (xviii) Nursing care and charges for its services.

(b) Cost of Implants is reimbursable in addition to package rates as per CGHS ceiling rates for implants.

(c) Treatment charges for new born baby are separately reimbursable in addition to delivery charges for mother.

(d) Rainbow Children's Hospital, Vijayawada shall not charge more than the package rates fixed for CGHS NABH, Hyderabad rates.

(e) Expenses on toiletries, cosmetics, telephone bills, etc., are not reimbursable and are not included in package rates.

4. Package rates envisage duration of indoor treatment as follows:—

Up to 12 days	for Specialized (Super Specialities) treatment
Up to 7 days	for other Major Surgeries
Up to 3 days	for Laparoscopic Surgeries/normal deliveries
1 day	for day care/Minor (OPD) surgeries

No additional charge on account of extended period of stay shall be allowed if that extension is due to infection or the consequences of surgical procedure or due to any improper procedure and is not justified.

In case, there are no CGHS prescribed rates for any test/procedure, then AIIMS rates are applicable. If there are no AIIMS rates, then reimbursement is to be arrived at by calculating admissible amount item-wise (e.g. room rent, investigations, cost of medicines, procedure charges, etc.) as per approved rates/actually, in case of investigations.

5. (a) CS (MA) beneficiaries are entitled to facilities of private, semi-private or general ward depending on their Basic Pay. The entitlement is as follows:—

Sl. No.	Corresponding Basic Pay drawn by the Officer in Seventh CPC per month	Ward Entitlement
1.	Up to ₹ 47,600	General Ward
2.	₹ 47,601 to 63,100	Semi-Private Ward
3.	₹ 63,101 and above	Private Ward

(b) The package rates given in rate list of CGHS are for semi-private ward.

(c) The package rates prescribed are for semi-private ward. If the beneficiary is entitled for general ward, there will be a decrease of 10%

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in the rates; for private ward entitlement, there will be an increase of 15%. However, the rates shall be same for investigation irrespective of entitlement, whether the patient is admitted or not and the test, *per se*, does not require admission.

6. The hospital shall charge from the beneficiary as per the CGHS prescribed rates or its own rate list, whichever is lower. The hospital shall charge CGHS, NABH, Hyderabad rates.

7. (a) The maximum room rent admissible for different categories would be:—

General ward	₹ 1,000 per day
Semi-private ward	₹ 2,000 per day
Private ward	₹ 3,000 per day
Day care (6 to 8 Hrs.)	₹ 500 (same for all categories)

(b) Room rent mentioned above at (a) above is applicable only for treatment procedures for which there is no CGHS prescribed package rate.

Room rent will include charges for occupation of bed, diet for the patient, charges for water and electricity supply, linen charges, nursing charges and routine upkeep.

(c) During the treatment in CGHS, separate room rent will be admissible.

(d) Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishings like wardrobe, dressing table, bed-side table, sofa set, etc., as well as a bed for attendant. The room has to be air-conditioned.

(e) Semi Private ward is defined as a hospital room where two to three patients are accommodated and which has attached facilities and necessary furnishings.

(f) General ward is defined as hall that accommodates four to ten patients.

(g) Normally, the treatment in higher category of accommodation than the entitled category is not permissible. However, in case of an emergency when the entitled category accommodation is not available, admission in the immediate higher category may be allowed till the entitled category accommodation becomes available. However, if the patient's hospital does not have the ward as per entitlement of beneficiary, then the hospital can only bill as per entitlement of the beneficiary even though the treatment was given in higher type of ward.

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If, on the request of the beneficiary, treatment is provided in a higher category of ward, then the expenditure over and above entitlement will have to be borne by the beneficiary.

8. In case of non-emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), after the specific treatment/investigation has been advised by Authorized Medical Attendant and on production of valid ID card and permission letter from his/her concerned Ministry/Department.

9. The hospital shall honour permission letter issued by Competent Authority and provide treatment/investigation facilities as specified in the permission letter.

10. The hospital shall also provide treatment/investigation facilities to the CGHS beneficiaries and their eligible dependent family members at its own rates or rates approved under CS (MA) Rules, whichever is lower. The hospital shall provide treatment to pensioner CGHS beneficiaries after authentication through verification of valid CGHS Cards.

11. However, pensioner CGHS beneficiaries would make payment for the medical treatment at approved rates as mentioned above and submit the medical reimbursement claim to the Additional Director, CGHS through the CMO in-charge of the CGHS Wellness Centre, where the CGHS Card of the beneficiary is registered.

12. In case of emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), on production of valid ID card, issued by Competent Authority.

13. During the in-patient treatment of the CS (MA) beneficiary, the hospital will not ask the beneficiary or his attendant to purchase separately the medicines/sundries/equipment or accessories from outside and will provide the treatment within the package rate, fixed by the CGHS which includes the cost of all the items.

14. In case of treatment taken in emergency in any non-recognized private hospitals, reimbursement shall be considered by Competent Authority at CGHS prescribed package/rates only.

15. If one or more minor procedures form part of a major treatment procedure, then package charges would be permissible for major procedure and only 50% of charges for minor procedure.

16. The hospital shall agree for conducting all investigations/diagnostic tests/consultations, etc. of the Central Civil Services, Group 'A' Officers

of age of 40 years and above and other categories of CGHS/CS (MA) beneficiaries as specified by Government from time to time as per prescribed protocol as per Annexure (*not printed*), subject to the condition that the hospital shall not charge more than ₹ 2,000 for conducting the prescribed medical examination of the male officers and ₹ 2,200 for female officers of Central Government who come to the hospital/institution with the requisite permission letter from their Ministry/Department/Competent Authority. The above rates for medical examination are valid until such time when the above rates are revised by the Central Government.

17. Any legal liability arising out of such services shall be the sole responsibility and shall be dealt with by the concerned empanelled hospital. Services will be provided by the hospital as per the terms given above.

18. Ministry of Health and Family Welfare reserves the right to withdraw/cancel the above recognition without assigning any reason.

19. The order takes effect from the date of issue of the O.M. The hospital stands recognized under CS (MA) Rules, 1944 for a period of 4 (four) years from the date of issue of this O.M.

20. The authorities of Rainbow Children's Hospital, Vijayawada will have to enter into an agreement with the Government of India to the effect that the hospital will charge from the Central Government employees at the rates fixed by the Government and they will have to sign a Memorandum of Understanding (MoU) within a period of 3 months from the date of issue of the above mentioned OM failing which the hospital will be derecognized (Two original copies of MoU printed on the stamp paper and duly signed by the hospital to be sent for acceptance). Subject to above, the hospital can start treating Central Government employees covered under CS (MA) Rules, 1944.

21. A communication in acceptance of the Para. 20 above may be sent to the undersigned within a week from the receipt of this Office Memorandum.

Recognition of Ozone Multispeciality Hospital and Critical Care Centre, Akola, Maharashtra for treatment of Central Government employees under CS (MA) Rules, 1944

The undersigned is directed to say that the proposal received for recognition of Ozone Multispeciality Hospital and Critical Care Centre, Akola, Maharashtra for treatment of Central Government employees and their family members under Central Services (Medical Attendance) Rules, 1944 has been examined in this Ministry and found to be in order. It has been decided to grant recognition to the Ozone Multispeciality Hospital and Critical Care Centre, Akola, Maharashtra under CS (MA) Rules, 1944.

2. The Schedule of charges for the treatment of Central Government employees and the members of their family under the CS (MA) Rules, 1944, will be the rates fixed for CGHS, Non-NABH, Nagpur rates. The approved rates are available on the website of CGHS (<http://msotransparent.nic.in/cghsnew/index.asp>) and may be downloaded/printed.

3. The undersigned is further directed to clarify as under:—

(a) "Package Rate" shall mean and include lumpsum cost of in-patient treatment/day care/diagnostic procedure for which a CS (MA) beneficiary has been permitted by the Competent Authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to) — (i) Registration charges, (ii) Admission charges, (iii) Accommodation charges including patient's diet, (iv) Operation charges, (v) Injection charges, (vi) Dressing charges, (vii) Doctor/Consultant visit charges, (viii) ICU/ICCU charges, (ix) Monitoring charges, (x) Transfusion charges, (xi) Anaesthesia charges, (xii) Operation theatre charges, (xiii) Procedural charges/Surgeon's fee, (xiv) Cost of surgical disposables and all sundries used during hospitalization, (xv) Cost of medicines, (xvi) Related routine and essential investigations, (xvii) Physiotherapy charges, etc., (xviii) Nursing care and charges for its services.

(b) Cost of Implants is reimbursable in addition to package rates as per CGHS ceiling rates for implants.

(c) Treatment charges for new born baby are separately reimbursable in addition to delivery charges for mother.

(d) Ozone Multispeciality Hospital and Critical Care Centre, Akola, Maharashtra shall not charge more than the package rates fixed for CGHS, Non-NABH, Nagpur rates.

(e) Expenses on toiletries, cosmetics, telephone bills, etc., are not reimbursable and are not included in package rates.

4. Package rates envisage duration of indoor treatment as follows:—

Up to 12 days	:	for Specialized (Super Specialities) treatment
Up to 7 days	:	for other Major Surgeries
Up to 3 days	:	for Laparoscopic Surgeries/normal deliveries
1 day	:	for day care/Minor (OPD) surgeries

No additional charge on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure or due to any improper procedure and is not justified.

9

In case there are no CGHS prescribed rates for any test/procedure, then AIIMS rates are applicable. If there are no AIIMS rates, then reimbursement is to be arrived at by calculating admissible amount item-wise (e.g. room rent, investigations, cost of medicines, procedure charges, etc.) as per approved rates/actually, in case of investigations.

5. (a) CS (MA) beneficiaries are entitled to facilities of private, semi-private or general ward depending on their Basic Pay. The entitlement is as follows:—

Sl. No.	Corresponding Basic Pay drawn by the Officer in Seventh CPC per month	Ward Entitlement
1.	Up to ₹ 47,600	General Ward
2.	₹ 47,601 to 63,100	Semi-Private Ward
3.	₹ 63,101 and above	Private Ward

(b) The package rates given in rate list of CGHS are for semi-private ward.

(c) The package rates prescribed are for semi-private ward. If the beneficiary is entitled for general ward, there will be a decrease of 10% in the rates; for private ward entitlement, there will be an increase of 15%. However, the rates shall be same for investigation irrespective of entitlement, whether the patient is admitted or not and the test, *per se*, does not require admission.

6. The hospital shall charge from the beneficiary as per the CGHS prescribed rates or its own rate list, whichever is lower. The hospital shall charge CGHS, Non-NABH, Nagpur rates.

7. (a) The maximum room rent admissible for different categories would be:—

General ward	₹ 1,000 per day
Semi-private ward	₹ 2,000 per day
Private ward	₹ 3,000 per day
Day care (6 to 8 Hrs.)	₹ 500 (same for all categories)

(b) Room rent mentioned above at (a) above is applicable only for treatment procedures for which there is no CGHS prescribed package rate.

Room rent will include charges for occupation of bed, diet for the patient, charges for water and electricity supply, linen charges, nursing charges and routine upkeep.

(c) During the treatment in ICCU/ICU, no separate room rent will be admissible.

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(d) Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishings like wardrobe, dressing table, bed-side table, sofa set, etc., as well as a bed for attendant. The room has to be air-conditioned.

(e) Semi Private ward is defined as a hospital room where two to three patients are accommodated and which has attached toilet facilities and necessary furnishings.

(f) General ward is defined as hall that accommodates four to ten patients.

(g) Normally, the treatment in higher category of accommodation than the entitled category is not permissible. However, in case of an emergency when the entitled category accommodation is not available, admission in the immediate higher category may be allowed till the entitled category accommodation becomes available. However, if a particular hospital does not have the ward as per entitlement of beneficiary, then the hospital can only bill as per entitlement of the beneficiary even though the treatment was given in higher type of ward.

If, on the request of the beneficiary, treatment is provided in a higher category of ward, then the expenditure over and above entitlement will have to be borne by the beneficiary.

8. In case of non-emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), after the specific treatment/investigation has been advised by Authorized Medical Attendant and on production of valid ID card and permission letter from his/her concerned Ministry/Department.

9. The hospital shall honour permission letter issued by Competent Authority and provide treatment/investigation facilities as specified in the permission letter.

10. The hospital shall also provide treatment/investigation facilities to the CGHS beneficiaries and their eligible dependent family members at its own rates or rates approved under CS (MA) Rules, whichever is lower. The hospital shall provide treatment to pensioner CGHS beneficiaries after authentication through verification of valid CGHS Cards.

11. However, pensioner CGHS beneficiaries would make payment for the medical treatment at approved rates as mentioned above and submit the medical reimbursement claim to the Additional Director, CGHS through the CMO incharge of the CGHS Wellness Centre, where the CGHS Card of the beneficiary is registered.

12. In case of emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), on production of valid ID card, issued by Competent Authority.

13. During the in-patient treatment of the CS (MA) beneficiary, the hospital will not ask the beneficiary or his attendant to purchase separately the medicines/sundries/equipment or accessories from outside and will provide the treatment within the package rate, fixed by the CGHS which includes the cost of all the items.

14. In case of treatment taken in emergency in any non-recognized private hospitals, reimbursement shall be considered by Competent Authority at CGHS prescribed package/rates only.

15. If one or more minor procedures form part of a major treatment procedure, then package charges would be permissible for major procedure and only 50% of charges for minor procedure.

16. The hospital shall agree for conducting all investigations / diagnostic tests/consultations, etc. of the Central Civil Services, Group 'A' Officers of age of 40 years and above and other categories of CGHS/CS (MA) beneficiaries as specified by Government from time to time as per prescribed protocol as per Annexure *(not printed)* subject to the condition that the hospital shall not charge more than ₹ 2,000 for conducting the prescribed medical examination of the male officers and ₹ 2,200 for female officers of Central Government who come to the hospital/institution with the requisite permission letter from their Ministry/Department/Competent Authority. The above rates for medical examination are valid until such time when the above rates are revised by the Central Government.

17. Any legal liability arising out of such services shall be the sole responsibility and shall be dealt with by the concerned empanelled hospital. Services will be provided by the hospital as per the terms given above.

18. Ministry of Health and Family Welfare reserves the right to withdraw/cancel the above recognition without assigning any reason.

19. The order takes effect from the date of issue of the C.M. The hospital stands recognized under CS (MA) Rules, 1944 for a period of 4 (four) years from the date of issue of this OM.

20. The authorities of Ozone Multispeciality Hospital and Critical Care Centre, Akola, Maharashtra will have to enter into an agreement with the Government of India to the effect that the hospital will charge from the Central Government employees at the rates fixed by the Government and they will have to sign a Memorandum of Understanding (MoU) within a period of 3 months from the date of issue of the above-mentioned

OM failing which the hospital will be derecognized (Two original copies of MoU printed on the stamp paper and duly signed by the hospital to be sent for acceptance). Subject to above, the hospital can start treating Central Government employees covered under CS (MA) Rules, 1944.

21. A communication in acceptance of the Para. 20 above may be sent to the undersigned within a week from the receipt of this Office Memorandum.

G.I., M.H. & F.W., O.M. No. Z-16025/98/2017-CGHS-III,
dated 11-7-2017

**Guidelines for special provisions to CGHS beneficiaries
aged 80 years and above**

With reference to the above-mentioned subject, the undersigned is directed to convey the approval of Competent Authority for special provisions under CGHS to the beneficiaries aged 80 years and above, in continuation of earlier guidelines in this regard, as per the details given below:—

- (a) Consultation of Doctor at CGHS Wellness Centre without standing in Queue.
- (b) CGHS Doctors shall enquire by phone, at least once in a month to enquire about their well being/make a home visit if residing within 5 kms. of CGHS WC.
- (c) Settlement of medical claims on priority out of turn.
- (d) Follow up treatment from same specialist in non-empanelled hospital from where he/she was earlier taking treatment — as a special case in view of advanced age and difficulty to change physician subject to the reimbursement limited to CGHS rates and collection of medicines as per CGHS guidelines.

**Recognition of Singla Nursing and Eye Hospital, Kotkapura,
Faridkot (Punjab) for treatment of Central Government
employees under CS (MA) Rules, 1944**

The undersigned is directed to say that the proposal received for recognition of Singla Nursing and Eye Hospital, Kotkapura, Faridkot (Punjab) for treatment of Central Government employees and their family members under Central Services (Medical Attendance) Rules, 1944 has been examined in this Ministry and found to be in order. It has been decided to grant recognition to the Singla Nursing and Eye Hospital, Kotkapura, Faridkot (Punjab) under CS (MA) Rules, 1944.

2. The Schedule of charges for the treatment of Central Government employees and the members of their family under the CS (MA) Rules, 1944, will be the rates fixed for CGHS, NABH, Chandigarh rates or hospital's own rates, whichever is less. The approved rates are available on the website of CGHS (<http://msotransparent.nic.in/cgshsnew/index.asp>) and may be downloaded / printed.

3. The undersigned is further directed to clarify as under:—

(a) "Package Rate" shall mean and include lumpsum cost of in-patient treatment/ day care/ diagnostic procedure for which a CS (MA) beneficiary has been permitted by the Competent Authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to) — (i) Registration charges, (ii) Admission charges, (iii) Accommodation charges including patient's diet, (iv) Operation charges, (v) Injection charges, (vi) Dressing charges, (vii) Doctor/ Consultant visit charges, (viii) ICU/ICCU charges, (ix) Monitoring charges, (x) Transfusion charges, (xi) Anaesthesia charges, (xii) Operation theatre charges, (xiii) Procedural charges/ Surgeon's fee, (xiv) Cost of surgical disposables and all sundries used during hospitalization, (xv) Cost of medicines, (xvi) Related routine and essential investigations, (xvii) Physiotherapy charges, etc., (xviii) Nursing care and charges for its services.

(b) Cost of Implants is reimbursable in addition to package rates as per CGHS ceiling rates for implants.

(c) Singla Nursing and Eye Hospital, Kotkapura, Faridkot (Punjab) shall not charge more than the package rates fixed for CGHS NABH, Chandigarh rates.

(d) Expenses on toiletries, cosmetics, telephone bills, etc., are not reimbursable and are not included in package rates.

4. Package rates envisaged as per duration of indoor treatment as follows:—

1. Up to 3 days — eye surgeries under GA.
Example — Retina surgery, DCR, Squint Surgery, etc.
2. For 1 day — Eye surgery under LA. Cataract, Glaucoma, minor OPD procedures, etc.

No additional charge on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure or due to any improper procedure and is not justified.

In case, there are no CGHS prescribed rates for any test/procedure, then AIIMS rates are applicable. If there are no AIIMS rates, then reimbursement is to be arrived at by calculating admissible amount item-wise (e.g. room rent, investigations, cost of medicines, procedure charges, etc.) as per approved rates/actually, in case of investigations.

5. (a) CS (MA) beneficiaries are entitled to facilities of private, semi-private or general ward depending on their Basic Pay. The entitlement is as follows:—

Sl. No.	Corresponding Basic Pay drawn by the Officer in Seventh CPC per month	Ward Entitlement
1.	Up to ₹ 47,600	General Ward
2.	₹ 47,601 to 63,100	Semi-Private Ward
3.	₹ 63,101 and above	Private Ward

(b) The package rates given in rate list of CGHS are for semi-private ward.

(c) The package rates prescribed are for semi-private ward. If the beneficiary is entitled for general ward, there will be a decrease of 10% in the rates; for private ward entitlement, there will be an increase of 15%. However, the rates shall be same for investigation irrespective of entitlement, whether the patient is admitted or not and the test, *per se*, does not require admission.

6. The hospital shall charge from the beneficiary as per the CGHS prescribed rates or its own rate list, whichever is lower. The hospital shall charge CGHS, NABH, Chandigarh rates.

7. (a) The maximum room rent admissible for different categories would be:—

General ward	₹ 1,000 per day
Semi-private ward	₹ 2,000 per day
Private ward	₹ 3,000 per day
Day care (6 to 8 Hrs.)	₹ 500 (same for all categories)

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(b) Room rent mentioned above at (a) above is applicable only for treatment procedures for which there is no CGHS prescribed package rate.

Room rent will include charges for occupation of bed, diet for the patient, charges for water and electricity supply, linen charges, nursing charges and routine upkeeping.

(c) Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishings like wardrobe, dressing table, bed-side table, sofa set, etc., as well as a bed for attendant. The room has to be air-conditioned.

(d) Semi Private ward is defined as a hospital room where two to three patients are accommodated and which has attached toilet facilities and necessary furnishings.

(e) General ward is defined as hall that accommodates four to ten patients.

(f) Normally, the treatment in higher category of accommodation than the entitled category is not permissible. However, in case of an emergency when the entitled category accommodation is not available, admission in the immediate higher category may be allowed till the entitled category accommodation becomes available. However, if a particular hospital does not have the ward as per entitlement of beneficiary, then the hospital can only bill as per entitlement of the beneficiary even though the treatment was given in higher type of ward.

If, on the request of the beneficiary, treatment is provided in a higher category of ward, then the expenditure over and above entitlement will have to be borne by the beneficiary.

8. In case of non-emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), after the specific treatment/investigation has been advised by Authorized Medical Attendant and on production of valid ID card and permission letter from his/her concerned Ministry/Department.

9. The hospital shall honour permission letter issued by Competent Authority and provide treatment/investigation facilities as specified in the permission letter.

10. The hospital shall also provide treatment/investigation facilities to the CGHS beneficiaries and their eligible dependent family members at its own rates or rates approved under CS (MA) Rules, whichever is lower. The hospital shall provide treatment to pensioner CGHS beneficiaries after authentication through verification of valid CGHS Cards.

11. However, pensioner CGHS beneficiaries would make payment for the medical treatment at approved rates as mentioned above and submit the medical reimbursement claim to the Additional Director, CGHS through the CMO in-charge of the CGHS Wellness Centre, where the CGHS Card of the beneficiary is registered.

12. In case of emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), on production of valid ID card, issued by Competent Authority.

13. During the in-patient treatment of the CS (MA) beneficiary, the hospital will not ask the beneficiary or his attendant to purchase separately the medicines/sundries/equipment or accessories from outside and will provide the treatment within the package rate, fixed by the CGHS which includes the cost of all the items.

14. In case of treatment taken in emergency in any non-recognized private hospitals, reimbursement shall be considered by Competent Authority at CGHS prescribed package/rates only.

15. If one or more minor procedures form part of a major treatment procedure, then package charges would be permissible for major procedure and only 50% of charges for minor procedure.

16. Any legal liability arising out of such services shall be the sole responsibility and shall be dealt with by the concerned empanelled hospital. Services will be provided by the hospital as per the terms given above.

17. Ministry of Health and Family Welfare reserves the right to withdraw/cancel the above recognition without assigning any reason.

18. The order takes effect from the date of issue of the O.M. The hospital stands recognized under CS (MA) Rules, 1944 for a period of two years from the date of issue of this OM.

19. The authorities of Singla Nursing and Eye Hospital, Kotkapura, Faridkot (Punjab) will have to enter into an agreement with the Government of India to the effect that the hospital will charge from the Central Government employees at the rates fixed by the Government and they will have to sign a Memorandum of Understanding (MoU) within a period of 3 months from the date of issue of the above-mentioned OM failing which the hospital will be derecognized (Two original copies of MoU printed on the stamp paper and duly signed by the hospital to be sent for acceptance). Subject to above, the hospital can start treating Central Government employees covered under CS (MA) Rules, 1944.

20. A communication in acceptance of the Para. 19 above may be sent to the undersigned within a week from the receipt of this Office Memorandum.

**Recognition of Bhandari Hospital and Research Centre, Indore
for treatment of Central Government employees
under CS (MA) Rules, 1944**

The undersigned is directed to say that the proposal received for recognition of Bhandari Hospital and Research Centre, Indore for treatment of Central Government employees and their family members under Central Services (Medical Attendance) Rules, 1944 has been examined in this Ministry and found to be in order. It has been decided to grant recognition to the Bhandari Hospital and Research Centre, Indore under CS (MA) Rules, 1944.

2. The Schedule of charges for the treatment of Central Government employees and the members of their family under the CS (MA) Rules, 1944, will be the rates fixed for CGHS, Non-NABH, Bhopal rates. The approved rates are available on the website of CGHS (<http://msotransparent.nic.in/cghsnew/index.asp>) and may be downloaded/printed.

3. The undersigned is further directed to clarify as under:—

(a) "Package Rate" shall mean and include lumpsum cost of in-patient treatment/day care/diagnostic procedure for which a CS (MA) beneficiary has been permitted by the Competent Authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to) — (i) Registration charges, (ii) Admission charges, (iii) Accommodation charges including patient's diet, (iv) Operation charges, (v) Injection charges, (vi) Dressing charges, (vii) Doctor/Consultant visit charges, (viii) ICU/ICCU charges, (ix) Monitoring charges, (x) Transfusion charges, (xi) Anaesthesia charges, (xii) Operation theatre charges, (xiii) Procedural charges/Surgeon's fee, (xiv) Cost of surgical disposables and all sundries used during hospitalization, (xv) Cost of medicines, (xvi) Related routine and essential investigations, (xvii) Physiotherapy charges, etc., (xviii) Nursing care and charges for its services.

(b) Cost of Implants is reimbursable in addition to package rates as per CGHS ceiling rates for implants.

(c) Treatment charges for new born baby are separately reimbursable in addition to delivery charges for mother.

(d) Bhandari Hospital and Research Centre, Indore shall not charge more than the package rates fixed for CGHS Non-NABH, Bhopal rates.

(e) Expenses on toiletries, cosmetics, telephone bills, etc., are not reimbursable and are not included in package rates.

4. Package rates envisage duration of indoor treatment as follows:—

- Up to 12 days : for Specialized (Super Specialities) treatment
Up to 7 days : for other Major Surgeries
Up to 3 days : for Laparoscopic Surgeries/normal deliveries
1 day : for day care/Minor (OPD) surgeries

No additional charge on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure or due to any improper procedure and is not justified.

In case, there are no CGHS prescribed rates for any test/procedure, then AIIMS rates are applicable. If there are no AIIMS rates, then reimbursement is to be arrived at by calculating admissible amount item-wise (e.g. room rent, investigations, cost of medicines, procedure charges, etc.) as per approved rates/actually, in case of investigations.

5. (a) CS (MA) beneficiaries are entitled to facilities of private, semi-private or general ward depending on their Basic Pay. The entitlement is as follows:—

Sl. No.	Corresponding Basic Pay drawn by the Officer in Seventh CPC per month	Ward Entitlement
1.	Up to ₹ 47,600	General Ward
2.	₹ 47,601 to 63,100	Semi-Private Ward
3.	₹ 63,101 and above	Private Ward

(b) The package rates given in rate list of CGHS are for semi-private ward.

(c) The package rates prescribed are for semi-private ward. If the beneficiary is entitled for general ward, there will be a decrease of 10% in the rates; for private ward entitlement, there will be an increase of 15%. However, the rates shall be same for investigation irrespective of entitlement, whether the patient is admitted or not and the test, *per se*, does not require admission.

6. The hospital shall charge from the beneficiary as per the CGHS prescribed rates or its own rate list, whichever is lower. The hospital shall charge CGHS, Non-NABH, Bhopal rates.

7. (a) The maximum room rent admissible for different categories would be:—

General ward	₹ 1,000 per day
Semi-private ward	₹ 2,000 per day
Private ward	₹ 3,000 per day
Day care (6 to 8 Hrs.)	₹ 500 (same for all categories)

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(b) Room rent mentioned above at (a) above is applicable only for treatment procedures for which there is no CGHS prescribed package rate.

Room rent will include charges for occupation of bed, diet for the patient, charges for water and electricity supply, linen charges, nursing charges and routine upkeeping.

(c) During the treatment in ICCU/ICU, no separate room rent will be admissible.

(d) Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishings like wardrobe, dressing table, bed-side table, sofa set, etc., as well as a bed for attendant. The room has to be air-conditioned.

(e) Semi Private ward is defined as a hospital room where two to three patients are accommodated and which has attached toilet facilities and necessary furnishings.

(f) General ward is defined as hall that accommodates four to ten patients.

(g) Normally, the treatment in higher category of accommodation than the entitled category is not permissible. However, in case of an emergency when the entitled category accommodation is not available, admission in the immediate higher category may be allowed till the entitled category accommodation becomes available. However, if a particular hospital does not have the ward as per entitlement of beneficiary, then the hospital can only bill as per entitlement of the beneficiary even though the treatment was given in higher type of ward.

If, on the request of the beneficiary, treatment is provided in a higher category of ward, then the expenditure over and above entitlement will have to be borne by the beneficiary.

8. In case of non-emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), after the specific treatment/investigation has been advised by Authorized Medical Attendant and on production of valid ID card and permission letter from his/her concerned Ministry/Department.

9. The hospital shall honour permission letter issued by Competent Authority and provide treatment/investigation facilities as specified in the permission letter.

10. The hospital shall also provide treatment/investigation facilities to the CGHS beneficiaries and their eligible dependent family members at

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its own rates or rates approved under CS (MA) Rules, whichever is lower. The hospital shall provide treatment to pensioner CGHS beneficiaries after authentication through verification of valid CGHS Cards.

11. However, pensioner CGHS beneficiaries would make payment for the medical treatment at approved rates as mentioned above and submit the medical reimbursement claim to the Additional Director, CGHS through the CMO in-charge of the CGHS Wellness Centre, where the CGHS Card of the beneficiary is registered.

12. In case of emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), on production of valid ID card, issued by Competent Authority.

13. During the in-patient treatment of the CS (MA) beneficiary, the hospital will not ask the beneficiary or his attendant to purchase separately the medicines/sundries/equipment or accessories from outside and will provide the treatment within the package rates fixed by the CGHS which includes the cost of all the items.

14. In case of treatment taken in emergency in any non-recognized private hospitals, reimbursement shall be considered by Competent Authority at CGHS prescribed package/rates only.

15. If one or more minor procedures form part of a major treatment procedure, then package charges would be permissible for major procedure and only 50% of charges for minor procedure.

16. The hospital shall agree for conducting all investigations/diagnostic tests/consultations, etc. of the Central Civil Services, Group 'A' officers of age of 40 years and above and other categories of CGHS / CS (MA) beneficiaries as specified by Government from time to time as per prescribed protocol as per Annexure (*not printed*), subject to the condition that the hospital shall not charge more than ₹ 2,000 for conducting the prescribed medical examination of the male officers and ₹ 2,200 for female officers of Central Government who come to the hospital/institution with the requisite permission letter from their Ministry/Department/Competent Authority. The above rates for medical examination are valid until such time when the above rates are revised by the Central Government.

17. Any legal liability arising out of such services shall be the sole responsibility and shall be dealt with by the concerned empanelled hospital. Services will be provided by the hospital as per the terms given above.

18. Ministry of Health and Family Welfare reserves the right to withdraw/cancel the above recognition without assigning any reason.

19. The order takes effect from the date of issue of the O.M. The hospital stands recognized under CS (MA) Rules, 1944 for a period of 4 (four) years from the date of issue of this OM.

20. The authorities of Bhandari Hospital and Research Centre, Indore will have to enter into an agreement with the Government of India to the effect that the hospital will charge from the Central Government employees at the rates fixed by the Government and they will have to sign a Memorandum of Understanding (MoU) within a period of 3 months from the date of issue of the above-mentioned OM failing which the hospital will be derecognized (Two original copies of MoU printed on the stamp paper and duly signed by the hospital to be sent for acceptance). Subject to above, the hospital can start treating Central Government employees covered under CS (MA) Rules, 1944.

21. A communication in acceptance of the Para. 20 above may be sent to the undersigned within a week from the receipt of this Office Memorandum.

**Recognition of Dr. Shah's Unique Smile and Vision Care Clinic,
Thane for treatment of Central Government employees under
CS (MA) Rules, 1944**

The undersigned is directed to say that the proposal received for recognition of Dr. Shah's Unique Smile and Vision Care Clinic, Thane for treatment of Central Government employees and their family members under Central Services (Medical Attendance) Rules, 1944 has been examined in this Ministry and found to be in order. It has been decided to grant recognition to the Dr. Shah's Unique Smile and Vision Care Clinic, Thane under CS (MA) Rules, 1944.

2. The Schedule of charges for the treatment of Central Government employees and the members of their family under the CS (MA) Rules, 1944, will be the rates fixed for CGHS, Non-NABH, Mumbai rates or hospital's own rates, whichever is less. The approved rates are available on the website of CGHS (<http://msotransparent.nic.in/cghsnew/index.asp>) and may be downloaded/printed.

3. The undersigned is further directed to clarify as under:—

(a) "Package Rate" shall mean and include lumpsum cost of in-patient treatment/day care/diagnostic procedure for which a CS (MA) beneficiary has been permitted by the Competent Authority or for treatment under emergency from the time of admission to the time of discharge, including (not limited to) — (i) Registration charges, (ii) Admission charges, (iii) Accommodation charges including patient's diet, (iv) Operation charges, (v) Injection charges, (vi) Dressing charges, (vii) Doctor/Consultant visit charges, (viii) ICU/ICCU charges, (ix) Monitoring charges, (x) Transfusion charges, (xi) Anaesthesia charges, (xii) Operation theatre charges, (xiii) Procedural charges/Surgeon's fee, (xiv) Cost of surgical disposables, (xv) All sundries used during hospitalization, (xvi) Cost of medicines, (xvii) Related routine and essential investigations, (xviii) Physiotherapy charges, etc., (xviii) Nursing care and charges for its services.

(b) Cost of Implants is reimbursable in addition to package rates as per CGHS ceiling rates for implants.

(c) Dr. Shah's Unique Smile and Vision Care Clinic, Thane shall not charge more than the package rates fixed for CGHS Non-NABH, Mumbai rates.

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(d) Expenses on toiletries, cosmetics, telephone bills, etc., are not reimbursable and are not included in package rates.

4. Package rates envisaged as per duration of indoor treatment as follows:—

1. Up to 3 days — eye surgeries under GA.
Example — Retina surgery, DCR, Squint Surgery, etc.
2. For 1 day — Eye surgery under LA. Cataract, Glaucoma, minor OPD procedures, etc.

No additional charge on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure or due to any improper procedure and is not justified.

In case, there are no CGHS prescribed rates for any test/procedure, then AIIMS rates are applicable. If there are no AIIMS rates, then reimbursement is to be arrived at by calculating admissible amount item-wise (e.g. room rent, investigations, cost of medicines, procedure charges, etc.) as per approved rates/actually, in case of investigations.

5. (a) CS (MA) beneficiaries are entitled to facilities of private, semi-private or general ward depending on their Basic Pay. The entitlement is as follows:—

Sl. No.	Corresponding Basic Pay drawn by the Officer in Seventh CPC per month	Ward Entitlement
1.	Up to ₹ 47,600	General Ward
2.	₹ 47,601 to 63,100	Semi-Private Ward
3.	₹ 63,101 and above	Private Ward

(b) The package rates given in rate list of CGHS are for semi-private ward.

(c) The package rates prescribed are for semi-private ward. If the beneficiary is entitled for general ward, there will be a decrease of 10% in the rates; for private ward entitlement, there will be an increase of 15%. However, the rates shall be same for investigation irrespective of entitlement, whether the patient is admitted or not and the test, *per se*, does not require admission.

6. The hospital shall charge from the beneficiary as per the CGHS prescribed rates or its own rate list, whichever is lower. The hospital shall charge CGHS, Non-NABH, Mumbai rates.

7. (a) The maximum room rent admissible for different categories would be:—

General ward	₹ 1,000 per day
Semi-private ward	₹ 2,000 per day
Private ward	₹ 3,000 per day
Day care (6 to 8 Hrs.)	₹ 500 (same for all categories)

(b) Room rent mentioned above at (a) above is applicable only for treatment procedures for which there is no CGHS prescribed package rate.

Room rent will include charges for occupation of bed, diet for the patient, charges for water and electricity supply, linen charges, nursing charges and routine upkeeping.

(c) Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishings like wardrobe, dressing table, bed-side table, sofa set, etc., as well as a bed for attendant. The room has to be air-conditioned.

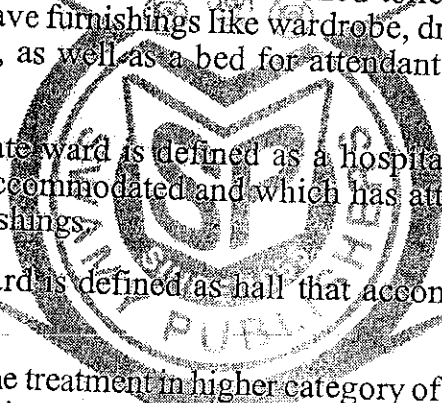
(d) Semi Private ward is defined as a hospital room where two to three patients are accommodated and which has attached toilet facilities and necessary furnishings.

(e) General ward is defined as hall that accommodates four to ten patients.

(f) Normally, the treatment in higher category of accommodation than the entitled category is not permissible. However, in case of an emergency when the entitled category accommodation is not available, admission in the immediate higher category may be allowed till the entitled category accommodation becomes available. However, if a particular hospital does not have the ward as per entitlement of beneficiary, then the hospital can only bill as per entitlement of the beneficiary even though the treatment was given in higher type of ward.

If, on the request of the beneficiary, treatment is provided in a higher category of ward, then the expenditure over and above entitlement will have to be borne by the beneficiary.

8. In case of non-emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), after the specific treatment/investigation has been advised by Authorized Medical Attendant and on production of valid ID card and permission letter from his/her concerned Ministry/Department.



9. The hospital shall honour permission letter issued by Competent Authority and provide treatment/investigation facilities as specified in the permission letter.

10. The hospital shall also provide treatment/investigation facilities to the CGHS beneficiaries and their eligible dependent family members at its own rates or rates approved under CS (MA) Rules, whichever is lower. The hospital shall provide treatment to pensioner CGHS beneficiaries after authentication through verification of valid CGHS Cards.

11. However, pensioner CGHS beneficiaries would make payment for the medical treatment at approved rates as mentioned above and submit the medical reimbursement claim to the Additional Director, CGHS through the CMO in-charge of the CGHS Wellness Centre, where the CGHS Card of the beneficiary is registered.

12. In case of emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), on production of valid ID card, issued by Competent Authority.

13. During the in-patient treatment of the CS (MA) beneficiary, the hospital will not ask the beneficiary or his attendant to purchase separately the medicines/sundries/equipment or accessories from outside and will provide the treatment within the package rate, fixed by the CGHS which includes the cost of all the items.

14. In case of treatment taken in emergency in any non-recognized private hospitals, reimbursement shall be considered by Competent Authority at CGHS prescribed package/rates only.

15. If one or more minor procedures form part of a major treatment procedure, then package charges would be permissible for major procedure and only 50% of charges for minor procedure.

16. Any legal liability arising out of such services shall be the sole responsibility and shall be dealt with by the concerned empanelled hospital. Services will be provided by the hospital as per the terms given above.

17. Ministry of Health and Family Welfare reserves the right to withdraw/cancel the above recognition without assigning any reason.

18. The order takes effect from the date of issue of the O.M. The hospital stands recognized under CS (MA) Rules, 1944 for a period of 2 (two) years from the date of issue of this OM.

19. The authorities of Dr. Shah's Unique Smile and Vision Care Clinic, Thane will have to enter into an agreement with the Government of India to the effect that the hospital will charge from the Central Government employees at the rates fixed by the Government and they will have to sign a Memorandum of Understanding (MoU) within a period of 3 months from the date of issue of the above-mentioned OM failing which the hospital will be derecognized (Two original copies of MoU printed on the stamp paper and duly signed by the hospital to be sent for acceptance). Subject to above, the hospital can start treating Central Government employees covered under CS (MA) Rules, 1944.

20. A communication in acceptance of the Para. 19 above may be sent to the undersigned within a week from the receipt of this Office Memorandum.

G.I., M.H. & F.W., O.M. No. S. 14021/32/2017-EHS, dated 27-7-2017

Recognition of Ratan Jyoti Netralaya, Gwalior for treatment of Central Government employees under CS (MA) Rules, 1944

The undersigned is directed to say that the proposal received for recognition of Ratan Jyoti Netralaya, Gwalior for treatment of Central Government employees and their family members under Central Services (Medical Attendance) Rules, 1944 has been examined in this Ministry and found to be in order. It has been decided to grant recognition to the Ratan Jyoti Netralaya, Gwalior under CS (MA) Rules, 1944.

2. The Schedule of charges for the treatment of Central Government employees and the members of their family under the CS (MA) Rules, 1944, will be the rates fixed for CGHS, Non-NABH, Bhopal rates or hospital's own rates, whichever is less. The approved rates are available on the website of CGHS (<http://msotransparent.nic.in/cghsnew/index.asp>) and may be downloaded/printed.

3. The undersigned is further directed to clarify as under:—

(a) "Package Rate" shall mean and include lumpsum cost of in-patient treatment/ day care/ diagnostic procedure for which a CS (MA) beneficiary has been permitted by the Competent Authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to) — (i) Registration charges, (ii) Admission charges, (iii) Accommodation charges including patient's diet, (iv) Operation charges, (v) Injection charges, (vi) Dressing charges, (vii) Doctor/ Consultant visit charges, (viii) ICU/ICCU charges, (ix) Monitoring charges, (x) Transfusion charges, (xi) Anaesthesia charges, (xii) Operation theatre charges, (xiii) Procedural charges/ Surgeon's fee, (xiv) Cost of surgical disposables and all sundries used during hospitalization, (xv) Cost of medicines, (xvi) Related routine and essential investigations, (xvii) Physiotherapy charges, etc., (xviii) Nursing care and charges for its services.

(b) Cost of implants is reimbursable in addition to package rates as per CGHS ceiling rates for implants.

(c) Ratan Jyoti Netralaya, Gwalior shall not charge more than the package rates fixed for CGHS Non-NABH, Bhopal rates.

(d) Expenses on toiletries, cosmetics, telephone bills, etc., are not reimbursable and are not included in package rates.

4. Package rates envisaged as per duration of indoor treatment as follows:—

1. Up to 3 days — eye surgeries under GA. Example — Retina surgery, DCR, Squint Surgery, etc.
2. For 1 day — Eye surgery under LA. Cataract, Glaucoma, minor OPD procedures, etc.

No additional charge on account of extended period of stay shall be allowed if that extension is due to infection or the consequences of surgical procedure or due to any improper procedure and is not justified.

In case, there are no CGHS prescribed rates for any test/procedure, then AIIMS rates are applicable. If there are no AIIMS rates, then reimbursement is to be arrived at by calculating admissible amount item-wise (e.g. room rent, investigations, cost of medicines, procedure charges, etc.) as per approved rates/actually, in case of investigations.

5. (a) CS (MA) beneficiaries are entitled to facilities of private, semi-private or general ward depending on their Basic Pay. The entitlement is as follows:—

Sl. No.	Corresponding Basic Pay drawn by the Officer in Seventh CPC per month	Ward Entitlement
1.	Up to ₹ 47,600	General Ward
2.	₹ 47,601 to 63,100	Semi-Private Ward
3.	₹ 63,101 and above	Private Ward

(b) The package rates given in rate list of CGHS are for semi-private ward.

(c) The package rates prescribed are for semi-private ward. If the beneficiary is entitled for general ward, there will be a decrease of 10% in the rates; for private ward entitlement, there will be an increase of 15%. However, the rates shall be same for investigation irrespective of entitlement, whether the patient is admitted or not and the test, *per se*, does not require admission.

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6. The hospital shall charge from the beneficiary as per the CGHS prescribed rates or its own rate list, whichever is lower. The hospital shall charge CGHS, Non-NABH, Bhopal rates.

7. (a) The maximum room rent admissible for different categories would be:—

General ward	₹ 1,000 per day
Semi-private ward	₹ 2,000 per day
Private ward	₹ 3,000 per day
Day care (6 to 8 Hrs.)	₹ 500 (same for all categories)

(b) Room rent mentioned above at (a) above is applicable only for treatment procedures for which there is no CGHS prescribed package rate. Room rent will include charges for occupation of bed, diet for the patient, charges for water and electricity supply, linen charges, nursing charges and routine upkeeping.

(c) Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishings like wardrobe, dressing table, bed-side table, sofa set, etc., as well as a bed for attendant. The room has to be air-conditioned.

(d) Semi Private ward is defined as a hospital room where two to three patients are accommodated and which has attached toilet facilities and necessary furnishings.

(e) General ward is defined as hall that accommodates four to ten patients.

(f) Normally, the treatment in higher category of accommodation than the entitled category is not permissible. However, in case of an emergency when the entitled category accommodation is not available, admission in the immediate higher category may be allowed till the entitled category accommodation becomes available. However, if a particular hospital does not have the ward as per entitlement of beneficiary, then the hospital can only bill as per entitlement of the beneficiary even though the treatment was given in higher type of ward.

If, on the request of the beneficiary, treatment is provided in a higher category of ward, then the expenditure over and above entitlement will have to be borne by the beneficiary.

8. In case of non-emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), after the specific treatment/investigation has been advised by Authorized Medical Attendant and on production of

valid ID card and permission letter from his/her concerned Ministry/ Department.

9. The hospital shall honour permission letter issued by Competent Authority and provide treatment/investigation facilities as specified in the permission letter.

10. The hospital shall also provide treatment/investigation facilities to the CGHS beneficiaries and their eligible dependent family members at its own rates or rates approved under CS (MA) Rules, whichever is lower. The hospital shall provide treatment to pensioner CGHS beneficiaries after authentication through verification of valid CGHS Cards.

11. However, pensioner CGHS beneficiaries would make payment for the medical treatment at approved rates as mentioned above and submit the medical reimbursement claim to the Additional Director, CGHS through the CMO in-charge of the CGHS Wellness Centre, where the CGHS Card of the beneficiary is registered.

12. In case of emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), on production of valid ID card, issued by Competent Authority.

13. During the in-patient treatment of the CS (MA) beneficiary, the hospital will not ask the beneficiary or his attendant to purchase separately the medicines/sundries/equipment or accessories from outside and will provide the treatment within the package rate, fixed by the CGHS which includes the cost of all the items.

14. In case of treatment taken in emergency in any non-recognized private hospitals, reimbursement shall be considered by Competent Authority at CGHS prescribed package/rates only.

15. If one or more minor procedures form part of a major treatment procedure, then package charges would be permissible for major procedure and only 50% of charges for minor procedure.

16. Any legal liability arising out of such services shall be the sole responsibility and shall be dealt with by the concerned empanelled hospital. Services will be provided by the hospital as per the terms given above.

17. Ministry of Health and Family Welfare reserves the right to withdraw/cancel the above recognition without assigning any reason.

18. The order takes effect from the date of issue of the O.M. The hospital stands recognized under CS (MA) Rules, 1944 for a period of 2 (two) years from the date of issue of this OM.

19. The authorities of Ratan Jyoti Neeralaya, Gwalior will have to enter into an agreement with the Government of India to the effect that the hospital will charge from the Central Government employees at the rates fixed by the Government and they will have to sign a Memorandum of Understanding (MoU) within a period of 3 months from the date of issue of the above-mentioned OM failing which the hospital will be derecognized (Two original copies of MoU duly signed by the hospital to be sent for acceptance). Subject to above, the hospital can start treating Central Government employees covered under CS (MA) Rules, 1944.

20. A communication in acceptance of the Para. 19 above may be sent to the undersigned within a week from the receipt of this Office Memorandum.

G.I., M.H. & F.W., O.M. No. S. 14021/13/2010-EHS, dated 27-7-2017

**Recognition of Kochar's Hospital, Jalgaon, Maharashtra
for treatment of Central Government employees
under CS (MA) Rules, 1944**

The undersigned is directed to say that the proposal received for recognition of Kochar's Hospital, Jalgaon, Maharashtra for treatment of Central Government employees and their family members under Central Services (Medical Attendance) Rules, 1944 has been examined in this Ministry and found to be in order. It has been decided to grant recognition to the Kochar's Hospital, Jalgaon, Maharashtra under CS (MA) Rules, 1944.

2. The Schedule of charges for the treatment of Central Government employees and the members of their family under the CS (MA) Rules, 1944, will be the rates fixed for CGIIS, Non-NABH, Pune rates. The approved rates are available on the website of CGHS (<http://msotransparent.nic.in/cghsnew/index.asp>) and may be downloaded / printed.

3. The undersigned is further directed to clarify as under:—

(a) "Package Rate" shall mean and include lumpsum cost of in-patient treatment / day care / diagnostic procedure for which a CS (MA) beneficiary has been permitted by the Competent Authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to) — (i) Registration charges, (ii) Admission charges, (iii) Accommodation charges including patient's diet, (iv) Operation charges, (v) Injection charges, (vi) Dressing charges, (vii) Doctor / Consultant visit charges, (viii) ICU/ICCU charges, (ix) Monitoring charges, (x) Transfusion charges, (xi) Anaesthesia charges, (xii) Operation theatre charges, (xiii) Procedural charges / Surgeon's fee, (xiv) Cost of surgical disposables and all

sundries used during hospitalization, (xv) Cost of medicines, (xvi) Related routine and essential investigations, (xvii) Physiotherapy charges, etc., (xviii) Nursing care and charges for its services.

(b) Cost of Implants is reimbursable in addition to package rates as per CGHS ceiling rates for implants.

(c) Treatment charges for new born baby are separately reimbursable in addition to delivery charges for mother.

(d) Kochar's Hospital, Jalgaon, Maharashtra shall not charge more than the package rates fixed for CGHS Non-NABH, Pune rates.

(e) Expenses on toiletries, cosmetics, telephone bills, etc., are not reimbursable and are not included in package rates.

4. Package rates envisage duration of indoor treatment as follows:—

Up to 12 days	for Specialized (Super Specialities) treatment
Up to 7 days	for other Major Surgeries
Up to 3 days	for Laparoscopic Surgeries / normal deliveries
1 day	for day care / Minor (OPD) surgeries

No additional charge on account of extended period of stay shall be allowed if that extension is due to infection or the consequences of surgical procedure or due to any improper procedure and is not justified.

In case, there are no CGHS prescribed rates for any test/procedure, then AIIMS rates are applicable. If there are no AIIMS rates, then reimbursement is to be arrived at by calculating admissible amount item-wise (e.g. room rent, investigations, cost of medicines, procedure charges, etc.) as per approved rates/actually, in case of investigations.

5. (a) CS (MA) beneficiaries are entitled to facilities of private, semi-private or general ward depending on their Basic Pay. The entitlement is as follows:—

Sl. No.	Corresponding Basic Pay drawn by the Officer in Seventh CPC per month	Ward Entitlement
1.	Up to ₹ 47,600	General Ward
2.	₹ 47,601 to 63,100	Semi-Private Ward
3.	₹ 63,101 and above	Private Ward

(b) The package rates given in rate list of CGHS are for semi-private ward.

(c) The package rates prescribed are for semi-private ward. If the beneficiary is entitled for general ward, there will be a decrease of 10%

in the rates; for private ward entitlement, there will be an increase of 15%. However, the rates shall be same for investigation irrespective of entitlement, whether the patient is admitted or not and the test, *per se*, does not require admission.

6. The hospital shall charge from the beneficiary as per the CGHS prescribed rates or its own rate list, whichever is lower. The hospital shall charge CGHS Non-NABH, Pune rates.

7. (a) The maximum room rent admissible for different categories would be:—

General ward	₹ 1,000 per day
Semi-private ward	₹ 2,000 per day
Private ward	₹ 3,000 per day
Day care (6 to 8 Hrs.)	₹ 500 (same for all categories)

(b) Room rent mentioned above at (a) above is applicable only for treatment procedures for which there is no CGHS prescribed package rate.

Room rent will include charges for occupation of bed, diet for the patient, charges for water and electricity supply, linen charges, nursing charges and routine upkeep.

(c) During the treatment in ICCU/ICU, no separate room rent will be admissible.

(d) Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishings like wardrobe, dressing table, bed-side table, sofa set, etc., as well as a bed for attendant. The room has to be air-conditioned.

(e) Semi Private ward is defined as a hospital room where two to three patients are accommodated and which has attached toilet facilities and necessary furnishings.

(f) General ward is defined as hall that accommodates four to ten patients.

(g) Normally, the treatment in higher category of accommodation than the entitled category is not permissible. However, in case of an emergency when the entitled category accommodation is not available, admission in the immediate higher category may be allowed till the entitled category accommodation becomes available. However, if a particular hospital does not have the ward as per entitlement of beneficiary, then the hospital can only bill as per entitlement of the beneficiary even though the treatment was given in higher type of ward.

If, on the request of the beneficiary, treatment is provided in a higher category of ward, then the expenditure over and above entitlement will have to be borne by the beneficiary.

8. In case of non-emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), after the specific treatment/investigation has been advised by Authorized Medical Attendant and on production of valid ID card and permission letter from his/her concerned Ministry/ Department.

9. The hospital shall honour permission letter issued by Competent Authority and provide treatment/investigation facilities as specified in the permission letter.

10. The hospital shall also provide treatment/investigation facilities to the CGHS beneficiaries and their eligible dependent family members at its own rates or rates approved under CS (MA) Rules, whichever is lower. The hospital shall provide treatment to pensioner CGHS beneficiaries after authentication through verification of valid CGHS Cards.

11. However, pensioner CGHS beneficiaries would make payment for the medical treatment at approved rates as mentioned above and submit the medical reimbursement claim to the Additional Director, CGHS through the CMO in-charge of the CGHS Wellness Centre, where the CGHS Card of the beneficiary is registered.

12. In case of emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), on production of valid ID card, issued by Competent Authority.

13. During the in-patient treatment of the CS (MA) beneficiary, the hospital will not ask the beneficiary or his attendant to purchase separately the medicines/sundries/equipment or accessories from outside and will provide the treatment within the package rate, fixed by the CGHS which includes the cost of all the items.

14. In case of treatment taken in emergency in any non-recognized private hospitals, reimbursement shall be considered by Competent Authority at CGHS prescribed package/rates only.

15. If one or more minor procedures form part of a major treatment procedure, then package charges would be permissible for major procedure and only 50% of charges for minor procedure.

16. The hospital shall agree for conducting all investigations / diagnostic tests/consultations, etc. of the Central Civil Services, Group 'A' Officers of age of 40 years and above and other categories of CGHS/CS (MA) beneficiaries as specified by Government from time to time as per prescribed protocol as per Annexure (*not printed*), subject to the condition that the hospital shall not charge more than ₹ 2,000 for conducting the prescribed medical examination of the male officers and ₹ 2,200 for female officers of Central Government who come to the hospital/institution with the requisite permission letter from their Ministry/Department/Competent Authority. The above rates for medical examination are valid until such time when the above rates are revised by the Central Government.

17. Any legal liability arising out of such services shall be the sole responsibility and shall be dealt with by the concerned empanelled hospital. Services will be provided by the hospital as per the terms given above.

18. Ministry of Health and Family Welfare reserves the right to withdraw/cancel the above recognition without assigning any reason.

19. The order takes effect from the date of issue of the O.M. The hospital stands recognized under CS (MA) Rules, 1944 for a period of 4 (four) years from the date of issue of this O.M.

20. The authorities of Kochar's Hospital, Jalgaon, Maharashtra will have to enter into an agreement with the Government of India to the effect that the hospital will charge from the Central Government employees at the rates fixed by the Government and they will have to sign a Memorandum of Understanding (MoU) within a period of 3 months from the date of issue of the above-mentioned O.M. failing which the hospital will be derecognized (Two original copies of MoU printed on the stamp paper and duly signed by the hospital to be sent for acceptance). Subject to above, the hospital can start treating Central Government employees covered under CS (MA) Rules, 1944.

21.-A communication in acceptance of the Para. 20 above may be sent to the undersigned within a week from the receipt of this Office Memorandum.

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*G.I., Addl. Dir., CGHS, Kanpur, O.M. No. 3-2/2014-15/CGHS/
KNP/7601-17, dated 28-7-2017*

**Suspension of empanelment of M/s. Krishna Super Speciality
Hospital, 363 Harrisganj, near Tatmil Chauraha, Kanpur from the
list of Hospitals empanelled under CGHS, Kanpur**

In supersession of this Office Memorandum No. 3-2/2014-15/CGHS/KNP, dated 27-7-2017, it is to say that due to non-receipt of satisfactory reply of our show-cause notice *vide* this Office Memorandum No. 3-2/2014-15/CGHS/KNP/7219-21, dated 6-7-2017 by M/s. Krishna Super Speciality Hospital, 363, Harrisganj, near Tatmil Chauraha, Kanpur in respect of involvement in fraud and manipulation of bills (fake verification made by Hospital Authority in respect of CGHS respective Nodal officers), the undersigned hereby decide to suspend M/s. Krishna Super Speciality Hospital, 363 Harrisganj, near Tatmil Chauraha, Kanpur till further order with immediate effect.

Patients already admitted prior to the issue of the OM shall be provided treatment and discharged within seven days from the date of issue of this OM. However, in respect of the patients who remain admitted beyond seven days, their bills would be accepted only on submission of the proper justification for stay.

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This OM shall be effective from 27th of July, 2017.

Recognition of Sundaram Arulraj Hospitals, Tuticorin for treatment of Central Government employees under CS (MA) Rules, 1944

The undersigned is directed to say that the proposal received for recognition of Sundaram Arulraj Hospitals, Tuticorin for treatment of Central Government employees and their family members under Central Services (Medical Attendance) Rules, 1944 has been examined in this Ministry and found to be in order. It has been decided to grant recognition to the Sundaram Arulraj Hospitals, Tuticorin under CS (MA) Rules, 1944.

2. The Schedule of charges for the treatment of Central Government employees and the members of their family under the CS (MA) Rules, 1944, will be the rates fixed for CGHS, Non-NABH, Thiruvananthapuram rates. The approved rates are available on the website of CGHS (<http://msotransparent.nic.in/cghsnew/index.asp>) and may be downloaded/printed.

3. The undersigned is further directed to clarify as under:—

(a) "Package Rate" shall mean and include lumpsum cost of in-patient treatment/day care/diagnostic procedure for which a CS (MA) beneficiary has been permitted by the Competent Authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to) — (i) Registration charges, (ii) Admission charges, (iii) Accommodation charges including patient's diet, (iv) Operation charges, (v) Injection charges, (vi) Dressing charges, (vii) Doctor/Consultant visit charges, (viii) ICU/ICCU charges, (ix) Monitoring charges, (x) Transfusion charges, (xi) Anaesthesia charges, (xii) Operation theatre charges, (xiii) Procedural charges/Surgeon's fee, (xiv) Cost of surgical disposables and all sundries used during hospitalization, (xv) Cost of medicines, (xvi) Related routine and essential investigations, (xvii) Physiotherapy charges, etc., (xviii) Nursing care and charges for its services.

(b) Cost of Implants is reimbursable in addition to package rates as per CGHS ceiling rates for implants.

(c) Treatment charges for new born baby are separately reimbursable in addition to delivery charges for mother.

(d) Sundaram Arulraj Hospitals, Tuticorin shall not charge more than the package rates fixed for CGHS, Non-NABH, Thiruvananthapuram rates.

(e) Expenses on toiletries, cosmetics, telephone bills, etc., are not reimbursable and are not included in package rates.

4. Package rates envisage duration of indoor treatment as follows:—

- Up to 12 days for Specialized (Super Specialities) treatment
- Up to 7 days for other Major Surgeries
- Up to 3 days for Laparoscopic Surgeries/normal deliveries
- 1 day for day care/Minor (OPD) surgeries.

No additional charge on account of extended period of stay shall be allowed if that extension is due to infection or the consequences of surgical procedure or due to any improper procedure and is not justified.

In case, there are no CGHS prescribed rates for any test/procedure, then AIIMS rates are applicable. If there are no AIIMS rates, then reimbursement is to be arrived at by calculating admissible amount item-wise (e.g. room-rent, investigations, cost of medicines, procedure charges, etc.) as per approved rates/actually, in case of investigations.

5. (a) CS (MA) beneficiaries are entitled to facilities of private, semi-private or general ward depending on their Basic Pay. The entitlement is as follows:—

Sl. No.	Corresponding Basic Pay drawn by the Officer in Seventh CPC per month	Ward Entitlement
1.	Up to ₹ 47,600	General Ward
2.	₹ 47,601 to 63,100	Semi-Private Ward
3.	₹ 63,101 and above	Private Ward

(b) The package rates given in rate list of CGHS are for semi-private ward.

(c) The package rates prescribed are for semi-private ward. If the beneficiary is entitled for general ward, there will be a decrease of 10% in the rates; for private ward entitlement, there will be an increase of 15%. However, the rates shall be same for investigation irrespective of entitlement, whether the patient is admitted or not and the test, *per se*, does not require admission.

6. The hospital shall charge from the beneficiary as per the CGHS prescribed rates or its own rate list, whichever is lower. The hospital shall charge CGHS, Non-NABH, Thiruvananthapuram rates.

7. (a) The maximum room rent admissible for different categories would be:—

General ward	₹ 1,000 per day
Semi-private ward	₹ 2,000 per day
Private ward	₹ 3,000 per day
Day care (6 to 8 Hrs.)	₹ 500 (same for all categories)

(b) Room rent mentioned above at (a) above is applicable only for treatment procedures for which there is no CGHS prescribed package rate.

Room rent will include charges for occupation of bed, diet for the patient, charges for water and electricity supply, linen charges, nursing charges and routine upkeeping.

(c) During the treatment in ICCU/ICU, no separate room rent will be admissible.

(d) Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishings like wardrobe, dressing table, bed-side table, sofa set, etc., as well as a bed for attendant. The room has to be air-conditioned.

(e) Semi Private ward is defined as a hospital room where two to three patients are accommodated and which has attached toilet facilities and necessary furnishings.

(f) General ward is defined as hall that accommodates four to ten patients.

(g) Normally, the treatment in higher category of accommodation than the entitled category is not permissible. However, in case of an emergency when the entitled category accommodation is not available, admission in the immediate higher category may be allowed till the entitled category

accommodation becomes available. However, if a particular hospital does not have the ward as per entitlement of beneficiary, then the hospital can only bill as per entitlement of the beneficiary even though the treatment was given in higher type of ward.

If, on the request of the beneficiary, treatment is provided in a higher category of ward, then the expenditure over and above entitlement will have to be borne by the beneficiary.

8. In case of non-emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), after the specific treatment/investigation has been advised by Authorized Medical Attendant and on production of valid ID card and permission letter from his/her concerned Ministry/Department.

9. The hospital shall honour permission letter issued by Competent Authority and provide treatment/investigation facilities as specified in the permission letter.

10. The hospital shall also provide treatment/investigation facilities to the CGHS beneficiaries and their eligible dependent family members at its own rates or rates approved under CS (MA) Rules, whichever is lower. The hospital shall provide treatment to pensioner CGHS beneficiaries after authentication through verification of valid CGHS Cards.

11. However, pensioner CGHS beneficiaries would make payment for the medical treatment at approved rates as mentioned above and submit the medical reimbursement claim to the Additional Director, CGHS through the CMO in-charge of the CGHS Wellness Centre, where the CGHS Card of the beneficiary is registered.

12. In case of emergencies, the beneficiary shall have the option of availing specific treatment/investigation from any of the empanelled hospitals of his/her choice (provided the hospital is recognized for that treatment procedure/test), on production of valid ID card, issued by Competent Authority.

13. During the in-patient treatment of the CS (MA) beneficiary, the hospital will not ask the beneficiary or his attendant to purchase separately the medicines/sundries/equipment or accessories from outside and will provide the treatment within the package rate, fixed by the CGHS which includes the cost of all the items.

14. In case of treatment taken in emergency in any non-recognized private hospitals, reimbursement shall be considered by Competent Authority at CGHS prescribed package/rates only.

15. If one or more minor procedures form part of a major treatment procedure, then package charges would be permissible for major procedure and only 50% of charges for minor procedure.

16. The hospital shall agree for conducting all investigations / diagnostic tests / consultations, etc. of the Central Civil Services, Group 'A' Officers of age of 40 years and above and other categories of CGHS/CS (MA) beneficiaries as specified by Government from time to time as per prescribed protocol as per Annexure (*not printed*), subject to the condition that the hospital shall not charge more than ₹ 2,000 for conducting the prescribed medical examination of the male officers and ₹ 2,200 for female officers of Central Government who come to the hospital / institution with the requisite permission letter from their Ministry / Department / Competent Authority. The above rates for medical examination are valid until such time when the above rates are revised by the Central Government.

17. Any legal liability arising out of such services shall be the sole responsibility and shall be dealt with by the concerned empanelled hospital. Services will be provided by the hospital as per the terms given above.

18. Ministry of Health and Family Welfare reserves the right to withdraw / cancel the above recognition without assigning any reason.

19. The order takes effect from the date of issue of the O.M. The hospital stands recognized under CS (MA) Rules, 1944 for a period of 4 (four) years from the date of issue of this OM.

20. The authorities of Sundaram Arulthaj Hospitals, Tuticorin will have to enter into an agreement with the Government of India to the effect that the hospital will charge from the Central Government employees at the rates fixed by the Government and they will have to sign a Memorandum of Understanding (MoU) within a period of 3 months from the date of issue of the above-mentioned OM failing which the hospital will be derecognized (Two original copies of MoU printed on the stamp paper and duly signed by the hospital to be sent for acceptance). Subject to above, the hospital can start treating Central Government employees covered under CS (MA) Rules, 1944.

21. A communication in acceptance of the Para. 20 above may be sent to the undersigned within a week from the receipt of this Office Memorandum.

G.I., PFRDA, Notfn. No. PFRDA/12/RGL/139/8, dated 10-8-2017

**Pension Fund Regulatory and Development Authority
(Exits and Withdrawals under the National Pension System)
(First Amendment) Regulations, 2017**

In exercise of the powers conferred by sub-section (1) of Section 52 read with sub-clause (g), (h), and (i) of sub-section 2 of Section 52 of the Pension Fund Regulatory and Development Authority Act, 2013 (Act No. 23 of 2013), the Pension Fund Regulatory and Development Authority hereby makes the following regulations to amend the Pension Fund Regulatory and Development Authority (Exits and Withdrawals under the National Pension System) Regulations, 2015 namely:

1. These regulations may be called the Pension Fund Regulatory and Development Authority (Exits and Withdrawals under the National Pension System) (First Amendment) Regulations, 2017.
2. These shall come into force on the date of their publication in the official Gazette.
3. In the Pension Fund Regulatory and Development Authority (Exits and Withdrawals under the National Pension System) Regulations, 2015:

(I) In Regulation 2, in sub-regulation (1), the following new Clauses shall be *added* after sub-clause (j)

(k) "Exit" for the purpose of this regulation shall mean closure of individual pension account of the subscriber under National Pension System, upon and on the date of happening of any of the following events, as may be applicable:—

- (i) a subscriber having superannuated / retired from employment, as per the terms of such employment;
- (ii) a subscriber having attained the age of sixty years, and where so specifically permitted has not exercised a choice in writing to continue to remain subscribed to such system, till such further period as is permissible, with or without making contributions;
- (iii) death of the subscriber before attaining the age of superannuation, or the age of sixty years, or in cases where an option has been exercised by subscriber to continue to remain subscribed to a certain permissible time period, death before expiry of such period;

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- (iv) voluntary closure of the account by the subscriber, in cases where so permitted and on the date on which such closure is effected in the system;

Provided that a subscriber shall be deemed to have exited from National Pension System, in accordance with sub-clauses (i) to (iv) notwithstanding that no claims have been received by or on behalf of the subscriber or such claims having being received are pending settlement.

Provided further that where a subscriber ceases to be in employment other than retirement or superannuation, it shall not be treated as exit and he shall have the option to continue his individual pension account, if available under new employment or as voluntarily available to citizens, unless the subscriber prefers a claim as provided under these regulations for withdrawal of benefits.

(1) The expression "defer" or "deferment" wherever used in these regulations shall mean the postponement or deferment of claims for receiving benefits admissible to a subscriber upon exit from National Pension System.

(II) Regulation 3 shall be substituted as follows :—

3. *Exit from National Pension System for Government sector subscribers.*—A subscriber under the Government sector shall exit from the National Pension System in any of the manners specified hereunder, namely:—

(a) Where the subscriber who, upon attaining the age of superannuation as prescribed by the service rules applicable to him or her, retires, then at least forty per cent out of the accumulated pension wealth of such subscriber shall be mandatorily utilized for purchase of annuity providing for a monthly or any other periodical pension and the balance of the accumulated pension wealth, after such utilization, shall be paid to the subscriber in lumpsum or he shall have a choice to collect such remaining pension wealth in accordance with the other options specified by the Authority from time to time, in the interest of the subscribers:

Provided that,—

- (i) the following shall be the default annuity contract that will be applicable and wherein the annuity contract shall provide for annuity for life of the subscriber and his or her spouse (if any) with provision for return of purchase price of the annuity and upon the demise of such subscriber, the annuity be re-issued to the family members in the order specified hereunder, at a premium rate prevalent at the time of purchase of such annuity by utilizing the purchase price required to be returned under

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the annuity contract (until all the family members in the order specified below are covered) :

- (a) living dependent mother of the deceased subscriber;
- (b) living dependent father of the deceased subscriber.

After the coverage of all the family members specified above, the purchase price shall be returned to the surviving children of the subscriber and in the absence of children, the legal heirs of the subscriber, as may be applicable. In the absence of or non-availability of such a default annuity for any reason, the subscriber shall be required to exercise the option for purchase of such annuity of his choice, within the then annuity types or contracts made available by the annuity service providers empanelled by the Authority.

Further, a subscriber who wishes to opt out of the default option mentioned above and wishes to choose the annuity contract of his choice from the available annuity types or contracts with the annuity service providers, shall be required to specifically opt for such an option.

- (ii) where the subscriber does not desire to withdraw the balance amount, after purchase of mandatory annuity, such subscriber shall have the option to defer the withdrawal of the lumpsum amount until he or she attains the age of seventy years, provided the subscriber intimates his or her intention to do so in writing, not less than fifteen days prior to his attaining the age of superannuation, to the Central Recordkeeping Agency or National Pension System Trust or any other approved intermediary or entity authorized by the Authority, in the specified form or in any other manner specified by the Authority;
- (iii) where the subscriber desires to defer the purchase of annuity, he or she shall have the option to do so for a maximum period of three years from the date of attainment of age of superannuation, provided the subscriber intimates his or her intention to do so in writing in the specified form or in any other manner approved by the Authority, at least fifteen days prior to the attainment of age of superannuation, to the Central Recordkeeping Agency or National Pension System Trust or an intermediary or entity authorized by the Authority for this purpose. It shall be a condition precedent to opt for such deferment of annuity purchase, that in case if the death of the subscriber occurs before such due date of purchase of an annuity after the deferment, the annuity shall mandatorily be purchased by the spouse (if any) providing for annuity for life of the spouse with provision for return of purchase price of the annuity and upon the demise of such spouse, be re-issued to the family members in the order of preference

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provided hereunder, at a premium rate prevalent at the time of purchase of the annuity, utilizing the purchase price required to be returned under the contract (until all the members given below are covered):—

- (a) living dependent mother of the deceased subscriber ;
- (b) living dependent father of the deceased subscriber.

After the coverage of all such members, the purchase price shall be returned to the surviving children of the subscriber and in absence of children to the legal heirs of the subscriber as applicable;

- (iv) where the subscriber desires to defer the withdrawal of benefits available under National Pension System, the expenses, maintenance charges and fee payable under the National Pension System in respect of the individual pension account/ Permanent Retirement Account, shall continue to remain applicable;
- (v) where the accumulated pension wealth in the Permanent Retirement Account of the subscriber is equal to or less than a sum of two lakh rupees, or a limit as specified by the Authority, basing on the instructions issued by the appropriate regulator on the minimum value of annuities to be made available by the life insurers, the subscriber shall have the option to withdraw the entire accumulated pension wealth without purchasing annuity and upon such exercise of this option, the right of such subscriber to receive any pension or other amount under the National Pension System or from the Government or employer, shall extinguish;
- (vi) where the subscriber desires to continue in the National Pension System and contribute to his retirement account beyond the age of sixty years or the age of superannuation, he or she shall have the option to do so by giving in writing or in such form as may be specified, and up to which he would like to contribute to his individual pension account but not exceeding seventy years of age. Such option shall be exercised at least fifteen days prior to the age of attaining sixty years or age or superannuation, as the case may be, to the central Recordkeeping Agency or the National Pension System Trust or any other intermediary or entity authorized by the Authority for the purpose. Upon exercise of the option, the other options of deferment of benefits shall not be available to such a subscriber.

Notwithstanding exercise of such option, the subscriber may exit at any point of time from National Pension System, by submitting a request to Central Recordkeeping Agency or the

National Pension System Trust or any intermediary or entity authorized by the Authority for the purpose ;

(b) where the subscriber who, before attaining the age of superannuation prescribed by the service rules applicable to him or her, voluntarily retires or exits, then at least eighty per cent. out of the accumulated pension wealth of the subscriber shall mandatorily be utilized for purchase of annuity and the balance of the accumulated pension wealth, after such utilization, shall be paid to the subscriber in lumpsum or he shall have a choice to collect such remaining pension wealth in accordance with the other options specified by the Authority from time to time, in the interest of the subscribers:

Provided that such annuity contract shall provide for annuity for life of the subscriber and his or her spouse (if any) with provision for return of purchase price of the annuity and upon the demise of such subscriber, the annuity be re-issued to the family members in the order specified hereunder at a premium rate prevalent at the time of purchase of the annuity, utilizing the purchase price required to be returned under the annuity contract (until all the members given below are covered)

- (i) living dependent mother of the deceased subscriber ;
- (ii) living dependent father of the deceased subscriber.

After the coverage of all such members, the purchase price shall be returned to the surviving children of the subscriber and in the case of absence of children, to the other legal heirs of the subscriber, as may be applicable. In the absence of or non-availability of such a default annuity for any reason, the subscriber shall be required to exercise the option for purchase of such annuity of his choice, within the then annuity types or contracts made available by the annuity service providers empanelled by the Authority.

Further, a subscriber who wishes to opt out of the option mentioned above and wishes to choose the annuity contract of his choice, from the available annuity types or contracts with the annuity service providers, shall be required to specifically opt for such an option.

Provided that if the accumulated pension wealth of the subscriber is more than one lakh rupees or a limit to be specified by the Authority for the purpose but the age of the subscriber is less than the minimum age required for purchasing any annuity from any of the empanelled annuity service providers as chosen by such subscriber, such subscriber shall continue to be subscribed to the National Pension System, until he or she attains the age of eligibility for purchase of any annuity:

Provided further that if the accumulated pension wealth of the subscriber is equal to or less than one lakh rupees or a limit to be specified by the Authority basing on the instructions issued by the appropriate

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regulator on the minimum value of annuities to be made available by the life insurers, such subscriber shall have the option to withdraw the entire accumulated pension wealth without purchasing any annuity and upon such exercise of this option the right of the subscriber to receive any pension or other amounts under the National Pension System shall extinguish and any such exercise of this option by the subscriber, before the notification of this provision, shall be deemed to have been made in accordance with this regulation;

(c) where the subscriber who, before attaining the age of superannuation, dies, then at least eighty per cent out of the accumulated pension wealth of the subscriber shall be mandatorily utilized for purchase of annuity and balance pension wealth shall be paid as lumpsum or in another manner from among the options made available by the Authority from time to time to the nominee or nominees or legal heirs, as the case may be, of such subscriber:

Provided that,—

(i) such annuity contract shall provide for annuity for life of the spouse of the subscriber (if any) with provision for return of purchase price of the annuity and upon the demise of such spouse be re-issued to the family members in the order specified hereunder at the premium rate prevalent at the time of purchase of the annuity, utilizing the purchase price required to be returned under the contract (until all the members given below are covered):—

- (a) living dependent mother of the deceased subscriber ;
- (b) living dependent father of the deceased subscriber.

After the coverage of all such members, the purchase price shall be returned to the surviving children of the subscriber and in absence of children, the legal heirs of the subscriber as applicable. In the absence of or non-availability of such a default annuity for any reason, the subscriber shall be required to exercise the option for purchase of such annuity of his choice, within the then annuity types or contracts made available by the annuity service providers empanelled by the Authority.

(ii) Provided further that if the accumulated pension wealth in the permanent retirement account of the subscriber at the time of his death is equal to or less than two lakh rupees or a limit to be specified by the Authority, basing on the instructions issued by the appropriate regulator on the minimum value of annuities to be made available by the life insurers, the nominee or legal heirs as the case may be, shall have the option to withdraw the entire accumulated pension wealth without requiring to purchase any annuity and upon such exercise of this option, the right of the family members to receive any pension or other amounts under the National Pension System shall extinguish;

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(III) (i) Proviso (i) to sub-clause (a) of Regulation 4 shall be substituted as follows:—

Provided that,—

(i) where the subscriber desires to continue in the National Pension System and contribute to his retirement account beyond the age of sixty years or the age of superannuation, he or she shall have the option to do so by giving in writing or in such form as may be specified of the age not exceeding seventy years and up to which he would like to contribute to his individual pension account. Such option shall be exercised at least fifteen days prior to attaining the age of sixty years or age of superannuation, as the case may be, to the Central Recordkeeping Agency or the National Pension System Trust or any other intermediary or entity authorized by the Authority for the purpose. Upon exercise of the option, the other options of deferment of benefits shall not be available to such a subscriber.

Notwithstanding exercise of such option, the subscriber may exit at any point of time from the National Pension System, by submitting a request to National Pension System Trust or any intermediary or entity authorized by the Authority for the purpose;

(ii) Proviso to sub-clause (b) of Regulation 4 shall be substituted as follows:—

Provided further that if the accumulated pension wealth in the individual pension account of the subscriber is equal to or less than one lakh rupees, or a limit to be specified by the Authority, basing on the instructions issued by the appropriate regulator on the minimum value of annuities to be made available by the life insurers, such subscriber shall have the option to withdraw the entire accumulated pension wealth without requiring to purchase any annuity;

(iii) Proviso (ii) to sub-clause (c) of Clause (ii) of Regulation 4 shall be substituted as follows:—

(i) in case the nomination is not registered by the deceased subscriber before his death, the accumulated pension wealth shall be paid to the family members on the basis of the legal heir certificate issued by the Competent Authorities of the State concerned or the succession certificate issued by a Court of competent jurisdiction.

(IV) Sub-clause (b) of Regulation 5 shall be substituted as follows:—

(b) at any time, before attaining the age of sixty years, subject however that at least eighty per cent out of the accumulated pension wealth shall be mandatorily utilized for purchase of annuity and the balance of the accumulated pension wealth, after such utilization shall be paid to the subscriber in lumpsum or he shall have a choice to collect such remaining

pension wealth in accordance with the other options specified by the Authority from time to time, in the interest of the subscribers;

Provided that for a Swavalamban subscriber, the annuity purchased by utilizing the mandatory minimum of eighty per cent out of the accumulated pension wealth ought to yield at least a monthly annuity or pension of one thousand rupees per month, failing which the entire accumulated pension wealth shall be annuitized in such a manner so as to yield at least a monthly annuity or pension of one thousand rupees and balance if any, thereafter shall be paid as lumpsum to the subscriber. However there shall be no implicit or explicit guarantee that the annuity purchased even with entire accumulated pension wealth would yield a monthly annuity or pension of one thousand rupees;

Provided that subject to the provisions of this clause, where the accumulated pension wealth does not exceed one lakh rupees or a limit to be specified by the Authority basing on the instructions issued by the appropriate regulator on the minimum value of annuities to be made available by the life insurers, the whole of the pension wealth up to the limit so specified shall be paid to the subscribers who have not availed any Swavalamban co-contribution, without any requirement of annuitization and further this provision shall be applicable to a subscriber who has availed a Swavalamban co-contribution only if such subscriber has continued in the scheme for a minimum period of twenty five years;

Provided further that the migration of Swavalamban subscriber or subscribers to any other pension scheme of Government of India and as approved by the Authority shall not be deemed as an exit and withdrawal for the purposes of these regulations

(V) Regulation 6 shall be substituted with the following :—

6. *Conditions to apply for exit and withdrawal.*— A subscriber registered under the National Pension System shall not exit therefrom, and no withdrawal from the accumulated pension wealth in the Tier-1 of the Permanent Retirement Account of such subscriber shall be permitted, except in the manner so specified under Regulations 3, 4, 5 and 8 and further as mentioned in these provisions, namely:—

(ii) Sub-regulation (e) shall be substituted with the following:—

(e) If the subscriber or the family members of the deceased subscriber, upon his death, avails the option of additional relief on death or disability provided by the Government or employer, the Government or employer shall have the right to adjust or seek transfer of the entire accumulated pension wealth of the subscriber to itself. The subscriber or family members of the subscriber

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availing such benefit shall specifically and unconditionally agree and undertake to transfer the entire accumulated pension wealth to the Government or employer, in lieu of enjoying or obtaining such additional reliefs like family pension or disability pension or any other pensionary benefit from such Government or employer. With the release of such family pension to the eligible family members of the deceased subscriber, the right to claim any benefits under the National Pension System, by any person shall extinguish thereupon including the rights of the nominee as recorded for the purpose of receiving benefits under National Pension System.

(iii) Sub-regulation (h) shall be *substituted* with the following:—

(h) Upon exit of a subscriber from Tier-I of the National Pension System, the Tier-II account of the subscriber shall also be simultaneously closed and amounts under the said account shall be paid to the subscriber or his nominees or legal heirs, as the case may be.

(ii) Under Regulation 6, new sub-regulation (i) after sub-regulation (h) shall be *added* as follows:—

(i) With respect to subscribers who have not submitted the withdrawal application as is required under Regulation 7 and within one month from the date of attainment of the age of sixty years or the age of normal superannuation, as the case may be, for withdrawal of benefits upon exit from National Pension System, the accumulated pension wealth in the account of such subscriber (both under Tier I and Tier II) would be monetized and kept separately as per the guidelines or directions issued by the Authority for the said purpose. The income earned from such safe keeping of the monetized accumulated pension wealth of the subscriber shall form part of the benefits that the subscriber is entitled under the National Pension System. This provision shall apply in respect of such subscribers who have deferred the withdrawal of benefits or have partly withdrawn the benefits and have not taken the steps to completely withdraw the benefits as is required under the regulations and or in the guidelines or directions issued by the Authority for the purpose.

(iii) Under Regulation 6, new sub-regulation (j) after sub-regulation (i) shall be *added* as follows:—

(j) With respect to settlement of claims arising out of the accumulated pension corpus of deceased subscribers, where no valid nomination as specified in these regulations exist on the date of death, the Authority may issue suitable directions in the interest of subscribers for settlement of such claims in favour of the family members of the deceased subscriber, up to a specified limit, by requiring such heirs to submit such documents as may be specified.

(V) Regulation 7 shall be substituted as follows:—

7. *Conditions of withdrawals under National Pension System.*— A subscriber shall submit the withdrawal application along with the required documents, for the purpose of withdrawing the benefits upon exit as provided in these regulations, on or before the expected date of exit from the National Pension System to the National Pension System Trust or the Central Recordkeeping Agency, acting on behalf of it or any other entity authorized by the Authority. Central Recordkeeping Agency or National Pension System Trust may on receipt of such an application for exit or withdrawal from a subscriber in the specified form and subject to fulfilment of conditions so specified, may allow exit or withdrawals from the National Pension System in the mode and manner permitted under these regulations and guidelines, circulars, orders or notifications issued by the Authority for the purpose:

(VI) Regulation 8 shall be substituted as follows:—

8. *The following withdrawals shall be permitted under National Pension System.*— (1) A partial withdrawal of accumulated pension wealth of the subscriber, not exceeding twenty-five per cent of the contributions made by the subscriber and excluding contributions made by employer, if any, at any time before exit from National Pension System subject to the terms and conditions, purpose, frequency and limits specified below:—

(A) *Purpose:* A subscriber on the date of submission of the withdrawal form, shall be permitted to withdraw not exceeding twenty-five per cent of the contributions made by such subscriber to his individual pension account, for any of the following purposes only:—

- (a) for Higher education of his or her children including a legally adopted child;
- (b) for the marriage of his or her children, including a legally adopted child;
- (c) for the purchase or construction of a residential house or flat in his or her own name or in a joint name with his or her legally wedded spouse. In case, the subscriber already owns either individually or in the joint name a residential house or flat, other than ancestral property, no withdrawal under these regulations shall be permitted;
- (d) for treatment of specified illnesses: if the subscriber, his legally wedded spouse, children, including a legally adopted child or dependent parents suffer from any specified illness, which shall comprise of hospitalization and treatment in respect of the following diseases: —
 - (i) Cancer;
 - (ii) Kidney Failure (End Stage Renal Failure);

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- (iii) Primary Pulmonary Arterial Hypertension;
 - (iv) Multiple Sclerosis;
 - (v) Major Organ Transplant;
 - (vi) Coronary Artery Bypass Graft;
 - (vii) Aorta Graft Surgery;
 - (viii) Heart Valve Surgery;
 - (ix) Stroke;
 - (x) Myocardial Infarction;
 - (xi) Coma;
 - (xii) Total blindness;
 - (xiii) Paralysis;
 - (xiv) Accident of serious / life threatening nature.
 - (xv) any other critical illness of a life threatening nature as stipulated in the circulars, guidelines or notifications issued by the Authority from time to time.

(B) *Limits:* The permitted withdrawal shall be allowed only if the following eligibility criteria and limit for availing the benefit are complied with by the subscriber:

- (a) the subscriber shall have been in the National Pension System at least for a period of three years from the date of his or her joining;
- (b) the subscriber shall be permitted to withdraw accumulations not exceeding twenty-five per cent of the contributions made by him or her and standing to his or her credit in his or her individual pension account, as on the date of application for withdrawal;

(C) *Frequency:* The subscriber shall be allowed to withdraw only a maximum of three times during the entire tenure of subscription under the National Pension System. The request for withdrawal shall be submitted by the subscriber, along with relevant documents to the Central Recordkeeping Agency or the National Pension System Trust, as may be specified, for processing of such withdrawal claim through their nodal office. Provided that where a subscriber is suffering from any illness, specified in sub-clause (d), the request for withdrawal may be submitted, through any family member of such subscriber.

(2) A subscriber having a valid and active Tier-II account of the Permanent Retirement Account can withdraw the accumulated wealth either in full or part, at any time by applying for such withdrawal, on such application form and in such mode and manner, as may be specified by the Authority in this behalf. There shall be no limit on such withdrawals till

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The account has sufficient amount of accumulated pension wealth to take care of the applicable charges and the withdrawal amount.

Provided that the Tier-II account shall stand automatically closed at the time of exit of the subscriber from the National Pension System, even if an application so specified for the purpose has not been received from the subscriber, and the accumulated wealth in such account shall be transferred to the bank account provided by the subscriber, while submitting his application for exit from the National Pension System.

(VII) Regulation 9 shall be *substituted* as follows:—

9. *Withdrawal process.*—(1) The National Pension System Trust or any other intermediary or entity authorized by the Authority for the said purpose shall be responsible for processing, authorizing and approving the withdrawal and exit claims lodged by the subscriber in accordance with the provisions of the Act, regulations, directions, guidelines issued by the Authority and the Pension Fund Regulatory and Development Authority (National Pension System Trust) Regulations, 2015, where applicable. The National Pension System Trust shall frame and issue suitable operational processes including online processes or guidelines including the exit or withdrawal forms for facilitating withdrawals and Exit of subscribers from National Pension System after taking due approval from the Authority.

(VIII) Sub-regulation (1) of Regulation 10 shall be *substituted* as follows:—

10. *Conditions of annuity purchase upon exit.*—(1) The subscriber, at the time of exit, shall mandatorily purchase an annuity providing for a monthly or periodical annuity or pension as specified in these regulations, excepting those cases where exempted or provided otherwise and to the extent so exempted. Such annuity shall be purchased from an annuity service provider who is empanelled by the Authority.

(IX) In Regulation 32, in the proviso, the following new sub-clause (xii) shall be *added* after sub-clause (xi)—

(xii) In respect of subscribers covered under sub-clause (c) of Regulation 3 and sub-clause (c) of Regulation 4, where no valid nomination exists in accordance with these regulations, at the time of exit of such subscriber on account of death, the nomination, if any existing in the records of such subscriber with his or her employer for the purpose of receiving other admissible terminal benefits shall be treated as nomination exercised for the purposes of receiving benefits under the National Pension System. The employer shall send a confirmation of such nomination in its records, to the National Pension System Trust or the Central Recordkeeping

Agency, while forwarding the claim for processing.

(X) Regulations 33 and 34 shall be *omitted*.

(XI) Regulation 35 shall be *substituted* as follows:—

35. *Providing bank account details.*— A subscriber seeking benefits upon exit or withdrawals as permitted under these regulations shall provide the Bank details mandatorily apart from details or copy of Aadhar card issued by Unique Identification Authority of India or details of or copy of Permanent Account Number (PAN) card issued by Income Tax Department, in order to have the facility of credit of the eligible benefits directly in to the subscriber's or claimants Bank account as applicable.

(XII) Regulation 37 shall be *substituted* as follows: —

37. *Stoppage of last month's deductions by employer.*— The monthly contribution consisting of both the employer and employee, as may be applicable and that is required to be deducted for crediting to the subscribers account under the National Pension System by the employers from the salary of such subscriber shall be stopped at least one month prior to the date of superannuation. The employer shall pay such eligible contributions directly to the employee subscriber along with the monthly salary or remuneration that such subscriber is eligible to receive from the employer.

(XIII) Regulation 39 shall be *substituted* as follows:—

39. *Power of the Authority to issue directions and clarifications.*—

(1) The Authority shall have the power to issue necessary directions, restricting the provisions relating to withdrawals and exit, as the case may be, under these regulations for complying with any requirements to move from any other pension or superannuation schemes or funds to the National Pension System.

(2) The Authority shall also have the power to issue clarifications and guidelines in order to remove any difficulties in the application or interpretation of these regulations or any provision thereof.

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G.I., Dept. of Per. & Trg., O.M. No. 13/02/2017-Estt. (Pay-I),
dated 27-7-2017

**Availability of option for fixation of pay on promotion from
the Date of Next Increment (DNI) in the lower post and
method of fixation of pay from DNI, if opted for,
in context of CCS (RP) Rules, 2016**

Prior to implementation of VI CPC Report, the pay fixation on promotion was governed by provisions of FR 22 (I) (a) (1). In Sixth CPC context, the first part of FR 22 (I) (a) (1) was replaced by Rule 13 of CCS (RP) Rules, 2008. Similarly, consequent upon implementation of CCS (RP) Rules, 2016 in Seventh CPC context, the pay fixation on promotion is regulated by the provisions of Rule 13 of CCS (RP) Rules, 2016. This rule regulates pay fixation on promotion if the same is opted by the employee from the date of promotion itself. The issue of relevancy of provisions of FR 22 (I) (a) (1) as well as the methodology of fixation of pay on promotion to a post carrying duties and responsibilities of greater importance, of a Government servant in case he opts for pay fixation from the Date of Next Increment (DNI) has been considered in this Department.

2. In this context, proviso under FR 22 (I) (a) (1) *inter alia* provides that the Government servant (other than those appointed on deputation basis to *ex cadre* post or on *ad hoc* basis or on direct recruitment basis) shall have the option, to be exercised within one month from the date of promotion, to have the pay fixed under this rule from the date of such promotion or to have the pay fixed from the date of accrual of next increment in the scale of the pay in lower grade.

3. After due consideration in this matter, the President is pleased to decide as follows:—

- (i) FR 22 (I) (a) (1) holds good with regard to availability of option clause for pay fixation, to a Government servant holding a post, other than a tenure post, in a substantive or temporary or officiating capacity, who is promoted or appointed in a substantive, temporary or officiating capacity, as the case may be, subject to the fulfilment of the eligibility conditions as prescribed in the relevant Recruitment Rules, to another post carrying duties or responsibilities of greater importance than those attaching to the post held by him/her. Such Government servant may opt to have his/her pay fixed from the Date of his/her Next Increment (either 1st July or 1st January, as the case may be) accruing in the Level of the post from which he/she is promoted, except in cases of appointment on deputation basis to an *ex cadre* post or on direct recruitment basis or appointment/promotion on *ad hoc* basis.
- (ii) In case, consequent upon his/her promotion, the Government servant opts to have his/her pay fixed from the date of his/her next increment (either 1st July or 1st January, as the case may be) in the Level of the post from which Government servant is promoted, then, from the date of promotion till his/her DNI, the Government servant shall be placed at the next higher cell in the Level of the post to which he/she is promoted.

Illustration:

1.	Level in the revised pay structure: Level 4	Pay Band	₹ 5,200-20,200				
2.	Basic Pay in the revised pay structure : ₹ 29,600	Grade Pay	1,800	1,900	2,000	2,400	2,800
3.	Granted promotion in Level 5	Levels	1	2	3	4	5
4.	Pay in the upgraded Level i.e. Level 5 : 30,100 (next higher to 29,600 in Level 5)	1	18,000	19,900	21,700	25,500	29,200
5.	Pay from the date of promotion till DNI: ₹ 30,100	2	18,500	20,500	22,400	26,300	30,100
		3	19,100	21,100	23,100	27,100	31,000
		4	19,700	21,700	23,800	27,900	31,900
		5	20,300	22,400	24,500	28,700	32,900
		6	20,900	23,100	25,200	29,600	33,900
		7	21,500	23,800	26,000	30,500	34,900
		8	22,100	24,500	26,800	31,400	35,900
		9	22,800	25,200	27,600	32,300	37,000
		10	23,500	26,000	28,400	33,300	38,100

(iii) Subsequently, on DNI in the Level of the post to which Government servant is promoted, his/her Pay will be re-fixed and two increments (one accrued on account of annual increment and the second accrued on account of promotion) may be granted in the Level from which the Government servant is promoted and he/she shall be placed, at a Cell equal to the figure so arrived, in the Level of the post to which he/she is promoted; and if no such Cell is available in the Level to which he/she is promoted, he/she shall be placed at the next higher Cell in that Level.

Illustration:

1. Level in the revised pay structure: Level 4	2. Basic Pay in the revised Pay Structure : ₹ 29,600	3. Granted promotion in Level 5	4. Pay from the date of promotion till DNI: ₹ 30,100	5. Re-fixation on DNI: Pay after giving two increment in Level 4: ₹ 31,400	6. Pay in the upgraded Level i.e. Level 5 : ₹ 31,900 (either equal to or next higher to ₹ 31,400 in Level 5)	Pay Band ₹ 5,200-20,200					
						Grade Pay	1,800	1,900	2,000	2,400	2,800
						Levels	1	2	3	4	5
						1	18,000	19,900	21,700	25,500	29,200
						2	18,500	20,500	22,400	26,300	30,100
						3	19,100	21,100	23,100	27,100	31,000
						4	19,700	21,700	23,800	27,900	31,900
						5	20,300	22,400	24,500	28,700	32,900
						6	20,900	23,100	25,200	29,600	33,900
						7	21,500	23,800	26,000	30,500	34,900
						8	22,100	24,500	26,800	31,400	35,900
						9	22,800	25,200	27,600	32,300	37,000
						10	23,500	26,000	28,400	33,300	38,100

(iv) In such cases where Government servant opts to have his/her pay fixed from the date of his/her next increment in the Level of the post from which he/she is promoted, the next increment as well as Date of Next Increment (DNI) will be regulated accordingly.

4. It is further reiterated that in order to enable the officials to exercise the option within the time-limit prescribed, the option clause for pay fixation on promotion with effect from date of promotion/DNI shall invariably be incorporated in the promotion/appointment order so that there are no cases of delay in exercising the options due to administrative lapse.

5. In so far as their application to the employees belonging to the Indian Audit and Accounts Department is concerned, these orders issue in consultation with the Comptroller and Auditor-General of India.

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G.I., Dept. of Per. & Trg., O.M. No. F. No. 12/3/2017-Estt. (Pay-I),
dated 28-7-2017

**Guidelines for fixation of pay of candidates working in
Public Sector Undertakings, etc., recommended for appointment
by the Commission by method of recruitment by selection**

Reference is invited to this Department's O.Ms. No. 12/1/88-Estt. (Pay-I), dated 7-8-1989 (*Sl. No. 233 of Swamy's Annual, 1989*), O.M. No. 12/1/96-Estt. (Pay-I), dated 10-7-1998 (*Sl. No. 168 of Swamy's Annual, 1998*) and O.M. No. 12/3/2009-Pay-I, dated 30-3-2010 (*Sl. No. 91 of Swamy's Annual, 2010*) whereby guidelines for fixation of pay of candidates working in Public Sector Undertakings etc., on their appointment as direct recruits on selection through a properly constituted authority including departmental authorities, were issued.

2. Subsequent to the implementation of the recommendations of the Seventh CPC and assuance of CCS (RP) Rules, 2016, the system of running Pay Bands and Grade Pays have been replaced by Pay Matrix. Accordingly, in partial modification of this Department's O.M. No. 12/1/88-Estt. (Pay-I), dated 7-8-1989, O.M. No. 12/1/96-Estt. (Pay-I), dated 10-7-1998 and O.M. No. 12/3/2009-Pay-I, dated 30-3-2010 referred to above, the method of pay fixation in respect of those appointed on or after 1-1-2016 will be as under:

"In case of candidates working in Public Sector Undertakings (PSUs), Universities, Semi-Government Institutions or Autonomous Bodies, who are appointed to a post as direct recruits on or after 1-1-2016 on selection through interview by a properly constituted agency including Departmental Authorities making recruitment directly, their initial Basic Pay shall be fixed at a stage in the Level of the post so that the pay and Dearness Allowance as admissible in the Government, protects the pay and Dearness Allowance drawn in the PSU, etc. If there is no such stage in the post, the pay shall be fixed at the stage next below that pay. If the maximum pay in the Level applicable to the post in which the person is appointed is less than such pay arrived at, his initial Basic Pay shall be fixed at such maximum pay of the post. Similarly, if the minimum pay in the Level applicable to the post in which such person is appointed is more than such pay arrived at, his initial Basic Pay shall be fixed at such minimum pay of the post. The pay fixed under this formulation will not exceed the highest cell value applicable for the Level of the post in the Pay Matrix, to which he is appointed."

3. The conditions for admissibility of pay protection shall be the same as stipulated in this Department's OMs, dated 7-8-1989 and 10-7-1998 referred to above.

4. In so far as persons serving in the Indian Audit and Accounts Department are concerned, these orders are issued with the concurrence of the Comptroller and Auditor-General of India.

5. These orders will be applicable with effect from 1-1-2016.

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Recommendations of the Seventh Central Pay Commission (CPC)
— Bunching of stages in the revised pay structure under Central
Civil Services (Revised Pay) Rules, 2016

With reference to the subject mentioned above and in continuation of this Department's OM of even number, dated 7-9-2016 (Sl. No. 98 of Swamy's Annual, 2016) and 13-6-2017 (Sl. No. 120 of Swamysnews, July, 2017) detailed instructions are hereby being issued on the application of the benefit on account of bunching of stages while fixing the pay in the revised pay structure as a response to a large number of references received from Ministries/Departments.

2. The provisions giving effect to the recommendations of the Seventh CPC on extending the benefit on account of bunching were notified vide DoE OM, dated 7-9-2016. Benefits on account of bunching have been extended during the initial fixation of pay in the revised pay structure while implementing the recommendations of earlier CPCs also. Bunching occurs in the fixation of pay when the pay at two or more consecutive stages in a Pay Scale/Grade Pay in the pre-revised scale get fixed at the same stage in the corresponding Pay Scale/Level in the revised pay structure.

3. The modalities of determining the extent of bunching and the nature of benefits to be extended on account thereof, based on the recommendations of the CPCs, have differed across different Pay Commission periods. While the Fifth CPC recommended that benefits be extended when more than four stages get bunched, the Sixth CPC recommended that benefits be extended when two or more stages get bunched. The Fitment Tables drawn by the Sixth CPC and notified by the Government subsequently provided for the benefit of bunching only when more than two stages were bunched. As regards the benefits to be extended on account of bunching, the Fifth CPC recommended benefit of one increment for every four consecutive stages bunched, the Sixth CPC recommended benefit of one increment for every two consecutive pay stages bunched. For HAG scales, however, benefit of one increment was given at each of the pay stages in the Sixth CPC pay structure.

4. In terms of the DoE OM, dated 7-9-2016 based on the Seventh CPC recommendations, bunching occurs when two or more stages get bunched and benefit of one increment is to be given for every two stages bunched. These provisions are to be applied while revising the pay from the Sixth CPC regime to the Seventh CPC regime. In the Sixth CPC pay structure, about 35 pay scales existing in the Fifth CPC pay structure were replaced by a system of running Pay Bands recommended by the Sixth CPC. The Sixth CPC pay structure consisted of 19 grades spread across four distinct Pay Bands and 4 distinct scales including two fixed scales. The Sixth pay structure being replaced by the Seventh CPC recommended Pay Matrix, thus, consists of 4 Pay Bands with 15 Levels of Grade Pay, along with 4 stand alone scales, viz., HAG scale, HAG+ scale, Apex scale (fixed) and the scale of Cabinet Secretary (Fixed).

5. While in the Fifth CPC structure, the stages in every pay scale were well defined, the stages were not well defined in the Sixth CPC structure. The pay was to be fixed in the running Pay Band by rounding off to the next higher multiple of 10. Every multiple of 10 was a pay stage in the Sixth CPC regime. However, all consecutive 10 rupee stages for any Grade Pay cannot be taken as consecutive stages for the purpose of bunching in reference to the Seventh CPC recommendations as is also clear from the illustration contained in Para. 5.1.37 of the Seventh CPC Report. Based on the illustration contained in Para. 5.1.37 of the Seventh CPC Report, Department of Expenditure's O.M., dated 7-9-2016 provided that a difference of at least 3%, the rate of annual increment, in the Sixth CPC pay structure was essential for counting of two stages. The Sixth CPC had replaced the system of equidistant pay stages in a pay scale based on equal annual increments in the Fifth CPC regime by a system of annual increment of 3% on the sum of pay in the running Pay Band and the Grade Pay which was to be added to the running pay as increment. Therefore, the pay stages in any given Grade Pay were specific to an employee and depended upon the initial fixation of pay in that Grade Pay. As a result, the amount of increment earned in the same Grade Pay would differ in the same Pay Scale/Grade Pay not only between different employees but also across years for the same employee. To illustrate, an employee whose

pay was fixed at ₹ 46,100 in GP of ₹ 8,700 in PB-4 would have the first annual increment of ₹ 1,390 which would be added to his running pay in the Pay Band, another employee whose pay initially was fixed at ₹ 46,400 in the same Grade Pay would have the first annual increment of ₹ 1,400. In such a scenario where the pay stages are specific to the employee, it is not possible to arrive at universal pay stages for the purpose of determining the extent of bunching. Therefore, for the purpose of determining the extent of bunching in a system of running Pay Bands, the consecutive pay stages that need to be considered are the pay stages which are specific to the employee.

6. In the Fifth CPC structure, the maximum and the minimum of every pay scale were well defined. In the Sixth CPC structure, Entry Pay was separately notified for most Grade Pay levels to govern the entry pay of direct recruits in that level. The pay of those moving from a lower grade to a higher one on promotion was regulated in terms of provisions contained in Rule 13 of CCS (RP) Rules, 2008. As such, the Entry Pay notified for a given Pay Scale/Grade Pay is the effective minimum of that Grade Pay for direct recruits. For an employee getting promoted, the sum of the minimum of the relevant Pay Band and the Grade Pay is the effective minimum pay. The Seventh CPC, in its Report, has commented that this led to many situations where direct recruits drew higher pay as compared to personnel who reached that stage through promotion. Demands were received by the Seventh CPC from many staff associations and employees for removal of this disparity which the Seventh CPC refers to as differential entry pay.

7. In the revised dispensation for pay fixation in the New Pay Structure as recommended by the Seventh CPC, direct recruits shall start at the minimum pay corresponding to the level to which recruitment is made, which will be the first cell of each level. For those promoted from the previous level, the fixation of pay in the new level will depend on the pay they were already drawing in the previous level. The pay, however, cannot be less than the first stage of the relevant level. While enumerating the benefits of migrating to the new system at Para. 5.1.47 of the Seventh CPC Report, it has been stated that "the issue of differential entry pay has been resolved". At Para. 5.1.36 of the Seventh CPC Report, it has also been mentioned that rationalization has been done with utmost care to ensure minimum bunching at most levels. Rationalization has been done by the Seventh CPC through the Index of Rationalization (IoR) which has been multiplied with the Entry Pay in the Sixth CPC regime to arrive at the first cell of each level. With the Entry Pay along with IoR being used as the determiner of the first cell, pay stages below the Entry Pay have been consciously brought up to the level of Entry Pay and its corresponding pay stage in the revised pay structure. As a result, all pay stages below the Entry Pay in any Level will, on re-fixation, converge to the first pay stage in that level. As this convergence takes place on account of a conscious decision of the Seventh CPC intrinsic to the architecture of the Pay Matrix by indicating the Entry Pay as the starting point of each Level, benefit on account of bunching cannot be extended with reference to pay stages lower than the Entry Pay indicated by the Seventh CPC for that level in the Pay Matrix. Extending the benefit of bunching with reference to pay stages below the entry pay will perpetuate the difference in pay on account of differential Entry Pay which was addressed by the Seventh CPC.

8. Based on the above, it is clarified that the following shall be kept in view while determining the extent of bunching as also the benefits to be extended on account of bunching at the time of initial fixation of pay in the Seventh CPC pay structure:

- (i) Benefit on account of bunching is to be extended when two or more stages get bunched.
- (ii) Benefit of one increment is to be extended on account of bunching of every two consecutive stages.
- (iii) As stipulated in MoF, OM, dated 7-9-2016, a difference of 3% to be reckoned for determination of consecutive pay stages, specific to each employee.
- (iv) All pay stages lower than the Entry Pay in the Sixth CPC pay structure as indicated in the Pay Matrix contained in the Seventh CPC Report are not to be taken into account for determining the extent of bunching.

9. All Ministries/Departments are advised to review all cases wherein benefit on account of bunching has been extended in terms of this Department's OM, dated 7-9-2016 and to re-fix the pay in terms of the instructions contained herein.

**Eligibility of divorced daughters for grant of
family pension — Clarification**

Provision for grant of family pension to a widowed/divorced daughter beyond the age of 25 years has been made *vide* OM, dated 30-8-2004. This provision has been included in Clause (iii) of sub-rule 54 (6) of the CCS (Pension), Rules, 1972.

2. As indicated in Rule 54 (8) of the CCS (Pension) Rules, 1972, the turn of unmarried children below 25 years of age comes after the death or remarriage of their mother/father, i.e., the pensioner and his/her spouse. Thereafter, the family pension is payable to the disabled children for life and then to the unmarried/widowed/divorced daughters above the age of 25 years.

3. It was clarified, *vide* this Department Office Memorandum of even number, dated the 11th September, 2013 (*Sl. No. 139 of Swamy's Annual, 2013*), that the family pension is payable to the children as they are considered to be dependent on the Government servant/pensioner or his/her spouse. A child who is not earning equal to or more than the sum of minimum family pension and Dearness Relief thereon is considered to be dependent on his/her parents. Therefore, only those children who are dependent and meet other conditions of eligibility for family pension at the time of death of the Government servant or his/her spouse, whichever is later, are eligible for family pension. If two or more children are eligible for family pension at that time, family pension will be payable to each child on his/her turn provided he/she is still eligible for family pension when the turn comes.

4. It was clarified that a daughter if eligible, as explained in the preceding paragraph, may be granted family pension provided she fulfils all eligibility conditions at the time of death/ineligibility of her parents and till on the date her turn to receive family pension comes. Accordingly, divorced daughters who fulfil other conditions are eligible for family pension if a decree of divorce had been issued by the competent Court during the lifetime of at least one of the parents.

5. This department has been receiving grievances from various quarters that the divorce proceedings are a long drawn procedure which take many years before attaining finality. There are many cases in which the divorce proceedings of a daughter of a Government employee/pensioner had been instituted in the competent Court during the lifetime of one or both of them but none of them was alive by the time the decree of divorce was granted by the Competent Authority.

6. The matter has been examined in this department in consultation with Department of Expenditure and it has been decided to grant family pension to a divorced daughter in such cases where the divorce proceedings had been filed in a competent Court during the lifetime of the employee/pensioner or his/her spouse but divorce took place after their death — provided the claimant fulfils all other conditions for grant of family pension under Rule 54 of the CCS (Pension) Rules, 1972. In such cases, the family pension will commence from the date of divorce.

7. This issues with the concurrence of Ministry of Finance, Department of Expenditure *vide* their ID No. 1 (11)/E.V/2017, dated the 7th July, 2017.

G.I., Dept. of Pen. & P.W., O.M. No. 1/27/2011-P & PW (E),
dated 1-8-2017

Simplification of pension procedure —

- (i) **Handing over of PPO to the retiring employee by the Head of Office before retirement and**
- (ii) **Submission of undertaking by retiring Government servant along with pension papers**

The undersigned is directed to invite attention to this Department's Office Memorandum of even number, dated the 7th May, 2014 (*Sl. No. 146 of Swamy's Annual, 2014*) (copy available at departmental website), vide which provision had been made that the undertaking to be submitted by the retiring Government servant/pensioner to the Pension Disbursing Bank to refund or make good any amount to which he is not entitled may be obtained by the Head of Office from the retiring Government servant along with Form 5 and other documents before his retirement. This undertaking is forwarded to the Pension Disbursing Bank along with the Pension Payment Order (PPO) by the Accounts Officer/CPAO following the usual procedure. The bank shall credit the pension to the account of the pensioner as soon as this Undertaking is received along with the pension documents.

2. The pensioner is no longer required to visit the bank to activate the first payment of pension. Therefore, after ascertaining that the Bank's copy has been despatched by the Central Pension Accounting Office, **the pensioner's copy of the PPO is to be handed over to him at the time of retirement along with other retirement dues.** This should be feasible in all cases where the Government servant had submitted pension papers within the time-limits prescribed in the Central Civil Services (Pension) Rules, 1972.

3. An employee posted at a location away from the office of the Head of Office or who for any other reasons feels that it would be more convenient to him to obtain his copy of PPO from the bank, may inform the Head of Office of his option in writing while submitting his pension papers.

4. However, in the recent past, many instances have come to the notice of this Department wherein the pensioner's copy of the PPO had not been handed over to him/her and instead had been sent to the Bank and the same was lost in transit sometimes thereby causing hardship to the pensioner.

5. In view of the foregoing, all Ministries/Departments are once again requested to strictly follow the above procedure henceforth viz., handing over the copy of pensioner PPO to him/her at the time of retirement along with other retirement dues except if the pensioner specifically requests for delivering his/her copy of PPO through bank. Department of Posts and Department of Telecommunications are requested to make suitable amendments to the instructions to the Accounts Officers and pension disbursing Post Offices/Banks to adhere to the above procedure.

Procedure for booking of air-tickets on LTC — Clarification

The undersigned is directed to refer to this Department's O.M. of even Number, dated 23-9-2015 (Sl. No. 194 of Swamy's Annual, 2015) on the subject noted above and to say that as per the extant instructions, whenever a Government servant claims LTC by air, he/she is required to book the air-tickets directly from the airlines (Booking counters, website of airlines) or by utilizing the services of the authorized travel agents, viz 'M/s. Balmer Lawrie and Company', 'M/s. Ashok Travels and Tours' and 'IRCTC' [to the extent IRCTC is authorized as per DoPT O.M. No. 31011/6/2002-Est.(A), dated 2-12-2009 (Sl. No. 242 of Swamy's Annual, 2009)] while undertaking LTC journey(s).

2. In this regard, references are received in this Department seeking clarification whether the aforesaid condition of booking the tickets through authorized travel agents needs to be followed in cases where a non-entitled Government servant travels by air on LTC and claims the entitled train fare.

3. The matter has been examined in consultation with Department of Expenditure, Ministry of Finance and it is hereby clarified that in case of non-entitled Government servants travelling by air on LTC and claiming entitled rail fare, the condition of booking the air-tickets through authorized travel agents viz 'M/s. Balmer Lawrie and Company', 'M/s. Ashok Travels and Tours' and 'IRCTC' may not be insisted upon. In rest of the cases, the condition of booking the tickets through authorized modes shall continue to follow.

Corrigendum

G.S.R. 989 (E) — In the notification of the Government of India, in the Ministry of Urban Development (Directorate of Estates) number G.S.R. 598 (E), dated the 16th June, 2017 (Sl. No. 57 of Swamysnews of August, 2017), published in the Gazette of India, Extraordinary, Part II, Section 3, Sub-section (i) dated the 19th June, 2017

(i) at Page 30, Para. 8, for—

“TABLE - I

Type of Residences (1)	Existing Grade Pay/Basic Pay (2)	Level in the Pay Matrix (3)
I	₹ 1,300, ₹ 1,400, ₹ 1,600, ₹ 1,650 and ₹ 1,800	1
II	₹ 1,900, ₹ 2,000, ₹ 2,400 and ₹ 2,800	2, 3, 4, 5
III	₹ 4,200, ₹ 4,600 and ₹ 4,800	6, 7, 8
IV	₹ 5,400 to ₹ 6,600	9, 10, 11
IV(S)	₹ 6,600	11
V-A [D II]	₹ 7,600 and ₹ 8,000	12
V-B [D I]	₹ 8,700 and ₹ 8,900	13, 13-A
VI-A [C II]	₹ 10,000	14
VI-B [C I]	₹ 67,000 to ₹ 74,999	15 (Index numbers 1 to 4 in the Level)
VII	₹ 75,000 to ₹ 79,999	16 (Index numbers 5 to 8 in the Level), 16
VIII	₹ 80,000 and above	17, 18”

read

“TABLE - I

Type of Residences (1)	Existing Grade Pay/ Basic Pay (₹) (2)	Level in the Pay Matrix (3)
I	₹ 1,300, ₹ 1,400, ₹ 1,600, ₹ 1,650 and ₹ 1,800	1
II	₹ 1,900, ₹ 2,000, ₹ 2,400 and ₹ 2,800	2, 3, 4, 5
III	₹ 4,200, ₹ 4,600 and ₹ 4,800	6, 7, 8
IV	₹ 5,400 to ₹ 6,600	9, 10, 11
IV (S)	₹ 6,600	11
V A [D II]	₹ 7,600 and ₹ 8,000	12
V B [D I]	₹ 8,700 and ₹ 8,900	13, 13-A
VIA [C II]	₹ 10,000	14
VIB [C I]	₹ 67,000 to ₹ 74,999	15 (Index numbers 1 to 4 in the Level)
VII	₹ 75,000 to ₹ 79,999	15 (Index numbers 5 to 8 in the Level), 16
VIII	₹ 80,000 and above	17, 18”

(ii) at Page 34, Para. 21 (3) (b), for—

“The allottee in occupation of a specific floor may apply for that

read

"The allottee in occupation of a specific floor may apply for that floor and above floor only and allotment will be made accordingly"

read

(iii) at Page 38, Para. 33 (b) (i), for—

"not exceeding three units in the case of Deputy Chairman, NITI Aayog;

read

"not exceeding three units in the case of Vice Chairperson, NITI Aayog;

(iv) at Page 39, Para. 37 (1), for—

"The reservation in allotment of accommodation to Scheduled Castes and Scheduled Tribe employees shall be five per cent in Type I and II accommodation and ten per cent in Type III and IV accommodation."

read

"The reservation in allotment of accommodation to Scheduled Castes and Scheduled Tribe employees shall be ten per cent in Type I and II accommodation and five per cent in Type III and IV accommodation."

(v) at Page 48, Para. 67(8), for—

"Cases where individual fails to comply with the provisions, this rule shall be brought to the notice of authorities concerned by the Director of Estates for taking appropriate disciplinary action against such defaulting allottees."

read

"Cases where individual fails to comply with the provisions this rule shall be brought to the notice of authorities concerned by the Directorate of Estates for taking appropriate disciplinary action against such defaulting allottees."

(vi) at Page 49, Para. 69 (5), for—

"After completion of the inspection and inquiry under sub-rule (4), the inspection report shall be referred to the deciding authority. Who shall, after giving an opportunity of hearing to the allottee, pass an order in writing and where a case of subletting is established, the allotment shall be cancelled and the allottee shall be liable to the penalty under these rules:"

read

"After completion of the inspection and inquiry under sub-rule (4), the inspection report shall be referred to the deciding authority who shall, after giving an opportunity of hearing to the allottee, pass an order in writing and where a case of subletting is established, the allotment shall be cancelled and the allottee shall be liable to the penalty under these rules:"

(vii) Wherever applicable, the name of the EPE Act, 1971.

shall be read as

"the Public Premises (Eviction of Unauthorized Occupants) Act, 1971."

No. 7(2)/EV/2016
 Government of India
 Ministry of Finance
 Department of Expenditure

New Delhi, the September 6, 2017

Office Memorandum

Sub: Central Government Employees Group Insurance Scheme-1980 - Tables of Benefits for the savings fund for the period from 01.07.2017 to 30.09.2017.

The Tables of Benefits for Savings Fund to the beneficiaries under the Central Government Employees Group Insurance Scheme-1980, which are being issued on a quarterly basis from 1.1.2017 onwards, as brought out in this Ministry's OM of even number dated 17.3.2017, for the quarter from 1.7.2017 to 30.9.2017, as worked out by IRDA based on the interest rate of 7.8% per annum (compounded quarterly) as notified by the Department of Economic Affairs as per their Resolution No. 5(1)-B(PD)/2017 dated 17.7.2017, are enclosed.

2. The Tables enclosed are of two categories as per the existing practice. As hitherto, the first Table of Benefits for the savings fund of the scheme is based on the subscription of Rs. 10 p.m. from 1.1.1982 to 31.12.1989 and Rs. 15 p.m. w.e.f. 1.1.1990 onwards. The second Table of Benefits for savings fund is based on a subscription of Rs. 10 p.m. for those employees who had opted out of the revised rate of subscription w.e.f. 1.1.1990.

3. While these orders are in respect of Table of Benefits for the period from 1.7.2017 to 30.9.2017, the Tables already issued for the quarters from 1.1.2017 to 31.3.2017 and from 1.4.2017 to 30.6.2017 are also reproduced for the sake of convenience and consolidation.

4. In their application to the employees of Indian Audit and Accounts Department, these orders are issued after consultation with the Comptroller & Auditor General of India.

5. Hindi version of these orders is attached.



(Amar Nath Singh)
 Director

To

1. All Ministries/Department of the Central Government as per standard list.
2. Copy with spare copies for information and necessary action to C&AG, UPSC, all State Government etc. as per standard list.
3. NIC, Department of Expenditure - for uploading the same on the website of Ministry of Finance, Department of Expenditure.

CENTRAL GOVERNMENT EMPLOYEES GROUP INSURANCE SCHEME 1980

Contribution @ Rs. 10/- P.M upto 31.12.89 and Rs. 15 throughout after 1.1.90

Accumulated value of contribution from 1st January of year of Entry to the month and year of cessation

Year of Entry	Year of cessation of membership - 2017								
	Month of cessation of membership								
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
1982	30757.80	30972.00	31187.62	31402.10	31617.98	31835.28	32051.38	32268.87	32487.77
1983	28029.14	28225.27	28422.70	28619.09	28816.78	29015.75	29213.64	29412.81	29613.26
1984	25572.18	25752.03	25933.08	26113.20	26294.49	26476.97	26658.46	26841.13	27024.97
1985	23363.54	23528.77	23695.09	23860.57	24027.13	24194.78	24361.53	24529.36	24698.28
1986	21388.62	21540.77	21693.93	21846.32	21999.70	22154.09	22307.67	22462.23	22617.80
1987	19612.36	19752.75	19894.06	20034.68	20176.22	20318.68	20460.40	20603.04	20746.60
1988	18026.00	18155.88	18286.62	18416.72	18547.68	18679.49	18810.62	18942.61	19075.44
1989	16591.55	16711.93	16833.11	16953.71	17075.09	17197.27	17318.84	17441.18	17564.32
1990	15320.71	15432.67	15545.38	15657.55	15770.46	15884.11	15997.19	16111.00	16225.55
1991	13620.41	13721.11	13822.48	13923.39	14024.96	14127.19	14228.92	14331.31	14434.37
1992	12115.85	12206.59	12297.93	12388.86	12480.39	12572.52	12664.22	12756.50	12849.39
1993	10771.97	10853.81	10936.19	11018.22	11100.78	11183.89	11266.61	11349.88	11433.68
1994	9582.93	9656.89	9731.35	9805.49	9880.13	9955.25	10030.04	10105.32	10181.08
1995	8525.35	8592.31	8659.72	8726.86	8794.43	8862.45	8930.19	8998.36	9066.98
1996	7587.56	7648.31	7709.46	7770.38	7831.71	7893.43	7954.91	8016.78	8079.05
1997	6749.09	6804.29	6859.85	6915.22	6970.95	7027.04	7082.92	7139.17	7195.77
1998	6009.96	6060.26	6110.90	6161.37	6212.16	6263.29	6314.24	6365.52	6417.13
1999	5346.78	5392.69	5438.91	5484.98	5531.36	5578.03	5624.56	5671.38	5718.51
2000	4762.49	4804.53	4846.85	4889.05	4931.53	4974.28	5016.90	5059.81	5102.98
2001	4242.47	4281.06	4319.91	4358.67	4397.68	4436.94	4476.09	4515.50	4555.16
2002	3780.87	3816.41	3852.19	3887.88	3923.81	3959.97	3996.05	4032.36	4068.90
2003	3356.36	3389.09	3422.03	3454.91	3488.01	3521.32	3554.57	3588.02	3621.69
2004	2974.54	3004.74	3035.14	3065.49	3096.04	3126.79	3157.49	3188.38	3219.47
2005	2621.81	2649.67	2677.72	2705.73	2733.93	2762.31	2790.65	2819.17	2847.88
2006	2295.93	2321.64	2347.51	2373.37	2399.39	2425.58	2451.75	2478.08	2504.58
2007	1994.87	2018.58	2042.45	2066.31	2090.33	2114.50	2138.65	2162.96	2187.43
2008	1716.74	1738.61	1760.62	1782.64	1804.80	1827.10	1849.40	1871.85	1894.44
2009	1459.79	1479.96	1500.26	1520.57	1541.02	1561.60	1582.18	1602.90	1623.75
2010	1222.41	1241.00	1259.72	1278.46	1297.32	1316.31	1335.31	1354.43	1373.68
2011	1003.10	1020.25	1037.50	1054.79	1072.19	1089.70	1107.24	1124.89	1142.65
2012	800.34	816.14	832.04	847.98	864.03	880.18	896.37	912.66	929.05
2013	614.02	628.59	643.25	657.96	672.76	687.66	702.61	717.64	732.78
2014	443.09	456.52	470.05	483.62	497.28	511.04	524.84	538.72	552.70
2015	286.32	298.71	311.19	323.73	336.35	349.05	361.80	374.64	387.56
2016	142.48	153.92	165.44	177.02	188.68	200.42	212.21	224.08	236.03
2017	10.50	21.07	31.71	42.42	53.19	64.04	74.96	85.94	96.99

Note:

Basis Used

From	To	Interest*	From	To	Interest*
1.1.82	31.12.82	10%	1.12.11	31.03.12	8.60%
1.1.83	31.12.86	11%	01.04.2012	31.03.2013	8.80%
1.1.87	31.12.00	12%	1.4.2013	31.03.2016	8.70%
1.1.01	31.12.01	11%	01.04.2016	30.09.2016	8.10%
1.1.02	31.12.02	9.50%	01.10.2016	31.12.2016	8.00%
1.1.03	31.12.03	9.00%	01.01.2017	31.03.2017	8.00%
1.1.04	30.11.11	8.00%	01.04.2017	30.06.2017	7.90%
			01.07.2017	30.09.2017	7.80%

Savings Fund : 68.75% from 1.1.82 to 31.12.87
70% from 1.1.88 and onwards

Insurance Fund : 31.25% from 1.1.82 to 31.12.87
30% from 1.1.88 and onwards

* Interest p.a compounded quarterly

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CENTRAL GOVERNMENT EMPLOYEES GROUP INSURANCE SCHEME 1980

Contribution @ Rs. 10/- throughout

Accumulated value of contribution from 1st January of year of Entry to the month and year of cessation
 Year of cessation of membership - 2017
 Month of cessation of membership

Year of Entry	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
1982	25649.69	25826.56	26004.60	26181.68	26359.92	26539.33	26717.73	26897.27	27077.98
1983	22923.60	23082.41	23242.28	23401.30	23561.35	23722.46	23882.66	24043.90	24206.18
1984	20464.65	20607.18	20750.66	20893.37	21037.03	21181.62	21325.41	21470.14	21615.80
1985	18258.26	18386.18	18514.94	18643.04	18771.98	18901.75	19030.82	19160.73	19291.47
1986	16277.00	16391.80	16507.36	16622.33	16738.04	16854.52	16970.37	17086.97	17204.32
1987	14501.46	14604.50	14708.22	14811.42	14915.30	15019.85	15123.85	15228.52	15333.87
1988	12917.53	13010.08	13103.24	13195.94	13289.25	13383.17	13476.60	13570.63	13665.27
1989	11484.75	11567.81	11651.42	11734.62	11818.37	11902.67	11986.54	12070.95	12155.91
1990	10209.51	10284.12	10359.23	10433.99	10509.23	10584.96	10660.32	10736.17	10812.51
1991	9075.84	9142.95	9210.50	9277.74	9345.42	9413.55	9481.34	9549.57	9618.25
1992	8069.92	8130.36	8191.21	8251.78	8312.75	8374.12	8435.20	8496.68	8558.55
1993	7178.95	7233.50	7288.40	7343.07	7398.10	7453.49	7508.62	7564.12	7619.97
1994	6383.79	6433.07	6482.68	6532.07	6581.80	6631.85	6681.68	6731.83	6782.30
1995	5678.05	5722.65	5767.55	5812.27	5857.29	5902.60	5947.72	5993.13	6038.83
1996	5052.14	5092.60	5133.32	5173.90	5214.74	5255.84	5296.79	5337.99	5379.47
1997	4496.48	4533.26	4570.28	4607.18	4644.31	4681.68	4718.92	4756.40	4794.11
1998	4001.50	4035.00	4068.73	4102.34	4136.17	4170.22	4204.15	4238.30	4272.68
1999	3560.81	3591.39	3622.18	3652.87	3683.76	3714.85	3745.84	3777.04	3808.43
2000	3174.83	3202.86	3231.07	3259.20	3287.52	3316.02	3344.44	3373.04	3401.82
2001	2829.52	2855.26	2881.17	2907.01	2933.02	2959.21	2985.32	3011.60	3038.05
2002	2518.88	2542.56	2566.40	2590.19	2614.13	2638.22	2662.26	2686.46	2710.81
2003	2238.74	2260.56	2282.53	2304.46	2326.53	2348.75	2370.92	2393.23	2415.69
2004	1983.03	2003.16	2023.43	2043.66	2064.03	2084.53	2104.99	2125.59	2146.31
2005	1747.87	1766.45	1785.15	1803.82	1822.62	1841.54	1860.43	1879.45	1898.59
2006	1530.62	1547.76	1565.01	1582.24	1599.59	1617.05	1634.50	1652.05	1669.72
2007	1329.91	1345.72	1361.63	1377.54	1393.55	1409.66	1425.77	1441.98	1458.29
2008	1144.49	1159.07	1173.75	1188.43	1203.20	1218.07	1232.94	1247.90	1262.96
2009	973.19	986.64	1000.17	1013.71	1027.34	1041.06	1054.79	1068.60	1082.50
2010	814.94	827.34	839.81	852.31	864.88	877.54	890.21	902.96	915.79
2011	668.74	680.16	691.67	703.19	714.79	726.47	738.16	749.93	761.77
2012	533.56	544.09	554.70	565.32	576.02	586.79	597.58	608.44	619.37
2013	409.35	419.06	428.84	438.64	448.51	458.44	468.40	478.43	488.52
2014	295.39	304.35	313.36	322.41	331.52	340.69	349.89	359.15	368.47
2015	190.88	199.14	207.46	215.82	224.23	232.70	241.20	249.76	258.37
2016	94.99	102.61	110.29	118.02	125.79	133.61	141.47	149.39	157.35
2017	7.00	14.05	21.14	28.28	35.46	42.69	49.97	57.29	64.66

Note:

Basis Used

From	To	Interest*	From	To	Interest*	Savings Fund :
1.1.82	31.12.82	10%	1.12.11	31.03.12	8.60%	68.75% from 1.1.82 to 31.12.87
1.1.83	31.12.86	11%	01.04.2012	31.03.2013	8.80%	70% from 1.1.88 and onwards
1.1.87	31.12.00	12%	1.4.2013	31.03.2016	8.70%	
1.1.01	31.12.01	11%	01.04.2016	30.09.2016	8.10%	Insurance Fund : 31.25% from 1.1.82 to 31.12.87
1.1.02	31.12.02	9.50%	01.10.2016	31.12.2016	8.00%	30% from 1.1.88 and onwards
1.1.03	31.12.03	9.00%	01.01.2017	31.03.2017	8.00%	
1.1.04	30.11.11	8.00%	01.04.2017	30.06.2017	7.90%	
			01.07.2017	30.09.2017	7.80%	

* Interest p.a compounded quarterly