

RASHTRIYA CHEMICALS & FERTILIZERS LTD.

MEDICAL ATTENDANCE AND TREATMENT RULES 2025

- 1) These rules shall be called the “**Medical Attendance and Treatment Rules**”.
- 2) They shall apply to all categories of employees of the Company and to the Dependent Family Members as defined vide Rule **4, 5 & 6** herein under, for the treatment .
- 3) These rules approved by the Board of Directors is effective from 12.08.2025 and supersede all existing rules and ad-hoc orders now in existence governing the Medical Attendance and Treatment of the Employees of the Company.

Medical facilities provided to the beneficiaries is subject to modification / discontinuation at the sole discretion of Management.

4) DEFINITIONS:

- a) **Employee:** Employee means an employee (on probation or confirmed) on the rolls of the Company and includes Employees on deputation with the Company.
- b) **Dependent Family Members:** A member of Employees’ Family who meets the dependency criteria as specified vide Rule No. 5 herein under.
- c) **Pay:** Pay means Basic Pay drawn by the Employee on the date of the Treatment. It also includes special pay or personal pay, or deputation allowance, or non-practicing allowance in case of medical staff, pension or pension equivalent of retiring benefits in case of the reemployed personnel.
- d) **Family:** Family means Employee’s wife/husband, children (son and daughter including legally adopted children), parents,

sister, brother, widowed sister and widowed daughter wholly dependent on the employee as specified vide Rule No. 5 herein under.

Parents (excluding stepparents), subject to the following:

- a) in case of adoption, adoptive parents and not real parents;
 - b) If adoptive father has more than only the first wife; and
 - c) In case of female employees, parents or parents-in-law.
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- e) **Controlling Medical Officer:** Controlling Medical Officer means GM (CMHS) /Dy. General Manager (CMHS) of the Company or any other Medical Officer nominated by the Chairman and Managing Director of the Company.
 - f) **Authorized Medical Attendant:** "Authorized Medical Attendant" for any category of Employees means Medical Officer of the Company irrespective of his / her grade or scale, Panel Doctor or Consultant from Panel Hospital, General Practitioner or Consultant who has approved qualification and has been registered under Indian Medical Council Act in Allopathic or Ayurvedic or Homeopathic System of Treatment.
 - g) **Authorized Medical Officer:** Authorized Medical Officer means Company's Officer in Medical Discipline in any grade or scale entrusted with specific administrative function and authorized to discharge the same.
 - h) **Panel Doctor:** A General Medical Practitioner Qualified and Registered under the Indian Medical Council Act appointed by the Company for giving Treatment to Employees and their Dependent Family Members ,as per the rules set out herein under.,
 - i) **Competent Authority:** Competent Authority means Chairman & Managing Director of the Company, or any Officer

nominated by Chairman and Managing Director, not below the rank of Dy. General Manager.

j) Hospital: includes,

i) Hospital maintained by the Company: Hospital, dispensary, first aid center or occupational health center,

ii) Hospital authorized by the Company: Clinic of Panel Doctor, consultant, or outside hospital authorized by the Controlling Medical Officer.

k) RCF Hospital: RCF Hospital means a hospital maintained by the Company.

l) Panel Hospital: A Hospital nominated by the Company for the Treatment of its Employees and their eligible Dependent Family Members on reference by Company's Doctor or Panel Doctor in respective Panel Area and does not include other hospitals where the Company has separate agreements.

m) Government Hospital: Government Hospital means all such institutions, which have been recognized as "Government Hospital" under Central Services (Medical Attendance) Rules 1944 as amended from time to time, which is reproduced below:

"Government Hospital includes, **i)** Municipal, Nagarpalika, PSU hospital **ii)** Hospital run and managed by trustees. **iii)** Government Departmental dispensary whether full time or part time, established and run by a department of the Government for the medical attendance of a class or classes of Government servants and members of their families, a hospital maintained by a local authority and any other hospital with which arrangements have been made by the Government for the treatment of Government servants".

n) Medical Attendance: Medical Attendance means

attendance by the Authorized Medical Attendant including such methods of examination and such consultation with specialists for the purpose of diagnosis and Treatment as are considered necessary by the Medical Attendant. Medical Attendance includes attendance at the Hospital (i.e. indoor as well as OPD) or at the residence of Employee or at the consulting rooms/clinics of Authorized Medical Attendant.

(o) Treatment: Treatment means the employment of medical and surgical facilities which includes :-

- i)** The employment of pathological, bacteriological, radiological, sonological and other methods such as CT Scan, MRI, Nuclear Scans and other modern investigation which are felt necessary by the Authorized Medical Attendant.
- ii)** The supply of medicines, standard vaccines such as BCG, Diphtheria, Pertussis, Tetanus, Polio, Measles, Mumps, Rubella, Hepatitis B, Pneumococcal (Vaccines only for children below the age of 10 years and risk prone adults (need based), Rabies, sera such as anti-snake venom or other therapeutic substances which may require in case of immune compromised individuals and those who need it. Standard vaccines as per government guidelines issued from time to time are permitted.
- iii)** Dental treatment except supply of dentures, crowns, bridge work, orthodontic work and other specialized dental work, which is of the nature of beautification. Only Capping of tooth immediately (within 4 weeks) after the Root Canal will be reimbursed at rates defined in MRR for various types of commonly used materials, subject to maximum reimbursement of Rs 9000 per unit. The cost of various caps / crowns defined in MRR.

Re-Root canal or Pre-Root canal treatment, Restoration and refilling (temporary or permanent) is permitted.

iv) Urology, Gastrointestinal surgery, Neuro Surgery, Plastic Surgery, Cardio vascular surgery meant for functional improvements but not for beautification. Nondependent kidney donor medical expenses to be borne by RCF. Liver Transplant surgery and Kidney Transplant surgery to be made admissible for Active and Retired Employees and eligible dependent Kidney/Liver donor medical expenses will be reimbursed as per MATR policy.

v) Hearing aids will be reimbursed as per CGHS rates which is presently Rs.9000/- for employee per ear , spouse and eligible dependent which will be allowed once in five years. Speaking Valves / prosthesis essential for functional purpose & not for cosmetics for cancer patients only will be allowed. If advised by ENT specialist /Specialist/General Physician/Physician Sleep Apnoea test will be reimbursed as per MRR or actual; whichever is less. Further revision of rates is as per CGHS (Authority for rate revision) and shall be made effective from the date of notification or updated rates on CGHS website.

vi) Gynaecology and obstetrics treatment except for restrictions on infertility treatment as specified in the rules given as under

Five cycles for infertility treatment will be provided for primary infertility cases (No child cases) up to the age of 45. Other assisted procedures like In vitro fertilization (IVF) is admissible as per CGHS with age from 21 to 39. Reimbursement shall be allowed for expense of IVF

treatment subject to a maximum of Rs 65,000 per cycle or actual cost whichever is lower for a maximum of three cycles on only one occasion. In case of Secondary infertility, the same as described above will be allowed only when the first conceived child is not alive or suffering from gross ill health such as congenital anomalies etc. (as certified by paediatrician or authorized medical authority of government hospital). Maintenance of a third pregnancy & delivery will not be considered, if the first born two children are alive and healthy. Also treatment of secondary infertility for third child will not be considered irrespective of mode of conception. The delivery of first child or second child is permitted at any place in India, reimbursement of expenses shall be permitted for entire spell of treatment at RCF MRR or actuals; whichever is less.

vii) Ophthalmic treatment such as the supply of all visual aids for defective vision including Lasik surgery to correct refractive errors is not admissible. Surgery for correction of squint is admissible. For cataract surgery reimbursement of Rs.5800/- on intra ocular lens per eye is admissible. Further revision of rates is as per CGHS (Authority for rate revision) shall be made effective from the date of notification or Updated CGHS rates available on CGHS website.

viii) Orthopedic treatment.

ix) Provision for treatment of special diseases such as Cancer, Diabetes, Renal failure (Dialysis), Tuberculosis, Mental disease, Poliomyelitis, IHD, AIDS, SARS, Deep Brain Stimulation (DBS), Parkinson's, Kidney transplant, Liver Transplant etc. as admissible under these rules.

x) Physiotherapy

Physiotherapy treatment is admissible for maximum one month per current illness for OPD or at home, break in treatment is permissible but it cannot more than one month and to be completed for one month from start of initiation of treatment.

xi) Rehabilitation of active employees addicted to alcohol and drugs is admissible under the MATR rules.

xii) Nursing and hospital accommodation appropriate to status of the Employees.

xiii) Diet in the case of indoor patients, free as admissible under these rules. {refer rule 9 d)}.

xiv) Ayurvedic and Homeopathic System of Treatment: Treatment taken at Government and Private Hospital will be reimbursed as per RCF approved rate. In case of panchkarma the reimbursement will be made for employee and spouse only; once in 5 years' maximum up to Rs.7500/-. Allopathic drugs prescribed by Ayurvedic/Homeopathy doctors is permissible.

xv) New scientific methods of treatment / techniques after the approval of the Competent Authority and as per DOP.

xvi) Employee dependent small children (below the age of 12) admitted in the hospital, single occupancy for one parent with children should be provided as per entitlement.

xvii) Consultation Counselling charges of Rs 350 should be admissible as per MATR Policy.

(p) Schedule of Charges: Schedules related/connected to these rules as amended from time to time with the approval of the CMD.

5) ELIGIBILITY FOR MEDICAL TREATMENT:

All the criteria mentioned herein below i.e. **5 a), b), c) & d)** are required to be fulfilled simultaneously for deciding Dependency for Medical Facility / Treatment:

5a) Criteria for dependency

i) Residential Status: Generally, all Dependent Family Members may preferably stay with the Employee. The condition of residing with an Employee by the Dependent Family Members including spouse will not be insisted in the following cases:

1. Marketing Employees who are posted in different Area offices, employees can keep their Family at any place in India.
2. RCF employee's parents can stay anywhere in India. The treatment to them will be place of treatment in India, which will be reimbursed at RCF reimbursement rates or actuals whichever is less. Parents staying with employee or occasionally visiting are also eligible for treatment at unit hospital & credit referral for cashless treatment at empanelled hospital. In the case of eligible dependent parents, taking indoor treatment at either empanelled hospital or any private hospital on payment, 10% of total cost of that indoor treatment excluding the cost of medicines will be borne by the Employee except when the treatment is taken at RCF unit hospital / Government / Municipal hospitals. This recovery is not applicable for OPD treatment. Deductions towards the implant / stent used if any will be as per the rules stated elsewhere.

3.a. The Medical expenses on the treatment of eligible

dependents family members of CISF employees who are residing in barracks shall be reimbursed as per MRR rates or actuals whichever is lower.

- 3.b. In case the Employee or his / her eligible Dependent Family Members are required to leave the Head Quarter of the Employee or declared place of stay of Dependent Family Members, in such cases, their treatment will be reimbursed at MRR applicable to the place of treatment or at actual, whichever is less. Above treatment, cost is reimbursed only for treatment taken in India.
4. RCF Employee's and their eligible dependents can stay anywhere in India. In such cases, their treatment will be reimbursed at MRR applicable to the place of treatment or at actual, whichever is less.

ii) Income :

- (1) For spouse (wife/husband, as the case may be) Income criteria will not be applicable.
- (2) Son, daughter including legally adopted children, sister, brother, widowed sister and widowed daughter are deemed to be dependent on the Employee till they start earning.
- (3) Parents are deemed to be dependent on the employee if their total monthly income from all sources including pension and pension equivalent of DCRG benefit does not exceed Rs.25000/- p.m. Parents who have retired from the Company cannot be deemed to be dependent on their son / daughter employed in our Company, for the purpose of availing medical Treatment/facility, unless they become members of prevailing Contributory Scheme at the time of their retirement.

- (4) The same will be applicable for the employees who are retired and their spouse is RCF employee.

iii) Age:

(1) In case of Active Employees, their unmarried Son including legally adopted are eligible for medical Treatment/facility till the age of 25 years. This shall be extended thereafter till the age of 30 years on yearly declaration certifying their dependency, but not beyond 30 years of age.

Mentally Retarded / Permanently Disabled son as certified by competent government authority (as required for claiming deductions on disabled dependent under income tax rules) are eligible for treatment irrespective of their age provided they are not earning and are unmarried.

The employees are expected to inform Human Resource Dept. as soon as their son / daughter does not remain dependent on them. Any dependency claimed on submission of false information by the employee will be dealt with appropriate disciplinary procedure of the company.

(2). In case of Active Employees, their unmarried Daughter including legally adopted are eligible for medical Treatment/facility till the age of 25 years. This shall be extended thereafter on yearly declaration, certifying their dependency, but not beyond 30 years of age.

Mentally Retarded / Permanently Disabled daughter as certified by competent government authority (as required for claiming deductions on disabled dependent under income tax rules) are eligible for treatment irrespective of their age provided they are not earning and are unmarried.

The employees are expected to inform Human Resource Dept. as soon as their daughter does not remain dependent on them. Any dependency

claimed on submission of false information by the employee will be dealt with appropriate disciplinary procedure of the company.

(3). Dependent Sister and brother of Employee on roll are eligible for medical Treatment/facility to the extent available in RCF unit Hospital up to age of 25 years. They are not eligible for reimbursement.

(4). Widowed sister, widowed daughter and Mentally Retarded or Permanently Disabled Children of Employee on roll are eligible for medical facilities irrespective of the age.

(5). For Spouse and Parents age criteria is not applicable

iv) Marital Status:

(1) Son, daughter including legally adopted children, sister and brother are eligible for medical treatment until they get married.

(2) Widowed sister and widowed daughter are eligible for medical treatment until they get remarried.

(3) Daughter - Divorced/abandoned or separated from her husband shall be treated as dependent on employee and will be eligible for medical treatment irrespective of the age limit subject to the condition that she does not have income (including alimony amount) exceeding Rs.10000/p.m.

5b) other conditions for eligibility are:

i) Employed Spouse:

Medical Treatment will be allowed if the husband or wife, as the case may be, does not avail medical facilities provided by his/her employer in case he/she is employed. A certificate to that effect, issued by the employer of the spouse needs to be submitted by the Employee. The

certificate should cover whether the spouse is getting any allowance - in lieu of medical facility to self and or family members. If so, the Employee should deposit the said amount with the Company in case he/she chooses to avail medical facility from the Company for the employed spouse. It is the responsibility of the Employee to submit fresh certification, in case of any change in the position than the one, which is declared / submitted to the Company.

ii) Mentally Retarded/Permanently Disabled Children:

Mentally Retarded / permanently Disabled son / daughter of active Employee on roll are eligible for medical facilities irrespective of the age limit provided they are unmarried and not earning.

Retired employees can enrol their mentally retarded and dependent children, irrespective of age in the 'Retired employee contributory scheme' on payment of one- time contribution per child at time of retirement, as per existing conditions of contributory scheme.

A certificate (as required for claiming deductions on disabled dependent under income tax rules) from competent authority as mentioned below should be produced for Mentally Retarded / permanently disabled dependent children certifying disability from the following

–

For Employees staying in Mumbai – Dean / Superintendent of J.J. Hospital/Director Rehabilitation Centre, Haji Ali.

For other areas - Dean/Superintendent, Civil Surgeon of Govt. Hospital / District Health Officer of the area.

Employee (Active / retired) shall have to submit life certificate once in five years for such dependent children.

5c) Restrictions for dependency are:

- i) Sportsmen recruited on contract, Act Apprentices, Trainees: No dependent is eligible for Treatment.
- ii) **Voluntarily retired employees** and their dependents from 10.04.1989 to 12.02.2003 not eligible for medical facilities.
- iii) **Female Employees:** She will have one time option to declare either her parents or her parents-in-law, wholly dependent on her for the purpose of medical Treatment. The option should be exercised within one year of the marriage of the female employee.
- iv) **Widowed female Employee employed under distress category:** if remarried subsequently, the dependents already declared by the deceased Employee and the children born out of remarriage only are eligible for medical facilities i.e. widows employed under distress category will have no option to declare her new parents - in -law and husband as wholly dependent for the purpose of medical Treatment.
- v) **Daughter employed under distress category:** Treatment will be allowed like any other Employee. In case of parents, only the surviving parents get medical facility and such employed daughter will not have option to claim dependency for her parents-in-law.

5d) Restrictions on the extent of Treatment are:

The following are eligible for Treatment to the extent available in RCF Hospital:-

- i) The following are eligible for treatment to the extent

available in RCF hospital - Sister, brother, widowed sister, widowed daughter satisfying all other conditions of dependency.

- ii) Recovery of medical expenses for the Treatment of parents: -

An Employee is required to share 10% of the total medical expenses excluding medicines for any indoor treatment of dependent parents availed in a Private Hospital. In case of credit treatment, the Employee is expected to pay the recovery amount in one instalment. However, in few genuine cases for effecting the recovery of such expenses, Official at the level of GM (HR) and above may review the individual case based on merit of the case and decide the number of instalments.

Recovery for the medical expenses for the Treatment of eligible dependents other than parents: -

In cases where recovery is to be effected from the Employee for the Treatment to eligible dependents, for the expenses above Rs.15 lakhs, the number of instalments will be decided by GM (HR) based on merit of the case.

Number of instalments shall be decided based on the rules pertaining to take home salary and permitted deductions.

6) ELIGIBILITY FOR OTHER CATEGORY OF EMPLOYEES :

- a) **Sportsman:** Sportsman on training or on contract are eligible for Treatment for self only to the extent available in RCF Hospital. Deviations, if any, should be subject to specific approval for the class of treatment as per slab-II.

b) Trainee/Apprentice/Management

Trainees/Company trainees: Trainees/Apprentices are eligible for Treatment for self only to the extent available at RCF Hospital till his completion of training or apprenticeship period. Specific case-to-case treatment in outside hospital to be allowed subject to approval of the competent authority/Head of department (Medical). Management trainees/ Company trainees/ are eligible for Treatment of self only at RCF Hospital or outside hospital or reimbursement as per entitlement of grade and ceiling limit in which they will be absorbed. Apprentice trainees, Intern-ship trainees, summer trainees and any other trainees who will not be absorbed in RCF are excluded for reimbursement or treatment at outside hospital.

c) CISF Employees: CISF Employees: CISF employees and the members of their families meeting dependent eligibility criteria are eligible for Treatment as per CISF agreement with RCF until their deployment with the Company. The condition of residing with the employee will be relaxed in the case of eligible dependents of CISF employees who are staying in barracks. CISF personnel posted at RCF site and working for RCF only, shall be covered for availing medical services and reimbursement. CISF personnel put on deputation by CISF authorities elsewhere, shall not be covered for availing medical services / reimbursement from RCF.

d) Railway Employees at Thal: The employees of Central Railway posted at RCF Thal siding and their eligible dependents as per our criteria for dependency will be extended free Treatment/facility to the extent available at RCF Thal Hospital. They should be referred to Central Railway Hospital for services not available in RCF Thal Hospital.

e) Deceased Employee: The spouse, dependent parents and dependent unmarried children of a deceased employee will be

eligible for medical facilities at par with retired employees under the RCF retired employees contributory scheme without making any contribution till the normal date of retirement of the employee. Thereafter, the spouse and children up to the age 25 years if they are not earning or unmarried {Ref. f i) (1)} will be eligible for medical facilities as per the RCF retired employees contributory scheme on the specified payment or at Government rates, if he/she does not join the said scheme. Mentally retarded or unemployed physically handicapped children will be eligible after paying contribution as per Company's policy

f) Retired Employees:

i) Common General Conditions

(1) Retired employee and his/her spouse are eligible for treatment on one time nonrefundable payment basis. In addition, Permanently Disabled Child (Whether Mentally or Physically) of retired employees will be eligible for medical facilities irrespective of the age limit on making one time nonrefundable payment of Rs.5000/- at the time of retirement. Cases of retired employees having unmarried children below the age of 25 and not earning should also be made eligible as dependents till they attain age of 25 years or get married whichever is earlier by paying additional amount as per Company's policy i.e. Rs.5000/-. Cases of Permanently Disabled Child (Whether mentally or physically) of retired employees which were not declared as dependent at the time of retirement can now declare their Permanently Disabled Child (Whether mentally or physically) as dependent with other conditions of MATR policy with in period of maximum 31.03.2026. The future retirees will have to express

their consent for availing the facility before the last day of their service.in the prescribed format.

(2) (a) The retired employees staying within 5 kms from Unit's Hospital can avail medical facilities from respective Unit's Hospital or can opt for preferred hospital . Reimbursement shall be made as per MRR rate applicable to the place of treatment or the bill amount whichever is less.

(b) Retired employees residing within the area where Panel Doctors are appointed by the Company will be entitled to avail all the medical services available with the panel doctor, including supply of medicines by Panel Chemist, if any or can opt for preferred hospital or preferred doctor. Reimbursement shall be made as per MRR rate applicable to the place of treatment or the bill amount whichever is less.

(c) Employees not staying in areas covered under 2(a) & 2(b) above will avail Medical Treatment from Authorized Medical Attendant (General Practitioners). Reimbursement shall be made as per MRR rate applicable to the place of treatment or the bill amount whichever is less.

(d) Admissible services available or not available in RCF Hospital or with Panel Doctors, as applicable can be availed from outside doctors on payment basis. Reimbursements will be made as per MRR rates applicable to the place of treatment or the bill amount whichever is less.

Panel Hospitals: The prescribed doctors in RCF Hospital are Company's Doctors and in panel area will be the Panel Doctors.

In all other areas, the cost of admissible services available or not available with the Authorized Medical Attendant (General Practitioners) can be claimed for reimbursement based on the advice of the Authorized Medical Attendant. Reimbursements will be made as per MRR rates applicable to the place of treatment or the bill amount whichever is less subject to upper limits applicable to the scheme opted by the individual retired Employee

(e) Facilities provided in RCF Hospital including outside assistance extended by Honorary doctors, Surgeons, Specialists, will be provided by RCF with no charges to retired employees who are the members of contributory scheme.

(3) Time limit for submission of medical claims is at par with that of Employees on roll, which is presently 6 months from the last date of treatment. In case of late submission, reimbursement shall be given at 90% of the sanctioned amount at RCF MRR (excluding the cost of medicines, which will be paid at actual) applicable to place of treatment or actual, whichever is less and period of late submission of medical claims cannot be more than 12 months from the last date of treatment.

(4) The bills for reimbursement of expenses will be submitted to Medical department. The retired employee/spouse are also required to furnish a declaration-cum-life Certificate in April every alternate year to the concerned HR Officer. The outstation employees can send the same through nearest Area Office, duly attested by the Area Office In-charge / Bank Manager of the bank in which the Pension Account is opened under EPS-95. Whenever a retired

employee or his/her spouse expires, it is the responsibility of the surviving family member to intimate the status in writing to in-charge HR Department.

- (5) Medical TA is not admissible for any type of treatment i.e. for OPD or Indoor treatment.
- (6) Retired Employees are not eligible for any medical advance.
- (7) Ayurvedic and Homeopathic Treatments can be availed preferably in Government / Municipal Hospitals issuing medicines as per guidelines of Medical Council or any private practitioner and the reimbursement will be as per MATR Policy for active and retired employees. Reimbursement of Admissible Ayurvedic/Homeopathic/Allopathy medicines for active and retired employees will be as per medicines prescribed by the doctor with details of medicine purchased from In-house (Pharmacy/Clinic/Hospital) or External (Pharmacy/Clinic/Hospital). In case of medicines prescribed without pharmacy bill/invoice, reimbursement will be as per MRR rates. Details of medicines should be provided for reimbursement.
- (8) Retired Employees, who retired in the rank of CE and above only can be allotted a cabin in RCF Hospital subject to availability. Employees on roll, entitled for a cabin will get preference over the retired employee.
- (9) All other administrative rules, restrictions and conditions applicable to the serving Employees under the Medical Policy of the Company as revised from time to time shall be applicable.
- (10) The last claim in case of death of a retired employee shall be payable to the surviving spouse. In case of

death of surviving spouse/widowed retired employee the last claim will be payable to the nominee on certification from HR.

- (11) Any kind of misuse of medical facility will be dealt seriously. The employee & spouse involving in any misuse will be debarred for medical facility for rest of life.

ii) There are two schemes for retired employees;

(1) Non-Contributory Scheme: Under this Scheme, Ex-employees do not contribute for medical facility.

(a) The overall limit for reimbursement of medical expenses per family i.e. Self & Spouse will be Rs.1.5 lakhs per annum.

(b) The reimbursement will be as per Govt. rates or as per 30% of the reimbursement rates whichever is less except medicines which shall be at actuals.

(c) Retired Employees will not be eligible for reimbursement of implants, artificial appliances.

(2) Contributory Scheme:

(a) The facility of reimbursement of medical expenses at rates at par with regular employees will be extended under this Scheme on non-refundable payment per family (self & spouse) as under:

Date of Retirement Amount of Onetime Payment

Retiring after 01.09.2025 **(i)** All Workmen Rs. 20,700/-

(ii) Up to Manager (E4) Rs.
23,000/-

(iii) Sr. Manager(E5) to DGM(E7)
Rs. 28,750/-

(iv) GM(E8) and above- Rs.
34,500/-

Contribution amount to be revised at a frequency of three years.

(b) The upper limit under this Scheme will be of Rs. 12.00 lakhs p.a. per family with reimbursement rates as applicable to serving employees subject to Clause No.9 below.

(c) If retiring employee has no surviving spouse he/she needs to be given option to pay (i) Full contribution to avail upper limit of the scheme of Rs.12.00 Lakhs per annum. (ii) Half the contribution to avail upper limit of the scheme of Rs. 6.0 lakhs per annum.

The same will be applicable to deceased employee's spouse after retirement age of deceased employee.

(d) The future retirees will have to express their consent for availing the facility before the last day of their service in the prescribed format.

(e) The benefit under the scheme shall be available from the date of joining the scheme by paying full applicable contribution.

(f) Reimbursement to retired employees (only under contributory scheme) in respect of the following items is limited as under:

(i) For implants and stents government notified (NPPA) rates (If available) shall be paid at actuals.

(ii) Cost of implants, such as stent, steel rods in bones, joint replacement, etc. re-imburement will be as per NPPA. If rates are not defined in NPPA, then reimbursement will be as per CGHS rates, If rates are not defined in CGHS, then reimbursement will be as per MRR rates or actuals which ever is lower. If rate is not defined in NPPA/CGHS/MRR then reimbursement is limited to 75% of the cost of invoice value or Rs 1 lakh whichever is lower.

(g) No refund will be available in the event of the demise of either or both the beneficiaries of the family of the retired employee/ eligible VRS optees.

(h) For indoor medical services, the reimbursement rates applicable to the retired employees / eligible VRS optees will be as per the following slabs.

Proposed Slabs		
From	To	Entitlement slab
Plant Att., Maz. A1	Sr.Plant Att. & equiv. (A4)	I
Opt Gr-III & equiv. A5	Sr. Optr.(SG) & equiv. A11	II
Sr Optr SG I & equi. A12, Asst. Officer & equiv.E0	Sr Optr SG II & equi. A13 and Officer (E1)	III

Sr Engineer E2	Manager E4	IV
Sr Manager. E5	DGM E7	V
GM (E8)	ED	VI
Directors	CMD	VII

i) Voluntary Retired Employees:

Specific Group of Employees who were separated by Voluntary Retirement prior to 10.4.1989 and on or after 12.2.2003 under the Voluntary Retirement Scheme relaunched with benefit of medical facility vide Circular No.117 dated 12.2.2003 will be entitled for medical facilities at par with superannuated employees.

j) Contractors and their staff/Casual

Employees/Mathadis :

Contractors and their staff/Casual Employees/Mathadis engaged for the Company work are eligible for free first aid Treatment at OHC/RCF Hospital only for injuries sustained while on duty.

k) Employees' Relatives: The relatives of the Employees other than dependent members of his family are allowed for Treatment in RCF Hospital only on payment basis at the rates prescribed by the Controlling Medical Officer and approved by the Competent Authority. Employee has to arrange for medicines and certain materials required for rendering certain services.

l) Contributory Scheme: The facility of reimbursement of medical expenses at rates at par with regular employees will be extended under this Scheme on non-refundable payment

per family (self & spouse) by payment of one-time payment of contributory scheme as mentioned in clause 6.f.ii.2a applicable at the time of joining of contributory scheme. The future retirees will have to express their consent for availing the facility before the last day of their service in the prescribed format.

m) Employed Spouse: Medical Treatment will be allowed if the husband or wife, as the case may be, does not avail medical facilities provided by his/her employer in case he/she is employed. A certificate to that effect, issued by the employer of the spouse needs to be submitted by the Employee. The certificate should cover whether the spouse is getting any allowance in lieu of medical facility to self and or family members. If so, the Employee should deposit the said amount with the Company in case he/she chooses to avail medical facility from the Company for the employed spouse. It is the responsibility of the Employee to submit fresh certification, in case of any change in the position than the one which is declared / submitted to the Company.

7) MEDICAL ATTENDANCE & TREATMENT IN LOCALITIES WHERE THE MEDICAL FACILITIES ARE PROVIDED BY THE COMPANY.

- a) The employees and the dependent members of their Family shall ordinarily be entitled to Medical Attendance and Treatment as is available in RCF Hospital on verification of identity.
- b) **Employees residing in the Company Township and within 5 Km distance by road of RCF Hospital:**

Employees and their eligible dependents will have to take Treatment at RCF Hospital. or opt for treatment at their

preferred hospital on payment basis.

Reimbursement will be allowed in following cases:

- i) For those admissible services, for which facilities are available or not available in the unit hospital / Empaneled hospital / Diagnostic Centres.
- ii) If Employee opts for treatment at their preferred hospital on payment basis for services available or not available in Unit Hospital.
- iii) For admissible medicines/items, if a "No Stock Certificate" is issued by the authorized chemist of the Company is not mandatory.

All reimbursement claims shall contain other supporting documents as enumerated in reimbursement guidelines.

Reimbursements will be made at MRR or actuals; whichever is less, subject to upper limits as applicable.

c) Employees residing outside Township and where only Panel Doctors have been provided Employees residing outside Township and where only Panel Doctors have been provided:

Employees will have to select any doctors from the Panel of Doctors or preferred doctor from any locality of residence for availing Medical Attendance and Treatment.

Reimbursement will be allowed in following cases:

- i) For those admissible services, for which facilities are available or not available in the Empaneled hospital / Diagnostic Centers.
- ii) If Employee opts for treatment at their preferred hospital on payment basis
For above i) & ii) Panel Doctor / RCF Doctors Reference note is not mandatory.

iii) For admissible medicines/items, if a "No Stock Certificate" is issued by the authorized Panel chemist of the Company is not mandatory.

iv) If employee residing in panel area and opts not to avail Panel Doctor services and panel diary

All reimbursement claims shall contain other supporting documents as enumerated in reimbursement guidelines.

Reimbursements will be made at MRR or actuals; whichever is less, subject to upper limits as applicable

d) Employees residing outside 5 km and in marketing areas and where cashless medical facilities have not been provided by the Company:

1. Employees and declared dependent family members can take treatment at respective RCF Unit hospitals or
2. Employee may seek treatment on payment basis .They shall be reimbursed at RCF MRR applicable for place of treatment or actual; whichever is less.
3. For consultations with outside specialist, GP referral is not necessary for reimbursement.

e) Specialist Consultation/Referrals from RCF Hospital Where the nature of illness and the condition of the patient warrants, the Authorized Medical Attendant of the Company posted in RCF Hospital, with the prior approval of the Authorized Medical Officer / Controlling Medical Officer, can refer the Employees / their eligible dependents to pre-qualified private specialists /pre-qualified or approved laboratories / Pre-qualified or approved medical centers / pre- qualified Hospitals for consultation, investigation and Treatment. The actual expenses incurred for such referrals will be paid directly to the concerned, subject to the approval of Appropriate Authority. Whenever the service

provider does not extend the credit facility and there is no alternative than to obtain the service from such an institute reimbursement at MRR or actuals whichever is less will be allowed. However, in case of extreme emergencies, the Authorized Medical Attendant in at his / her discretion can refer any such case to prequalified private specialists / pre-qualified laboratories / pre-qualified or approved medical canters /pre-qualified Hospitals and inform the Controlling Medical Officer at the earliest.

- f) **Credit slip for purchase of medicines:** The Authorized Medical Attendant of the Company can issue the medicines to Employees and their eligible dependents through credit slips provided by the Company for purchase of medicines. Normally, for acute short illnesses, medicines would be issued for a period of three to four days according to the merit of the case but in chronic cases it may be issued as per prescription of doctor. However, for more chronic ailments like Tuberculosis, Hypertension, Diabetes, IHD, Epilepsy, Asthma etc. all the Authorized Medical Attendants from RCF Hospital irrespective of their grade / Panel Doctors (General Practitioner) can issue medicines through credit slips for a maximum period of three months requirement at a time. If a person is going abroad or outstation with in India, in those cases medicines lasting for 6 months can be issued with the approval of Head of Department (Hospital).The Frequency of medicines on credit slip for purchase of medicines at unit hospital or panel areas or for reimbursement of purchase of medicines should be as per doctor prescription which is maximum 3 months with in India without approval or maximum 6 months for abroad with approval.

8) MEDICAL ATTENDANCE & TREATMENT IN LOCALITIES WHERE THE MEDICAL FACILITIES ARE NOT PROVIDED BY THE COMPANY

- a) In localities where the Company has posted its employees but has not provided Hospitals or medical facilities, an Employee may secure Medical Attendance and Treatment for themselves and eligible dependent members of their Families from any Authorized Medical Attendant. (General practitioner) as defined in **Rule 4** (f) in any Hospital and claim reimbursement limited to Schedule of Charges drawn by the Company. The admissible services not available with the Authorized Medical Attendant. (General practitioner) can be availed from the Authorized Medical Attendant. (consultants), other institutes, medical canters and hospitals and claim reimbursement limited to Schedule of Charges drawn by the Company. Full Reimbursement would be allowed if Employee would obtain Treatment in a Government Hospital.
- b) The above rule 8 clause a) is also applicable for those Employees residing in localities where the Company has not arranged any medical facilities.
- c) However, Employees residing in places beyond 5 km distance by road from RCF Hospital and availing OPD/Indoor Treatment for self or eligible dependents happen to take Treatment within 5 km radius from RCF Hospital, then they have to approach RCF Hospital for such treatment or they can opt for treatment of their preferred hospital/clinic/labs/diagnostics centre. That is, Employees residing beyond 5 km. distance by road from RCF Hospital wherein no facility of Panel Doctor/Panel Hospital is available, intend to take any Treatment within 5 km. radius of RCF Hospital, then they can make use of facilities available at Company's Hospital or they can opt for treatment of their preferred hospital/clinic/labs/diagnostics centre.

9. REIMBURSEMENT / RECOVERY OF MEDICAL EXPENSES:

Reimbursement of medical expenses incurred for the eligible

dependents and for Employees self, and recovery of medical expenses would be regulated as follows:

a) Reimbursement / Recovery of the cost of implants and various artificial appliances:

- i) Reimbursement of the cost of various artificial appliances such as artificial limbs, boots, calipers, lumbar belt, cervical collar, knee caps and expensive items like general orthopedic implants, pace maker, heart valve replacement, coronary stents, cardiac catheters, oxy generators, etc. will be made with the approval of Controlling Medical Officer. In case of Employee's and its eligible dependents the Company will bear full costs as per NPPA/CGHS/MRR or actuals whichever is lower. If rates are not defined in NPPA, then reimbursement will be as per CGHS rates , If rates are not defined in CGHS, then reimbursement will be as per MRR rates or actuals which ever is lower. If rate is not defined in NPPA/CGHS/MRR then , employee has to bear the cost of appliances to the extent of 25% for treatment of his/her dependents. In case of Employee's own treatment or that of spouse the Company will bear full costs.
- ii) In case of total joint replacements when done for severe Rheumatoid Arthritis – Gr.IV , a vascular Necrosis – Gr.IV , severe Ankylosing spondylitis, Accidents, the company will bear full cost in case of children as per NPPA/CGHS/MRR or actuals whichever is lower. If rates are not defined in NPPA, then reimbursement will be as per CGHS rates , If rates are not defined in CGHS, then reimbursement will be as per MRR rates or actuals which ever is lower. If rate is not defined in NPPA/CGHS/MRR then , 25% of the cost of the implants will be borne by the employee in case of

children. In case of indications other than mentioned above, such as severe Osteo Arthritis etc. company will bear cost as per NPPA/CGHS/MRR or actuals whichever is lower. If rates are not defined in NPPA, then reimbursement will be as per CGHS rates, If rates are not defined in CGHS, then reimbursement will be as per MRR rates or actuals which ever is lower. If rate is not defined in NPPA/CGHS/MRR then , employee will bear 25% of the cost of implants in case of spouse and children.

However, in case of retired employees even covered under Contributory scheme, company will bear cost as per NPPA/CGHS/MRR or actuals whichever is lower. If rates are not defined in NPPA, then reimbursement will be as per CGHS rates, If rates are not defined in CGHS, then reimbursement will be as per MRR rates or actuals which ever is lower. If rate is not defined in NPPA/CGHS/MRR then , they will be required to bear 25% cost of implants irrespective of the type of indication for Surgery.

- iii) Wherever the recovery is @ 25% and 50% the same shall be reduced to 10% and 25% in case of employees in Slab I & II including for those retired in this category in case of the other employees in other slabs there is no change

- c) **Reimbursement / Recovery of the cost of the disposable surgical sundries etc.:** Reimbursement / Recovery of the cost of the disposable surgical sundries etc.: The cost of disposable surgical materials like cotton, syringes, needles, catheters, tubes, gloves, crepe bandages etc. in reasonable quantities will be reimbursed with the approval of the Authorized Medical Officer.

Following are not admissible - Expenses incurred on

Enhanced External Counter Pulsation Therapy and chelation therapies, Rotational Field Quantum Magnetic Resonance Therapy, therapies similar to Naturopathy Treatment, pain management unconventional, untested, unproven, experimental therapies, Stem cell Therapy, Immunotherapy without proper indication. Cost of spectacles and contact lens, walkers and crutches, wheel chairs, CPAP, BIPAP, Continuous Ambulatory Peritoneal Dialysis equipment, continuous infusion pumps and such other similar aids are not reimbursable.

- d) **Recovery/Deductions of Diet charges:** There is no deduction/ reimbursement towards diet charges. The recovery of diet charges of retired / regular employees is withdrawn (There will be no deduction towards diet charges. However, if the diet charges are mentioned separately by the hospital the same is reimbursable). Any Food (e.g milk) items in case of newborn baby admitted in NICU should be permissible.
- e) **Reimbursement / Recovery of Service Charges:** Payment of service charges subject to a maximum of 20% of cost of admissible charges as per the entitlement, shall be allowed and beyond this limit the service charges of the hospital are to be borne by the Employees even when the cases are referred by Controlling Medical Officer
- f) **Reimbursement of cost for medicines, consultations, various services, etc.:** While claiming reimbursements, Employees should enclose proper receipts in original obtained from medical centres / treating doctors for various services rendered. The receipts should indicate the specific dates on which each of such service was rendered and the amount received against each service. Individual bills / receipts exceeding Rs 25000/ should preferably mention the Aadhar Card no. / RCF HMS ID No. of the

treated patient alongwith Aadhar card / Birth Certificate / Employee ID Card copy of the treated patient stamped and signed by the treating centre.

- g) Reimbursement / Recovery of accommodation charges:** The rates prescribed for accommodation include room rent, ordinary nursing, diet, linen, waste disposals, and other related expenses on electricity, up keeping of beds etc. Hence, whenever any Hospital charges separately for some of these items, total payment against all the items put together should not exceed the prescribed reimbursement rate applicable to a given employee. The classification of cities applicable for deciding HRA will be applicable for deciding accommodation charges. The reimbursement will be restricted to the rates specified in the Schedule of Rates.

EXISTING		NEW	
slabs	Present Grade & Designation	New Slabs	Grades
1	A0(Plant Attendant) -09 (Optr Gr.I)	Non Officers 3 slabs	1. Plant Attendants all grades 100%
2	11(Sr.Optr.)- E6(C.E)	Officers 3 Slabs	2. Gr.III – Gr.I (Optr/Tech) and eqv. 105%
3	E7 (DGM)- E9(ED)		3. Sr.- SG-3 (Optr/Tech) and eqv. 115%
4	Directors-CMD		4. E0- E3 115%
			5. E4- E6 120%
			6. E7- E9 130%
			7 Directors-CMD – 140%

- h)** The reimbursement rates prescribed for different services are applicable to outdoor services. For services, when availed as indoor patient, slab wise reimbursement rate will be applied as defined in MRR or at actual, whichever is less.
- i)** Reimbursement for services where the rates are not prescribed: Reimbursement rates are prescribed for the commonly availed services. For other services, wherever the rates are not prescribed, the rates charged by three different standard institutes in Mumbai are compared and the lowest of these rates should be accepted for (X) class of cities. For all the remaining places, 80% (as per class of city) of this rate should be applicable. The same rates should be reimbursed till the next revision of all the rates after every two years.

10) GRANT OF MEDICAL ADVANCES

- a)** The Approving Authority subject to his delegation of power vested for granting medical advance set out in sub-clause c) of this rule, may, on the certification of Controlling Medical Officer as to the duration and approximate cost of treatment and on the terms and conditions set out in sub-clause b) of this Rule, grant an advance to Employees for Medical Attendance and Treatment when they or the eligible dependent members of their Family are taking treatment.

- i)** as an in-patient in a Hospital or private clinic

- ii)** as an outpatient in cases of TB, Cancer, chronic renal disease, AIDS and Thalassemia etc.

- b)** The advance will be subject to the following terms and conditions:

- i)** The amount of advance shall not normally exceed twenty months Basic Pay or 85% of the anticipated expenditure

or admissible reimbursement as per RCF MRR, whichever is less, on production of certificate from Authorized Medical Attendant of the Hospital where the patient is undergoing Treatment and certification of the same by the Controlling Medical Officer. Granting of advance is admissible for treatments costing Rs 50000/- and more. For obtaining advance, submission of treating doctors report with details of diagnosis, plan of management, duration and hospital's cost estimate is necessary.

- ii) Ordinarily not more than two advances shall be granted for the same span of illness or injury provided the maximum advance amount is less than 85% of the upper limit of ceiling for medical expenditure for that FY.
 - iii) The advance shall be adjusted against the reimbursement that is admissible and any excess shall be recovered from the Employee in one or more instalments.
 - iv) The employee shall take treatment within 30 days of receiving advance for the said treatment. Further, for treatment not taken within the stipulated period, a 2.0 % interest/per month charge on the advanced amount will be recovered from the employee. The Employee should submit his reimbursement claim on the expenditure incurred against advance drawn within four month of incurring the expenditure or discharge of the hospitalized patient whichever is later. Failure to submit the proof of start of treatment and submission of the medical claim(s) to the Medical / finance department within four months of drawing the advance will result in recovery of entire advance.
- c) The Delegation of powers for granting Medical Advance shall be as per DOP clause 42.3.0.

11) GENERAL GUIDELINES

a) Medical Record: Records of all patients availing Treatment at RCF Hospitals / Panel Doctors

/ Panel Hospitals will be maintained as under:

- i) Employee-wise record will be maintained in Computerized System to the possible extent at RCF Hospitals.
- ii) Medical Booklet System will be maintained only in the panel area for the purpose of identity, entitlement and keeping medical records. Separate booklets will be issued to employee & each of his / her eligible dependents. Photographs are to be affixed on each booklet and the cost of photographs is to be borne by the employee. No booklets will be issued for patients residing within 5 km from RCF Hospital. Carrying the booklets by the patients & the entry by the Doctors is essential. Systems should be developed to update the change in entitlements.
- iii) Retired employees staying in panel area shall get their medical diary endorsed by HR

b) Time Limit:

- i) Claims for reimbursement of medical expenses to be submitted within six months from the last date of Treatment. In case of late submission, reimbursement shall be given at 90% of the sanctioned amount at RCF MRR (excluding the cost of medicines, which will be paid at actuals) applicable to place of treatment or actuals, whichever is less and period of late submission of medical claims cannot be more than 12 months from the last date of treatment.

1. Reference letters for treatment, investigations, Procedures and consultations will be permitted with a

validity of one month from date of issue. Prescription of medicines will be valid for period of one year from date of issue. Purchase of medicines will be reimbursed for a 3 months duration at a time without approval in India and maximum 6 months duration for abroad with approval.

2. Prescriptions for reimbursement will be considered valid if medicine purchased within one year from date of issue of prescription. Copy of Prescriptions on doctor's letterhead, mentioning their degree.

3. Wherever applicable original referral notes (signature) on letter head of doctor/hospital, original cash memos (signature), original bills (signature), original invoices (signature), original or copy of discharge cards are to be submitted in support of claim.

4. For investigation bills, photocopies of reports are admissible.

5. Bills for Homeopathy and Ayurveda treatments must also have proper prescriptions with names of medicines prescribed and their duration. Reference letters for treatment, investigations, Procedures and consultations will be permitted with a validity of one month from date of issue. Prescription of prescribed medicines, will be considered valid for period of one year from date of issue.

6. Reimbursement for purchase of medicines will be 3 months with in India and for abroad it will be maximum 6 months with a validity of one year from the date of issue of prescription.

c) Monetary Ceiling: Expenditure on a spell of treatment or continuous treatment within a financial year for active employee is Rs 15 lakhs per employee and Rs 15 lakh per eligible

dependent. Expenditure on a spell of treatment or continuous treatment within a financial year costing beyond Rs 25 lakhs will require the approval of Board of Directors.

Before a patient is referred to any outside hospital for treatment if the expected expenses for the case are more than Rs 15 lakhs, a written undertaking will be taken from the concerned employee that any expenditure in excess of Rs 15 lakhs, recoveries will be effected from them as under:

- a. Expenditure between Rs 15 lakhs to Rs 20 lakhs - Recovery at 10% of the amount over Rs 15 lakhs (Rs 50,000)
- b. Expenditure between Rs 20 lakhs to Rs 25 lacs - Rs 50,000 + Recovery at 20% of the amount over Rs 20 lakhs (Rs 100,000)
- c. Expenditure Rs 25 lakhs and above – Rs 1,50,000 + Recovery at 30% of the amount over Rs. 25 lakhs.

Subsequently, on completion of the said treatment / financial year after knowing the exact expenditure incurred in each case, Management will scrutinize the cases and deserving cases will be put up for the approval of Board of Directors for expenditure in excess of Rs 25 lakhs. Board will consider the individual case on its merit for the approval of the reimbursement of the medical expenses. In other cases, the cost of treatment beyond the ceiling limit is to be borne by the employee.

- d) Travelling Allowance:** Patients needing ambulance for active and retired employees will be paid as per MRR or actuals whichever is less for indoor treatment.
- e) Multidiscipline Treatment:** Allopathic, Ayurvedic and Homeopathic Systems of treatment are being practiced in RCF Hospital. Employees can avail Allopathic, Ayurvedic or Homeopathic treatments.

Treatment for the same ailment should not be taken simultaneously in more than one system of medicine.

f) Planned Treatments involving expenditure above Rs.

500000/-

Employees should preferably inform the Appropriate Authority on the basis of recommendation of Controlling Medical Officer for any Treatment which involves estimated expenditure of more than Rs.5,00,000/- including the performance of Supra Major Surgeries such as CABG, Angioplasty, Renal transplantation, removal of brain tumor, spine surgery, total joint replacement, etc.

g) Treatment for prolonged and special diseases and other major issues:

i) Once the Employee or dependent member of his/her Family is detected to be suffering from the special diseases involving major medical expenditure of more than 10 lakhs, the course of effective Treatment is to be decided by a Panel of expert doctors of the same specialization (peers) constituted for the purpose. Except in case of emergency, accident cases reimbursement towards the cost of Treatment would be made with the approval of Competent Authority subject to the maximum ceiling amount fixed for any form of Treatment by the Board of Directors.

ii) For any other major medical issues requiring group decisions, a duly approved committee of three doctors consisting of two senior doctors representing both the units and an outside specialist in the relevant field will be constituted. The outside specialist can also be a Company's honorary doctor. The committee will meet periodically as per the requirement.

h) Reimbursement for Infertility Treatment: Treatment for Infertility:-

Detailed guidelines in clause 4.o.vi.

i) Treatment of Eye Diseases

The reimbursement of cost of Intra-Ocular Lens admissible up to Rs.5800/- per lens The supply of other visual aids such as spectacles and contact lenses is inadmissible. However, the cost of investigation to determine the power of intraocular lens is admissible .The Welders and Machinists category of employees would be provided with safety goggle titled with toughened power lenses with side shields and spectacles respectively once in three years by Safety Department. Lasik surgery for correction of refractive errors is not admissible; however, surgery for correction of squint will be admissible

j) Total Knee & Hip Replacement:

i) Generally, these joint replacements are inadmissible except when patient is suffering from severe Rheumatoid Arthritis – Gr IV, Avascular Necrosis – Gr. IV, Severe Ankylosing Spondylitis, Accidents. In case of employees, eligible dependents spouse/children/parents company will bear cost as per NPPA/CGHS/MRR or actuals whichever is lower. If rates are not defined in NPPA, then reimbursement will be as per CGHS rates, If rates are not defined in CGHS, then reimbursement will be as per MRR rates or actuals which ever is lower. In case of dependent children if rates are not available in NPPA/CGHS/MRR employee will bear 25% cost of implants.

ii) In case of replacement for reasons other than specified above, company will bear cost as per NPPA/CGHS/MRR or actuals whichever is lower. If rates are not defined in NPPA, then reimbursement will be as per CGHS rates, If rates are not defined in CGHS, then reimbursement will be as per MRR rates or actuals which ever is lower, if rates are not available in NPPA/CGHS/MRR then 25 % cost of implants will have to

be borne by the employee for treatment of employee and eligible dependents spouse/dependent children/parents. However, this treatment will be subject to recommendation of the Committee as specified vide Rule 11 (g- ii).

iii) In case of retired employees, the 25% cost of implants will be required to be borne by them in all cases if rates are not available in NPPA/CGHS/MRR.

k) Treatment of Alcoholics/Drug Addicts

Rehabilitation of alcoholic /drug addict active employees will be allowed once in their entire services in R.C.F. by admitting in specialized centers. Other dependent family members are not eligible for similar type of rehabilitation.

l) New Expensive Scientific Methods/ Techniques of Treatment:

Only the standard and widely accepted scientific methods of Treatment will be allowed. Any new and expensive modes of Treatment / techniques will be allowed only on the prior approval of the Competent Authority (ED-MEDICAL) and as per DOP. Such proposals should be presented to the Competent Authority. (ED-MEDICAL) by the Controlling Medical Officer only on the recommendation of the committee referred vide rule 11) g) - ii.

m) Entitlement of Class of Accommodation:

Employees holding the rank of Plant Engineer & above and his eligible Dependents are entitled for accommodation in the cabin subject to availability, if admitted in RCF Hospital. However, the head of the Medical department can allot a cabin even if a given Patient is not entitled, if isolation is indicated or circumstances warrant such an allotment. In case of patients admitted in other Hospitals, the entitlement of class of accommodation will

depend upon their designation and will be provided as per guidelines given by the management.

n) Sanction of Leave on Medical Grounds:

Issue of Medical certificates and their endorsement:

The sanction of all leaves on medical grounds should be supported by Medical certificates issued by an Authorized Medical Attendant of the relevant system of medicine indicating the period of sickness, diagnosis and the date of fitness. Employees will be allowed to resume duty only after the submission of medical fitness certificate. The Employees residing within 5 Kms distance by road from RCF Hospital should generally produce certificates issued by the RCF medical authorities except under special circumstances. Those residing in Panel Area have to produce medical certificates issued by Panel Doctors/doctors from Panel Hospital or RCF Hospital authorities.

The Employees residing at places beyond 5 kms from RCF Hospital and where Panel Doctors are not provided, the medical certificate should be issued by the Authorized Medical Attendant practicing in their area of residence or RCF Hospital authorities. However, if the period of sickness is more than fifteen days, such medical certificates issued by all outside doctors including Panel Doctors should be endorsed by authorized RCF Doctor.

- i) One day medical leave without medical certificate** will be allowed for maximum four times in a calendar year

ii) Special leave for specific diseases:

Special leave on full pay for the period not exceeding six months during the entire service will be granted to Employees suffering from following diseases after exhausting all leave to his/her credit.

- (1)TB (2) Cancer (3) Leprosy (4) Severe heart attack

(5) Paralysis (6) Mental disease (7) AIDS(8) SARS (9)
Swine flue

iii) Special Casual Leave for undergoing Sterilization Operations.

(1) Female Employees: Female employees who undergo tubectomy operations –whether puerperal or non-puerperal will be granted special casual leave not exceeding 14 days. Removal of Uterus or Hysterectomy will not be considered as family planning benefit except in case of hysterectomy for PPH.

(2) Male Employees: Male employees who undergo vasectomy operation will be granted special casual leave not exceeding six days. Special Casual Leave up to seven days to male employees whose wives undergo puerperal / nonpuerperal tubectomy operation subject to the production of medical certificate from the doctor who performed the operation, to the effect that presence of the employee is essential for the period of leave to look after the wife during the convalescence after operation. Weekly offs and closed holidays intervening in the period of special casual leave are not to be ignored while calculating special casual leave for the aforesaid purpose. Pre-fixing of regular leave to the above special casual leave will not be admissible.

(p) The employees who donated blood on working days may be granted special casual leave for that day only.

q) Reimbursement of Biological medicines:

Reimbursement of Biological medicines shall be

done as per overall monetary ceiling limit.

r) Bill Processing:

1. Computer generated (electronically generated) Receipts, Invoices, Bills, Cash memos etc manually signed or digitally signed should be valid for reimbursement of claims.
2. Photo copy of Medicines or Treatment prescribed on Booklet or Medical diary with doctor and patient details should be valid for bill processing.
3. For IPD/OPD treatments where medicine are dispense through internal system from in-house pharmacy, prescription is not mandatory. Photocopy of Invoices/Bulk Statement/Certified Document from hospitals of implants is permitted for bill processing.
4. Photocopy of prescription should be valid for bill processing for a period of one year from the date of issue.
5. Death Summary photo copy should be valid for bill processing.
6. Original or Photo Copy of Discharge card should be valid for bill processing.
7. In case of loss of original papers, affidavits as per annexure I to be submitted. All Photocopies of the bills to be attested by the treating doctor/specialist/hospital/clinic/labs.
- 8 It is Computer generated document , it does not require signature or similar wording should be valid for Bill Processing.
- 9 Settlement of Medical Reimbursement aged 80 years and above should be done on priority basis.
- 10 In house Pharmacy bill generated from e-chikitsa should be

considered as valid prescription for reimbursement.

11 Consultation charges on doctor letter head or doctor prescription or receipt/bill mentioning consultation charges should be considered valid for reimbursement.

12 Online receipts, online prescriptions, online chemist bills, online invoices/Bills, without having signature or having pre-printed signature (for e.g Tata 1mg, Metropolis, PharmEasy, Netmeds, Apollo Pharmacy, Suburban etc.) with payment details should be valid for bill processing where proof of payment through online method is attached like bank statement, g-payment screenshot or physical receipt of payment which must be obtained on receipt of the medicines.

13 Invoices/Chemist bills/cash memos, receipts of QR Coded, Bar Coded, POS (Point of Sale) without having signature or having pre-printed signature, and are electronically generated or computer generated with payment details should be valid for bill processing where proof of payment through online method is attached like bank statement, g-payment screenshot or physical receipt of payment which must be obtained on receipt of the medicines.

14 The consumption of medicines/injections, duration of medicines, dosage of medicines/injections to be mentioned on the prescription for re-imburement.

15 Injections prescribed and administered by the doctor on doctor prescription should be supported by invoice or receipt cum invoice or invoice should be valid for reimbursement otherwise administration charges will be reimbursed.

16 Medical bills will be reimbursed at CGHS rates at empaneled hospitals except for Tata Memorial Center.

17 RCF Doctors prescription will be valid for reimbursement of medical bills.

18 Robotic assisted procedure related to robotic consumables/instruments with 50% of instrument value in line with MATR Policy will be reimbursed.

19 Annual Health check-up package once in a year for Active self and spouse is admissible. For Male it will be Rs 800 and for Female it will be Rs 900 as per CGHS.

20 Reimbursement for Occupational Therapy, Speech Therapy and Applied Behavior Analysis (ABA) based behavioral therapy in individuals with Autism Spectrum Disorder (ASD)/Non-autistic person/children with ADHD and specific learning disabilities will be as per guidelines for availing treatment under CGHS.

- s) For any rules which are not covered in MATR or MRR, CGHS will serve as guiding principle and will be implemented.
- t) Any in-admissible drug or admissible drug which is in medicine form whose end use is for improvement of patient health and which is prescribed by the doctor should be permitted.
- u) Following Non Admissible items are made admissible Insulin Analogues like lantus, levimir, humalogue, degludec Regular Insulin Refill cartridges ,corn caps , Allopathic drugs by Ayurvedic/Homeopathy doctors are admissible only for active & retired employee's and employee eligible dependents . In near future any non admissible items can be made admissible by the approval

of competent authority or Head of Hospital (Medical HOD).

v) Coronary stent and ballons as per need of patient should be permitted.

w) Tele Medicine: To facilitate the employees, which needs frequent visit of hospitals for medicines, Tele medicine facility service should be provided at RCF unit hospitals for senior citizens.

x) Exclusions

Exclusions: Following is the indicative list of items which are non-admissible not limited to the following and which will be not reimbursed.

1 Advertised products/OTC products.

2 Alovera containing creams and lotions.

3 Beverages, cold drinks, tea, chocolates, ice creams etc.

4 Toothpastes, shaving creams, cosmetic shampoos.

5 Cosmetic creams, cold creams, moisturisers and lotions.

6 Corn Caps.

7 Drugs containing primosa oil, Ginseng, Grape seed, Kojik Acid, Pine bark Extract, Green Tea Extract etc wheat grass / cranberry extract comb, gloeye etc.

8 Food and nutritional supplements like easum, resource, ensure, milk powders, Baby food products, Eno salt.

9 Savlon /Dettol liquid for home use.

10 Cassete/CD.

11 Imported drugs.

12 Vit E Cream/ lotions/ Pregnacreme, Olive oil.

13 Gown, Plastic sheet, Plastic apron, Plain sheet, titanium adapter for dialysis.

14 Antiperspirent talcom powders.

15 Refreshing mouth washes like listerine,clohex etc.

16 Sanitary pads, Underpads, bed bath wipes, diapers, patient utility kit.

17 Inhaler devices like rotahalers, spacers autohalers, physiotherapy devices,hot pads, adapters.

18 Glucose strips, lancets (for home glucose monitoring).

19 Minoxidil containing -lotions & tablets.

20 V-wash gel(lactycid), Face wash gel etc.

21 Lozenges like Strepsils,Vicks etc.

22 Sunscreen lotions/creams like sunban,sunlite etc.

23 Protein supplements like GRD, Proteinex, Spert etc.

24 Ayurvedic products-Brain tonic, hair oil, badam/chandan tel, advertised products, food products like shatavari, chavanprash, soap etc.

25 Anti Obesity drugs like Reshape etc.

26 Collaflex and similar satchets etc.

27 Artificial Sweeteners etc.

28 Drugs containing Amino acids and food ingredients.

29 Orthopaedic appliances like walkers, sticks, splints and supports, orthopaedic shoes etc.

30 Skin lightening cream/Lotion.

31 Herbal products.

32 Analgesic sprays.

33 Hand sanitisers.

34 Any other non-admissible procedures/test/investigations etc.

11.y Guidelines for claiming the reimbursement of medical bills

Following is the indicative list for claiming the reimbursement of medical, not limited to the following

1 Medical Reimbursement form should contain employee number, Mobile Number, Email address, claimed amount, signature, period of treatment etc.

2 The medical reimbursement form along with other documents has to be submitted physically at unit hospitals or through courier or by post also

even after submission of online medical form.

3 All original invoice, original receipts, original bills, original cash memos, original receipt cum invoice should be submitted with the bill. Non submission of documents will lead to delay in processing of medical bills and deduction in medical bills.

4 Xerox copy or original copy of Dental X- Ray report or printout of x-ray film should be provided wherever applicable. Report should contain the name of the patient, date and report should be clear for doctor to understand. Non-submission of documents will lead to delay in processing of medical bills and deduction in medical bills.

5 Wherever applicable signature on the document should be there as per MATR. Non-submission of documents without signature wherever applicable will lead to delay in processing of medical bills and deduction in medical bills.

6 All Xerox copy or original investigations reports like CT SCAN, MRI, Sonography, Pathology reports, Discharge car/summary, x-ray etc. should be submitted. Non-submission of documents without signature wherever applicable will lead to delay in processing of medical bills and deduction in medical bills.

7 Pharmacy bill/invoice/memos/receipts/receipt cum invoice should contain the name of the patient, date with signature applicable.

8 Medical bill will be reimbursed as per prescribed medicines with prescribed quantity and dosage, non-prescribed medicines, non-admissible medicines/investigations will not be reimbursed. Prescriptions will be valid across India and employee can purchase medicines anywhere in India.

9 For reimbursement of claim for medicines and tests like cbc, sugar, liver profile , kidney profile, CT-SCAN, MRI, Sonography, x-ray etc. it has to be

prescribed by the doctor. Self-medication and self-testing without doctor prescription is not reimbursed.

10 The sanctioned amount will not be always be claim amount; the medical bill is processed as per MATR policy.

11 Reimbursement of medical bill will be at CGHS rates at empaneled hospitals/clinic/centers except Tata Memorial Center.

12 Total Knee Replacement and Total Hip Replacement need prior medical board approval. Without prior medical board approval, the medical bill will not be reimbursed for Total Knee Replacement and Total Hip Replacement.

13 Retired employee and eligible dependent will be Rs 12 lakhs per financial year per family. Active employee and eligible dependent will be Rs 15 lakhs per person per financial year.

14 Dental implants, dentures, crowns, bridge work, orthodontic work and other specialized dental work, which is of the nature of beautification is not admissible and will not be reimbursed.

15 Naturopathy treatment, unproven procedure or treatment, experimental or alternative medicine and related treatment including Acupressure, Acupuncture, Magnetic, Occupational therapy, hydro therapy, Mud therapy, Pain Management, Haldi dressing therapy, rope therapy, massage therapy, spa, unani therapy, siddha therapy and any such other therapies etc. are not admissible and will not be reimbursed.

16 Test like CT-SCAN, MRI, Sonography, blood tests, x-ray, ECG etc. prescribed by the doctor is done by the employee but reports are not submitted, deductions will apply for that tests.

17 As consultation charges are dependent on Doctors degree and doctor degree like MBBS, MD etc. is not mentioned on the prescription. This lead

to delay in processing of medical bills and deduction in medical bills.

18 Any kind of verbal communication from RCF Doctors/Panel Doctors/Honorary Doctors/Medical office/visiting doctors/empaneled hospitals etc. that amount will be reimbursed will not be applicable for reimbursement, the medical bills will be processed as per MATR policy and document received not for any verbal communication.

19 To avoid the delay in processing of medical bills, it is requested to submit the shortfall of documents as soon as possible.

20 To avoid the deductions and delay in processing of medical bills, it is requested to submit the hospital bills or any bills with detailed breakup.

21 Claimant can check the status of medical bill on RCF Parivar app or e-chikitsa app or on the internet browser website of e-chikitsa links is (<https://echikitsambr.rcfltd.com/RCFEMPPORTAL/>) or by clicking on internet browser then rcfltd.com next click on portals then click echikitsa medical reimbursement system, instead of making multiple calls to the RCF Hospital.

22 Regarding any help for Parivar app or echikitsa app, employee can contact to Information Technology department.

23 Regarding declaration of dependent, mobile number, email address or any details to be updated in e-chikitsa, employee has to contact respective HR Department (Corporate for officers and marketing, Unit for Non-officers.).

23 Separate medical bill is to be submitted for Self, Spouse and eligible dependents.

24 Detailed Procedure details or surgery details are required for processing of medical bills wherever applicable.

25 Medicine details should be provided wherever applicable.

26 Root canal details when the root canal was done with date and procedure details of root canal and when the cap was done with cap details with date. Dental x-ray details are required to be submitted.

27 Ayurvedic /Allopathy/Homeopathic medicines details should be provided on the prescription with the name of patient, date ,quantity and duration of dose.

28 Injection/vaccine details should be provided on the prescription for reimbursement of medical bills.

29 Advance receipts in case of IPD patients.

30 Original/Photocopy of discharge card/discharge summary to be submitted in case of IPD patients.

31 Original Implants invoice /stickers/labels are required to submitted wherever applicable.

32 Bills claim from insurance company should contain all documents with details and sign wherever applicable.

33 Regarding deduction details before raising the query or concerns, following check-list should be checked first

1. Whether all documents are sent with the medical bill with signatures wherever applicable.

2. Pharmacy/Medicine/Receipts/Invoice bill does not contain signature wherever applicable.

3. Doctor degree is not mentioned on the prescription document.

4. Test of X-Ray, ECG, Blood test, CT-Scan etc is done by the employee but it is not prescribed by the doctor.
5. Test of X-Ray, ECG, Blood test, CT-Scan etc. is done by the employee and prescribed by the doctor but report is not submitted.
6. Dental procedures require dental X- Ray but report or Report of film copy is not submitted.
7. Non-Admissible medicines or non admissible procedures or non-admissible investigations etc. are done by employee which are not reimbursed.
8. Sometimes Non-admissible procedures/medicines/investigations etc are prescribed by the doctors, it will not be reimbursed.
9. As reimbursement is done as per MATR policy and Medical reimbursement rates, there is no scope of deduction. Difference between claimed amount and sanctioned amount is due to hospital/center rates charged by the hospitals/centers.
10. For reimbursement of bills, detailed breakup of items is always required but bills are submitted without breakup.
11. Physiotherapy treatment taken without prescription.
12. Prescription does not contain the name of patient and date.

34 Medical Bill Process :- Medical Bills are processed as per MATR Policy for the bills submitted for reimbursement. Medical Bills for reimbursement are submitted by the employee with all the documents required for claim settlement.

Medical Bill is physically received at RCF unit hospital and the Medical Bill is inward in the system, the bill is processed by medical office team and checked for shortfall of documents if any and it is checked by Medical officer and at the same time discussed with the concerned doctor for processing and the bill is forwarded to the doctor, concerned doctor process the bill and for any doubt or query in the bill or for clarity of information if required it is consulted with the senior doctor.

Once the bill is processed by the doctor and if there is any further query it is again forwarded to the medical officer and if bill is complete then it is forwarded to medical finance hospital for processing of bill.

After the medical bill is processed by medical finance, a lot is prepared and bill in that lot are sent to unit finance admin building for payment.

The Payment of Bill is processed at the unit finance admin building and the payment is credited to the employee account as per bank details maintained in the SAP System.

35 Payments to the employees are not done on daily basis, preferably for active employee it is done thrice a month and for retired employees four times a month. The frequency of payment will vary depending upon the number of bills, technical, functional or any other issue it can be increased or decreased also.

36 The MRR (Medical Reimbursement Rate) document contain exhaustive list of the rates in medical terms for all kind of diseases from head to toe which covers consultation, Investigations, Sonography, Radiology, Chemotherapy, TB, Cancer, Diabetes, MRI Scan, Nuclear Scan, Endoscopy, Ophthalmology, Oncology, Cardiology, Urology, Urology-Lithotripsy, Surgery Pkg-Ortho, Gyn & Obstetrics-Pkg, Implants & Art.Appl. etc. The MRR document is internal document which is internal to the company policy.

37 List of Vaccines not permitted for children under routine immunization

- 1 Accellular vaccines like Pentaxim, Hexaxim, Tripacel, Boosterix etc.
- 2 Pentavalent vaccine combined with Inj Polio like Easy 6, Hexaxim etc.
- 3 Influenza vaccine like Influvac, Vaxigrip, Fluarix, Fluquadri etc.
- 4 Typhoid vaccine like Typbar, Typbar TCV etc.
- 5 Hepatitis A vaccine like Biovac A, Havrix etc.
- 6 Varicella vaccines like Varivax, Nexipox, varilrix, Biovac V etc.

38 Cosmetic and Bariatric Surgeries are not admissible and reimbursable.

39 If bank details for reimbursement of medical bill is changed, then the claimant has to submit the KYC document available on www.rcfltd.com along with PAN card and Copy of cheque to the medical finance of the respective unit hospitals.

40 Timeline for settlement of medical bill reimbursement will vary from 45 days to four months provided medical bill is complete in all respects and timeline will increase depending upon various factors, number of bills submitted, incomplete bills without documents, bills waiting for receipt of documents from employee.

41 Employees are requested to check the bank account or update the passbook before enquiring from the medical office regarding amount not credited in the account.

42 Reimbursement is done as per MATR Policy, MRR (Medical Reimbursement Rates), CGHS Rates, it is not done on the higher charges charged by the hospital/clinic/doctors/etc. even if the bill is submitted with

all valid documents. There will always difference in claim amount and sanctioned amount.

43 Prescription is not required for consultation charges of reimbursement.

44 Generally if all the guidelines and MATR rules are followed there is no need for individual communication. However if additional documents are requested by medical office, employee should respond quickly to such emails/phone calls/in-person and furnish the required information within 7 days to two months from the date of communication. If still the required information is not submitted with in maximum six months from the date of communication, the claim would be settled based on the documents already submitted and the claim would not be reopened again.

11.z Interpretation of MATR Policy:

The power to interpret the MATR Policy, in case of doubt, vests with the Chairman & Managing Director of the Company, whose decision shall be final and binding.

For any matter arising that is not covered by these rules, the Central Services medical rules will serve as guiding principles and will be implemented after obtaining approval of Competent Authority.

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