1. Title and Scope:

The Scheme shall be called “SCTIMST Employees’ Contributory Medical Scheme.” (herein referred to as Contributory Medical Scheme- CMS). The SCTIMST CMS is meant for comprehensive medical attendance and treatment for SCTIMST Employees and Pensioners and the dependant members of their family.

2. Aims and Objectives:

The aim of the scheme is to provide some relief to SCT Employees and its Pensioners. A contributory Medical Scheme is hereby proposed to provide comprehensive medical care to the employees and Pensioners and their dependents, widows and family pensioners.

The SCT CMS is optional. Employees in service who do not want to opt the SCT CMS may continue to get the medical benefits under the CSMA Rules without the medical treatment in recognized private hospitals covered under the new CMS and the pensioner who do not want to opt the SCT CMS may continue to receive Medical Allowance prescribed by the Central Government from time to time. Those in receipt of the CSMA benefits and Medical Allowance are not permitted to avail the benefits of SCT CMS (reimbursement of medical treatment etc.) In short an in-service employee and a retired pensioner, who opt to have medical treatment in recognized private hospitals by contributing to the CMS are only entitled to get the benefits of the CMS with upper ceiling prescribed for both OP/IP treatment in recognized private hospitals. The in-service employees will have the choice of opting out of the SCT CMS at the beginning of the financial year (April) only and continue to avail the medical facilities strictly as per the CS(MA) Rules. The option/re-option in writing is permissible only twice in the entire service and only one Scheme will be applicable in a financial year.

3. Date of Effect:

The scheme shall come into effect from the date of approval of the CMS by the Governing Body of the Institute.
4. **Applicability:**

4.1 The scheme is applicable only to:

a) In-service permanent employees on the roll of the Institute and Pensioners of the SCTIMST and members of their family normally residing with them and wholly dependent on them.

b) Members of the family of a deceased employee who was in the permanent employment of the Institute, including the family of retired employee after his/her death.

c) A pensioner re-employed in the Institute and members of his/her family provided he/she is not covered by any other medical scheme in earlier pre-retirement service and opts for SCT CMS.

d) The family of the deceased employee may avail of the benefit of the scheme for the whole of the month in which the employee died as well as the succeeding calendar month without payment of contributions for the said succeeding month.

5. **Definition of ‘Family’:**

5.1 Family* for the purpose of the scheme in terms of rule 4.1(a) and 4.1(c) in respect of retired pensioner of the SCTIMST shall mean:

a) A beneficiary’s wife or husband, as the case may be.

b) Dependent sons and step sons till they start earning or attain the age of 25 years, whichever is earlier.

c) Daughter till she starts earning or gets married, irrespective of the age limit, whichever is earlier and unemployed widowed daughters and dependent divorced separated daughters.

d) Non-employable physically/mentally challenged children/brothers/sisters, irrespective of age limit.

e) Wholly dependent parents who are not covered by any other Medical Scheme and whose combined monthly income is not more than Rs.1500/- PM excluding Dearness Allowance where applicable.

f) Sisters (unmarried and unemployed except judicially separated divorced sisters)

g) Unemployed minor and dependent brothers till they start earning or attains the age of 25 years, whichever is earlier.

*Note: The concerned family member should be dependent on pensioner and should normally reside with him/her. To start with, only outpatient (OP) treatment cost with upper ceiling prescribed would be reimbursable in respect of the dependant family members of a pensioner, except the spouse.
of the pensioner, who along with the pensioner would be eligible to get both IP & OP reimbursement subject to the ceiling prescribed.

5.2 Family for the purpose of the scheme in terms of rule 4.1 (b) in respect of members of the family of deceased employee shall mean:

i. Wife in case of male Government servant or husband in case of a female Government servant.
ii. A judicially separated wife or husband
iii. Son who has not started earning or till he starts earning or attains the age of 25 years, whichever is earlier, and unmarried daughter till she starts earning or gets married, irrespective of the age limit, whichever is earlier, including such son and daughter adopted legally.

6. **Annual Declaration:**

6.1 A declaration in the prescribed form regarding income and residence of parents, as also regarding residence, dependence and age of eligible children and other dependants, should be furnished by the beneficiary at the time of initial registration and at the beginning of every calendar year thereafter for continuation of the Contributory Medical Scheme facilities.

6.2 It shall be the responsibility of the beneficiary concerned to notify to the Institute as soon as his/her sons/daughters, parents or other dependents become ineligible for the benefits of the Scheme so that their names can be deleted from the list of Contributory Medical Scheme beneficiaries. Any suppression of information would lead to withdrawal of the facilities under the Scheme to the pensioners and the in-service employees are liable even for disciplinary action.

7. **Contributions/Subscription:**

7.1 Monthly contribution for availing SCT CMS facility:

<table>
<thead>
<tr>
<th>Sl.No.</th>
<th>Basic Un-commuted Pension (Rupees per month)</th>
<th>OR Grade Pay drawn by the Officer</th>
<th>Contribution (Rupees per month)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Upto Rs.3000/-</td>
<td>Upto Rs.1650/- per month</td>
<td>200/-</td>
</tr>
<tr>
<td>2.</td>
<td>Rs.3501 to Rs.6000/-</td>
<td>Rs.1800/-, Rs.1900/-, Rs.2000/-, Rs.2400/- and Rs.2800/- per month</td>
<td>300/-</td>
</tr>
<tr>
<td>3.</td>
<td>Rs.6001 to Rs.9000/-</td>
<td>Rs.4200/- per month</td>
<td>400/-</td>
</tr>
<tr>
<td>4.</td>
<td>Rs.9001 to Rs.18000/-</td>
<td>Rs.4600/-, Rs.4800/-, Rs.5400/- and Rs.6600/- per month</td>
<td>600/-</td>
</tr>
<tr>
<td>5.</td>
<td>Rs.18001 and above.</td>
<td>Rs.7600/- and above per month</td>
<td>800/-</td>
</tr>
</tbody>
</table>
Note:

i. Contribution under the scheme may be charged from the in-service employees from their monthly salary on the basis of the grade pay they draw and from the Pensioners on the basis of their last grade pay drawn or the basic un-commuted Pension/family pension, whichever is higher. Contributions should be deposited for 3 months at a time in advance.

ii. Pensioners can opt for making one-time payment on the lines of CGHS Scheme for Pensioners. The amount to be paid will be 10 times the annual contribution at the rate mentioned in the above table.

iii. Separate Account shall be maintained for the CMS contributory Fund and reimbursement cost account.

iv. In respect of those beneficiaries who have already retired the lump sum amount will be worked out on pro-rata basis assuming average life expectancy of 75 years.

v. The rates of contribution can be changed by the Institute from time to time depending on the viability of the CMS scheme.

7.2 In the case of retired employees who opt for this scheme, the subscription shall be recovered from them on their joining the scheme. Pay/Grade pay for the purpose of recovery shall mean pay as defined in FR 9(21) (a) (i) in Government of India Rules drawn by the employee at the time of his retirement or the un-commuted portion of the pension authorized.

7.3 In the case of deceased employee, the contribution shall be recovered from their family/family pension. Pay for the purpose of contribution shall mean pay as defined in FR 9(21) (a) (i) in Government of India Rules, drawn by the deceased employee at the time of death or the amount of family pension authorized.

7.4 In the case where both the husband and wife are employees of the Institute, the payment of contribution shall be regulated as under.

   a) The contribution shall be recovered from either husband or wife. The husband and wife shall send a joint declaration to the Accounts Section of the Institute giving detailed information in this regard. The rate of contribution to the Scheme will however be calculated at the rate applicable to the spouse drawing the higher pension.

   b) The person from whose pay-bill the contribution is recovered shall be regarded as the prime beneficiary and will be eligible to register his/her parents.
c) In case the spouse of the prime beneficiary wishes to additionally register his/her dependent parents, who are otherwise ineligible, a separate contribution shall be payable by him/her on the basis of his/her pay/pension.

d) The entitlement of parents shall be determined with reference to the grade pay/pension of the prime beneficiary in all cases.

8. Details of the Scheme:

8.1 SCT Employees/Pensioners would be “authorized” /“entitled” for the reimbursement (refund) of expenses incurred on medical attendance and treatment received mainly at Government hospitals/hospitals and medical colleges in different states recognized under Rule 2(d) of CS(MA) Rules, 1944/ Govt.Hospitals at Trivandrum/Kerala to the extent permissible under the CS(MA) Rules, 1944. A number of private hospitals were recognized by the central government under CS(MA) Rules in different part of the country for treatment of Central Government employees and their family members, but Trivandrum being a small city, unfortunately only one hospital, i.e. the Ramakrishna Mission Hospital alone is recognized for the purpose. This is a small hospital and advanced medical specialities are not covered at this recognized hospital. The Government Medical College Hospital and General Hospital in Trivandrum are abnormally over-crowded and the CSMA beneficiaries are practically unable to get easy/effective treatment in these government hospitals. In view of the hardship faced by the CS (MA) beneficiaries for their own treatment in Trivandrum, the following private hospitals are also recommended to be considered as recognized hospitals for the purpose of treatment of the employees/pensioners and their dependent family members subject to the upper cost ceiling prescribed. Maximum permissible amount of inpatient/outpatient treatment in these private hospitals would be within the ceiling given below so as not to adversely affect the smooth operation of the contributory medical scheme.

List of private/ recognized Hospitals:
(1) KIMS Hospital, Trivandrum
(2) Ananthapuri Hospital, Trivandrum
(3) Cosmopolitan Hospital Trivandrum
(4) PRS Hospital, Trivandrum
(5) Sree Uthradom Thirunal Hospital, Trivandrum
(6) Regional Cancer Centre, Trivandrum
(7) Vasan Eye Care Hospital, Trivandrum.
Annual upper ceiling for reimbursement for inpatient and outpatient treatment in government/recognized private hospitals

<table>
<thead>
<tr>
<th>Monthly contribution slabs</th>
<th>Ceiling per annum for inpatient treatment</th>
<th>Ceiling for outpatient treatment per annum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rs.200/-</td>
<td>Rs.35,000/-</td>
<td>Rs.10,000/-</td>
</tr>
<tr>
<td>Rs.300/-</td>
<td>Rs.50,000/-</td>
<td>Rs.15,000/-</td>
</tr>
<tr>
<td>Rs.400/-</td>
<td>Rs.75,000/-</td>
<td>Rs.20,000/-</td>
</tr>
<tr>
<td>Rs.600/-</td>
<td>Rs.1,00,000/-</td>
<td>Rs.30,000/-</td>
</tr>
<tr>
<td>Rs.800/-</td>
<td>Rs.1,25,000/-</td>
<td>Rs.40,000/-</td>
</tr>
</tbody>
</table>

The free treatment for heart and brain diseases in SCT Hospital for the in-service employees and pensioner and his/her spouse alone is excluded in computing the above upper ceilings and they will continue to be eligible to get free treatment at SCT hospital.

Entitlement for Wards in private recognized hospitals to be empanelled under CMS:

<table>
<thead>
<tr>
<th>Monthly contribution slabs</th>
<th>Ward Entitlement</th>
<th>Ward/Room entitlement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rs.200/- &amp; Rs.300/-</td>
<td>General Ward</td>
<td>Non-Ac Ward</td>
</tr>
<tr>
<td>Rs.400 &amp; Rs.600/-</td>
<td>Semi private ward</td>
<td>Non-AC private room</td>
</tr>
<tr>
<td>Rs.800/-</td>
<td>Private Ward</td>
<td>Non-AC/AC private room</td>
</tr>
</tbody>
</table>

The maximum room rent for different categories would be:
(i) General Ward Rs.500-999 per day
(ii) Semi-private ward Rs.1000-1499/- per day
(iii) Private ward Rs.1500-2000/- per day

Room rent mentioned 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, linen charges, nursing charges and routine up-keeping. During the treatment in ICCU/ICU, no separate room rent will be admissible.

General ward is defined as halls that accommodate four to ten patients. 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.
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.

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 higher category may be permissible, but the reimbursement can be made as per entitled rate (i.e. the extra expenditure over and above entitlement will have to be borne by the beneficiary and it is not reimbursable by the Institute)

Note:

A) Advance payment for medical attendance and treatment at private recognized hospitals is normally not permissible. Beneficiaries will settle the bill directly with the hospital/nursing home and such reimbursement from the Institute will be made which will be restricted to approved rates of the hospitals or CGHS approved rates, whichever is less.

B) "Medical Attendance" means attendance in the consulting room of the Medical Officer (Medical Attendant) or Government Hospital/recognized private Hospitals to which he is attached including such pathological, bacteriological, radiological or other methods of examination of the purpose of diagnosis as are available in the Government hospital or consulting room or in any other nearest Government Hospital/recognized hospitals and are considered by the Authorized Medical Officer (Medical Attendant) and such consultation with a specialist or other Medical Officer in service of the Government stationed in the district as the Authorized Medical Officers (Medical Attendant) certifies to be necessary to such extent and in such manner as the specialist or the Medical Officer may, in consultation with the Authorized Medical Officer (Medical Attendant) determine.

"Medical Attendance" includes attendance at the hospital dispensary (i.e. at the outpatient department) or at the residence of the SCT Pensioner or at the consulting room of the Authorized Medical Officer (Medical Attendant), whether maintained at the hospital or at his own residence by arrangement with him or at the recognized private hospitals for the pensioner or his/her spouse alone.

The “consulting room maintained by an Authorized Medical Officer (Medical Attendant) at a hospital” means consulting room at this residence, allotted to him in the hospital compound and that the Authorized Medical Officer (Medical Attendant) may charge fee for attendance upon or professional services rendered to any SCT employee/pensioner or a member of his family at the hospital premises during hospital/dispensary hours.
C) “Treatment” means the use of all medical and surgical facilities available at the Government hospital or private recognized hospitals in which the SCT employees/ Pensioners are authorized for treatment and includes:

i. The employment of such pathological, bacteriological, radiological or other methods as are considered necessary by the Authorized Medical Officer (Medical Attendant). Pathological, bacteriological, radiological or other methods of examinations for the purpose of diagnosis should be carried out only at a Government hospital or a Government laboratory or at the recognized private hospital unless this is absolutely essential owing to non availability of the facility at a Government Hospital duly certified by the Authorized Medical Officer (Medical Attendant) at the Government hospital of that particular place where the SCT employees/pensioners, beneficiary falls ill. At the time of claiming refund of expenses incurred on this account, the beneficiary of SCT CMS concerned should produce a certificate from the Authorized Medical Officer (Medical Attendant) that such examination were considered necessary by him.

The expenses incurred in connection with physiotherapeutic and occupational therapeutic treatment may be reimbursable to the extent these facilities are available at Government/ recognized private hospitals provided that the treatment is obtained to recoup certain physical weakness/defect which may have occurred as a result of some disease. No reimbursement will, however, be admissible if such treatment is obtained to improve general physical fitness/stamina for cosmetic purpose or to improve figure, etc.

ii. The supply of such medicines, vaccines, sera or other therapeutic substances as are ordinarily available in the hospital.

Treatment as an outdoor patient in any government hospital is generally free. If a SCT Employee/Pensioner attends a Government hospital/private recognized hospital as an outdoor patient and if the Authorized Medical Officer (Medical Attendant) prescribes the medicines which he purchases from the market, then the cost of medicines may be refunded subject to production of Essentiality Certificate in the prescribed form subject to the upper ceilings prescribed above per annum.

iii. The supply of such medicines, vaccines, sera or other therapeutic substances not ordinarily so available as the Authorized Medical Officer (Medical Attendant) may certify in writing to be essential for the recovery or for the prevention of serious deterioration on the condition of the beneficiaries except the preparations which are not medicines but are primarily foods, toilets preparations or expensive drugs, tonics, laxative etc for which drugs of equal therapeutic value are available.
Only such Ayurvedic, Unani, Sidha and Homoeopathic medicines are admissible for the refunds which are as per the list provided by the CS(MA) Rules 1944, amended from time to time.

In exceptional cases, however, reimbursement of the cost of medical treatment incurred on the advice of private practitioner can be reimbursed by the Director, SCTIMST by invoking CS(MA) Rule, if he is satisfied of the existence of special circumstances in which treatment could not be had through the Authorized Medical Officer (Medical Attendant) and refusal to reimburse such cost, is likely to cause undue hardship to the beneficiary under the scheme.

D) The entitlement for the hospital accommodation/nursing home/fixation of package/ceiling rates in case of treatment from recognized private hospital and diagnostic centers will be governed by the Ministry of Health and Family Welfare OM No.S11011/33/271-CGHS-Desk II/CGHS (P) dated January 20, 2004 and as amended from time to time. The recognized hospitals shall honour valid ID card and permission letter issued by the Institute and provide treatment/investigation facilities as specified in the permission letter and shall collect the payment from the beneficiaries directly.

E) The scheme will not reimburse the cost of the lens/frame prescribed by the eye specialist. Goggles will not be provided nor will it purchase be subsidized under the scheme. If the contact lenses are warranted, it will be permitted under the certificate of a recognized specialist subject to a reimbursement of Rs.500/-. For cataract operation including implants of IOI/multi-faced lens etc conducted through referral, the reimbursement will be limited to Rs.10000/- for each eye. The scheme will not reimburse the Maternity Benefits.

F) The SCT Employees/Pensioners and their dependant members are eligible to avail the outpatient services of the Staff Clinic of the Institute. The services of the staff physician/s of the Institute may be utilized for outpatient treatment and referral for outpatient/inpatient treatment at recognized private hospitals for the employee/pensioner and his/her spouse or dependent family members subject to the upper ceiling prescribed, but inpatient (hospitalization) treatment in private recognized hospital is restricted to pensioners & his/her spouse alone subject to the upper ceiling.

G) In case of treatment taken in emergency in any non-recognized private hospitals, reimbursement shall be considered by the Director of the Institute or any other official authorized for the purpose at the CGHS prescribed rates only subject to the prescribed upper ceiling.

H) In case, there is 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 or on actual basis to be decided by the competent authority. In case, however, where a beneficiary has to undergo dental treatment (not cosmetic dental treatment) in a recognized hospital, as a part of general medical treatment, such charges will be reimbursed as per the restrictions prescribed. The beneficiaries may also go to Govt. Dental hospital for dental treatment and the charges to the extent levied by them will be reimbursed including cost of medicines purchased on prescription.

I) Wherever the above rules are silent, the provisions in CS(MA) Rules would be applicable. Wherever there is conflict with SCT CMS Rules, the provisions of CS(MA) Rules would prevail and the decision of the Director of the Institute in this regard will be final and binding on all employees/pensioners.

J) In the case of misuse of the benefits of the CSM either by the employee or a member of his/her family, the Institute may withdraw temporarily or permanently the benefits of the Scheme to the concerned employee/pensioner and the dependent family members.

K) This Contributory Medical Scheme is planned for implementation on trial basis initially for a period of two years and its continuance will very much depend on its financial viability on contributory mode.

L) The Governing Body of the Institute is the competent authority to withdraw/cancel or discontinue the SCT CMS facilities without assigning any reason thereof, if it feels that it is impracticable to continue the scheme or even modify the scheme from time to time depending on the success of economically operating this contributory medical scheme. The Scheme shall be administered by the Sree Chitra Tirunal Institute for Medical Sciences & Technology, Trivandrum, who will exercise administrative and cognate financial powers within the scope of the Scheme as to be approved.

(Dr. Shankar Kumar) (P.B. Sourabhan) (Mahadevan R)
Medical Superintendent Deputy Director(Admn) Chief Accounts Officer

(Gopinathan K) (Chandrasekharan Nair)
Retd. Pool Officer & Retd. Sr. Receptionist &
President, SCTIMST Pensioners’ Forum General Secretary, SCTIMST Pensioners’ Forum.