

DELHI TRANSPORT CORPORATION
(GOVT. OF N.C.T. OF DELHI)
I.P. ESTATE: NEW DELHI

No. AdmnI/Medical Scheme/2022/83

Dated: 13.01.2022

CIRCULAR

Further to office order No.16 dated 27.08.1991, regarding Specialized Medical Scheme for DTC employees, it is for the information of all the officers/officials of this Corporation that in addition to existing medical rules, available in the scheme, the following rules/guidelines are hereby amended/modified and inserted in the Specialized Medical Scheme of DTC:-

A - Amendment/Modification in the Specialized Medical Scheme of DTC:

1. SUBMISSION OF MEDICAL CLAIMS:

Existing rule in Para-7	Modified
<p>For getting specialized treatment, a certificate from the concerned Regional Medical Board will be obtained by the employee and after obtaining the treatment, the bill will be submitted to the same Medical Board through the Unit Officer for verification and check. The concerned Medical Board, which issued certificate to the employee, will, after scrutinizing the same, return the bill to the Unit Officer for settling it.</p> <p>The Medical Board will maintain a certificate pad (in the existing prescription pad) in triplicate – 2 copies to the employee (one for submission in the Hospital, if necessary and one for enclosing with the claim bill) and the triplicate copy will be kept by the Medical Board for their record.</p> <p>All claim bills against specialized medical treatment invariably be submitted <u>within three months</u> from the date of completion of the treatment. Belated claim will require sanction from CMD and such cases should be routed through Administrative Officer (H.Qrs.).</p>	<p>All claims/medical bills against specialized medical treatment invariably be submitted <u>within six months</u> from the date of completion of the treatment in prescribed Performa as per Annexure-A. In case of medical advance, the claim bills be submitted <u>within one month</u> after taking the treatment, in the file along with the following documents/papers:</p> <ul style="list-style-type: none"> • Copy of Medical Card • Copy of valid Reference Slip of DTC Medical Board or intimation given to Medical Board/Unit concerned or copy of extract of D.O. Register. • Claim Performa properly filled & signed by the employee. • Prescription & cash memos be attached correspondingly, date wise along with N/A, where ever necessary. • Medicine can be purchased from open market without N/A, if the medicines are prescribed by the doctors of DTC, Medical Board or the doctors of Government Hospitals. But, in case of Empanelled Hospital, the N/A is compulsory. • In case of hospitalization, final bill along with detail bill be attached. • Only relevant documents regarding

<p>After submitting claim bills by an employee, the Medical Board will process each claim bill and return the same to the Unit Head within 7 working days from the receipt of the claim bills.</p> <p>The Accounts Department will also clear the claim bills within next seven working days.</p>	<p>illness & treatment be attached.</p> <ul style="list-style-type: none"> • Date of retirement of employee must be mentioned at noting sheet. • Link up with the previous advance files as well as continuous treatment.
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2. REIMBURSEMENT OF CLAIMS:

Existing rule circulated vide Circular No. AdmI-7(27)/2005 dated 29.11.2005.	Modified
<p>Further the reimbursement for medical treatment will be governed as under:-</p> <ol style="list-style-type: none"> I. In case of empanelled hospitals the reimbursement will be paid as per CGHS rules as per Letter No. Adm1-7(27)/2001, Dated-13.09.2001. II. Wherever CGHS rules are not available then the payment will be made as per AIIMS rate. In case, the rates are not available with CGHS/AIIMS, the actual payment will be reimbursed. <p>Where the treatment has been availed in emergency from the Non-Empanelled hospital, the reimbursement will be made in accordance with the AIIMS rates provided the information given to DTC Medical Board within 24 hours as per Office Order No. 16, Dated-27.08.1991.</p>	<p>The reimbursement for Medical Treatment will be governed as under:-</p> <ul style="list-style-type: none"> • In case of Government Hospital, the reimbursement will be paid as per Government Hospital rates. • In case of Empanelled Hospitals, the reimbursement will be paid as per CGHS rates/rules, Where ever, CGHS rates/rules are not available then the payment will be made as per AIIMS rates. In case the rates are not available with CGHS/AIIMS, the actual payment will be reimbursed. • Where the treatment has been availed in emergency from the Non Empanelled Hospital, the reimbursement will be made in accordance with the AIIMS rates, provided the information given to DTC, Medical Board/Unit concerned within 48 hours. In case the rates are not available with AIIMS rate list, then the payment will be made as per CGHS/DGEHS rates or actual, whichever is less.

3. SETTLEMENT OF MEDICAL CLAIMS:

Existing rule circulated vide Circular No. AdmnI-7(27)/2010/205 dated 10.03.2010	Modified
<p>Instances have to the notice that case file related to medical reimbursement of the employees of this</p>	<p>The time limit for settlement of medical claims will be as under:-</p> <ul style="list-style-type: none"> • Unit concerned forward the medical claim files to Medical Board for verification of bills within 7

<p>Corporation are delayed at various level, beyond reasonable time, which results in late payments.</p> <p>It is, Therefore, notified to all concerned that the cases of medical reimbursement should be dealt with expeditiously and should not take more than six weeks for finalization of the same except where the claim does not furnish the required documents/certificate or fails to do so during the prescribed time limit.</p>	<p>days.</p> <ul style="list-style-type: none"> • CMO, I/c Medical Board will clear the medical claim files and return to unit concerned within 10 days. • After receipt the verified medical bills from Medical Board, Unit/Depot/Admn will clear the bills and forward the same to Accounts Department for vetting the amount, within 7 days in the prescribed format as below:- <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">S. No.</th> <th style="width: 10%;">Bill No.</th> <th style="width: 10%;">Date</th> <th style="width: 15%;">Amt. Claimed</th> <th style="width: 10%;">Amt. Retrenched</th> <th style="width: 10%;">Amt. Admissible</th> <th style="width: 10%;">Cr. page No.</th> <th style="width: 10%;">Reason of retrenchment</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> <ul style="list-style-type: none"> • Accounts Department will vet the amount and return the same to unit concerned for sanctioning the admissible amount, within 7 days. • Unit concerned will issue the releasing letter within 7 days. • After issuing the releasing letter of the reimbursable amount, Accounts Department of Head Quarter is required to make payment within next 7 days. 	S. No.	Bill No.	Date	Amt. Claimed	Amt. Retrenched	Amt. Admissible	Cr. page No.	Reason of retrenchment								
S. No.	Bill No.	Date	Amt. Claimed	Amt. Retrenched	Amt. Admissible	Cr. page No.	Reason of retrenchment										

4. MEDICAL ADVANCE:

<p>Existing rule circulated vide Circular No. Admn-7(27)/2018/837 dated 24.07.2018</p>	<p>Modified</p>
<p>As per Resolution No.65/97, Item-37/97, the Board authorized the Chairman-cum-MD to sanction the advance of the required amount up to Rs. Two Lakh for treatment under Specialized Medical Scheme.</p> <p>Further, vide Resolution No.59/2018, Item-41/2018, the Board authorized MD, DTC to sanction the medical advance of the required amount up to 90% of the estimated cost for treatment as per CGHS guidelines in such cases, in future.</p>	<p>The medical advance may be granted up to 90% for all treatments (IPD & OPD) as per CGHS guidelines. The following documents/papers are required for granting the advance:-</p> <ul style="list-style-type: none"> • Copy of Medical Card • Copy of valid Reference Slip of DTC Medical Board • Requisition for advance quoted by DTC Panel/Govt. Hospital along with codes. • Dependent proof in case of family member. • Recommendation of Medical Board regarding advance. • Vetting by the Accounts Department. • In case of continuous treatment, the details of advance amount sanctioned earlier and its present status. • Any other supporting/relevant documents. • Date of retirement be mentioned on the file as well as on the face of the file.

B - The following rules/guidelines are inserted in the Specialized Medical Scheme of DTC:

1. COST OF MEDICAL CARD:
 - Cost of duplicate ordinary Medical Card will be Rs.10/- only.
 - Cost of duplicate Plastic Medical Card will be Rs.50/- only.
2. REFER SLIP FROM MEDICAL BOARD:

The Refer Slip issued by the DTC Medical Board will be valid for next six months from the date of issue.
3. CGHS RULES/GUIDELINES:

If any rule/guidelines are not available in DTC Specialized Medical Scheme, then CGHS rules/guidelines will be followed.

This has the approval of Competent Authority.



(B.S. Chauhan)
Sr.Manager (Admn)

All DMs / Unit Officers

CMO, DTC, I/c Medical Board

Addl. CAO

OSD to MD : for kind information please.

All HODs : for kind information please.

: Through Notice Board of all units