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Dated. 12/11/11

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**INDIAN COUNCIL OF AGRICULTURAL RESEARCH
KRISHI BHAWAN: NEW DELHI**

F. No. 21-44/2011-CDN

Dated the 17th November, 2011

ENDORSEMENT

The Government of India, Ministry of Health & Family Welfare issued the O.M. No. S.14021/37/2003-MS dated 16.6.2011 regarding Recognition of Goyal Hospital & Research Centre (P) Ltd. Jodhpur(Rajasthan) for treatment of Central Government employees under CS(MA), Rules, 1944. The above mentioned O.M. is being uploaded on the ICAR Web-Site www.icar.org.in for information and further guidance. This O.M. is applicable for the employees covered under CS(MA) Rules 1944.

(J.N. Bhagat)

Under Secretary (GAC)

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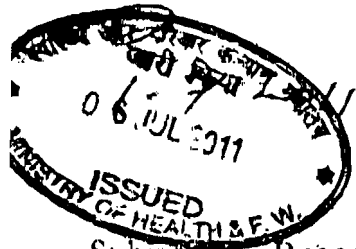
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No. S. 14021/37/2003-MS
Government of India
Ministry of Health & Family Welfare

Nirman Bhavan, New Delhi

Dated 16 June, 2011

OFFICE MEMORANDUM



Subject: Recognition of Goyal Hospital & Research Centre (P) Ltd. Jodhpur (Rajasthan) for treatment of Central Government employees under CS(MA) Rules, 1944.

The undersigned is directed to say that a number of representations from various hospitals, Central Government Employees Welfare Coordination Committees were received in the Ministry of Health & Family Welfare for recognition of Private Hospitals at Jodhpur (Rajasthan) for treatment of Central Government Employees and their family members under CS(MA) Rules, 1944.

2. In view of the hardships faced by CS(MA) beneficiaries for their own treatment and the treatment of their family members at Jodhpur (Rajasthan), the matter has been examined in the Ministry and it has been decided to grant recognition and empanel the Goyal Hospital & Research Centre (P) Ltd. Jodhpur (Rajasthan) under Central Services (Medical Attendance) Rules, 1944.

3. The Schedule of charges for the treatment of Central Government Employees and the member of their family under the CS(MA) Rules, 1944, will be the rates fixed for CGHS, Jaipur. The approved rates are available on the website of CGHS (www.mohfw.nic.in/cghs.html) and may be downloaded/printed.

4. The undersigned is further directed to clarify as under:-

(a) "Package Rate" shall mean and include lump sum cost of in-patient treatment/day care/diagnostic procedure for which a CGHS beneficiary has been permitted by the competent authority or for treatment under emergency from the time of admission to the time of discharge, including (but not limited to)-(i) Registration charges, (ii) Admission charges, (iii) Accommodation charges including patient's diet, (iv) Operation charges, (v) Injection charges, (vi) Dressing charges, (vii) Doctor/consultant visit charges, (viii) ICU/CCU charges, (ix) Monitoring charges, (x) Transfusion charges, (xi) Anesthesia charges, (xii)

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Operation theatre charges, (xiii) Procedural charges / Surgeon's fee, (xiv) Cost of surgical disposables and all sundries used during hospitalization, (xv) Cost of medicines, (xvi) Related routine and essential investigations, (xvii) Physiotherapy charges etc, (xviii) Nursing care and charges for its services.

(b) Cost of Implants/stents/grafts is reimbursable in addition to package rates as per CGHS ceiling rates for implants/stents/grafts or as per actual, in case there is no CGHS prescribed ceiling rates.

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

(d) Hospitals / diagnostic centers empanelled under CS(MA) Rules, 1944 shall not charge more than the package rates.

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

5. Package rates envisage duration of indoor treatment as follows:

Upto 12 days: for Specialized (Super Specialities) treatment

Upto 7 days: for other Major Surgeries

Upto 3 days: for Laparoscopic surgeries/normal Deliveries

1 day: for day care/Minor (OPD) surgeries.

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

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

6. (a) CS(MA) beneficiaries are entitled to facilities of private, semi-private or general ward depending on their basic pay. The entitlement is as follows -

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S.No.	Pay drawn in pay band	Ward Entitlement
1.	Upto Rs. 13,950/-	General Ward
2.	Rs. 13,960/- to 19,530/-	Semi-Private Ward
3.	Rs. 19,540/- and above	Private Ward

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

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

7. A hospital/diagnostic centre empanelled under CS(MA) Rules, 1944, whose rates for treatment procedure/test are lower than the CGHS prescribed rates shall charge as per actual.

8. (a) The maximum room rent for different categories would be:

General ward	Rs. 1000/- per day
Semi-private ward	Rs. 2000/- per day
Private ward	Rs. 3000/- per day
Day care (6 to 8 Hrs.)	Rs. 500/- (same for all categories)

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

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

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

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

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

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

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

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

10. The recognised hospitals shall honour permission letter issued by competent authority and provide treatment/investigation facilities as specified in the permission letter.

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

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

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

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

15. In case of treatment taken in emergency in any non-recognised private hospitals, reimbursement shall be considered by competent authority at CGHS prescribed Package/rates only.

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

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

18. Ministry of Health & Family Welfare reserves the right to withdraw/cancel the above O.M. without assigning any reason.

19. The order takes effect from the date of issue of the O.M.

20. The authorities of Goyal Hospital & Research Centre (P) Ltd. Jodhpur (Rajasthan) will have to enter into an agreement with the Government of India to the effect that the Hospital will charge from the Central Government employees at the rates fixed by the Government and they will have to sign a Memorandum of Understanding (MOU) (2 copies enclosed only for Hospital) within a period of 3 months from the date of issue of the above mentioned OM failing which the Hospital will be derecognized. Subject to above, the Hospital can start treating Central Government employees covered under CS(MA) Rules, 1944.

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