National Centre for Radio Astrophysics

Tata Institute of Fundamental Research Pune University Campus, Pune – 411 007

October 28, 2009

Subject: Rules and Procedures of RAC Medical Scheme.

Ever since the inception of RAC-NCRA-TIFR Medical Scheme, it has undergone several changes. Subsequently lots of amendments / clarifications have been issued due to adoption of provisions based on the DAE CHSS. The Centre Director, NCRA had constituted a committee on 23.11. 2004 to review the existing medical scheme of NCRA/RAC and also to suggest modifications / improvements.

The review committee held several meetings and after detailed deliberations, submitted its recommendations which have been approved by Director TIFR. The Competent Authority has approved a very good system of medical care to the beneficiaries of RAC.

It has been clarified that all the amendments / liberalization to DAE CHSS issued from time to time are not applicable to RAC-NCRA-TIFR Medical Scheme. The modified RAC-NCRA-TIFR Medical Scheme incorporating all the amendments issued from time to time and also streamlining the various procedures has been uploaded on NCRA INTRANET.

The modified medical scheme will come into effect from 01st November 2009. Pending cases will be settled as per the existing rates and cases already settled shall not be reopened.

C. V. Rama Iyer

Head, Administration and Finance

Notice Board: RAC Ooty

Salient features of the modified NCRA Medical Scheme

- 1. Inclusion of additional hospitals / clinics based on the geographical distribution of beneficiaries.
- 2. Dependent eligibility Combined monthly income limit has been raised to Rs. 4000/- from Rs.1500/-. Life long dependency for children with disabilities of retirees.
- 3. Parents of retirees can now be admitted, if otherwise eligible.
- 4. Reciprocal arrangement for availing medical facilities to NCRA retirees to register at any of the places where DAE/DOS-CHSS exists.
- 5. Retired staff members can opt for life membership by paying membership contribution for 10 years.
- 6. Domiciliary limit has been enhanced from Rs. 750/- to Rs. 1500/- at a time per illness with a maximum annual limit of Rs. 10000/- from Rs.5000/- per family including prime beneficiary.
- Emergency claims reimbursement limit has been enhanced from Rs. 5000/- to Rs. 10000/- per occasion with an annual ceiling (FY) of Rs. 20,000/- per prime beneficiary including family subject to certain conditions.
- 8. Maternity benefits will be admissible for female employees or wife of an employee in any recognized hospitals under the scheme. Reimbursement will be restricted to level 1 hospital rate.
- 9. Claims of antenatal, postnatal treatment has been enhanced to Rs. 2500/- from the present limit of Rs. 1000/-.
- 10. Reimbursement of the cost of Intra Ocular Lense (IOL) will be admissible subject to Rs. 3600/- for each lense.
- 11. Cost of crowns, caps and bridges following root canal treatment are admissible. Reimbursement will be restricted to the non precious metal crown.
- 12. Facilities for retired employees settling down in a place other than the jurisdiction of the scheme have been introduced with certain conditions.
- 13. An arrangement to dispense medicines from the NCRA clinic has been made through a tie up with local pharmacist has been introduced for the benefit of the beneficiaries.
- Angioplasty: Insertion of two STENTS, one cipher and one bare metal stent are allowed. Cost will be restricted to the ceiling rate as per the OM by the Dept. of Health & Family Welfare [excluding taxes] as amended from time to time [at present, restricted to Rs.1.6 Lakhs excluding taxes]. Further STENT insertions if critically required, will be examined by the MO and advised / allowed on merit.
- 15. Hospital admission and other entitlements revised.

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NATIONAL CENTRE FOR RADIO ASTROPHYSICS **TATA INSTITUTE OF FUNDAMENTAL RESEARCH**PUNE UNIVERSITY CAMPUS P.B. NO. 3, GANESHKHIND, PUNE-411 007

RAC OOTY CONTRIBUTORY MEDICAL SCHEME

RULES AND PROCEDURES

DATED October 38, 2009

Ref:NCRA/1517/NMS/(Med)

October ____, 2009

RAC OOTY CONTRIBUTORY MEDICAL SCHEME RULES AND PROCEDURES

The following Rules and Procedures are applicable to beneficiaries and their eligible family:

1. ELIGIBILITY

- 1.1 Staff members of the following categories are entitled for medical coverage under this scheme.
- 1.1.1.Those holding regular posts in the academic, scientific / technical and administrative/auxiliary streams; including Visiting Fellows [PDF] / Visiting Professors / Visiting Scientists.
- 1.1.2 Project Appointees [if their offer provides for medical scheme membership].
- 1.1.3 All trainees for regular posts, but on stipend, involving absorption in appropriate scale, on successful completion of training and with bond liability.

Note: 1. Families of such trainees not eligible during training period.

- 2. Trainees who are not in the absorption track will not be eligible.
- 1.1.4 Research Scholars [but not their family members].
- 1.2 Families of staff members belonging to categories at 1.1.1 & 1.1.2, will be eligible as per the following definition of "family".
- 1.2.1 Spouse of the employee.
- 1.2.2. Children, step children or legally adopted children, up to 25 years of age, restricted to two (See 1.2.2 (a); (b) and (c) below). Children beyond the age of 18 years and up to 25 years, will be eligible for continuation, provided they are not gainfully employed; the following will not be considered as gainful employment:-
- 1.2.2 (a) (i) Part time employment, if the same is certified to be so, by the Employer and monthly income does not exceed Rs.4000/-;
 - (ii) Academic / University stipends, scholarships/ freeships.

- 1.2.2 (b) In the case of existing employees, as on 1.2.98, the above restrictions of two children will be given effect 10 months after 1.2.98. However, in the case of those employees who may have more than two children/ step children already registered under the scheme as on 1.2.98, the position on that date will be frozen and they will not be allowed to register any more of their children/ step children. Further, in the case of existing children, already registered under the scheme as on 31.1.98, status quo will continue, subject to age / gainful employment clauses above and 1.2.2 (e) below. In case of twin/triplet births in the second delivery, even though there is already one living child, medical scheme coverage will be extended to children borne thus far.
- 1.2.2 (c) In the case of new employees, joined on or after 1.2.98, the restriction of two children would apply immediately so far as the second delivery has not resulted in a twin/triplet birth.
- 1.2.2 (d) Physically / Mentally challenged children shall be eligible for the benefits, till such time they are dependent on the prime beneficiary, provided the disability is certified to exceed 40 % for physically & above "mild retardation" for mentally challenged.
- 1.2.2 (e) Married, divorced or otherwise legally separated and widowed daughters, even though dependent on the employee, are not eligible for benefits under the scheme.
- 1.2.3 Parents, whose combined monthly recurring income is not more than Rs.4000/- (if pension, excluding pensioner's relief), from all sources will be eligible if they normally reside with him/her. They should not be away from the residence of employee for more than 90 days in a calendar year. Also, prior to request for registration on each occasion, parents should have actually resided with employee for a minimum period of 30 days.
- 1.2.4 A declaration in the prescribed form, regarding income and residence of parents, as also regarding dependence of eligible children, should be furnished by the employee at the time of initial registration and at the beginning of every calendar year thereafter, for continuation of facilities. A copy of the ration card substantiating that the parents are staying with the employee will be insisted upon as a documentary proof for extending membership to parents. Also, some additional documents viz., copies of passport / PAN / Bank Pass Book(s) of the parents will have to be submitted while seeking admission of parents. However, in cases where there is sufficient proof that the parent is a dependent of the employee and staying with him/her, provisional admission may be extended under the condition that the ration card should be submitted within a specified time. The prime beneficiary is required to make a declaration that RAC-NCRA-TIFR is free to investigate the matter of its correctness and that if found incorrect, the beneficiary will not be eligible for the benefits / facilities and that the staff member will be liable for disciplinary action. Appropriate action may also be taken to recover the amount spent by RAC-NCRA-TIFR on the beneficiary.
- 1.2.5 It shall be the responsibility of the employee concerned to notify the Administration as soon as any member of the family becomes ineligible for the benefits of the scheme.

- 1.2.6 In case any information in respect of any of the dependent member furnished by the employee is found to be incorrect, the member's name is liable to be cancelled from the scheme, with the approval of Centre Director, NCRA, giving reasons therein and after giving due notice. It may also render the member liable for disciplinary proceedings.
- 1.2.7 Members of the family of an employee, registered under the scheme, who is transferred outside, temporarily or otherwise, to field stations, centers, etc., within the administrative control of TIFR will be eligible for continuation, provided the family continues to reside at the respective HQ and the employee continues to pay the contribution at the same rate as before.
- 1.3 (a) The spouse of a deceased employee and other family members registered under the scheme will be eligible, provided the deceased employee had completed a minimum of one year service in TIFR and the spouse pays the contribution last paid by the deceased employee. This is subject to the spouse and other members of the family, being otherwise eligible for continued registration under the scheme.
- 1.3 (b) The family of a deceased employee may avail the benefits of the scheme for the whole of the month in which the employee died, as well as the succeeding calendar month, without payment of contribution for the succeeding month.
- 1.4 Retired employees of RAC and NCRA-TIFR who have settled in and around Ooty, who opt for the scheme could be admitted to the scheme provided they otherwise fulfill the eligibility criteria and subject to following conditions:-
- 1.4 (a) Employees should have put in a minimum of five years' service in RAC /NCRA-TIFR before his / her retirement, with membership in their respective contributory medical schemes.
- 1.4 (b) Such retired employees pay the contribution in advance, for a minimum period of one calendar year; contribution shall be with reference to the pay drawn by him / her, prior to retirement / invalidation. The option to join the scheme any time after retirement will be available, subject to payment of arrears of contribution from the date of retirement. Retired employees can opt for a one-time contribution for 10 years towards **LIFE MEMBERSHIP**.
- 1.4 (c) The retirees should submit their Medical Records to have continuity in treatment under the Medical Scheme. They are also required to provide a copy of the ration card / voter id card in proof of their staying in Ooty/Coonoor/Mettupalayam/Combatore.
- 1.4 (d) Employees retiring voluntarily will be eligible for continuing registration under the scheme, provided they pay an enhanced contribution at the rate of three times the normal rate. However, the retired employees with 30 years of qualifying service need pay contribution at only normal rate and those with less than 30 but with at least 25 years qualifying service will pay double the normal rate.

- 1.4 (e) In the case of retired employees, the coverage will be normally limited to the employee and spouse only. However, wholly dependent parents [if otherwise eligible]; children, step-children or legally adopted children up to 25 years of age [restricted to two]; children beyond the age of 18 years and up to 25 years provided they are not gainfully employed; mentally retarded / physically handicapped till such time they are dependent on prime beneficiary provided the disability on account of mental retardation is categorized as above "mild retardation" and that of physical handicap exceeds 40% will also be eligible, provided, the requisite documents to prove their dependency are provided. Admission will not be extended to those family members who were not covered in the Medical Scheme at the time of retirement. Admission will not be extended to those family members who were not covered in the RAC CHSS at the time of retirement. The letter authorizing migration to RAC CHSS should specifically name the members who were in the scheme in the parent organization of the prime beneficiary prior to migration, to be eligible for admission.
- 1.4 (f) It is obligatory on the part of the retired employees to revalidate registration every year, after filling in appropriate forms with details, including a declaration that they do not avail of medical facilities from any other source and continue to have citizenship of India.
- 1.4 (g) At any point of time, if it is found that the declaration / document / claim submitted by any of the retirees is wrong / false / forged, his/her membership will be ceased forthwith. Also, appropriate action may be initiated to recover the medical expenditure incurred on them / dependents as the case may be.
- 1.4 (h) Employees, registered under the scheme, on their superannuation/ invalidation and members of their families, registered under the scheme, may avail of benefits during the succeeding calendar month (of their superannuation / invalidation) without payment of contribution for that succeeding month.
- 1.4(i) The Pay of the post held by the employee prior to retirement will be the basis of determining entitlement for hospitalization.
- 1.5 For continuation of children in the scheme beyond the age of 18, a bona-fide certificate from the school / college and or an affidavit to the effect that their children are dependent on them and that they are not gainfully employed will have to be provided.
- 1.6 Monthly contribution by beneficiaries will be at rates prescribed from time to time by TIFR, generally based on DAE guidelines on the subject.
- 1.6.1 In cases where both the husband and wife are employees of RAC-NCRA-TIFR, the payment of contribution will be regulated as under:
- a) Contributions shall be recovered from only one of them (wife or husband) whose pay is higher. The husband and wife shall submit a joint declaration to the Head, RAC.
- b) 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 cases where the pay of the husband and wife is equal, the contribution shall be recovered from the husband who will be eligible to register his parents. If the wife wishes to register her parents, who are otherwise eligible a separate contribution shall be payable by her on the basis of her pay.
- d) If wife is paying the contribution and the husband wishes to register his parents, who are otherwise eligible, he will have to pay an additional contribution based on his pay.
- 1.7 Application and declaration forms for registration, and continuation as a beneficiary, are annexed at the end.
- 1.8 Migration: RAC-NCRA-TIFR retirees can migrate to CHS Schemes of TIFR / DAE / DoS if a scheme administered by TIFR / DAE / DoS is in operation at the place they wish to settle down provided they pay the Lifetime contribution [10 years], at NCRA-TIFR.
- **1.9 RAC-NCRA-TIFR retirees, settled down at a place where NMS facilities** are not available can come to the **HQ** for treatment. They can also have an option for claiming reimbursement following the pattern of CS [MA] Rules only **for the inpatient medical treatment** availed of by them and their family provided he/she was a member of NMS at the time of retirement. The rates for treatment at Sri Ramakrishna Hospital, Coimbatore will be the yardstick for settling such claims. Such reimbursements shall be allowed only for the treatment availed of through the following:
- [a] Govt. Hospitals and medical institutions of the local authorities viz., Dist. Hospitals, Medical Colleges, Municipal Hospitals etc.,
- [b] Private Hospitals as recognized by the Ministry of Health and Family Welfare List available at http://www.mohfw.nic.in/cghs.htm;
- [c] Hospitals recognized under CGHS
- [d] Hospitals recognized by DAE for treatment under CHSS/CS (MA) rules.

For retirees, outpatient treatment will not be allowed other than at HQ [Ooty / Coonoor / Mettupalayam / Coimbatore].

Domiciliary treatment will not be extended to retirees settled down other than at HQ.

1.10 Medical beneficiaries are required to make a declaration in the joining form that they have read and understood the NMS in full and are ready to abide by the scheme.

2 GENERAL PROVISIONS

- 2.1 Medical bills in claim forms for reimbursement will be dealt with for passing as per sub delegated powers, issued by the Centre Director, from time to time.
- 2.1.1 Reimbursement claims up to Rs.1000/- will be approved by the AAO-B. Claims above Rs.1000/- and up to Rs.2,000/- will be approved by the EIC, RAC after due processing by the Accounts & on the recommendation of the Asst. Administrative Officer-B.

- 2.1.2 Reimbursement above Rs.2,000/- but up to Rs.5,000/- will be approved by the Head, RAC and reimbursement above Rs.5000/- and up to Rs.25,000/- will be approved by the Chair, NSCA, Pune. Reimbursement claims of value bills above Rs,25,000/- will be approved by the Centre Director, NCRA after due processing by RAC Accounts and on the recommendations of the Administrative Officer / Head-A&F, NCRA.
- 2.1.3 All claims / hospital bills will be initially scrutinized by the Accounts Clerk and AAO-B at RAC Ooty.
- 2.1.4 Medical beneficiaries going abroad have to keep the Head, RAC informed about such a movement and their claims will be restricted to 3 months' medicine bills. *Treatment taken and medicines bought abroad will not be reimbursed.*
- 2.2 In case where hospital bed accommodation / other charges are higher than the entitlement, the extra expenditure is to be borne by the beneficiary. Hospitals are authorized to handle cases only as a Hospital case and not as Personal Patient of the Private Doctor.
- 2.3 For out-patient treatment, cost of medicines are fully reimbursable, if not included in the OPD Credit bills of accredited hospitals, provided it is against a reference letter from RAC & Panel Doctor. While beneficiaries could take treatment in accredited / empanelled hospitals without a referral letter from RAC & Panel Doctor, they are encouraged to show their medical card to avail of the concessions being extended to RAC Medical Scheme beneficiaries by the hospital.
- 2.4 Consultation fees are reimbursable as per Table-1. Consultant's bills are entertained only if the Panel Doctor / General Practitioner refer the patient to a Consultant.
- 2.5 Institute will not entertain the bills issued by Ayurvedic / Homeopathic Medical Practitioners for reimbursement. The medical bills of any Municipal / Government hospitals or Government Medical Agencies will be reimbursed irrespective of the system of treatment (allopathic system, homeopathic, Ayurvedic etc) followed in these hospitals / agencies.
- 2.6 No toiletry or food substitutes are reimbursable. Protein substitutes, sun-screen creams, skin softeners, Vit-E creams, Aloe-vera Creams etc., will not be allowed under the scheme. However, if recommended by the Specialist, under extreme critical situations, reimbursement will be entertained as a special case. The Specialist's decision shall be final with regard to admissibility of such claims.
- 2.7 Cost of Artificial Appliances like crutches to polio, TB or Prosthesis cases or for cases requiring surgical operations, will be reimbursable. In regard to replacement later, (after initial full reimbursement), it will be fully reimbursable for those drawing a band pay [pay in pay band] of Rs.19,530/- or below. For those above the band pay Rs.19,540/-, reimbursement for replacement will be 50%.

- 2.8 In case of Cataract surgeries, an amount of Rs.3600/- will be allowed towards the cost of each Intra Ocular Lens [IOL]. Contact lens will not be allowed under the scheme.
- 2.9 Confinement expenditure for female employees or wife of an employee in any recognized hospital under the Medical Scheme will be reimbursed restricted to Sri Ramakrishna Hospital rates. Benefits under this clause would not be admissible if the employee has two or more living children at the time of confinement. In case the delivery care was undertaken in any hospital [normal / forceps / caesarean] other than the panel hospitals, reimbursement will be restricted to Sri Ramakrishna Hospital, Coimbatore. Relevant certificates will be required for verification. The term confinement relates to live births, still births and abortion. Expenses on confinement which results into miscarriage (abortion) / MTP will be reimbursed restricted to two occasions provided it precedes successful delivery of the second child.
- 2.9.1 Ante-natal and post-natal* care will be provided, up to a maximum reimbursable amount of Rs.2500/- (including an emergency) subject to fulfilling conditions at Para 2.8.2 of the Scheme. Referral letters will not be issued for the above and will be treated as reimbursement cases only.
- *Antenatal period from the date of conception to the date of delivery and Post-natal period from the date of discharge from the hospital up to a period of 3 months
- 2.9.2 Any expenses, other than those mentioned above, in connection with confinement, ante natal, post natal charges, will not be reimbursable. This includes any admission for false pain which does not result in delivery which will come under antenatal care. As all the above provisions have reimbursable ceilings / limits, the usual hospital admission / out patient treatment forms, signed by Medical Officer and countersigned by Administration, will not be given for maternity cases. However, staff members are required to intimate and register their / spouse's name with the Administration, at the initial antenatal stage itself. If this is not done, claim for reimbursement may not be entertained at a later stage.
- 2.9.3 Claims on ante-natal and post-natal expenses shall be submitted together in one lot, along with supporting bills, within four months of delivery for action by Accounts, within various limits as prescribed. Bill on confinement expenses may be submitted with supporting bills, for reimbursement also, within four months from the date of delivery.
- 2.9.4 Applicants must clearly indicate in the claim forms, on top, whether it is a claim for confinement, Forceps / Caesarian (if so) / Ante-natal / post-natal. A certificate, in regard to not having more than one living child, at the time of confinement, shall be given by the prime beneficiary submitting the claim. Similarly, in case of claimants with second / subsequent marriages, an additional certificate that there is only one living child, including those from earlier marriage, if any, of both spouses, shall be recorded in the claim itself.
- 2.9.5 For promoting *small family norms*, expenses / procedures undergone at accredited hospitals / govt. / municipal hospitals/ health centers, are reimbursable [restricted to Sri Ramakrishna Hospital, Coimbatore rates]. If the procedure is undertaken elsewhere, reimbursement will be limited to Sri Ramakrishna Hospital, Coimbatore rates. **No referral letter will be issued for family planning procedures**.

Note: Incentives (FPA) for adopting small family norms will be dealt with separately as per guidelines on the subject.

- 2.10 Dental treatment: Entitlement / limitations for dental treatment are as under.
- 2.10.1 Dental treatment for extraction, scaling, gum treatment, filling of teeth with silver amalgam / glass ionomer, composite [glass or quartz filler in a resin medium] and light-cured composite will be allowed. Root Canal treatment with treatment for Pyorrhea and Gingivitis are entitled / reimbursable. Bridges and caps/crowns necessitated after a root canal treatment will be allowed, limited to non-precious metal crown. Reimbursement of claims on dental treatment will be restricted to the rate schedule of Dr. Tarun Chhabra, BDS.
- 2.10.2 Claim on artificial denture will be restricted to Class I Indian Denture. They will be dealt with as reimbursement cases only. The liability of beneficiary with regard to denture is given at Table -2. The reimbursement will be worked out after deducting recovery rates as prescribed.
- 2.10.3 Orthodontic treatment, unless necessitated as a result of an accident, are not entitled / reimbursable.
- 2.10.4 All the medical reimbursement claims must be submitted within 90 days from the date of availing the treatment.
- 3. <u>Immunization / Vaccination</u>: The vaccination schedule for children as approved by the Indian Academy of Pediatrics [IAP] is allowed under the scheme with two optional vaccinations. The detailed schedule is given at **Table 4**. The prime beneficiary should submit a copy of the immunization schedule with the latest status of immunization with the claim. Other vaccination viz., TT / Rabies and vaccines required on account of epidemics regardless of the age will be allowed on the recommendations of the authorized panel doctor on a case to case basis. Vaccinations should be taken in empanelled hospitals only. *In case of immunization taken outside the panel hospitals, reimbursement will be allowed limited to Sri Ramakrishna Hospital, Coimbatore rates*.
- 4. **Angioplasty:** This scheme provides for insertion of two STENTS, one cipher and one bare metal stent in the case of angioplasty, the cost of which will be restricted to the ceiling rate as per the OM in this regard by the Dept. of Health & Family Welfare [excluding taxes] as amended from time to time [at present, restricted to Rs.1.6 Lakhs excluding taxes]. If the surgery is carried out in other than panel hospitals, reimbursement of cost of stent will be limited as above [for 2 STENTS] excluding taxes. Surgical charges and stay charges are over and above the cost of STENTS, limited to Sri Ramakrishna Hospital, Coimbatore rates. Further STENT insertions if critically required, could be allowed if recommended by a Cardiac Specialist, after due approval of Centre Director, NCRA.

5 FACILITIES AND PROCEDURES

Following is the **Athorized Panel of Doctors** for consultation and diagnostics for the scheme beneficiaries.

- 1. Dr. M.Annamalai, M.B.B.S.,
- 2. Dr. T.L. Viswanathan, M.B.B.S.,
- 3. Dr. K.N.Sankaradevan, M.B.B.S.,
- 4. Dr. N.Mohan, M.B.B.S.,
- 5. Dr. (Mrs.) Vasantha Jayaraman, M.B.B.S.,

SPECIALISTS

PHYSICIANS	1. Dr. N.Anandamoorthy, M.D.,
	2. Dr. V.M.Bhat, M.D.,
	3. Dr. P.Chidambaranathan, M.D.,
SURGEONS	1. Dr. K.Chickthimmiah, M.S.,
	2. Dr. J.Zaheer Ahamed, M.S.,
CHILD SPECIALISTS	1. Dr. Devi Prasad Rao, M.B.B.S., D.C.H.,
	2. Dr. (Mrs.) Chitra Vijayaraj, M.B.B.S, D.C.H.,
EYE SPECIALISTS	1. Dr. S.Suresh Babu, M.B.B.S, D.O.
	2. Dr. (Mrs.) Meera Chandran, M.B.B.S., D.O.,
CHEST & TB SPECIALISTS	1. Dr. M.B.Chandran, M.B.B.S., D.T.C.D.
GYNACOLOGISTS	1.Dr.(Mrs.) Saraswathi Mani, M.D., D.G.O.,
	2.Dr. (Mrs.) Indira Nambiar, M.B.B.S., D.G.O.,
	3.Dr. (Mrs.) Brinda Indresan, M.B.B.S., D.G.O.,
DENTISTS	1.Dr. T.S.Chhabra, B.D.S.,
	2.Dr. Senthilnathan Siva, B.D.S.,
	3.Dr. (Mrs.) Shalini Gowdu, B.D.S.,
ORTHOPAEDIC SURGEONS	1.Dr. M.A.Perumal, M.B.B.S., D.Ortho
	2.Dr. N.Ramakrishnan, M.B.B.S., D.Ortho
SKIN SPECIALISTS	1. Dr. K.M.Bellie, MD.,
ENT	1. Dr. L.Raghunathan, M.B.B.S., M.S., (ENT)

Beneficiaries may directly approach the authorized panel of Doctors for consultation initially and on referral from them, may consult the Specialists or approach the panel hospital [indicated under 5.2 below] for further treatment. Consultation / treatment will be against direct payment except with a couple of dentists, who will send the bills to RAC for settlement.

6. Referrals to Hospitals for further / specialized treatments

The reference will be on Standardized referral letters; countersigned by the Asstt. Administrative Officer/ authorized signatory. Beneficiaries are required to carefully go through the contents of the referral letter and sign. Beneficiaries may directly settle the bills with the hospital if the hospital is not providing credit facility to RAC and submit the claim for reimbursement.

6.1 In some specific cases, the panel Doctor may also advise a beneficiary to seek opinion of Specialists / Super Specialists, who are not in the panel of accredited hospitals. Consulting fee will be reimbursed within limits prescribed at **Table-1**.

- 6.2 For joint replacements, prior consent of the competent authority on the recommendation of the Panel Doctor and Specialist is essential. An estimate of the expenditure will have to be obtained from a panel hospital.
- 6.3 Medical care to employees visiting Mumbai on tour / training / leave: OPD treatment will be allowed at TIFR for staff members. In cases of emergency, on a case to case basis, it will be decided by the SMO, TIFR. Panel Doctor /AAO to be kept informed at such instances.
- 7. <u>Bed entitlement</u>: Following will be the bed entitlements in case of In-patient treatment of beneficiaries of the scheme.

Category	Pay drawn in Pay Band	Type of ward	Room Rent [Rs]
A	Up to Rs.13,950/-	General Ward	250/- per day
В	Rs.13960/- to Rs.19,530/-	Semi private ward	400/- per day
C	Rs.19,540/- and above	Private Ward	500/- per day

Beneficiaries shall take hospital admission as per their bed entitlement. If a beneficiary gets admitted to a higher ward than the entitled one, he/she will have to bear the excess expenditure on ward charges and other allied charges on account of his/her admission to a higher type of ward. Such additional amounts should be settled directly with the hospital at the time of discharge.

7.1 Hospitals empanelled under the Scheme are listed in Para 7.2.

Patients will be referred to appropriate hospitals by the authorized doctors [panel of doctors given at Para 5 above] as per needs considering the nature and seriousness of ailments vis-à-vis the facilities in the hospitals. Treatments at empanelled hospitals will be allowed in full so far as the beneficiary takes an accommodation of entitled level as above. If treatment is taken other than at Panel Hospitals, reimbursement will be restricted to Sri Ramakrishna Hospital, Coimbatore rates.

7.2 Following are the approved panel of hospitals.

Vijaya Hospital, Ettines Road, Ootacamund
S.M.Hospital, Coonoor Road,Ooty
Parvathy Nursing Home, Garden Road, Ooty
Nirmala Nursing Home, Finger Post, Ooty
Sanhita Nursing Home, Baikie Road, Ooty
Emmanuel Eye Hospital, 3 Woodcote Road, Coonoor
Sri Ramakrishna Hospital, 395 Sarojini Naidu Road, Sidhapudur, Coimbatore.
G.Kuppusamy Naidu Memorial Hospital, Pappanaickan Palayam, Coimbatore Kovai Medical Centre, Peelamedu, Coimbatore.
Ramakrishna Diagnostic Centre, Commercial Road, Ooty
Vikram Diagnostic Centre, Moosa sait Complex, Commercial, Road,Ooty
Aravind Eye Hospital, Coimbatore]
Sankara Eye Centre, Coimbatore]
The Eye Foundation, Coimbatore]

Credit billing arrangement is available only with Vijaya Hospital at Ooty and Sri Ramakrishna Hospital, Coimbatore for the beneficiaries. For eye check up and treatments, the rates for various diagnostics and treatments at Aravind Eye Hospital, Coimbatore will be the yardstick. For all other general treatments, the rates prevailing in Sri Ramakrishna Hospital, Coimbatore will continue to be the yardstick.

- 7.3 For physiotherapy, on OPD mode, a maximum sum of Rs.100/- per sitting subject to a maximum of 10 sittings for each of the therapies [traction, SWD etc.,] will be allowed, generally.
- 8 <u>Emergency Cases</u>:- Emergency is defined as a "Situation or contingency, when, but for the immediate medical aid sought, there would have been, on the basis of the medical & attendant considerations, a serious danger or hazard or severe or deleterious consequence to the health of the patient. The accessibility / availability or otherwise of the facilities under the scheme, in the context of the severity of medical emergency / ailment at the time of emergency, will also be taken in to consideration". The decision of the Head, RAC, in consultation with Panel Doctor, shall be final as to what constitutes emergency treatment, notwithstanding any medical certificate to the contrary produced from a Private Doctor or hospital.
- 8.1 In an emergency, when there is no time to come over to RAC or consult the Panel Doctor and obtain a referral letter to a panel hospital, beneficiaries may approach the nearby panel hospital with the Medical Identity card issued by the RAC and seek consultation / treatment. Outpatient treatments of such nature will be reimbursed at the rates applicable to Table 1 of RAC Scheme. In case of emergency in-patient treatment in a panel hospital without a referral letter, the patient may initially seek admission in their eligible type of accommodation and contact the RAC / Authorised Panel Doctor for a referral. In the absence of a referral, they may seek reimbursement of expenditure after discharge. In any case, the claim will be restricted to the agreed rates between the hospital and RAC [to the level of bed entitlement].
- 8.2 Under emergency, a beneficiary may seek in-patient treatment in a nearby hospital without waiting for a prior advice of the MO or intimation to administration but the same should be substantiated by supporting documents while submitting the claim. Such claims on treatment is reimbursable—restricted to actual up to Rs.10,000/- per occasion, with an annual (FY) ceiling of Rs.20,000/- per prime beneficiary (incl. family), subject to fulfilling the following conditions:-
- 8.3 a) Such cases however should be intimated to the Head / AAO, RAC at the earliest and in any case, within four days from the date of commencement of treatment, to their satisfaction and thereafter should be pursued as advised.
 - b) Items included in the bill with claim forms, substantiates such admission to the satisfaction of the Administration.
 - c) Charges / prices are reasonable & commensurate with the Sri Ramakrishna Hospital-Coimbatore entitlement
 - d) Claim is submitted within 90 days from the date of treatment.
 - e) Claims for confinement, antenatal / postnatal treatment, abortion / termination of pregnancy, will not be regulated under Emergency Clause.
 - f) Costs of toiletry items are not reimbursable.

8.4 Ambulance charges, due to situations requiring a patient to proceed only in lying condition, are reimbursable. The employee must however inform the AAO / Head, RAC at the earliest possible opportunity of such services obtained. Also, a certificate by the Doctor concerned, indicating the necessity for moving the patient in an ambulance should be produced with the claim.

9. **Domiciliary Treatment**

Besides the facilities listed in the foregoing paras, the beneficiaries may, on need basis, avail the treatment facilities within limits as at 9.1 & 9.2, below, subject to the conditions of 9.2.1 & 9.2.2. Out patient treatment at a hospital or appropriately qualified Consultant, without a referral letter or without prior advice by the panel doctor, will be considered, Domiciliary treatment and reimbursed as per limits. Claims will be limited to Table-1 rates.

- 9.1 The beneficiary can obtain treatment from a government or Municipal hospital in the HQ. The charges will be reimbursed fully, on production of hospital receipts, duly vetted by the Accounts and AAO.
- 9.2 In case the patient goes to a private Doctor who is at least MBBS, for routine treatment, the charges will be restricted to limits for domiciliary* treatment. The domiciliary treatment charges will be limited to the following:-
- 9.2.1 Maximum limit of Rs.1500/- at a time per disease, duration not being more than 15 days, provided medical treatment is taken from a doctor with at least an MBBS degree. These charges include doctor's visiting / consulting fee as well. The maximum annual (FY) limit for domiciliary treatment generally not to exceed Rs.10,000/- per family (incl. prime beneficiary).
- 9.2.2 Within 4 days of starting the domiciliary treatment, the patient should inform the Administration in this regard.
- 9.2.3 In exceptional cases, the patient must inform the Head, RAC or the Asst.Administrative Officer, and take permission to continue such domiciliary treatment beyond 15 days. However, ceiling limits of 9.2.1 above will still be applicable.
- 9.2.4 Domiciliary treatment will not be applicable to retirees settled down other than in the HQ.
- 10. MEDICAL SERVICES FOR STAFF / DEPENDENTS AT A PLACE OTHER THAN THE HEADQUARTER STATION
- 10.1 In-patient treatment taken by a serving staff member or his/her dependent beneficiary, at a place other than the HQ on situations when it is not possible for the patient to come down to HQ [to be certified by the treating Doctor] will be dealt with as a reimbursement case. The amount spent in the following categories of hospitals will be reimbursed limited to Sri Ramakrishna Hospital, Coimbatore rates.

- [a] Govt. Hospitals and medical institutions of the local authorities viz., Dist. Hospitals, Medical Colleges, Municipal Hospitals etc.,
- [b] Private Hospitals as recognized by the Ministry of Health and Family Welfare List available at http://www.mohfw.nic.in/cghs.htm;
- [c] Hospitals recognized under CGHS
- [d] Hospitals recognized by DAE for treatment under CHSS/CS (MA) rules
- 10.2 Out-patient treatment taken from an Authorised Medical Attendant (AMA) is reimbursable—within the domiciliary limits subject to overall Medical Scheme norms. Domiciliary treatment charges will be admissible in respect of treatment taken from private MBBS Doctors, provided there is no Govt. or Govt. recognized hospital within 8 kms of the place of stay.
- 11. Hearse Charges: Reimbursement not exceeding Rs.800/- for hiring 'Hearse' in respect of deceased beneficiaries, who are in category A & B of Hospital Accommodation parameters drawing a band pay of Rs.19,530/- or below.

OOTY MEDICAL SCHEME

TABLE-1

Consultation Fee payable / reimbursable

Sr.No.	Particulars	Amount (Rs.)
1	Consultation with MBBS Doctors	
g: 88	a] First Consultation	60
	b] Subsequent Consultations [Maximum 3 consultations for the same illness]	40
2	Consultation with a Specialist in Ooty	
	a] First Consultation	125
	b] Subsequent Consultations	75
	[Maximum 3 consultations for the same illness]	

OOTY MEDICAL SCHEME

T A B L E -2

DENTURE ON COST SHARING BASIS

SI. No	Type of denture	Amount recoverable from the beneficiaries drawing Pay [in the Pay Band] – GP excluded				
		Rs.13950/- or below	Between Rs.13960 & Rs.19530	Rs.19540 and above		
		Rs.	Rs.	Rs.		
1	Full Denture (Artificial set of Teeth Upper & Lower)	200	300	400		
2	Full Dentures (Artificial set of Teeth—only Upper)	100	200	300		
3	Partial Denture - One Tooth	20	30	40		
4	Partial Denture - Additional Teeth	10	20	30		

Note: Claim on artificial denture will be restricted to Class I Indian Denture. Since denture fixing and replacement is on cost sharing basis, no referral letters will be issued and reimbursement will be allowed after deducting the amount to be shared by the beneficiary. Denture fixing / replacement shall be done at accredited hospitals only.

OOTY MEDICAL SCHEME

TABLE-3

BED ENTITLEMENT

Category	Band pay drawn	Bed entitlement (with diet)	Specific Beds
C	Rs.19540/- and above	Rs.700/- per day	Private Ward
B	Rs.13960 to 19530/-	Rs.525/- per day	Semi Private Ward
A	Upto Rs.13950/-	Rs. 250/- per day	General ward

Note:

- 1 There are no bed wise rates for ICU/CCU. Common rate as applies to all, for such admissions.
- Beneficiaries, after obtaining the referral letter from the Authorised Panel Doctor, shall take hospital admission as per their bed entitlement. If a beneficiary gets admitted to a higher ward than the entitled one, he/she will have to bear the excess expenditure on ward charges and other allied charges on account of his/her admission to a higher type of ward. Such additional amounts should be settled directly with the hospital at the time of discharge.
- The difference would work out much higher than difference in bed charges, as surgery charges, anesthetist's charges, Lab charges, administrative charges would also correspondingly increase—resulting in recovery from the beneficiary by Accounts.
- However, if in the opinion of the Specialist Panel Doctor, admission to the higher accommodation than entitled was necessitated due to medical reasons, such contingencies, with the approval of Head, RAC, would be acceptable.



OOTY MEDICAL SCHEME

TABLE-4

Age	Vaccine
Birth	BCG, Oral Polio Vaccine 1 st dose
	Hepatitis B Vaccine 1 st dose
6 Weeks	DPT 1 st dose, Oral Polio Vaccine 2 nd dose
	Hepatitis B Vaccine 2 nd dose
10 Weeks	DPT 2 nd dose
	Oral Polio Vaccine 3 rd dose
14 Weeks	DPT 3 rd dose, Oral Polio Vaccine 4 th dose
6-9 Months	Oral Polio Vaccine 5 th dose
	Hepatitis B Vaccine 3 rd dose
9 Months	Measles Vaccine
15-18 Months	MMR, DPT 1 st Booster
	Oral Polio Vaccine 1 st Booster (6 th dose)
5 Years	DPT 2 nd Booster
	Oral Polio Vaccine 2 nd Booster (7 th dose)
10 Years	Tetanus Toxiod, Hepatitis B Vaccine
15 – 16 Years	Tetanus Toxiod
OPTIONAL VA	CCINES:
	Typhoid Fever Vaccine
	Haemophilus Influenzae Type B
	ion viz., TT/Rabies and Vaccines required on account less of the age will be allowed.



OOTY MEDICAL SCHEME

FORM - NCRA MED-1

APPLICATION FOR ADMISSION OF STAFF ON FIRST JOINING

Name			Desi	gnation	Basic	pay last drav	wn:	
CC No.		333 S. 48 (3 A 3 B 3 A 3 B 3 A 3 A 3 A 3 A 3 A 3 A			PB	• • • • • • • • • • • • • • • • • • • •	Band pay	Grade pay
Date of	birth		Resi	Residential address [at the place of posting]:				
Date of	joining	W 2883 8						
DAE Re	f No & Date		Phor	Phone No. email id:				
PARTIC	ULARS OF	FAMILY					\$6 JUNEAU 100	
Name o	of Spouse			Date of Birth		Date of Material (attach process)	larriage: oof of marriag	e]
Sr.No	Names of ch	nildren	Date of Birth*	*		Sex	Re	marks
1							10.0. (0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	
2.						12.000		
understate proceedi sources e thereby otherwise be my rescheme la scheme	nd that my ments and that my ments and ertake to be esponsibility benefits and s	tand that the tend that he declare that he had my family to notify the hall properly	ould be terminate burden of proofing eligibility. at the end of each y members who e RAC Adminis	h financial year of se names are mental when any ards of such beneficial beneficial of the series of	ent Aut e, mart r as soo tioned persor	hority and a ial status, gas necessa above to the referred a	also render me ainful employ ery thereafter, e Medical Sch bove become	about the eligibility of the statu
Signatu	re:							Date:
proof of	income, infor	mation on w	hether staying w	ith the staff mem	ber and	if so, for ho	ow long, ration	ired declarations with card details etc.
					1 2 8			
Admissi	on Approved	and Med. No	oallotte	ed;				
								Head, RAC

- 1. Contribution towards Medical Scheme deducted w.e.f:.
- 2. Medical Card issued on:
- 3. Medical book prepared and given to MO on:



OOTY MEDICAL SCHEME

BRIEF EXTRACT OF RULES

1. ELIGIBILITY

Staff members holding regular posts in the academic, scientific / technical and administrative/auxiliary streams; including Visiting Fellows [PDF] / Visiting Professors / Visiting Scientists; Project Appointees [if their offer provides for medical scheme membership]; all trainees for regular posts, but on stipend, involving absorption in appropriate scale, on successful completion of training and with bond liability; families of such trainees not eligible during training period; Research Scholars [but not their family members].

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- (b) children, step children or legally adopted children, up to 25 years of age, restricted to two*; children beyond the age of 18 years and up to 25 years, will be eligible for continuation, provided they are not gainfully employed; part time employment, if the same is certified to be so, by the employer and monthly income does not exceed Rs.4000/- is not considered gainful employment as also, any Academic / University stipends, scholarships/ free-ships.
- * Three [first three] if registered prior to 1.2.1998.
- (c) Physically / Mentally challenged children shall be eligible for the benefits, till such time they are dependent on the prime beneficiary, provided the disability is certified to exceed 40% for physically & above "mild retardation" for mentally challenged.

Note: Married, divorced or otherwise legally separated and widowed daughters, even though dependent on the employee, are not eligible for benefits under the scheme.



OOTY MEDICAL SCHEME

FORM-NCRA Med--2

APPLICATION FOR REGISTRATION-RETIREES OF RAC/NCRA

	Name		9	ic pay last drawn:		
		of retirement	(provide suppo	rting documents) Band pay	Grade pay	
				Danu pay	Graue pay	
Date of birth		Residential address:		The same of the sa	**	
Date of joining RAC/ NCRA-TIFR						
Date of Retirement:		Phone No.	email id:			
have read the NCRA-TIFE enefits of the NCRA-TIFE	FR Medical rules R Contributory Me	as applicable to me. I fulfill the dical Scheme may be extended	conditions prescr to me and the foll	ibed for registration lowing members of	n ** and request the my family.	
Names of dependents	D.O.B	Relation Names o	dependents	D.O.B	Relation	
			- 10 10 10 10 10 10 10 10 10 10 10 10 10			
		nditions being satisfied. Medical Facilities from any			ther dependants versions to have the Citize	
 I certify that I of India. I understand to succeeding can succeeding moderate in the succeeding moderat	that on superar lendar month on the required detains the fixed Month of the fixed Month of the remains of the fixed Month of th	nditions being satisfied.	avail the bene- idation, without ibution as a Reti- changes, if any, p.m. (for outdoor	fits of a serving additional contred member, according the year. or treatment) seponded I can have II	nember during tribution for the ordingly. Iso understand to the PD treatment on the property of the property	
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 I certify that I of India. I understand to succeeding cat succeeding moderate in a succeeding m	that on superarulendar month on the Hence, I slow the required detains the fixed Month of and my family imbursement of pitals/AMA (i.e. from Prof / Shrifton P	Medical Facilities from any muation/invalidation, I can of my superannuation/invalidation all pay the subsequent contrails every year in March and edical Allowance of Rs.100/members can avail the treat of OPD treatment taken out. CSMA) and subject to re	avail the beneficiation, without ibution as a Retichanges, if any, p.m. (for outdoment only in Purside the HQ arimbursement a	fits of a serving additional contred member, according the year. or treatment) sepone, normally. I and I can have II s per the Sri Rabbate:	member during tribution for the ordingly. Iso understand to the ording with the ording the ordinary theorem the ording the ording the ordinary theorem the ordinary the ordinary theorem theorem the ordinary theorem the ordinary theorem the ordinary theorem theorem the ordinary theorem theorem theorem theorem the ordinary theorem the ordinary theorem theorem theorem theorem the ordinary theorem the ordinary theorem theorem theorem theorem the ordinary theorem theorem theorem theorem the ordinary theorem theorem theorem theorem theorem the ordinary t	

Head, RAC



OOTY MEDICAL SCHEME

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1. ELIGIBILITY

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- (c) Physically / Mentally challenged children shall be eligible for the benefits, till such time they are dependent on the prime beneficiary, provided the disability is certified to exceed 40% for physically & above "mild retardation" for mentally challenged.

Note: Married, divorced or otherwise legally separated and widowed daughters, even though dependent on the employee, are not eligible for benefits under the scheme.



OOTY MEDICAL SCHEME

FORM-NCRA Med—3

APPLICATION FOR REGISTRATION OF FAMILY OF A DECEASED EMPLOYEE

[To be submitted in duplicate with three copies of ID size photos of applicant / eligible children]

Name of deceased employee	- 1		Poolo Dov Loot droven	
Designation			Basic Pay Last drawn	
Date of joining RAC-NCRA-TIFR		325); 3 82 - 245 - 246 - 41	Pay Band:	
Date on which expired			Pay in Pay Band Grade pay	
NMS Registration. No (If deceased after retirement)			Residential address:	
Name of spouse	24 33 A		Phone No.	
Date of Birth			e-mail id	
			e-mail iu	
1. I have read the Medical Scheme Contributory Medical Scheme may	Rules and under be extended to r	erstood the provine and the follow	sions applicable to me. I	request that the benefits of the
Sr.No Name	Relationship	·	Occupation & family i	70 Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2. I certify that:				
scheme for the whole of the payment of contribution. The in advance, for a minimum of and other eligible family recombled for children viz. In the event of any change of	ily, already registed in the contribution for a period of one can be in the status (Internal and myself of the catment taken per Sri Ramakrish per Sri Ramakrish in the status (Internal and myself of the catment taken per Sri Ramakrish per Sri Ramakrish in the status (Internal and myself of the catment taken per Sri Ramakrish per Sri Ramakrish per Sri Ramakrish per Sri Ramakrish in the status (Internal and myself of the catment taken per Sri Ramakrish per Sri	cased Employed stered by the employee of the employee of the eligible far availing medical eluding Indian Control equired under the end avail medical from Govt./ Multiple form of the end	e Contributory Medical Se was Rs p.m. ployee while in service, expired, as also the succeptive of the deceased embers of the scheme only sability [physical / mental] itizenship) of self / children e rules, every year in Manuel I treatment only in the Hospitals / AMA	could avail the benefits of the eeding calendar month, without ployee will be paid accordingly, source. y on fulfilling other conditions letc. en, I shall inform RAC. erch. Q normally and in the event of
Signature of the Applicant		OFFICE USE C	Da NLY]	te:
Certified that	(de	ceased) had put	in a minimum of one yea	r in the Institute, when expired.
Received Rs from Prof / dated onto	Shri/ Smt/ Kum/ (Bank) 1	towards contribu	ution to the Medical S	by cheque No Scheme, for the period from
Admission approved & Med. No				Head, RAC

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Accounts

OOTY MEDICAL SCHEME

BRIEF EXTRACT OF RULES	

1. ELIGIBILITY

Staff members holding regular posts in the academic, scientific / technical and administrative/ auxiliary streams; including Visiting Fellows [PDF] / Visiting Professors / Visiting Scientists; Project Appointees [if their offer provides for medical scheme membership]; all trainees for regular posts, but on stipend, involving absorption in appropriate scale, on successful completion of training and with bond liability; families of such trainees not eligible during training period; Research Scholars [but not their family members].

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- (c) Physically / Mentally challenged children shall be eligible for the benefits, till such time they are dependent on the prime beneficiary, provided the disability is certified to exceed 40% for physically & above "mild retardation" for mentally challenged.

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OOTY MEDICAL SCHEME

FORM-NCRA Med—4

APPLICATION FOR REGISTRATION/ RENEWAL OF DEPENDENT SPOUSE / PARENT / CHILDREN [To be submitted in Duplicate (original with GA; Copy with Accounts) with three copies of ID card size Photos for each eligible dependant]

Name of staff member				CC	CC No				
Designation				Dat	Date of Birth				
Date of joining TIFR				Grade pay					
Pay ba	and			Pay	Pay in Pay Band				
Ration card with the name of the dependent listed below				Res	Residential Address				
Ration card validity period				Tel	Tel No e-mail id:				
PARTIC	CULARS OF DEPENDE	INTS					V IIIGII	IU.	
	OUSE / CHILDREN								
Sr.No	Name	Date of birth (attach copy of birth certificate)		Sex	Residing at		Any gainful employment (if children between 18-25 yrs)		
1						(20)			
2									
Note: On	ly two children can be regist	tered Annual un	rdate on children	a not room	imd one	o alesado			
.update tl	hereafter, by March each year	r or when status c	changes. Life-lo	ong dene	ndency	e aiready if annlie	made illi mey	attain 18 years age at	
(B) PA	ARENTS *			ong depe	nachoj	паррис	s, to oc suppo	rica by abcuments.	
Sr.No		Date of birth	Relation	Resid	Mont		nbined hly Income	Initials	
1						from	all sources		
2					selia — Es		- 10.00 - 10.000		
* Please	fill up details as per Ar m is not filled or is incom	nexure "I". "	B" above wil	l not be	conside	ered for	Registration	if Annexure "I"	
are eligi understa proceedi	ead the eligibility criteria and the for registration under and that my membership coings. I understand that the etc. rests on me for claiming	the Contributor ould be terminated by burden of processing the contributor of the contrib	ry Medical Sc ted by the Con	heme. I npetent A	n case a Authorit	any info y and al	rmation is fou so render me l	and to be incorrect, iable for disciplinar	
Signatur	e of Applicant:						Date:		
	nendations of Reporting O Section/Division	fficer or							
Approva	al of Registration (By Head	d, RAC, Ooty)							
	oved due to :								

Date

Signature:

OOTY MEDICAL SCHEME

BRIEF EXTRACT OF RULES

1. ELIGIBILITY

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OOTY MEDICAL SCHEME

Hospital	ODD /IDD NI
······································	OPD/IPD No:

Dear Madam / Sir,

Please provide OPD / IPD treatment to the following patient:

DETAILS OF THE PATIENT

Patient's name Sex Age

Prime beneficiary's name

Patient's relationship

with the prime

beneficiary Med. Scheme No Whether 1

Whether ICU / ICCU YES/NO

admission required

Bed Entitlement General / S.P / Private Accommodation limit Rs.... per day

Preliminary diagnosis

Departments referred

• I certify that I shall report back to the medical officer with necessary papers / test reports

• I am aware of my bed entitlement and undertake to bear excess expenditure on account of admission to higher class of accommodation if sought

Referred By

Patient / Prime beneficiary's signature

Sign. Of Authorised Panel Doctor

- 1. Bills may be sent to RAC for settlement. In case of hospital admission, please send a copy of the discharge card of the patient for our reference and records.
- 2. For inpatient treatment, medicines, syringes, injection etc., may be issued from your drug stores and bill to us obtaining the signature of the patient or prime beneficiary.
- 3. Cataract Surgery: Cost of surgery, as per package. Please include the cost of intra ocular lens up to a limit of Rs.3600/- in the bill and any amount over and above this may be directly collected from the patient / prime beneficiary. Phaco charges to be collected from patient.
- 4. Angioplasty: Cost of surgery, as per package. One cipher and one bare metal stent are allowed.
- 5. Dental: Orthodontic treatment is generally not admissible, unless necessitated following an accident. Dental fillings with silver, glass ionomer, light cured composite etc., admissible. RCT admissible. For dentures, please forward detailed estimate.
- 6. This referral letter is valid for 30 days from the date of commencement of treatment at the hospital in the case of OPD patients and till discharge in the case of IPD patients.

Date:

OOTY MEDICAL SCHEME

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- * Three [first three] if registered prior to 1.2.1998.
- (c) Physically / Mentally challenged children shall be eligible for the benefits, till such time they are dependent on the prime beneficiary, provided the disability is certified to exceed 40% for physically & above "mild retardation" for mentally challenged.

Note: Married, divorced or otherwise legally separated and widowed daughters, even though dependent on the employee, are not eligible for benefits under the scheme.