

**CONTRIBUTORY POST RETIREMENT MEDICARE SCHEME FOR NON-EXECUTIVES OF  
COAL INDIA LTD & ITS SUBSIDIARY COMPANIES AND SCCL (Modified)**

**1.0 TITLE & COMMENCEMENT OF THE SCHEME:**

The scheme shall be known as *CONTRIBUTORY POST RETIREMENT MEDICARE SCHEME FOR NON-EXECUTIVES (Modified) i.e. CPRMS-NE (Modified)*.

Under the Superannuation Benefit, the medical facility is being extended to the eligible Ex Non-Executive Cadre employees of CIL, its Subsidiary and SCCL along with their spouses and Divyang Child(ren). This scheme is mandatory for all the Non-Executive Cadre employees who were on rolls of CIL/Subsidiaries as on 01.07.2016 including the new incumbents who joined/will be joining thereafter. The scheme will be managed by the Board of Trustee (BOT) of a Trust formed for this purpose.

This will come into effect from 01.07.2016 after the issuance of Administrative Order and therefore all the provisions of the scheme, unless specifically mentioned, shall be effective from 01.07.2016.

**2.0 ELIGIBILITY/ PERSONS COVERED UNDER THE SCHEME**

2.1 The Scheme will apply to the Non-Executive Cadre employees of Coal India Limited, its subsidiary companies and SCCL along with their spouse and Divyang Child(ren). Such employees should have separated on the following grounds to become a Member of this Scheme: -

- a) On attaining the age of superannuation
- b) Whose employment is ceased on medical grounds
- c) Who have retired under Voluntary Retirement Scheme
- d) Who resigns from the company at the age of 57 Years or above
- e) In case of death of a serving Non-Executive Cadre employee, his/her spouse would be eligible for membership after depositing the full contribution
- f) In case of death of a retired Non-Executive Cadre employee before becoming member, his/her spouse would be eligible for membership after depositing the full contribution
- g) In case of death of the retired Non-Executive Cadre employee who has been availing of the benefits under the Scheme, his/her spouse will continue to avail the benefits under the scheme subject to continuing to meet the terms and conditions of the Scheme
- h) Divyang Child(ren), as defined under CGHS [As per Office Memorandum No.: 4-24/96-C&P/CGHS (P)/EHS dated 07.05.2018 of Ministry of Health & Family Welfare, Department of Health & Family Welfare, Govt. of India (copy enclosed)], fully financial dependent on the member will also be the beneficiary under the scheme. The Divyang Child(ren) shall include son as well as daughter. There shall be no limit on no. of Divyang Children a member can include. However, for each Divyang Child separate contribution, as applicable, is to be deposited. There shall be no age limit for inclusion of Divyang Child(ren).

Non-Executive Cadre employees who were on rolls of CIL/Subsidiaries as on 01.07.2016 or joined/will be joining thereafter and thereby become member of the scheme, shall be allowed to include their Divyang Child(ren) on their date of retirement/separation after depositing applicable contribution.

- i) For the members of CPRMS-NE (2014) who do not become member of the CPRMS-NE (Modified), the previous scheme, i.e. CPRMS-NE (2014) will continue. In other words, if a separated employee [who was member of CPRMS-NE (2014)] is unable to pay the requisite member's contribution as per CPRMS-NE (Modified), (s)he will not be a member of CPRMS-NE (Modified).
- j) As a special case, employees retired prior to 01.07.2016 will be given an option to become member of CPRMS-NE (Modified) till 29.02.2020 by depositing uniform contribution of Rs. 40,000/- or the balance amount, if members of CPRMS-NE (2014), as applicable. No contribution shall be made by Management.
- k) Employees, who were on roll of CIL/Subsidiaries as on 01.07.2016 or joined/will be joining thereafter, on deduction/deposition of full member's contribution, shall deemed to be the members of CPRMS-NE (Modified) from the date of their separation as per the scheme. Medical card shall be issued on the date of their separation subject to fulfilling other terms and conditions of the scheme.

**2.2** The benefit under the scheme would be available to the concerned retired/separated Non-Executive Cadre employee (who has become member of the Scheme), his/her spouse and Divyang Child(ren), if applicable. However, for the same treatment, benefit shall not be payable from any other source

### **3.0 BENEFITS**

The Benefits under the scheme will be admissible for treatment taken only within India and would be regulated as under:-

**3.1** Reimbursement of medical expenses for indoor and outdoor treatment will be regulated on the following terms and conditions: -

#### **3.1.1 INDOOR TREATMENT**

**a)** Reimbursement of Medical expenses incurred for indoor treatment will be allowed as follows:-

**(A)** On CGHS rate or actual basis whichever is less in the following cases:

- i. If treatment is taken in Government Hospitals, Hospitals under Semi-Govt./Municipal Corporation or Hospitals of other PSUs.
- ii. If treatment is undertaken in Empanelled Hospitals notified by CIL & its Subsidiaries including SCCL.

**(B)** On the CGHS rate or actual basis whichever is less, for treatment taken in any other hospitals/nursing homes other than mentioned above, in the following cases:-

- i. During emergencies like Heart Attack, accidents etc.
- ii. Non-availability of empanelled hospitals in a particular town or city

Such reimbursement under clause 3.1.1 (a) (B) will be released on case to case basis on obtaining the approval of the Board of Trustees (BoT) or any person(s) authorized by the BoT.

Till formation of the Trust of CPRMS-NE (Modified) and its being operational, following officials shall be empowered to grant approval for release of reimbursements in such cases mentioned under Clause under clause 3.1.1 (a) (B): -

- i. Director (Personnel) of the Subsidiaries for cases pertaining to their respective subsidiaries
- ii. Director (P & IR), CIL for cases pertaining to CIL (HQ), Kolkata, RSOs, allied establishments
- iii. Director (Technical), CIL for cases pertaining to NEC

**(C)** In case of Company's Hospital/dispensaries, the treatment will be provided to Members as applicable to them at the time of their superannuation/retirement/separation.

- b)** Eligibility for indoor admission will be restricted in the Ward/Cabin as was applicable to the employee at the time of retirement/separation.
- c)** The maximum amount reimbursable during the entire life for the retired Non-Executives Cadre employee and spouse taken together would be Rs. 8.0 lakh (Rupees Eight Lakh only). In case of death of spouse/not having spouse, the entire/balance amount, as applicable, shall be availed by the surviving spouse/member.

In case, husband and wife both are/were employed in Non-Executive cadre in CIL, its Subsidiaries or SCCL and have contributed full amount i.e. Rs. 40,000/- each as member's contribution, each shall be entitled separately to avail benefit of Rs. 8.0 Lakh (Rupees Eight Lakh only) as maximum amount reimbursable during their respective lives.

The maximum amount reimbursable during the entire life of the Divyang Child would be Rs. 2.5 lakh (Rupees Two Lakh Fifty Thousand only).

If a member of CPRMS-NE (2014) who availed a portion of the benefit under CPRMS-NE (2014), joins CPRMS-NE (Modified) after making requisite member's contribution, (s)he shall be entitled to avail the balance amount of benefit as per CPRMS-NE (Modified) [e.g. if a member of CPRMS-NE (2014) has spent Rs. 2 Lakhs for general diseases under the Scheme, after becoming member of the Modified scheme, he is eligible to avail the benefit of  $8-2=6$  Lakhs only.]

Note:- The above, 3.1.1 (c) will be excluding the reimbursement for critical diseases as per the clause 3.1.1 (d).

- d)** In case of critical diseases, defined as under, the benefit to member, spouse and Divyang Child(ren) if any, will be unlimited as per CGHS rates:-
  - i)** Heart diseases involving surgical intervention which will include
    - (1)** Coronary Artery By-pass Grafting
    - (2)** Coronary Angioplasty including cost of stent
    - (3)** Pacemaker implantation including cost of pacemaker
    - (4)** Any other surgical intervention required for heart disease.Payment may be made on actual basis or on the basis of CGHS approved rates whichever is less.

- ii) Cancer treatment including
  - (1) Cost of Chemotherapy taken at home as prescribed by the concerned oncologist of notified/empanelled hospital provided the cost does not exceed the cost of Chemotherapy taken at Indoor or Day Care Centre
  - (2) Cost of investigations for follow up treatment of Cancer patient to evaluate progress and metastasis (may be twice in a year or more) based on advice of the concerned Oncologist of the notified hospital
  - (3) Cost of Palliative treatment i.e., end stage treatment of cancer patients at home. Payment may be made on actual basis or on the basis of CGHS approved rates whichever is less.
- iii) Renal disease which will include Peritoneal Dialysis including CAPD (Continuous Ambulatory Peritoneal Dialysis taken at
  - (1) indoor i.e. hospital
  - (2) day Care
  - (3) home
 provided the cost does not exceed the cost of dialysis taken at Day Care or Indoor. Payment may be made on actual basis or on the basis of CGHS approved rates whichever is less. Organ failure inclusive of transplant and follow up outdoor treatment will also be included
- iv) "Neurological Disorder" which will include
  - (1) Surgery - Brain & Spine Surgery
  - (2) Cerebro Vascular Accident
  - (3) Cost of Pacemaker in Brain Surgery (deep brain stimulation surgery)
  - (4) Physiotherapy - Payment may be made on actual basis or on the basis of CGHS approved rate whichever is less.  
Cost of DBS implants, intrathecal pumps and spinal stimulators cord physiotherapy (both indoor and outdoor/domiciliary) will be reimbursed as per CGHS rates or actual whichever is less.
- v) HIV-AIDS & Addison's disease/Adrenal Hypoplasia
- vi) Critical accidents cases of emergent nature involving head/brain/ spinal injury, resulting in amputation/ fracture of long bones, injury to internal organs, etc.
- vii) Cerebral fever

In addition to the above, the case of Chemotherapy (Cancer) and Dialysis (Renal Disease) taken at Daycare Centre, it will be treated as Indoor Treatment.

### **3.1.2 OUTPATIENT/DOMICILIARY TREATMENT**

- a) Reimbursement of Medical expenses incurred for outdoor/domiciliary treatment will be allowed if the treatment is obtained in the following Hospitals on CGHS rate or actual basis, whichever is less:
  - i) Government Hospitals
  - ii) Empanelled Hospitals as notified by Coal India Ltd. and its Subsidiaries

b) The payment of Outpatient/Domiciliary treatment shall be from the amount as mentioned in 3.1.1(c), restricting an amount to Rs. 25,000/- Per Annum per beneficiary subject to submission and verification of bills. Financial Year is to be considered for payment of such amount.

**3.2** Ambulance charge will be reimbursed only if ambulance service is provided by the Empanelled hospital and the same shall be restricted to the entitlement as per TA rules applicable to the concerned member at the time of his/her retirement/separation.

**3.3** Travelling expenses or allowance would not be admitted for journey undertaken for the purpose of obtaining Indoor or Outdoor treatment for self, spouse or Divyang child, if any.

#### **4.0 CONTRIBUTION STRUCTURE**

##### **4.1 MEMBER'S CONTRIBUTION INCLUDING SPOUSE AND DIVYANG CHILDREN**

The Contribution amount per Non-Executive (Separated/On-roll) shall be Rs 40,000/- (Rupees Forty Thousand only) as one-time payment or in instalments, as applicable. For the membership of Divyang child (ren), contribution of Rs. 20,000/- per Divyang child would be required in addition to Rs. 40000/-.

No exemption from member's contribution under CPRMS-NE (Modified) shall be granted to any Non-Executive Cadre employee who was on rolls of CIL/Subsidiaries as on 01.07.2016 or joined/will be joining thereafter.

There is uniform member's contribution of Rs. 40,000/- each for all under this scheme.

In case, both the spouses are working in Non-Executive Cadre in CIL/Subsidiaries, as on 01.07.2016 or thereafter, both shall mandatorily contribute Rs. 40,000/- each.

##### **4.2 EMPLOYER'S CONTRIBUTION PER MEMBER**

Employer will contribute Rs 18000/- (Rs. Eighteen Thousand only) either as one-time payment against Member's Contribution of Rs 40000/- (Rupees Forty Thousand only) or in instalments, as applicable. In case of Divyang Child(ren), the contribution of the management would be Rs. 9000/- (Rupees Nine Thousand only) Per Divyang Child in addition to Rs, 18000/- per member. In respect of employees, who were separated from the services prior to 01.07.2016 and their Divyang Child(ren), no contribution will be made by the Management.

**4.3** The maximum number of equal monthly instalments for contribution amount per membership, in respect of Non-Executive Cadre employees who were on roll of the company as on 30.06.2016 and continued thereafter, shall be twenty. Therefore for Non-Executive Cadre employees who were on roll of the company as on 30.06.2016 and continued thereafter, member's contribution shall be Rs 2000/- (Rupees Two Thousand only) per month and Employers' Contribution per member would be Rs 900/- (Rupees Nine Hundred only) per month.

**4.4** If the remaining service of the Non-Executive Cadre employee is less than twenty months, the proportionate deduction of the contribution (Employer's and Member's Contribution) shall be made so as to receive the full contribution amount well before retirement. Option for lumpsum payment of employee's/member's contribution may also be provided to the employees.

**4.5** For new incumbents i.e. Non-Executive Cadre employees who joined/will be joining on or after 01.07.2016, contribution will be made @ Rs. 40000/- (Rupees Forty Thousand only) in forty equal monthly instalments.

**4.6** In case, husband and wife both are employed in Non-Executive Cadre in CIL, its Subsidiaries or SCCL as on 01.07.2016 or thereafter, both shall have to mandatorily contribute Rs. 40,000/- each to become member of the Scheme separately. In the above scenario, both of them shall be entitled to avail full benefit of the scheme i.e. Rs. 8.0 Lakh each as maximum amount reimbursable during their respective entire lives and benefits for critical diseases as per 3.1.1 (d).

**4.7** If both the spouses were employees of CIL/Subsidiaries in Non-Executive Cadre and both retired prior to 01.07.2016 and each becomes member of CPRMS-NE (Modified) by making individual contribution of Rs. 40,000/- each, they can avail full benefit i.e. Rs. 8.0 lakh each as maximum amount reimbursable during their respective entire lives and benefits for critical diseases as per 3.1.1 (d).

However if one of them, in above scenario, becomes member of the modified scheme, both of them can jointly avail the benefit of the scheme with maximum limit of Rs. 8.0 Lakh jointly and benefits for critical diseases as per 3.1.1 (d), subject to fulfilling all other terms and conditions as stipulated in the scheme.

Further, if one of the spouses is on roll employee in Non-Executive Cadre as on 01.07.2016 or thereafter and the other has retired (in Non-Ex. Cadre) prior to 01.07.2016, the already retired spouse can avail benefit of scheme, post separation of the on roll non-executive cadre employee (who was on roll as on 01.07.2016 or thereafter) and his/her becoming member of the scheme subject to fulfilling all other terms and conditions.

In case of Non-Executive Cadre Employees who retired/separated during the tenure of "10th Wage Agreement for CIL and SCCL" and for whom the full member's contribution has not been deposited/deducted, the balance/full member's contribution, as applicable, is to be recovered from Arrears. If the arrear amount is less than the requisite contribution, arrear is to be forfeited and the balance amount of membership contribution is to be recovered from non-statutory dues. If it is not possible to recover the member's contribution for such employees, the employee concerned is to be intimated to deposit the balance/full amount of member's contribution, as applicable, as per the modified scheme.

If the employee concerned doesn't deposit the requisite amount, the amount recovered/forfeited towards member's contribution of CPRMS-NE (Modified) may be returned and the employee may be debarred from becoming member of the CPRMS-NE (Modified) in future.

**4.8** For retired/separated Non-Executive Cadre employees, the contribution shall have to be deposited with the Company from where the non-executive has retired/separated. Only after making a full contribution, they will become a member of the scheme. However, members of CPRMS-NE (2014) shall have to deposit the balance amount of member's contribution as per CPRMS-NE (Modified), as applicable, as per Clause 5.1 of the Scheme.

**4.9** The contribution, as above, shall be payable in advance before availing the benefits of the scheme.

**4.10** Contribution once paid shall not be refunded. However, in case of death of a Non-Executive Cadre employee while in service on or after 01.07.2016 (for whom full/partial member's contribution has been deducted/deposited), having no dependant spouse, the contributed amount may be refunded without any interest to the legal heir of the deceased.

## **5.0 PROCEDURE**

- 5.1** An eligible Non-Executive Cadre employee, who intends to avail the medical benefits under the scheme, shall apply for the purpose to the Head of Non-Executive Establishment of Coal India Limited or its subsidiary companies from where (s)he has retired/separated along with membership amount, if not already paid/deducted.

Members of CPRMS-NE (2014) who retired/separated from one establishment and have been availing benefit under CPRMS-NE (2014) from another establishment, for becoming member of CPRMS-NE (Modified) and depositing the balance amount, shall approach the establishment from where they have been availing benefit under CPRMS-NE (2014).

However, if a members of CPRMS-NE (2014) wishes to include his/her Divyang Child(ren) as beneficiary under CPRMS-NE (Modified), for membership of self, spouse and Divyang Child(ren), (s)he shall have to approach the establishment from where (s)he separated/retired.

Members will have the option to get medical reimbursement either from the company from where they retired/separated or any other Subsidiary company or from the Head Office of Coal India Limited, Kolkata and SCCL, Singareni (only in case of Non-Executive Cadre employees of SCCL).

The retired Non-Executives settled in the region of North Eastern Coalfields will be served from the office of the General Manager or Head of the North Eastern Coalfields, Margherita.

A member will have the option of changing the subsidiary company/CIL(HQ)/SCCL (HQ) for medical reimbursement under the scheme but for not more than twice throughout the tenure of membership.

- 5.2** Coal India Ltd. will finalise the agency for designing the medical card/smart card as well as maintaining the centralized database linked to the database of subsidiaries for the following:-

- i.** Online application filling, with provision to check the same at unit level (unit level login)
- ii.** Auto Medical card No. generation facility
- iii.** Online claim filling, or facility to Medical department to enter the details of claims
- iv.** Login to Finance for entering the details of admissible reimbursements
- v.** Auto generated SMS/E-mail communication for claim submission & reimbursement details etc.
- vi.** Real time view of balance amount to the Member/Company (Personnel/Medical/Finance)/Hospitals (login may be provided to empanelled hospitals, or an online view may be provided with proper security features, to avoid misuse of data. & other conditions as decided by the BoT).
- vii.** Obtaining approval of CMS

The respective Subsidiary including SCCL will issue the Uniform Medical Card/Smart Card linked to Aadhar Card in this regard.

For members of CPRMS-NE (2014), a separate Medical card shall be issued only after depositing the card issued under CPRMS-NE (2014).

Medical Book for keeping Medical History of the member shall be prepared. Application form for membership and format of Medical Card shall be issued by CIL.

**5.3** All the Members [Retired Non-executive and/or spouse and Divyang Child(ren), if any] will have to submit a self- Certified Aadhar Linked Life Certificate every year in the month of December. As an alternative arrangement, in very special cases, Life certificate would be issued by any one of the following:-

- i) The Branch Manager of the Bank where the concerned retired/separated Non-Executive and/or spouse is maintaining the Saving Bank Account
- ii) A Gazetted Officer of Central Govt. or State Govt.
- iii) A Registered Medical Practitioner registered with Medical Council of India (MCI)
- iv) Officer of the company from where the medical facility is being obtained

**5.4** The Medical Card /Smart Card issued will be revalidated on yearly basis on submission of Life-certificate including online life certificate in December every year. Non-submission of "Life-Certificate" will make the Medical Card invalid.

### **5.5 PROCEDURE FOR GETTING TREATMENT**

(i) In Critical Diseases:- Approval of CMS (I/C) of the concerned subsidiary would be required.

(ii) In Emergency Cases:- Intimation to the CMS (I/C) of the concerned subsidiary during the period of treatment.

(iii) In General Cases:- Intimation to the CMS (I/C) of the concerned subsidiary during the period of treatment.

### **6.0 CLAIM**

The following procedure will be followed for claiming benefits by the members:-

#### **6.1 PAYMENT OF OUTPATIENT/DOMICILIARY TREATMENT**

The amount payable for outpatient/domiciliary treatment for the member, spouse and Divyang child(ren), if applicable, taken together would be as provided under clause 3.1.1 (c) and 3.1.2.

#### **6.2 REIMBURSEMENT OF CHARGES**

a) Efforts would be made for cashless treatment in the empanelled hospitals by issuance of Smart Cards with complete details/database.

b) However, till the arrangement as (a) above is made, reimbursement of medical expenditure incurred by the beneficiaries covered under the scheme will be as under:-

The retired Non-Executives shall submit claim on a quarterly basis viz. Quarter Ending 31<sup>st</sup> March, 30<sup>th</sup> June, 30<sup>th</sup> September and 31<sup>st</sup> December to the Head of the Medical Dept. of concerned Subsidiary HQ/Area (HQ), CIL Hqrs., NEC and SCCL wherever the member is registered, as the case may be. The reimbursement claim would be submitted in the prescribed form, with a self-attested photocopy of the Medical Card. The claims after scrutiny would be processed by the concerned Medical Dept. and would be forwarded to the concerned Finance Dept. for arranging payment. The claims shall normally be settled within a maximum period of 45 days from the date of its submission.



- c) Treatment/surgeries/procedures, room rent etc. as admissible and levied by the concerned Govt. Hospitals or empanelled hospitals will only be payable as per the clause 3.1.1 a (A)/ 3.1.1 a (B), as the case may be.
- d) Cashless Treatment in case of Hospitalization will be allowed only in the case of Empanelled Hospitals as notified by the CIL, its Subsidiaries & SCCL.

### **6.3 OTHER CONDITIONS**

The BoT shall not be liable to reimburse any expenses whatsoever incurred by the retired employee in connection with or in respect to:-

- i) Intentional self-injury, intemperance or the use of intoxicating drugs or liquor or/and injury, disease or illness directly or indirectly attributable to one or more of these causes.
- ii) Charges incurred for diagnostic or Radiological or laboratory examinations or other diagnostic test not consistent with and incidental to the diagnosis and treatment of any ailment, sickness or injury and not prescribed by Authorized Treating Doctor.
- iii) Expenditure on special nursing.
- iv) Expenditure towards cosmetic surgery.
- v) Travelling expenses for outstation treatment.

### **7.0 MANAGEMENT OF FUND**

7.1 Separate trusts for CIL and SCCL for CPRMS-NE (Modified) shall be formed.

7.2 For CIL, the control and management of the Fund shall be vested with the BoT constituted by CIL, comprising of one representative each from five (5) Central Trade Unions (participating in JBCCI) and equal number of representatives of the Management. Director (P & IR), CIL & Director (Finance), CIL will be the permanent members of the BoT.

7.3 The Board of Trustees shall be responsible for and accountable to the members/beneficiaries and/or the Company for proper investment and accounting of funds and payment of benefits, as per the provisions of the rules.

7.4 The Board of Trustees may select Fund Managers to manage the Funds.

### **8.0 GENERAL**

8.1 In case any doubt arises regarding the genuineness or otherwise of the claims preferred by the member/beneficiary, the Board of Trustees reserve the right to direct the beneficiary to present himself/herself before a Medical Board and the settlement would be as per the final recommendation of the Medical Board in this regard.

8.2 If it is found that there is any misuse of the benefits under the Scheme by any Member/beneficiary, (s)he may be debarred from availing the benefits under the scheme.

8.3 After formation of the Trust of CPRMS-NE (Modified) and its being operational, the Board of Trustees (BoT) shall deliberate and decide about any amendment in the scheme, if required.

8.4 In case of any ambiguity in the scheme, the interpretation/decision of BoT (after formation of the Trust and its being operational), will be final and binding.

8.5 Coal India Limited shall bear all expenses related to the administration of the scheme.

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No. 4-24/96-C&P/CGHS (P)/EHS  
Government of India  
Ministry of Health & Family Welfare  
Department of Health & Family Welfare  
EHS Section  
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Nirman Bhawan, New Delhi  
Dated: the 7th May, 2018

OFFICE MEMORANDUM

**Subject: Eligibility of Permanently Disabled Unmarried Son of a CGHS Beneficiary to avail CGHS facility - Reg.**

The undersigned is directed to refer to this Ministry's Office Memoranda of even number dated 31.05.2007, 29.08.2007 and 02.08.2010 vide which the entitlement of the son of a CGHS beneficiary beyond the age of 25 years was conveyed. As per the two Office Memoranda under reference, it was indicated that an unmarried son of a CGHS beneficiary suffering from any permanent disability of any kind (physical or mental) will be entitled to CGHS facility even after attaining the age of 25 years.

2. Since then this Ministry is in receipt of several representations for inclusion of more conditions in view of modification to the PwD Act, 1995 by "**The Rights of Persons with Disabilities Act, 2016 (Act No. 49 of 2016)**" as notified by M/o Law and Justice, Govt. of India on 27.12.2016. The matter has been reviewed by the Ministry and it is now decided that for the purpose of extending the CGHS benefits to dependent unmarried son of CGHS beneficiary beyond 25 years of age, the definition of 'Permanent Disability' shall include the following conditions :

**I. Physical disability:**

**A. Locomotor disability including**

- a) **Leprosy cured person-** suffering from loss of sensation in hands or feet as well as loss of sensation and paresis in the eye and eye-lid but with no manifest deformity or suffering from manifest deformity and paresis or having extreme physical deformity as well as advanced age which prevents him/her from gainful occupation
- b) **Cerebral palsy** – caused by damage to one or more specific areas of the brain usually occurring before, during or immediately after birth.
- c) **Dwarfism-** a medical genetic condition resulting in an adult height of 147 cms or less;
- d) **Muscular dystrophy-** a group of hereditary genetic muscle diseases characterized by progressive skeletal muscle weakness
- e) **Acid attack victims** – disfigured due to violent assaults by throwing acid or similar corrosive substance

**B. Visual impairment:**

- a) **Blindness-** where a person has any of the following conditions after best correction:
  - (i) Total absence of sight or
  - (ii) Visual acuity less than 3/60 or less than 10/200(Snellen) in the better eye with best possible correction
  - (iii) Limitation of field of vision subtending an angle of less than 10 degree
- b) **"Low vision"** means any of the following conditions:
  - (i) visual acuity not exceeding 6/18 or less than 20/60 upto 3/60 upto 10/200

- (Snellen) in the better eye with best possible corrections; or
- (ii) limitation of the field of vision subtending an angle of less than 40 degree up to 10 degree

### C. Hearing Impairment

- (a) "deaf" means persons having 70 db hearing loss in speech frequencies in both ears;
- (b) "hard of hearing" means persons having 60 db to 70 db hearing loss in speech frequencies in both ears;

**D. "Speech and Language disability"** – permanent disability arising out of conditions such as Laryngectomy or aphasia affecting one or more components of speech and language due to organic or neuronal causes.

**II. Intellectual disability-** characterized by significant limitation both in intellectual functioning (reasoning, learning, problem solving) and in adaptive behavior , which cover a range of every day, social and practical skills , including-, social and practical skills , including-

- (a) **"Specific language disabilities"** – a heterogeneous group of conditions wherein there is deficit in processing language, spoken or written, that may manifest itself as a difficulty to comprehend, speak, read, write, spell, or to do the mathematical calculations and includes conditions such as perceptual disabilities, dyslexia, dysgraphia, dyscalculia, dyspraxia and developmental aphasia
- (b) **"Autism spectrum disorder"** – a neuro-developmental disorder typically appearing in the first three years of life that significantly affects a person's ability to communicate, understand relationships and relate to others, and frequently associated with unusual or stereotypical rituals or behaviour.

### III. Mental behaviour

"Mental illness"- a substantial disorder of thinking, mood, perception, orientation or memory that grossly impairs judgement, behaviour, capacity to recognize reality or ability to meet the ordinary demands of life, but does not include retardation.

### IV. Mental Retardation

#### V. Disability caused due to

- (a) **Chronic neurological conditions** such as
  - (i) Multiple Sclerosis
  - (ii) Parkinson's disease
- (b) **Blood disorder**
  - (i) Haemophila
  - (ii) Thalassemia
  - (iii) Sickle Cell Disease

#### VI. Multiple Disabilities ( more than one of the above disabilities)- including deaf blindness

3. Bench Mark Disability- unmarried permanently disabled and financially dependent sons of CGHS beneficiaries suffering 40% or more of one or more disabilities as certified by a Medical Board shall be eligible to avail CGHS facilities even after attaining the age of 25 years.

4. This OM will be effective from the date of its issue.



(Rajeev Attri)

Under Secretary to the Govt. of India  
Tel: 011-2306 1883

To

- 1) All Ministries/Departments, Government of India

- 2) Director, CGHS, Nirman Bhawan, New Delhi
- 3) Addl. DDG(HQ), CGHS, MoHFW, Nirman Bhawan, New Delhi
- 4) AD(HQ), CGHS, R.K.Puram, Sector-12, New Delhi
- 5) All Addl. Directors/Joint Directors of CGHS cities outside Delhi
- 6) Additional Director (SZ)/(CZ)/(EZ)/(NZ)/(MSD), MCTC CGHS, New Delhi
- 7) JD(HQ), JD (Grievance)/JD (R&H), CGHS, Delhi
- 8) DDG(M) /CMO(SRA), Dte.GHS, MoHFW, Nirman Bhawan, New Delhi
- 9) Rajya Sabha/Lok Sabha Secretariat, New Delhi
- 10) Registrar, Supreme Court of India, New Delhi
- 11) U.P.S.C. Dholpur House, New Delhi
- 12) Office of the Comptroller & Auditor General of India, Pocket-9, Deen Dayal Upadhyaya Marg, New Delhi - 24
- 13) Director, Department of Pension & Pensioners Welfare, Lok Nayak Bhawan, Khan Market, New Delhi
- 14) PPS to Secretary (H&FW)/Secretary (AYUSH)/Secretary (HR)/Secretary (AIDS Control), Ministry of Health & Family Welfare
- 15) PPS to DGHS/AS&DG (CGHS)/AS&FA/AS&MD, NRHM/AS(H), MoHFW, New Delhi
- 16) MS Section, MoHFW, Nirman Bhawan, New Delhi
- 17) MG-II Section, Dte.GHS, Nirman Bhawan, New Delhi
- 18) Hospital Empanelment Cell, CGHS, MoHFW, Nirman Bhawan, New Delhi
- 19) CGHS-I/II/III/IV, Dte. Gen of CGHS, MoHFW, Nirman Bhawan, New Delhi
- 20) Estt.I/Estt.II/Estt.III/Estt.IV Section, MoHFW, Nirman Bhawan, New Delhi
- 21) Admn.I/Admn.II Section, Dte.GHS, MoHFW, Nirman Bhawan, New Delhi
- 22) Integrated Finance Division, MoHFW, Nirman Bhawan, New Delhi
- 23) All Officers/Sections/Desks in the Ministry
- 24) Deputy Secretary (Civil Service News), Department of Personnel & Training, 5<sup>th</sup> Floor, Sardar Patel Bhawan, New Delhi
- 25) Shri Umraomal Purohit, Secretary, Staff Side, 13-C, Ferozshah Road, New Delhi
- 26) All Staff Side Members of National Council (JCM)
- 27) ED(H)/Planning, Railway Board, Ministry of Railways, Rail Bhawan, Rafi Marg, New Delhi - 110001
- 28) Central Organisation, ECHS, Department of Ex-Servicemen Welfare, Ministry of Defence, New Delhi
- 29) Chairman, Employees State Insurance Corporation, Ministry of Labour & Employment, Panchdeep Bhawan, C.I.G. Marg, New Delhi-110002
- 30) UTI-ITSL, 153/1, First Floor, Old Madras Road, Ulsoor, Bengaluru-560008.
- 31) Sr. Technical Director, NIC, MoHFW, Nirman Bhawan, New Delhi with the request to upload this OM on the Ministry's website under the link of CS (MA) Rules – OMs and Circulars
- 32) Hindi Section, MoHFW, Nirman Bhawan, New Delhi for providing Hindi version of this OM.
- 33) Guard file