CHAPTER–VII

MEDICAL ATTENDANCE RULES

These Rules called the RITES Medical Attendance Rules initially effective from 15th October, 1997 have been amended from time to time.

1. Objective

These Rules are designed to provide a certain measure of social security and insurance to employees and their family members against various types of illnesses, which befall them during employment.

2. Scope and Applicability

These rules apply to all (i) regular employees of the Company and those on probation, extension, reemployment, (ii) those who are on deputation from a Government department, or other Public Sector Undertaking who opt to be governed by these rules instead of by the Rules in force in their parent organisation within a month of joining the Company and also (iii) to those working on temporary/adhoc basis on a scale of pay. These rules are not applicable to casual and daily rated employees and those engaged on contract basis unless specifically provided for in their appointment terms.

3. Definitions

(1) "Authorised Medical Attendant" (AMA) means any qualified medical practitioner, whether in the service of the Company or practising medicine elsewhere and acceptable to the Company.

(2) "Family" will include

(i) Wife or husband of an employee, whether she or he is having independent income or not;
(ii) unmarried daughters;
(iii) sons of employee who are wholly dependent on him;
(iv) married and widowed daughters who are wholly dependent on the employee;
(v) steps-sons, unmarried step-daughters and widow step-daughters and one adopted child, who are wholly dependent on the employee;
(vi) dependent parents;
(vii) unmarried sisters, widowed dependent sisters;
(viii) minor (below the age of 18 years) dependent brothers.
4. Medical benefits

The employees of the Company, to whom these Rules apply will be eligible to be paid the expenses incurred by them from time to time during the course of their employment on the medical treatment of themselves and their family subject to the stipulations and monetary limit prescribed in the following rules.

5. Medical Treatment covered by the Rules

(1) Medical treatment for the purpose of these Rules will include treatment-
   (i) at the consulting room of an AMA
   (ii) at the residence of the family
   (iii) at the outpatient department of any hospital
   (iv) as indoor patient of any hospital or nursing home.

(2) It will also include all necessary specialised attention like pathological, radiological & other methods of diagnosis, dental and opthalmological services, maternity and surgery etc.

6. Monetary ceiling to the reimbursement of expenses on medical treatment

(1) Monetary ceiling for reimbursement of medical expenses for out-door treatment for an individual employee and his family members would be one month's basic pay subject to a minimum of Rs.4000/- and maximum of Rs.10,000/- per annum.

(2) In the case of special diseases/illnesses mentioned below which require prolonged out-door treatment, reimbursement outside the ceiling limit referred in sub-para (1) above would be made with the approval of a Director of the Company:
(3) Full reimbursement of expenditure, incurred by an employee for himself or for his family members on treatment availed of either from nominated hospitals or from any other premier hospital for AIDS, Cancer, Kidney Failure and Heart Bye-pass Surgery will be made.

(4) Full reimbursement of expenditure, incurred by an employee for himself or for his family members on treatment availed of from nominated hospitals by the company for 'Coronary Bye-Pass Surgery', 'Angioplasty', 'Angioplasty & Stenting', 'Value Dilatation', 'Prosthetic Valve Replacement', 'Survey for Congenital Heart Disease', etc., will be made.

(5) Full expenditure incurred by employees of the Company in connection with “Angiography” test, provided the treatment is taken by the employees from the empanelled or registered hospitals.

7. **Hospitalisation**

(i) For medical treatment requiring hospitalisation and indoor attention, full reimbursement would be made of the expenses incurred if the treatment is undertaken in a:

   (a) Government Hospital

   (b) Government aided hospital

   (c) Trust hospital established on no profit/no loss basis.
(ii) If the employee or his family member undergo indoor treatment in a private hospital, reimbursement of expenses incurred would be made keeping in view the rates fixed by the All India Institute of Medical Sciences (AIIMS) and also the Central Service (Medical Attendance) Rules.

Note: For the purpose of treatment in private hospitals, the Company would nominate from time to time reputed hospitals as in Annexure II in various cities where treatment can be taken by the employees and their family members. In the case of such nominated hospitals the Company may directly pay the charges but the excess over the prescribed rates of treatment as stated in sub-para (ii) applicable to the employee would be deducted from his salary or other dues. Identity Slips as in Annexure III would be issued to the employees for treatment in nominated hospitals.

8. Expenses on purchase of medicines

(a) All expenses on the purchase of medicines on the advice of an authorised medical attendant or the hospital authorities where treatment is undertaken will be reimbursed subject to prescribed ceiling except in the case of inadmissible medicines as listed in the Central Services (Medical Attendance) Rules.

Expenses incurred on purchase of certain preparation which are classified as foods, whether they are used as Baby Foods, Multi Foods, Invalid Foods, beverages, drinks etc., toilet preparation or disinfectants are not reimbursable. Proprietary preparation of medicine should, as far as possible, be avoided particularly when cheaper substitutes of equal therapeutic value are available.

(b) Expenses not exceeding Rs. 150/- per cash memo spent on purchase of medicines from Chemists could be reimbursed without the prescription issued by the authorised medical attendant.

9. Dental Treatment

Charges, for the supply of dentures, cleaning, polishing of teeth, filling of teeth with gold or dental treatment for cosmetic reasons are not reimbursable.

10. Ophthalmic Treatment

Apart from the consultation fee for an eye specialist, fees charged for testing of eyes will be reimbursed, but only once in three years unless this is done during the interim period on the advice of an eye specialist.

11. Pathological and other expenses

Expenses incurred on pathological and other investigations would be reimbursed, if such investigations are on the advice of an authorised medical attendant or by the hospital authorities.
12. **Reimbursement Procedure**

(1) Reimbursement of expenses on medical treatment under these rules will be made to the employee preferring a bill for this purpose enclosing the prescription of the AMA/hospital etc. and the cash vouchers for the purchase of medicines and incurring of other expenses from the concerned chemist, laboratory, hospital etc. In the case of employees in a grade below Rs. 12000-16500 or equivalent grade such bills should be endorsed to the Accounts Division through their SBU Head and in the case of others the bills may be sent directly to the Accounts Division for the purpose of check and reimbursement of the admissible amount.

(2) Such claims should normally be preferred not later than 3 months from the end of the month in which it is incurred.

(3) The individual Divisions/Offices have authority to reimburse within the present monetary ceiling limit. Cases of reimbursement for special/chronic diseases/illnesses and of indoor treatment in hospitals/nursing homes will be referred to Corporate Office for sanction.

(4) The unspent amount of the ceiling limits for reimbursement of medical expenses, as laid down in rule 6 (1) of one year, will be allowed to be carried forward subject to the condition that accumulation does not exceed three years entitlement.

13. **Interpretation and relaxation**

The Managing Director has the power to interpret these rules in case of doubt and his decision will be final. He may also relax the provisions of these Rules in individual cases of hardship for reasons to be recorded in writing.
RITES LTD.
(A Government of India Undertaking)

DECLARATION FOR CLAIMING REIMBURSEMENT OF MEDICAL EXPENSES

I, ______________________________(Name) __________________________

(Designation___________________________ (office) do hereby declare that:

1. The members of my family and other dependents for whom I shall be claiming reimbursement of medical expenses are as under:

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Name</th>
<th>Date of birth</th>
<th>Age</th>
<th>Relation</th>
<th>Residing with me since</th>
<th>Status (married/unmarried/widow)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
</tbody>
</table>

2. Particulars of other members of my family who are not dependent on me are as under:

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Name</th>
<th>Date of birth</th>
<th>Age</th>
<th>Relation</th>
<th>Residing with me since</th>
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</tbody>
</table>

3. My wife/husband is employed in ________________ /is not employed, and she/he will/will not claim reimbursement from RITES or her/his employer.

4. My brother(s)/unmarried sister(s) employed in ________________ (Govt./Public Sector/Private Sector) will not claim reimbursement of medical expenses in respect of dependents for whom I shall claim.

5. Certified that the person(s) for whom reimbursement will be claimed is/are wholly dependent on me and residing with me. His/her/their income from all sources put together does not exceed Rs.1500/- per month (excluding dearness allowance/reliefs on pension).

6. My other brother(s)/sister(s) are not contributing to the upkeep of my dependent(s) because of the following reasons:

   ____________________________

   ____________________________

   Signature of the employee

   Name: ______________________

Emp. No.: _____ Date of joining RITES: _____

Counter Signature of SBU Head

Signature of the Controlling Officer

Designation
Annexure-II

LIST OF NOMINATED HOSPITALS

1. Escorts Heart Institute & Research Centre, Okhla Road, New Delhi-110 025
2. Rajiv Gandhi Cancer Institute & Research Centre SectorIV, Rohini, New Delhi
IDENTITY SLIP TO BE ISSUED BY A NOMINATED OFFICER OF RITES LTD. PERSONNEL DEPARTMENT

No. ______________ Dated: ______________

To: Dr. ____________________________

(Name of the authorised/nominated person)

Name & address of the hospital

Dear Dr.,

Sub: Indoor treatment of RITES Ltd., employees and their family members.

Mr. / Mrs. ____________________________ (Name & designation of the employee of RITES Ltd.), whose Identity Card No. is ____________ , is authorised to avail of indoor treatment and hospitalisation in respect of the patient whose particulars are given below:

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Name of the patient</th>
<th>Age with the employee</th>
<th>Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

The patient/s is/are entitled for a room.

The bill on account of treatment/hospitalisation may be sent to the undersigned duly supported by necessary vouchers/documents and a certificate from the employee/patient that he/ she has availed of the treatment for which the bill is being raised to RITES Ltd.

Thanking you,

Yours faithfully,

_______________________________ (Signature)

Name (in block letters) & Designation of the authorised signatory