



No: S.4924/2010/CGHS(R&H)/CGHS(P)  
Government of India  
Ministry of Health & Family Welfare  
Department of Health & Family Welfare  
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Maulana Azad Road, Nirman Bhawan  
New Delhi 110 108 dated the 17<sup>th</sup> January 2011.

OFFICE MEMORANDUM

**Subject:** Clarification regarding reimbursement of Ambulance charges to CGHS beneficiaries-

The undersigned is directed to refer to the subject mentioned above and to state that this Ministry has been receiving several representations seeking clarifications regarding Ambulance charges to CGHS beneficiaries.

2. It is accordingly clarified that expenditure incurred on engagement of Ambulance by CGHS beneficiaries, comprising both serving Govt. employees and pensioners, is reimbursable provided that:

- (i) The doctor treating the patient certifies in writing that conveyance of patient by any other mode would definitely endanger the patient's life or would grossly aggravate his / her condition and
- (ii) That the journey is undertaken within the same city.

3. This issues with the concurrence of IFD vide Dy. No. 4888/Dt.11.01.2011 of the office of the AS&FA, Min., of Health & Family Welfare.

[Jai Prakash]

Under Secretary to Government of India  
[Tel: 2306 1881]

To

- 1 All Ministries / Departments, Government of India
- 2 Director, CGHS, Nirman Bhawan, New Delhi
- 3 All Additional Directors /Joint Directors of CGHS cities outside Delhi
- 4 All Pay & Accounts Officers under CGHS

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- 4 All Pay & Accounts Officers under CGHS
- 5 Additional Director (Hqrs) / Additional Director (SZ) / Additional Director (NZ) / Additional Director (CZ) / Additional Director (EZ), CGHS, New Delhi
- 6 JD (Gr.)/JD(R&H), CGHS Delhi
- 7 CGHS Desk-I/Desk-II/CGHS-I/CGHS-II, Dte.GHS, Nirman Bhawan, New Delhi
- 8 Estt.I/ Estt.III/ Estt.III/ Estt.IV Sections, Ministry of Health & Family Welfare
- 9 Admn.I / Admn.II Sections of Dte.GHS
- 10 Rajya Sabha / Lok Sabha Secretariat
- 11 Registrar, Supreme Court of India / Punjab & Haryana High Court, Chandigarh
- 12 U.P.S.C.
- 13 Finance Division
- 14 Deputy Secretary (Civil Service News), Department of Administrative Reforms & Public Grievances, 5<sup>th</sup> Floor, Sardar Patel Bhawan, New Delhi.
- 15 MS of Hospitals now being empanelled under CGHS, Delhi
- 16 PPS to Secretary (H&FW) / Secretary (AYUSH) / Secretary (HR) / Secretary (AIDS Control), Ministry of Health & Family Welfare
- 17 PPS to DGHS / AS&FA / AS (H) / AS&MD, NRHM / AS & DG (CGHS)
- 18 Swamy Publishers (P) Ltd., P. B. No. 2468, R. A. Puram, Bengaluru 600028.
- 19 Shri Umraomal Purohit, Secretary, Staff Side, 13-C, Ferozshah Road, New Delhi
- 20 All Staff Side Members of National Council (JCM) (as per list attached)
- 21 Office of the Comptroller & Auditor General of India, 10 Bahadur Shah Zafar Marg, New Delhi
- 22 All Offices / Sections / Desks in the Ministry
- 23 Sr. Technical Director, NIC, MOHFW, Nirman Bhawan, New Delhi with the request to upload on the website of the CGHS.
- 24 Office Order folder
- 25 Guard File

  
12/1/18

Government of India  
Ministry of Personnel, Public Grievances & Pensions  
(Department of Personnel & Training)

North Block, New Delhi  
Dated the 2<sup>nd</sup> September, 2013

To,

Chief Secretaries of all the States/UTs

Subject: Instruction/guidelines regarding concessions for treatment of members of Service under All India Services (Medical Attendance) Rules, 1954.

Sir/ Madam,

I am directed to refer to above mentioned subject and to say that it has been decided that the following concessions which are admissible to the Central Government servants under the Central Services (Medical Attendance) Rules, 1944, should be extended to members of the All India Services under AIS (Medical Attendance) Rules, 1954 serving in connection with the affairs of the Union. The State Governments may extend these concessions to members of the All India Service serving in connection with the affairs of the State also under AIS (MA) Rules, 1954.

**2. Journey by rail/ road/sea/air:** The patient (whether member of the Service or a member of his family dependent on him) and also his attendant (wherever recommended by the attending Doctor) should be entitled to travelling allowance *plus daily allowance for the period of journey undertaken by rail as per entitled class or the lower class by which the journey is actually performed, road, sea (ship, steamer, etc.) and air (within the country)* for obtaining appropriate medical attendance or treatment. (Similar provision for the treatment of members of the Service and members of his/her family suffering from Tuberculosis, Cancer, Poliomyelitis and Mental diseases.)

*Special Provision-* Government may consider refund of air fare paid in individual cases on merits, provided they are satisfied that air travel was absolutely essential and that travel by any other means, i.e., by rail or road, etc., would have definitely endangered the life of the patient or involved a risk of serious aggravation of his/her conditions.

**3. Airlifting/ outside the state in emergent cases:** As time is a crucial factor in saving human life than in clearing the administrative hurdles, it has been decided that in emergency cases when it is certified by the specialist/ Medical Officer in charge of the Government/ recognized private hospital from where the patient is referred that air travel for the patient is essential to save his life keeping in view the seriousness of condition, the requirement of obtaining the certificate from Chief Administrative Medical Officer of the State be waived of by the Head of the Ministry/ Department/ Office in case where the patient has been referred outside the State for obtaining emergency/ life saving treatment. These orders will be applicable for both the type of beneficiaries, viz., CGHS beneficiaries and the beneficiaries covered under AIS (MA) Rules.

**4. Journey by other means of conveyance:** If the patient travels by means of conveyance, other than those specified in these orders or by his/her private conveyance, traveling allowance would be admissible to the extent otherwise admissible under these orders.

5. **Certificates required to claim T.A:** Traveling allowance at the rates specified in these orders will be admissible only when-

- (i) the journey undertaken is outside the limits of the same city- Municipal or Corporation area, Military Station, Cantonment Board area, etc., and exceeds 8 kilometres each way; and
- (ii) it is certified in writing by the Authorized Medical Attendant or by the Specialist to whom the patient was referred by the Authorized Medical Attendant or by a competent Medical Officer attached to the hospital to which the patient was referred by the Authorized Medical Attendant for medical attendance and treatment, that the journey was unavoidable necessary to obtain appropriate medical attendance and treatment under the relevant Medical Attendance Rules and Orders.

6. **Conveyance Charges:** Where the journey is undertaken within the same city - Municipal or Corporation area, Military Station and Cantonment Board area, etc., and the distance travelled is more than 8 kilometres each way, Member of Service and members of their families will be entitled to conveyance allowance only at the following rates, provided it is certified by the Medical Authorities mentioned in the preceding para, in writing that it was necessary for the member of Service or members of his/her family to travel by a conveyance:-

- (i) *For the Member of Service-* Actual conveyance charges limited to mileage allowance at tour rates under the rules in force (without daily allowance).
- (ii) *For the members of their families-* Actual conveyance charges limited to half the mileage allowance at tour rates (without daily allowance) admissible to the member of Service themselves under the rules in force.

Note- The above concession will not be admissible to CGHS beneficiaries for the present when they are referred to Specialists/Hospitals for medical attendance and treatment by Doctors in CGHS Dispensaries.

7. **Ambulance charges:** Members of the Service will be entitled to reimbursement of charges paid for an ambulance used for their conveyance or the conveyance of the members of their families subject to the following conditions:

- (i) If it is certified in writing by the specialist/ Medical Officer in charge of the Government/ recognized private hospital that conveyance of the patient by any other means of conveyance would definitely endanger the life of the patient or grossly aggravate the conditions of his/her health;
- (ii) If the ambulance is used to convey a patient to a place of treatment or to convey a patient from one hospital to another for purposes of certain medical examinations etc;
- (iii) If the ambulance used belonged to Government or local fund, or a social service organization such as the Red Cross Society etc; and
- (iv) If the ambulance is used within the same city.

8. **T.A. for attendant/ escort:** An attendant/escort will be entitled to travelling allowance both ways at the rates admissible under these orders to a member of family of the member of Service concerned, provided it is certified in writing by the Medical Authorities mentioned in these orders that it is unsafe for the patient to travel unattended and that an attended/ escort is necessary to accompany him/her to the place of treatment. Similarly, travelling allowance will also be admissible if it becomes necessary for an attendant/ escort to travel again to fetch the patient on production of the necessary certificate mentioned above.

9. **T.A for donor of kidney:** Member of the Service will be entitled to claim reimbursement of T.A. expenses in connection with the journeys undertaken by the donor of a kidney at the following rates:

- (i) *If the donor is a private person-* T.A will be admissible at the rates applicable to the recipient member of Service; and
- (ii) *If the donor is another Government servant or his family member-* T.A will be admissible at the rates applicable to the donor Government servant.

10. **Commencement and the termination of the journeys:** The journey for the purpose of these orders should be deemed to have commenced from the place from which the patient actual travels to the place of treatment and return journey to have ended at the place from which the patient proceeded for obtaining treatment or at the place to which the patient actually travels whichever is nearer. For the purpose of conveyance charges as admissible vide Paragraph 8, the return journey should be deemed to have ended at the residence of the member of Service concerned.

**11. Advance of Travelling Allowance:**

- (i) Advance of travelling allowance to the extent admissible under these orders may be granted to the member of Service at the discretion of the authority competent to sanction advance of T.A. on tour on production of a certificate in writing from the Medical Authorities mentioned in these orders to the effect that the member of Service or member of his/her family has been advised medical attendance and treatment outside the station (name of the station at which the patient has been recommended medical attendance and treatment to be specified) in accordance with the relevant Medical Attendance Rules and Orders.
- (ii) The advance of T.A. for medical attendance and treatment should, unless otherwise specified, be treated as an advance on tour. Accordingly, the following instructions should be followed regarding the grant of such advance to member of Service:
  - (a) Authorities competent to sanction advance of T.A. may under these orders sanction such advances for themselves also, if otherwise admissible.
  - (b) The amount of advance granted should be adjusted against the subsequent claim for T.A. on completion of journey or on 31<sup>st</sup> March, whichever is earlier.
  - (c) The amount of advance granted should be debited as a final charge under service head concerned and the sanctioning authority would be primarily responsible for watching the adjustment of the advance.
  - (d) A second advance will not be admissible under these orders until an account has been given of the first advance.

12. **Modified Guidelines to be adopted in dealing with cases relating to Medical Treatment abroad:-** The question of reimbursement of expenses incurred over treatment abroad for members of All India Service has been further considered and it has now been decided that the guidelines as given below should be adopted in dealing with the cases relating to request for medical treatment abroad.

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- (i) A member of Service shall be eligible to obtain medical treatment outside India or, as the case maybe, to claim reimbursement of the cost of medical treatment obtained inside or outside India in accordance with the provisions of these guidelines.
- (ii) A member of Service desirous of availing of medical treatment outside India may make an application through the Ministry/Department/State Government where the member of Service is posted to Director General Health Services in Ministry of Health in the form specified by them.
- (iii) A member of Service desiring to avail of medical treatment outside India for himself or for a member of his family for any treatment specified in the Table below shall, subject to the other provisions of these guidelines, be eligible for medical treatment outside India.

Table

- (i) Complex/high risk Cardio Vascular Surgery cases for treatment at Centres with extensive experience;
- (ii) Bone Marrow transplant;
- (iii) Complex Medical and Oncological Disorders, such as Leukemia and Neo-plastic conditions;
- (iv) Complex high risk cases in Micro Vascular and Neuro Surgery for treatment at Centres with extensive experience;
- (v) Treatment of extremely complex ailments other than those mentioned above which in the opinion of Standing Committee constituted in Ministry of Health for the purpose can only be treated abroad and fall in the high risk category.

12.1 To consider cases of the above type, a Screening Committee should be constituted at the State level by the State Director of Health Services. The Committee should examine the request and make specific recommendations giving reasons for recommending treatment abroad. The recommendation of the Screening Committee should be sent to the Standing Committee constituted under Rule 11 of CS (MA) Rules, 1944 headed by Director General of Health Services, in the Ministry of Health & Family Welfare, Government of India for its consideration and approval.

12.2 Under these revised instructions, requests for treatment abroad are entertained in respect of those cases only for which facilities for treatment are not available in India. The applicants will have to send their medical history and the certificates of the specialist in the concerned discipline recommending the treatment abroad and also acceptance of the case by the hospital abroad where the treatment is proposed to be availed of. Such applications are required to be sent to the Ministry of Health and Family Welfare through Ministry/Department/State Government where member of Service is posted. These requests are then place before the Standing Committee which has been constituted in Ministry of Health and Family Welfare under Rule 11 of CS (MA) Rules, 1944. If the Standing Committee recommends a case, a certificate recommending the treatment abroad is issued by the Ministry of Health and Family Welfare and sent to the Ministry/Department/State Government where member of Service is posted. The Standing Committee is also empowered to recommend one attendant to accompany the member of Service or a member of his family in case the Committee feels that it is essential so to do.

12.3 If an attendant has been recommended by the Standing Committee, he/she is entitled for to and fro air fare. The scale of expenditure and the eligibility for treatment is identical to the scale of expenditure and the eligibility of an official of the Indian Foreign Service of the corresponding grade in the Ministry of External Affairs.

12.4 In the case of All India Services officers and their families, where the Standing Committee have recommended treatment abroad, normally one attendant should be allowed. Additional attendant, if recommended should be on a selected approach and for special reasons like a donor in cases where organ transplant or tissue transplant is involved.

12.5 The following Institutions have been identified as having facilities for specialist treatment:—

(a) Bye-pass coronary surgery:

- (i) Southern Railways Headquarters Hospitals, Perambur, Chennai.
- (ii) Christian Medical College and Hospital, Vellore.
- (iii) K. E. M. Hospital, Mumbai.
- (iv) Jaslok Hospital, Mumbai.
- (v) Bombay Hospital, Mumbai.
- (vi) Kasturba Hospital, Bhopal.
- (vii) Sree Chitra Tirunal Institute of Medical Sciences and Technology, Thiruvananthapuram.

(b) Kidney Transplant:

- (i) Christian Medical College & Hospital, Vellore.
- (ii) All India Institute of Medical Sciences, New Delhi.
- (iii) Post Graduate Institute, Chandigarh.
- (iv) Jaslok Hospital, Mumbai.

(c) Blood Cancer:

- (i) Tata Memorial Hospital, Mumbai.
- (ii) Cancer Institute, Adayar, Chennai.

(d) Complicated heart surgery cases:

- (i) Southern Railway Hospital, Perambur, Chennai.
- (ii) Christian Medical College & Hospital, Vellore.
- (iii) K. E. M. Hospital, Mumbai.
- (iv) All India Institute of Medical Science, New Delhi.
- (v) Bombay Hospital, Mumbai.
- (vi) G. B. Pant Hospital, Delhi.
- (vii) Sree Chitra Tirunal Institute of Medical Sciences and Technology, Thiruvananthapuram.
- (viii) Post Graduate Institute, Chandigarh.
- (ix) S. S. K. M. Hospital, Kolkata
- (x) Samaritan Hospital, Alwaye (Kerala).
- (xi) Kasturba Hospital, Bhopal (BHEL).
- (xii) N. M. Wadia Institute of Cardiology, Pune.

12.6 Sub-committee constituted in Ministry of Health and Family Welfare under CS (MA) Rules may consider the cases of medical treatment abroad beyond sixty days, which have been duly recommended by the Standing Committee.

12.7 Release of Foreign Exchange for medical treatment abroad- It has been decided that in addition to the Directors of Health Services of States/Union Territories, the following Hospitals/Institutions may recommend release of foreign exchange for medical treatment abroad. Directors/Medical Superintendents of these hospitals/institutions could issue Essentiality Certificate for medical treatment abroad as well as the quantum of foreign exchange to be released-

1. Director-General of Health Services, New Delhi.
  2. Autonomous Bodies under Ministry of Health and Family Welfare.
    - (a) All India Institute of Medical Sciences, New Delhi.
    - (b) Jawaharlal Institute of Postgraduate Medical Education and Research, Dhanvantrinagar, Pondicherry.
    - (c) Postgraduate Institute of Medical Education and Research, Chanddigarh.
    - (d) National Institute of Mental Health and Neuro Sciences, Bangalore.
    - (e) All India Institute of Physical Medicine and Rehabilitation Centre, Mumbai.
  3. Tata Memorial Hospital, Mumbai.
  4. Jaslok Hospital, Mumbai.
  5. Cancer Institute, Chennai.
  6. Christian Medical College, Vellore.
  7. S.S.K.M. Hospital, Kolkata.
  8. Southern Railway Hospital, Perambur.
  9. K.M. Hospital under Mumbai Municipal Corporation.
  10. Gujarat Cancer Research Institute, Ahmendabad.
  11. Kidwai Memorial Institute of Oncology, Bangalore.
13. (i) Any other instructions issued by Ministry of Health and Family Welfare from time to time regarding the above said provisions shall be applicable to AIS (MA) Rules.
- (ii) Provisions for treatment of special diseases/other medical treatments as provided under CS (MA) Rules 1944 shall also be applicable to member of All India Service.



14. The instruction may be brought to the notice of all the members of All India Services.

Yours faithfully,

  
(Manoj Kumar Dwivedi)  
Director (Services)  
Tel. 23092483

Copy to:

- (1) All Ministries/Departments of the Government of India.
- (2) Cabinet Secretariat, Rashtrapati Bhawan, New Delhi.
- (3) Prime Minister's Office, South Block, New Delhi.
- ✓ (4) Website of the Ministry of Personnel, Public Grievances and Pensions.  
www.persmin.nic.in-DOPT-OMs & Orders-Services- AIS (MA) Rules, 1954