



Bharat Sanchar Nigam Limited  
(A Govt. Of India Enterprise)

Office of the Chief General Manager Telecom, M P Circle, Bhopal.

No. WL/MR BILL/ Ruling /CH-II /2021-22/25

Dated: 11/04/2022

To,

1. All BA/OA Head MP BSNL Circle.
2. All DGMs/AGMs/CAOs/EE(Civil)/EE(Elect.), MP BSNL Circle.

**Sub. : Instructions regarding reimbursement of Outdoor/Indoor Medical Bill regarding.**

Kindly refer to the subject cited above and in addition to various circular / letters issued by Competent Authorities time to time, the following points are also to be adopted while considering the admissibility of medical bills submitted for payments.

**Guidelines to monitor the expenditure on Outdoor treatment:**

1. Date, Signature and registration No is mandatory on Doctors prescription.
2. Doctors receipt should be in proper format for consultancy and other changes .However receipt amount on Doctors letter head (in original) will be considered for reimbursement.
3. On prescription, period of treatment/quantity of medicine is to be specified.
4. Original /self attested copy of prescription is to be submitted by claimant with bill.
5. Doctors advice is mandatory for diagnostic test. If the test are done by the consulting doctor or hospital itself, same will be considered and if the test are performed in some other pathology, doctors advice is needed on prescription.
6. Without prescription consultancy receipt will not be entertained.
7. All diagnosis test name prescribed by doctor to be specified in cash memo instead lump sum amount.
8. Proper Cash Memo is required containing Date, Name of Patient and Quantity of Medicines etc. However in Ayurvedic and Homeopathic treatment, all treatment and medicines should be briefly noted on letter head along with proper cash memo which requires doctors signature and stamp with registration number.
9. Medicines will be considered for reimbursement within treatment period only, as prescribed by doctor.
10. Medicines should be purchased within the period in conformity with doctors prescription i.e. it should be purchased within prescribed time of medication.

11. In dental treatment cases details of date wise procedure conducted by doctor and amount wise break up for treatment should be specified.
12. The Appliances like orthopedic belt, knee cap, nebulizer, spectacles, etc. will not be admissible as per guidelines received.
13. Product manufactured/ marketed as food supplement, cosmetic etc. prescribed by doctors will be inadmissible.
14. Tax Invoice may be submitted by the claimant along with the claim in case of implant treatment.
15. Medical claims may be submitted in proper sequence of receipt numbers chronologically as per date.
16. Under normal circumstance, outdoor medical bills for a patient in a particular month should be claimed once in a month only.
17. Separate dependency declaration is required for children more than 25 years old.
18. Allopathic, Ayurvedic, Unani, Homeopathy medicines shall be admissible if these are prescribed by respective doctors only. E.g. Allopathy medicines can be prescribed by Allopathic doctors only.
19. Claim for outdoor treatment requiring waiver of expenditure limit for certain diseases is supported with certificate for disease and relevant instructions for waiving limit.

**Guidelines to monitor the expenditure on Indoor treatment:**

1. In case the cumulative expenditure in any financial year claimed for reimbursement under indoor treatment is more than two months basic pay + DA of the employee concerned, the reimbursement shall have to be approved by respective CGM.
2. In case of treatment taken in non-empanelled hospitals in emergency condition with approval of competent authority, CGMs shall have full powers to settle the claim by restricting it to CGHS rates.
3. All claims for reimbursement should be submitted latest by six months from the completion of the treatment. Claims submitted beyond this period are liable to be rejected.
4. The claim of the employee has been checked by verifying all the columns of enclosed check list and found in order as per BSNLMRS Policy.
5. In case of package rate applicable has been found of and no additional charges are allowed.
6. In case of long duration of Hospitalization, the period of it is justified.
7. The room rent claimed is correct it is as per eligibility of the employee, agreement and Discharge Certificate.
8. Claim for reimbursement of cost of stents is supported with voucher name and sticker bearing no. of stents. It is certified that total number of stents for which reimbursement is recommended is ..... (three or less).
9. Rebate offered by hospital as per agreement is taken in to account while calculating admissible amount.




10. Break ups of charge i.e. room rent, Pathology test, Consultation, Medicines, tallies with the supporting vouchers.
11. In case of treatment taken in non-empanelled hospital, certificate from BA/OA head that the treatment was taken in emergency circumstances and the hospital is nearest to the residence of employee as compared to empanelled /Govt. Hospital in the place of posting of employee where such treatment is available, is verified and placed.
12. In case of treatment in non-empanelled hospital on referral of the empanelled hospital, a certificate that such treatment is not available in any of the empanelled hospital of city is placed.
13. In case of out of state treatment without prior permission of CGMT, justification for not seeking prior permission and certificate that such treatment is not available in the State is verified and enclosed at .....In case the treatment is availed at a place other than the place of posting of the employee, reasons for the same along with necessary approval of the competent authority have been verified and enclosed.
14. Justification for seeking exemption from visit report supported with ruling under BSNL MRS has been seen and found correct as per BSNL MRS Policy.
15. Certified that the amount claimed in bill is prevailing, applicable and approved CGHS rate and latest CGHS codes (mentioned) and as per the agreement.
16. In case of claim in respect of Son/ Daughter above age of 25 years certificate to the effect the Son/Daughter is wholly dependent on the official as per the BSNL MRS Policy is taken and placed.
17. This is to certify that the leave of ..... Days for treatment period of Mr./Mrs. .... is verified from ESS.
18. Expenditure approval sheet duly signed by concerned GM BA head and Account officer of BA head office original Copy must be enclosed with the claim.
19. In case the spouse of any BSNL employee is employed in any other organization, and the BSNL employee concerned wants to avail of BSNLMRS facility for his/her spouse or other dependent family members, a certificate has to be submitted by the spouse regarding non-availing of any medical facility for self/family from his/her organization.
20. In all case involving hospitalization of two or more than two days, a designated officer of BSNL shall visit the hospital and give a certificate as per enclosed format. The certificate shall be attached to the claim while forwarding the same to CGM's office for approval.
21. The instruction regarding attaching a certificate by the copy of the BSNLMRS Card as conveyed by this office OM.NO. BSNL/Admn. I/15-4/04 (Pt.) dated 15/10/2004 should be strictly followed.
22. In general, employee and his/her dependant family members shall be allowed to take indoor treatment at hospitals as applicable for his/her place of posting and as applicable for the place of residence of his/her family.
23. Medical Card - A Medical Card containing photographs of all the family members and dependents of concerned employee shall be issued to all

BSNLMRS optees immediately. The medical/hospitalization claim should be duly certified by the Doctor along with photograph of the person given indoor treatment.

24. Emergency Hospitalization - In all cases of extreme emergencies, the employee concerned shall have to inform the SSA Head or his controlling officer soon after hospitalization for indoor treatment. In order to ensure that the facility is used by the employee and his dependent family members only, a designated officer of BSNL may visit the hospital and verify the authenticity of the beneficiary.

However in case of any discrepancy, the concerned authority may get documents verified through visit to hospital/doctor/pharmacy, etc.

This issues with the approval of competent authority.

  
11.4.2022  
Asth. General Manager (Welfare)  
O/o CGMT MP Circle, Bhopal.  
Mobile no. 9425001266.

**Copy to :**

1. Dist. Secretary -SNEA(I)/AIBSNLEA/BSNLEU/NFTE  
BSNL/AIGETOA/SCSTEWA Bhopal.
2. Notice Board.