

National Institute of Open Schooling

B-31 B, Kailash Colony, New Delhi

NIOS/Secy/ Med./3.1/01

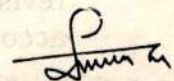
26.05.2003

OFFICE MEMORANDUM

Subject : NOS Society Medical Benefit Rules

Attention is invited to the following office orders relating to the NOS (now known as NIOS) Medical Benefit Rules.

- (i) Office Order no. NOS/Secy/Med./3.1/99 dated 29.02.2000 enclosing NOS Medical Benefit Rules in replacement of the earlier rules in this regard contained in Chapter 12 of NOS Service Rules, 1994 (Part I).
 - (ii) Office Order no. NIOS/Pers/2002 dated 01.10.2002 making NOS Medical Benefit Rules applicable to NIOS (formerly known as NOS) retirees w.e.f 23.07.2002.
2. The Executive Board in its 29th meeting held on 20.02.2003 accepting the recommendation of Finance Committee, contained in the minutes of the 19th meeting held on 31.01.2003 providing for reimbursement of actual expenses on outdoor medical treatment taken in Government recognised hospital, resolved to replace the existing rules of payment of fixed amount towards medical reimbursement (payable quarterly) in respect of outdoor medical treatment by a new set of Rules as recommended by the Finance Committee in this regard.
 3. The Finance Committee in its 19th meeting held on 31.01.2003 while approving and recommending to EB the rules for outdoor treatment referred in para 2 above had felt the need to recirculate Medical Benefit Rules with all hospitals recognised by Government of India and NIOS and bringing out the definition of family members. It had also suggested the change of the nomenclature of NOS Medical Benefit Rules to NOS Society Medical Benefit Rules.
 4. Taking the above into consideration, it has been decided to circulate NOS Society Medical Benefit Rules after incorporating the changes referred above. A copy of the said rules is given in Appendix A. A tentative list of hospitals /diagnostic centres under CGHS recognised by Government of India is given in Appendix B.
 5. These rules will be enforced with immediate effect.



(S.S. Gill)
Secretary

CC to:-

1. All HODS
2. All JDs/DDs/ADs
3. All Heads of Regional Centres
4. All Section Officers and equivalent
5. PS to Chairman for information of the Chairman

National Institute of Open Schooling NOS Society Medical Benefit Rules

(These rules "NOS Society Medical Benefit Rules" supersede the provision contained in Chapter 12 of NOS Service Rules (1994) Part I)

12.1 The medical benefits to which the regular employees of NOS (now NIOS) are eligible are prescribed below.

12.1.1 **Eligibility:-** These shall apply to (i) all regular employees (including those ~~on~~ probation) of NOS, (now NIOS) (ii) those on deputation from Government/autonomous bodies/public sector undertakings provided they opt to be governed by NOS (now NIOS) Rules, (iii) all re-employed persons, (appointed on regular re-employment terms) provided they are **not** availing for medical benefits from their previous employers (iv) NIOS retirees (w.e.f 23.07.2002)*. These rules are not applicable to (a) a person employed on daily wages and (b) (i) persons appointed on contract for specific assignments, (ii) Project staff and (iii) Consultants.

12.2 For Out Door Treatment

12.2.1 The detailed rules** for outdoor Medical Attendance and Treatment in Government/Private Hospitals recognised by Government of India/NIOS are given in Annexure A.

Reintroduced fixed amount for Outdoor Treatment vide Office Memorandum dated 8.9.2003.

12.3 For Indoor Treatment, involving hospitalization within India

12.3.1 In case of consultation resulting in hospitalization, the consultation fees will be fully reimbursable.

12.3.2 In case of hospitalization ie. indoor treatment in Government hospital, private hospital recognised by GOI/NIOS, the entitlement of the NIOS employees for accommodation in hospital will be regulated as per the GOI Ministry of Health and Family Welfare OM. No. S.110122/1/98-CGHS (P) dated 04.09.98 (Extracts given in Annexure B) laying down the revised pay ceiling for entitlement for Nursing Home facilities/hospital accommodation etc for CGHS beneficiaries.

12.3.3 In the case of hospitalization in Government hospitals, private hospitals/ diagnostic centers recognised by Government of India, as well as the hospitals given in Rule 12.7 below for specialized and general purposes treatment and diagnostic procedure on account of serious illness of the employee or any member of his family, medical expenses as charged by the hospital and incurred will be reimbursable in full towards admission charges, accommodation charges, ICU/ICCU charges, monitoring charges, operation charges, anaesthetic charges, operation theatre

* Vide EB resolution made in the meeting held on 23.07.02

** Replaces the rules in force earlier in this regard vide EB resolution made in its 29th meeting held on 29.02.2003

charges, cost of drugs and disposable surgical sundries, physiotherapy charges, and charges towards pathological, bacteriological, radiological or other methods of examination for the purposes of diagnosis available in the hospital subject to the restriction that the reimbursement would be at the relevant rates chargeable based on their entitlement for indoor treatment mentioned in Rule 12.3.2 above (This will not include TV charges, and cost of cosmetics, toiletry, tonics and medicines advertised in mass media which are not reimbursable and other inadmissible medicines notified by Government of India from time to time).

12.3.4 Charges incurred for registration, preparation of card and certain pathological tests preparatory to hospitalisation in any of the Government, Local Body/approved hospitals are also reimbursable limited to relevant rates charged on the pattern of specified hospitals mentioned in Rule 12.4.

12.3.5 In case any emergency arises and an official gets admission in an unapproved hospital for self or for his dependent family member whose name stands in the office record the payments so incurred will not be reimbursed unless the nature of emergency is covered by the following guidelines:-

- (i) Serious Road Accidents
- (ii) Emergent surgical operations

The claims for emergent surgical operations will only be considered if a certificate from Medical Superintendent of the Hospital concerned is produced stating therein that immediate operation was necessary to save the life of the patient. In the absence of such certificate claim for reimbursement of medical expenses will not be considered.

12.4 Expenses incurred by an employee for treatment taken by an employee in private hospitals, in emergent cases, shall be restricted to the relevant rates prescribed by Government of India for treatment in Central Government recognised hospital situated nearest to the place where treatment had been taken and in its absence the rates charged by of All India Institute of Medical Science, Delhi.

12.5.1 In respect of places outside Delhi indoor treatment may be taken from Government hospitals or private hospitals/institutions recognised by the Central Government at such places.

12.5.2 However, in respect of maternity cases (confinement), of family members of staff and self in the case of female employee, where the individual desires to take treatment away from his Headquarters, prior permission should be obtained from Secretary, NIOS. In cases of such treatment being taken in private nursing home/hospital due to non existence of Government/Government recognised hospital within a distance of 5 kms, the reimbursement of expenses incurred for such treatment will be regulated in accordance with Rule 12.4 above.

12.6 Expenses incurred by an employee of NOS (now NIOS) on hospitalization will be reimbursable on the basis of a claim duly supported by bills duly verified by the concerned hospitals in the prescribed essentiality certificates form.

12.7 In addition to the Government hospitals/private hospitals recognised by Government of India the following nursing homes/hospitals are approved for indoor treatment.

1. All India Institute of Medical Sciences, New Delhi
2. Dr. B.L. Kapoor Memorial General Hospital, Pusa Road, New Delhi-05
3. Holy Family Hospital, Okhla, New Delhi
4. Jessa Ram Hospital, Karol Bagh, New Delhi
5. Lala Ram Sarup T.B Hospital, Sri Aurobindo Marg, New Delhi
6. Smt. Girdhari Lal Maternity Hospital, New Delhi
7. New Delhi Tuberculosis centre , J.L.N Marg, Delhi
8. Sir Ganga Ram Hospital, Rajinder Nagar, Poorvi Marg, New Delhi-60
9. Swami Dayanand Hospital, Shahdara, Delhi-34
10. Tirath Ram Saha Charitable Hospital and Nursing Home, Delhi
11. Jivodya Hospital, Ashok Vihar, Delhi-52
12. Sunder Lal Jain Charitable Hospital, Ashok Vihar, Delhi-52
13. Sardar Vallabh Bhai Patel Chest Inst., Delhi University, Delhi
14. Hamdard Research Nursing Home, Asaf Ali Road, New Delhi
15. Mata Channan Devi Hospital, Janak Puri, New Delhi
16. Indian Red Cross Society Hospital, New Seema Puri, G.T. Road, Delhi
17. Deepak Memorial Hospital and Medical Research Centre, 5-Industrial Area, Vikas Marg, Delhi-110092

any other hospitals approved by the Chairman on the recommendation of duly constituted Medical Advisory Committee.

Provided that employees residing outside Delhi/New Delhi shall also be eligible for reimbursement of expenses incurred towards hospitalization in Government Hospital/Government recognised hospitals. Provided further that employee on tour or on leave shall also be eligible for reimbursement of hospitalization expense incurred by him outside Delhi/

New Delhi.

12.8 General Medical check up for NOS (now NIOS) employees above the age of 40 years for undergoing his/her general medical check up once in two years in the approved and recognised hospital/Nursing Home by the NOS (now NIOS) from time to time.

12.9 The sanctioning authority for the reimbursement of the medical expenses shall be as under

- | | |
|--------------------------------------|-----------|
| (a) All employees (Except Secretary) | Secretary |
| (b) Secretary | Chairman |
| (c) Chairman | Chairman |

Note I) The terms* 'family' and 'Government Hospitals' for the purpose of the Medical Benefit Rules, shall have the same meaning as defined in Central Services (Medical Attendance) Rules 1944.

12.10 In respect of matters not specifically provided for in these Rules with regard to medical attendance and treatment relating to indoor treatment, the provisions CS(MA) Rules, 1944 would apply *mutatis mutandis*.

* The provisions relating to 'Family' contained in CCS (MA) Rules, 1944 as amended are given below.

- (i) The term 'family' for the purpose of the Central Services (Medical Attendance) Rules, 1944, shall mean a Government Servant's wife or husband, as the case may be, and parents, sisters, widowed sisters, widowed daughters, minor brothers, children and step children wholly dependent upon the Government Servant. It would also include dependent brothers, dependent divorced/separated daughters and step mother.
- (ii) A female employee has a choice to include either her parents or her parents in law; option exercised can be changed only once during service.
- (iii) When both husband and wife are employed, a joint declaration is required to be furnished as to who will be preferring the claim.

NOTE 1:- The members of the family are treated as dependant only if their income from all sources including pension and pension equivalent of gratuity does not exceed Rs. 1500 p.m. The condition of dependency both in the case of the husband or the wife of the Government servant has been dispensed with.

NOTE 2:- The residential condition for members of families of a Government servant having been waived, family members may have medical attendance and treatment even if they do not stay with the Government Servant.

National Institute of Open Schooling

Form of Application for Medical Claims

Form of application for claiming refund of medical expenses incurred in connection with medical attendance and/or treatment of NOS employee and their families - For medical attendance/ treatment taken from Government or Recognized Hospitals

1. Name and designation of the employee
(in Block Letters) (Name) (Designation)
 2. (i) whether married or unmarried
(ii) if married, the name of office with place of office where wife/husband is employed
 3. Basic Pay of the employee (without allowances)
 4. Place of duty
 5. Actual residential address
 6. Name of the patient and his/her relationship to the employee
N.B. - *In the case of children state age also*
 7. Place at which the patient fell ill
 8. Details of the amount claimed
1. Hospital Treatment
- Name of the hospital
- Charges for hospital treatment, indicating separately the charges for -
- (i) Accommodation (State whether it was according to the status or pay of the employee and in cases where the accommodation is higher than the status of the Employee, a certificate should be attached to the effect that the accommodation to which he was entitled was not available)
.....
 - (ii) Diet
 - (iii) Surgical operation or medical treatment or confinement
 - (iv) Pathological, bacteriological, radiological or other similar tests, indicating
 - (a) the name of the hospital or laboratory at which undertaken, and
 - (b) whether undertaken on the advice of the medical officer in charge of the case at the hospital. If so, a certificate to that effect should be attached
.....
 - (v) (a) Medicine
 - (b) Special medicines
..... (the essentiality certificate should be attached)
 - (vi) Ordinary Nursing

(vii) Special nursing, i.e., nurses, specially engaged for the patient. State whether they are employed on the advice of the medical officer in charge of the case at the hospital or at the request of the employee or patient. In the former case a certificate from the medical officer in charge of the case and countersigned by the Medical Superintendent of the hospital should be attached

(viii) Ambulance charges.

(State the journey - to and from under taken)

(ix) Any other charges, e.g. charges for electric light, fan, heater, air-conditioning, etc. State also whether the facilities referred to are a part of the facilities normally provided to all patients and no choice was left to the patient

Note 1. If the treatment was received by the Employee at his residence under Rule 7 of the CS (MA) Rules, 1944, give particulars of such treatment and attach a certificate from the authorised medical attendant as required by these rules.

Note 2. If the treatment was received at a hospital other than a Government hospital/ Recognized hospital, necessary details and the certificate of the authorised medical attendant that the requisite treatment was not available in any nearest Government hospital/Recognized hospital should be furnished.

- | | | |
|-----|-----------------------------|-----|
| 9. | Total amount claimed | |
| 10. | Less advance taken on | Rs. |
| 11. | Net amount claimed | Rs. |
| 12. | List of enclosures | Rs. |

DECLARATION TO BE SIGNED BY THE EMPLOYEE

- (i) I hereby declare that the statements in the application are true to the best of my knowledge and belief and that the person for whom medical expenses were incurred is wholly dependent upon me.
- (ii) I certify that I am not availing of medical facilities, or financial/medical allowance in lieu thereof, either for my self and/or the members of my family from any source other than under CS (MA) Rules, 1944 from National Institute of Open Schooling.

Dated :

*Signature of the Employee
and Division to which attached*

National Institute of Open Schooling

CERTIFICATE 'B'

(To be completed in this case of patients who are admitted to hospital treatment)

Certificate granted to Mrs./Mr./Miss Wife/Son/Daughter of
..... employed in the

PART A

(To be signed by the medical officer in charge of the case of
the hospital))

1. Dr. hereby certify :-

(a) That the patient was admitted to hospital on the advice of
(name of the medical officer)/on my advice.

(b) That the patient has been under treatment at
and the undermentioned medicines prescribed by me in this connection were essential for the
recovery/prevention of serious deterioration in the condition of the patient. The medicines are not
stocked in the (name of the hospital) for supply to private
patients and do not include proprietary preparations for which cheaper substances of equal
therapeutic value are available nor preparations which are primary foods, toilets or disinfectants.

Name of medicines	Price
.....
.....
.....
.....
.....

(c) that the injection administered were/were not for immunising or prophylactic purposes.

(d) that the patient is/was suffering from and is/was under treatment from
..... to

(e) that the X-ray, laboratory tests etc., for which an expenditure of Rs. was incurred
were necessary and were undertaken on my advice at

(f) that I called on Dr. for specialist consultations and that the necessary
approval of the (name of the Chief
Administrative Medical Officer of the State) as required under the rules, was obtained.

Signature and Designation of the Medical Officer
in charge of the case at the hospital

PART B

I certify that the patient has been under treatment at the
Hospital and that the services of special nurses for which an expenditure of Rs.
was incurred. Vide bills and receipts attached, were essential for the recovery/prevention of serious
deterioration in the condition of the patient.

Signature of the Medical Officer in
charge of the case at the hospital

COUNTERSIGNED

Medical Superintendent

..... **Hospital**

I certify that the patient has been under treatment at the
Hospital and that the facilities provided were the minimum which was essential for the patient's
treatment.

Medical Superintendent

Place..... **Hospital**

Note :- Certificates not applicable should be struck off. Certificates (b) is compulsory and
must be filled in by the Medical Officer in all cases.

**National Institute of Open Schooling
B-31B, Kailash Colony
New Delhi-110 048**

NIOS/Secy/Med./3.1/01
Dated: 08/09/2003

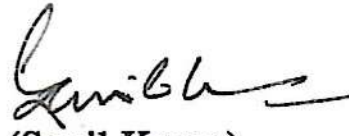
Office Memorandum

Subject:- NOS Society Medical Benefit Rules.

Attention is invited to Office Memorandum of even no. dated 26/5/03 on the subject mentioned above.

2. It has been decided by Chairman, NIOS, after due consideration of the desire expressed by many staff members, to reintroduce the system of payment of Rs.600/- per month for outdoor treatment in place of the existing system of reimbursement on actual basis as envisaged in the Office Memorandum under reference, subject to its being reported to Executive Board in the next meeting for their approval.

3. These orders will come into force with immediate effect.


(Sunil Kaura)
Secretary

Copy to:-

1. All HODS
2. All Officers of the level of Section Officer and above
3. All Heads of Regional Centres
4. PS to Chairman for kind information of Chairman
5. Office Order File

F-62-58/2011/NIOS/Fin/EB
National Institute of Open Schooling
A-24/25, Institutional Area
Sector -62, NOIDA

30th June 2011

OFFICE ORDER

On the recommendation of 44th Finance Committee held on 30th May 2011, the Executive Board of NIOS in its 59th meeting held on 23rd June 2011 has approved the additional Medical reimbursement of Medical expenses incurred towards treatment of Chronic, Dental and prolonged disease e.g. Cardiac, Cancer, Tubercular diseases, Diabetes, Thyroid, Anti Rabies etc. as listed under Medical Attendant Rules of Govt. of India for Central Govt. Employees under Outdoor Medical Benefit Scheme in the hospitals approved in the NIOS Medical Benefit Scheme.

This will be applicable with effect from 1.7.2011.

(C. DHARUMAN)
SECRETARY

Copy to :-

1. PS to CM for kind information of the Chairman, NIOS
2. All HOD's, NIOS
3. Joint Director (Admn.), NIOS
4. Deputy Director (Accounts), NIOS
5. All Regional Directors, NIOS
6. Notice Board, NIOS
7. Guard file



राष्ट्रीय मुक्त विद्यालयी शिक्षा संस्थान
NATIONAL INSTITUTE OF OPEN SCHOOLING

आईएसओ/प्रमाणित 2008 : 9001/ISO 9001 : 2008 Certified

(स्कूल शिक्षा और साक्षरता विभाग, शिक्षा मंत्रालय, भारत सरकार के अंतर्गत एक स्वायत्त संस्था)

(An Autonomous Institution Under Deptt. of School Education and Literacy, M.O.E., Govt. of India)

Dated: 27.07.2021

Notification 23/2021

Subject: NIOS Medical Benefit Scheme issuance of Medical Card -reg.

In continuation to the expansion of NIOS Medical Benefit Scheme many hospitals have been empaneled by NIOS on both Cashless as well as Non-Cashless basis. To avail these facilities the employees (serving/retired) and their dependent family members are required to carry Medical Cards issued by competent authority. In some cases where medical card could not be issued or it has expired the employees can avail the medical services in empaneled hospitals by getting an authority letter issued from Personnel Section.

2. The hospitals empaneled on cashless basis shall provide cashless facility i.e. payment to be made directly by NIOS for indoor treatment only. But for taking outdoor patient (OPD) treatment the employee shall make the payment themselves. Further, the empaneled hospitals (cashless/non cashless) will provide medical services (indoor/outdoor) at CGHS rates.

3. It is clarified that the empanelment of new hospitals is only an extension/expansion of the existing medical benefit scheme and the provisions of existing Medical Benefit Scheme including the additional medical reimbursement scheme towards treatment Chronic, Dental and prolonged disease (issued vide order dated 30th June 2011) shall remain in force on same terms and conditions for all the employees (serving/retired) and their dependent family members.

4. There could be cases where dependent family members who are dependent presently on the employee (serving/retired) cease to be dependent as per the CS(MA) Rules at a future date, in all such cases it shall be the duty of the employee to immediately surrender the medical card to Personnel Section and get a fresh card issued without the name of non-dependent family member(s).

5. In case a non dependent family member avails medical facility on the basis of medical card issued by NIOS the cost shall be recovered from the employee.


(Pradeep K Mohanty)
Secretary, NIOS

Copy to:

1. All HODs.
2. DD (CMO) for kind information of the Chairperson, please.
3. All Regional Directors
4. SAP for uploading on the official website of NIOS
5. Office order file.

ए25/25, इंस्टीट्यूशनल एरिया, सेक्टर-62, नोएडा-201 309 (यू.पी.) दूरभाष: 0120-4089800, फ़ैक्स-0120-24031752

A-24/25, Institutional Area, Sector-62, Noida-201309 (U.P.), Phone:0120-4089800, Fax 0120-2403172.

Website: www.nios.ac.in

Medical Certificate

TO WHOM SO EVER IT MAY CONCERN

Certified that Shri / Ms.....R/o.....
.....has been
suffering fromHe / She requires continuous / Prolonged
treatment for his / her illness throughout his / her with regular monitoring
of

The patient has been prescribed the following medicines for the disease mentioned above.

- | | |
|-----|------|
| (1) | (6) |
| (2) | (7) |
| (3) | (8) |
| (4) | (9) |
| (5) | (10) |

Signature & Stamp of Doctor / Medical Officer
of the approved Hospital.



राष्ट्रीय मुक्त विद्यालयी शिक्षा संस्थान
NATIONAL INSTITUTE OF OPEN SCHOOLING

CERTIFICATE – A

Form of application for claiming Additional Medical expenses incurred toward treatment of Chronic and Prolonged Disease taken by NIOS employee and their dependent family members as outdoor patient in Govt./ Municipal Hospital/ Private Hospital recognized by Central Government or NIOS.

Certificate granted to Mr./Mrs./ Miss Wife/Husband/Son/Daughter/Father/ Mother ofemployed in the National Institute of Open Schooling.

(I) Dr.....hereby certify:

- (a) That the patient is/was suffering fromand is/was under treatment at(name of the hospital) fromto
- (b) That the following amounts were charged by me/ hospital.....(Name of the Hospital) and the X-ray, laboratory tests etc., were necessary and were undertaken on my advice at(name of the hospital or laboratory).
- I. Registration Charge
- II. Consultation Charges
- III. Injection Charges
- IV. X-ray, Laboratory tests
- (c) That the under mentioned medicines prescribed by me in this connection were essential for the recovery of the patient and these medicines/ treatment prescribed do not include cosmetics, toiletry, tonics and medicines advertised in mass media which are not reimbursable and other inadmissible medicines notified by Government of India from time to time.

Name of the Medicines

- (d) That the investigations undertaken and medicines prescribed is exclusively for the treatment ofwhich is prolonged /chronic diseases.
- (e) That I referred the patient to Dr. for special consultants.
- (f) That the patient did not require Hospitalization.

Signature and Designation of the AMA/ Medical Officer
In-charge of the case at the hospital

Dated