

**EMPLOYEES' STATE INSURANCE CORPORATION  
PANCHDEEP BHAWAN : C.I.G. MARG : NEW DELHI.**

No. D-12/16/1/03-E.VI.

Dated: 15.12.2006

To

All Regional Directors/ Jt. Directors Incharge,  
D(M)D/ DM Noida/ SSMC/ M.S. of ESIC Model Hospitals/ ODCs.

**Sub:** Extension of Medical facilities to ESIC Pensioners through the ESIC Pensioners Medical Scheme (ESIC-PMS).

Following the approval of Standing Committee for implementation of the ESIC Pensioners Medical Scheme came into force w.e.f. 01.04.2006. The scheme alongwith certain instructions/ clarifications has already been circulated vide Memo of even nos. 13/1/2006 & 07.06.06.

However, some of the Regional Directors/ Joint Director (I/cs) have sought further clarification. The issues raised are clarified as under: -

**(1) Medical Facility through AMA:-**

Under Rule 6(A) pensioners are entitled to take treatment only from an ESIC/ ESIS Dispensary/ Hospital in the first instance wherever it is available for the pensioners. Consultation with A.M.A. is not permissible even if any A.M.A. is available within such radius. E.S.I. hospitals (Modal Hospital) including ODC shall act as centre for OPD and indoor treatment to the extent of facilities for pensioners living in catchment areas.

**(2) Entitlement of Fixed Medical Allowance:-**

- (a) It has been decided that pensioners residing in the catchment area of the hospitals of ESIC and residing in the area where the ESI Scheme is in force can not opt for Fixed Medical Allowance.
- (b) If both Husband & Wife are pensioners, they are entitled to draw Fixed Medical Allowance. However, if either of them avails benefits as provided under the scheme their entitlement to draw Fixed Medical Allowance will cease for both of them.
- (c) Fixed Medical Allowance is admissible to Family Pensioners.

(d) Pensioners residing in non-implemented area can opt for Fixed Medical Allowance and will not be eligible for OPD Treatment. However, for taking Indoor treatment normal procedure shall apply.

**(3) Admissibility of I.P. Treatment in respect of Pensioners receiving FMA:-**

Pensioners who are living in non-implemented area of ESI Scheme can opt for availing Fixed Medical Allowance and in case they decide to avail facility under ESIC-PMS for Indoor treatment, Card can be issued bearing stamp "**Not Valid for OPD Treatment**". Nodal Officers may explore the possibility to recognize any other hospital and AMA in respect of which the Director General or any other authority has entered into an agreement as per rule-7 and 9 in respect of the pensioners residing in non-implemented areas.

**(4) Traveling Allowance in case of medical reference :-**

The scheme is self sustaining one. Hence, consideration of T.A. is deferred for the present till such time the scheme is financially viable.

**(5) Medical Advance:-**

The scheme is self sustaining one. Hence, consideration of Medical Advance is deferred for the present till such time the scheme is financially viable.

**(6) Separate Counter:-**

Separate Registration Counter of ESI Dispensary/ Hospital for pensioners are not possible in the present scenario. However, Dispensaries/ Hospitals under the control of ESIC shall be directed to make certain special arrangements within the constrains.

**(7) Reference to other Hospitals:-**

ESIC/ ESIS Dispensary/ Hospital may recommend the test/ procedure which are not available in ESIC/ ESIS Institutions and refer the patients to hospitals as provided under scheme. After the reference from concerned Dispensary/ Hospital, the pensioner will be required to obtain written permission from the concerned Nodal Officer in normal circumstances before commencement of

treatment. The reference can only be to hospitals recognized for CGHS Pensioners.

**(8) Nodal Officer in respect of Delhi:-**

As far as pensioners in and around Delhi D(M)D shall be the Nodal Officer as in the past.

**(9) Hospitals recognized for ESIC Pensioners:-**

All Public and Private Hospitals recognized under CGHS/ CS(MA) Rules shall be the same for ESIC Pensioner's treatment. Reimbursement shall be at admissible rates. The R.D's/ J.D's/ Nodal Officers shall explore the possibility of agreement with such hospitals and report the same to Hqrs. for further action. Individual Pensioners/ Pensioners Association may be informed of the above, in addition to display at Notice Board.

Similar tie-up arrangement needs to be made with the hospitals recognized under CGHS/ CS(MA) Rules for the serving employees of the Corporation also and progress made may be reported to Hqrs. Office forthwith.

**(10) Treatment taken in emergent situation-submission of claims:-**

In such cases, claims are required to be submitted to the Nodal Officer for examination. Cases may be referred to Hqrs. with medical opinion of M.S. in places where ESIC Hospital is located and in other remote areas from M.R.

**(11) "Sister" – whether a member of Family:-**

The definition of 'family' shall be same as for CGHS for pensioners. Unmarried/ widowed sisters (irrespective of age), wholly dependent and normally residing with pensioner are eligible members of family. For dependency, however, the income from all sources including pension and pension equivalent of DCRG should not exceed Rs.1500/- p.m.

**(12) Persons voluntarily retired/ compulsorily retired whether eligible or not:-**

Employees taking Voluntary Retirement at an early age say 45 or 50 and above can opt for the scheme and pay contribution.

**(13) AMA System – reimbursement of charges:-**

If a member of the ESIC-PMS happens to take treatment from AMA, the admissible charges shall be reimbursable as per prevailing provisions i.e. at rates as mutually agreed upon between ESIC/ AMA under Rule 9 of the scheme.

**(14) Contribution-lump-sum/ periodical/ pro-ratacontribution-regulation of:-**

- a. A pensioner who becomes a member of the scheme is required to exercise an option to either for lifetime membership on payment of contribution equivalent to ten times the annual contribution required to be paid at the time of retirement or for periodical payment of contribution.
- b. A pensioner intending to become a lifetime member should be required to deposit lump-sum contribution equivalent to ten years of contribution irrespective of the age of his/ her entry into the scheme. The provision of pro-rate contribution has been dispensed with accordingly. (Illustration- Pensioners desirous to become the member at the age of 68 years will have to pay ten times the annual contribution for becoming a permanent member).
- c. A pensioner whether under the old or the new scheme who has contributed for a certain number of years out of the prescribed ten years wants to become a lifetime member under the new scheme, he or she should be required to pay contribution only for the remaining number of years. (Illustration:- 'A' who already contributed periodically for three years shall be required to pay a lump-sum contribution equivalent to 7 years contribution only in order to become a lifetime member).
- d. If the pensioner has already contributed for ten years, after retirement, he shall be issued permanent card without making further contribution. No refund will be allowed to pensioners who have paid the contribution for more than 10 years.
- e. Pensioners and Family Pensioners have the option to pay contribution based on the last pay drawn by them/ deceased employee or their Pension/ Family Pension. Hence, Family Pensioner may contribute on the basis of last pay drawn and avail the same Medical Facilities as available on the date of retirement.

Of late, this office is receiving complaints from pensioners/ pensioners Association that they have not been properly informed of the scheme and the clarification issued thereafter. It is, therefore, reiterated that the Scheme should be widely publicized and the instructions/ clarifications issued by this Office may please be brought into the notice of all concerned or adopt any other method for dissemination of information to pensioners about the scheme.

A report on the action taken on the implementation of the Scheme may please be furnished to this Office by 31.12.2006 with requisite details such as number of pensioners, pensioners residing in non-implemented area, contribution detail etc.

This issues with the approval of D.G. in concurrence with the F.C.

Hindi version will follow.

**(M.S. DAHIYA)**  
**JOINT DIRECTOR.**  
**For Director General.**

**Copy to,**

- (1) Jt. Directors (Finance)/ Dy. Director (Finance) at R.Os./ S.R.Os/ ESIC Run Hospitals,**
- (2) All India ESIC Pensioners" Federation, H-5, Jains Eiffel Gardens, 167-A Arcort Road Vadapalani, Chennai – 26.**
- (3) Employees' State Insurance Corporation, Pensioners' Association Kerala 11/108, Thazha Thethil House, Viyyur, Trichur – 680 010.**
- (4) ESIC Pensioners' Association, West Bengal C/o. N.C. Das, E-9 Ramgarh Kolkata.**
- (5) ESIC Pensioners' Welfare Association, B-3/64-A, Kkeshavpuram, Delhi – 110 035.**
- (6) ESIC Pensioners' Welfare Association, Bangalore.**
- (7) ESIC Pensioners' Association Bihar, ESI Colony, Ambedkar Path, Post Office B.V. College, Patna-800014.**
- (8) ESIC Pensioners' Association U.P.76, New Defence Colony, Gandhi Gram, Kanpur – 208007.**

- (9) ESIC Pensioners' Association Gujarat, 31, Killol Society  
Rajendra Park Road, Odhav, Ahmedabad – 382415.**
- (10) Raj Bhasha Cell, Hqrs. Office, New Delhi.**

**(M.S. DAHIYA)  
JOINT DIRECTOR.**

**EMPLOYEES' STATE INSURANCE CORPORATION  
PANCHDEEP BHAWAN : C.I.G. MARG : NEW DELHI.**

No. D-12/16/1/2003-E.VI.

Dated: 07.06.2006

**MEMORANDUM**

**Sub: Extension of Medical facilities to ESIC Pensioners through  
the ESIC Pensioners Medical Scheme (ESIC-PMS).**

\*\*\*\*\*

Following the approval of the Standing Committee for implementation of the ESIC Pensioners Medical Scheme w.e.f. 01.04.2006, the scheme has already been circulated amongst all concerned alongwith certain clarifications vide Memo. of even number dated 13/1/2006. However, some of the Regional Directors/ Jt. Directors I/c have sought further clarifications for effective implementation of the scheme. Accordingly, the following instructions are issued with the approval of Director General in concurrence with Fin. & A/cs. Division, Hqrs.: -

**i) Appointment of Nodal Officers:-**

Regional Directors/ Jt. Directors I/c of Sub-Regional Offices shall be the Nodal Officers for reference to other approved hospitals, in case such facilities are not available in ESI Hospitals/ Govt. hospitals, on the basis of certificate from the respective hospitals. They shall maintain a register of such cases with all requisite details with due attestation by the Drawing and Disbursing Officer.

**ii) Appointment of AMAs:-**

At present AMAs have been appointed by the Regional Directors/ Jt. Directors for the purpose of providing medical facilities to the ESIC employees working under them. These AMAs shall be recognized for the purpose of the Pensioners' Medical Scheme also as per the existing terms and conditions till the issue of specific terms and conditions for AMAs later for pensioners by this office.

**iii)** If the pensioners take treatment under emergent circumstances, the reimbursement within the ceiling for such treatment in a recognized/ approved hospitals shall be considered only when the medical emergency is certified by the Medical Superintendent of the ESIC Hospital of the region.

- iv)** The Nodal Officer shall ensure that the ESIC pensioners shall avail medical facilities through ESIC institutions including Model Hospitals in the first instance, failing which through ESIS Institutions, wherever agreements are already existing till finalization of separate agreement with each of the State Government for provisions of medical facilities to the ESIC pensioners.
- v)** Regional Directors/ Jt. Directors I/c shall also explore the possibilities of tie-up arrangements with CGHS approved hospitals for the purpose of treatment of pensioners in their respective regions/ sub-regions at Govt. approved rates and intimate the outcome for further action in the matter. This needs to be done apart from the agreement with the State Government.
- vi)** Instruction as to the head under which the contribution, fee for medical card etc. received from the pensioners to be booked, is being issued by the Finance & Accounts Branch, Hqrs. Office separately.
- vii)** In the event of scheme being misused by the pensioner, he shall be debarred from the membership of the scheme and liable for consequential penal action.
- viii)** The following forms/ formats are forwarded herewith for necessary action: -
  - 1. Application form for enrolment under ESIC-PMS-2006 (Revised).**
  - 2. Application form for option of fixed medical allowance under Rule 3(E).**
  - 3. Format of eligibility certificate for drawing fixed medical allowance.**
  - 4. Format of medical card.**
  - 5. Format of index card.**
  - 6. Application form for reimbursement.**
  - 7. Format of essentiality certificate 'A' (applicable for OPD treatment).**
  - 8. Format of essentiality certificate 'B' (Applicable for indoor treatment).**
  - 9. Application form for seeking relaxation under rule 10 of ESIC-PMS.**



This issues with the approval of the Director General.

Hindi version will follow.

Encl.: As above.

(S.K. SINHA)  
JOINT DIRECTOR.

To

1. All Regional Directors/ Joint Directors Incharge D(M)D/ D(M) Noida/ SSMCs/ Medical Superintendents of ESIC. Model Hospitals/ ODCs/ JD(Fin.)/ Account Branch-III, Hqrs.
2. All India Pensioners Federation, Chennai/ ESIC Pensioners' Welfare Association, Delhi/ Kolkata/ Kerala/ Mumbai/ U.P./ A.P.

**APPLICATION FORM FOR ENROLMENT UNDER ESIC-PMS-2006**

To

The Regional Director/ Card Issuing Authority/ Medical Supdts., Model Hospital,  
ESI Corporation,

---

Dear Sir,

I wish to avail medical facilities under ESIC-PMS Rules-2006 and submit the following particulars; -

1. Name(Pensioner) :
2. Residential Address with telephone no. :
3. Date of Retirement :
4. Office from which Retired :
5. Post held on retirement :
6. Last Basic Pay drawn :
7. Present Pension (excluding Dearness Relief) :
8. Whether willing to pay Contribution based upon last Basic Pay or present pension :
9. Name of ESI Dispensary and its distance from residence :
10. Name of ESI Hospital and its distance :
11. Following documents are enclosed :
  - (i) Combined photograph of 4cm x 6cm of self and dependant family members.
  - (ii) Copy of Ration Card attested by a group 'A' officer of ESIC or a Gazetted Officer, indicating names of dependant family

members or an Affidavit attested by a Notary.

- (iii) Eligibility certificate issued by the R.D., ESIC in Annexure-C in original under ESIC-PMS, if getting Medical Allowance.
- (iv) Copy of P.P.O.

12. Family particulars (Under ESIC-PMS)

<b>S.No.</b>	<b>Name</b>	<b>Date of Birth</b>	<b>Relationship with pensioner</b>
1.			
2.			
3.			

13. **Undertaking**

I hereby declare that: -

- a) I will abide by all Rules of ESIC-PMS as amended from time to time.
- b) All the family particulars submitted by me are correct.
- c) All the dependants shown in Para 11 above normally reside with me and the income of any of the above family members does not exceed Rs.1500/- per month.

Date: -

Signature of  
Pensioner  
Name

**FOR OFFICE USE ONLY**

**1. All entries in the application checked & all documents found correct.**

**2. Indicate, if any shortages**

---

---

---

**3. Contribution payable for this financial year in Rs.**

---

**Signature of Dealing Asstt.**

**Signature of verifying officer (at RO)  
and his/ her recommendations.**

**4. Medical Card to be issued/ not to be issued.**

**Signature of Regional Director**

**5. Subsequent to approval of R.D., Contribution of Rs.**

**..... paid by the Pensioner vide Demand Draft/**

**Cheque No. .... dated .....**

**Issued by the bank ..... Branch at**

**...../ challan No. deposited in the bank**

**..... branch at .....**

**6. Medical Card No. .... Issued to the pensioner  
and entered at Sr. No. .... of the Medical Card  
Register of R.O.**

**PMS-2**

**FORM OF APPLICATION FOR OPTION OF FIXED MEDICAL ALLOWANCE UNDER RULE 3 (E)**

To

The Regional Director/ Jt. Director I/c / Medical Supdts., Model Hospital,  
ESI Corporation,  
Regional Office/ Sub-Regional Office,  
\_\_\_\_\_

Dear Sir,

I, hereby opt for fixed medical allowance under Rule 3(E) of ESIC-PMS. As such, I request you to kindly issue me Eligibility Certificate and oblige so that I may draw fixed medical allowance from your office.

Date: -

Signature of  
Pensioner  
Name

**ELIGIBILITY CERTIFICATE FOR DRAWING MEDICAL ALLOWANCE**

1. Certified that the ESIC Pensioner Shri \_\_\_\_\_ has submitted documents in support of the fact that he resides at the address \_\_\_\_\_.

2. Certified that the ESIC Pensioner Shri \_\_\_\_\_ who has opted to avail fixed medical allowance under Rule-3 (E) of ESIC-PMS is entitled to receive fixed medical allowance under ESIC-PMS.

**Signature of Card Issuing Authority/  
Concerned Regional Director/  
Jt. Director I/c with Stamp.**

**Dated:**

**MEDICAL CARD**

<b>(LOGO OF ESIC)</b>				<b>Medical Card No. ....</b>  <b>1. Name of Pensioner.</b> <b>2. Post held on retirement.</b> <b>3. Last basic Pay Drawn.</b> <b>4. Pension on date of issue of card.</b> <b>5. Residential Address.</b> <b>6. Dispensary allotted.</b> <b>7. Rate of contribution paid per month.</b> <b>8. Signature of Pensioner.</b> <b>9. Signature &amp; Stamp of Card Issuing Authority.</b>
<b>EMPLOYEES' STATE INSURANCE CORPORATION</b>				
<b>PENSIONERS' MEDICAL CARD</b>				
<b>Particulars of family: -</b>				<b><u>INSTRUCTIONS TO THE CARD-HOLDER.</u></b>  <b>1. The Card-holder must keep this card under safe custody, any loss of the card should be reported to the Card Issuing Authority and the nearest Police Station.</b>
<b>S.NO.</b>	<b>Name</b>	<b>Date of Birth</b>	<b>Relation</b>	
<b>1.</b>				
<b>2.</b>				
<b>3.</b>				
<b>4.</b>				
<b>5.</b>				
<b>4 x 6cm photograph of the family members to be affixed. To be signed and stamped by Card Issuing Authority.</b>				



**INDEX CARD**

**ESIC Pensioners' Medical Scheme**

1. No. or Name of ESI :  
Dispensary
2. Name of Card Holder :
3. Medical Card No. :
4. Residential Address :
5. Telephone No. (Res.) :
6. Particulars of family :

<b>S.No.</b>	<b>Name</b>	<b>Date of Birth</b>	<b>Relationship with pensioner</b>
1.			
2.			
3.			
4.			
5.			

**Application form for Reimbursement of medical expenses incurred in a hospital to which the ESIC-Pensioner was referred by E.S.I. Hospital or by a Hospital authorized under ESIC-PMS.**

To  
The Regional Director/ Jt. Director I/c / Medical Supdts., Model Hospital,  
ESI Corporation,  
Regional Office/ Sub-Regional Office,  
\_\_\_\_\_

Dear Sir,

I am submitting my Medical Reimbursement Claim for the expenses incurred by me for treatment of myself/ my dependent family member. I am submitting the following information/ documents for further action.

1. Name of Pensioner
2. Medical Card No.
3. Rate of monthly contribution during period of treatment
4. Name of the patient & relation with pensioner.
5. Period of treatment.
6. Name of Hospital/ address where treatment was taken.
7. Name of Hospital.
8. Particulars of amount claimed.
  - (i) Total cost of medicines Rs. ....
  - (ii) Accommodation charges Rs. ....
  - (iii) Charges for lab, tests Rs. ....
  - (iv) Doctors' fee, if any, Rs. ....
  - (v) Any other expenses Rs. ....
  - (vi) Total Amount claimed .....
9. List of enclosure: -
  - (i) Photocopy of Medical Card.

- (ii) Total ..... No. of vouchers/ bills in original, countersigned by M.S.
- (iii) Reference Slip.
- (iv) Essentiality Certificate issued by the M.S. of the hospital where treatment was taken.

Dated:

**Signature of Pensioner**

**Name of Pensioner**

**ESSENTIALITY CERTIFICATE**  
**CERTIFICATE 'A'**

**(To be completed in the case of patients who are not admitted to hospital for treatment)**

Certificate granted to Mrs. Mr./ Miss \_\_\_\_\_ wife/ son/  
daughter of Mr. \_\_\_\_\_ pensioner of  
\_\_\_\_\_. I, Dr. \_\_\_\_\_ hereby  
certify.

- a) that I charged and received Rs. \_\_\_\_\_ for consultation on \_\_\_\_\_ (Dates to be given) at my consulting room, at the residence of the patient.
- b) that I charged and received Rs. \_\_\_\_\_ for administering \_\_\_\_\_ intravenous/ intramuscular/ subcutaneous injections on \_\_\_\_\_ (dates to be given) at \_\_\_\_\_ my consulting room/ the residence of the patient.
- c) that the injections administered were not were for immunizing or prophylactic purposes;
- d) that the patient has been under treatment at \_\_\_\_\_ hospital/ my consulting room and that the under mentioned 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 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 primarily foods, toilets or disinfectants.

**NAME OF MEDICINES**

**PRICE**

- 1.
- 2.
- 3.

- e) that the patient is/ was suffering from \_\_\_\_\_ and is/ was under my treatment from \_\_\_\_\_ to \_\_\_\_\_.
- f) that the patient is/ was not given pre-natal or post-natal treatment;
- g) that the X-ray, laboratory test, etc. for which an expenditure of Rs. \_\_\_\_\_ was incurred was necessary and were undertaken on my advice at \_\_\_\_\_ (name of the hospital or laboratory);
- h) that I referred the patient to Dr. \_\_\_\_\_ for specialist consultation and that the necessary approval of the \_\_\_\_\_ (name of the Chief Administrative Officer of the State) as required under the rules was obtained.
- i) That the patient did no require/ required hospitalization.

**Dated:**

**Signature and designation of the  
Medical Officer and Hospital/  
Dispensary to which attached.**

**CERTIFICATE 'B'**

**(To be completed in the case of patients who are admitted to hospital for treatment)**

Certificate granted to Mrs./ Mr./ Miss \_\_\_\_\_ wife/ son/  
daughter of Mr. \_\_\_\_\_ pensioner of  
\_\_\_\_\_.

**PART 'A'**

I, 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 that the under mentioned 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 primarily foods, toilets or disinfectants;

**NAME OF MEDICINES**

**PRICE**

- 1.
- 2.
- 3.

- c) that the injections administered were/ were not for immunizing or prophylactic purposes;
- d) that the patient is/ was suffering from \_\_\_\_\_ and is/ was under my treatment from \_\_\_\_\_ to \_\_\_\_\_.
- e) that the X-ray, laboratory test, etc. for which an expenditure of Rs. \_\_\_\_\_ was incurred were necessary and were undertaken on my advice at \_\_\_\_\_ (name of the hospital or laboratory);
- f) that I called on Dr. \_\_\_\_\_ for specialist consultation and that the necessary approval of the \_\_\_\_\_ (name of the Chief Administrative Medical Officer of the State) as required under the rules, was obtained.

**Dated:**

**Signature and designation**

**PART 'B'**

I certify that the patient has been under treatment at the \_\_\_\_\_ hospital and that the service of the 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 were essential for the patient's treatment.

**Medical Superintendent.**

**Place :** \_\_\_\_\_

\_\_\_\_\_ **Hospital.**

**Note: - Certificate (d) is compulsory and must be filled in by the Medical Officer in all cases.**



**FORM OF APPLICATION FOR SEEKING  
RELAXATION UNDER RULE 10 OF ESIC-PMS.**

To  
The Regional Director/ Jt. Director I/c,  
ESI Corporation,  
Regional Office/ Sub-Regional Office,  
\_\_\_\_\_

Dear Sir,

I submit the following particulars along with photocopies of relevant documents for seeking relaxation (under ESIC-PMS Rule 10) for indoor treatment taken by me/ my dependent in emergent conditions in the Hospital not recognized under ESIC-PMS.

1. Name of Pensioner
2. Medical Card No.
3. Name of the patient
4. Relation with pensioner
5. Name & full address of Hospital from which treatment taken in emergency
6. Disease for which indoor treatment was taken.
7. Exact distance of the Hospital (in which treatment was taken) from the residence of pensioner (or location of accident, if applicable)
8. Exact distance of the nearest ESI hospital from the residence or place of accident.
9. Whether such a relaxation was obtained to pension earlier also?
10. Period of treatment.
11. Total expenditure for treatment.

12. Amount as per calculation of pensioner strictly as per ESIC-PMS Rules.
13. If the relaxation is granted, does the pensioner undertake to accept the amount reimbursed as per Schedule – 2 of ESIC-PMS?
14. Enclosures: -

Enclose photocopies only (original papers will be demanded only if relaxation is granted) of the following documents: -

- a. Medical Card.
- b. Certificate from the Medical Superintendent of Hospital regarding emergent nature of case.
- c. Admission/ Discharge slip, prescription slips.
- d. Vouchers/ bills.

Dated:

**Signature of Pensioner**

**EMPLOYEES' STATE INSURANCE CORPORATION  
PANCHDEEP BHAWAN : C.I.G. MARG : NEW DELHI.**

No. D-12/16/1/03-E.VI.

Dated: 01.03.2007

To

All Regional Directors/ Jt. Directors Incharge,  
D(M)D/ DM Noida/ SSMC/ M.S. of ESIC Model Hospitals/ ODCs.

**Sub:** Extension of Medical facilities to ESIC Pensioners through the ESIC Pensioners Medical Scheme (ESIC-PMS) w.e.f. 01.04.2006 – issue of clarification regarding.

**Ref:** Hqrs. Office clarifications of even no. dated 13.01.2006, 07.06.2006 & 15.12.2006.

I am directed to invite your attention to the reference cited above and to state that following the approval of Standing Committee, the ESIC – Pensioners Medical Scheme came into force w.e.f. 01.04.2006. To smoothen the delivery of Medical Facilities under the scheme, clarifications were issued from time to time in the past. The matter was also placed before the Standing Committee in its meeting held on 31.01.2007. The consolidated clarifications alongwith further measures to remove the difficulties are appended herewith.

It is further clarified that a pensioner will remain entitled to the same facilities as available to him/ her at the time of retirement, based on pension/ last pay drawn as opted by pensioner at the time of issue of Medical Card.

The court cases concerning Medical Facilities to Pensioners, FMA etc. where reply/ Affidavit have already been filed before the Courts as per the then prevailing instructions may be reviewed and if considered necessary revised affidavits may be filed before the Hon'ble Courts in consultation with the Counsel under intimation to Hqrs. alongwith copy of the revised counter.

Regional Directors vide letter of even no. were requested to make the tie-up arrangements, dissemination of information on the scheme etc. and submit the ATR with requisite details such as no. of pensioners, pensioners residing in non-implemented area, contribution details etc. so as to assess the viability of the scheme and to redress the grievances of Pensioners. The said information is still awaited from most of the field

units. The same may please be supplied urgently. However, the Director General has also approved constitution of a team consisting R.D./ Nodal Officer, Dy. Director (Admn.) and Jt. Director/ Dy. Director (Fin.) to expedite the tie-up arrangement with the approved hospitals. In states with SROs, the J.Ds. I/c may also be associated with the team for tie-up arrangements. As regards, Delhi it shall be the responsibility of D(M)D, Delhi to make tie-up arrangements with approved Govt./ Pvt. Hospitals for Super-Speciality Treatment of Pensioners. An Action Taken Report may be submitted by 31.03.2007.

The clarifications as approved by the Standing Committee are appended herewith. This disposes of the references from Regional Directors and pensioner's Association, in the matter.

The receipt of this letter may please be acknowledged.

**(A.K. SRIVASTAVA)**  
**JT. DIRECTOR-II**  
**For Director General.**

**Copy to,**

- (1) Jt. Directors (Finance)/ Dy. Director (Finance) at R.Os./ S.R.Os/ ESIC Run Hospitals,**
- (2) All India ESIC Pensioners' Federation, H-5, Jains Eiffel Gardens, 167-A Arcort Road Vadapalani, Chennai – 26.**
- (3) Employees' State Insurance Corporation, Pensioners' Association Kerala 11/108, Thazha Thethil House, Viyyur, Trichur – 680 010.**
- (4) ESIC Pensioners' Association, West Bengal C/o. N.C. Das, E-9 Ramgarh Kolkata.**
- (5) ESIC Pensioners' Welfare Association, B-3/64-A, Kkeshavpuram, Delhi – 110 035.**
- (6) ESIC Pensioners' Welfare Association, Bangalore.**
- (7) ESIC Pensioners' Association Bihar, ESI Colony, Ambedkar Path, Post Office B.V. College, Patna-800014.**
- (8) ESIC Pensioners' Association U.P.76, New Defence Colony, Gandhi Gram, Kanpur – 208007.**
- (9) ESIC Pensioners' Association Gujarat, 31, Killol Society Rajendra Park Road, Odhav, Ahmedabad – 382415.**
- (10) Raj Bhasha Cell, Hqrs. Office, New Delhi.**

The Standing Committee in its meeting held on 13.12.2005 approved medical care to ESIC pensioners w.e.f. 01.04.2006 on contributory basis depending upon and subject to option and payment of contribution in advance for a minimum period of six months based on the basic pay last drawn or monthly pension/ family pension.

Pursuant to the decision of Standing Committee, clarifications have been issued for implementation of the scheme among the ESIC Pensioners on the following points: -

- (1) The pensioners were requested to exercise option within three months from the date of their retirement. Those who retired before introduction of the scheme but were not lifetime members of any earlier Medical Scheme were given one time option to apply for the membership of this scheme within three months from the date of its implementation i.e. 01.04.2006. However, on request of Pensioners' Associations/ Federation, the period has since been extended upto 31.10.2006.
- (2) The medicare to ESIC Pensioners shall be at par with medical facilities available to Central Govt. Pensioners covered under CGHS Scheme subject to certain changes in the background of ESIC run Hospitals/ ODC Centres in the state.
- (3) ESI Hospitals (Model Hospital) including ODC shall act as centre for OPD and Indoor treatment to the extent of facilities for pensioners living in cataachment areas. In case, any particular treatment is not available they may refer the patient to any of the recognized hospitals where such treatment is available. If a pensioner takes treatment in a hospital which is not recognized in non-emergent circumstances, no reimbursement shall be made and the entire expenditure will be borne by the pensioner.
- (4) The reimbursement will be restricted to the rates approved by ESIC/ State Govt./ CGHS/ CS(MA) Rules, whichever is lower or applicable. The cases where contingencies have arisen on or before 31.03.2006 shall be regulated in accordance with the instructions in force prior to 01.04.2006. Reimbursement claims already decided shall not be reopened.
- (5) **Appointment of Nodal Officer:** Regional Directors/ Jt. Directors I/c. of Sub-Regional Offices shall be the Nodal Officers for reference to other approved hospitals, in case such facilities are not available in ESI Hospitals/ Govt.

Hospitals, on the basis of certificate from the respective hospitals. They shall maintain a register of such cases with all requisite details with due attestation by the Drawing and Disbursing Officer.

(6) **Appointment of AMAs:**

- (i) At present AMAs have been appointed by the Regional Directors/ Jt. Directors for the purpose of providing medical facilities to the ESIC employees working under them. These AMAs shall be recognized for the purpose of the Pensioner' Medical Scheme also as per the existing terms and conditions till the issue of specific terms and conditions for AMAs later for pensioners by this office.
- (ii) If the pensioners take treatment under emergent circumstances, the reimbursement with the ceiling for such treatment in a recognized / approved hospital shall be considered only when the medical emergency is certified by the Medical Superintendent of the ESIC Hospital of the region.
- (iii) The Nodal Officer shall ensure that the ESIC Pensioners shall avail medical facilities through ESIC institutions including Model Hospitals in the first instance, failing which through ESIS institutions, wherever agreements are already existing till finalization of separate agreement with each of the State Governments for provisions of medical facilities to the ESIC Pensioners.
- (iv) Regional Directors/ Jt. Directors I/c shall also explore the possibilities of tie-up arrangements with CGHS approved hospitals for the purpose of treatment of pensioners in their respective regions/ sub-regions at Govt. approved rates. This needs to be done apart from the agreement with the State Government.
- (v) In the event of scheme being misused by the pensioner, he shall be debarred from the membership of the scheme and liable for consequential panel action.

(7) **Medical Facility Through AMA:** Under Rule 6(A) pensioners are entitled to take treatment only from an ESIC/ ESIS Dispensary/ Hospital in the first instance wherever it is available for the pensioners. Consultation with A.M.A. is not permissible even if any A.M.A. is available within such radius. ESI Hospitals (Model Hospital) including ODC shall act as

centre for OPD and Indoor treatment to the extent of facilities for pensioners living in catchments areas.

- (8) **Entitlement of Fixed Medical Allowance:**
- (i) The Pensioners residing in the catchments area of the hospital of ESIC and residing in the area where the ESI Scheme is in force can not opt for Fixed Medical Allowance.
  - (ii) If both Husband & Wife are pensioners, they are entitled to draw Fixed Medical Allowance. However, if either of them avails benefits as provided under the scheme their entitlement to draw Fixed Medical Allowance will cease for both of them.
  - (iii) Fixed Medical Allowance is admissible to Family Pensioners.
  - (iv) Pensioners residing in non-implemented area can opt for Fixed Medical Allowance and will not be eligible for OPD Treatment. However, for taking Indoor treatment normal procedure shall apply.
- (9) **Admissibility of I.P. Treatment in respect of Pensioners receiving FMA: -** Pensioners who are living in non-implemented area of ESI Scheme can opt for availing Fixed Medical Allowance and in case they decide to avail facility under ESIC-PMS for Indoor treatment Card can be issued bearing stamp "***Not Valid for OPD Treatment***". Nodal Officers may explore the possibility to recognize any other hospital and AMA in respect of which the Director General or any other authority has entered into an agreement as per rule-7 and 9 in respect of the pensioners residing in non-implemented areas.
- (10) **Traveling Allowance in case of medical reference: -** The scheme is self sustaining one. Hence, consideration of T.A. is deferred for the present till such time the scheme is financially viable. However, this can also be extended to pensioners w.e.f. 01.04.2007.
- (11) **Medical Advance:** - The scheme is self sustaining one. Hence, consideration of Medical Advance is deferred for the present till such time the scheme is financially viable. The Regional Directors/ Jt. Director I/c. have been directed to explore the possibility of tie-up arrangements with public/private approved hospitals for CGHS beneficiaries for super speciality treatment.
- (12) **Separate Counter:** - Separate Registration Counter of ESI Dispensary/ Hospital for pensioners are not possible in the

present scenario. However, Dispensaries/ Hospitals under the control of ESIC shall be directed to make certain special arrangements within the constraints.

- (13) **Reference to other Hospitals:** - ESIC/ ESIS Dispensary/ Hospital may recommend the test/ procedure which are not available in ESIC/ ESIS Institutions and refer the patients to hospitals as provided under scheme. After the reference from concerned Dispensary/ Hospital, the pensioner will be required to obtain written permission from the concerned Nodal Officer in normal circumstances before commencement of treatment. The reference can only be to hospitals recognized for CGHS Pensioners.
- (14) **Nodal Officer in respect of Delhi:** - As far as pensioners in and around Delhi, D(M)D shall be the Nodal Officer as in the past.
- (15) **Hospitals recognized for ESIC Pensioners:** - All Public and Private Hospitals recognized under CGHS/ CS(MA) Rules shall be the same for ESIC Pensioner's treatment. Reimbursement shall be at admissible rates. The R.D's/ J.D's/ Nodal Officers shall explore the possibility of agreement with such hospitals and report the same to Hqrs. for further action. Individual Pensioners/ Pensioners Association may be informed of the above, in addition to display at Notice Board.  
Similar tie-up arrangement needs to be made with the hospitals recognized under CGHS/ CS(MA) Rules for the serving employees of the Corporation also and progress made may be reported to Hqrs. Office forthwith.
- (16) **Treatment taken in emergent situation-submission of claims:** - In such cases claims are required to be submitted to the Nodal Officer for examination. Cases may be referred to Hqrs. with medical opinion of M.S. in places where ESIC Hospitals is located and in other remote areas from M.R.
- (17) **Definition of family:** - The definition of 'family' shall be same as for CGHS for pensioners. Unmarried/ widowed sisters (irrespective of age), wholly dependent and normally residing with pensioner are eligible members of family. For dependency, however, the income from all sources including pension and pension equivalent of DCRG should not exceed Rs. 1500/- P.M.
- (18) **Persons voluntarily retired/ compulsorily retired whether eligible or not:-** Employees taking Voluntary



Retirement at an early age say 45 or 50 and above can opt for the scheme and pay contribution.

- (19) **AMA System – reimbursement of charges:** - If a member of the ESIC-PMS happens to take treatment from AMA, the admissible charges shall be reimbursable as per prevailing provisions i.e. at rates as mutually agreed upon between ESIC/ AMA under Rule 9 of the scheme.
- (20) **Contribution-lump-sum/ periodical/ pro-ratacontribution:** -
- a. A pensioner who becomes a member of the scheme is required to exercise an option to either for lifetime membership on payment of contribution equivalent to ten times the annual contribution required to be paid at the time of retirement or for periodical payment of contribution.
  - b. A pensioner intending to become a lifetime member should be required to deposit lump-sum contribution equivalent to ten years of contribution irrespective of the age of his/ her entry into the scheme. The provision of pro-rate contribution has been dispensed with accordingly. (Illustration- Pensioners desirous to become the member at the age of 68 years will have to pay ten times the annual contribution for becoming a permanent member.)
  - c. A pensioner whether under the old or the new scheme who has contributed for a certain number of years out of the prescribed ten years wants to become a lifetime member under the new scheme, he or she should be required to pay contribution only for the remaining number of years. (illustration: - 'A' who already contributed periodically for three years shall be required to pay a lump-sum contribution equivalent to 7 years contribution only in order to become a lifetime member).
  - d. If the pensioner has already contributed for ten years, after retirement, he shall be issued permanent card without making further contribution. No refund will be allowed to pensioners who have paid the contribution for more than 10 years.
  - e. Pensioners and Family Pensioners have the option to pay contribution based on the last pay drawn by them/ deceased employee or their Pension/ Family Pension. Hence, Family Pensioner may contribute on the basis of last pay drawn and avail the same Medical Facilities as available on the date of retirement.
- (21) The pensioners residing in the catchment area of the hospitals of the ESIC or residing in the area where the ESI

Schem is in force cannot opt for fixed medical allowance. Whereas, pensioners residing in other places will be entitled for FMA and in addition, they can opt for the indoor treatment. The Catchment Area in respect of the place where the Model Hospital/ ODC Centre is set-up may be defined as the area comprising the city area including urban agglomeration of classified city, municipality, Corporation including such of suburban municipalities, notified areas or cantonment as are contiguous to the named municipalities or corporation or other area notified by Central Government and periphery of the municipal limits of qualified city defined for the purpose of payment of HRA by the Government of India from time to time.

- (22) Reimbursement to pensioners for expenses incurred on super-speciality treatment, can be made by the respective Nodal Officers.
- (23) The Regional Directors/ Jt. Directors I/c have been directed to supply a list of approved hospitals to Pensioners' Associations in their respective areas.

To improve the scheme further, the following clarifications are being issued: -

- (a) As of now, the medical facility to ESIC Pensioners is being provided through ESIS Dispensary/ Hospitals in seven States only (excluding Delhi/ Noida) as per agreement with the respective State Governments and ESIC. Moreover, the states where the medical facilities are being provided through ESIS institutions, the facilities are not comparable with that of Central Government Pensioners. In order to provide the similar facility to pensioners residing in different part of country, State Governments with whom there are no agreement for providing medical facilities to ESIC pensioners are also required to be approached for necessary agreements. However, the major impediment for agreement with the State Governments might be the amount of reimbursement which is at par with the Insured Persons. Hence, we may consider negotiating with each of the State Governments on the rate of payment for the facilities offered by them. We may authorize the respective Regional Directors to discuss the issue as a part of the Draft Agreement to be entered into with the states and if payment on the basis of capitation now payable for I.Ps or its multiplies or any other formula not agreeable to

them, we may finally settle for reimbursement of actual expenses.

- (b) In the present scheme, the modalities for reimbursement of expenditure incurred for availing speciality/ super-speciality treatment after due reference from the ESIC/ ESIS Dispensaries/ Hospitals is not specified. Hence, reimbursement of the expenditure incurred on cost of medicines, pathological and other tests prescribed by the ESIC/ ESIS/ Approved Hospitals/ Dispensary and speciality/ super-speciality treatment outside the ESIC/ ESIS institutions taken after due reference, shall be made by respective nodal officer at the approved rates and after due scrutiny as presently being done in the case of serving employees.
- (c) Pensioners residing in the Catchment Area of the hospitals of ESIC and residing in the area where the ESI Scheme is in force cannot opt for Fixed Medical Allowance. However, in the States where there is no agreement with the State Governments for providing facilities to the pensioners, the pensioners residing out of the Catchment Area of ESIC Model Hospital/ ODC, scheme shall not be obligatory & they would be allowed Fixed Medical Allowances in lieu of OPD treatment till the time Corporation enters into agreement with the respective State Governments.
- (d) T.A. shall be extended to pensioners w.e.f. 01.04.2007 applying the same conditions like that of serving employees.
- (e) In the states where Corporation is not having agreement with the State Governments, the pensioners residing in implemented area but out of catchment area of ESIC Hospitals if the pensioner desires to avail the facilities under the ESI Scheme if shall be provided through AMA. No FMA would be allowed in such cases.
- (f) As of now, the pensioners eligible for FMA can also opt for in-door treatment. In such cases the Indoor Treatment facility should be provided at the first instance through ESIC Hospitals/ ESIS Hospital (where agreement with State Government exists). In case, such facilities are not available in ESIC/ ESIS Hospitals, pensioners may be referred to approved hospitals. No T.A. etc. will be paid to such pensioners for availing Medical Facilities from the designated hospitals.
- (g) The pensioners residing in the area where the facility under the ESIC - PMS is available are not eligible for FMA.

However, for availing the medical facility under the scheme, they have to get themselves enrolled by paying the necessary contribution and after following the prescribed terms and conditions. Thus, there is no need to prescribe the time limit for entering into the scheme as by virtue of his residential location a pensioner is ipso facto covered under the scheme. However, as per the prevailing provisions, a pensioner not opting for the scheme within the grace period of 3 months will be entitled for super speciality treatment only after waiting period of six months from the date of his joining the Scheme.

This supercedes the instructions issued earlier on the subject to the extent above.

The above clarifications are issued considering the financial viability of the scheme with a view to render medical care to the ESIC Pensioners on par with Central Government Pensioners with necessary modifications in the background of infrastructure available in the form of ESIC Hospitals and tie-up arrangement with the State Governments.

**EMPLOYEES' STATE INSURANCE CORPORATION  
PANCHDEEP BHAWAN : C.I.G. MARG : NEW DELHI.**

No. D-12/16/1/03-EVI

Dated:31-12-07

To

All Regional Directors  
ESI Corporation  
Regional Office

**A.P. , Rajasthan, Maharashtra, Kerala, Karnataka, Punjab and  
Tamil Nadu.**

**Sub: Reimbursement of the pending claims of ESIC Pensioners-  
Prior to introduction of New ESIC-PMS.**

Sir,

I am directed to invite your attention to the above cited subject and to inform you that medical facilities were being provided through ESIS Dispensaries/Hospitals in your region as agreed upon by the State Government in accordance with the Scheme dated 29-11-85. According to Scheme dated 29-11-85, the State Government agreed for providing medical care to ESIC Pensioners and payment was required to be made to the State Govt and not to the Pensioners. In the meantime Revolving Fund was introduced for reimbursement of Super-Speciality treatment for I.P.s and Rajasthan Government started reimbursement to ESIC Pensioners through this fund. However, in light of instruction issued by Hqrs. Office on 15-7-2005, the practice of payment from revolving fund was discontinued to ESIC Pensioners and thereafter no payment was made to the ESIC Pensioners by State Govt of Rajasthan. Further, R.D informed that no separate budgetary provision is available for making reimbursement to ESIC Pensioners. The matter has been examined at Hqrs. Office level and it has been decided as under:

**As there was no provision in the Scheme dated 29-1185 for direct reimbursement to the ESIC pensioners, the Regional Director**

**being a Nodal Officer for concerned region is hereby authorized to make reimbursement at approved rates to ESIC Pensioners in respect of claims prior to introduction of ESIC-PMS effective from 01.04.2006 which is otherwise admissible as per the then prevailing provisions, not required any type of relaxation and pending due to non-availability of budgetary provisions with the Regional Director.**

**It is therefore, requested to make the reimbursement accordingly and forward the detail of such admitted claims to this office.**

The clarifications have been approved by the Standing Committee. This disposes of the reference from Regional Directors and Pensioners Associations in the matter.

The receipt of this letter may please be acknowledged.

**(DEEPAKJOSHI)  
JOINT DIRECTOR**

**Copy to:**

- 1 Jt. Directors(Fin.)/Dy. Director(Fin.) at R.Os and SROs /ESIC Run Hospitals.
- 2) All India ESIC Pensioners Federation, H-5 Jains Eiffel Gardens , 167-A Arcot Road Vadapalani, Chennai.
- 3)ESIC Pensioners Association, Kerala 11/208, Thazha Thethil House, Viyyur, Trichur-680010
- 4) ESIC Pensioners Association, West Bengal C/O N.C Das, E-9 Ramgarh Kolkatta.
- 5) ESIC Pensioners Welfare Association, B-3/64-A, Keshavpuram, Delhi 110035
- 6) ESIC Pensioners Welfare Association, Banglore.
- 7) ESIC Pensioners Association , Bihar , ESI Colony Ambedkar Path Post Office B.V College , Patna 800014

8) ESIC Pensioners Association U.P 76, New Defence Colony , Gandhi Gram, Kanpur-208007

9) ESIC Pensioners Association Gujarat 31, Killol Society Rajendra Park Road , Odhav Ahmedabad-382415.

10) Raj Bhasha Cell, Hqrs. Office, New Delhi.

