

Contributory Scheme for Post Retirement Medical Facilities.

1.0 Coverage:

The Scheme is framed with a view to provide medical benefits to the regular employees of THDCIL, their spouses, minor sons and unmarried daughters subsequent to their retirement death or separation from service on medical grounds and/or as a result of permanent total disability, on contributory basis, subject to the provisions, as detailed hereunder.

2.0 Eligibility :

2.1 The Scheme will apply to the following categories of THDCIL employees:

- (i) Employees who separate from the Company on account of retirement on attaining the age of superannuation or are separated by the Company on medical grounds and/or permanent total disability, provided that the concerned employees have completed a minimum qualifying period of ten years of continuous service in Central/State Government/Public Sector Undertaking, out of which a minimum of 5 years shall be in THDCIL, provided that in case of death or separation on medical grounds and/or as a result of permanent total disability, completion of the minimum qualifying period of ten years continuous service shall not be necessary;
- (ii) Ex-employees of the Corporation who superannuated before implementation of the Post Retirement Medical Benefit Scheme i.e. ex-employees of THDCIL who retired before 01.05.1996 are also covered under this Scheme. Such employees/ dependents shall be allowed medical benefit/reimbursement only after they are admitted as member on paying the necessary contribution as prescribed under the Scheme. Credit facility/ advance to empanelled hospitals shall also be admissible to retired employees.
- (iii) Officers who are selected for appointment by the Central / State Government/ Regulatory Commission / Statutory Bodies etc. subject to fulfilling the conditions of minimum service provided in the cases of employees who retire on superannuation. Provided that during the period of such service, if the employer has a scheme of Medical Reimbursement Benefits, the Officer shall not claim benefits from THDCIL.
- (iv) Employees who have attained the age of 55 years & above and on review are retired by the Management or employees who opt to retire voluntarily from the Services of the Corporation after attaining the age of 55 years or more, subject to fulfilling the condition of minimum service provided in the cases of employees who retire on superannuation.
- (v) Board level appointees.

2.2 In case of death of the retired employee who has been availing of the benefits under the Scheme, his/her spouse will continue to avail the benefits under the Scheme subject to his/her continuing to meet the terms and conditions of the Scheme.

2.3 In case of death of an employee in harness, the benefits under the scheme shall be admissible to the spouse, minor sons and unmarried daughters.

2.4 Similarly in the case of an employee who is separated on medical grounds and/or as a result of Permanent Total Disability, the benefits under the scheme shall also be admissible to the spouse, minor sons or unmarried daughters.

2.5 The benefits under the Scheme would be available to the concerned employee only if the employee concerned and his/her spouse and children are not availing of any medical facilities from or through the Central/State Government/Public Sector Undertaking/Quasi-Government Body or any other source.

3.0 Benefits:

The medical benefits to the retired employees and their spouses, and in case of death and/or as a result of permanent total disability, minor sons and unmarried daughters under the Scheme will be admissible for the treatment taken only in India and would be as under:

3.1 Those residing at places where the Company has its own hospitals/full-fledged dispensaries would be allowed medical treatment facilities, including medicines as available in such hospitals/dispensaries only.

3.2 In respect of such others who reside at places where the Company does not have its own hospital/full-fledged dispensaries, reimbursement of medical expenses incurred shall be regulated as under:

3.2.1 Indoor Treatment

Eligible retired employees shall be allowed reimbursement of medical expenses incurred for indoor treatment when such treatments are obtained in Government Hospitals. In cases where indoor treatment has been obtained in hospitals/nursing homes other than Government hospitals, reimbursement of medical expenses incurred will be regulated as under:

- i) In cases of cities/towns where the Corporation has empanelled hospitals :-
As admissible to serving employees of equivalent status posted in such cities.
- ii) Where the Corporation does not have empanelled hospitals and the treatment is taken in a registered Hospital/Nursing Home in a city where :-
 - a) The population is 50 lakhs and above (cities classified as 'X') reimbursement shall be restricted to rates prevalent in Sir Ganga Ram Hospital, New Delhi.
 - b) The population is more than 5 lakhs but less than 50 lakhs (cities classified as 'Y') reimbursement shall be restricted to the rates of 'Holy Family Hospital', New Delhi.
 - c) In all other places (classified as 'Z') reimbursement shall be restricted to the rates of Himalayan Institute & Hospital trust, Jolly Grant, Dehradun.

The classification of cities shall be as circulated by Government of India for the purpose of HRA to its employees.

- (iii). In cases of treatment taken in AIIMS/Govt. Hospitals/PSU Hospital/Railway/Defence Hospital, the reimbursement shall be allowed as per the rates charged by the concerned hospital.
- (iv). For any treatment/procedure undertaken in any hospital other than the empanelled hospitals of the concerned city and in case rate for such treatment/procedure is not available in the referral hospital for the city approved for rate purposes, the reimbursement shall be limited to the rates of Sir Ganga Ram Hospital for such treatment/procedure.

Reimbursement of medical expenses incurred for indoor treatment will be allowed, subject to the condition that the treatment is obtained in Government Hospitals or other hospitals notified by the Company.

3.2.2 Out Patient/Domiciliary Treatment

For outpatient/domiciliary treatment, reimbursement of medical expenses shall be allowed as per Company's Medical Attendance Rules for serving employees. The annual ceiling for reimbursement of expenditure incurred for outpatient/ domiciliary treatment would be equivalent to the maximum of the Pay Scale of a serving employee of equivalent status/rank, on the last day of the relevant financial year. The maximum ceiling for the employees who are enrolled for the benefits under the scheme, for the first year after their retirement will, however, be proportionate to be availed of after retirement upto 31st March, of the Financial year.

4.0 Contribution:

4.1 Eligible retired employees and dependants who intend to avail of benefits under the Scheme shall be required to pay contribution at the following rates:

Category of the Employees retired, deceased and/or disabled	Rate of monthly contribution for those residing at places where	
	Company hospitals/ dispensary facilities are available	Company hospitals/ dispensary facilities are not available
(i) Those in Executive grades as on the date of retirement	Rs. 15/- (Rs. 180/- p.a.)	Rs. 20/- (Rs. 240/- p.a.)
(ii) Those in non-executive grades as on the date of retirement	Rs. 10/- (120/- p.a.)	Rs. 15/- Rs. 180/- p.a.)

This is subject to revision from time to time.

In the event of death of the employee after retirement, the spouse may continue to avail the facility at his/her option on paying the contribution as above

4.2 The contribution, as above, shall be payable in advance on yearly basis for each financial year commencing from the 1st of April. The first instalment of contribution for the employees, who become eligible for the benefits under the Scheme will, however, be proportionate to the number of months for which the benefit will be available after retirement upto 31st March of that financial Year plus contribution for the following financial year.

4.3 Eligible retired employees and dependents may also join the Scheme by paying a 'one time contribution' of Rs. 7200/- (for executives) or Rs. 5400/- (for non-executives). This is subject to revision from time to time. Members of the scheme who have opted for payment of subscription annually may opt to pay the 'one time contribution' at any date by paying the full amount of Rs. 7200/- or Rs. 5400/- as the case may be.

4.4 Contribution once paid shall not be refundable even if the benefits under the scheme are not availed by the beneficiary or in the event of death of beneficiary/beneficiaries before the expiry of the term for which the contributions have been paid.

4.5 Where a retired employee does not become a member of the scheme or/and pay his contribution, he can not seek any benefit by making contribution for the past.

5.0 Procedure:

5.1 An eligible employee who intends to avail of medical benefits under the Scheme shall apply within 03 months from the date of retirement for this purpose to the Head of the Project/Office from where he has retired, indicating, inter-alia, the THDCIL Project/Office where he wants to register himself for availing of the facilities giving his residential address. In the event, the employee wants to change the place from where he wants to avail of the benefits, he will have to approach the Project/Office from where he is availing of the facilities for the change.

5.2 The Personnel Department of the Project/Office after scrutiny of the application and verification of the eligibility conditions as mentioned in para 2.0 above, will issue an office Order permitting the beneficiary/ beneficiaries to avail of the benefits with copies to the Personnel Department and Finance Department of the concerned Office/Project where the retired employee is to be registered.

5.3 The Project/Office where the retired employee is to be registered shall duly register the retired employee concerned and issue a Medical Card to him in the form prescribed as Form 'B' after receipt of the prescribed amount of contribution from the retired employee. The amount will be payable to the Project/Office by cash or Demand Draft in favour of THDCIL drawn on any branch at that place. A copy of the medical card shall also be sent to the concerned Finance and Accounts Department.

5.4 The Medical Card will be valid for a period for which the subscribed contributions have been paid. The Medical Card shall be renewable on 1st April of each financial year on payment of the prescribed contribution. However, intermittent or broken period membership shall not be permitted.

5.5 The Medical Card will become invalid from the date any of the eligibility conditions ceases to be fulfilled by the beneficiaries and in that case, the contribution paid for the unexpired period, if any, will not be refundable.

6.0 Claim:

6.1 For claiming reimbursement of medical expenditure incurred by the beneficiaries covered under para 3.2 above, the retired employee shall prefer claim not more than once in a month to the Accounts Department of the Project/Office concerned in the form prescribed as Form 'C'.

6.2 The Claim will be processed and reimbursed to the retired employee by the concerned Accounts Department after verifying the validity of the Medical Card and the benefits admissible to the retired employee concerned under the scheme.

7.0 General:

- 7.1 In case any doubt arises regarding the genuineness or otherwise of the claims preferred by the retired employee, the Company reserves the right to direct the beneficiary to present himself before a Medical Board and that no reimbursement will be made till the recommendations of the Medical Board are received in this regard.
- 7.2 If, on reasonable ground or on the basis of recommendations of the Medical Board, it is found that there is misuse of the benefits under the Scheme by any beneficiary, he may be summarily debarred from availing the benefits under the scheme.
- 7.3 The Company reserves the right to amend, modify or discontinue the Scheme, in part or full, at any time, at its sole discretion.
- 7.4 In respect of any matter not covered herein, specific reference will be considered by Corporate Personnel Division for decision.
- 7.5 Relaxation in any of the provisions of the Scheme, in exceptional cases, will require approval of Chairman & Managing Director.

The above Scheme comes into force with immediate effect. However, employees who retired on or after 01/05/1996 will also be covered under this Scheme as approved by the Board.

Authority:

1. Corporate Circular No. 1/98 Dated 10/07/98
2. Corporate Personnel Office Order No. THDCIL/CP/101/1416 dated 07.09.2006
3. Corporate Circular No. 09/2011 Dated 05/04/2011

THDC INDIA LIMITED

APPLICATION FORM FOR AVAILING POST RETIREMENT MEDICAL FACILITIES

Paste the passport size photograph

1. Name : _____ 2. Employee No : _____
3. Designation: _____ 4. Department : _____
5. Basic Pay : _____ 6. Place of Posting : _____
7. Date of retirement : _____ 8. (i) Residential Address : _____

9. Office from where the facility is desired : _____ (ii) Distance between the residence and the nearest THDCIL dispensary : _____

10. Whether claimed TA on retirement : Yes / No
 If Yes, indicate station : _____

11. Particulars of Beneficiaries :

Sl. No.	Name	Relationship	Age	Occupation	Marital Status (of children)	Signature of Beneficiary

12. Period for which desired : from _____ to _____
13. The medical card duly completed, is enclosed in duplicate.

I certify that :

- I shall abide by the terms and conditions of the above referred Scheme(s) as amended from time to time.
- I am not reemployed on full time basis elsewhere and am not availing any other medical cover in consequence of employment of my spouse and / or wards.
- My spouse is not employed in Central/State Government / Public Sector Undertaking/ Semi-Govt. Organisation / Nationalised Bank/Autonomous body and is not availing medical facilities for the beneficiaries mentioned above from his/her employer. He / she is not covered under CGHS.
- My above mentioned children fulfil the "dependency" criteria with reference to age, marital status, occupation and income as applicable.

I am aware that in case there is any change in information given in this application the same shall affect the nature of benefits/ eligibility. I hereby undertake to intimate, in writing, to the Issuing Authority in case there is any change, whatsoever, in any of the information given in this application, within 7 days of its occurrence.

Signature: _____

Date : _____

Verified. The above beneficiaries are eligible to the benefit under the Scheme w.e.f.

Officer

Signature of Head of Project/Unit/Controlling
Designation

Date : _____

THDC INDIA LIMITED
RETIRED EMPLOYEE'S MEDICAL CARD

Medical Card S. No.

Space for affixing
photographs of
beneficiaries

1. Name of the retired employee : _____
2. Employee No. _____ 3. Date of Retirement _____
4. Designation at the time of retirement : _____
5. Scale of pay & basic pay on the date of retirement : _____
6. Deptt. from which retired : _____
7. Deptt./ Office where registered for medical benefits under the scheme : _____
8. Date from which the Medical Card is valid : _____

9. Name(s) of the beneficiary(ies)

	Name	Age	Relationship	Address
(i)	_____	_____	_____	_____
(ii)	_____	_____	_____	_____
(iii)	_____	_____	_____	_____
(iv)	_____	_____	_____	_____

Specimen signature of the retired employee

Signature of the Issuing Officer
/Designation

Date of Issue :

THDC INDIA LIMITED**CLAIM FOR REIMBURSEMENT OF POST RETIREMENT MEDICAL EXPENSES**

Name of Retired employee _____ Emp. No. _____ Div. _____

Date of Retirement _____

Patient's name and relationship _____

Diagnosis _____

1. Fees for Consultation (Dates & Consultation No.)			3. Hospital Treatment		
Rs.	P		Rs.	P	
Total			Total		
2. Medicine			4. Pathological, Bacteriological, Radiological Test		
Total			Total		
			5. No. & Dates of Injection and amount paid Dressing / Other Charges		
Total			Total		

Total (1) to (5) _____
Less Advance _____
Net Total _____

Certified that

- (i) The above particulars are true to the best of my knowledge and belief and the person (s) for whom the medical expenses is /are incurred is /are wholly dependent on me.
- (ii) I am a member of THDCIL Post retirement Medical facilities.
- (iii) I continue to fulfil the conditions of eligibility for availing the medical benefit under the scheme.
- (iv) Expenditure towards cosmetic surgery are not covered in above bills.

Date : _____

Signature of Claimant

Verification

The identity of Shri/Smt. _____ who has taken the treatment (patient) has been verified from the medical card No. _____ of THDCIL and his / her signature are verified.

Authorised Signatory of the Corporation

For use in Finance & Accounts

Passed for Rs. _____ ((Rupees _____ only)
paid by cheque No. _____ dated _____

(Signature)