



GOVERNMENT OF MEGHALAYA

MEGHALAYA MEDICAL ATTENDANCE (16TH AMENDMENT) RULES

FOR THE YEAR 2007

GOVERNMENT OF MEGHALAYA
HEALTH AND FAMILY WELFARE DEPARTMENT

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ORDERS BY THE GOVERNOR

NOTIFICATION

The 13th March, 2007

No. Health.224/2000/Pt/158:- In exercise of the powers conferred by the proviso to Article 309 of the Constitution, the Governor of Meghalaya is pleased to make the following Rules, with further to amend the Meghalaya Medical Attendance Rules, 1981, namely:-

1. Short title and Commencement :- (i) These rules may be called the Meghalaya Medical Attendance (16th Amendment) Rules, 2007.

(ii) They shall come into force at once.
2. Addition of new clauses to Sub-Rule (3) of Rule 10 of the Meghalaya Medical Attendance Rules, after clause (azv), the new clauses (azvi) shall be added, namely, "Pratiksha Hospital, Guwahati".

Sd/- (P. Naik, IAS.,)

Commissioner & Secretary to the Govt. of Meghalaya,
Health & Family Welfare Department

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Memo No.Health.224/2000/Pt/158-A

Dt. Shillong, the 13th March, 2007.

Copy to:-

- 1) Director of Printing and Stationery, Meghalaya, for favour of publication in the Meghalaya, Gazette.
- 2) All Administrative Departments.
- 3) All Heads of Departments.
- 4) The Director of Health Services (MI)/(MCH&FW)/(R), Meghalaya, Shillong
- 5) Director, Pratiksha Hospital, Guwahati.

By order etc.,

Deputy Secretary to the Govt. of Meghalaya
Health & Family Welfare Department.

GOVERNMENT OF MEGHALAYA
HEALTH & FAMILY WELFARE DEPARTMENT

No.Health. 230/2000/248

Dated Shillong, the 28th June, 2006.

From:- Shri. P.S.Dkhar, MCS.,
Officer-On-Special Duty to the Govt. of Meghalaya,
Health & Family Welfare Department.

To

All Administrative Departments.
All Head of Departments.

Sub: Forwarding of Office Memorandum pertaining to Medical Reimbursement as modified.

Sir/Madam,

With reference to the above I am directed to forward herewith a copy of the Office Memorandum No.Health.230/2000/247 dt.28.6.06 along with necessary enclosures pertaining to the modified procedure for claim of Medical Reimbursement for favour of information and necessary action.

Yours faithfully

Office-On-Special Duty to the Govt. of Meghalaya,
Health & Family Welfare Department.

GOVERNMENT OF MEGHALAYA
HEALTH & FAMILY WELFARE DEPARTMENT

No.Health. 230/2000/247

Dated Shillong, the 28th June, 2006.

OFFICE MEMORANDUM

Subject: Medical reimbursement – Modifications etc.

As per the present procedure the referral cases are recommended by the Health Department for treatment mostly at recognized medical hospitals. The final treatment costs of such cases are referred back to the Health Department for scrutiny and clearance for sanction.

There has been a substantial increase in the referral cases over a period of time, leading to delay in sanction in some cases. The need for simplifying the procedure to ensure quick disposal of cases has been engaging the attention of Health Department for some time. With a view to improve the efficiency of the system accordingly, the existing procedure stands modified with the following details.

1. The recommendation of Specialists of Health Department would continue to be necessary for all referral cases covering the place of treatment, probable treatment cost and in special cases, the mode of travelling and escorts.
2. Administrative departments will henceforth be competent to sanction the final treatment cost subject to the following conditions.
 - (a) That, the final cost of treatment does not exceed the recommended amount for treatment.
 - (b) That, the mode of travel should be as the eligibility, or as recommended by Health Department for onward journey and by Referral Hospital for return journey.
 - (c) That, the number of escorts should not be more than recommendation by Health Department.
 - (d) That, the items of treatment in the final bill should conform to the admissible list.
3. The Referral cases, to Hospitals not recognised by the Health Department will require prior approval of Health Department.

4. In cases where treatment in a recognised Hospital has taken place without prior approval because of a medical emergency, ex-post facto approval of Health Department will be obtained for which jurisdiction necessitating emergency treatment would need to be spelt out.
5. The final bill of treatment is required to be presented along with duly filled format at annexure-I.
6. The employee seeking reference for treatment of his/her parent/child is required to submit a declaration as per format in Annexure-II to the Medical Specialist concerned.
7. The aforesaid provisions will apply to all referral cases of all Government employees both within and outside the State.
8. The list of items which are admissible / not admissible for claims is appended at Annexure III. However, the list is subject to modification from time to time.
9. The list of the medical institutions / Medical Specialists recognised as of date is enclosed at Annexure-IV
10. If the treatment is undertaken in Government Hospitals, the Govt. rates will apply. In cases other than State Govt. Hospitals, the rates applicable in Hospitals referred to, are as admissible, are applicable. The list of approved items and rates are as specified in OM No. Health 248/99/31 dt. 29.10.2001, and as updated from time to time.
11. The provisions of the Meghalaya Medical Attendance Rules, 1981. The All India Services Medical Attendance Rules and the Meghalaya (Family Pension) rules, prior approval of Health and Finance Departments will be required.
12. Health Department may be consulted in cases which require clarification. The interpretation made by the Health Department would be final.

This arrangement comes into force with immediate effect.

(W.M.S.Pariat, I.A.S)
Principal Secretary to the Govt. of Meghalaya
Health & Family Welfare Department

ANNEXURE – I

To,

The

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Subject: Final Medical re-imburement bill for Medical Treatment

Sir,

I am to submit herewith a medical re-imburement claim / refund in connection with medical treatment of Shri / Smti at (name of Hospital) as per the particulars given below:-

1. Full name of claimant
2. (A) In case of servicing Govt. Employee:
 - (i) Designation and address of Office where employed
 - (ii) Basic Pay and pay scale Rs.

OR

(B) In case of Pensioner:

- (i) Pension Payment Order (P.P.O):
Number
- (ii) Amount of Basic Pension per month Rs.
3. (a) Relationship of patient with the applicant, if applicant is not the patient
- (b) Name of the patient
- (c) Age of the patient
4. Letter number & date conveying approval for medical treatment.
(copy to be enclosed)
5. Details of all Medical Advances drawn; due to be regularized:-
 - (i) Amount drawn & date of drawal Rs
 - (ii) Office from which drawn
 - (iii) Amount already refunded, if any Rs

6. Also enclosed are the following:

- (i) Essentiality Certificate duly certified by “Authorised Medical Attendant”

- (ii) Bills / Cash memos duly listed showing
 - (a) Serial number
 - (b) Bill / Cash memo number & date
 - (c) Particulars
 - (d) Amount Nos.

- (iii) Total amount. Rs

7. Claim / refund Rs.

ANNEXURE – II**DECLARATION**

REGARDING PARTICULARS OF A PATIENT BEING PARENTS OR CHILDREN OF A CLAIMANT WITH REFERENCE TO THE MEGHALAYA MEDICAL ATTENDANCE RULE 3 (g) (ii) or (iii) AS APPLICABLE

(IN CASE OF PARENTS-INCLUDING STEP-PARENTS)

I declare that Shri / Smt _____ who is my Father / mother ordinarily resides with me at (complete address _____ and in wholly dependent on me, financially.

(IN CASE OF CHILDREN INCLUDING THOSE ADOPTED ACCORDING TO ANY LAW OR CUSTOM)

I declare that Shri / Smt _____ who is my Son / daughter was born in the year _____ and that he / she is married / unmarried as that he / she has no income of his own /her own.

Place _____

Date _____

Signature of Declarant

Full Name

Designation:

Office employed:

In case of Pensioner only

{ Pension Payment Order (P.P.O.) No _____
Amount of Basic Pension: Rs _____

ANNEXURE – III

**GOVERNMENT OF MEGHALAYA
HEALTH & FAMILY WELFARE DEPARTMENT**

**LIST OF ITEMS WHICH ARE ADMISSIBLE / NOT ADMISSIBLE FOR RE-
IMBURSEMENT OF MEDICAL BILLS**

ADMISSIBLE ITEMS

1. Medicines and surgical items.
2. Service charge on accommodation
3. Nursing care
4. Laboratory test
5. Recovery charge
6. Operation theatre rent
7. Procedure charge
8. Resident consultant fees
9. Investigation charges
10. Accommodation (as per grade)

NON-ADMISSIBLE ITEMS

1. Phone bills
2. Laundry
3. Certificate fee
4. Disinfectant fee
5. Toilet
6. Extra beds
7. Diet