

To

All Deans/Directors/Heads of Departments/Offices,
(Including outstations),
Lala Lajpat Rai University of Veterinary & Animal Sciences,
Hisar.

Memo No. CVU/Asstt./2014/
Dated: ___ Feb., 2014.

**Subject: Scrutiny of medical reimbursement claims –
guidelines thereof.**

It has been provided in para 3(b) of the instructions issued by the Comptroller, CCS HAU, Hisar vide his letter No. CAUH/E.1/2009/8924-9074 dated 3.7.10 (as applicable to this University) that in case, individual claim or total claims of any employee during a financial year exceed Rs. 10,000/- and is below Rs. 50,000/-, the same may be submitted to the Dean/Director/Controlling officer for according sanction. The Vice-Chancellor has authorized the Deans/Directors/Controlling officers for according sanction in such cases upto Rs. 75,000/- instead of Rs. 50,000/-. Further action in the matter may please be taken accordingly.

COMPTROLLER

Copy to: 1. Joint Director (Audit), LUVAS, Hisar.
2. Incharge, Internal Branches o/o CVU;
3. P.A. to C.V.U.

LALA LAJPAT RAI UNIVERSITY OF VETERINARY & ANIMAL SCIENCES, HISAR

Appendix 'A' to Letter No. CVU/LUVAS/
Asstt./IF/2014/_____ Dated:_____
(Pages 1 to 9)

Detailed procedure to be adopted by the University departments/offices with regard to reimbursement of medical expenses of University employees/pensioners.

1. Processing of Medical reimbursement claims:

While processing medical reimbursement claims of University employees, following points may be kept in view by the dealing staff/DDO(s)/HODs/Controlling Officers/SMO/CMO etc. to check fraudulent drawal of medical claims:-

- i) As per standing instructions & practice prevalent in the matter, medical reimbursement bills preferred by the claimants are required to be diarized in the office/department concerned. However, to streamline the procedure, the departments are again requested to follow this practice meticulously.
- ii) The medical reimbursement bills as received from the claimants be first of all entered in the Register of Medical Claims and the amount actually reimbursed may invariably be indicated in due course. Further, the details like dates, amount, name of disease for which reimbursement is to be made, treatment received locally or relates to treatment at referral hospital may also be made in the Medical Reimbursement Bill Register by making suitable amendments in the proforma prescribed.
- iii) In case treatment of any employee/officer is continuing for longer period and beyond financial year, the progressive totals be carried over from year to year till the treatment is completed. This procedure may also be followed in case of chronic diseases also.
- iv) It may be ensured that the claim has been submitted within the prescribed time limit. In case the claim is time barred, the same may be returned to the claimant immediately. In case proper justification is given by the claimant, the medical reimbursement claim be dealt with keeping in view instructions issued by the University/Govt. for its employees, in this respect, from time to time.
- v) As soon as any employee is appointed on regular basis list of Dependents upon the employee may be taken and pasted in his Service Book along with individual photographs of all the family members of University employee, as per proforma given at Annexure-I. Further photographs (passport size) of the patient with relation to the employee may be affixed on the form for reimbursement of medical expenses (AU 5/12), which may be attested by the HOD/office concerned and also countersigned by the CMO/SMO invariably. Col. 2 of Form AU 5/12 (Form for reimbursement of medical expenses) as given in the HAU Account Code Vol. I may be treated as amended as under:-

Name & relationship of the patient with the University employee (along with passport size photograph):

- I) Name of patient: _____
II) Relationship with the University employee: _____
III) Photograph of the patient: _____

Above particulars attested

**HOD/Office
Countersigned**

CMO/SMO

- vi) While processing the case for payment of medical reimbursement bill, service book of the University employee should be added by the Head of Department/Office concerned.
- vii) Sanction for chronic diseases is granted by the District Medical Board for two years at a time. If any employee put up sanction of any chronic disease in respect of self or any Dependent, the same may be recorded in the Registrar of Medical Reimbursement Claims at the allotted page and also in the Service Book.
- viii) If any employee/officer has opted for fixed Medical allowance, no claim of O.P.D. treatment shall be admissible.
- ix) As soon as any medical reimbursement claim is received, the same may be scrutinized and it may be ensured that the same is complete in all respect viz:-
- a) In the event of seriousness of the patient and the treatment taken in emergency in an unapproved hospital, reimbursement will be made equal to PGI, Chandigarh rates only with the approval of the Vice-Chancellor, as per instructions issued by the Health Department, Govt. of Haryana vide letter No. 2/8/88-1 HB III dated 6.5.05 as adopted and circulated by the Comptroller, CCS HAU, Hisar vide Endst. No. CAUH/E1/2005/E-144/6716-6866 dated 7.6.05. However, in such a case emergency will be certified by the Deans/Directors/Officers of the University/other COs in consultation with the Chief Medical Officer/Sr. Medical Officer, HAU, Hisar (in case of employees posted at Hisar Campus) and in consultation with the Civil Surgeon of the Distt. Concerned (in case of employees posted at outstations) and reimbursement shall be made at PGI rates only.

- b) If cost of treatment at an empanelled hospital exceeds Rs. 1.00 lack repeatedly for the treatment of the same disease, an appraisal for the latest details of the illness should be made by the concerned department/office in consultation with the CMO/SMO, CCS HAU, Hisar from the Consultant of the Hospital concerned, before medical reimbursement bill is verified by the CMO/SMO for payment.
- c) The reimbursement of medical expenses at the rate of PGIMER, Chandigarh/PGI+75% of excess amount is to be restricted only for the medical treatment taken in empanelled hospitals as per instructions of the Govt. circulated from time to time. However, as per instructions issued by the Govt. vide letter dated 6.5.05 as adopted by the University vide CAU's Endst. No. CAUH/E1/2005/E-144/6716-6866 dated 7.6.05, if any rate list is not available in the PGI, Chandigarh, then the rates charged at AIIMS, New Delhi will be reimbursed or vice-versa. If such rates are not available both at PGI/AIIMS, then the matter should be referred to the Director General, Health Services, Haryana, Panchkula for necessary advice.
- d) Essentiality Certificate is signed by the Authorized Medical Attendant attending the patient and the same is countersigned by Medical Supdt./S.M.O./authorized Doctor of the hospital. For this purpose, following wording is inserted in the proforma for Essentiality Certificate formulated by the University regarding reimbursement of medical expenses.

“Countersignature and Designation of Medical
Superintendent/SMO/Authorized Doctor of the Hospital/College

Name in Capital letters _____”
(with stamp)

- e) All receipts in support of payments are attached with the claim. It may be ensured that the receipts bear printed serial numbers. In case the receipt is computerized, the same must be signed by the Authorized signatory of the hospital.
- f) All receipts are also attested by the Authorized Medical Attendant.
- g) Detailed Discharge Summary Report giving nature of treatment, date of discharge, medicines prescribed etc. duly signed by the Authorized Doctor is attached with the claim. Further, in case original or attested copies of these documents are not available, a declaration may be furnished by the claimant to the effect that original documents or its copies, duly attested, have not been issued by the concerned hospital.
- h) All original papers i.e. Test Reports, Reports of M.R.I./C.T. Scan/X-Ray/Ultra Sonography/E.C.G. etc. are attached with the claim. In case original papers are not given by the hospital attested copies of the same are attached.

i) In case the patient is admitted in a private hospital, one consolidated bill is issued by the hospital with details of advance payments deposited etc.

x) After the claim has been scrutinized in all respects and if found in order, the financial eligibility of the claim shall be checked by the dealing Asstt. of the department/office keeping in view the instructions issued by the Haryana Govt./LUVAS, Hisar from time to time, where after the medical reimbursement bill will be forwarded to the C.M.O./S.M.O., HAU Hospital for scrutinizing the medical bills in order to ascertain the admissibility of medicines and rates of different lab. Tests, operation fee or of implants etc. as prescribed by the State Govt. from time to time and adopted by the University, before signing the requisite certificates. Further, for the medical bill, where approval of the Vice-Chancellor is required, in addition to the scrutiny made by the department/office as well as C.M.O./S.M.O., will also be checked/scrutinized by the Comptroller's office.

2. A proforma for seeking financial sanction of the competent authority for reimbursement of medical expenses has been devised for better control over the claims and a copy of the same is enclosed herewith (Annexure-II). It will be mandatory for the authority competent to accord financial sanction for the reimbursement of medical expenses on this proforma only. Further, a latest copy of Punjab Services Medical Attendance Rules, 1940 (as applicable to Haryana Govt. employees) may also be procured by all the departments/offices for consultation in order to examine the medical reimbursement claims preferred by University employees/pensioners/retirees of their departments/offices. However, a copy of instructions issued by the Govt. in the matter from time to time and adopted by the University, will be invariably sent to all the departments/offices.

3. Procedure to be followed:

a) After the claim has been verified by the CMO/SMO, the claim may be submitted to the Head of Deptt. for according financial sanction if totals of the claims for one employee during a financial year is upto Rs. 50,000/-.

b) In case totals of the claims for one employee exceeds Rs. 50,000/- and is upto Rs. 1, 00,000/- during a financial year, after verification of the claim by the CMO/SMO/HOD, the same may be submitted to the Dean/Director/Controlling Officer concerned (having the powers of officers of the University) for scrutiny and according financial sanction.

c) In case totals of the claims for one employee exceeds Rs. 1,00,000/- and is upto Rs. 5,00,000/- during a financial year, after verification of the claim by the CMO/SMO/HOD, the same may be forwarded to the Comptroller after its scrutiny through the Dean/Director/Controlling Officer concerned (having the powers of officer of the University). The Comptroller shall further scrutinize the claim and

submit the same to the Vice-Chancellor for according financial sanction and thereafter return the case to the Controlling Officer concerned.

- d) In case totals of the claims for one employee during a financial year exceeds Rs. 5,00,000/-, the same may be forwarded by the HOD to the Dean/Director/Controlling Officer for further scrutiny and onward transmission to the Comptroller for placing the same before a Committee consisting of Comptroller, Registrar, Chief Medical Officer/Sr. Medical Officer, Campus Hospital and one more member to be associated/nominated by the Vice-Chancellor. The Comptroller will act as Convenor. After the claim has been scrutinized by the Committee, the Comptroller shall obtain the financial sanction of the Vice-Chancellor and thereafter return the case to the Controlling Officer concerned.
- e) If any employee wants to claim facility of Chronic Disease Policy, the same may be allowed with the approval of District Medical Board or any other authority approved by the Govt. for its employees from time to time. However, if any employee wants to change his option from the facility of Chronic Disease Policy to Fixed Medical allowance, he may opt for it as per instructions of the Govt. as adopted by the University.

Note: If any employee opts to avail facility of chronic diseases, he shall not be entitled to fixed medical allowance.

4. The subsequent instructions issued by the State Govt. from time to time in the matter will also be applicable to the University employees.

ANNEXURE-I

LALA LAJPAT RAI UNIVERSITY OF VETERINARY & ANIMAL SCIENCES, HISAR

List of family Members/Dependents (to be submitted in duplicate) for the purpose of medical reimbursement.

1. Name of University Employee: _____
2. Designation: _____
3. Name of Office/Department: _____
4. Details of family members/Dependents _____

Sr. No.	Name	Relationship	Age	Photograph (Passport size)

Signature of University Employee

Countersigned by the HOD/Office

LALA LAJPAT RAI UNIVERSITY OF VETERINARY & ANIMAL SCIENCES, HISAR
ANNEXURE-II

Proforma for seeking financial sanction for reimbursement of medical expenses incurred on medical treatment (outdoor/indoor/chronic) of employees/Dependents/pensioners of the University and for seeking approval for advance payment (75% of the amount admissible) for medical treatment.

Name of Department/Office: _____

Name of the claimant: _____ Designation _____

Particulars of patient:

- a) Name: _____
- b) Age: _____
- c) Relationship: _____
- d) Nature of treatment: _____ (Open outdoor/chronic/indoor)
- e) Period of treatment _____

As per recommendations made by the Chief Medical Officer/Sr. Medical Officer, CCS HAU, Hisar, the medical reimbursement bill/case for drawl of advance payment (75% of the amount admissible) for taking medical treatment at _____ Govt. /approved hospitals) in respect of aforesaid claimant has been thoroughly checked by the office with reference to rules/instructions issued in the matter from time to time and the same is in order. It is further certified:

- (i)*That the claimant has furnished a joint Affidavit (on a non-judicial stamp paper) to the effect that he will avail medical facility of his/her spouse from the University (in case spouse of the University employee is employed in Central Govt./State Govt./Semi-Govt. departments).
- (ii) (a) *That the claimant has furnished an affidavit to the effect that his/her major child/children/major grand children are not self-Dependent and they are wholly Dependent upon the claimant.

(b) *That necessary declaration regarding income of parents and that they are solely Dependent and normally reside with the claimant has been obtained in the beginning of the calendar year.
- (iii)*That the chronic disease certificate has been issued by the Medical Board of _____ (name of the hospital) in respect of _____ on _____ and the same is valid upto _____ for the disease named _____.
- (iv) That the claim has been preferred by the claimant within time limit.

- (v) That the claim has been diarized.
- (vi) That the claim is supported with required documents, in original.
- (vii) That the claim has been duly signed by the AMA of the concerned hospital.

***Strike off whichever is not applicable**

- (viii) That the claim prepared in the Essentiality Certificate has been countersigned by the SMO/Medical Superintendent/Dy. Medical Superintendent/authorized Doctor of the hospital concerned, as the case may be.
- (ix) That all the receipts/cash memos have duly been attested by the claimant with the words "Attested & paid by me."
- (x) That the claim has been entered in the Register of Medical Claim at Page_____ (Sr. No._____)
- (xi) That the detailed discharge summary report/discharge slip, wherever required, has been attached.
- (xii) That the list of family members/Dependents (as per Annexure-I of these instructions) upon the University employee has been obtained from the employee & pasted in his/her service book.
- (xiii) That comparative statement has been drawn by the CMO/SMO for the treatment taken/to be taken in an approved referral hospital/unapproved hospital (in emergency).
- (xiv) During the current financial year, the claimant has already been reimbursed the following amount for medical treatment:

Sr. No.	Name of family member/self for whom reimbursement made.	Relationship with the claimant	Period of treatment	Amount reimbursed

- (xv) That the funds for the purpose are available with the department/office in the scheme_____ under SOE_____

1. In view of the above, it is proposed that:-

- a) _____ *Financial sanction for reimbursement of medical expenses of Rs._____ in respect of _____ (name & designation of the employee) may kindly be accorded by the Prof. & Head/Head of Office (As totals of the claims for one employee) during the current financial is upto Rs. 50,000).

OR

***Case may be sent to the Dean/Director/Controlling Officer concerned for further scrutiny and according financial sanction of Rs. _____ for reimbursement of medical expenses (As totals of the claims for one employee during the current financial year is exceeding Rs. 50,000/- and upto Rs. 1,00,000/-)**

***Strike off whichever is not applicable.**

- b) *Case may be sent to the Dean/Director/Controlling Officer concerned for scrutiny and its onward transmission to the Comptroller for further scrutiny & obtaining financial sanction of Rs. _____ from the Vice-Chancellor for reimbursement of medical expenses (As totals of the claims for one employee during the current financial year is exceeding Rs. 1,00,000/- and upto Rs. 5,00,000/-).**
- c) *Case may be sent to the Dean/Director/Controlling Officer concerned for further scrutiny and its onward transmission to the Comptroller for placing the matter before the Medical Reimbursement Committee consisting of the Comptroller, Registrar, CMO/SMO & one more member to be associated/nominated by the Vice-Chancellor for recommendations for the reimbursement of medical expenses of Rs. _____ (As totals of the claims for one employee during the current financial year is exceeding Rs. 5,00,000/-).**
- d) *Case may be sent to the Comptroller for seeking approval of the Vice-Chancellor for reimbursement of medical expenses of Rs. _____ (equal to PGI rates) (in case treatment has been taken in an unapproved hospital in emergency).**
- e) *Case may be sent to the Comptroller for according approval/sanction of Rs. _____ for making advance payment for taking medical treatment at _____ (name of the hospital), as per comparative statement drawn & recommendations made by the CMO/SMO, CCS HAU, Hisar with regard to admissibility.**

***Strike off whichever is not applicable.**

Dealing Asstt./dealing hand

Supdt./A&AO

HOD/Office