

**INDIAN ASSOCIATION FOR THE CULTIVATION OF SCIENCE
JADAVPUR, KOLKATA – 700 032**

CONTRIBUTORY MEDICAL SCHEME (CMS)

1. Title and Scope

The Scheme shall be called ‘Contributory Medical Scheme’ (CMS) of the Indian Association for the Cultivation of Science (hereinafter referred to as ‘Scheme’). The payment of contribution towards the Scheme as mentioned in Paragraph 5.1 is compulsory.

2. Date of Effect

The Scheme shall come into effect from 1st April, 2006.

3. Applicability

The Scheme shall be applicable to:

- a) All the employees of the Association and members of their families.
- b) Pensioners of the Association and members of their families.
- c) Members of the family of the deceased employee who was the member of the CMS, and the contribution at the rate/amount fixed by the Association from time to time is continued to be paid by the family.
- d) Members of the family of retired employee even after the death subject to payment of contribution at the rate/amount fixed by the Association from time to time. Definition of “Family” in this case would be as per Family Pension Rules.
- e) Members of the Staff working in research projects of the Association for a period exceeding three months, and to the Research Fellows/Associates of the Association and Projects.
- f) The employees of the Association who go on outstation duty (tour/training) can avail medical treatment from any Govt. hospital and the amount will be reimbursed in full. In the case of treatment from private hospital/nursing home, the amount reimbursable will be restricted to admissible rates. Members of the staff and their families who go on tour other than official may also avail such medical treatment as above and reimbursement of expenses will be as per admissible rates.

4. Definition of ‘Family’

4.1 ‘Family’ for the purpose of the Scheme shall mean :

- (a) an employee’s wife or husband, as the case may be ;
 - (b) unmarried children & step children (below the age of 25 years);
- and

- (c) unemployed widowed daughters and dependent divorced/separated daughters; *
- (d) parents;
- (e) sisters (unmarried and unemployed except judicially separated/divorced sisters);
- (f) unemployed widowed sisters;
- (g) unemployed minor brothers and dependent brothers;*

The total number of sisters (both unmarried and widowed) and minor brothers and dependent brothers not to exceed two.

The total number of unmarried children & step children and widowed daughters not to exceed the limits mentioned in explanation (2) below. Wholly dependent and normally residing with the employee.

*[GOI, Deptt. Of Health, O.M. No. S-11012/1/98-CGHS(P) dated 14.03.2001]

Explanation :

1. The term 'Parents' includes 'step-mother' *
2. In respect of those employees who have joined the Association before the 1st January, 2006, the total number of unmarried children & stepchildren below the age of 25 years and widowed daughters to be covered under the Scheme shall not exceed 3. The benefits under the Scheme shall, however, be admissible to all such children born to an employee in three deliveries, provided that the number of living children just before the third delivery does not exceed two.

*[GOI, Deptt. Of Health, O.M. No. S-11012/1/98-CGHS(P) dated 14.03.2001]

3. In respect of those employees who have joined the Association on or after 1st January, 2006, the total number of unmarried children and stepchildren below the age of 25 years and widowed daughters to be covered under the Scheme shall not exceed two. The benefits under the Scheme shall however, be admissible to all such children born to an employee in two deliveries, provided that the number of living children just before the second delivery does not exceed one.

- (a) If the son or daughter or any dependent member of an employee's family admitted to the Scheme is suffering from any disorder or disability of mind or is crippled or disabled so as to render him/her unable to earn a living, he/she can be continued to be covered under the Scheme even after attaining the age of 25 years, subject to the following :
 - i. The Controlling Officer shall satisfy, before continuing the scheme to such son or daughter or dependent member, that the handicap is of such a

nature so as to prevent him/her from earning his/her livelihood and the same shall be evidenced by a certificate obtained from a Specialist Doctor recognized/empanelled under Scheme setting out the exact mental or physical condition of the son or daughter or dependent member.

- ii. Further, the concerned employee shall produce, every three years, a certificate from a Specialist Doctor recognized/empanelled under the Scheme to that effect that his/her son or daughter or the dependent member continues to suffer from the disorder or disability of mind or continues to be physically crippled or disabled, failing which the facilities shall be withdrawn for such a son or daughter or the dependent member.

NOTE : (A) Children : Married, divorced or otherwise legally separated daughters even though dependent on the employee are not eligible for medical benefits under the Scheme. In the case of adopted children, only legally adopted children will be eligible for medical benefits. Such children as are gainfully employed (which will mean all employment other than the part-time employment mentioned below) or are engaged in a trade/business/profession shall be excluded from the Scheme. Part-time employment is not to be considered as gainful employment for this purpose provided the following conditions are satisfied :

- i) The employer concerned certifies the employment to be of 'part-time'.
- ii) The gross income from the part-time employment is not liable to income tax and further it does not exceed the pay of the employee. Children engaged in a trade/business/profession even on a part-time basis shall be excluded. Literary, artistic, culture or similar pursuits, the income from which does not attract income tax, shall not be regarded as trade/business. The receipt of academic/university stipends, scholarships and free-ships shall not be regarded as gainful employment. Any income arising from Contributory Medical Scheme medical advice as part of therapy shall be totally excluded for the purpose of determining whether the child is gainfully employed or not.

(B) Parents : Parents will be regarded as wholly dependent on the employee if they normally reside with him/her and if their (both parents) total monthly income does not exceed the pay of the employee and is not more than Rs. 1,500/= per month excluding Dearness Relief vide GOI, Deptt. Of Health, O.M. No. S. 11012/1/98-CGHS(P), dated 14.03.2011. For adoptive parents, the provisions of the Government of India, Ministry of Health O.M. No. F.29-21171-MA dated 29th January, 1972 read with O.M. No. S.14012/5176-M.C. dated 9th September, 1976.

Explanation :

1. Parents of a married female employee would also be entitled to the benefits of the Scheme if they continue to be wholly dependent and reside with the female employee after her marriage. She will, however, have a choice (the option once exercised can be changed only once during the entire service) to include either her parents or her parents-in-law for availing benefits under the Scheme subject to the conditions of dependence, residence, etc., being satisfied.
2. More than one wife of an employee can be registered under the Scheme if the extra wife is not in contravention of :
 - a) Rule 21 of the Central Civil Services (Conduct) Rules, 1964.
 - b) Administrative orders issued by the Ministry of Home Affairs vide their O.M. No. 290/59-Estt dated October 16, 1954.
 - c) The legislation restricting plural marriages.

Copy of Government of India, Ministry of Health, O.M. No. F.29-21/71M.A. dated 29th January, 1972 read with O.M. No. S.14012/5/76-M.C. dated 9th September, 1976 {please refer to Paragraph 4.1 (B) of the Scheme}.

An adopted child shall be deemed to be the child of his adopted parents for all purposes and the ties of the child in the family of his birth are severed and replaced by those created by the adoption in the adoptive family. It has therefore, been decided that :

- i) Once the adoption is effected, the medical facilities under the CMS cannot be extended to the real parents, even though they are wholly/mainly dependent on the Association's employee.
 - ii) The term 'Family' for the purpose of these Rules will include adoptive parents who are wholly/mainly dependent on the Association's employee subject to the condition of dependence and residence laid down and
 - iii) In the case of adoptive parents, if the adoptive father has more than one wife living, and the adoption has been made with the consent of more than one wife, only the senior-most among them in marriage will be deemed to be the adoptive mother for the purpose of eligibility to the concession under the Contributory Medical Scheme, and orders, and the other will be treated as step-mother and as such will not be eligible to these concessions, as under the rules the term 'parent' does not include step-mothers.
- 4.2 No person who is receiving or is eligible to receive medical aid/facility/cash subsidy, cash allowance or reimbursement for medical care from any source other than this Scheme such as, for example, the Railways, CGHS,

Commercial Organizations, Public Sector Undertakings, State Government, Private Section Organizations, etc., shall be admitted to the Scheme without the explicit permission of a subject to such restrictions as may be imposed by the Association.

4.3 Annual Declaration :

- 4.3.1 All employees should declare, at the beginning of each calendar year or as soon as possible thereafter, about the eligibility or otherwise of the members of their family for medical assistance from other sources.
- 4.3.2 A declaration in the prescribed form regarding income and residence of parents, as also regarding residence, dependence and age of eligible children, and other dependents, should be furnished by the employee at the time of initial registration and at the beginning of every calendar year thereafter for continuation of Contributory Medical Scheme facilities.
- 4.3.3 It shall be the responsibility of the employee concerned to notify the Registrar of the Association as soon as their sons/daughters, parents or other dependents, become ineligible for the benefits of the Scheme so that their names can be deleted from the list of Contributory Medical Scheme beneficiaries. Any suppression of information would lead to withdrawal of the facilities under the Scheme and also institution of disciplinary proceedings as per rules.

5. Contribution :

- 5.1 For the medical benefit provided under the Scheme, a monthly contribution at the following rates shall be recovered :

Pay Range (per month)	Pension Range (per month)	Contribution (per month)
Up to Rs. 3,000/=	Up to Rs. 1,500/=	Rs. 15/=
Rs. 3,001 to 6,000/=	Rs. 1,501 to 3,000/=	Rs. 40/=
Rs. 6,001 to 10,000/=	Rs. 3,001 to 5,000/=	Rs. 70/=
Rs. 10,001 to 15,000/=	Rs. 5,001 to 7,500/=	Rs. 100/=
Rs. 15,001 & Above	Rs. 7,501 & above	Rs. 150/=
Research Fellows/Associates of IACS & Projects		Rs. 50/= per annum

Contribution/subscription may be charged from the pensioners on the basis of their last pay drawn or the pension, as per the option given by the pensioners.

- 5.2 For the purpose of recovery of the monthly contribution, 'Pay' shall mean Pay as defined in FR 9(21)(a)(I) of Government of India Rules.

- 5.3 In cases where both the husband and wife are employees of the Association, the payment of contribution will be regulated as under :
- a) The contribution shall be recovered from either the husband or wife. The husband and wife shall send a joint declaration to the Accounts Section giving detailed information in this regard. The rate of contribution to the Scheme will, however, be calculated at the rate applicable to the spouse drawing the higher salary.
 - b) The person from whose pay-bill the contribution is recovered shall be regarded as the prime beneficiary, and will be eligible to register his/her parents.
 - c) In case the spouse of the prime beneficiary wishes to additionally register his/her dependent parents, who are otherwise eligible, a separate contribution shall be payable by him/her on the basis of his/her pay.
 - d) If the wife is paying contribution and husband wishes to register his parents, who are otherwise eligible, he will have to pay an additional contribution based on his pay.
 - e) In cases where the husband or wife draw higher pay alternatively every few months, the entire contribution shall be recovered from one of them who shall be regarded as the prime beneficiary and will be eligible to register his/her parents even if his/her pay is lower during certain months.
 - f) The entitlement of parents shall be determined with reference to the pay of the prime beneficiary in all cases.
- 5.4 In the case of an employee who is on any kind of leave, the contribution shall be recovered on the basis of the pay last drawn by the employee immediately before proceeding on leave. The facilities of the Scheme will not be available to a person proceeding on extraordinary leave, unless the contribution for the period of extra-ordinary leave is paid in advance before the commencement of such leave.
- 5.5 (a) An employee who proceed abroad on deputation-cum-special leave or any kind of study leave, may at his/her option, avail of the benefits of the Scheme for his/her family. The option shall be exercised before the employee proceeds on leave/deputation abroad and shall be treated, as final and the contribution for the period shall be paid in advance.

(b) Any employee who is on deputation and on 'foreign service' terms to any other Department / Organization / Public Sector Undertaking / Autonomous Body / Central / State Government, etc. any members of his/her family are not eligible for coverage under the Scheme. If the employee opts for coverage under Contributory Medical Scheme and the borrowing Department agree for the same he/she may be permitted to be covered under the Scheme.

- 5.6 In the case of an employee under suspension who is in receipt of a subsistence allowance, the contribution shall be recovered on the basis of the amount of subsistence allowance. If the employee is, however, subsequently allowed to draw pay for the period of suspension, the difference between the contribution recovered on the basis of subsistence allowance and the contribution payable on the basis of the pay ultimately drawn shall also be recovered. If the subsistence allowance is withdrawn, the availability of the Scheme facilities will be suspended. For the purpose of determining entitlement under the Scheme, the pay that he/she would have drawn but for his/her suspension will be taken into account.

6. Details of the Scheme :

- 6.1 At the time of appointment, an employee shall give in writing the name, address etc. of his/her Family Physician, along with those of two specialists as the case may be, approved by the family physician. The Family Physician of an employee of the Association will be recognized to provide medical treatment/attention for the employee and his/her family. The other two and the M.O., IACS will be known as Authorized Medical Officers. Change of the Family Physician, if any, can be permitted on intimation to the Registrar of the Association with valid reasons and on approval by the competent authority.
- 6.2 Consultations with specialists for the treatment of various diseases and ailments and for surgical operations will be obtained only on referral by the Family Physician/Authorized Medical Officers. Reimbursement of such expenses will be as per approved rates.
- 6.3 A list of well-known private hospitals/nursing homes/poly-clinics will be recognized for treatment and hospitalization. Treatment / Consultation in the nursing homes/hospitals/poly-clinics will be obtained only on referral by the Family Physician/Authorized Medical Officer or a specialist as the case may be. The employees will also be eligible for treatment by specialists attached to the recognized nursing homes/hospitals/poly-clinics selected by the Association for the purpose on referral. The employees shall pay the charges for the treatment, to be reimbursed by the Association. Since lot of pensioners and their families and also members

of the families of the regular employees may be residing outside Kolkata, treatment in any recognized hospitals/nursing homes in such places shall also be approved for reimbursement as applicable in the Scheme.

- 6.4 The consultation fees for the specialists to be borne by the Scheme will be as per the rates fixed under the Scheme, from time to time.
- 6.5 (a) Hospitalization facilities will be provided in the recognized hospitals/nursing homes/poly-clinics. The ward charges which may be levied by these hospitals/nursing homes/poly-clinics shall be borne by the Scheme in accordance with the scales of charges set out from time to time.
- (b) For consultation / treatment availed by a regular and retired employee or his/her family members covered under the Scheme on referral by the Family Physician / Authorized Medical Officers, the concerned employee / retired employee will first settle the bill directly with the hospital/nursing home and then seek reimbursement from the Association later. Such claims will be reimbursed to the retired employees restricted to rates prescribed.
- 6.6 Reimbursement of charges for treatment and operation in private hospitals/nursing homes/poly-clinics will be subject to the ceiling fixed in the schedule of rates. These rates will be subject to revision by the Association as and when necessary.
- 6.7 The employees/pensioners and their families will also be permitted to go on their own to Government hospitals for medical attention and treatment as out-patients and in-patients. They should, however, report to the Family Physician / Authorized Medical Officer within four days of the illness. Reimbursement to the employees will be admissible to the extent charged by the hospitals subject to production of bills and Doctor's certificate.

7. Ayurvedic and Homeopathic Treatment

- 7.1 The beneficiaries can get hospitalization/treatment from any Government or Government authorized Ayurvedic/Homeopathic hospitals/dispensaries and those doctors who have been approved by the respective registration body, as well as the Association.
- 7.2 For hospitalization/treatment (which includes out patient) under the Ayurvedic / Homeopathic systems at the Government hospitals, the beneficiaries will be required to make direct payment and seek reimbursement from the Association thereafter.

8. Pathology, X-ray, etc., examination for diagnosis

The pathological tests, X-ray, cardiogram, etc., for diagnosis can be got conducted at one of the recognized laboratories / diagnostic centers / X-ray centers / nursing homes / hospitals / poly-clinics on the advice of the Family Physician / Authorized Medical Officer / Specialist. Actual charges for such tests will be reimbursed subject to the ceiling fixed by the Association from time to time.

9. Medicines :

- 9.1 Cost of medicines which may be prescribed by the Family Physician / Authorized Medical Officer / Specialists will be reimbursed in full subject to the production of cash bills / receipts and doctor's certificate. The medicines shall be purchased only from the licensed medical shops registered under the Drug Control Act of the State.
- 9.2 Based on the prescriptions of the Ayurvedic or Homeopathic Doctor, the cost of Ayurvedic and homeopathic medicines admissible under the CS(MA) Rules purchased only from approved shops will be reimbursed. The cost of any other Ayurvedic/Homeopathic medicines not admissible under the Rules even if prescribed will not be reimbursed.
- 9.3 In the case of restricted and costly medicines as specified in the CS(MA) Rules, the employee will be reimbursed the amount admissible under the Scheme.

10. Pathology, X-ray, etc., examination for diagnosis

The pathological tests, X-ray, cardiogram, etc., for diagnosis can be got conducted at one of the recognized laboratories / diagnostic centers / X-ray centers / nursing homes / hospitals / poly-clinics on the advice of the Family Physician / Authorized Medical Officer / Specialist. Actual charges for such tests will be reimbursed subject to the ceiling fixed by the Association from time to time.

11. Special facilities for treatment of acute or chronic diseases :

- 11.1 (a) Reputed hospital / institutions outside Kolkata will also be recognized for specialized treatment. The cost of treatment in the hospitals / institutions as considered reasonable by the Association will be borne by the Scheme. They will also be entitled to traveling allowance as admissible under the CS(MA) Rules, if they are referred to the hospitals / institutions outside Kolkata, by the AMO.

(b)The benefits of specialist treatment and special facilities in institution outside Kolkata contemplated above will normally not be applicable for indigenous and Homeopathic System or Medicine.

Accommodation/treatment/diagnosis/medicine procedure etc.

The entitlement for the hospital accommodation / nursing home / fixation of package / ceiling rates in case of treatment from recognized private hospitals and diagnostic centers may be governed by Ministry of Health and Family Welfare O.M. No. : S.110011/33/271-CGHS Desk-II/CGHS (P) dated 20th January, 2004 recognizing private hospitals/diagnostic centers under CGHS, Kolkata for specialized and general purpose treatment and diagnostic procedure and fixation of package/ceiling rates.

12. Maternity benefits :

- 12.1 Maternity benefits will be admissible only to the wife of the employee or to a female employee. The eligible beneficiaries can be admitted for confinement in any of the recognized hospitals / nursing homes / polyclinics where facilities for maternity exist. Expenditure in this behalf will be met by the Scheme in the same way as treatment for other diseases. Confinement is permissible outside Kolkata also, provided appropriate referral has been taken from the Family Physician / AMO.
- 12.2 Eligible beneficiaries will also have the option to go to any other maternity home of their choice for confinement and claim the reimbursement of admissible approved rates.
- 12.3 If a medical emergency arises at the time of confinement either for the Mother or the infant involving operative delivery or surgical procedures on the infant or in cases of puerperal sterilization, it will be regarded as case of emergency and dealt with as indicated under 15.1.
- 12.4 If the beneficiary is admitted to a Government Hospital for confinement, the confinement charges including the chares for operative delivery / surgical operations will be reimbursed in full.
- 12.5 The maternity benefits as provided above will not be admissible to a female employee / wife of a male employee if the beneficiary has two or more living children.
- 12.6 The term confinement for the purpose of the Scheme shall include :
 - (a) Live Birth
 - (b) Still birth
 - (c) Pre-natal termination of pregnancy

(d) Abortion

- 12.6.1 For determining the entitlement under Paragraph 12.2/12.5, the number of living children at the time of confinement and the number of occasions on which maternity benefits have been availed of shall be taken into account. For example, an employee who has one living child for whom he/she has not claimed any reimbursement for confinement nor availed of maternity benefits at recognized nursing home/hospital/ply-clinic may claim for the second confinement the admissible amount as if for the first confinement, as he/she is availing the benefits for the first time.
- 12.6.2 If an employee has than two children at the time of his wife's/her confinement, he/she, as the case may be, will be eligible for reimbursement as per CMS rules.
- 12.6.3 In determining the number of living children, the children of both the parents will be taken into account. For example, an employee who has two living children by an earlier marriage will not be eligible for reimbursement of confinement expenses for his second wife.
- 12.6.4 Reimbursement for the third and subsequent MTP/Abortion will be made only on the specific recommendation of the MO of the Association.
- 12.7 Domiciliary confinement : In the case of a domiciliary confinement supervised by a doctor (having qualifications recognized by the Indian Medical Act, 1956), actual charges or expenses limited to the tariff as per Paragraph 12.3, whichever is lower, whichever is lower, will be payable.

13. Antenatal and post-natal care :

- 13.1 Antenatal and post-natal care will be available from the Authorized Medical Officer. The cost of the medicines which may be prescribed by him/her will be reimbursable in accordance with the procedure prescribed for reimbursement of medicines.

14. Other facilities :

- 14.1 An employee or a member of his/her family may be authorized by the family Physician to have injections administered by another Medical Practitioner registered under the Indian Medical Council Act, 1956 either at his dispensary or at the employee's residence. Professional charges for injection, dressing etc., by private medical practitioners

will be reimbursable at approved rates provided the nature of the case warrants such treatment and approval of the Family Physician has been obtained.

- 14.2 The Scheme may arrange to provide facilities such as speech therapy, child psychiatric care and medical social-care free of cost to the beneficiaries and may recognize institutions for this purpose where these facilities can be availed. of.
- 14.3 Artificial appliances for diseases like polio, TB or for prosthesis or in cases requiring surgical operations may be supplied under the Scheme. Replacement, if justified to CMO of the Association.
- 14.4 When transport by ambulance is recommended on medical grounds an ambulance may be hired and charge incurred in connection with such hiring, to the extent considered reasonable by the Association, will be reimbursed to the employee.
- 14.5 Charges at actual for hiring “Hearse Van” for a deceased beneficiary of the Scheme will be reimbursed to an employee. The charges may be revised from time to time.
- 14.6 No traveling allowance shall be payable for any medical attendance or treatment within the City.
- 14.7 Dental treatment is supported by the scheme through referral by the Family Physician/pediatrician. The support will be limited to the rates approved from time to time.
- 14.8 The employees and their families will be permitted to go to the Eye Specialist on referral for getting their eyes tested through the Family Physician /Authorized Medical Officer. The charges will be borne by the Scheme. This facility will be in addition to any other treatment prescribed by the eye specialists.
 - 14.8.1 Goggles will not be provided nor will its purchase be subsidized under the Scheme. If the Contact lens is warranted, it will be permitted under the certificate of the recognized specialist and the reimbursement of charges will be restricted to Rs. 200. For cataract operation including implant of IOL/multifocal lens/feco etc. conducted through referral, the reimbursement will be as per rates fixed under the Scheme.

15. Reimbursement of expenses incurred in a medical emergency (other than maternity) :

- 15.1 When there is a medical emergency, a patient may receive medical attendance and treatment from the Family Physician / Authorized Medical Officer or if he is not available, from a doctor other than the Family Physician / Authorized Medical Officer, the employee shall report about the emergency to the Family Physician within four days of its occurrence. Reimbursement, including cost of medicines, will be allowed, provided that (i) the employee produces a certificate obtained from the doctor who attended on the patient about the nature of the emergency which had occurred, (ii) the claim is found justified and countersigned by the Family Physician / Authorized medical Officer and (iii) reimbursement will be made as per the recommendations of the family Physician.
- 15.2 Further attendance and treatment as considered necessary by the Family Physician / Authorized Medical Officer may be given in such cases.
- 15.3 For the above purpose, the term 'emergency' shall mean a situation or contingency when but for the immediate medical aid sought, there would have been, on the basis of the medical and attendant considerations, a serious danger or hazard or severe or deleterious consequences to the health of the patient. The accessibility, availability or otherwise of the facilities under the Scheme in the context of the severity of medical emergency / ailment at the time of emergency will also be taken into consideration. The opinion of the Family Physician shall be final as to what constitutes an emergency treatment.

16. Miscellaneous provisions :

- 16.1 The Scheme shall be administered by the Association or by an authority nominated for this purpose who will exercise administrative and cognate financial powers within the scope of the Scheme.
- 16.2 The Association may withdraw temporarily or permanently the benefit of the Scheme in the following cases :
- (a) When there are reasons to believe that there is no reasonable prospect of the employee resuming duty after a spell of absence;
 - (b) When the contribution is not being paid in time by the beneficiary;

- (c) In the case of misuse of the benefits of the Scheme either by the employee or a member of his/her family;
- (d) When the employee is either dismissed or removed from service;
- (e) When the subsistence allowance sanctioned to an employee under suspension is withdrawn, the facilities under the Scheme shall be withdrawn as long as the suspension continues;
- (f) In such other cases where such a step is considered necessary;

NOTE : Before taking action as mentioned above, the beneficiary concerned will be given a chance to explain his/her position.