



THE GAZETTE OF INDIA



## **Amendment Regularions,2008**

EXTRAORDINARY

PART II - Section 3 - Sub-section (i)

No. 304 NEW DELHI, FRIDAY, JUNE 9, 1989 / JAISTHA 19, 1911

**MINISTRY OF SURFACE TRANSPORT**

**(PortsWing)**

**New Delhi, the 9th June, 1989**

NOTIFICATION

1. G.S.R. 610 (E), - In exercise of the powers conferred by sub-section (1) of section 124, read with sub-section (1) of Section 132 of the Major Port Trust Act, 1963(38 of 1963), the Central Government hereby approves the Calcutta Port Trust Employees (Medical Attendance and Treatment) Regulations, 1989 made by the Board of Trustees for the Port of Calcutta and set out in the Schedule annexed to this notification.
2. The said regulations shall come into force on the date of publication of this notification in the Official Gazette.

SCHEDULE

Calcutta Port Trust Employees' (Medical Attendance and Treatment) Regulations, 1989.

**CHAPTER - I**

**PRELIMINARY**

**Preliminary** - In exercise of the powers conferred by Section 28 read with Section 124 of the Major Port Trusts Act, 1963(Act 38 of 1963) the Board on Trustees of the Port of Calcutta hereby makes the following regulations, namely :- Calcutta Port Trust Employees' (Medical

Attendance and Treatment) Regulations, 1989.

**Regulation 1** - Short Title. - These regulations may be called the Calcutta Port Trust Employees' (Medical Attendance and Treatment) Regulations, 1989.

**Regulation 2 - Extent of Application.**- These Regulations except those contained in Chapter VI shall apply to all the employees of the Board of Trustees for the Port of Calcutta who are in whole time employment of the Board of Trustees for the Port of Calcutta when they are on duty, leave or foreign service in India or when under suspension. Regulations contained in Chapter VI (i.e. Regulations 16,17, 18 and 19) shall apply to retired employees.

**NOTE 1.**-These Regulations do not apply to :-

(i) Employees of the Board of Trustees for the Port of Calcutta who are on leave or deputation abroad,

(ii) These Regulations apply to :-

(a) Employees of the Board of Trustees for the Port of Calcutta on their re- employment under the service of the Board of Trustees for the Port of Calcutta, irrespective of the service to which they belonged at the time of retirement ;

(b) A probationer.

(c) Apprentices/Trainees, but the coverage will be available only to the Apprentices/Trainees and not to family.

(d) An employee of other organization while on deputation under the Board unless otherwise contained in the terms of deputation.

**NOTE: 2.** - In regard to medical concessions, the employees of the Board of Trustees for the Port of Calcutta while on deputation will be governed by the Regulations of the borrowing organizations. The borrowing organizations may, however, if they so desire, apply the Regulations of the Board of Trustees for the Port of Calcutta to such deputationists.

**NOTE: 3.** - The concessions granted under these Regulations to employees of the Board of Trustees for the Port of Calcutta are applicable to their families as well, subject to such conditions or exceptions, as specified in these Regulations.

**Regulation 3. - Definitions.** - In these Regulations unless the context otherwise requires :-

- a. "Board" shall mean the Board of Trustees for the Port of Calcutta.
- b. "Chairman" shall mean the Chairman for the time being of the Board of Trustees for the Port of Calcutta.
- c. "Deputy Chairman" shall mean the Deputy Chairman for the time being of the Board of Trustees for the Port of Calcutta.

- d. "Authorized Medical Attendant" shall mean the Chief Medical Officer or the Chief Physician, Chief Surgeon or Medical Superintendent, a Senior Medical Officer or a Medical Officer under the employ of the Board as may be nominated by the Chief Medical Officer for the purpose of attendance on and treatment of employees and their dependent family members.
- e. "Chief Medical Officer" shall mean the Board's Chief Medical Officer/Medical Officer in charge of the Board's Hospital at Haldia/ any other Medical Officer authorized in his behalf.
- f. "Board's Hospital" shall mean the Hospitals or Dispensaries maintained by the Board.
- g. "Nurse" shall mean a qualified Nurse holding a certificate or diploma registered under the State Medical Faculty.
- h. "Private Doctor" shall mean a registered medical practitioner in the Allopathic/ Ayurvedic / Unani./ Homoeopathic and any other indigenous systems of medicine.
- i. "Public Hospital". shall mean a Govt. Hospital or a Govt .aided Hospital or Hospital of Public Sector undertaking.
- j. Medical Attendance in relation to an authorized medical attendant shall mean attendance in the Board's Hospital or Dispensaries to which he is attached or at the residence of the Board's employees, including such pathological, bacteriological, radiological or other methods of examination for the purpose of diagnosis as are available in the Board's Hospital or Dispensaries and are considered necessary by the Authorized Medical Attendant. It also includes such consultation with a Specialist, as the Chief Medical Officer certifies to be necessary to such extent and in such a manner as the Specialist may, in consultation with the Chief Medical Officer determine.

**NOTE: 1.** - Where a patient after being cured of a particular illness develops a "fresh" illness and consults the same physician, that consultation should be regarded as a "fresh consultation" and may be charged at full rates.

**NOTE: 2.** - Where a patient consults the same physician in regard to super-imposition of another disease during the course of treatment for one disease, that consultation should be regarded as a "fresh consultation" and charged for at full rates.

- k. "Patient" shall mean a Board's employee to whom these Regulations apply and who has fallen ill.
- l. "Hospital Charges" shall mean the actual amount of charges realised by a Public Hospital from an employee for treatment in the in-patient ward including accommodation charge/nursing charges/attendance fees, Doctor's fees/Specialist's fees and nursing charges/attendant and charges for various medical investigations, cost of life saving appliances, cost of oxygen, blood, saline or other drips as may be necessary.
- m. "Nursing Home Charges" shall mean the actual amount of charges realised by the Nursing Home from an employee for accommodation, Doctor's fees/Specialist's fees and nursing charges/attendant fees, operation charges,

charges for various medical investigations, cost of life saving appliances and cost of oxygen, blood, saline or other drips as may be necessary.

- n. "Treatment" shall mean the use of all medical and surgical facilities available at the Board's Hospital in which the employee is treated and includes:
- i. The employment of such pathological, bacteriological, radiological or other methods as are considered necessary by the authorised medical attendant.
  - ii. The supply of such medicines, vaccines, sera or other therapeutic substances, as are ordinarily available in the Board's Hospital.
  - iii. Supply of such medicines, vaccines, sera or other therapeutic substances not ordinarily so available, as the authorised medical attendant may certify in writing to be essential for the recovery of the patient or for the prevention of serious deterioration in the condition of the patient except the items mentioned below, namely :
    - a. Preparations which are not medicines but are primarily foods, tonics, toilet preparations or disinfectants, and
    - b. Expensive drugs, tonics, laxatives or other elegant and proprietary preparations for which drugs of equal therapeutic value are available,
    - c. Such accommodation as is ordinarily provided in the Hospital,
    - d. Such nursing as is ordinarily provided to inpatients in the Board's Hospitals.

**NOTE:- 1.-** Charges for an attendant (including an Ayah) are not reimbursable under these Regulations.

**NOTE:- 2. -** In serious cases private nurses/attendants may be engaged in hospitals or nursing homes with the prior approval of the Chief Medical Officer. It is, however, open to the Chief Medical Officer, if he is satisfied, to give his approval subsequent to engagement in emergent cases. The cost of engagement of private nurses/attendants will be borne by the Board to the extent as provided for in Regulation 1. (c) (d) provided such engagement is certified by the Chief Medical Officer.

## **Chapter - II - Extent of Medical Facilities**

### **Regulation - 4. - Facilities or Medical Attendance.-**

- i. An employee shall be entitled, free of charge to medical attendance by the authorised medical attendant.
- ii. Employees, irrespective of whether they live in Board's quarters or not, either at Calcutta or Haldia shall be entitled to receive medical attendance and treatment at their residence from private doctor of their choice if the illness is so severe that the patient cannot go to any of the Board's hospitals or dispensaries. In case of any doubt as regards severity of the illness, the decision

of the Chief Medical Officer shall be final. The actual fee of a private doctor subject to a maximum of Rs.50/- per day or as may be revised from time to time by the Board shall on certification by the Chief Medical Officer shall be reimbursed by the Board. Cost of treatment including cost of medical investigation will be reimbursed subject to ceilings under Regulation 11 on certification by the Chief Medical Officer. Cost of medicines shall be reimbursed in full.

- iii. Where an employee himself is suffering from an illness, which does not necessitate absence from duty, he shall attend at the out-patients' Ward of the Board's Hospitals or dispensaries.

**Regulation - 5- Facilities of Medical Treatment** - An employee of the Board shall be entitled free of charge, to treatment -

- i. At any of the Board's Hospitals/Dispensaries. Admission to the in-patient ward shall be restricted to the employees but members of their families may also be admitted, subject to the availability of beds. The testing and treatment of ambulatory eye cases, treatment of ambulatory dental cases and the treatment of ambulatory ear, nose and throat cases shall be done at the Board's Hospitals.

**NOTE: :** Where Specialist Doctor's services are not available, on certification from the Chief Medical Officer reimbursement of the cost of treatment and that of medical investigations will be admissible subject to the ceilings under Regulation 11. The cost of medicines will be reimbursed in full.

- ii. Where an employee himself is suffering from an illness which does not necessitate absence from duty he shall attend at the out-patients' ward of the Board's hospitals or dispensaries for treatment.

**Regulation - 6. - Facilities of medical attendance and treatment during official tour etc.-**

1. An employee who falls sick while on leave shall be entitled to medical attendance and medical treatment to the same extent as he would have been entitled to had he fallen sick while on duty provided the employee continues to live at the place from where he attends office.
2. An employee while on official tour or while on leave for availing of Leave Travel Concession shall be entitled to reimbursement of expenses for treatment in a Nursing Home /Private hospital including the cost of medical investigations subject to the limits as laid down under Regulation 11 and on certification by the Chief Medical Officer. The cost of medicines in such cases shall be reimbursed in full. If the employee is admitted to a Public hospital, reimbursement of medical expenses for treatment shall also be made in full".

**Regulation - 7 - Admission to a Nursing Home/Paying Bed or a Cabin in a Public Hospital** - An employee may be admitted to a Nursing Home or a Paying Bed or a Cabin in

Public Hospital in following cases :-

- a. Where the admission of an employee into a Nursing Home or into paying bed or a Cabin in a Public Hospital is initiated by the Chief Medical Officer in view of lack of adequate facilities in Board's Hospitals.
- b. Where such admission is initiated by the employee himself or his family members but with the prior approval of the Chief Medical Officer.
- c. Where such admission is initiated by the employee or his family members in an emergency and the Chief Medical Officer subsequently certifies that such admission was necessary in order to save the life of the patient.

The cost of treatment including that of medical investigations in such cases shall be reimbursed subject to the ceilings laid down under Regulation 11 and on certification by the Chief Medical Officer. The cost of medicines shall be reimbursed in full.

- d. Diet charges paid to hospitals and TB Sanatoria etc. by the employees and members of their families during the course of their indoor treatment should be reimbursed in full where the basic pay of the employee is not more than Rs.3230/- per month.

Diet charges should be regulated as follows :-

- a. Where the flat charge made by the hospital includes (1) diet (2) accommodation, (3) or ordinary nursing, and (4) medical and surgical services, 20% of the flat charges will be reckoned as diet charges; and
- b. Where the flat charge made by the hospital includes (1) diet, (2) accommodation, (3) ordinary nursing only, but not, charges for medical and surgical services, 50% of the flat charge will be reckoned as diet charge.

**Regulation - 8.- Reference to Specialists.** - With the prior approval in writing of the Chief Medical Officer, a patient may be referred to a Specialist if in his opinion the disease is so serious or of such a special nature that consultation and/or treatment by a Specialist is necessary. If the patient is too ill to travel, the Specialist may be called in to attend the patient at the latter's residence. A memo will be issued by the Chief Medical officer which should be returned to him duly countersigned by the Head of the Department when claiming recoupment of the Specialists fees. The Chief Medical Officer may require the patient to appear before him during the course of the treatment under the Specialist and if he/she fails to do so except on valid grounds, reimbursement of the expenses incurred shall not be made.

The decision of the Chief Medical Officer as regards the selection of Specialist shall be final.

### **Chapter - III- Concession of Medical attendance and treatment for families of the**

## **Board's employees.**

**Regulation -9.-Medical Attendance and Treatment for families of the Board's employees.-** Families of the Board's employees are entitled to medical attendance and/or treatment on the scale and conditions allowed to the Board's employee himself as enumerated in Chapter/II.

**NOTE: 1. -** The provision of this Regulation apply mutatis mutandis for female employees of the Board also.

**NOTE: 2. -** The authorized medical attendant of the family of an employee is the same as the authorized medical attendant of an employee.

## **Regulation - 10.- Definition of the term 'Family'.-**

The term 'Family' for the purpose of the Calcutta Port Trust Employees' 1989 shall mean an employee's wife or husband, as the case may be and parents, children and step children not over 28 years of age and unmarried daughters wholly dependent upon the employee.

### **Explanation :**

- (a) (i) The term 'Family' does not include any other dependent relations, such as brother, sister, widowed sister etc. The term 'parents' does not include 'step parents'.
    - (ii) The term 'children' shall include children adopted legally.
    - (iii) The term 'wife' includes more than one wife.
  - (iv) A family member shall be regarded as "wholly dependent" on an employee if his/her total recurring monthly income from all sources does not exceed Rs.250 per month subject to revision of the same by the Chairman from time to time. The declaration regarding the income of wholly dependent family members shall be furnished by the employee concerned once in the beginning of each calendar year.
  - (v) A female employee will be given the choice to include either her own parents or her parents-in-law for the purpose of availing of the benefits of the medical concession under these regulations provided such parents/parents-in-law are wholly dependent on her and are residing with her.
- (b) The husband or wife of the employee, as the case may be, employed in the State Government or in the Defence / Railway services or Corporation/Bodies financed partly or wholly by the Central or the State Government, local bodies and private organizations, which provide medical services would be entitled to choose either the facilities under the Calcutta Port Trust Employees' (Medical Attendance and Treatment) Regulations, 1989 or the medical facilities provided by the organization in which he/she is employed.



(c) In a case where both husband and wife are Board's employees, they as well as the eligible dependants may be allowed to avail of the medical concession according to his/her status. For this purpose, they should furnish to their respective Heads of Departments a joint declaration as to who will prefer the claim for reimbursement of medical expenses incurred on the medical attendance and treatment in respect of wife, husband and the children. The above declaration shall be submitted in duplicate and a copy shall be forwarded to the Accounts Department. This declaration shall remain in force till such time it is revised on the express request in writing by both the husband and the wife, e.g. in the event of promotion, transfer, resignation etc. of either of the two. In the absence of such a joint declaration, the medical concessions shall be availed of by the wife and the children according to the status of the husband.

#### **Chapter IV - Extent of reimbursement and procedure for submitting claim for reimbursement.**

**Regulation-11 - Reimbursement.** - (A) All medicines including saline or any kind of drip, blood, oxygen and life-saving appliances including pace-maker and pulse generator, items like blood transfusion set, artificial hearing aids, artificial electronic larynx, Orthopaedic implants, dressing material, crepe bandage, disposable syringe and ancillary charges prescribed by the Board's Medical Officer or by Specialists consulted on the advice of the Chief Medical Officer, shall be supplied free of cost by the Board. Any such item not supplied by the Board and prescribed by a private doctor under Sub-regulation (ii) of Regulation 4 and by the Nursing Home or the Public Hospital authorities, where patient has been admitted with the approval of the Chief Medical Officer may be purchased and the Board, shall, on certification by the Chief Medical Officer reimburse the cost in full. Cost of boots and artificial appliances for patients suffering from Polio may be reimbursed for a maximum of limit of three times in respect of an individual during the entire service period of an employee. Similarly, on certification of the Chief Medical Officer all types of artificial appliances required in deserving cases including those required for persons physically handicapped shall also be reimbursed. Cost of artificial hearing aids may be reimbursed. In case of artificial hearing aids, payment should be made direct to supply agency and not to employee concerned. Medical expenses incurred for the treatment of correction of Squint (eye) shall be reimbursed. In case of doubts, disputes or differences of opinion arising out of any of the above matters, the opinion of Chief Medical Officer shall be final.

**NOTE:** - An employee of the Board and his/her dependant members of family as defined in regulation 10 may be provided with pace-maker and replacement of its pulse generator as required on certification by the Chief Medical Officer. But the payment of initial supply of heart Pace-maker as well as replacement of the pulse generator shall in all cases be made direct to the supplying agency and not direct to the employee concerned.

(B) The actual fees of the private doctor subject to maximum of Rs.50/- per day or such amount as may be sanctioned by the Board from time to time will be reimbursed under Sub-Regulation (ii) of Regulation 4.



(C) Extent to which the Board shall bear the expenditure incurred by employees :

All employees will be reimbursed to the extent as shown below in respect of the following expenditure provided the same was incurred with the approval of the Chief Medical Officer and provided further the claim to such reimbursement is supported by requisite vouchers :-

(a) Hospital charges at the rates charged by a Public Hospital.

(b) (i) Reimbursement of Nursing Home charges would be made in full in cases where there is no facility for such treatment in CPT Hospital and/or cases are of so emergent nature that shifting of the patient to CPT Hospital may endanger the life of the patient. Full reimbursement will also be allowed in case of an employee injured on duty. In all these cases reimbursement will be made on the certification by the Chief Medical Officer.

(ii) In other eligible cases the reimbursement of Nursing Home charges would be made as shown below :-

1. Accommodation charge-up to Rs.150 per day in full and for amount exceeding Rs.150 per day, 2/3rd of the excess amount.
2. Cost of medicines supplied by the Nursing Home including those purchased from outside-Full reimbursement as per certification by the Chief Medical Officer.
3. Operation cost - 2/3rd of the total cost
4. Operation Theatre Charge - Full cost.
5. Medical investigation charge (including professional fees for Cardiac Catheterisation)-Full cost.
6. Cost of life saving appliances 2/3rd of the total cost.
7. Doctor's fees/Specialist's fees-As admissible under Regulations 11 (B) and 11(C) (c).
8. Nursing charges/Attendant's fees-As admissible under Regulation 11 (C) (d).
9. Cost of Blood, Saline or other drips - As admissible Regulation 11 (A).

(c) Specialist's fees subject to a ceiling of Rs.150 per visit. In case of injury on duty, however, specialist's fees shall be reimbursable in full.

**NOTE:** - Where the employee, who is entitled to receive treatment from a private doctor of his choice under the regulations, calls in a specialist without the prior approval of the Chief Medical Officer, the Specialist shall be treated as a general physician and the reimbursement of the cost of fees of the Specialist will be reimbursed to the extent as provided for under Regulation 11 (B).

(d) Private nurse's / Attendant's fee/charges not exceeding Rs150 per shift for engagement of a private nurse and Rs.30 per shift for engagement of a private attendant or such amount as may be fixed by the Board may be reimbursed as recommended by the Chief Medical Officer. If a private Nurse/Attendant is engaged for a period exceeding two weeks,

the special sanction of the Chairman or Deputy Chairman will be required to the reimbursement of the expenses.

(e) Charges for medical investigation carried out by the outside Doctors and Institutions, shall be reimbursed on the certification of the Chief Medical Officer.

(f) Re-imburement of the cost of Intra Ocular lens implantation charges to the employees and their dependent eligible family members -

The actual cost of Intra Ocular lens implantation and treatment thereto will be re-imbursed in full if undertaken in Government Hospital and the actual cost or Rs. 6,500.00 whichever is less will be re-imbursed if the treatment is under taken at private recognized hospitals where such facilities are available. The cost of spectacles if any, will not be re-imbursed in such cases.

(g) Expenses incurred for surgery and post - operative treatment of the donor of the kidney to the employees or their family members will be reimbursed subject to certification of the treatment by the Chief Medical Officer. TA of the donor may be admissible as in case of accompanying person at the rates applicable to the recipient employee of the Trustees.

(D) Extension of time limit for submission of medical bills.

Claims for reimbursement of medical expenses must be preferred by an employee within 6 months from the date of completion of treatment. The Chairman or the Deputy Chairman may extend this time - limit in individual cases depending on the merits of the case.

**NOTE:** For treatment of the employees in cases of serious diseases like cadaver kidney transplantation, by-pass surgery, bone-marrow transplant, operative correction of high myopia cases, etc. which involve substantial expenditure, advance upto 80% of the expenditure as estimated by the Chief Medical Officer may be granted with the approval of the Chairman/Dy. Chairman. The advance so granted will be adjusted against the claim for reimbursement which has to be submitted within one month after the treatment is over, failing which the advance will be recovered in suitable installments as may be decided by the Chairman/Deputy Chairman.

**Regulation -12.- Ambulance facility.** - The Board's ambulances may be supplied free to convey non ambulatory and emergent cases from the residences of employees where such employees reside in the areas/Board's quarters as mentioned in regulation 4(ii) or places of work of the employees to the nearest public hospital or to any of the Board's hospitals or dispensaries, as the case may be.

Ambulance will not be supplied to convey any patient from the hospital to his/her residence or to convey any patient to and from the Hospital as a part of routine treatment.

**Regulation-13 - Reimbursement of bills relating to injury on duty.** - In the case of employees injured on duty all expenses incurred in connection with the medical treatment of such employees inclusive of the cost of false denture, spectacles, artificial limbs and allied

appliances may be reimbursed on the recommendation of the Chief Medical Officer.

**Regulation-14 - Procedure to be adopted by an employee for obtaining reimbursement of medical expenditure.** - (1) Claims from reimbursement shall be submitted by the employees in the prescribed form to their Sectional Officers duly supported by the following vouchers within six months from the date of completion of treatment :

- i) Vouchers for purchase of medicines
  - a. Original prescriptions,
  - b. Cash vouchers,
  - c. Purchase orders endorsed on prescriptions by the Board's Medical Officer.

**NOTE:**

- a. Purchase of proprietary medicines and injections must be vouch safed by submission printed cash memo or bill in proper form.
  - b. Each prescription for mixture and/or powder should should contain the number as recorded in the prescription register of the dispensary from where supplies have been obtained.
  - c. Cross reference of prescriptions of private physicians or purchase orders given on the prescriptions of the Board's Medical Officers should be given in the relative cash memo, i.e. each item of a cash memo should be linked up with the relative prescription or purchase order.
- (ii) For hospital charges :-
- a. Hospital bill and receipt for payment,
  - b. Hospital admission and discharge certificates,
  - c. The Chief Medical Officer's written permission for admission.
- (iii) For Nursing Home charges :-
- a. Nursing Home bill and receipt,
  - b. The Chief Medical Officer's written permission for admission in a Nursing Home.
  - c. Bill and receipt for pathological, bacteriological and radiological examination and cost of medicines.
- (iv) For Specialist's fees :-
- a. The Chief Medical Officer's memo for reference to a Specialist.
  - b. Bill and receipt.

- (v) For private Doctor's fees :-
  - a. Bill on the Doctor's letterhead showing dates of visit.
  - b. Certificate of severity of illness stating particulars of disease.
  - c. Receipt for fee for injections, and
  - d. Bill for receipt for pathological, bacteriological and radiological examinations.
  - e. The written instructions of the Board's Medical Officer.
  
- (vi) For private nurse/attendant's fees -
  - a. Private nurse/Attendant's bill and receipt.
  - b. Written instruction of the Chief Medical Officer

On receipt of a claim, the Sectional Officer concerned will note down the relevant details in the medical bill register maintained in his section and thereafter forward the claims to the Chief Medical Officer excepting the cases where treatment has been done by Board's Medical Officer with an endorsement indicating whether the employee was on leave or not, during the period of treatment. The Chief Medical Officer will, after necessary scrutiny, certify whether the treatment is in order and also whether the medicines prescribed are admissible. He will then pass the claim on to the Financial Adviser & Chief Accounts Officer. In the latter's office, the claims will be further checked with relevant vouchers and seen whether they are in accordance with the provisions of the Regulations. The amount to be reimbursed to the employee will then be calculated and a bill will be passed by the Financial Adviser & Chief Accounts Officer with due intimation to the Section concerned for the issue of a pay order in favour of the employee. Appropriate medical bill registers will be maintained in the offices of the Chief Medical Officer and the Financial Adviser & Chief Accounts Officer.

**NOTE:** In the case of treatment of an employee or his dependant family members by Board's Medical Officer, claims for re-imburement of medical expenses will be submitted by the concerned employee in the prescribed form to his Sectional Officer with supporting prescriptions and vouchers, etc. After recording the relevant details in the Medical Bill Register maintained in the section, the concerned officer will forward the claim along with supporting documents to the Financial Adviser & Chief Accounts Officer with supporting prescriptions and the employee after necessary processing. For the purpose of this Regulation, "Financial Adviser & Chief Accounts Officer" shall mean the Manager (Finance) so far as Haldia Dock Complex is concerned.

- (2) If a bill is lost in transit.
  - i. The Sectional Officer shall certify the amount of the bill, when the bill was actually forwarded to the Chief Medical Officer, whether any pay order has been issued in favour of the applicant in respect of that bill and other relevant particulars for purpose.
  - ii. The Chief Medical Officer shall certify whether the bill was received by his department, whether the bill was examined by any of his Officers and whether any adverse or otherwise remarks were given on the bill, and

- iii. The Financial Adviser & Chief Accounts Officer shall certify whether such a bill was passed for payment by his department or not. After the necessary certificates are received from the Chief Medical Officer and the Financial Adviser & Chief Accounts Officer, a duplicate bill with or without duplicate vouchers shall be sent by the Sectional Officer along with those certificates to the Secretary through the Financial Adviser & Chief Accounts Officer for obtaining the sanction of Chairman or Deputy Chairman to the payment in part or full, as the case may be.

## **CHAPTER V - Exclusion of certain diseases and treatment**

**Regulation-15-Exclusion of certain diseases and treatment.** - The following diseases and treatment are excluded from the scope of these regulations.

- i. Childbirth and conditions arising out of or directly attributable to pregnancy and child birth excepting for the employee posted at Haldia and having upto two children.
- ii. "Acute infectious diseases requiring segregation viz., Cholera, Small Pox, Plague, Tetanus. Expenses incurred for treatment of infectious diseases at ID Hospital may be reimbursed subject to approval of the Chief Medical Officer. Acute Anterior Poliomyelitis and cases of Diphtheria may be treated only if hospitalization in the relevant wards of any of the Public Hospitals cannot be arranged".
- iii. Diseases which are attributable to intemperate habits and conduct of the patient.
- iv. Venereal diseases (acute).

**NOTE: 1** - The employees are entitled to anti-tuberculosis treatment at Board's Hospital and Dispensaries as earmarked by the Chief medical Officer and they may also avail of provisions of indoor treatment at K.S.Roy Hospital, Tuberculosis Relief Association or at any other Institution where a number of beds are being maintained by the Board.

For the eligible dependant family members, anti-tuberculosis treatment is normally provided at CPT Hospital (Outdoor) and Dock Hospital Chest Clinic (Outdoor). But the Chief Medical Officer may also refer those cases to Government Institutions/Hospitals/Clinics for treatment.

(2) In case of any doubt or difference of opinion in respect of any of the above matters, the opinion of the Chief Medical Officer shall be final.

## **Chapter-VI - Medical Facilities to retired employees**

**Regulation-16-Medical facilities to retired employees/employees who have proceeded on leave preparatory to retirement.** - (1) The employees who have retired or proceeded on

leave preparatory to retirement after rendering service under the Board for at least five years will be entitled to avail of certain restricted contributory medical benefits on their own option and on payment of the prescribed fees. Such medical benefits will cover only the individual retired employee himself/herself, the employee on leave preparatory to retirement and his wife/her husband (hereinafter called the patient).

(2) The patient will have to make a declaration in writing that he/she and his/her wife/husband propose to avail of the benefits on voluntary basis and will be willing to pay such monthly amount as may be prescribed from time to time. It will be open to the patient to declare that he/she alone and not his/her wife/husband will avail of the benefit. If at any time and such patient wishes to withdraw subsequently, he/she may do so only from the end of that current financial year. In the event of death of the patient, his wife/her husband may at her/his option continue to avail of the facilities on payment of the prescribed contribution. Widows of employees dying in harness may also be permitted to avail of these medical benefits on payment of the prescribed charges.

(3) The benefits will be limited to treatment at the out-patients' Departments of the Board's hospitals and Dispensaries in the same manner as regular employees of the Port are treated there. Costly and patent medicines will not be supplied to the patients, nor will the cost of medicines which may have to be purchased by them on the Board's Medical Officers' prescription be reimbursed by the Board.

(4) Specialised treatment including laboratory and X-ray facilities in Board's Hospitals and Dispensaries may also be provided to the extent possible on payment of specific charges as may be prescribed from time to time.

Contribution will have to be made for the benefits on the following basis :

- (i) Retired Class IV employees - Rs. 2 per month.
- (ii) Retired Class III employees - Rs. 4 per month.
- (iii) Retired Class II employees - Rs. 6 per month.
- (iv) Retired Class I employees - Rs. 8 per month.

Only half the above amounts will be payable if the patient avails of the facilities for himself/herself and not for his/her wife/husband.

These rates may be modified by the Board at their discretion from time to time. The modified rates will ordinarily be brought into effect from 1st April next following modification.

**Procedure** - The persons opting for medical facilities under Regulation 16 shall apply to the Chairman/Deputy Chairman through their respective Heads of Departments/Heads of Divisions in which they were employed before retirement/before they proceeded on leave

preparatory to retirement.

The Board may prescribe a form of application for the purpose.

The persons concerned may be required to take a suitable identity card from the Board for which a charge of Rs.2 or such rate as prescribed by the Chairman will be recoverable. The identity card will have to be surrendered to the Board when any of the persons availing of these benefits wishes to withdraw from it. If the Identity Cards are lost, duplicate will be issued only on payment of Rs. 5 or such amount as may be prescribed by the Chairman.

The persons concerned will have to make payment of their contribution in advance for six months at a time.

The Board will have the discretion to suspend or discontinue or modify the benefits at any time.

If any question arises about the scope of these benefits or interpretation of any of the above clauses, the decision of the Chairman shall be final.

**Regulation - 18 - Facilities for extending medical benefits to retired employees/employees on leave preparatory to retirement (Indoor Treatment).** - The facilities for providing indoor medical benefits to the retired employees should be contributory and that employees opting for it should make a monthly contribution at a rate to be decided upon by the Board throughout their entire service, i.e. from the date of appointment till their retirement or for 25 years, whichever is higher. Employees who are already in service and are on the verge of retirement may also be allowed to opt for the facilities provided they are willing to make a lump sum contribution at the rate as may be decided upon by the Board for their entire service period or for 25 years whichever is higher.

**Regulation - 19 - Continuance of medical treatment beyond the date of superannuation of an employee.**- The Chief medical Officer may continue the treatment of an employee upto three months beyond the date of superannuation or the date on which an employee proceeds on leave preparatory to retirement without approval of the Chairman or Deputy Chairman and he shall take the approval of the Chairman or Deputy Chairman within the said period of three months if he finds it necessary to continue the treatment beyond that period.

### **Chapter-VII-Miscellaneous**

**Regulation - 20-Decision of the Chairman shall be final.** - Except where specifically provided for otherwise, the decision of the Chairman on all questions arising out of these regulations shall be final. He may disallow payment of any claim for recoupment of medical expenses under these regulations if he considers that there is an element of doubt regarding the genuineness of the claim. Notwithstanding any thing contained hereinbefore, the Board may, at his discretion, relax any of the regulations mentioned in deserving cases.

**Regulation - 21-Repeal and Savings-**(1)On the commencement of these regulation , every



rule, regulation, resolution or order in force immediately before such commencement shall, in so far as it provides for any of the matters contained in these regulations, cease to operate.

(2) Notwithstanding such cessation of operation, anything done or any action taken under the old rule, resolution or order shall be deemed to have been done or taken under the corresponding provisions of these regulations.

**NOTE:** The Calcutta Port Trust Employees' (Medical Attendance & Treatment) Regulations, 1989 were sanctioned by the Government vide GSR 610(E) dated 9th June, 1989 and published in the Gazette of India (Extraordinary) dated 9th June, 1989. The 1st Amendment Regulations have been sanctioned by the Government and published in the "Gazette of India vide G.S.R. No.633(E) dated 28th September, 1993. The Second Amendment Regulations have been sanctioned by the Government and published in the Gazette of India vide G.S.R. No.169(E) dated 3rd April, 1998. The third Amendment Regulations have been sanctioned by the Government and published in the Gazette of India Extraordinary vide GSR No.431(E) dated 13th June 2001.

[No.PR-12016/17/86-PE-1]

**YOGENDRA NARAIN , Jt. Secy**

**CALCUTTA PORT TRUST**

**FORM OF CLAIM UNDER REGULATION 14(i) of THE CALCUTTA PORT TRUST EMPLOYEES'**

(Medical Attendance & Treatment) Regulations, 1986.

The Financial Adviser and Chief Accounts Officer,  
(Through the Head of Department, Section and the Chief Medical Officer)

Name : .....

Designation : ..... Scale of Pay  
.....

Identity Card No. .... of Department  
.....

Family Declaration Card No.....

Local Address .....

Age:

Sex:

Name/s of patient/s (1) .....

(2) .....

(3) .....

Relationship (1) .....

(2) .....

(3) .....

Details of Claims:- Rs. P.

(i) for purchase of Medicines .....

(ii) for Hospital charges .....

(iii) for Nursing Home charges .....

(iv) for specialists' fees .....

(v) for Private Doctor's fee .....

for visits .....

for injections authorised by CMO .....

-----  
TOTAL Rs.

I request that I may be reimbursed with the amount admissible under the Rules.

I declare that the patient/patients (Name) (1)

.....

(2)

.....

(Relationship) (1) ..... (2)

.....

is/are residing with and wholly dependent on me.\* The admission into Hospital/Nursing Home/Reference to Specialists was made with the C.M.O's prior/subsequent approval.

Number of Vouchers enclosed

.....

Date .....  
Employee

Signature or Left Thumb Impression of

C.M.O.

Forwarded Certified that the patient/patients named in the claim has/have been declared to be members of the applicants family and Registered accordingly in the identity Card issued by this office under the Medical Attendance Rules.

Signature of Head of Department/Section.

F.A. & C. A. O.

Treatment is in order. Medicines prescribed are admissible under the Rules.\* Admission into Hospital/Nursing Home/Reference to Specialists was authorised by me.

Date .....

Chief Medical Officer.

\* Score out whichever is inapplicable.

Recoupment bill passed for Rs. .... under Accounts Officer, Fringe Benefits Sub-section.